

**Submission to the
Inquiry into the Protection of Aboriginal Children
from Sexual Abuse
by the
Family and Community Services Advisory Council (FACSAC)**

INTRODUCTION

The following submission began as a document drafted by members of the Child Protection Sub Committee which was then circulated to all members of the FACSAC for their comments and views. It is not meant to be a cohesive document with a logically consistent argument or position, but rather reflects the experience and opinions of those members who contributed.

The point has been consistently raised that although the inquiry is looking into the protection of Aboriginal children, sexual abuse and unresolved associated issues are embedded in all Australian communities, and throughout the world.

As a general statement, we are of the view that sexual abuse thrives in situations of differential power and control and is sustained by secrecy and shame that is largely carried by the victim. Although the cultural and social context may vary, the dynamics and devastating impact of sexual abuse are held in common with all people.

1.0 EXAMINE THE EXTENT, NATURE AND CONTRIBUTING FACTORS TO SEXUAL ABUSE OF ABORIGINAL CHILDREN, WITH A PARTICULAR FOCUS ON UNREPORTED INCIDENCES OF SUCH ABUSE.

1.1 Extent

1.1.1 It is impossible right now to ascertain the exact extent and nature of the problem anywhere in Australia – or elsewhere internationally – since we do not know how many instances of abuse remain unreported. We can however, make educated guesses like those used to arrive at the accepted statistic of one in 3 girls and one in 8 boys who will experience unwanted sexual attention before the age of 18 across Australia. Both anecdotal and researched evidence suggests that under-reporting of all sexual offences is commonplace.

1.1.2 It is recognized that there is a lack of Northern Territory specific data in relation to the incidence of sexual abuse, especially in Aboriginal communities. It is suggested that the following information might be useful:

- the rate of child sexual abuse in indigenous communities
- the relationship of the victim to the perpetrator
- the rate of re-offending by perpetrators
- how many offenders were themselves abused as children

Support for data collection and research is made with the proviso that the information be collected in a respectful way and with the understanding that it is likely to be based on reported incidents only.

- 1.1.3** The Council collectively and emphatically holds the view that immediate actions and solutions can be concurrent with ongoing research and data collection.

1.2 Contributing factors

- 1.2.1** Housing conditions – families living in overcrowded houses creates a chaotic environment that does not lend itself to appropriate supervision of young people who may be exposed to violence or behaviours inappropriate to their age.
- 1.2.2** Lifestyle – many children living in remote communities are very transient and reside with different family members on a regular basis. This can lead to a lack of supervision which could place a child at risk of sexual abuse.
- 1.2.3** “Closed” communities – it may be that certain communities or families in the community are aware of abuse that is occurring however they are unable to talk about it due to fear and disempowerment.
- 1.2.4** Alcohol and drug misuse act as dis-inhibitors that contribute to all types of abuse and neglect.
- 1.2.5** Institutionalised racism contributing to poverty, overcrowding in houses, substance abuse and a range of other issues.
- 1.2.6** Poor health and high mortality rates, especially in the previous two or three generations, leading to absence due to death or ill health of key authority figures in families and increasing pressure on a diminishing number of older adult family members to ‘grow up’ an increasing number of their younger relatives.
- 1.2.7** Limited ‘language’ for talking about cultural context within which to place and deal with pressures of trying to live in mainstream society, including substance abuse, child abuse (including sexual abuse and neglect), domestic violence, etc, all of which were punishable by traditional law. For example, Nangkaris (traditional healers) say they cannot start to heal someone with substance abuse issues UNTIL the person has detoxed from the substance/s – because these substances are not part of traditional culture and therefore beyond traditional healing approaches/ powers.
- 1.2.8** Increasing isolation of Aboriginal men in their communities – feel they have no valued role or place; few venues where young and middle aged men can meet comfortably (eg, women’s centre,

Arts Centre, child care, schools etc may be utilized more by women and children); often disenfranchised rather than empowered through local community governance structures (eg Community Council, Community Store) especially where non-Indigenous managers and CEOs have limited skills and experience themselves in community development and governance.

