



**Australian Government**  
**Department of Social Services**

# National Centre for the Prevention of Child Sexual Abuse Stakeholder Consultation Report

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## Acknowledgement

The Department of Social Services (the department) acknowledges the significant contribution of all participants involved in the consultation to inform the design of the National Centre for the Prevention of Child Sexual Abuse (National Centre).

The department particularly acknowledges the contributions made by Aboriginal and Torres Strait Islander peoples, victims and survivors of child sexual abuse and their advocates, practitioners, non-government organisations, academics and government officials. Their wisdom, knowledge and insights are instrumental in shaping the work of the National Centre.

The department would also like to thank representatives from state and territory government partners for their ongoing contributions towards the establishment of the National Centre.

## Overview of National Consultation Process

The department undertook a national consultation process to inform the scope, functions, and governance arrangements of the National Centre.

The first stage involved nineteen face-to-face consultation workshops with government and non-government stakeholders between October and December 2019, including:

- consultations in each state and territory
- broad cross-sectoral engagement in workshops; with representation from
  - victims and survivors and advocates
  - people who work with victims and survivors, including private practitioners
  - national and local organisations who provide services, including child safety advocates
  - diverse groups including First Peoples, people with disability, people of diverse sex, gender and sexuality, culturally and linguistically diverse communities, Forgotten Australians, care leavers and child migrants, older Australians, regional and remote service providers
  - peak bodies, community health and child and family services
  - academics, and researchers
- delivery of a trauma-informed approach to consultations.

The final stage of consultation was a national online survey conducted through the department's Engage website in February 2020. The survey sought input from victims and survivors, members of the community, organisations unable to attend face-to-face workshops, and those who wanted to contribute further.

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# 1. Executive Summary

The Royal Commission into Institutional Responses to Child Sexual Abuse (Royal Commission) recommended Australia's Commonwealth, state and territory governments should establish 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 therapeutic treatment"* (Royal Commission Recommendation 9.9). In response, the Australian Government committed \$22.5 million in the 2019-20 Budget to establish a National Centre for the Prevention of Child Sexual Abuse (National Centre).

The Department of Social Services (the department) was tasked with establishing the National Centre, including undertaking a broad consultation process. The department invited feedback from a diverse range of organisations and individuals by holding stakeholder workshops and conducting an online survey. Findings in this report reflect the feedback received from 19 workshops held across Australia between October and December 2019 with approximately 630 government and non-government organisations invited to participate, and a survey completed by 427 members of the Australian community between February and April 2020.

While diverse, consultation participants shared a deep commitment towards the work started by the Royal Commission and a belief in the need for the National Centre. The Royal Commission brought child sexual abuse into the spotlight, increased community awareness and understanding, and drove service improvements on the ground. Stakeholders agreed the Royal Commission recommendation gave the work of the National Centre a sense of legitimacy and this brought with it the desire to see it succeed.

Stakeholders also expressed the hope the National Centre will continue the work set in motion by the Royal Commission and contribute to long-term change.

The consultation process highlighted stakeholder expectations that the National Centre will play a role in supporting victims and survivors and preventing child sexual abuse by:

- a. working in partnership with the sector and jurisdictions to provide national leadership to improve practice and policy improvement for victims and survivors of child sexual abuse including coordination across the sector
- b. maintaining a dual focus on improving the sector's ability to respond to victims and survivors, and preventing future abuse under the National Strategy for Prevention of Child Sexual Abuse (National Strategy)
- c. broadening understandings of child sexual abuse and its impacts through community and professional education to reduce stigma and support help-seeking
- d. increasing workforce capability to deliver high-quality, trauma-informed and culturally safe system and service responses to child and adult victims and survivors of child sexual abuse
- e. building the evidence base to prevent and respond to child sexual abuse by driving a national research and evaluation agenda
- f. continuing the momentum of the Royal Commission, maintaining a national focus on child sexual abuse and drawing on the lived experience of victims and survivors.

*"What value will it bring? Quite simple really – cohesion. Currently we do not have any and the service system is fractured." Survey participant*

These valuable insights and contributions, gained through the consultation process will be used to inform the design and potential activities of the National Centre

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## 2. Background

The Royal Commission was established in response to allegations of sexual abuse of children in institutions. It examined the history of abuse in a range of settings, including educational institutions, religious groups, sporting organisations, state institutions and youth organisations.

The Royal Commission was directed to focus on systemic issues, be informed by an understanding of individual cases, and make findings and recommendations to better protect children against sexual abuse, and alleviate the impact of abuse when it occurs.

The final report of the Royal Commission was made public on 15 December 2017. It contains a total of 409 recommendations. The National Centre is recommendation 9.9.

### Recommendation 9.9 states:

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:

- a. 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.*

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### **Australian Government announcement of funding for the National Centre**

On 30 March 2019, the Prime Minister of Australia, the Hon Scott Morrison MP, announced a commitment of \$22.5 million over five years in the 2019–20 Federal Budget towards establishment of a 'National Centre for the Prevention of Child Sexual Abuse'.

The Prime Minister's announcement stated: "the establishment of the National Centre is part of our commitment to support victims and survivors and prevent future abuse. It will ensure the needs of victims and survivors will remain a national priority."

The Australian Government expanded the remit of the National Centre's scope to include the term prevention, recognising the importance of safety for all Australians. The Australian Government understands that abuse can only be prevented if we learn from our mistakes and ensure the stories of victims and survivors inform prevention approaches.

*"This is an opportunity to move protecting children to the centre of the national conversation and keeping a focus on the needs of adults who have been harmed as children" – Survey participant*

The Australian Government media release is available to read at the link [here](#)

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### 3. Consultation process

The department sought feedback from a diverse range of organisations and individuals by holding stakeholder workshops and conducting an online survey.

A mixed method approach to data collection was used to gather information to inform the design of the National Centre. Face to face workshops provided qualitative insights and the survey allowed both qualitative and quantitative information to be gathered.

#### Workshops

Nineteen workshops were conducted across Australia in Adelaide, Alice Springs, Brisbane, Canberra, Darwin, Hobart, Melbourne, Perth and Sydney from October to December 2019.

Workshops were up to 4.5 hours long. The first four initial workshops were facilitated by Services Australia; the remaining 15 were facilitated by Whereto Research according to the design developed jointly by the Commonwealth Department of Social Services and Services Australia.

In addition, short sessions (1-1.5 hours) were held as part of the Australian and New Zealand Association for the Treatment of Sexual Abuse (ANZSATSA) Adolescent Roundtable 2019 and the National Forum for Protecting Australia's Children General Meeting 2019.

An information sheet was developed as a discussion guide to assist workshop conversations; however, each workshop was also tailored to each location and the needs of participants, and optimise the information collected (**Attachment A**).

Workshop attendance ranged from 6-40 participants. Attendees included a range of participants from across government and non-government organisations, victim and survivors, advocacy groups, people who work with victims and survivors, people who work with diverse groups; representative organisations, including Aboriginal and Torres Strait Islander community controlled and peak organisations, community health services and child safety advocates, academia, peak bodies, national and local service providers and policy and decision makers.

#### Online survey

A national online survey was developed by the department and conducted through the DSS Engage platform (see **Attachment C**). Victim and survivor advocacy groups and states and territories provided important input into the survey, which was designed to align with the format, depth, and scope of workshop content. For consistency, survey participants were guided through a range of multiple-choice questions with selections that could be benchmarked against the face to face sessions.

The survey was open to all members of the community to provide input into the design of the National Centre. The survey opened on Monday 17 February 2020, and closed on Sunday 12 April 2020.

An information paper was prepared to assist survey participants (**Attachment B**) The survey was completed by a range of people, with 37% of survey respondents identifying as someone who has lived experience of child sexual abuse.

A summary of the survey demographics is at **Appendix A**.

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## Diverse Populations

Statistical analysis showed that of the survey respondents: 8% identified as Aboriginal and/or Torres Strait Islander people, 11% identified as having a disability, 20% identified as having a culturally and linguistically diverse background, and 10% identified as experiencing institutional care as a child.

### First Nation Peoples

Approximately 22% of the non-government organisations that attended workshops were those who represented the needs and interests of First Nations People. Through their participation, workshops explored the importance of a National Centre that could demonstrate cultural competence and an ability to work in partnership with First Nations communities at a local level, particularly in regional, rural, and remote areas across jurisdictions. First Nations People emphasised the importance of the National Centre's work being informed by, and building on, the work of previous initiatives, such as Closing the Gap and other enquiries.

*“Every region has its own authenticity – it is different to the next. To have healing centres where people have a sense of belonging, will heal the trauma of sexual assault/abuse.”*

*Survey participant*

### Other Population Groups

A range of other population groups, including representation by culturally and linguistically diverse communities such as: people of diverse sex, gender and sexuality; people with a disability; Forgotten Australians/Care Leavers/Child Migrants; older Australians; and regional and remote service providers were well represented in both the workshops and the survey. Of particular interest, were the concerns of those who have experienced past institutional care and their ongoing needs as they age.

*“The National Centre must be guided by the distinct needs and experiences of people in different geographic, cultural and linguistic contexts across the country. This can be achieved through engagement with communities, and frontline service providers, for example Aboriginal community controlled organisations or health services, who are often well-placed to provide advice as well as research and submissions regarding much needed reforms to meet the complex needs of clients.” - Survey participant*

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## 4. Recommendation functions

### Out of scope

The scope of the consultations was defined by the Royal Commission's Recommendation 9.9 and the government's funding announcement.

#### Findings about Royal Commission Recommendation 9.9

Consultation participants were asked to provide ideas on how the National Centre might achieve its aims in relation to Royal Commission Recommendation 9.9.

Throughout this report, feedback from the workshops and online survey are included when referring to Recommendation 9.9 findings. Each area of the recommendation will be address separately.

#### Consultation findings in relation to out of scope items

The following issues were explored in workshops as part of defining the overall scope of the National Centre's work under Recommendation 9.9:

- a focus on child sexual abuse versus all forms of maltreatment and neglect
- direct service delivery (addressed through Royal Commission Recommendations 9.1 to 9.4)
- an initial contact point that would enable people with lived experience and their support people to find out about available support services (addressed through Royal Commission Recommendation 9.5).

It was agreed during consultations that these recommendations were out of scope of Recommendation 9.9, however, the following were identified as important considerations for the National Centre to be aware of.

#### A focus on all forms of child abuse

Some participants wanted the National Centre to have a more general focus on child maltreatment and neglect, given the interlinked nature of these issues with child sexual abuse. Although this is out of scope, its intention to address all forms of child sexual abuse including familial and institutional abuse was welcomed by stakeholders.

#### Initial door / service connection hub

Some participants assumed that the National Centre would play a 'front door' role, connecting people who have experienced child sexual abuse with services, and also providing a 'look up' service where service providers could investigate programs and other services relevant to their clients and then refer them onwards.

Acknowledging that direct service delivery is out of scope for the National Centre, participants outlined the expectation that the National Centre will, as a minimum, be able to respond sensitively and appropriately to queries from people who have experienced child sexual abuse, and their networks, and direct them to appropriate information and support.

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## In Scope

### Recommendation 9.9a

*Raise community awareness and promote destigmatising messages about the impact of child sexual abuse*

#### Workshops

Across the consultations, there was agreement on the need to raise awareness of the impacts of child sexual abuse (including intergenerational impacts, and the experience of living with complex trauma) and reducing stigma faced by those with lived experience of child sexual abuse.

Acknowledging that communication has the potential to facilitate help-seeking, workshop participants advised that any community information and education activity needs to be backed by services with the capacity and capability to listen and provide support people who have experienced child sexual abuse and who may be prompted to disclose, including for the first time.

