

The Hon. Justice Peter McClellan AM
Chair
Royal Commission into Institutional Responses to Child Sexual Abuse
GPO Box 5283
SYDNEY NSW 2001

Dear Justice McClellan

Issues Paper 10: Advocacy and Support and Therapeutic Treatment Services for Victims

Private submission: Natalie Hall

I am a social worker who has worked for 30 years with vulnerable families in the child protection sector, both in government and not for profit agencies in Western Australia. I am currently employed as Principal Policy Officer for the Commissioner for Children and Young People in Western Australia; however I am making this private submission as a community member as I will be referring mostly to work undertaken in my previous employment with the Department of Child Protection and Family Support 1987-2010 and Parkerville Children and Youth Care 2010-2015.

In 2006 I was awarded a Churchill Fellowship to research internationally multi-agency service responses for children and young people who experience sexual abuse. At the time I was the Department of Child Protection and Family Support Manager leading a team co-located with WA Police to undertake forensic interviews of children. In taking on this position it became quickly evident to me when children disclose abuse a forensic interview and possibly an assessment/investigation of their situation is often the only 'service' they received. The Churchill Fellowship was supported by both agencies as an area of interest. I wrote a journal article (Hall 2008) summarising findings from my fellowship experience. In the article I state:

"There is certainly much room for improvement in service provision to vulnerable children and their families in Perth and regional areas in order to provide a seamless holistic responses across multiple agencies (not just Police and DCP) that are timely, comprehensive, supportive and compassionate whilst also providing rigorous assessment, treatment, prosecution and support services".

Seven years later, I still think this is the case.

In April 2008 the Report of the Community Development and Justice Standing Committee of its Inquiry into the Prosecution of Assaults and Sexual Offences was tabled in the Western Australian Parliament. The bi-partisan committee found:

- the adversarial legal system does not deal adequately with the uniqueness of child sexual offences (Finding 18) and
- there are major problems with communication between agencies and from the agencies to victims. This results in a very inefficient process and dissatisfaction amongst all parties and impacts most heavily on the victim (Finding 19).

The Standing Committee recommended —the Office of the Public Prosecutions, Western Australia Police, Sexual Assault Resource Centre, and the Victim Support Service, the Child Protection Unit, the Department for Child Protection and the Public Advocate of Western Australia,

- collaborate to implement the Child Advocacy Centre model of victim support for children; and
- investigate the adoption of a similar model of victim support for assault victims of sexual assault (Recommendation 20).

The George Jones Child Advocacy Centre was established in Western Australia in 2011, this has occurred largely because of the leadership and systemic advocacy of the not for profit sector. None of the government agencies listed above gave this recommendation any priority, and there is still no similar model in place for adult victims in Western Australia.

Suffice to say 8 years after my Fellowship travels 7 years after the Inquiry and 3 years after the release of the report of the Hon. Peter Blaxell (2012) about the conduct and response of relevant public officials and government agencies in relation to allegations of sexual abuse at St Andrew's Hostel in Katanning W.A, there has been minimal change in the service landscape for victims of sexual assault in this state.

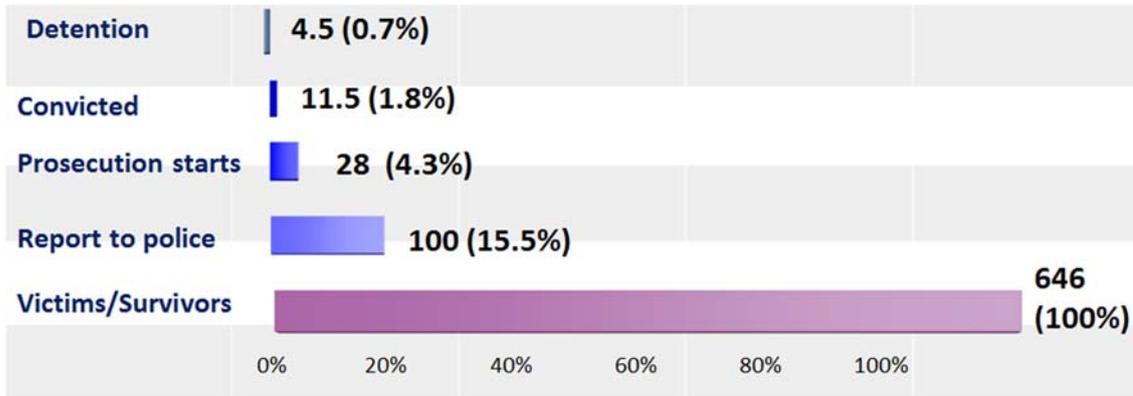
I agree with the definition of advocacy and support services provided by the Royal Commission in Issues Paper 10, and agree it is clearly evident there is a need for more immediate and long-term support for victims and families.