- 1.2.9** Increasing amounts of and access to mainstream pornography communities, especially being accessed by younger males without proper guidance from elders (evidence from Prof Judy Atkinson, Southern Cross University). Pornography serves to desensitize the viewer to the unacceptability of some behaviour, normalizes actions, and increases the desire to act out practices observed through pornography. Some indigenous men have also stated that they thought this was 'normal' or 'accepted' behaviour within mainstream culture and that non-indigenous women enter into such acts willingly.
- 1.2.10** Increasingly there is a drift of indigenous children from remote communities to urban centres. There are more risks to these children in an urban setting. They lack the sophisticated skills of their urban counterparts when negotiating support systems and can take up high risk practices such as forming relationships with older men, forming gangs, or joining established urban gangs.
- 1.2.11** It has been noted that increasingly, indigenous children who grow up in an urban environment may have extended family who are all concerned about the young person, but find it impossible to control their behaviour. As no one person or group of people is ultimately in control, the young person moves from household to household evading discipline or effective support.
- 1.2.12** In many communities high levels of visible and reported violence provide the context for child sexual abuse.
- 1.2.13** Mental illness and the lack of support services for ill people contributes to the breakdown of family support and stable family dynamics.
- 1.2.14** The absence of adequate levels of policing and the capacity to keep law and order.
- 1.2.15** Misconceptions and misunderstandings about the care and protection of children and associated responsibilities, as well as the terminology and language used when speaking of 'abuse'.
- 1.2.16** Confusion about information given, for example, child abuse has been understood to mean swearing at children, and a belief

expressed that all ‘kid’s money’ (family allowance) has to be spent on buying things the children say they want.

1.3 Unreported incidences

1.3.1 Child sexual abuse, domestic violence, rape, neglect, emotional abuse etc all go unreported across Australia. There are also those across all levels of Australia who still see some of these behaviours as being acceptable or the abuser’s behaviour as being understandable (eg, “she asked for it dressing that way” or “its no wonder he belted her after all that nagging she does”).

1.3.2 Mainstream Australians and their organizations largely fail to recognize the impact between and across generations of previous government policies and the practice of removing children from families. In some instances, children were abused, including sexually, by these “carers” and there is currently little or no trust of intervention by statutory authorities such as FACS , police and other authorities. Actual interventions by FACS may exacerbate the above, especially where families have not been consulted with properly by FACS.

1.3.3 Anecdotal evidence from workers who travels regularly to one community that has been in the national spotlight, including having allegations of a “paedophile ring” operating in it, make the following comments about the attention focused on the community.

- Unhelpful media response sensationalised the story
- People in the community were shamed by the national attention, including the strong families and individuals
- The (alleged) perpetrator moved to another community in the region and has yet to be apprehended due to insufficient evidence
- Police and FACS used a “door knock” approach to try to force people to give evidence – they were reluctant to speak to powerful strangers
- workers report that the community is like a ghost town – “everyone has cleared out.”
- It is unclear how much this is a product of insensitive reporting around either governance issues within the community or child sexual abuse, but the negative media attention and response by authorities to date would inspire little confidence in family members who might want to report abuse, especially child sexual abuse and family violence.

1.3.4 The profound sense of powerlessness felt by people means they are unable to react effectively in the face of abusive, violent and dysfunctional behaviours. Generations are growing up with abuse as commonplace.

1.3.5 Workers and families state that sexual abuse is not reported because of the following:

- shame about the abuse
- fear of payback
- nothing changed anyway
- children might be removed
- fear of ‘welfare’ (FACS) and their power
- shame and fear about having to speak to a male police officer, or for that matter, any police officer or ‘welfare worker’ regardless of gender
- the abusers could be powerful or important men in the community who are believed to be beyond reproach by authorities

1.3.6 There are believed to be very high levels of under-reporting of child sexual abuse by professionals eg hospital staff, teachers and others, who don’t notify due to:

- fear
- misunderstanding about cultural practices (eg promised brides)
- lack of trust in the system
- an awareness of the burden of proof required
- lack of training about how to respond to disclosures of abuse and fear that they will not be able to make an appropriate response

2.0 IDENTIFY BARRIERS AND ISSUES ASSOCIATED WITH THE PROVISION OF EFFECTIVE RESPONSES TO AND PROTECTION AGAINST SEXUAL ABUSE FOR ABORIGINAL CHILDREN.