**Workshop consultation findings on priorities, gaps, and opportunities with respect to 9.9a is:**

Gaps	Opportunities
<ul style="list-style-type: none"><li>• Lack of awareness and understanding of child sexual abuse amongst the general community and many professionals</li><li>• Lack of service capacity to address increased help-seeking</li></ul>	<ul style="list-style-type: none"><li>• Acknowledge the history of child sexual abuse</li><li>• Broaden understanding of child sexual abuse and its impacts through national school-based, community and professional education</li><li>• Support the media to report child sexual abuse responsibly and sensitively</li><li>• Educate people who might bear witness to accounts of child abuse.</li><li>• Develop information, resources, and support to respond to children and young people requiring assistance for behaviours that may be harmful to themselves and others</li></ul>

#### Online survey

*“Greater awareness not only protects children but also challenges stigma and encourages help seeking.” Survey participant*

In the online survey, participants were able to select up to three priorities they identified as the most important areas for the National Centre to focus on, as well as a singular leading priority in relation to Recommendation 9.9a.

More than half (58%) listed ‘a national approach to educating young people in early childhood education and schools’ in their top three priorities. The following were selected as other priorities for the National Centre:

- 
- community-wide education and awareness-raising campaign (selected by 50% of participants).
  - developing and disseminating materials that reach out, engage and better support people who have been sexually abused (44%)
  - information and resources for professionals and workers (38%)
  - training for media on how to represent child sexual abuse responsibly and sensitively (36%)
  - information and resources for parents, carers and community members (34%).

Survey participants were also given the opportunity to prioritise up to three awareness topics for the National Centre.

Half (50%) of all respondents selected ‘information, resources and support to respond to children and young people requiring assistance for behaviours that may be harmful to themselves and others’ as one of their top three priorities.

## Recommendation 9.9b

*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:*

- identify, translate and promote research in easily available and accessible formats for advocacy and support and therapeutic treatment practitioners*
- produce national training materials and best practice clinical resources*
- partner with training organisations to conduct training and workforce development programs*
- influence national tertiary curricula to incorporate child sexual abuse and trauma-informed care*
- inform government policy making*

### Workshops

9.9b was seen by participants as perhaps the most critical of the three components of Recommendation 9.9. The consultation highlighted the importance of building an experienced and suitably qualified workforce to respond to and prevent child sexual abuse and ensure appropriate service access for people with complex trauma.

*“Unfortunately, most traditional care settings and systems do not operate from trauma-informed models, which risks re-traumatising survivors... Complex trauma often goes unrecognised, misdiagnosed or unaddressed, and survivors are required to tell their story multiple times to an array of uncoordinated services, which compounds their experience of trauma.” Submission*

Workshop participants were inclined to believe that quality training exists but needs to be more widely distributed, and that appropriate accreditation, qualifications and training should be made mandatory for any professional who may come into contact with children or adults who have experienced child sexual abuse. However, they were also clear that the National Centre should not become an accreditation agency as this could affect its role as a leader for the sector.

The workshops highlighted that for the National Centre to be seen as a true leader, it will be expected to play a strong advocacy role to drive change in government and non-government service delivery

**Workshop consultation findings on priorities, gaps, and opportunities with respect to 9.9b is:**

Gaps	Opportunities
<ul style="list-style-type: none"> <li>• Structural factors that undermine prevention, disclosure and supportive treatment of people who have experienced child sexual abuse</li> </ul>	<ul style="list-style-type: none"> <li>• Adoption of trauma informed principles in tertiary curricula (e.g. for health, education, community services, disability, law enforcement etc.)</li> <li>• Service delivery models where different sectors and jurisdictions work together, that is, developing better cross sector and cross jurisdiction linkages</li> <li>• National legislation for mandatory reporting, working with children’s checks and age of consent</li> <li>• Consistent national data collection and sharing</li> </ul>
<ul style="list-style-type: none"> <li>• Appropriate accreditation / qualifications and training is not currently mandatory for all sectors that might be expected to come into contact with children or adults who have experienced child sexual abuse</li> <li>• A need for greater accountability for service providers, not all of whom are considered to be effective</li> </ul>	<ul style="list-style-type: none"> <li>• Produce a workforce development strategy</li> <li>• Develop national standards and guidelines for training and accreditation</li> <li>• Develop a resource hub / online portal for practitioners</li> <li>• Instigate and champion better knowledge translation, training, and more specialisation in the sector</li> <li>• Advocate for education and capability building for generalist services and adoption of child protection principles and approaches in generalist services</li> </ul>

**Online survey**

In the online survey, participants were able to select up to three priorities as the most important for the National Centre to focus on and also nominate a top priority.

The top priorities selected were:

- ensuring that relevant training organisations and courses cover trauma-informed principles (55%)

NB - people who identified as having lived experience of childhood sexual abuse were more likely to list this as a priority (61%)

- identifying opportunities for different sectors to better meet the needs of people who have experienced child sexual abuse (48%)
- advocacy for national standards for child-safe culture and policies for organisations that work with children (41%)

Survey participants were also asked to identify from a list, up to three options they thought the National Centre should prioritise to drive practice and policy improvement. They nominated the following as being top three priorities:

- consistent national legislation (67%)
- services understanding how to respond to someone who is affected by child sexual abuse (63%)
- people who work in the community knowing how to respond to child welfare concerns (57%).

## Recommendation 9.9c

*Lead the development of better service models and interventions through coordinating a national research agenda and conducting high-quality program evaluation*

### Workshop

Consultation participants acknowledged that there is already considerable research being conducted in the field of child sexual abuse in Australia and overseas, (albeit with some notable gaps, as identified in workshop findings on priorities, gaps, and opportunities below) and that there is a need to increase translation and dissemination of findings as practical, actionable outcomes that are accessible to all who have a need for it.

There was an expectation among participants that the National Centre would identify gaps in the evidence base, drive the research agenda and facilitate conduct of relevant research. This was expected to be underpinned by the principles of collaboration and partnership with a wide range of stakeholders such as researchers, academics, practitioners and those working in related sectors, such as family violence.

*“We don’t want to see more beautifully presented resources that we can’t translate at a service delivery level because there is no money to try to find practical steps to instigate the work or undertake the training.” Workshop participant*

Workshop consultation findings on priorities, gaps, and opportunities with respect to 9.9c are:

Gaps	Opportunities
<p>The following areas were seen as gaps in the current evidence base:</p> <ul style="list-style-type: none"> <li>• Understanding of the impacts of complex trauma and child sexual abuse</li> <li>• An Australian-specific evidence base</li> <li>• Understanding evolving online risks (deriving from access to pornography and grooming)</li> <li>• Evidence for treatment programs for offenders and early intervention for those at risk of offending (including for young people)</li> </ul>	<ul style="list-style-type: none"> <li>• An audit of existing research identifying and prioritising gaps in evidence / translation</li> <li>• Developing a national research agenda to prioritise and unify the work of the National Centre and other researchers</li> <li>• Commissioning / advocating for development of new interventions / service models</li> <li>• Developing an overarching conceptual framework for the prevention of child sex abuse</li> <li>• Ensuring that the expertise of people with lived experience is central in determining best practice</li> <li>• Translation of research into practical guidance</li> <li>• Creating a Human Research Ethics Committee for research into child sexual abuse</li> </ul>

Gaps	Opportunities
<p>In addition, other barriers to good evidence were:</p> <ul style="list-style-type: none"> <li>• Lack of evaluation of existing programs and initiatives to determine best practice</li> <li>• On ground services are collecting a lot of good data but it is not always utilised or analysed.</li> <li>• The involvement of Human Research Ethics Committees can make it harder to include children in research</li> </ul>	<ul style="list-style-type: none"> <li>• Commissioning / advocating for evaluations of existing practice</li> <li>• Supporting organisations that provide services to evaluate their work and feed the data they collect into national statistics</li> <li>• International interventions for the Australian context</li> <li>• Current Australian service delivery practice</li> </ul>

### Online survey

Survey respondents' 'top three' priorities for evaluation and research were:

- including the insights of children and adults with experience of childhood sexual abuse in shaping best practice was the most important priority (63%)
- developing a national research agenda to prioritise and unify the work of the National Centre and other researchers (35%)
- an audit of existing research, identifying, and prioritising gaps in evidence (35%).

Survey participants were also asked to prioritise areas of focus for the National Centre with regards to developing and supporting better service models and interventions. They nominated the following as being the top three priorities the National Centre could focus on:

- improving services for people who have experienced child sexual abuse (61%)
- developing therapeutic approaches for children and young people who may require assistance for challenging behaviours (40%)
- improving services for diverse communities (38%).

## Consultation findings in relation to prevention

During consultations, participants were asked to explore prevention in the context of the core National Centre functions outlined in Recommendation 9.9.

Most participants and survey respondents acknowledged that prevention is important and needed work, and there was support for this being a focus of the National Centre.

However, a number of participants highlighted that the inclusion of a primary prevention focus should not prevent achievement of the Royal Commission's original intent of Recommendation 9.9. This sensitivity tended to be heightened among those who have experienced, or who are working closely with people who have experienced, child sexual abuse.

Participants identified the need to better understand how to protect children from harm, recognising that sexual abuse often exists as part of a wider context of abuse and neglect. The increasing issue of online harm was seen as an area where children and parents need urgent support. In addition, many participants saw the need for a multi-disciplined, ongoing effort to develop a positive culture of nurturing children that is sensitive to cultural differences.

*“I hope it brings recognition of the harm that child sexual abuse causes and that it brings the changes that are needed so that children are spared this happening to them. Children are so vulnerable and every child deserves a safe and happy childhood.” Survey participant*

The table below lists the gaps and opportunities identified by survey participants in relation to prevention:

Gaps	Opportunities
Participants who were in favour of prevention were eager to see a deeper level of understanding developed within the community, to support prevention of child sexual abuse	Participants identified a need for a better understanding of how to protect children from harm
There was considerable support in relation to the ‘secondary’ and ‘tertiary’ prevention aims, to support those who are vulnerable, and prevent further harm by providing appropriate support for people with lived experienced of child sexual abuse	Participants were looking for the National Centre to prioritise the following in relation to prevention: <ul style="list-style-type: none"> <li>• developing a national primary prevention framework / ecological prevention model</li> <li>• building community understanding of broader child safety issues and protective factors that support parents, organisations and communities to protect children from harm</li> </ul>

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## 5. National Centre model and governance

### Model

Stakeholders contributed a number of ideas about the National Centre's model and governance. These included whether the National Centre could be run by an existing organisation such as a university, or provider, formation of a consortium, clearinghouse, or a statutory authority. Types of models included hub and spokes approaches and online structures that are agile and avoid duplication. Stakeholders considered that it was critical that the National Centre maintained its independence from, while still ensuring a close working relationship with government.

### Governance

Stakeholders saw the value of a well-connected, representative, and inclusive Board, supported by a number of expert advisory committees or reference groups.

Key relationships for the National Centre to formally engage with included: victims and survivors; advocacy groups; diverse communities; Commonwealth, state and territory governments; and service delivery organisations. Stakeholders suggested this could be achieved through the establishment of expert or advisory groups, and those groups should be representative across different population groups. Stakeholders also suggested the National Centre should engage directly at the local level.

When the survey asked how the National Centre could engage with "people like yourself", responses differed very little by cohort or state. The most commonly described method was regular updates through emails, media, social media, websites, newsletters, pamphlets and videos (27%).

In addition, survey participants were asked to suggest ways of ensuring the National Centre and its operations remain independent from government. Almost half (45%) of respondents preferred to skip this question. Of those who did respond, the top three responses suggested:

- establishing an independent board, nominated across all states and disciplines (12%)
- being governed as an independent public company (12%) and,
- transparent processes, accountability structures and ongoing and annual reporting (9%).

*"As I work mainly with survivors of abuse, I hope that it would be a place for their voices to be heard and for them to be able to become involved in a positive way in prevention, education and research." Survey participant*

### Risks

A number of risks were raised in relation to the operational model and governance arrangements. They were:

- **Funding** - the need for the National Centre to find funding past its first five years, and develop a sustainable funding source was a key concern for participants. Being able to demonstrate fundraising ability, and the governance processes that would ensure prioritisation of ongoing sustainability of the National Centre was seen as a risk and priority for selection of the entity who will run the National Centre.

