



Top End Women's Legal Service Inc.

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Anne Bradford
Chief Executive Officer
The Department of Children and Families
PO Box 40596
Casuarina NT 0811

Via email: Anne.Bradford@nt.gov.au

Dear Director,

RE: Through the Eyes of the Child: Improving Responses to Victims of Sexual Abuse and Criminal Neglect

Thank you for providing TEWLS with the opportunity to make a submission in relation to the *Through the Eyes of the Child: Improving Responses to Victims of Sexual Abuse and Criminal Neglect* Discussion Paper.

Who we are

Top End Women's Legal Service ('TEWLS') is a community legal centre focused on the advancement of the rights of all women. We are funded by the Commonwealth Attorney General's Department and the Department of Prime Minister and Cabinet to provide legal advice, casework and community legal education to women living in the Top End of the Northern Territory ('NT'). We provide advice, information and assistance to women in a number of areas of law including family law, domestic and family violence, housing and tenancy, debts, sexual assault, discrimination and compensation for victims of crime. We provide outreach services for culturally and linguistically diverse women, Aboriginal women in the town communities surrounding Darwin and women in prison.

Our Submission

Current NT Framework Response to Child Victims

Currently, the NT's response to child sexual abuse and criminal neglect involves the intersection of multiple agencies, including the NT Police and Emergency Services, the Department of Education, the Department of Health, the Department of Children and Families, and the Department of Attorney-General and Justice.

Each respective agency provides the necessary support and processes to respond to the complex needs of child victims of sexual assault and criminal neglect. Whilst it is

not disputed that each of these agencies represent a vital link in the chain that responds to the needs of these children, the NT Government has recognised that the current framework suffers from structural and communication deficiencies from the perspective of child victims.

Children as victims have little input to the system that has been established to protect and enhance their well-being. In light of this, the current NT response to child abuse reflects a “system-driven” approach, rather than one that privileges the child victim’s perspective. In other words, instead of directly engaging with the child’s needs and experiences, the various agencies broadly impose their particular organisational framework upon the respective child. One of the key concerns arising from this approach is that child victims are required to re-tell their story to a number of different personnel throughout the service response chain.

This system-driven approach to child victims of sexual assault and criminal neglect has resulted in the inadequate mechanisms for inter-agency work and has led to fragmentation, lack of planning and poor communication between key stakeholders. We note that this is particularly concerning as the risks of re-traumatisation or system-induced trauma are significantly increased, as well as possible attrition for the child victim from the justice system. Consequently, the current response needs to be critically evaluated so as to move the NT framework away from this system-centric approach to a child-centered forum, ultimately ensuring that service providers are more proactively engaged and responsive to the direct experiences and needs of child victims.

The Child Advocacy Model

Developing out of the United States (‘US’) in response to heavy criticism regarding system-induced trauma on child victims, the Child Advocacy Centre model (‘CAC’) attempts to bring together child abuse authorities for a more supportive response to children and non-offending family members. Internationally recognised as best practice in responding to child abuse cases, the CAC model is viewed as the most effective model to protect and enhance to the needs of child victims of crime.

General Findings and Evaluation of the CAC

A growing body of research reflects a number of core benefits flowing from the CAC model, which includes:

- A decline in the number of times a child is interviewed, which has resulted in the reduction of children’s fear when being interviewed or engaging with agency personnel;¹
- An increase in cooperation and harmonisation among agencies supporting child victims;²

¹ TP Cross, ‘Evaluating Children’s Advocacy Centre’s Response to Child Sexual Abuse’ (2008) *Juvenile Justice Bulletin*.
<<https://www.ncjrs.gov/pdffiles1/ojjdp/218530.pdf>>.

² G. Lafrenière, ‘Establishing a Child Advocacy Centre in the Waterloo Region: Merits and Challenges,’ (2013) Submitted to the Child Witness Centre of Waterloo Region.

- An increase in processing times of the child victim cases;³
- An increase in the proportions of children receiving medical assessments and therapeutic services;⁴
- A decrease in cost to child abuse investigations (for sexual abuse cases), with some estimates stating that this model generates savings of more than \$1,000 per case;⁵
- An increase in child and caregiver satisfaction, especially where the CAC is perceived as being actively aware of the role that system responses can have on the experience of trauma of individuals;
- CACs with effective coordination with police revealed an impact on criminal justice outcomes, guilty pleas, an increase of cases proceeding to prosecution and convictions;⁶ and
- A reduction in foster placements for child victims.⁷

United States Accreditation Scheme

In the US, the majority of CACs are accredited through the National Children's Alliance. The National Children's Alliance requires that accredited CACs must meet certain standards under the following ten outcomes:⁸

1. Multi-disciplinary team approach and response;
2. Cultural competency and diversity;
3. Forensic interviews;
4. Victim support and advocacy;
5. Medical evaluation;
6. Mental health;
7. Case review;
8. Case tracking,
9. Organisational capacity; and
10. Child-friendly settings conducive to helping children and families feel comfortable.