2.1 It is important to be able to identify an ‘effective response’ and how to ‘protect’ children in order to constructively name and address barriers to provision. Refer to FACSAC Project Brief (Appendix A) which aims to sensitively consult with and identify shared meaning about ‘health’, ‘safety’, ‘neglect’ and so on. Also relevant are materials developed by SNAICC (Appendix B) and the *Caring Well, Protecting Well* framework (Meededuma 2005 – Appendix C)

2.2 The current Shared Responsibility Agreement process is definitely a barrier to the provision of an effective response to and protection against sexual abuse for Aboriginal children. The lengthy time span in responding to specific expressed needs, often raised at critical moments in time, hinders effective responses from government, in particular the Federal government.

2.3 The new arrangement whereby an Indigenous Co-ordination Centre manager has at hand a bucket of money (it is believed up to \$100,000 for community to tap into) is of concern. The ICC manager has total delegated authority to release funds on

the spot at a Shared Responsibility Agreement signing. This process could work, but it could also contribute to a quick fix approach without any real community input. Addressing child sexual abuse will require an integrated response with other service providers and action at a range of levels identified elsewhere in this submission (eg general health, education, housing, training and employment opportunities, etc) with the cost being more than \$100,000. It will require community councils and the CEO's to prioritise abuse as an issue of primary concern.

- 2.4** Sense of helplessness and powerlessness in the face of the obvious abuse of the most vulnerable.
- 2.5** Dr Nyrel Pattel (Queensland Suicide and Self Harm Prevention Conference, 2006 – *Aboriginal Collective Reality and Self*) has some interesting observations to make about her people, their collective memory and their perception of time as circular rather than linear (at some level the ancestors are still very much alive) and thus the added impact that past policies of assimilation and cultural genocide have had on Aboriginal people overall.
- 2.6** A lot of families have enough of an understanding of 'the system' to tell workers what they want to and need to hear, which can lead to inaccurate assessments and therefore inappropriate interventions. By contrast, in remote areas where people are not as confident using English as a language, there is a struggle for families to understand the 'welfare system'. If anything, people operate from fear and a lack of real understanding of their options.
- 2.7** Distance and poor relationships with FACS can be a barrier to effective responses. Monitoring from a distance is not very effective and the number of visits that actually occur do not allow for relationships to be built with families.
- 2.8** When investigating, the onus of responsibility should be on FACS to ensure they are speaking with appropriate and responsible family members, where these exist. It is commonly noted that FACS workers don't have relationships with families or children or young people and are often keen for a "quick result". Inappropriate responses lead to increased fear and suspicion.

3.0 CONSIDER PRACTICES, PROCEDURES AND RESOURCE OF NT GOVERNMENT AGENCIES WITH DIRECT RESPONSIBILITIES IN THIS AREA (FAMILY & CHILDREN'S SERVICES AND POLICE), AND ALSO CONSIDER HOW ALL TIERS OF GOVERNMENT AND NON-GOVERNMENT AGENCIES MIGHT CONTRIBUTE TO A MORE EFFECTIVE PROTECTION AND RESPONSE FRAMEWORK.

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- 3.1** FACS resource issues impact upon practice. Long distances are involved and the quality and effectiveness of ongoing case management by FACS of children at risk when there is so much distance involved is a question of grave concern.
 - 3.2** There is no accommodation for more permanent workers in remote communities and there is a shortage of skilled health, youth and children's workers. Not sure who FACS could outsource to and where the distinction between "statutory responsibility" (which FACS have) and the support role often played by NGOs begins and ends if responsibilities are devolved. Clinic staff might play a greater role, but there be a need to increase staff, the capacity to do more health promotion activities, and comprehensive training in child protection.
 - 3.3** In cases of sexual abuse the child is often removed from the situation (to be taken to a place of safety or to be interviewed). This can lead to the child believing they have done something wrong, and make families reluctant to report as it is the child who is removed rather than the alleged perpetrator. This point was strongly made by SNAICC in their briefing paper to ministers (*See Appendix B.*)
 - 3.4** Poor relationships between FACS and the police have been observed in terms of investigating allegations. At times they have not understood each others roles and legislative constraints which can lead to unrealistic expectations between the Departments.
 - 3.5** This issue is compounded in some communities on the borders of SA, WA and NT where equivalent departments also operate from different legislation.
 - 3.6** To create a whole of community approach there needs to be set up some kind of government body with authority to oversee the reporting, responding and prevention work of agencies who have mandates and who are funded to deliver these services. Health Services are often the first point of contact, apart from community members themselves. Schools, with there community education and safety messages to children and young adults could be utilized more effectively, in approaches that absorb the community within the school community. This however requires a direct effort from principals, group school principals and the Education Minister to direct teachers efforts to develop school environments and relationships that make curricula more alluring to community people. Further, there need to be processes/incentives that encourage young people to stay on at school and community members to enroll in courses or continue with further vocational or other training/learning.
 - 3.7** FACS and police should retain statutory responsibilities for intervention. There needs to be clarity about what "family support" and "early intervention" and "prevention" means and
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have clear protocols between FACS/Police/Aboriginal/Non-government/ organisations about who does what. There need to be clear definitions that will inform good practice. Refer to *Caring Well – Protecting Well: A framework for practice standards in child protection in Aboriginal communities in Central Australia* (Appendix C).