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- **Referrals** – being able to appropriately refer people who directly contact the National Centre for support was also a consideration for participants. Clearly marketing the role of the National Centre may help to mitigate against unmet community expectations. However, the National Centre would still need to have appropriate and robust pathways in place for people who have experienced child sexual abuse and their support people, to ensure there is ‘no wrong door’ for people who contact the National Centre needing support or to report concerns.
  - **Roles and responsibilities** - participants wanted to see a clear delineation of roles and responsibilities between the National Centre and related Royal Commission recommendations (e.g. the National Office for Child Safety and the National Strategy).
  - **Complementing / not competing with existing services** - Participants expressed concern that the National Centre will compete with, rather than work for, existing organisations (including for funding) as well as ‘wasting money reinventing the wheel’.
  - **Inclusive** - Participants wanted to ensure that any entity would be inclusive of a wide range of stakeholders, and reach beyond its existing membership base.

While some of these concerns will be addressed through the competitive selection process and forward work plan developed by the National Centre, roles and responsibilities will continue to be defined between the Department of Social Services and those leading other Royal Commission recommendations, such as the National Office of Child Safety, and states and territories, the e-Safety Commission, and the Australian Centre to Counter Child Exploitation (ACCCE).

Inclusivity across stakeholder groups, and broad representation on working groups including victim and survivor and sector representation, is expected to form part of the National Centre governance model.

## Opportunities/priorities for action

People saw important criteria in establishing the National Centre model as:

- clearly establishing a unique role and focus
- establishing robust governance structures early in the process
- having a leader that earns trust and respect across the relevant sectors and who is able to be an advocate for the sector (including to government policy makers and funders)
- establishing a connection to all states and territories and at the local community level; playing a unifying role across sectors and jurisdictions.

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## 6. Impact / key success factors

Participants discussed the importance of the National Centre being able to achieve highly visible outcomes in a short period of time, whilst also acknowledging the challenges in measuring impact and success.

Workshop participants were eager to see the National Centre influencing changes to practice as soon as possible. Examples included seeing changes in the language used by media, and training and skill building for those who are likely to come across people who have past experience of abuse.

Shorter-term indicators that would show the National Centre is achieving its goals would include:

- the National Centre has a high profile (e.g. media, stakeholder)
- the National Centre has a high level of engagement with community and stakeholders
- the National Centre online portal is used (e.g. as measured by web hits)
- users of the National Centre report satisfaction (e.g. advocates, service providers, policy makers, researchers)
- all jurisdictions report that the National Centre facilitates their work (e.g. as measured through surveys).

Online survey participants were asked what they would like to see the National Centre achieve in its first five years. One in five (20%) nominated public awareness or education activities. Other common priorities included:

- consistent policies and legislation and improving the justice system (15%)
- a national evidence-based database of journal articles, interventions, and resources (14%)
- accessible and evidence-based services being made available to victims and survivors (13%)
- development of a research roadmap, identifying research gaps and opportunities for upscaling existing programs (13%).

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## 7. Feedback from people with lived experience

Statistical analysis showed that 37% of responses to the online survey were from people who identified as having lived experience of child sexual abuse. Their voices are key in informing the National Centre's vision and priorities.

The survey asked respondents which of the three components of the recommendation, 9.9a, 9.9b or 9.9c, was their top priority for the National Centre to focus on. In line with the overall findings from the qualitative workshops, recommendation 9.9b was chosen by the majority of this group of respondents as the most important of the three, with 38% of those with lived experience selecting this. Recommendation 9.9c was selected as the next most important with 32% followed by 9.9a at 28%.

Under each component of the recommendation, respondents were able to select up to three priorities for the National Centre and the highest priority of these options.

With regards to **recommendation 9.9a**, those with lived experience identified the following as their top rated priorities for awareness topics -

- A national approach to educating young people in early childhood education and schools (30%)
- A community-wide education and awareness-raising campaign (20%)
- Development and dissemination of materials that reach out, engage and better support people who have been sexually abused (19%)

Of those responses, the highest overall priority for recommendation 9.9a was the need to develop "A national approach to educating young people in early childhood education and schools", with 38% of all lived experience respondents selecting this. As one respondent stated:

*"Please, please help our children - sexual abuse is way too common and education is the only way to make positive change."- Survey participant*

For **recommendation 9.9b**, the three highest priorities identified by lived experience respondents were:

- Identify opportunities for different sectors to better meet the needs of people who have experienced child sexual abuse (i.e. health, education, aged care, law enforcement, justice) (25%)
- Make sure relevant training organisations and courses cover trauma-informed principles (e.g. for health, education, community services, disability, aged care, law enforcement, professionals) (22%)
- Advocacy for national standards for child-safe culture and policies for organisations that work with children (e.g. health, education, community services, disability, law enforcement) (14%)

Lived experience survey participants were also asked to identify from a list, up to three options they would prioritise for the National Centre to drive practice and policy improvement. They nominated the following as being the top three priorities:

- Services understand how to respond to someone who is affected by child sexual abuse (e.g. people who have experienced child sexual abuse and their families) (33%)
- Consistent national legislation (e.g. for mandatory reporting, working with children and age of consent checks) (21%)
- People who work in the community (such as health, education, community services, disability, law enforcement) know how to respond to child welfare concerns (20%)

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In response to the priorities for **recommendation 9.9c**, lived experience respondents chose the following as the three highest priorities:

- Include the insights of child and adult survivors in shaping best practice (42%)
- Developing a national research agenda to prioritise and unify the work of the National Centre and other researchers (13%)
- An audit of existing research, identifying and prioritising gaps in evidence (9%)

*“It is pivotal that the design is influenced by those who have experienced child sexual abuse (victims, family members, supporters)”- Survey participant*

Finally, lived experience respondents identified the following priorities in developing better service models and interventions:

- Improving services for people who have experienced child sexual abuse (37%)
- Developing therapeutic approaches for children and young people who may require assistance for behaviours that may be harmful to themselves and others (13%)
- Improving interventions for people who have perpetrated child sexual abuse (9%)

Although there were diverse views from the lived experience respondents about the role of the National Centre in the prevention of child sexual abuse, survey analysis showed overall strong support for the implementation of the National Centre, and its key role in supporting victims and survivors and the prevention of future child sexual abuse.

*“Simply that it might find a way to make child sexual abuse less common, that it can reduce the number of potential cases”- Survey participant*

Valuing the knowledge and experience of those with lived experience was a significant factor to inform the designing and establishing the National Centre. The online survey, in particular, provided a safe place for this group to give voice to their past experiences and share what is most important to them about the future role and function of the National Centre.

## 8. Jurisdiction reports

### Australian Capital Territory (ACT)

Australian Capital Territory Key Workshop consultation findings are attached as a table below:

<p><i>Working well:</i></p> <ul style="list-style-type: none"> <li>Existing networks that are effective, such as the Aboriginal health services model that provides wrap around services</li> <li>Existing research – Australia’s National Research Organisation for Women’s Safety, Australian Institute of Family Studies</li> </ul>	<p><i>Key gaps:</i></p> <ul style="list-style-type: none"> <li>Service delivery for regional and remote communities</li> <li>Lack of co-ordination across services due to funding approach to move people out of services</li> <li>Lack of collaboration across services due to competition for funding and clients</li> </ul>
<p><i>Model &amp; Governance:</i></p> <ul style="list-style-type: none"> <li>Needs to have a physical presence - either have a Canberra office or close to Canberra</li> <li>Potentially located at a University – to bring people together (for training), as a neutral ground, provide the ‘right optics’</li> <li>Complemented with virtual services</li> </ul>	<p><i>Measures of success:</i></p> <ul style="list-style-type: none"> <li>Tangible outputs – reports and research evaluation</li> <li>Engagement with communities and practitioners</li> <li>Well known – becoming a centre of influence</li> <li>Shift in attitudes (over time)</li> <li>Decrease in incidence (over time)</li> </ul>

#### Online survey findings

##### Recommendation 9.9a

When asked to prioritise up to three actions aimed at creating community awareness and reducing stigma around childhood sexual abuse, ‘creating a national approach to educating young people in early childhood education and schools’ was most commonly selected by survey respondents from the ACT (70%). This was followed by:

- a community-wide education and awareness-raising campaign (45%)
- training for media on how to represent child sexual abuse responsibly and sensitively (40%)
- information and resources for parents, carers and community members (40%)

##### Recommendation 9.9b

Survey respondents from the ACT were asked to identify up to three priorities in relation to increasing worker knowledge and competence in responding to child and adult victims and survivors. ‘Identifying opportunities for different sectors to better meet the needs of people who have experienced child sexual abuse’ (55%) and ‘making sure relevant training organisations and courses cover trauma-informed principles’ were the most commonly listed priorities (55%).

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### Recommendation 9.9c

Survey respondents from the ACT completing the survey were able to select up to three priorities the National Centre should focus on when developing a research and evaluation agenda. 'Developing a national research agenda to prioritise and unify the work of the National Centre and other researchers' was most often selected as a priority (55%) of ACT. This was significantly higher than the national average (35%).

## New South Wales

New South Wales Key Workshop consultation findings are attached as a table below:

<p><i>Working well:</i></p> <ul style="list-style-type: none"> <li>• Support for people who have experienced child sexual abuse</li> <li>• Royal Commission, Redress Scheme</li> <li>• Protective behaviours network resources</li> <li>• Increased mandatory reporting, evidence-based practise</li> </ul>	<p><i>Key gaps:</i></p> <ul style="list-style-type: none"> <li>• Research on socio-cultural drivers of child sexual abuse and levers to reduce</li> <li>• Understanding of complex trauma</li> <li>• Co-ordination of all research activities</li> <li>• Trauma informed research and practice</li> <li>• Comprehensive map of the service sector</li> </ul>
<p><i>Model &amp; Governance:</i></p> <ul style="list-style-type: none"> <li>• Has a bricks and mortar ‘place’ plus an online activity/presence – webinars and conferences</li> <li>• Could be a consortia</li> <li>• Board with professional representation (50% psychologist/psychiatrist) and lived experience (25%) plus other disciplines (academics, philanthropists, clergy, medical, legal, children’s voice)</li> </ul>	<p><i>Measures of success:</i></p> <ul style="list-style-type: none"> <li>• Buy in by all stakeholders: government, people who have experienced child sexual abuse, service sector</li> <li>• More people who have experienced child sexual abuse having needs met and fewer being traumatised,</li> <li>• Standardised training across different disciplines</li> <li>• Conduction regular research and dissemination of knowledge</li> </ul>

### Online survey findings Recommendation 9.9a

When asked to select actions aimed at creating community awareness and reducing stigma around childhood sexual abuse, NSW survey respondents prioritised:

- the implementation of a national approach to educating young people in early childhood education and schools (57%)
- community-wide education and awareness-raising campaign (52%)
- development and dissemination of materials that reach out, engage and better support people who have been sexually abused (45%)
- information and resources for professionals and workers (41%)

### Recommendation 9.9b

Key priorities identified by NSW respondents for the National Centre to focus on with regard to increasing worker knowledge and competence in responding to child and adult victims and survivors were:

- 
- making sure relevant training organisations and courses cover trauma-informed principles was among their top three priorities (57%)
  - identifying opportunities for different sectors to better meet the needs of people who have experienced child sexual abuse (48%)
  - advocacy for national standards for child-safe culture and policies for organisations that work with children (39%)
  - developing a national workforce strategy to build and improve skills (30%)

### **Recommendation 9.9c**

NSW survey respondents were asked to choose up to three priorities for the National Centre to focus on when developing a research and evaluation agenda. 'Including the insights of child and adult victims and survivors in shaping best practice' was most commonly selected (55%). Other priorities selected by NSW respondents were:

- developing a national research agenda to prioritise and unify the work of the national centre and other researchers (39%)
- evaluation of existing practice or programs (34%)

## Northern Territory

Please note: 4% of survey respondents identified as being from the Northern Territory. To protect participant anonymity, the survey findings have not been reported quantitatively. A summary of consolidated key findings from both the workshops and survey is outlined below.

