

## **INQUIRY INTO CHILD PROTECTION**

**Organisation:** CASAC Inc NSW

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**Submission to the Parliament of  
New South Wales  
Child Protection Inquiry  
July 2016**

***CASAC Inc NSW is a  
non-funded peak for community based  
non-government child and adolescent sexual assault  
counselling services.***

***Our members are NSW FaCS funded counselling services  
supporting children, young people and adults who have  
experienced child sexual abuse and their families.***

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## **Introduction**

CASAC Inc appreciates the opportunity to make a submission to the Parliament of NSW Inquiry into Child Protection. CASAC Inc is an incorporated association with members who are employed as child and adolescent sexual assault counsellors (casac) in FaCS funded services in NSW. This submission is based on feedback from members across the state who provide specialist interventions with children, young people who have experienced sexual assault and adult survivors of childhood sexual assault.

It is hoped that this inquiry compliments and acknowledges the enormous contribution being made by the Royal Commission into Institutional Responses to Child Sexual Abuse as these findings have been significant. Unfortunately, the environments and systemic issues which allowed for the abuse of children and young people and the barriers to disclosing still continue today. This is despite the efforts which have been made over the years. CASAC Inc. recognises that the NSW child protection system is experiencing significant challenges in responding to children at risk of harm, and particularly those who are victims of child sexual assault. It is also important to note that funding for specialist NGO child sexual assault counselling services was under threat in previous FaCS funding reform processes and so we welcome a process which aims to review and better understand the current funding situation and make recommendations for improvement.

## **Who We Are**

New South Wales has a network of locally based non-government child protection services which were formed at the grassroots to respond to abuse, neglect and sexual assault in the community in the 1970's and 1980's. Formally in 1985, the NSW Child Sexual Assault Task Force recommended that community based services be established for sexual assault victims and their families. The Incest Services Network (I.S.N) was established in 1986 by women from Western Women's Action Against Incest, Wollongong Women Against Incest, Central Women's Health Centre, Liverpool Women's Health Centre, Canberra Incest Centre, and Dymypha House. The network was established after these groups had lodged submissions with various departments for funding incest counselling services in their areas. At the time, the terms and conditions and funding agreements were unclear and through informal networks it was discovered that each group was being given different information. Consequently, the network was formalised and the first meeting was held in early 1986. The "Incest Services Network" was named at that meeting and as a cohesive, united group, seemed more effectively able to deal with and communicate with the bureaucracy and the system. Additionally, the network recognised the isolation of working in sexual assault, coupled with small one or two worker services that exist in regional areas throughout the state, thus it saw the

importance of using ISN to network and find support. The network held the name of ISN until 1994 when it was decided that ISN was not truly indicative or readily recognised and was often confused with 'incest support network'. After much consideration and deliberation the name Child and Adolescent Sexual Assault Counsellors (CASAC) was chosen.

Currently, these member services include stand alone sexual assault counselling services such as Rosebank Liverpool, West Street Centre in Wollongong that provides services to adult survivors, individual child sexual assault counsellors based in various agencies and locations across the state such as Linden Place in Wagga Wagga, and tertiary therapeutic child protection services such as Jannawi Family Centre, formerly known as the Wiley Park Centre. As they were subsequently funded by the NSW State Government, they became part of what was known as the Community Services Grants Program (CSGP). They aim to deliver specialist therapeutic counselling and support services to children, young people, families and adults who have experienced child sexual assault. This more frequently than not, includes children and families experiencing violence, abuse and neglect. The primary aim of the service is to provide long-term psychological counselling and support to individuals and families affected by childhood sexual assault, domestic and family violence, abuse and neglect. They aim to provide a place of safety for clients (some of which may still be currently at risk of harm) and ensures that the NSW child protection system is responsive to those who have experienced harm and in working towards prevention.

Services may also provide training and consultation to the community sector on these issues. Apart from its core business and through a range of partnerships, services may also contribute to statewide, regional and local initiatives designed to promote and improve outcomes for children, families and communities.