- 3.8** There need to be increased funding levels, especially for early childhood services and supports and for young parents.
- 3.9** Government agencies to make training on recognizing the signs of abuse compulsory for all interface workers. There must be created a standard flagging system that agencies can report on, and that will provide a catalyst for the right agency to respond.
- 3.10** Recruitment and retention of staff within FACS and other agencies is an issue. High turn over of workers means little corporate history is retained, lots of energy is swallowed up in orientation, lots of new graduates with limited experience are recruited and rarely have useful knowledge about working within the NT cultural and geographical context.
- 3.11** It is very hard to prove abuse, but if it is suspected, child protection workers need to approach the situation asking “What can we do to keep this child safe?” There are a variety of responses that FACS can and should consider other than (a) remove the child, or (b) do nothing.
- 3.12** It is necessary that resources be provided to support victims and victims’ families during an investigation of alleged abuse.
- 3.13** Presently, the onus is on the victim for a successful prosecution. Prosecutions rely on the victim and the victim’s family to report the incident, identify the perpetrator, suggest where the perpetrator might be and so on. This is not supportive of the victim or likely to lead to successful prosecution.
- 3.14** Investigations by police for prosecution need to focus on the collection of evidence, witness statements by people other than the victim, and examination of past behaviours by the perpetrator, rather than predominantly relying on the victim as the key witness.
- 3.15** All members of the Council strongly assert that the FACS response to an allegation of abuse should not rely on a successful prosecution.
- 3.16** Part of child protection needs to be an acknowledgement and implementation of a healing process.
- 3.17** Police and FACS need to increase and improve their response to notifications.
- 3.18** There needs to be a clear delineation between the statutory role exercised by government and government agencies, and the

non statutory roles which should reside with Aboriginal and non-government organizations.

- 3.19** It is necessary that FACS develop positive relationships with communities either directly or through established non-government organizations already operating in communities.
- 3.20** Interventions and program responses need to be informed by strength based approaches that empower victims and victims' families. By 'strength based' the Council means any approach that encourages and supports maximum control for survivors and family members. Support people, and those who have a relationship with the family need to be included in the process. Children's views need to be sought and respectfully considered. Honest information about what can and can't be done or what will be acted upon should be shared with the child and their family. These principles underlie practice that acts in the best interests of the child.

4.0 CONSIDER HOW THE NT GOVERNMENT CAN HELP SUPPORT COMMUNITIES TO EFFECTIVELY PREVENT AND TACKLE CHILD SEXUAL ABUSE.

- 4.1** Be realistic about the extent of the problem. Accept that child sexual abuse is prevalent in Australia and seek appropriate responses to prevent it and to ameliorate the damaging effects it has on children and their families.
- 4.2** Increased education for community residents about the impact of sexual abuse on children, their families and the community as a whole.
- 4.3** Prevention programs are needed that target entire communities, recognizes the abusers are potentially present, outlines penalties by law, makes it clear that abuse will not be tolerated and will be treated seriously in communities. These need to be backed up by laws that do carry serious penalties for child sexual abuse and judges who will sentence perpetrators. THEN also need rehabilitation programs for prisoners of the type that the Tangentyere Council Spirituality / Healing Centre proposes and offers where possible.
- 4.4** Community education focusing on the Rights of the Child and reiterating it over and over again. Safety messages to be taught from early child care onwards, using appropriate and relevant images and spatial techniques in the delivery. Communities can develop their own age-appropriate materials using multi-media.
- 4.5** Extreme care needs to be taken in programs such as those named at 4.4 above that the onus to take responsibility for stopping the abuse is not put on the child. Children can feel it is their own fault and they are to blame if they are abused.

