Information paper: Establishing the National Centre for the Prevention of Child Sexual Abuse

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# Part One: Introduction

## Opening statement

We all share the same goal to make our community safe for all children and young people and to improve responses to all survivors of child sexual abuse. In order to do that, we wish to acknowledge the legacy of pain and suffering inflicted on survivors of child sexual abuse and let their experiences and wisdom assist us to tackle this difficult issue.

Child and adult survivors, their families, survivor advocates, representative organisations, service providers, peak bodies, non-government organisations, academics, those who advocate for the prevention of child sexual abuse and all other interested parties are welcomed stakeholders in contributing to shaping the National Centre for the Prevention of Child Sexual Abuse (the National Centre) scope, functions and priorities.

Our commitment is ultimately to support child and adult survivors and stop child sexual abuse over time.

## History of the National Centre

### The Royal Commission into Institutional Responses to Child Sexual Abuse

The Royal Commission into Institutional Responses to Child Sexual Abuse (the Royal Commission) was established in 2012 to inquire into institutional responses to allegations and incidents of child sexual abuse. During its five-year inquiry, the Royal Commission conducted public hearings, held private sessions and delivered a policy and research program. More than 16,000 brave people shared their stories about the sexual abuse they experienced as children, and the final report contained   
409 recommendations.

The Royal Commission’s findings looked at complex issues about why and how child sexual abuse happens in institutions, how to prevent such abuses in the future and improve responses to all survivors.

Recommendations were made about how to keep children safe, including the recommendation (9.9) to establish a National Centre to provide national leadership to reduce stigma, promote help-seeking and support good practice.

The Royal Commission recommended the National Centre will require an investment of $45 million over five years, should be established together with state and territory governments, and that it should be independent from government.

## The Australian Government’s Commitment to Establish the National Centre for the Prevention of Child Sexual Abuse

On 30 March 2019, the Prime Minister of Australia, the Hon Scott Morrison MP committed $22.5 million over five years in the 2019-20 Federal Budget towards establishment of the National Centre. He stated:

*“The establishment of the National Centre is part of our commitment to prevent future abuse and support victims and survivors. It will ensure the needs of survivors will remain a national priority.”*

Commonwealth and state and territory governments will work together to make sure the National Centre is established.