Overall, the specialist services model aims to support the long term safety and wellbeing of individuals and families, reducing the effects of trauma and increasing social and family connections. It aims to work with children, young people and families who have met the threshold for statutory child protection intervention, or where concern for an individual's wellbeing continues (sub threshold) and there is a need for ongoing therapeutic intervention. These children, young people and families will generally have greater needs than those accessing the Child Youth and Family Support Service model, Brighter Futures or Vulnerable Families. Moreover, clients have been assessed as requiring specialist counselling and integrated service provision. Part of this intervention requires specialist intervention, including liaising and engaging with police, medico-legal and other child investigation systems. They also provide support to children who are placed in out-of-home care and to adult survivors of child sexual assault. Clients are provided with therapeutic intervention in a non-clinical setting, offering services to clients who may not be otherwise eligible for government based sexual assault or child protection therapeutic services. Services are offered locally, in the community, so they are easily accessible to the

client group and provide an alternative option for those clients who historically do not trust or do not wish to access government based services. We strongly believe in the sector providing diversity and offering a range of options for the public to access.

The primary role of CASAC Inc. is to provide a professional peer network for counsellors employed in a range of FaCS funded services across the state in their role as direct service providers, as well as to support, educate and advocate for children and young people who are victims of sexual assault. We also contribute to service system and policy development through various networks.

There have been significant changes in the child protection system over the years, it is important to focus on resource allocation and the role of NGO's to respond to and provide therapeutic services to children who have experienced child sexual assault. It is also our belief that adults who were abused as children have a right to receive specialist services which are holistic, supportive and trauma informed and that this is a responsibility of the child protection service system.

### **Inquiry into child protection**

1. That General Purpose Standing Committee No. 2 inquire into and report on the role of the Department of Family and Community Services in relation to child protection, including:

*a) the capacity and effectiveness of systems, procedures and practices to notify, investigate and assess reports of children and young people at risk of harm*

The CASAC network has significant concerns regarding current procedures and practices to investigate and assess child sexual assault. The capacity of the sector to comprehensively understand the dynamics of child sexual assault, offender tactics and presentation, the significant barriers to disclosing and the social and political context which child sexual abuse occurs is limited and inadequate. The current approach places a significant focus on a disclosure and a criminal legal response, with the welfare protection elements at times being sidelined. There are many unintended barriers for children, particularly young children having to speak to strangers to disclose and without adequate support, including limited or no use of interpreters to assist children if they are from a culturally and linguistically diverse background. Children and young people who have already spoken to an adult whom they trust and feel safe with, rarely understand the process of a legal service system response which is to speak with someone else they have met for the first time about sexual abuse. The scheme to introduce Children's Intermediaries to assist in this process is welcomed by the CASAC network and we are hopeful of the potential systemic changes it will create as a positive step forward in making the system fairer and less traumatic for children to participate. There is also a limited ability within the system to identify possible sexual assault concerns at the point of making a

mandatory report if other risk factors are seen to be more concerning (for example, domestic violence). This is despite extensive research which indicates a significant co-occurrence of sexual abuse of children in homes where domestic violence is perpetrated towards mothers. The current climate also is prone to blaming mothers when their children disclose sexual abuse and this creates significant barriers to investigate and assess safety of children. The burden of 'proof' for sexual abuse is also based on a criminal threshold in NSW and sets a context for a great deal of children and young people falling through the gaps. Many then grow up without receiving appropriate support and intervention and tend to find themselves back in the child protection system regarding their own children. Our member services acknowledge the majority of the parents attending their services for their children's sexual abuse were themselves sexually abused as children. Clearly this is unacceptable.