As an experienced practitioner and manager within the child protection sector in Western Australia it is evident to me that access to existing services for victims of childhood sexual abuse and adult sexual violence is a reflection of the graph below. Of the 100% of people who experience sexual abuse most choose not to disclose or report the abuse. The reasons for this have been well documented in research and in the evidence heard by the Royal Commission. Because they do not report most, do not received advocacy or support services. Furthermore existing support services are (certainly in Western Australia) generally funded by and attached to the formal reporting pathway. These formal pathways are not well placed to engage with vulnerable people who do not trust or access government agencies, and too often are metro and CBD centric.

Even if victims are connected to the formal system for part of their disclosure process, it is for the most part a lucky dip as to whether an informed professional will provide

them with information on support services and then the victim/carer is responsible for having to navigate the pathway to a service(s) themselves.

Sexual Violence Data adapted from Daly (2011)



Support and advocacy services need to be funded to work within community to provide innovative and accessible services to victims, targeting those who do not report. Services need to also engage the friends, family and community members who are the support people of victims.

In terms of the Child Advocacy Centre (CAC) model in Western Australia, In 2010 I commenced with Parkerville Children and Youth Care (Parkerville) a not for profit agency as to develop this model with stakeholders and the community. Parkerville has a long history of providing therapeutic responses for child and adult sexual abuse victims and as an agency was very keen to implement a model that focuses on earlier support and intervention for victims. A community engagement approach is part of the CAC model so in addition to direct referrals from police and child protection, referrals are received from individuals who have had abuse experiences but have not reported or received services, from parents who may have concerns about a child's sexualised behaviour and from community agencies who identify with a client trauma and abuse issues that are unresolved or sexual behaviour between children.

In March 2011, Parkerville opened the George Jones Child Advocacy Centre in Armadale Western Australia 29 kilometres south of the Perth central business district, a model of service provision adapted from overseas with input from stakeholders and community members.

In August 2015 the WA Police and Child Protection and Family Support moved into the centre to pilot a more intensive model of intervention with MIST (Multi-agency Investigation and Support Team) at the Centre. Please refer to <http://www.parkerville.org.au/News-Events/Latest-News/ArtMID/609/ArticleID/78/WA-Police-Child-abuse-Squad-has-partnered-with-the-Parkerville-Children-and-Youth-Care-inc> Alternatively Basil Hanna, Chief Executive of Parkerville basil@parkerville.org.au is happy to provide information on the progress of this pilot to date.

Research on multi-agency teams, the CAC model specifically and an evaluation of the pilot is being undertaken by Dr James Herbert from the Australian Centre for Child Protection at the University of South Australia he can be contacted at James.Herbert@unisa.edu.au

In terms of my work with Parkerville during the last five years I wish to provide information on three areas.

1. Establishment of the inaugural Child and Family Advocate role in Western Australia
2. Australian Government funded project on Advocacy Roles, Skills and Training for professionals working with children, young people and adults who experience sexual violence and
3. Advocacy at a systemic level by a young person.

1. Establishment of the inaugural Child and Family Advocate role in Western Australia

Child and Family Advocacy (CFA) is one of 10 standards of the Child Advocacy Centre model. If it is not provided by a full time staff person in a centre the role may be shared by other professionals as a distinct part of their role e.g. counsellor/advocate, centre director/advocate, forensic interviewer/advocate.