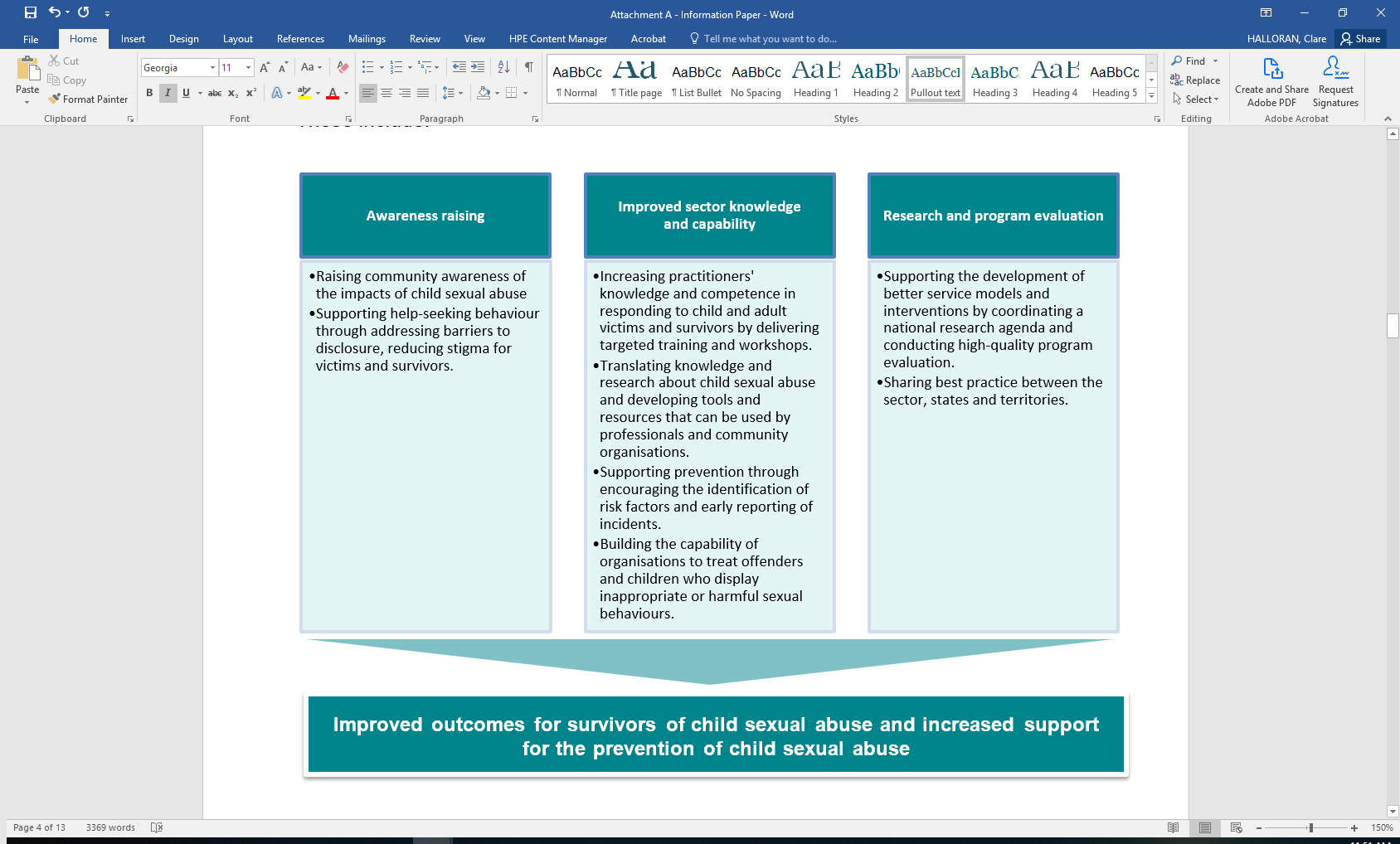
## Why is a National Centre for the Prevention of Child Sexual Abuse important?

The Royal Commission made recommendations about how to keep children safe. It also identified that ongoing national leadership is necessary to improve outcomes for survivors of past child sexual abuse and prevent future child sexual abuse.

*“Protecting children and promoting their safety is everyone’s business. It is a national priority that requires a national response. Everyone – the Australian Government and state and territory governments, sectors and institutions, communities, families and individuals – has a role to play.”[[1]](#footnote-1)*

Recommendation 9.9 (at Appendix A) and the Australian Government committed to establish the National Centre to provide this national leadership through a number of activities. (<https://www.childabuseroyalcommission.gov.au/recommendations>).

These include:



Building on the Royal Commission’s recommendations, the department is now considering how to implement the National Centre, taking into account stakeholder views.

## Why prevention of child sexual abuse?

*“The Australian Government … should apply a public health approach to the prevention of child sexual abuse.*

*The public health approach is used when a preventable problem is widespread, serious and associated with severe long-term effects on individuals and communities. This approach was originally designed for disease prevention, but has been modified to address other complex problems relating to social behaviour. The model is well established and has been applied to child sexual abuse, both in Australia and overseas”[[2]](#footnote-2).*

The Royal Commission identified the need for a public health approach, which highlights the importance of preventing future occurrences of child sexual abuse by understanding the scope and cause of the problem, and providing appropriate responses that motivate collective change.

Preventing child sexual abuse will have positive impacts that go well beyond ending the abuse itself: from better psychological, social and health outcomes for individuals, to creating families and communities that value our children, who can take active steps to prevent harm towards them, and enhance their wellbeing. To influence the health and wellbeing of the whole population, including tackling the issue of child sexual abuse, there is a need for interventions across all levels of society including families, communities and governments.

Prevention can include influencing policy development, changing organisational practices, educating providers, raising community awareness and education, and strengthening practitioner knowledge and skills in order to:

* prevent abuse before it occurs by reducing risk factors and promoting safe, healthy environments and behaviours
* address problematic sexual behaviours in those at-risk of offending before any involvement with the legal system
* provide support when child sexual abuse has already occurred to reduce the impact of the abuse and prevent further victimisation.