*b) the adequacy and reliability of the safety, risk and risk assessment tools used at Community Service Centres*

In working directly with children, young people and adults who have experienced child sexual assault, it is evident that there are significant barriers in place for children to disclose and in providing an adequate response. The assessment tools utilised place the onus on children to disclose abuse and the use of a criminal threshold to assess whether abuse has occurred or not creates a harmful gap in the service system. We understand that this was not the intention; however use of the term 'unsubstantiated' gives a message of non-belief which has major implications for children's ongoing emotional and psychological wellbeing and creates a barrier to them receiving services or referrals being made to support them. If risk of sexual abuse is not substantiated, there is also an assumption that children are not at risk and this assumption may mean children are not referred for additional support or families are not supported with managing the after effects of disclosure which can create a range of other complexities for children, siblings and family members. Children also share concerns differently to adults and the current investigative process can lead to many children falling through the gaps or other concerns not being adequately addressed. The shift following the establishment of JIRT investigating matters of child sexual assault has also unintentionally de-skilled a FACS workforce who may not come across or have relevant experience in investigating and assessing matters related to child sexual assault. Issues such as manipulation, grooming and other tactics of psychological harm are overlooked or minimised in the assessment processes. There are also assumptions made about how perpetrators of child sexual assault present, how they think and how they may engage with child protection staff. Once again, this creates significant gaps in outcomes of risk assessments and interventions.

Whilst we acknowledge the needs to be a criminal burden of proof, this has somehow created a situation in that welfare and risk issues are not adequately

acknowledged or responded to. It is CASAC's recommendation that a decision which has not met the criminal threshold be renamed so that it does not unintentionally say to the child that they are not able to 'prove' their abuse. It should also not preclude children to receive an intervention as another criteria of 'form a belief' may also be difficult to reach. Many children are potentially still at risk of serious psychological harm, neglect, physical abuse or witnessing violence and deserve an intervention to address these concerns.

*c) the amount and allocation of funding and resources to the Department of Family and Community Services for the employment of casework specialists, caseworkers and other frontline personnel and all other associated costs for the provision of services for children at risk of harm, and children in out of home care*

CASAC Inc. understands that the amount and allocation of funding to the Department is not adequate and that without a well-resourced service that can respond to significant risk, more children will fall through the gaps. With a focus on child sexual assault, we would like to advocate for a well trained workforce that comprehensively understands the complexity of this form of abuse and that there be a specialist role within FaCS to support caseworkers to appropriately intervene, safety plan and case manage families where child sexual abuse may be a risk or identified. This is based on practice experience where victims of abuse have been further blamed or received consequences for disclosing, that a growing proportion of disclosures relate to children being hurt by other children or their siblings and that this challenges the traditional interventions used. It is also suggested that funding to support children in OOHC includes a specialist therapeutic role to support children and young people who have experienced sexual abuse rather than continually employing caseworkers who may be limited in providing interventions or that do not have a therapeutic element. It is important that children receive therapeutic services that support their healing and recovery and that the system allows for professionals to build long term supportive relationships with children. Staff at the Department work under immense pressure to respond to families at risk and the system requires an approach which is trauma informed. Many of the parents who are engaged in the child protection system are childhood victims of sexual abuse and a workforce which understands this and can sensitively and respectfully respond will achieve better outcomes for children at risk.

*d) the amount and allocation of funding and resources to non-government organisations for the employment of casework specialists, caseworkers and other frontline personnel and all other associated costs for the provision of services for children at risk of harm, and children in out of home care*

CASAC Inc advocates the position that childhood sexual assault is a child protection concern that has long term and significant consequences for victims if not adequately addressed and supported at the time of the discovery of abuse. It is our position also that the primary government department responsible for assessing,

identifying and responding to child sexual assault is Community Services and that a holistic approach which addresses all the social, political, criminal and therapeutic interventions is the most healing and cost effective. Therapeutic services provided by both government and non-government organisations need to be better resourced and supported as they are effective in achieving positive outcomes for adults and children. At the present time, the service system relies on collaborative practice between all aspects of the service system to adequately respond to children and victims of sexual assault and unfortunately, many children, particularly those with the most vulnerabilities are falling through the gaps. For example, children who have been deemed to be at risk of harm (but not significant), those children who are required to attend contact which is unsafe or abusive via the Family Law Court, where disclosures have been made but not substantiated and for children who might have a disability, come from culturally, religiously and linguistically diverse backgrounds or living in homes where there is violence and so experience a significant number of barriers to disclosing. The sector requires training and ongoing professional development to adequately assess, identify and respond to child sexual abuse and in NSW, this is severely lacking.