Northern Territory Key Workshop consultation and online survey findings are attached as a table below:

<p><i>Working well:</i></p> <ul style="list-style-type: none"> <li>• Culturally appropriate responses to child sexual abuse</li> <li>• Involvement of elders, the Women’s Council and action research groups to have conversations about relevant issues</li> <li>• Community law and justice groups</li> <li>• Joint western and traditional healing methods</li> <li>• Good relationships between services</li> <li>• A placed based App that supports linkages and referrals</li> </ul>	<p><i>Key gaps:</i></p> <ul style="list-style-type: none"> <li>• Appropriate services in remote areas</li> <li>• Information and education in language</li> <li>• Monitoring and evaluation frameworks</li> <li>• Training and support for generalist practitioners</li> <li>• An ecological prevention model which includes individual, family and community</li> <li>• Interventions for people at risk of or who have perpetrated child sexual abuse</li> </ul>
<p><i>Model &amp; Governance:</i></p> <ul style="list-style-type: none"> <li>• Includes people with lived experience in remote areas</li> <li>• Provides virtual training and simplified resources in language</li> <li>• Brings relevant sectors together</li> <li>• A peak body</li> <li>• Works with existing organisations</li> <li>• Board of high level experts</li> <li>• Independent advocacy model</li> <li>• Visionary leadership to cut across silos</li> <li>• Hub and spokes models – people on the ground all over the country</li> <li>• Clearinghouse model for resources to be translated locally</li> </ul>	<p><i>Measures of success:</i></p> <ul style="list-style-type: none"> <li>• More national approaches</li> <li>• Media is more trauma informed and less race based</li> <li>• Increased access to services</li> <li>• Increased interventions for people who have perpetrated child sexual abuse</li> <li>• Increased service satisfaction</li> <li>• Increased access to training</li> <li>• Networks are established with relevant sectors</li> <li>• Increases in disclosures</li> <li>• Lower incidence of child sexual abuse</li> <li>• Reduce workforce turnover</li> </ul>

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### Priorities for Action in the Northern Territory:

Priorities identified by workshop participants in the Northern Territory were:

- developing appropriate services in remote areas
- increasing the availability of housing
- developing monitoring and evaluation frameworks
- training and support for therapeutic services
- training and support for universal services to ensure that they are appropriate / able to work with people
  - with complex trauma
- development of culturally safe trauma training programs
- upskilling general services (like schools and health clinics) to have disclosure conversations
- developing minimum standards for supporting people who have experienced child sexual abuse
  - post disclosure
- addressing sector under-resourcing / burn out

# Queensland

Queensland Key Workshop consultation findings are attached as a table below:

<p><i>Working well:</i></p> <ul style="list-style-type: none"> <li>Local and national events and monuments to raise awareness and understanding of the prevalence and impact of child sexual abuse</li> <li>Examples of good practice are (e.g. Bravehearts provides holistic approach to responding to child sexual abuse)</li> <li>Training (Blue Knot, Gallang Place providing culturally appropriate training in trauma informed practice, Lotus Place training child safety officers state-wide)</li> </ul>	<p><i>Key gaps:</i></p> <ul style="list-style-type: none"> <li>Evidence based, holistic and multidimensional approaches to responding to and preventing child sexual abuse</li> <li>Specific targeted strategies for Indigenous, culturally diverse and LGBTQI+ people</li> <li>Service delivery in rural and remote communities</li> <li>Training for general professionals – trauma informed, understanding of child sexual abuse</li> <li>Secure funding for research and evaluation to enhance service delivery and professional practice</li> </ul>
<p><i>Model &amp; Governance:</i></p> <ul style="list-style-type: none"> <li>Possible models include: centre of excellence, ‘hub &amp; spoke’</li> <li>governed by a board of directors; advised by steering committees: reflecting different jurisdictions, diverse population cohorts and people who have experienced child sexual abuse</li> <li>Needs to be independent of government, but still have an ability to influence government</li> <li>Must create partnerships with relevant organisations to deliver initiatives/conduct research</li> <li>Staff will need to actively engage and be in community – particularly in regional/remote areas</li> </ul>	<p><i>Measures of success:</i></p> <ul style="list-style-type: none"> <li>Needs to do more than produce outputs (i.e. tools, research); we need to see meaningful outcomes and actual change e.g.             <ul style="list-style-type: none"> <li>increased awareness and help-seeking</li> <li>lives of people who have experienced child sexual abuse improving (decreased homelessness rates, decreased drug and alcohol use, decreased incarcerations, increased access to services)</li> <li>breaking the cycle of intergenerational trauma</li> </ul> </li> <li>Legislation change</li> <li>Training implemented and evaluated</li> </ul>

## Online survey findings Recommendation 9.9a

When asked to identify up to three actions that should be prioritised in relation to raising community awareness about the impacts of child sexual abuse, ‘creating a community-wide education and awareness raising campaign’ was selected by most Queensland respondents (62%).

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Other actions Queensland respondents listed as priorities in relation to community awareness were:

- a national approach to education young people in early childhood education and schools (52%)
- development and dissemination of materials that reach out, engage and better support people who have been sexually abused (52%).

### **Recommendation 9.9b**

Queensland respondents were asked to identify up to three priorities with regard to increasing worker knowledge and competence in responding to child and adult victims and survivors.

The priorities most commonly selected by Queensland survey respondents were ‘identifying opportunities for different sectors to better meet the needs of people who have experienced child sexual abuse’ (53%) and ‘making sure relevant organisations and courses cover trauma-informed principles’ (52%).

Other priorities selected by Queensland respondents were:

- advocacy for national standards for child-safe culture and policies for organisations that work with children (41%)

### **Recommendation 9.9c**

Queensland respondents were asked to choose up to three priorities for the National Centre to focus on when developing a research and evaluation agenda. They prioritised:

- the inclusion of insights of child and adult victims and survivors to shape best practice (60%)
- developing a national research agenda to prioritise and unify the work of the National Centre and other researchers (47%)
- an audit of existing research, identifying, and prioritising gaps in evidence (36%).

## South Australia

South Australia Key Workshop consultation findings are attached as a table below:

<p><i>Working well:</i></p> <ul style="list-style-type: none"> <li>• Many of the recommendations instituted in response to the 2016 Nyland Report.</li> <li>• Strong information sharing guidelines, legislation and policy</li> <li>• Department of Child Protection Practice approach, specifically trauma informed lens</li> <li>• Education of sectors that don't directly deal with child sexual abuse as their primary role</li> <li>• Greater community awareness since the Royal Commission</li> </ul>	<p><i>Key gaps:</i></p> <ul style="list-style-type: none"> <li>• Children and young peoples' knowledge about and language around respectful relationships and healthy sexual behaviours</li> <li>• Messages targeted to children</li> <li>• Community-wide understanding and engagement with topic of child sexual abuse</li> <li>• A national profile / increased awareness for the issue of child sexual abuse</li> </ul>
<p><i>Model &amp; Governance:</i></p> <ul style="list-style-type: none"> <li>• Bricks and mortar: building gives sense of security / credibility, need to be able to talk to people, can only do so much online</li> <li>• Model practice around 'consumer' engagement, in governance and as a point of reference, at all levels of the organisation</li> <li>• High profile leadership: Chair and CEO</li> <li>• Requires independent Board: To hold organisations to account; supported by advisors (mix of people who have experienced child sexual abuse, clinicians, and people with governance experience, experiencing translating research into practice).</li> </ul>	<p><i>Measures of success:</i></p> <ul style="list-style-type: none"> <li>• Evidence of changing public narrative</li> <li>• People and organisations want to identify with it and be a part of the National Centre</li> <li>• States, territories, and NGOs signed up to a public health action plan</li> <li>• Evidence-based resources and information available</li> <li>• Needs to hit the ground running</li> <li>• High level and high-profile advocacy</li> <li>• Increased awareness</li> <li>• Community owned systems in Aboriginal areas</li> </ul>

### Online survey findings Recommendation 9.9a

When South Australian respondents were asked to identify up to three actions the National Centre should prioritise to raise community awareness about the impacts of child sexual abuse, 'a national approach to education young people in early childhood education and schools' was the most commonly selected action - almost three in five (58%) listed this in their top three priorities.

Other selected priorities were:

- development and dissemination of materials that reach out, engage and better support people who have been sexually abused (46%)
- information and resources for professionals and workers (46%)

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### **Recommendation 9.9b**

South Australian respondents were asked to identify up to three priorities regarding increasing worker knowledge and competence in responding to child and adult victims and survivors. Making sure relevant organisations and courses cover trauma-informed principles was the most commonly listed priority – nearly three in five (58%) had this action in their top three. Half (50%) of respondents felt that identifying opportunities for different sectors to better meet the needs of people who have experienced child sexual abuse should be the top priority, while more than four in ten (45%) felt that advocacy for national standards for child-safe culture and policies for organisations that work with children should be prioritised.

### **Recommendation 9.9c**

South Australian respondents were asked to select up to three priorities for the National Centre to focus on in developing a research and evaluation agenda. Almost three-quarters (72%) listed the inclusion of insights of child and adult victims and survivors in shaping best practice in their top three priorities. Approximately two in five (43%) listed an audit of existing research in their top three.

## Tasmania

Note 3% of survey respondents identified as being from Tasmania. To protect participant anonymity, the survey findings have not been reported quantitatively. A summary of consolidated key findings from both the workshops and survey is outlined below.

**Tasmanian Key Workshop consultation and online survey findings are attached as a table below:**

<p><i>Working well:</i></p> <ul style="list-style-type: none"> <li>• Public awareness campaigns</li> <li>• New public advice and referral hotline</li> <li>• Increase in professional development and</li> <li>• Strong education capability and capacity building delivered locally</li> <li>• Interventions for online child sexual abuse</li> <li>• Mandatory treatment of incarcerated convicted offenders</li> <li>• Research resources</li> </ul>	<p><i>Key gaps:</i></p> <ul style="list-style-type: none"> <li>• Service coordination</li> <li>• Services accessibility outside urban centres</li> <li>• Guidelines and resources for evaluation of programs</li> <li>• Baseline understanding and awareness of healthy sexual development and behaviours</li> <li>• Increased services</li> <li>• Early intervention programs for people experiencing unhealthy sexual thoughts</li> <li>• Leadership for de-stigmatisation</li> <li>• National certification and qualifications</li> </ul>
<p><i>Model &amp; Governance:</i></p> <ul style="list-style-type: none"> <li>• Peak body model</li> <li>• Commission model with two reams – culture change and child advocacy</li> <li>• Strong online presence</li> <li>• Professional developing tracking capability</li> <li>• National headquarters and virtual presence in each state</li> </ul>	<p><i>Measures of success:</i></p> <ul style="list-style-type: none"> <li>• Reduced ‘stranger danger’ narrative in schools</li> <li>• Quick establishment and evidence of early work</li> <li>• Visible local impact</li> <li>• Respected in the sector</li> </ul>

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*Priorities for action in Tasmania:*

Priorities identified by workshop participants in Tasmania were:

- the need for service coordination
- developing access to services away from urban centres, in remote areas
- increased funding
- developing local training opportunities
- mitigation for online and socio-cultural threats
- developing guidelines and resources for evaluation of programs
- developing community awareness of child sexual abuse
- developing a baseline understanding and awareness of healthy sexual development and behaviours
- increased availability of programs / counselling services for people who have experienced child sexual abuse
- increased availability of prevention and early intervention programs for people experiencing unhealthy sexual thoughts
- development of a strong voice / leadership for destigmatisation
- increasing the ability of healthcare providers to address sexual harm
- developing nationally consistency checks, certifications and qualifications
- research into perpetrator behaviour

## Victoria

Victoria Key Workshop consultation findings are attached as a table below:

