



The Royal
Australian &
New Zealand
College of
Psychiatrists

Royal Commission into Institutional Responses to Child Sexual Abuse
consultation on best practice principles in responding to complaints

26 April 2016

developing and promoting best practice standards

About the RANZCP

Psychiatrists are medical doctors who are specialists in the treatment of mental illness, substance abuse and addiction. Psychiatrists play a crucial role in the provision of evidence-based mental healthcare in the community using a range of therapies, including medication and psychotherapy. The Royal Australian and New Zealand College of Psychiatrists (RANZCP) is a membership organisation responsible for training, educating and representing psychiatrists in Australia and New Zealand. Psychiatrists must be accredited by the RANZCP before they can practise.

The RANZCP has over 5,500 members including 4,000 fully qualified psychiatrists and 1,400 members who are training to qualify as psychiatrists. The RANZCP is guided on policy issues by a range of expert committees whose membership is made up of preeminent psychiatrists with relevant expertise, and consumer, carer and community representatives.

In developing this submission, the RANZCP worked closely with its expert members, to ensure that the recommendations made reflect clinical excellence, community experience and insight. This included consultation with the Faculty of Child and Adolescent Psychiatry, Faculty of Forensic Psychiatry, Section of Child and Adolescent Forensic Psychiatry, Section of Psychotherapy, Section of Private Practice Psychiatry and the State and Territory Branch Committees.

Key messages and recommendations

- Reflective institutional cultures should be promoted via training and supervision.
- Staff training should enable proactive response to risk factors, including the identification of behaviours in children which indicate a possible exposure to sexual abuse.
- Appropriate support, information and referral should be available to those accused of child sexual abuse.
- Staff working with children and adolescents should be trained in responding appropriately to young people who exhibit problem sexual behaviour, including identifying risk factors of child-to-child sexual abuse and intervening early.

Background

The RANZCP is strongly committed to supporting the implementation of best practice principles for institutions facing complaints of child sexual abuse. We have developed a number of resources of relevance to this issue in the past, including:

- [Submission to the Royal Commission into Institutional Responses to Child Sexual Abuse Issues Paper 9: Addressing the risk of child sexual abuse in primary and secondary schools](#) (August 2015)
- [Submission to the Royal Commission into Institutional Responses to Child Sexual Abuse Issues Paper 4: Preventing sexual abuse of children in out of home care](#) (November 2013)
- [Submission to the Royal Commission into Institutional Responses to Child Sexual Abuse Issues Paper 10: Advocacy and support and therapeutic treatment services](#) (December 2015)
- [Child sexual abuse](#) (position statement 51, 2016)
- [The mental health care needs of children in out-of-home care](#) (position statement 59, 2015)

The RANZCP commends the Royal Commission's efforts to identify robust complaint handling procedures in the area of child sexual abuse and contribute to the prevention of child sexual abuse by strengthening the safeguards within an institution. We support the development and strengthening of independent oversight mechanisms, as well as advice and assistance for smaller institutions to respond appropriately to complaints.

Best practice in responding to complaints

Supporting a reflective culture in organisations that work with children can enable best practice in responding to complaints of child sexual abuse by increasing staff awareness of risk factors, and providing them with the skills to respond appropriately. Reflective cultures can be developed via ongoing training opportunities, as well as by providing supervision for staff.

The Commission of Inquiry into the Abuse of Children in Queensland (the Forde Inquiry) found that staff working with children that have access to high levels of training and supervision are more skilled in identifying risk factors, and in responding appropriately to complaints. Training and supervision was recommended for a range of workplaces involved in childcare, including child welfare organisations, day care centres, schools and community groups (Queensland Crime Commission, 2000).

Training should include information on responding proactively to risk factors of child sexual abuse, rather than waiting for a complaint to be made. This should include training on the identification of behaviours that indicate possible exposure to sexual abuse, and how to respond appropriately.

Staff should also be familiar with how young people may go about making a disclosure, and the importance of how they respond to this information. It is not unusual for young people to experience ambivalent or confusing feelings towards the offender, to disclose tentatively and possibly to wish to retract the information. Staff should be familiar with the importance of showing the young person that they are believed, reassuring them, providing them agency to disclose as much or as little as they choose, and to use their own words. Efforts should be made to avoid making the young person feel judged in any way (ACSSA, 2008).

Institutions should have documented, transparent policies for complaints handling, including clear indicators for referral to police investigation and child protection. Where institutions have been subject to criticism regarding their responsiveness to complaints, consideration should be given to engaging outside facilitation to assist in examining responses, and overall culture.

Recommendations

- Reflective institutional cultures should be promoted via training and supervision.
- Staff training should enable proactive response to risk factors, including the identification of behaviours in children which indicate a possible exposure to sexual abuse.
- Institutions should have clear, documented and transparent processes for handling complaints.
- Engaging external support should be considered should there be any issues to do with an institution's handling of complaints in the past.

Responding to the accused

The RANZCP acknowledges the complexity of responding appropriately to a person accused of child sexual abuse, and we welcome the Royal Commission's inclusion of this issue in the consultation paper. While the emphasis is rightly on responding to and supporting the victim or survivor of abuse, it is also important to ensure the accused has access to information and support as appropriate.

Child-to-child sexual abuse is a particularly complex area, which requires careful and appropriate response. Problem sexual behaviour in children can cause high levels of anxiety and confusion for staff, and it is important that they are trained to respond appropriately to this. Children with these behaviours, can often be supported to return to a healthy developmental track, however early intervention and an informed and therapeutic approach is crucial.

The Victorian Department of Health and Human Services has developed an effective resource for specialist clinicians titled [*Children with problem sexual behaviour and their families: Best interests case practice model Specialist practice resource*](#) (Evertsz and Miller, 2012). We recommend reference to the principles in this resource as a starting point for developing a guide for carers and practitioners.

Recommendations

- Appropriate support, information and referral should be available to those accused of child sexual abuse.
- Staff working with children and adolescents should be trained in responding appropriately to young people who exhibit problem sexual behaviour, including identifying risk factors of child-to-child sexual abuse and intervening early.

References

Australian Centre for the Study of Sexual Assault (2008) responding to young people disclosing sexual assault: A resource for schools. ACSSA Wrap No. 6. Available at: <https://aifs.gov.au/publications/responding-young-people-disclosing-sexual-assault> (accessed 14 April 2016).

Evertsz J, Miller R (2012) *Children with problem sexual behaviours and their families: Best interests case practice model, Specialist practice resources*. Department of Health and Human Services, Victorian Government, Australia.

Queensland Crime Commission and Queensland Police Service (2000) *Project AXIS Volume 2 Child Sexual Abuse in Queensland: Responses to the Problem*. Brisbane, Australia.