It is our belief that as a primary intervention, *any* concerns identified regarding child sexual assault be a reason for therapeutic intervention to be offered. This may not necessarily require a focus on sexual assault, however psychological and emotional support and ongoing monitoring for children's safety is important and this is severely lacking. It is a dangerous position to hold that abuse is confirmed or not substantiated and creates further gaps in the service system. As childhood sexual assault is a human rights issue, a crime, a social and political issue and a public health concern, it is appropriate that FaCS be responsible for providing specialist skilled, therapeutic interventions for childhood victims of abuse and neglect. We acknowledge that there are many skilled practitioners employed in private practice and professionals who are approved counsellors which are funded by Victims Services. These play an important role, however the children and families which are the most vulnerable and at risk are entitled to therapeutic interventions which sit within a child protection framework focusing on safety. It is crucial that interventions also focus on addressing the social and political context in which child sexual assault occurs. Funded services can provide a range of activities and interventions to support children and their families in addition to specialist counselling, including parenting support and skills development, advocacy, court support, community education and case management. Whilst there have been significant concerns highlighted regarding the capacity of the NGO sector, it is important to note that there are a range of specialist and skilled frontline personnel which have provided quality services to children at risk for decades. The funding allocated at the present time is not adequate in providing sustainability and ongoing viability of the child sexual assault counselling services in NSW and yet they are a valuable and unique model which should be replicated across the country. In fact, over the years, a range of auspicing agencies have chosen to no longer deliver this service to their local



communities and this is disappointing, as well as unacceptable. The very issue of child sexual assault is one that society chooses not to face and adequately address, and so without a clear commitment and focus on this as a primary and important issue, it will continue to be sidelined. The NSW government as yet still has not developed a clear framework in addressing child sexual assault and this needs to change.

According to research conducted on high risk families, programs need to be long enough in duration to impact upon parenting and address the multiple risk factors which contribute to child abuse and neglect. (Flannery et al, 2008.) In addition, the development of a trusting therapeutic relationship was found as being the most important factor in retaining parents in parenting programs (NSW DoCS, 2005, p.2). The relationship that forms between the client and the worker is directly related to positive outcomes, making this alliance a pivotal factor in successful intervention and outcomes. Undoubtedly, developing a trusting relationship requires time and therefore, longer term intervention. Conveying to parents that a service is collaborative, as opposed to punitive, also requires significant facilitation and time. The current service system fails to acknowledge or utilise counselling as a valuable and highly successful intervention with families at risk. There needs to be a focus on this if there is to be any significant and meaningful change for children and families at risk.

The transfer of significantly more funding to the NGO sector needs to be mindful of the skills already present and that the cost reduction focus should not jeopardise the safety and protection of vulnerable children. The CASAC services which have been providing specialist intensive long term therapeutic interventions for children in the community have not received any increase in funding since the initial programs were funded by NSW Community Services and this has created a significant discrepancy between newer established programs and services and those who have been well established in the community providing services. The amount and allocation of funding and resources needs to be consistent and acknowledge the skills, experience and knowledge of the personnel. Whilst there has been a hard fought equal pay campaign this has further exacerbated the gap between recent funding contracts and those established decades ago which have not kept up with the increasing costs to the service delivery.