We acknowledge that there are systems of CACs within the US that have modified or diverged from the standards outlined by the National Children's Alliance. However, given the wealth of research developed by the National Children's Alliance in establishing these standards, it is clear that these best practices provide a solid foundation from which future models can be built upon.

³ Ibid.

⁴ Natalie Hall, 'Child Advocacy in Australia: A Way Forward', (2007) *The Winston Churchill Memorial Trust*.

⁵ National Children's Advocacy Centre, 'Executive Summary' (2006) <<http://www.nationalcac.org/professionals/research/CBA%20Executive%20Summary.pdf>>.

⁶ People Who Have Experienced Abuse' <http://www.aic.gov.au/media_library/conferences/2015-wsv/wsv_2015_presentations/Hall.pdf>.

⁷ Ibid.

⁸ National Children's Alliance Revised Standards, 2011.

While TEWLS acknowledges that all ten standards are integral aspects of the CAC model, this submission will focus on a few key standards that we consider as fundamental to the success of any CAC model. In doing so, we will highlight and evaluate the potential challenges that may be faced in attempting to develop this model within a Northern Territory context.

Specific Evaluation and Standards

1) Multidisciplinary Team

In the NT, there are several potential barriers facing a multi-agency collaboration model. One key challenge is that the different agencies may perceive themselves as having conflicting philosophies, policies, and procedures in responding to child victims. Similarly, there may exist imbalances of power between agencies and from this, the potential development of distrust or wariness. In order to reduce these potential challenges, the structural relationship between different agency teams for a NT CAC model should address certain elements.

A) Joint vision

It is important to acknowledge that while each agency will bring their unique professional identity and organisational culture to the team,⁹ all agencies should ensure that they are connected by their joint goal of addressing and effectively responding to child victims of sexual assault and criminal neglect. Without active recognition and engagement with this shared goal, this model will be limited by inter-agency conflict, agency marginalisation, or even the exclusion of certain agencies from the team.

B) Strong inter-agency relationships

For a multi-disciplinary team to effectively respond to child victims in the NT, the various agencies should have the capacity to approach collaboration as a opportunity for joint problem solving and be able to jointly integrate agency goals. This capacity to develop strong inter-agency collaboration largely depends upon the degree to which information is shared within the team. Specifically, unless there is the capacity or internal structures to foster effective information sharing between agencies, the CAC model will be unable to resolve the current NT system inefficiencies. Consequently, there should be significant emphasis on developing information sharing policies and structures to foster the collaborative sharing, storing, and access to relevant information between team members.

The relevant NT agencies should also have consistent opportunities to engage in cross training and team building, learn about mandate and define the role and scope of each agency in the team.¹⁰ In doing so, this would ensure that not only are strong

⁹ Buchbinder & Eisikovits, 'Collaborative discourse: The case of policy and social work relationships in intimate violence intervention in Israel' (2008) *Journal of Social Service Research*, 34, 3.

¹⁰ Banks, Dutch, & Wang, 'Collaborative efforts to improve system responses to families who are experiencing child maltreatment and domestic violence' (2008)

networks of communication developed, but also that a degree of inter-departmental trust is established. These issues are significant for the efficacy of any potential inter-agency model, but provided that there is the appropriate level of inter-agency training and investment in the harmonisation of inter-agency relationships, it is arguable that these challenges can be controlled and limited.¹¹

2) Cultural Competency & Diversity

Another key concern for the CAC model is that all agencies within the team continue to develop their cultural competency skills when working with NT children and families. However, this emphasis on cultural competency should not restrict itself to the skills and training of the agencies involved. Instead, it is also important to develop policies on a structural or organisational level. Thus, Indigenous and CALD stakeholders must be involved in planning and developing CAC services within the community. Specifically, the development of CAC models should aim to foster community engagement as well as being mindful of community “readiness”, particularly in rural and remote areas.

For this model to be both perceived as effective and actually viable, the specific policies, practices and procedures within any revised framework must be culturally empowering, responsive and respectful for all community members of the NT.¹²

3) Victim Support and Advocacy

The purpose of the victim advocate (‘VA’) role within the CAC Model is to help reduce the distress that the child will experience within the justice framework and ensure that their needs during this time are met.¹³ For the VA role to provide this necessary support, several factors must be considered.