<p><i>Working well:</i></p> <ul style="list-style-type: none"> <li>• Advocacy and support organisations (e.g. In Good Faith Foundation) – including outreach and practitioner education</li> <li>• Mandatory reporting – extending responsibility for protecting children to the broader community</li> <li>• High quality information platforms such as the Raising Children Network and the eSafety Commissioner</li> <li>• Anglicare Victoria’s Rapid Response Program as a model for at risk children</li> <li>• Australian’s Attitudes to Violence Against Women Survey – a model to adopt</li> </ul>	<p><i>Key gaps:</i></p> <ul style="list-style-type: none"> <li>• Systemic barriers to disclosure / lack of action on reporting</li> <li>• Understanding of trauma and child sexual abuse in general services (e.g. health, law enforcement, welfare etc.)</li> <li>• Silos between sectors and organisations</li> <li>• Community and general sector (e.g. health, welfare, education, law enforcement) understanding of child sexual abuse</li> <li>• Inconsistent practices / legislation across jurisdictions / need for a national collaborative approach</li> <li>• Primary prevention and early intervention – needs adequate funding</li> </ul>
<p><i>Model &amp; Governance:</i></p> <ul style="list-style-type: none"> <li>• Independent of government</li> <li>• An advocate for people who have experienced child sexual abuse – promoting awareness and better models of care</li> <li>• Can be a virtual hub</li> <li>• Can be a consortium – but must be inclusive</li> <li>• Visible / powerful enough to drive real change – effective, having gravitas and leadership</li> <li>• Needs multiple ways to interact with stakeholders (doesn’t necessarily mean a physical shopfront)</li> <li>• Not top heavy/bureaucratic – independent of government</li> </ul>	<p><i>Measures of success:</i></p> <ul style="list-style-type: none"> <li>• The virtual hub is used (e.g. web hits)</li> <li>• Prevention embedded into family life – education for parents</li> <li>• Centre is an evidence based trusted safe space</li> <li>• There is no stigma in disclosing</li> <li>• There is a shift in focus to include familial abuse</li> <li>• National, consistent legislation (e.g. child protection, mandatory reporting).</li> <li>• Information seeking becomes quicker</li> <li>• Number of times children have to disclose before they are listened to and supported is reduced</li> </ul>

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## Online survey findings

### Recommendation 9.9a

When asked to select three key actions aimed at creating community awareness and reducing stigma around childhood sexual abuse, just over half (55%) of all Victorian respondents listed ‘a national approach to educating young people in early childhood education and schools’.

Other prioritised actions in relation to community awareness and stigma reduction included:

- development and dissemination of materials that reach out, engage and better support people who have been sexually abused (46%)
- a community-wide education and awareness-raising campaign (44%)
- information and resources for professionals and workers (39%)

### Recommendation 9.9b

Victorian survey respondents were asked to identify up to three priorities regarding recommendation 9.9b – increasing worker knowledge and competence. ‘Making sure relevant training organisations and courses cover trauma-informed principles’ was highest ranked with half (51%) of Victorian survey respondents listing it in their top three. ‘Identifying opportunities for different sectors to better meet the needs of people who have experienced child sexual abuse’ was the next highest priority action (45%).

Other priorities selected by Victorian respondents included:

- advocacy for national standards for child-safe culture and policies for organisations that work with children (35%)
- review and develop national standards for training and accreditation (25%)
- develop a national workforce strategy to build and improve skills (24%).

### Recommendation 9.9c

Victorian survey respondents were asked to select three priorities that National Centre should focus on in relation to developing a research and evaluation agenda. ‘Including the insights of child and adult victims and survivors in shaping best practice’ was most often selected as a key priority – by close to seven in ten (68%) respondents.

Other priorities included:

- developing a national research agenda to prioritise and unify the work of the national centre and other researchers (33%)
- an audit of existing research, identifying, and prioritising gaps in evidence (29%).

## Western Australia

Western Australia Key Workshop consultation findings are attached as a table below:

\*see Appendix 1 for more detail

<p><i>Working well:</i></p> <ul style="list-style-type: none"> <li>• Four symposia in Perth, addressing various aspects of child sexual abuse and working to decrease stigma</li> <li>• Increasing awareness of the complexity of offending behaviour</li> <li>• Legal Aid WA has an education program teaching young people about legal issues re sexting etc.</li> </ul>	<p><i>Key gaps:</i></p> <ul style="list-style-type: none"> <li>• Involvement of Aboriginal communities/organisations in delivery and design of services for Aboriginal people.</li> <li>• Supporting partnerships between mainstream and Aboriginal organisations</li> <li>• Remote services</li> <li>• Funding for more sector collaboration/roundtables to share successes and learnings</li> </ul>
<p><i>Model &amp; Governance:</i></p> <ul style="list-style-type: none"> <li>• Independent board (with quotas to ensure representation i.e. 55% Aboriginal)</li> <li>• Report into government</li> <li>• Centralised resource hub and excellent website</li> <li>• High profile ambassadors</li> <li>• Be a clearing house; bring people together</li> <li>• Integrate not duplicate; agile team (expands and contracts as needed/brings in specialist skills)</li> </ul>	<p><i>Measures of success:</i></p> <ul style="list-style-type: none"> <li>• Integrates, not duplicates</li> <li>• Achieves representation on Board</li> <li>• Policy/legislative change</li> </ul>

### Online survey findings

#### Recommendation 9.9a

When asked to prioritise up to three actions aimed at creating community awareness and reducing stigma around childhood sexual abuse, 'creating a national approach to educating young people in early childhood education and schools' was rated highest by Western Australian survey respondents (66%).

Other selected priorities included:

- a community-wide education and awareness-raising campaign (54%)
- development and dissemination of materials that reach out, engage and better support people who have been sexually abused (41%).

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### **Recommendation 9.9b**

Western Australian respondents were asked to identify up to three priorities for the National Centre to focus on with regard to increasing worker knowledge and competence in responding to child and adult victims and survivors. Western Australian survey respondents identified making sure relevant training organisations and courses cover trauma-informed principles as one of the key priorities, with over three in five (61%) including it in their top three.

Other priorities included:

- identify opportunities for different sectors to better meet the needs of people who have experienced child sexual abuse (48%)
- advocacy for national standards for child-safe culture and policies for organisations that work with children (48%).

### **Recommendation 9.9c**

Western Australian survey respondents were asked to select three priorities that National Centre should focus on in relation to developing a research and evaluation agenda. 'Including the insights of child and adult victims and survivors in shaping best practice' was selected as a priority by two thirds (68%) of respondents.

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## 9. Closing Comments

The information and insights provided through the consultations were collated and analysed by an independent research organisation. Consolidated findings are being used by the department to inform the design and potential activities of the National Centre and the process to select an entity that will run the National Centre. Once the successful entity is selected, engagement with victims and survivors, experts and others will continue to shape the work and governance of the National Centre. Continued engagement is a key recommendation of the Royal Commission recommendation.

## Appendix A – Survey Demographics

A total of 427 people completed the survey. **Table 1:** Quantitative sample - demographics

		Number	% of survey respondents
Age	18-34	64	15%
	35-49	150	35%
	50-64	163	38%
	65+	41	10%
State/Territory	NSW	83	19%
	VIC	85	20%
	SA	74	17%
	WA	71	17%
	QLD	58	14%
	ACT	20	5%
	NT	16	4%
	TAS	11	3%
Area	Major city	276	65%
	Regional/Remote	136	32%
Cohort	Members of the public	133	26%
	Academic	24	6%
	Work in a relevant sector	290	68%
Main sector (only those who work in a relevant sector)	Not-for-profit	193	45%
	Public	73	17%
Other demographics	Speak a language other than English	103	24%
	Experienced institutional care as a child	42	10%
	Identify as Aboriginal and/or Torres Strait Islander	33	8%
	Identify as having a disability	45	11%



Australian Government  
Department of Social Services

Attachment A

# National Centre for the Prevention of Child Sexual Abuse

Information Sheet

14 November 2019

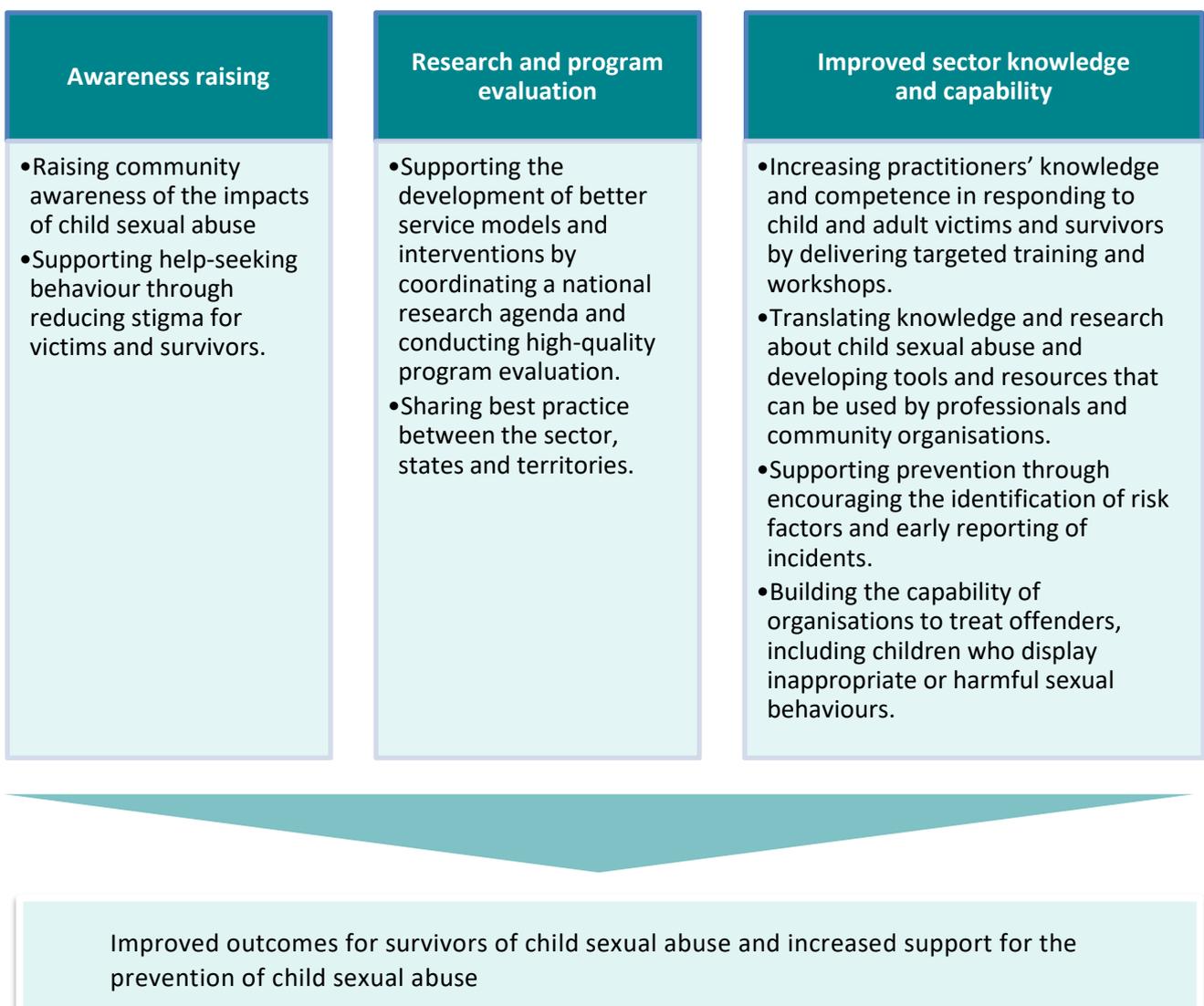


# Introduction

Keeping Australians safe is the Government’s greatest priority. Children and young people should always be safe, happy and well. The government is progressing a range of initiatives to keep children safe in response to the recommendations from the Royal Commission into Institutional Responses to Child Sexual Abuse (the Royal Commission).

The Royal Commission identified that ongoing national leadership is necessary to improve outcomes for victims and survivors of past child sexual abuse and prevent future child sexual abuse, and recommended the establishment of the National Centre for the Prevention of Child Sexual Abuse, (the National Centre).

It is expected the National Centre will achieve this aim by:



## Commitment of Australian Government support

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 the 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.”

The Prime Minister also called on state and territory governments to support and participate in the establishment of the National Centre, its functions and activities. The Department of Social Services (the Department) was tasked with the design of the National Centre.

# History of the National Centre

## 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, and how to prevent such abuses in the future. Recommendations were made about how to keep children safe, including the recommendation to establish a National Centre to provide national leadership to reduce stigma, promote help-seeking and support good practice.