In summary, the National Centre will have a dual focus on improving sector capability to respond to child and adult survivors as well as stopping the problem over time.

## Principles underpinning the development and activities of the National Centre

The National Centre will aim to:

* work in partnership with those with lived experience, survivor advocates, representative organisations, service providers, peak bodies, non-government organisations, academics, those who advocate for the prevention of child sexual abuse and other interested parties
* expand knowledge and resources about child sexual abuse and have them easily accessible
* build on and enhance the work of the Royal Commission to maintain and expand the push for change – to improve outcomes for survivors and to develop effective strategies to prevent child sexual abuse
* share available resources and information about what is being done by others to share best practice and reduce duplication of effort.

## Your opportunity to contribute to the design of the National Centre

The Royal Commission identified that ongoing national leadership is necessary to improve outcomes for survivors of past child sexual abuse and prevent future child sexual abuse.

The department is talking to people and organisations to help design the scope, functions and priorities of the National Centre. Feedback from survivors and other stakeholders is critical to the future success of the National Centre. This collaborative approach will help the department identify a suitable organisation to lead the work of the National Centre, independent of government.

Throughout October to December 2019, the department held face-to-face consultations with non-government and government stakeholders, including survivor advocacy groups, people who work with child and adult survivors, academics, peak bodies, national and local organisations who provide services, and policy and decision makers.

The department has developed an online survey to give all Australians an opportunity to have their say on the scope, functions and priorities for the National Centre.

While recommendation 9.9 of the Royal Commission Final Report is focused on establishing the National Centre, the National Centre will not deliver services. However, given the breadth of recommendations, there will be synergies between the National Centre and other recommendations to ensure necessary services are delivered.

With this in mind, your contribution to the National Centre consultations will focus on helping to shape what the National Centre will provide. The online survey will be available during February 2020 and will close at **11:59pm on Sunday 15 March 2020.**

This paper gives more information about the recommendation and what the survey will ask. To find out more visit [**engage.dss.gov.au**](https://engage.dss.gov.au/) or you cancontact the Department of Social Services at [nationalcentre@dss.gov.au](mailto:nationalcentre@dss.gov.au).

Definitions for a number of key words used in this paper and the survey are in the glossary on page 10.

**Have your say - please participate in the survey:**[https://engage.dss.gov.au](https://engage.dss.gov.au/national-centre-for-the-prevention-of-child-sexual-abuse)

# Part Two: Breaking down Recommendation 9.9

## 9.9a Raising community awareness and reducing stigma

The Royal Commission has helped to increase awareness of the issue of child sexual abuse within the community. Public awareness helps to improve knowledge about the impacts of child sexual abuse on the lives of child and adult survivors, reduce stigma and help prevent child sexual abuse.

In order to protect children; individuals, institutions and communities need to understand the dynamics and effects of child sexual abuse, and be able to identify it and respond to it effectively. However, national and international research has shown a continuing lack of understanding of child sexual abuse and related issues within communities.

The impact on child and adult survivors and their families can be far reaching when the community lacks understanding about the nature, extent and impact of child sexual abuse or does not have the knowledge or confidence to respond to disclosures. The impacts of stigma can lead to discrimination, rejection, isolation, shame, self-blame, and poor physical and mental health. Many child sexual abuse survivors told the Royal Commission they experienced these responses within their communities.

Effective awareness campaigns can encourage child and adult survivors of child sexual abuse to seek information and services; promote healthy parenting practices and child safety skills in communities; and make sure everyone knows the protocols for responding to suspected abuse. They can also help support survivors.

### Reducing stigma

The Royal Commission found that problematic community attitudes and behaviour can contribute to child sexual abuse. Problematic community attitudes can lead to children being overlooked, minimised, or denied; and child sexual abuse being tolerated and continued.

Social taboos and stigmatisation also create barriers to those seeking help. Child and adult survivors are less likely to seek help when the people they approach might respond poorly. Negative reactions are re-traumatising for survivors and can prevent future disclosures.