The core function of the VA position is to coordinate services within the CAC team to ensure that a consistent and comprehensive network of support is made available to the child and their family.¹⁴ To effectively execute this function, the VA should have the capacity to act as a “system navigator”, providing the child with the appropriate context, support, and connections within the MDT. One way in which this could be exercised within the NT model is that the VA is set up as the primary contact and support. This role would occur from the initial point the child enters the centre through to the conclusion of the matter. During this time, the VA would be required to organise the required referrals, facilitate agency interaction with the child, answer any

Journal of Interpersonal Violence 23, 893.

¹¹ Giaomazzi & Smithey, ‘Community policing and family violence against women: Lessons learned from a multi-agency collaborative’ (2001) *Police Quarterly* 4, 99; Newman, Dannenfelser & Pendleton, ‘Child abuse investigations: Reasons for using child advocacy centers and suggestions for improvement’ (2005) *Child and Adolescent Social Work Journal* 22, 165.

¹² For example, Champaign County Children’s Advocacy Center in Illinois developed a policy and action plan that looks at cultural competency from a governance, managerial, practitioner and client level.

¹³ The National Children’s Alliance Revised Standards, 2011.

¹⁴ Ibid.

questions and provide a contextual understanding for the child, and be an engaged and supportive listener.¹⁵

It is important to note that in overseas models, the VA role has been undertaken by a number of service providers and may look different from case to case. Nonetheless, for any VA role, whether it is provided family or victim advocates, care coordinators, child life specialists, domestic violence advocates, rape crisis counselors, etc. it is imperative that the VA has the appropriate skills, knowledge, experience and authority to properly execute their role as a child support person. This is especially important given the potential vulnerability of these child victims and the complex physical, mental and emotional needs they may present.

4) Organisational Capacity

There is a range of organisational structures available of the CAC depending on the specific needs of the community.¹⁶ However, it should be noted that current research into community and program development indicates that program success is largely driven by a local grass roots approach, rather than from the top down scheme.¹⁷

In the more geographically remote areas, professionals and community members will have to develop creative strategies to fit the CAC concept to their community's needs. Creative collaboration across communities and agencies such as Health, Education, Protection and Police could increase the viability of such facilities. For example, the benefits of a CAC will be diminished if a child has to travel long distances to reach the service. For example, Natalie Hall argues a well-resourced van could provide a range of assistance by experienced professionals, such as forensic medical and interviewing, health examinations, assessment, clinic services etc.¹⁸ Thus, whilst it is vital to ensure that the appropriate amount of funding and resources is provided for any potential CAC Model, for this model to be viable in the NT context, it is vital that communities are engaged and consulted regarding unique and creative options for any revised framework.

Coordination with Domestic Violence Services

One potential option for a NT CAC model is for the CAC team to collaborate and coordinate with relevant domestic violence service providers. In the US, it is estimated that 60% of the matters received by child protection services involved wider instances of family violence within the home.¹⁹ In a study conducted by Pulido and Gupta, female caretakers of children who were being evaluated for sexual or physical abuse were also given a questionnaire to complete regarding their experience with domestic violence. Of these caretakers, it was found that '67% of

¹⁵ Child Advocacy Centre Niagara, 2012.

¹⁶ The National Children's Alliance Revised Standards, 2011, 33.

¹⁷ Coulborn-Faller & Palusci, 'Children's advocacy centers: Do they lead to positive case outcomes?' (2005) *Child Abuse & Neglect*, 31, 1028.

¹⁸ Natalie Hall, 'Child Advocacy in Australia: A Way Forward', (2007) *The Winston Churchill Memorial Trust*.

¹⁹ Pulido & Gupta, 'Protecting the child and the family integrating domestic violence screening into a child advocacy center' (2002) *Violence Against Women* 8, 917.

female non-offending care takers reported a history of emotional abuse, 64% reported physical abuse, and 47% of sexual abuse'.²⁰ Due to this high correlation, it is vital that the revision of services consider that the well being of the immediate child can extend beyond and be affected by the safety of other family members.

In the US, there are a number of CACs that are placed with agencies that mainly respond to families and children that are victims of domestic violence.²¹ These integrated agencies, known as "Family Justice Centers", serve clients at both a CAC and a domestic violence focused agency. This development reflects an increasing recognition of the need to protect the entire family unit in order to fully ensure the needs of the child. From this, it is arguable that it is ineffective to focus only on the safety of child victims when a wider context of family violence is also occurring. In light of this, it is clear that there must be a highly collaborative response by both child abuse and domestic violence agencies to effectively develop the appropriate response to protect children as well as their families affected by violence.

Conclusion

TEWLS appreciates the opportunity to make this submission. We support ongoing improvements to services and responses targeting child sexual assault and criminal neglect in the Northern Territory and would be glad to be consulted regarding any proposed changes.

Yours faithfully,

TOP END WOMEN'S LEGAL SERVICE



Vanessa Lethlean
Managing Solicitor

²⁰ Ibid.

²¹ Ibid.