### 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:

- a. 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.

# Establishing a National Centre for the Prevention of Child Sexual Abuse

While a number of Australian organisations currently undertake research or training in related areas of trauma and child abuse, there is no national organisation focusing specifically on child sexual abuse.

Our challenge as government, non-government and community stakeholders is to focus on how we prevent child sexual abuse in both institutional and interfamilial settings.

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

It is expected the National Centre will provide national leadership on:

- Raising community awareness and reducing stigma
- Enhancing practitioner capability
- Developing better service models
- Prevention of 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.” - (The Royal Commission into Institutional Responses to Child Sexual Abuse, pg 7, Final Report, Preface and Executive Summary)**

## Opportunities to contribute to the design of the National Centre

Survivor and stakeholder input is critical to the future success of the National Centre. It will guide the selection of a suitable entity to deliver the National Centre, independent of government. For this reason, the Department is undertaking a national consultation process from October 2019 to February 2020 to collaboratively design the scope and function of the National Centre.

### Consultation questions

The Department has put together some questions to guide contributions to the consultation. They are:

- What should the core work of the National Centre be?
- Who will benefit from the work of the National Centre and how?
- What should its major strategic objectives be?
- What should its measures of success be?
- What is outside the scope of the work of the National Centre?
- What exists that the National Centre should be mindful not to replicate?

## Next steps

The Department will engage stakeholders in workshops between October and December 2019.

There will be further opportunities to take part in an online consultation in January and February 2020.

The National Centre consultations will focus on the following:

- **Function:** Examine each element of the National Centre's aims and determine how it might achieve each outcome.
- **Scope:** With limited resources, what are the priorities and most important functions for the National Centre?
- **Governance and design:** What is important when designing the National Centre to ensure it can deliver against its mission and vision?
- **Success:** What would indicate the National Centre is achieving its purpose?

A process will then be undertaken, based on feedback from stakeholder consultations, to select a suitable organisation to deliver the National Centre in 2020.

## Further information

Please contact the Department of Social Services at this email address [here](#).



# Information paper: Survey to inform the establishment of the National Centre for the Prevention of Child Sexual Abuse



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## Your opportunity to contribute to the design of the

# 10. National Centre

The establishment of a National Centre for the Prevention of Child Sexual Abuse (National Centre) was a key recommendation (9.9) of the Royal Commission into Institutional Responses to Child Sexual Abuse. The Royal Commission identified that ongoing national leadership is necessary to improve outcomes for victims and survivors of past child sexual abuse and prevent future child sexual abuse.

Survivor and stakeholder input is critical to the future success of the National Centre. It will inform the selection of a suitable entity to deliver the National Centre, independent of government. For this reason, the Department of Social Services (the Department) is undertaking a national consultation process to collaboratively design the scope, functions and priorities of the National Centre. Throughout October to December 2019, the Department has conducted face-to-face consultations with non-government and government stakeholders, with organisations representing policy and decision makers, survivor advocacy groups, people who work with victims and survivors, academia, peak bodies and national and local organisations who undertake service delivery.

To ensure the consultation process provides opportunity for all Australians to provide their views, the Department has developed an online survey. The survey will be available during January and February 2020 on the webpage [DSS Engage](#).

The survey is scheduled to close at **11:59pm on Sunday 23 February 2020**.

The questions in the survey ask about the scope, functions and priorities for the National Centre, and it is hoped for broad participation of stakeholders.

This paper provides some additional information about the survey and its focus.

**Have your say - please participate in the survey:**

***[Insert survey link and questions here]***

## Further information

To find out more visit [DSS engage](#), or you can contact the Department of Social Service [here](#).

## What are the key functions of the National Centre?

The Royal Commission made recommendations about how to keep children safe. It also identified that ongoing national leadership is necessary to improve outcomes for victims and 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.<sup>1</sup>”

Recommendation 9.9 and the Australian Government commitment to establish the National Centre will provide this national leadership through a range of activities. These include:

Awareness raising	Research and program evaluation	Improved sector knowledge and capability
<ul style="list-style-type: none"><li>• Raising community awareness of the impacts of child sexual abuse</li><li>• Supporting help-seeking behaviour through reducing stigma for victims and survivors.</li></ul>	<ul style="list-style-type: none"><li>• Supporting the development of better service models and interventions by coordinating a national research agenda and conducting high-quality program evaluation.</li><li>• Sharing best practice between the sector, states and territories.</li></ul>	<ul style="list-style-type: none"><li>• Increasing practitioners’ knowledge and competence in responding to child and adult victims and survivors by delivering targeted training and workshops.</li><li>• Translating knowledge and research about child sexual abuse and developing tools and resources that can be used by professionals and community organisations.</li><li>• Supporting prevention through encouraging the identification of risk factors and early reporting of incidents.</li><li>• Building the capability of organisations to treat offenders, including children who display inappropriate or harmful sexual behaviours.</li></ul>

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

The governing principles of the Centre aim to be that it:

- works in partnership: to provide national leadership 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
- develops new knowledge and resources to share in accessible ways
- builds on and enhances the work of the Royal Commission to maintain and expand the impetus for change – to improve outcomes for survivors and to develop effective strategies to prevent child sexual abuse

<sup>1</sup> *The Royal Commission into Institutional Responses to Child Sexual Abuse, pg 7, Final Report, Preface and Executive Summary*

- plays a coordination role to pull together and make available what is being done by others (i.e. no duplication in role).

## 9.9a Raising community awareness and reducing stigma

The Royal Commission has created an increased awareness of the issue of child sexual abuse within the community that hasn't been there previously. Public awareness is an important part of an overall approach to increase knowledge about the impacts of child sexual abuse on the lives of survivors and victims, reducing stigma and preventing child sex abuse. Community education campaigns can be a key prevention strategy to prevent child sexual abuse.

To be child-safe, individuals, institutions and communities need to understand the concept, dynamics and effects of child sexual abuse, and be able to identify it and then respond effectively. However, national and international research has identified a continuing lack of understanding of child sexual abuse and related issues within the community.

When the community lacks understanding about the nature, extent and impact of child sexual abuse or does not have the confidence to respond to disclosures, the impact on victims, survivors and their families can be far reaching. The impacts of stigma can result in discrimination, rejection, isolation, shame, self-blame, and poor physical and mental health outcomes. Many survivors told the Royal Commission they faced stigmatising community and professional attitudes about child sexual abuse.

Effective awareness campaigns can help to provide information about trauma informed and sensitive services to survivors and victims of child sexual abuse, promote healthy parenting practices, child safety skills, and protocols for responding to suspected abuse.

### Reducing Stigma

The Royal Commission was told how problematic community attitudes and behaviour can contribute to child sexual abuse, and to its effects on children being overlooked, minimised, denied, or even tolerated and perpetuated. Social taboos and stigmatisation also create barriers to seeking help when concerns are raised.

Raising awareness of the nature and impact of child sexual abuse will assist with the stigma some survivors may experience. People may experience stigma through the processes of labelling, stereotyping and discrimination, and can lead to social exclusion and isolation. Negative reactions are re-traumatising and can inhibit future disclosures.

Help-seeking is impacted when victims are not assured of an appropriate response, or when ignorance and disbelief are the likely outcomes. The negative impact of stigma can be prevented or lessened through community education to dispel myths around the issue, awareness raising and fostering empathy for victims and survivors, delivering trauma informed and sensitive services and contesting social attitudes.

Strategies to reduce stigma are important to:

- provide support to victims and survivors to aid their recovery
- encourage disclosure
- report child sexual abuse.

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

## 9.9b Improved sector knowledge and capability

One of the issues of child sexual abuse prevention and responses is the cross disciplinary nature of the workforce. There is no one sector who is responsible for preventing and responding to child sexual abuse. For example, professionals such as counsellors, teachers, psychologists and social workers are in a unique position, in that they often have direct contact with children. These professionals play an important role in preventing and detecting child sexual abuse, and therefore need adequate training so they are aware of the distinctive issues surrounding child sexual abuse victimisation.

Research indicates that many professionals working with children receive limited specific education and training about child sexual abuse, and professionals indicate that they have limited knowledge about grooming and sexually inappropriate online behaviours. Furthermore, due to the lack of coordinated information and education, there is a 'pot luck' approach as to where professionals may access information and resources.

In order to respond effectively to the needs of victims and 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 also a need to ensure that the training, education and resources used by professionals are credible and evidence-based.

A workforce without the right skills, knowledge and support mechanisms not only diminishes the quality of service provision, but also puts at risk the wellbeing of survivors, victims and indeed, professionals working in a challenging field.

Whilst research about the impacts of child sexual abuse is available, and the latest evidence on good clinical approaches is being implemented in some sectors, there are a range of workforce capacity building strategies that can build workforce capability.

"The coordination and translation of knowledge about trauma-informed approaches into practice is ad hoc, impacting workforce skills and exacerbating shortages in expertise"<sup>2</sup>

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. This could be accomplished through the coordination of a national research agenda as well as conducting research and high-quality program evaluations. It is important that there is confidence that services and interventions are effective in what they aim to achieve for 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 will work towards reducing some of the barriers that survivors, victims and families face when seeking help.

Some of these barriers include:

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<sup>2</sup> Royal Commission Final Report: Preface and executive summary

- information was difficult to find, and that services were often prohibitively expensive
- systemic and structural barriers that created difficulties, including the fragmentation of service systems, the limited capacity of services to collaborate with one another
- 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 occurs within families
- service access issues for those survivors living in regional and remote communities.
- Having a National Centre that specialises in research and evaluation about child sexual abuse could potentially play a range of 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”<sup>3</sup>.

## Developing better service models

The services sought by victims and survivors can be from a range of mainstream and specialist services and may change depending on stage of life and circumstances.

Examples may include support for health, finances, legal issues, housing, education and employment. Services often span multiple sectors and can be difficult to navigate.

Research presented to the Royal Commission demonstrates there are distinctive aspects associated with child sexual abuse in institutional or familial context, which may influence victims’ individual support and service needs. The literature suggests that diverse population groups including; Aboriginal and Torres Strait Islander communities, culturally and linguistically diverse communities, people with disability, people from the LGBTQI community and those in regional and remote communities, may benefit from responses tailored to their respective needs.

It is therefore imperative that services that victims and survivors access can meet their needs. There remain some significant gaps in the types of service models that currently exist, and some limited evidence about some existing service models. Research and testing of service models is required to be confident that victims and survivors can access the assistance they need.

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<sup>3</sup> Royal Commission Final Report: Preface and executive summary

## Aim of preventing further harm

Better service models can prevent the re-traumatisation or re-victimisation of survivors and victims of child sexual abuse, improve recovery and wellbeing, and promote engagement with treatment and recovery services. With a stronger evidence base and the ability to respond to emerging policy and therapeutic needs suggests a shift from existing inconsistent jurisdictional models towards one of collaborative approaches involving the sharing of best practice, resources and agreed clinical standards.

The survey will ask you to identify what the research and evaluation priorities would be.

A National Centre could be the mechanism by which research and evaluation is developed and coordinated. It may also have a role to play in being a hub for existing research as well as summarising and translating research evidence for practitioners and community members.

The survey will ask you about what research transfer activities/information forms you regard as important.

## 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”<sup>4</sup>.

The Royal Commission identified the need for a public health approach which emphasises 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, take active steps to prevent harm towards them, and enhance their wellbeing. To influence the health and wellbeing of the whole population – as is needed with public health problems such as child sexual abuse – interventions are needed across all levels and must be able to reach every level of society including families, communities and governments.

Prevention can include several activities, including influencing policy development, changing organisational practices, educating providers, promoting community awareness raising and education, and strengthening practitioner knowledge and skills.

Within a public health framework, there is a prevention spectrum consisting of: primary (universal) strategies aimed at everyone and stopping abuse from occurring; secondary (targeted) approaches for ‘at-risk’ people; and tertiary responses when abuse has occurred to reduce the risk of it happening again as well as intervening to prevent further harm to victims.

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<sup>4</sup>Royal Commission Final Report: Volume 6, Making institutions child safe

A brief discussion of the concepts of primary, secondary and tertiary prevention are outlined below.

