





Research report

Feeling safe, being safe:

What is important to children and young people with disability and high support needs about safety in institutional settings?

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February 2016

Executive summary

Introduction

The Royal Commission

In January 2013, the Honourable Dame Quentin Bryce, (then) Governor-General, appointed the Royal Commission to inquire into institutional responses to child sexual abuse.

The Royal Commission must recommend laws, policies, practices and systems that will effectively prevent or, where it occurs, respond to abuse. To ensure it provides authoritative, relevant recommendations, it has developed a detailed research program.

This report

This report explores what helps children and young people with disability and high support needs to feel and be safe in institutional settings. The study addressed the following questions:

- 1. What does 'being safe' mean to children and young people with disability and high support needs?
- 2. What helps and hinders children and young people with disability and high support needs in feeling and being safe in institutional settings?
- 3. How do people who provide support perceive and respond to children's and young people's concerns about their own safety?

It is a small-scale study linked to a larger research project about children's and young people's views on safety, *Having a Say: Exploring issues of safety with children and young people*, undertaken by Australian Catholic University (ACU). The study was deemed necessary to ensure the inclusion of children and young people with disability who are unable to participate in research without specifically designed methods and additional research support. All of the children and young people who participated in this study had cognitive impairments, and many had multiple impairments.

Methods

Twenty-two children and young people aged between 7 and 25 contributed to the study. The support needs of children and young people ranged across a broad spectrum. All participants had significant support needs that influenced the ways in which they lived their daily lives and their close and wider relationships, and played a significant role in the institutions with which they were in close contact.

To be as responsive as possible to the communication preferences and support needs of children and young people with disability, the project team developed and used a multimethod approach. Using a range of research methods, including photo elicitation, pictorial

mapping, storyboards, talking mats and walk-along interviews, researchers worked with each participant for between one and three interviews, individually and in small groups, to develop a view of their understanding and experience of personal safety in the institutions with which they engaged.

Individual and small group interviews were also conducted with six family members and 10 professionals. Professionals came from school, after-school care, vacation care, disability support, therapy, respite, advocacy and supported employment domains. A careful and considered ethical approach was taken to minimise the likelihood of the research causing any distress to children and young people or their families.

Key findings

The gaps in the research emerging from a substantial literature review undertaken for the project underline that abuse research has paid little attention to the perspectives of children and young people with disability, to preventative and safeguarding approaches, or to factors that promote personal safety for children and young people with disability.

What does 'being safe' mean to children and young people with disability and high support needs?

Children and young people provided a wealth of information about what 'being safe' meant to them, both in conversation with the researchers and through their pictorial maps. This included:

- feeling safe and secure
- being protected
- not being hurt
- not trusting strangers
- following rules written and unwritten
- having strategies
- having some control of the situation.

Many children and young people used physical safety as a starting point in their conversations about safety, and moved from discussing keeping doors locked, staying off the road and so on to talking about relational safety.

Children and young people also pointed out in a number of ways that it can be very hard to know what is safe or unsafe, especially for children and young people with higher support needs. They talked about complexity in relationships, when people were trustworthy on some occasions but not others. Few remembered learning about safety, either at school or anywhere else.

Families and professionals all viewed the children's and young people's understanding of safety as limited. They shared concerns about how the ways in which service systems operate make it very difficult for children and young people with high support needs to identify trustworthy and untrustworthy people in their lives. They saw a lack of safety (self-

protection) skills in children and young people – in some cases feeling that these could not be learnt, and in others that they were developing slowly.

What helps and hinders children and young people with disability and high support needs in feeling and being safe in institutional settings?

Children and young people described a series of factors that helped them to feel and be safe. These included having a secure foundational space (home, for most), having friends, feeling known and valued, having someone to confide in, avoiding contact with people they didn't know (both strangers and professionals who were little known), feeling able to tell someone if they felt unsafe, and having appropriate opportunities to learn about how to be safe (both formal and informal).

Things that made it difficult for children and young people to feel and be safe included fears about their safety, feeling out of control in situations, the impact of having experienced various forms of abuse, peer pressure, being under-supported through transitions and complexity in their family lives.

The institutions in which children and young people with disability frequently spend a high proportion of their time influence their findings. Young people in this research had weak affiliations with mainstream institutions, apart from school. Most children and young people in this study predominantly used services specifically for people with disability, and hence the findings in this research relate most centrally to these institutions.

How do people who provide support perceive and respond to children's and young people's concerns about their own safety?

Families had a limited knowledge of the actions children and young people took to keep themselves safe, and mostly felt that their children did not, or could not, act to keep themselves safe. Professionals commented on a greater number of people, but did not know them as well. Shared views about the ways in which children and young people acted to keep themselves safe included using safety strategies and relying on established networks.

Families and professionals spoke about the actions they took to build a sense of safety with and for children and young people. Families emphasised the importance of providing a loving foundation, building networks and managing relationships with disability support staff. Professionals expressed the importance of developing safety skills with the young people with whom they worked. Both groups perceived a need to build capability and confidence, put support into place, focus on education and communication, and take action on behalf of the children and young people.