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- 4.6** There needs to be clear awareness of the difference between preventative and protective programs. Arguably, whilst perpetrators are abusing children, protective programs still need to be offered but they should not be named or considered to be “preventative” since they cannot be implemented until the perpetrator has already targeted the child.
- 4.7** The time has come for Indigenous communities with the support of external agencies to acknowledge that there is a problem, there are precipitating factors to the offending behaviour, however this is not about laying blame or making excuses for the violence. More importantly, it is about our children’s lives, the shaping of their experience, the moulding of their “selves” and “egos” and how they take their childhood experiences into a fully functioning adulthood.
- 4.8** There needs to be realistic expectations about what communities can achieve by themselves, given the resources available to them, and suitable support provided.
- 4.9** Funded Women’s Resource Centres that offer a range of services in all communities. Programs might include: mentoring and training for local people; nutrition and other health promotion programs; referrals and support.
- 4.10** Better housing, better education, more employment opportunities, including viewing caring for homelands as legitimate, appropriately paid work.
- 4.11** There is a need for appropriate back up from statutory authorities and not expect families to deal with these situations.
- 4.12** Build on recommendations made by Aboriginal men and get some positive male role models to assist in the development of healthy men’s services that encourage men to acknowledge clearly that child sexual abuse damages children and is unacceptable behaviour within all cultural contexts, to develop positive self esteem, manage anger and depression and take responsibility for their personal actions.
- 4.13** There are historical events that have lead to the loss of culture and respect for each other, but to attack this problem, there needs to be a “here and now’ approach to why perpetrators choose these behaviours. Ultimately an individual can only be responsible for his or her behaviour, and using techniques like “taking back control” and “locus of control” in perpetrator intervention programs that are delivered in very respectful learning environment may result in positive outcomes.
- 4.14** Improved housing, education, employment and training, and increasing funding and support for child care and youth services, including support for parenting programs for young adults would all help. All of these need much more than small
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injections of funding. It would help if “whole of government, whole of community” approaches actually were “whole of government/whole of community!”

- 4.15** At the NT Council of Social Services conference held in Alice Springs in September 2006, repeatedly, speakers, participants and workshop presenters talked about the power of community development approaches and how they are the only long lasting, genuine way to bring about change. People want to live in happy, healthy communities. Respectful, patient consultation, followed by prompt support and assistance that engages the community without expecting them to do the work of trained professionals, brings about results and change that the community supports.
- 4.16** A long term strategy is needed to educate people about what child abuse is so that all people share common understandings about the term.
- 4.17** Family Programs with both male and female workers and designed to support and strengthen families are required so that families can reclaim authority.
- 4.18** Parenting Support programs need to consider cultural context, inquire about usual practice, be clear about what is in the best interests of the child.
- 4.19** Men in communities have stated that it is the responsibility of men as well as women to protect children and look after their families. Men need to be supported in this commitment.
- 4.20** Given that children and young people are congregating in groups in urban centres and are at risk, resources need to be redirected to working with groups. It is acknowledged that FACS work one on one and that they may not be the ideal agency to do this work. Rather, indigenous and non-government organizations would be most appropriate.
- 4.21** Group work need to recognize identity as integral to the health and stability of young people. Respected and trusted people are needed to interact with young people to whom they can relate.
- 4.22** A way forward together is needed – men and women, black and white, to find some common language and shared agreement that sexual (and other) abuse is not to be tolerated.
- 4.23** more skilled specialized work force is needed. FACS workers are expected to be all things to all people. There is one sexual assault counsellor for all of Central Australia. Appropriate therapeutic support for victim/survivors needs to be developed, and delivered by indigenous and non-government organizations, not by FACS.
- 4.24** Develop and deliver programs for perpetrators that address the following:

- Acknowledgement of responsibility
- Recognition that what the perpetrator did was wrong
- A willingness to change behaviour
- An expressed wish that they do not want to re-offend
- Recognition that the perpetrator wants to be re-accepted into the community

4.24 Underpin immediate changes with longer term strategies such as community development approaches, eg the development of play groups, parent support groups etc