## What is primary prevention?

Primary prevention of child sexual abuse is any intervention that reduces risk factors and prevents abuse before it occurs. A primary prevention approach to child sexual abuse promotes safe, healthy environments and behaviours, reducing the likelihood of abuse in the first place. These can be wide-scale initiatives aimed at the general public. This approach is often confused with early intervention services for victims and perpetrators.

Barriers to prevention can include a lack of awareness or knowledge, community attitudes, and unclear or inconsistent social norms about child sexual development. Secrecy and denial are strong contributors to abuse occurring and continuing. Parents, carers, educators, and communities all have a role to play in understanding the facts, the signs and what to do if they have concerns about abuse.

There has been considerable international effort to encourage the development and evaluation of primary prevention child sexual abuse programs however it is less clear how effective many existing primary prevention programs are.

## What is secondary prevention?

Secondary prevention aims to address problematic sexual behaviours by providing treatment and support to those at-risk of sexually offending before any involvement with the legal system. Currently there is limited focus in Australia to secondary prevention.

The argument for increasing secondary prevention services is it shifts away from reacting to sexual offences, and instead implements proactive evidence-based strategies that can prevent even initial incidents of child sexual abuse.

The Royal Commission recognised the need to prevent and respond to children and young people who exhibit problematic sexual thoughts and behaviours. Secondary prevention in this case would focus on early intervention to prevent children's problematic sexual behaviour from escalating to the point where they might harm other children.

A public health approach to child sexual abuse involves making relevant treatment and services widely available and encouraging those who may be at risk of offending to seek treatment before an offence has occurred. Intervening early and treating behaviours before they escalate to a criminal justice response are examples of secondary prevention approaches (e.g. anonymous helplines for people with sexual interest in children).

## What is tertiary prevention?

Tertiary prevention strategies are used when child sexual abuse has already occurred. They are targeted at groups including abusers, victims, families, and communities.

Tertiary prevention often refers to the punishment and management of offenders and implementing strategies to reduce re-offending (e.g. treatment programs for those who have engaged in child sexual abuse). This type of prevention targets known individuals such as those with convictions for committing a sexual offence. Strategies to reduce reoccurrence include forensic treatment programs and prison.

However, tertiary prevention can also focus on strategies to prevent re-victimisation. A further consideration in the prevention space is the provision of treatment and support to those at risk of further victimisation. Providing appropriate therapeutic support and building protective approaches to empower victims and survivors may be important in reducing risks associated with further exploitation and abuse.

The Federal Government's funding announcement asks that the National Centre consider a prevention focus.



Australian Government  
Department of Social Services



# National Centre for the Prevention of Child Sexual Abuse

## National Survey

The Department of Social Services is seeking your feedback on the design of the National Centre for the Prevention of Child Sexual Abuse (National Centre).

Anyone is welcome to complete the survey.

## Survey opening and closing dates

You can read an information paper for background to the survey questions. You can ask your service provider for a hard copy of the information paper, or you can download it online at [www.engage.dss.gov.au](http://www.engage.dss.gov.au). The information paper includes definitions that will help you work through this survey.

The survey opened on **Friday 14 February 2020 at 5:00pm**, and will close on **Sunday 12 April 2020 at 11:59pm**.

## About the National Centre

The *Royal Commission into Institutional Responses to Child Sexual Abuse* (Royal Commission) asked the Commonwealth and state and territory governments to 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.”*

In 2019, the Australian Government announced \$22.5 million in funding over five years to establish the National Centre. The Government is working in partnership with state and territory governments to establish the National Centre.

## Why a survey?

To continue the planning for the National Centre, we conducted workshops for service providers and governments across Australia in late 2019. In these workshops, we talked about the role of the National Centre in supporting victims and survivors and preventing child sexual abuse.

This survey will help us gather further contributions from the broader community. We will use both the workshop and survey data to help plan the next steps for the National Centre.

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## What is in the survey?

This survey has been designed so that you can choose what to answer – please feel free to answer one or all questions, or somewhere in between.

Some questions are open-ended questions, where you can write in your response. Others ask you to choose between options, or add in your own.

The questions cover:

- **Part A:** Your interest in the National Centre
- **Part B:** Your ideas about what a National Centre could do
- **Part C:** Your overall hopes for the National Centre
- **Part D:** Your demographic information

We expect the survey will take up to 40 minutes to complete.

You can also read an information paper for background to the survey questions. You can ask your service provider for a hard copy of the information paper, or you can download it online at [www.engage.dss.gov.au](http://www.engage.dss.gov.au)

We have tried our best to create a survey that allows people with different viewpoints to share their thoughts with us. If you have any concerns or feedback, we encourage you to include this in the survey. The last question may be a good place to do this.



You can return your completed survey to:

**National Centre Team**  
**Department of Social Services**  
**GPO Box 9820**  
**Canberra ACT 2601**

## Taking care of yourself

Child sexual abuse can be a difficult topic to talk about. This survey has been designed to make it as safe as possible for all people to have their say on the design of the National Centre. You will not be asked to share your personal experiences. Please do what you need to when completing the survey to feel safe and well. This could include:

- pausing the survey and choosing if you want to submit the information you have already given
- taking a break and returning to the survey at another time
- contacting someone you trust to help you before, during or after the survey
- using professional 24/7 support services such as:

**Lifeline**



13 11 14

**Beyond Blue**



1300 224 636

**Mensline**



1300 78 99 78

**Suicide Call Back Service**



1300 659 467

**1800 Respect**



1800 737 732

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## Your information

The survey is anonymous. Your responses will be treated in confidence and in accordance with the Department of Social Services (DSS) Privacy Policy. You can read the DSS Privacy Policy here at: [www.dss.gov.au/privacy-policy](http://www.dss.gov.au/privacy-policy).

We will *not* ask for your name or the name of any organisations you work for or with as you complete the survey. We ask questions such as your age and location to help understand what's important to different groups of people.

De-identified data will be provided to Wheretō Research Consulting who will consolidate and analyse the survey data on behalf of DSS.

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# Part A – Your interest in the National Centre

This section asks about your interest in the National Centre.

All questions are optional - you can skip a question by leaving it blank or by ticking the option 'I would like to skip this question'.

A.1a. Which of the following best describes your main interest in the National Centre for the Prevention of Child Sexual Abuse? <input checked="" type="checkbox"/> <i>Tick one (1) option</i>
<input type="checkbox"/> I am a member of the public, interested in the National Centre
<input type="checkbox"/> I work in a relevant sector
<input type="checkbox"/> I am an academic

A.1b. Do you identify as someone who has experienced child sexual abuse? <i>[Defined as, a victim or survivor, family member or informal support person, etc.]</i> <input checked="" type="checkbox"/> <i>Tick one (1) option</i>
<input type="checkbox"/> I would like to skip this question
<input type="checkbox"/> Yes
<input type="checkbox"/> No
<input type="checkbox"/> Prefer not to say

---

# Part B - Your ideas about what a National Centre could do

This section asks about what you think the National Centre could do in response to the different parts of the Royal Commission’s Recommendation 9.9.

The response lists provided for the questions were developed from stakeholder workshops – you can also add your own thoughts if you would like to.

All questions are optional - you can skip a question by leaving it blank or by ticking the option ‘I would like to skip this question’.

The National Centre is a response to **Recommendation 9.9** of the Royal Commission into Institutional Responses to Child Sexual Abuse. This recommendation has three parts:

- 9.9a *Raise community awareness and promote destigmatising messages about the impacts of child sexual abuse*
- 9.9b *Increase practitioners’ (workers’) 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*
- 9.9c *Lead the development of better service models and interventions through coordinating a national research agenda and conducting high-quality program evaluation*

From the: *Royal Commission into Institutional Responses into Child Sexual Abuse - Final Report Recommendations.*

B.1 The job of the National Centre is to cover all three parts of the recommendation over time. To work out what is the highest priority for the National Centre to do, please rank the options below from highest priority (1) to lowest priority (3).

I would like to skip this question (*tick if relevant*), or

Rank the options from  highest priority to  lowest priority.

<input type="checkbox"/>	9.9a Raise community awareness about the impacts of child sexual abuse and reduce stigma
<input type="checkbox"/>	9.9b Increase worker knowledge and competence in responding to people who have experienced child sexual abuse
<input type="checkbox"/>	9.9c Coordinate a national research agenda and conduct high-quality program evaluations to develop better service models and interventions

B.2 Royal Commission **Recommendation 9.9a** asks that the National Centre raise community awareness about the impacts of child sexual abuse and reduce stigma.

Please look at the list below and pick up to three that you think are priorities in creating community awareness and reducing stigma.

*Tick up to three (3)*

I would like to skip this question

Development and dissemination of materials that reach out, engage and better support people who have been sexually abused

Training for media on how to represent child sexual abuse responsibly and sensitively

A national approach to educating young people in early childhood education and schools

Information and resources for parents, carers and community members

Information and resources for professionals and workers

Culturally appropriate information and resources

A community-wide education and awareness-raising campaign

Something else:  
(✍️ *please specify*)

Something else:  
(✍️ *please specify*)

Something else:  
(✍️ *please specify*)

---

B.3 Thinking about the items you selected in the previous question, please pick what you think is the top priority.

*Tick one (1)*

I would like to skip this question

Development and dissemination of materials that reach out, engage and better support people who have been sexually abused

Training for media on how to represent child sexual abuse responsibly and sensitively

A national approach to educating young people in early childhood education and schools

Information and resources for professionals and workers

Information and resources for parents, carers and community members

Culturally appropriate information and resources

A community-wide education and awareness-raising campaign

Something else:  
(✍️ *please specify*)

Something else:  
(✍️ *please specify*)

Something else:  
(✍️ *please specify*)

---

B.4 From the list below, please pick up to three awareness topics you think are priorities for the National Centre to work on.

Tick up to three (3)

I would like to skip this question

What to do if someone tells you they have been abused

What creates safety for children

Information about grooming and online safety

Information, resources and support to respond to children and young people requiring assistance for behaviours that may be harmful to themselves and others

Information about what child sexual abuse is, how much it happens, and what the impacts are

Information, resources and support for people who have been sexually abused

Understanding what works to encourage help-seeking behaviour in people at risk of future offending

I don't think education approaches are a priority

Something else:  
(✍️ please specify)

Something else:  
(✍️ please specify)

---

B.4 From the list below, please pick up to three awareness topics you think are priorities for the National Centre to work on.

*Tick up to three (3)*

Something else:  
(✍️ *please specify*)

B.5 Royal Commission **Recommendation 9.9b** asks that the National Centre increase practitioners' (workers') knowledge and competence in responding to child and adult victims and survivors."

Please look at the list below and pick up to three items you think are priorities for the National Centre to work on to increase worker knowledge and competence.

*Tick up to three (3)*

- |                          |  |
|--------------------------|--|
| <input type="checkbox"/> | I would like to skip this question   |
| <input type="checkbox"/> | Identify opportunities for different sectors to better meet the needs of people who have experienced child sexual abuse (i.e. health, education, aged care, law enforcement, justice)          |
| <input type="checkbox"/> | A national review of training materials and resources to identify gaps / opportunities for improvement   |
| <input type="checkbox"/> | Advocacy for national standards for child-safe culture and policies for organisations that work with children (e.g. health, education, community services, disability, law enforcement)        |
| <input type="checkbox"/> | Develop a national workforce strategy to build and improve skills  |
| <input type="checkbox"/> | Review and develop national standards for training and accreditation   |
| <input type="checkbox"/> | Develop a way of identifying good quality evidence   |
| <input type="checkbox"/> | Develop a resource hub for workers*  |
| <input type="checkbox"/> | Develop an online learning and development portal for workers  |
| <input type="checkbox"/> | Help build national networks / communities of practice for workers   |
| <input type="checkbox"/> | Support workers from different sectors and states & territories to come together to share ideas  |
| <input type="checkbox"/> | Make sure relevant training organisations and courses cover trauma-informed principles (e.g. for health, education, community services, disability, aged care, law enforcement, professionals) |
| <input type="checkbox"/> | Something else:<br>(✍️ <i>please specify</i> )   |
| <input type="checkbox"/> | Something else:<br>(✍️ <i>please specify</i> )   |

B.5 Royal Commission **Recommendation 9.9b** asks that the National Centre increase practitioners' (workers') knowledge and competence in responding to child and adult victims and survivors."