Raising awareness of the nature and impact of child sexual abuse may help to break the stigma some child and adult survivors experience.

Strategies to help reduce stigma can include:

* provide support to child and adult survivors to help their recovery
* address barriers to disclosure and help-seeking
* raise community awareness and change misunderstandings about child sexual abuse.

In the survey you will be asked about strategies you think might help raise awareness about child sexual abuse.

## 9.9b Improved sector knowledge and capability

One of the considerations in thinking about child sexual abuse prevention and responses is that there are lots of people and organisations in the community who have direct contact with children and adults who have been sexually abused. Examples include counsellors, psychologists, teachers, police, youth leaders, coaches and social workers. These people can play an important role in preventing and detecting child sexual abuse, and therefore need adequate training.

People working with children and adults may not receive specific education and training about child sexual abuse, and workers indicate they have limited knowledge about grooming and sexually inappropriate online behaviours. In addition, due to the lack of coordinated information and education, workers may access different information and resources.

In order to respond effectively to the needs of all child and adult survivors, service providers need to understand the impacts of child sexual abuse, how to respond appropriately to trauma, and be able to work in a flexible and coordinated way.

There is a need for service providers to have access to credible and evidence-based training, education and resources.

Workers without the right skills, knowledge and support mechanisms not only affect the quality of services, but also put at risk the wellbeing of child and adult survivors.

While research about the impacts of child sexual abuse is available, and some sectors are implementing the latest evidence-based methods, there are a range of strategies that can help build capability across all workforces.

Strategies that can help build capability across all workforces include:

* developing a national workforce strategy to build and improve skills
* developing a resource hub or online training for workers
* developing national standards for training and accreditation
* developing a way of identifying good quality evidence
* embedding trauma-informed principles in tertiary courses
* advocating for child safe principles and approaches to be included in professional qualifications and association memberships

*“The coordination and translation of knowledge about trauma-informed approaches into practice is ad hoc, impacting workforce skills and exacerbating shortages in expertise” [[3]](#footnote-3)*

The survey will ask you to identify what workforce strategies you think are most important.

## 9.9c Research and program evaluation

The Royal Commission recommended that a role for the National Centre should be to lead the development of better service models and interventions. On a national level, this could happen through the coordination of research and high-quality program evaluations. It is important there is confidence that services and interventions are effective in what they aim to achieve for those needing support, or those seeking to prevent or respond to child sexual abuse.

Identifying research gaps in what we know about what works and how, and implementing evidence-informed and consistent services may help reduce some of the barriers that child and adult survivors and their families face when seeking help.

Some of the barriers identified in the Royal Commission included:

* information was difficult to find
* services were often unaffordable
* systemic and structural barriers that created difficulties, including the fragmentation of service systems, the limited capacity of services to work together
* lack of relevant knowledge among mainstream service providers
* scarcity of resources in specialist sectors and a lack of cultural competence and disability awareness
* inconsistency in the standard of services within and across jurisdictions
* gaps in services, including for children and young people who have experienced sexual abuse, male survivors, survivors entering aged care settings, and survivors in and transitioning out of prisons or other detention settings
* access to specialised services to respond to problematic sexualised behaviour of children and young people, particularly where this behaviour happens in families
* service access issues for survivors living in regional and remote communities.

Having a National Centre that specialises in research and evaluation about child sexual abuse could potentially play many roles. The survey will ask you what you think are the most important research priorities and roles the National Centre might focus on.

As the Royal Commission noted:

*“Practitioners should have access to the best available evidence and programs should be evaluated to continuously drive improvement”[[4]](#footnote-4).*

### Developing better service models

The services needed by child and adult survivors can range from mainstream to specialist supports, and may change depending on stage of life and individual circumstances. Examples may include support for health, finances, legal issues, housing, education and employment. Services needed by child and adult survivors often span multiple sectors and can be difficult to navigate.

There are distinctive aspects associated with child sexual abuse in institutional or familial contexts, which may influence child and adult survivors’ individual support and service needs. Some groups including Aboriginal and Torres Strait Islander communities, culturally and linguistically diverse communities, people with disability, people who identify as lesbian, gay, bisexual, transgender, intersex and queer (LGBTIQ+), and those in regional and remote communities, may benefit from responses tailored to their particular needs.