*e) the support, training, safety, monitoring and auditing of carers including foster carers and relative/kin carers*

There has been a significant focus at the Royal Commission about the risks to children in out of home care being highly vulnerable to, and experiencing sexual assault. It creates further harm and exposes children to additional trauma when they have already experienced a significant level of harm and abuse. It is CASAC's position that foster carers are not provided with the adequate level of training,

ongoing support or coaching in order to respond to children in their care that have experienced sexual assault, nor those children exhibiting sexualised and problem sexual behaviours. This leads to carers feeling overwhelmed, unable to respond in a trauma informed way and at risk of placement breakdown. We have knowledge of many instances of children being shamed, verbally abused, inappropriately reprimanded or punitively treated if they exhibit behaviours which may indicate sexual abuse. This leads to further psychological harm, disconnection from others and children not being adequately supported. Many of the behaviours of children currently being abused in care are blamed on the care they received in their family contexts, or excused due to past trauma they may have experienced. Very rarely and generally when children have formed relationships with other professionals or receiving counselling do they disclose the sexual abuse they are currently experiencing. The monitoring and auditing process of foster carers and relative carers will continue to be undermined and be meaningless if the sector continues to struggle to recruit and maintain carers. In practice, issues of concern tend to be overlooked or dismissed in order to maintain a placement, further placing children at risk. The Royal Commission has done a significant piece of work regarding the OOH sector in regards to responding to sexual assault and keeping children safe and we welcome any recommendations it may make regarding this subject.

*f) the structure of oversight and interaction in place between the Office of the Children's Guardian, Department of Family and Community Services, and non-government organisations regarding the provision of services for children and young people at risk of harm or in out of home care.*

CASAC Inc believes the current Working With Children Check is a positive step toward providing some safety for children, however it also has significant limitations and does not adequately identify and protect children from sexual abuse. There will always be limitations in a system which does not focus on or continually be mindful of the potential for children to be abused by people in authority or in roles where they have access to children. CASAC Inc does not have any specific comments regarding oversight and interaction, however we do support the standards implemented by the Victorian Government following their inquiry regarding criminal offences and creating child safe organisations to protect children from sexual abuse.

*g) specific initiatives and outcomes for at risk Aboriginal and Torres Strait Islander children and young people*

The National Framework for Protecting Australia's Children lists the outcome that Indigenous children are supported and safe in their families and communities. In various areas throughout the state, this support is not adequately provided, therefore creating a situation where intergenerational trauma, impact of the Stolen Generations and past welfare practices is not adequately addressed. The experience of children who have experienced sexual assault not receiving adequate intervention, protection or therapeutic support further exacerbates the impact of

trauma and vulnerable communities. There has not been a serious, targeted effort to responding to or healing the trauma of child sexual assault in Aboriginal and Torres Strait Islander communities and so there remains a sense of shame and secrecy which can be overwhelming. In addition, the rates of sexual abuse of Aboriginal and Torres Strait Islander children and young people are unacceptable and demonstrate a failure on the whole service system to be culturally sensitive, competent and safe in their interactions and support of Aboriginal and Torres Strait Islander children and families. We view the rates of sexual abuse towards Aboriginal and Torres Strait Islander children demonstrates the need for a targeted approach which is system wide. It requires specific training and professional development regarding sexual abuse, respectfully engaging families, acknowledging the impact of invasion and colonising practices and the whiteness within the theories and approaches used to assess, monitor and intervene with Aboriginal and Torres Strait Islander children, youth, families and communities. Culturally safe, respectful and competent practice with Aboriginal and Torres Strait Islander individuals and communities needs to form a core component of the NSW service system. Unfortunately, there is a lack of consistency, knowledge, appropriate training and professional development in this important area and this is disappointing. This should be a core component of all funded services and yet is still left to the various service providers to implement and adequately address this skill and knowledge set for their personnel. A recommendation would be to introduce compulsory training regarding culturally safe and sensitive practice with Aboriginal families.

In regards to sexual assault, CASAC services support the Sex and Ethics Program developed by Moira Carmody at UWS. It is a 6 week program which provides an ethical framework to young people to educate and support them regarding their sexuality and prevent sexual violence and teach negotiation skills. Research was conducted with Aboriginal young people who participated in the program and a practice framework developed which is culturally appropriate and safe. It is recommended that as a component of service delivery, groups targeting vulnerable young people are funded and supported.