Please look at the list below and pick up to three items you think are priorities for the National Centre to work on to increase worker knowledge and competence.

*Tick up to three (3)*

Something else:  
(✍️ *please specify*)

B.6 Thinking about the items you selected in the previous question, please pick what you think is the top priority.?

*Tick one (1)*

I would like to skip this question

Identify opportunities for different sectors to better meet the needs of people who have experienced child sexual abuse (i.e. health, education, aged care, law enforcement, justice)

A national review of training materials and resources to identify gaps / opportunities for improvement

Advocacy for national standards for child-safe culture and policies for organisations that work with children (e.g. health, education, community services, disability, law enforcement)

Develop a national workforce strategy to build and improve skills

Review and develop national standards for training and accreditation

Develop a way of identifying good quality evidence

Develop a resource hub for workers\*

Develop an online learning and development portal for workers

Help build national networks / communities of practice for workers

Support workers from different sectors and states & territories to come together to share ideas

Make sure relevant training organisations and courses cover trauma-informed principles (e.g. for health, education, community services, disability, aged care,

B.6 Thinking about the items you selected in the previous question, please pick what you think is the top priority.?

*Tick one (1)*

law enforcement, professionals)

Something else:  
(✍️ *please specify*)

Something else:  
(✍️ *please specify*)

Something else:  
(✍️ *please specify*)

B.7. The Royal Commission recommended the National Centre provide national leadership to drive practice and policy improvement. Please look at the list below and pick up to three options you think are the highest priorities for the National Centre to drive practice and policy improvement.

*Tick up to three (3)*

I would like to skip this question

Services understand how to respond to someone who is affected by child sexual abuse (e.g. people who have experienced child sexual abuse and their families)

Getting different service delivery agencies and states and territories to work together

Consistent national legislation (e.g. for mandatory reporting, working with children and age of consent checks)

Consistent national data collection and sharing

People who work in the community (such as health, education, community services, disability, law enforcement, etc.) know how to respond to child welfare concerns

B.7. The Royal Commission recommended the National Centre provide national leadership to drive practice and policy improvement. Please look at the list below and pick up to three options you think are the highest priorities for the National Centre to drive practice and policy improvement.

*Tick up to three (3)*

Something else:  
(✍️ *please specify*)

Something else:  
(✍️ *please specify*)

Something else:  
(✍️ *please specify*)

B.8. Thinking about the items you selected in the previous question, please pick what you think is the top priority.

*Tick one (1)*

I would like to skip this question

I would like to skip this question

Services understand how to respond to someone who is affected by child sexual abuse (e.g. people who have experienced child sexual abuse and their families)

Getting different service delivery agencies and states and territories to work together

Consistent national legislation (e.g. for mandatory reporting, working with children and age of consent checks)

Consistent national data collection and sharing

People who work in the community (such as health, education, community services, disability, law enforcement, etc.) know how to respond to child welfare concerns

B.8. Thinking about the items you selected in the previous question, please pick what you think is the top priority.

*Tick one (1)*

Something else:  
( *please specify*)

Something else:  
( *please specify*)

Something else:  
( *please specify*)

B.9. If the National Centre did develop an online resource hub for workers, what should be on it? Please look at the list below and pick what you see as priorities for inclusion in an online resource hub.

*Tick all that apply*

I would like to skip this question

Webinars, short courses and other practical training

The ability to sign up for information about emerging evidence, events and other sector news

Therapeutic best practice guides

Links to existing and emerging research

Sector specific practice guides (e.g. for education, police, health, justice, etc.)

Best-practice guides for working with different populations

Ability to manage learning and development and track progress online

B.9. If the National Centre did develop an online resource hub for workers, what should be on it? Please look at the list below and pick what you see as priorities for inclusion in an online resource hub.

*Tick all that apply*

Ability to work towards formal qualifications through online learning and development materials

Something else:  
(✍️ *please specify*)

Something else:  
(✍️ *please specify*)

Something else:  
(✍️ *please specify*)

B.10. Royal Commission **Recommendation 9.9c** asks that the National Centre leads the development of better service models and interventions through coordinating a national research agenda and conducting high-quality program evaluation.

Please look at the list below and pick up to three priorities you think the National Centre should focus on when developing a research and evaluation agenda.

*Tick up to three (3)*

I would like to skip this question

An audit of existing research, identifying and prioritising gaps in evidence

Developing a national research agenda to prioritise and unify the work of the National Centre and other researchers

Evaluation of existing practice or programs

Development of new interventions / service models

Helping services to evaluate their work and build the ability to conduct evaluation

Providing ethical guidelines for child sexual abuse research

Identify and support innovation hubs for best practice program development

Include the insights of child and adult survivors in shaping best practice

Develop arrangements for national data collection, management and sharing

Develop a way of identifying good quality evidence

Something else:  
(✍️ *please specify*)

Something else:  
(✍️ *please specify*)

Something else:  
(✍️ *please specify*)

B.11. Thinking about the items you selected in the previous question, please pick what you think is the top priority.

*Tick one (1)*

I would like to skip this question

An audit of existing research, identifying and prioritising gaps in evidence

Developing a national research agenda to prioritise and unify the work of the National Centre and other researchers

Evaluation of existing practice or programs

Development of new interventions / service models

Helping services to evaluate their work and build the ability to conduct evaluation

Providing ethical guidelines for child sexual abuse research

Identify and support innovation hubs for best practice program development

Include the insights of child and adult survivors in shaping best practice

Develop arrangements for national data collection, management and sharing

Develop a way of identifying good quality evidence

Something else:  
(✍️ *please specify*)

Something else:  
(✍️ *please specify*)

Something else:  
(✍️ *please specify*)

B.12. The list below shows areas the National Centre could address to develop and support better service models and interventions.

Please look at the list and pick up to three priorities you think the National Centre should focus on.

*Tick up to three (3)*

I would like to skip this question

Translating international interventions for the Australian context

Improving services for people who have experienced child sexual abuse

Improving interventions for people who have perpetrated child sexual abuse

Improving services for diverse communities (e.g. Indigenous, culturally diverse, people with disability, sex and gender diverse)

Developing service delivery models to improve how different sectors work together

Translating existing research into practical guidance

Developing therapeutic approaches for children and young people who may require assistance for challenging behaviours

Integrating traditional Indigenous healing approaches into interventions

Developing interventions to address online safety and the influence of pornography

Something else:  
(✍️ *please specify*)

Something else:  
(✍️ *please specify*)

Something else:  
(✍️ *please specify*)

B.12. The list below shows areas the National Centre could address to develop and support better service models and interventions.

Please look at the list and pick up to three priorities you think the National Centre should focus on.

*Tick up to three (3)*

B.13. Thinking about the items you selected above, please pick what you think is the top priority.

*Tick one (1)*

I would like to skip this question

Translating international interventions for the Australian context

Improving services for people who have experienced child sexual abuse

Improving interventions for people who have perpetrated child sexual abuse

Improving services for diverse communities (e.g. Indigenous, culturally diverse, people with disability, sex and gender diverse)

Developing service delivery models to improve how different sectors work together

Translating existing research into practical guidance

Developing therapeutic approaches for children and young people who may require assistance for challenging behaviours

Integrating traditional Indigenous healing approaches into interventions

Developing interventions to address online safety and the influence of pornography

Something else:  
(✍️ *please specify*)

Something else:  
(✍️ *please specify*)

B.12. The list below shows areas the National Centre could address to develop and support better service models and interventions.

Please look at the list and pick up to three priorities you think the National Centre should focus on.

*Tick up to three (3)*

Something else:  
( *please specify*)

B.14. Do you have any thoughts on how the National Centre might work with existing research and policy organisations to avoid duplicating effort?

- I would like to skip this question
- No, I don't have particular thoughts
- Yes, my advice would be.....

 *Write your response below*

*(Maximum 100 words)*

## Part C - Your overall hopes for the National Centre

This section asks about your overall hopes for the National Centre.

All questions are optional - you can skip a question by leaving it blank or ticking the option 'I would like to skip this question'.

C.1. What value do you hope a National Centre for the Prevention of Child Sexual Abuse will bring?

 Write your response below.

I would like to skip this question

*(Maximum 150 words)*

C.2. The Royal Commission recommended the National Centre should be independent of government.

How could the National Centre demonstrate that its operations are independent from government?

 *Write your response below.*

I would like to skip this question

*(Maximum 100 words)*

C.3. How could the National Centre engage with people like yourself?

 Write your response below.

I would like to skip this question

*(Maximum 150 words)*

C.4. What would you like to see the National Centre achieve in its first five years of operation?

 Write your response below.

I would like to skip this question

*(Maximum 250 words)*

## 11. Section D - Your demographic information

This section asks about your demographics.

All questions are optional - you can skip a question by leaving it blank or ticking the option 'I would like to skip this question'.

D.1. Which of the following age ranges do you fall into? <input checked="" type="checkbox"/> <i>Tick one (1)</i>
<input type="checkbox"/> I would like to skip this question
<input type="checkbox"/> Under 18
<input type="checkbox"/> 18-24
<input type="checkbox"/> 25-29
<input type="checkbox"/> 30-34
<input type="checkbox"/> 35-39
<input type="checkbox"/> 40-44
<input type="checkbox"/> 45-49
<input type="checkbox"/> 50-54
<input type="checkbox"/> 55-59
<input type="checkbox"/> 60-64
<input type="checkbox"/> 65-69
<input type="checkbox"/> 70-74
<input type="checkbox"/> 75-79
<input type="checkbox"/> 80+

D.2. Do you currently live in Australia?

*Tick one (1)*

I would like to skip this question

Yes

No

D.3. In which state or territory do you currently live?

*Tick one (1)*

I would like to skip this question

ACT

NSW

NT

QLD

SA

TAS

VIC

WA

None of these

Prefer not to say

I do not live in Australia

D.4. Which of the following best describes where you live?

*Tick one (1)*

I would like to skip this question

Major City of Australia

Inner Regional Australia

Outer Regional Australia

Remote Australia

Very Remote Australia

Prefer not to say

I do not live in Australia

D5. If you work in the sector, please enter your work postcode below:

I would like to skip this question

--	--	--	--

Otherwise, please enter your home postcode below:

I would like to skip this question

--	--	--	--

\*Note for those in NT, please enter a 0 before a 3 digit postcode.

D.6. Do you mainly speak a language *other* than English at home?

*Tick one (1)*

I would like to skip this question

D.6. Do you mainly speak a language *other* than English at home?

*Tick one (1)*

Yes

No

Prefer not to say

D.7. Do you identify as someone who has experienced institutional care as a child?

*Tick one (1)*

I would like to skip this question

Yes

No

Prefer not to say

D.8. Do you identify as Aboriginal and/or Torres Strait Islander?

*Tick one (1)*

I would like to skip this question

Aboriginal

Torres Strait Islander

Aboriginal and Torres Strait Islander

Not Aboriginal and not Torres Strait Islander

Prefer not to say

D.9. Do you identify as having a disability?

*Tick one (1)*

I would like to skip this question

Yes

No

Prefer not to say

D.10. Do you identify as having a culturally and linguistically diverse background?

*Tick one (1)*

I would like to skip this question

Yes

No

Prefer not to say

Thanks so much for taking the time to complete this survey.

Is there anything else you would like to say about the design of the National Centre?

 *Write your response below.*

I would like to skip this question

*(Maximum 250 words)*

That's it, you're all done. Thank you for taking our survey. We really appreciate you taking the time to tell us your thoughts and opinions. We will use this information, along with

information from stakeholder workshops, to provide recommendations to the Government in planning next steps and the strategic direction of the National Centre.

If you have any questions or feedback about this survey, please contact the Department of Social Services via the email: [nationalcentre@dss.gov.au](mailto:nationalcentre@dss.gov.au).