There are gaps in service model types that currently exist, and limited evidence about some existing service models. It is important that workers have confidence in the research and service models, so that child and adult survivors can access the assistance they need.

A National Centre could be the hub for new and existing research and evaluation, with a role in interpreting research evidence for practitioners and community members.

The survey will ask you to identify what you think the research and evaluation priorities should be and what research activities/information you regard as important.

# Part Three: Next steps

## Timeframes

Following the online consultation, a process will then be undertaken, based on stakeholder feedback, to select a suitable organisation to lead the work of the National Centre in late 2020.

Responses will be accepted by no later than **11:59pm on Sunday 15 March 2020** via DSS engage at [**engage.dss.gov.au**](https://engage.dss.gov.au/)**.**

## Further information

To find out more visit [**engage.dss.gov.au**](https://engage.dss.gov.au/) or you cancontact the Department of Social Services at [nationalcentre@dss.gov.au](mailto:nationalcentre@dss.gov.au).

The future selection process for the National Centre will be advertised via normal departmental channels.

## Link to the Survey

**Have your say - please participate in the survey:**[https://engage.dss.gov.au](https://engage.dss.gov.au/national-centre-for-the-prevention-of-child-sexual-abuse)

# Appendix A: Royal Commission Final Report–Recommendation 9.9

Recommendation 9.9 of the Royal Commission Final Report states:

|  |
| --- |
| Royal Commission Final Report– Recommendation 9.9  The Australian Government, in conjunction with state and territory governments, should establish and fund a national centre to raise awareness and understanding of the impacts of child sexual abuse, support help seeking and guide best practice advocacy and support and therapeutic treatment. The national centre’s functions should be to:   1. raise community awareness and promote destigmatising messages about the impacts of child sexual abuse   b. increase practitioners’ knowledge and competence in responding to child and adult victims and survivors by translating knowledge about the impacts of child sexual abuse and the evidence on effective responses into practice and policy. This should include activities to:  i. identify, translate and promote research in easily available and accessible formats for advocacy and support and therapeutic treatment practitioners  ii. produce national training materials and best practice clinical resources  iii. partner with training organisations to conduct training and workforce development programs  iv. influence national tertiary curricula to incorporate child sexual abuse and trauma-informed care  v. inform government policy making  c. lead the development of better service models and interventions through coordinating a national research agenda and conducting high-quality program evaluation.  The national centre should partner with survivors in all its work, valuing their knowledge and experience. |

# Appendix B: Glossary of terms used in the survey

**Diverse communities…** diverse communities include those from culturally and linguistically diverse backgrounds, Aboriginal and Torres Strait Islander communities, LGBTIQ+ communities, and people with disability.

**General services…** refers to services provided by government that, while not specific to child protection, have a key role to play in preventing further harm from child sexual abuse. For example, police, GPs, hospitals and other health services, education, community services, disability services.

**Innovation hubs…** an innovation hub is a service delivery organisation specialised in the development and evaluation of new models of care and intervention.

**Practitioner…** in its broadest possible sense, ‘practitioner’ includes all those who work with children (whether professionally or on a voluntary basis) as well as those who might bear witness to a victim and survivor disclosure or provide support services to victim survivors throughout their lives. In the survey, practitioner is also referred to as ‘worker’.

**Stigmatisation…** to unfairly regard someone as having something to be ashamed of.

**Trauma…** the experience of an event, series of events or set of circumstances that is very frightening or distressing and can have lasting impacts on individuals, families and communities. The impacts of trauma can be passed from generation to generation, which is often referred to as intergenerational trauma.

1. The Royal Commission into Institutional Responses to Child Sexual Abuse, pg 7, Final Report, Preface and Executive Summary [↑](#footnote-ref-1)
2. Royal Commission Final Report: Volume 6, Making institutions child safe [↑](#footnote-ref-2)
3. Royal Commission Final Report: Preface and executive summary [↑](#footnote-ref-3)
4. Royal Commission Final Report: Preface and executive summary [↑](#footnote-ref-4)