*h) the amount and allocation of funding and resources to universal supports and to intensive, targeted prevention and early intervention programs to prevent and reduce risk of harm to children and young people,*

The amount and allocation of funding to resource prevention of child sexual abuse is appalling and highly inadequate. Considering the rates of child sexual abuse and the significant impact it has on society, communities, families and individuals, it is difficult to understand the lack of attention it receives within early intervention programs to assist families and communities to identify and respond to it. There has not been a widespread public campaign regarding child sexual assault in recent years and raising awareness of the issue has not been a focus. Throughout the service system, there seems to be an extremely limited focus on providing public and community

education or psychoeducation to parents and carers, nor is there sufficient and adequate skills development regarding responding to perpetrator tactics such as manipulation, grooming, secrecy and instilling shame and fear to prevent disclosures. Funding for prevention is not sufficient and the system is focused on responding after the fact, when children have already experienced harm, rather than taking a prevention lens. For the CASAC Inc network, there is no justification for continuing to ignore the prevention and early intervention of child sexual assault.

i) *any other related matter.*

There has been a significant and gradual depletion of child and adolescent sexual assault counselling services in NSW over the years and this has been detrimental to local communities. This is a highly sensitive area to bring attention to, as it raises an important sustainability and viability issue for the future of CASAC services in the state. However, we would not be honouring the important role they play if we did not use the opportunity of a Child Protection Inquiry to mention it. The issue also relates to the auspicing NGO's which receive funding for the individual positions.

Many CASAC Inc. services are auspiced by religious based organisations or those which historically have run institutions which have significantly harmed vulnerable children in their care. There lies an inherent tension in offering therapeutic child sexual assault services with historical instances of abuse of power and sexual abuse of children. A position which may be difficult to state is that there needs to be a serious review of these services being provided with government funding. A common theme is that they seem to struggle with adequately supporting their personnel in their counselling role, at times maintaining these roles as sole worker positions in a part time capacity which is highly problematic. It further exacerbates the challenging role and can create an overwhelming sense of responsibility for the counsellor to maintain the service without adequate organisational support. It also has the potential to be unsafe and harmful to the professionals employed. It can lead to isolation, limited professional connections and support and over the years, CASAC Inc. has had to continually maintain a focus on adequately supporting counsellors when their auspicing agencies have been unwilling or unable to do so. It is our opinion that they may not value or view the child and adolescent sexual assault counsellor positions as worthwhile to their organisations, perhaps do not adequately understand their role or believe it does not 'fit' within the broader generic services they may offer. This is unfortunate as the positions are a valuable resource to assisting auspicing agencies to better respond to child sexual assault in their communities, however over the years, the funding has not kept up with the costs of service delivery, or alternatively, many of the larger NGO's will take a significant portion of the funding as overhead and management fees rather than provide the funds for direct service delivery. They may not commit to financially supporting the position as they do not value it and therefore the staff may also feel they are required to maintain the position. Over the years, this has led to the depletion of the counsellor positions across the state creating situations where the services have

been defunded, or lost. We do not underestimate that the issues have been complex, however it is an example of a failure to adequately support, monitor and appreciate the value of child sexual assault counselling provided locally in communities. Individual auspicing agencies have made decisions over the years to 'let go' of these positions or renegotiate them to other roles and this is unfortunate. It is a significant concern to the CASAC network if this current pattern was to continue and so a recommendation would be to possibly have the individual sole worker funding centrally managed by an auspicing agency that understands the service delivery to victims of child sexual abuse, can adequately support and maintain professional standards for counsellors, provide community education regarding child sexual assault and values the significant role they play in the child protection system in NSW.

### **Conclusion**

CASAC Inc. is strongly committed to advocating for best practice and an appropriately resourced service system that adequately and comprehensively supports victims of child sexual assault.

We appreciate the opportunity to highlight the current issues relating to child sexual assault and look forward to the opportunity to discuss matters raised in this submission. CASAC Inc. supports the NSW Government in its efforts to provide an effective and efficient child protection system and anticipate that this Inquiry will make a significant difference in the lives of individuals and families in NSW.