Parkerville developed the CFA as a full-time social work role, and received matched time limited project funding from the Department of the Attorney General (WA) between 2011-2013 to provide two full time CFAs, one at the George Jones Child Advocacy Centre in Armadale and one at the co-located Police / Child Protection Forensic Interview Unit in the city centre.

The CFA provides information and support to children and families, who often have a host of concerns and needs when accessing services across Health, Police and Child Protection agencies and potentially during the legal process. Guiding principles in providing child centred advocacy include ensuring a consistent and comprehensive network of support to the child and family and helping them to actively participate in making decisions and accessing services that will assist them.

Establishing the CFA position:

- Recognises that it can be more difficult for people to assert and protect their own rights when they are in crisis or have experienced trauma or when in the case of children they are dependent on others to have their needs met.
- Recognises that families are central to the wellbeing of their children and supporting a family well, will enhance their capacity to support and advocate for their child.
- Supports children and young people to assert their own rights and to advance and maintain their own best interests whenever possible.
- Ensures children and families are aware of their rights and sources of help and support in the community and that they have all the information they need to help them make informed decisions.
- Supports family members, carers and other interested parties to advocate on behalf of the child.

- Advocates directly to other people or agencies to help safeguard the child's rights, or to access services and assistance.
- Ensures active promotion of the rights of those who might otherwise be more vulnerable because of differences of race, religion or cultural practices.

The role of the CFA includes:

- building rapport with children and families
- providing support before and after the forensic interview
- being aware of the impact on trauma on children of all ages
- being aware of the dynamics of non-offending caregivers
- utilising tools and techniques for intervening with caregivers, and providing general support
- building relationships with local services providers to assist in linking families to the right service at the right time
- ensuring that the wider needs of families are met whilst assisting families in determining their most important needs and
- assisting families and/or clients to choose the supports that best suit themselves and their child.

In the last 5 years similar positions have been established in the United Kingdom and are known as the Independent Sexual Violence Advisors (ISVA) and ISVAs for Young People. Like the Child and Family Advocate the ISVA does not duplicate any other existing role, they provide crisis intervention, emotional support, practical assistance and help to victims whilst working in a multi-agency partnership Robinson (2009).

The CFA Role continues at the George Jones Child Advocacy Centre and as part of the MIST pilot. There is no funding in Western Australia for this role; it is funded through philanthropic giving by Parkerville supporters. Parkerville has been collecting feedback directly from children, young people and families about the role since its inception. Some of this feedback was reported on in the project documents below.

2. Australian Government funded project on Advocacy Roles, Skills and Training for professionals working with children, young people and adults who experience sexual violence

Initially there was resistance to the Child and Family Advocate role in Western Australia from some agencies due to a lack of understanding of the role and/or anxiety that an advocate may say or do something that would impact on the police investigation or prosecution of offences. Parkerville successfully applied for project funding to undertake a research work with a multi-agency reference group to develop and understanding of the role, and resources to enhance advocacy and support roles. Funding was received for six months from the Australian Government: Department of Families, Housing, Community Services and Indigenous Affairs under the auspices of the National Framework for Protecting Australia's Children and Child Aware Approaches.

The project team focused on reports and research inclusive of victims/survivors views who clearly said that they sought flexible and practical forms of support in the immediate aftermath of sexual violence, and that support, advocacy and information were their priority requirement. They valued advocacy support services tailored to their individual needs, which promote safety and recovery, prioritise support and empathy and improve collaborative interagency work regardless of if their 'case' had a legal pathway. Advocacy roles were also found to have enhanced the work of multi-disciplinary or interagency teams, enabled service providers such as police investigators to focus on their core duties (rather than also aiming to support the victim), decreased the attrition rates in justice systems (as victim/survivors are better able to cope with the demands of the justice system on them) and have even led to increased reporting to police.