Families and professionals outlined ways in which they felt children and young people risked their personal safety. Families focused more strongly on the individual qualities inherent in their children's characters and impairments, while professionals emphasised their lack of knowledge, and risky social practices and relations. Families and professionals also described how they as supporters responded to these risks and potential harm – families by worrying, and both groups by focusing on prevention, managing risks and taking action.

Finally, both families and professionals commented on the limited degree to which they felt systems recognised children's and young people's perspectives of safety. This was because of the high number of staff members that children and young people do not know, the fact that their needs were poorly met in schools, and services' lack of focus on disability support needs and overly bureaucratic risk orientation.

Main conclusions

A number of key issues important to children and young people, policy and practice can be drawn from the study findings. In each case, the critical issues children and young people and their supporters identified are consistent with the existing literature on abuse and safety for children and people with high support needs due to cognitive disability.

- Systemic impacts on children's and young people's lives need to be addressed. The
 effects of systemic limitations and failures, segregation, lack of choice and
 discrimination were evident in the research findings. Children and young people with
 cognitive disability had very different living patterns to their peers without disability.
 They were vulnerable due to the multiple ways in which institutional practices acted to
 isolate them from local communities and long-term support relationships.
- Work is needed to assist children and young people and their supporters to recognise and assess the relative risk of harm. This study's findings, together with related literature, indicate that while some children and young people with high support needs are unable to protect themselves against harm, many others have or can develop basic self-protection skills but find it very difficult to identify or understand more systemic risks or to avoid or respond to more insidious abuse. For example, several children and young people expressed a sense of personal responsibility for keeping themselves safe and did this by making themselves less visible to avoid attracting attention. This may help them avoid harassment, but it also increases the risk of predatory abuse. A risk management focus may act to 'put a lid' on concerns around safety and harm, rather than create relational solutions for children and young people who require sustained involvement with trusted adults to feel and be safe and to express this. In most cases, the emphasis that children and young people and their supporters placed on 'stranger danger' did not take into account the difficulty of calculating risk when meeting new people or acknowledge that a high proportion of children and young people with cognitive disability are abused by people they already know. While several children and young people talked about times when it was clear that they, or situations around them, were not safe (such as being physically injured or bullied), it was much more difficult for them to articulate uncertainty or disquiet, particularly about people in authority. The implications of this are twofold:
 - Many children and young people lack the skills and support to identify and act on feelings and instincts that could keep them safer from potential abuse in institutional settings.
 - A diminution of the social life of children and young people as they grow and develop, as a number indicated that they generally feared people they did not know (for example, people standing at the bus stop).

- The nature and quality of support relationships need to be monitored in a strategic and concerted way. Children and young people and their supporters placed a high priority on relational support to protect them against harm across multiple institutional settings. This is required at individual and systemic levels, because relationships feature centrally in current and forthcoming large-scale policy developments. In the future, care - which is currently service-oriented - will be provided in much more devolved and individualised environments, increasing the importance of identifying supportive practice and intervening in problematic relationships. One of the biggest risks is the high number of strangers or new people in the lives of children and young people with disability, and the tensions that arise between needing to trust people who are there to support them and the risk this poses. This study (and others) showed that the reliance children and young people have to place on relationships with staff members at an individual level is a source of tension and concern, due to their lack of knowledge and education about abuse and their limited capacity to act on concerns. At a systemic level, high staff turnover, the lack of training and skill in workers and managers, and increased trends towards casual staffing all increase risk.
- Evidence-based educational resources and strategies are needed to improve children's and young people's capacity to identify and respond to potential harm. Such resources also need to include initiatives for professionals and families, to ensure children and young people are effectively supported if they disclose harm, and that harm is recognised and responded to if they provide indications through behaviour or other indirect means. This will support efforts to decrease the high rates of harm; increase the skills of children and young people and their supporters; and help children and young people identify and act on feelings and instincts, which could keep them safer from potential abuse in institutional settings.
- Active participation of children and young people with disability needs to be supported so they are better involved in decisions across in a number of domains, including their education, health and disability support services. The diversity of children and young people with significant support needs who participated in this study demonstrates that it is possible to have safe, creative conversations about sensitive topics in their lives. More than a matter of good practice, this is also a requirement under the United Nations' Convention on the Rights of the Child and Convention on the Rights of Persons with Disabilities. Tailored, innovative methods for effectively listening and responding to the diverse views and perspectives of children and young people with cognitive disability need to be encouraged, to ensure they can contribute to their personal circumstances, service environments and broader policy change.

There are marked similarities between the findings of this study and the ACU's *Having a Say* study, including the importance of having reliable, safe and trusted adults in children's and young people's lives, and the foundational nature of home in building resilience and confidence. Where differences are evident between the two studies, they are important because they are generally linked to systemic disadvantage. Differences included the way in which some children and young people with disability equated feeling safe with being safe; additional barriers to being able to implement safety strategies; responses to feeling intimidated and threatened; and a more frequent lived experience of abuse.