The core project documents developed include

- [Literature Review on the Advocacy Role](#)
- [Literature Review on Advocacy Skills](#)
- [Advocacy Standards](#) (for more on these and associated standards [click here](#))
- [Advocacy Role Domains](#) (a shorter, brochure-like version of the Standards - these domains used as the core of this web)
- [Course Guide](#) with a facilitator's guide, participants workbook, PowerPoint slides, workshop videos and supervisory notes
- [Online introductory module](#) which is also used as pre-workshop material

Videos, a library of referenced documents and links to services and practice examples are all part of the online resources at

<http://www.parkerville.org.au/Research/Advocacy-Roles-Skills-and-Training>

Training workshops arising from the project were offered in Perth, Darwin, Melbourne and Hobart.

3. Advocacy at a systemic level by a young person

During 2014 and 2015 I had the privilege of working closely with Hannah Baker (not her real name), a young woman who was subjected to sexual and physical abuse at home for much of her childhood in Western Australia. Hannah was very keen for her experiences to inform improvements in service delivery in Australia for children and young people who experience sexual abuse. I am aware that the books written by Hannah have already been drawn to the attention of the Royal Commission by both the current Commissioner for Children and Young People in WA and others.

As a young person receiving services in Western Australia from 2006-2015 her experience is further supports the findings of the 2008 Inquiry mentioned previously and my assessment that advocacy and support services continue to be lacking in this state. Hannah found herself to be her own and only advocate. Consequently her advice to other young people in her book is:

"Unfortunately the legal system is fraught with difficulties and you may feel like you are being tossed around. My only advice is to just be proud of yourself for doing your best. Advocate for yourself. Chase people up on the phone, and when that doesn't work, put it in writing. If you find someone who is willing to advocate for you within the system, CC them into any emails you send – you would be surprised at how much of a difference that can make. If you're seen as having 'important' people on your side, people tend to tread you with a bit more dignity and respect, this is a sad reality I have learned" (Baker 2015 a pg. 215).

In terms of Hannah's reflections on what would have been a better response for her she says:

"I really like the idea of a case management/advocacy approach where a young person has one local 'go to' person who coordinates the services they receive and also links them in with other services, and finds information to questions as needed. I think what services sometimes forget is the importance of stable, face-to-face support, especially for young people who have experienced trauma and damage in their families. It is important to have a human connection and not just be palmed off between various professionals." (Baker 2015 a p 243)

This year I supported Hannah during visits to agencies to give direct and specific feedback to the services she experienced in Western Australia. This is something that she really wanted to do – to be an advocate for change for children and young people in the system. Logistically her journey of giving feedback was almost as complex as her journey through the system in the first place, as she chose to meet with about 10 groups of service providers in 6 government agencies (education, child protection, health, prosecution, victim's compensation, parole board) in an attempt to influence every part of the service landscape. This was a draining experience for her, and given her experience of systems previously she remains sceptical of the impact of her visits, and whether real change will occur.

As a support person for her, I focused on being present for Hannah; I had no positional power to assert within or subsequent to meetings. I have used what relationships and influence I do have to endeavour to follow-up with some of those visited, to prompt action on the feedback Hannah provided.

The "feedback journey" with Hannah highlighted for me the gap in mechanisms for systemic advocacy for children and young people who experience multiple service systems. They can access individual agencies through complaints mechanisms, however there is no one agency with a mandate to look at the collective feedback within an agency and collective feedback across agencies at the combined system.

I hope the Royal Commission will consider a mechanism for how young people and adults can give feedback to a scattered and diverse service system in a way that does not re-traumatise them. The Royal Commission, particularly through the private session's model has provided this opportunity for thousands of victims to date. This

demand alone demonstrates the gap for this type of mechanism in everyday life. Victims have been able to attend one place and Commissioners have been respectful and unconditional in their listening and have had a mandate to take on the feedback, and make recommendations for improvement. An ongoing equivalent device is needed in each state to continue to provide a mechanism for feedback for victims and with a mandate to follow-up with agencies actions and to provide information back to the victim about the impact of their feedback. A consolidated approach to system feedback would spare the victim many separate visits and also defensive or even disrespectful behaviours of professionals. This mechanism needs to be available to all victims of abuse.

Thank you for your consideration of my submission I would be happy to provide further comment or information if needed.

Natalie Hall
12 November 2015

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