



# BREAKING THE SILENCE, CREATING THE FUTURE: ADDRESSING CHILD SEXUAL ASSAULT IN ABORIGINAL COMMUNITIES IN NEW SOUTH WALES

New South Wales Aboriginal Child Sexual Assault Taskforce  
May 2006

## Executive Summary

### Background

The Aboriginal Child Sexual Assault Taskforce (ACSAT) was established in response to the Roundtables on sexual violence in Aboriginal communities conducted by the Department of Aboriginal Affairs in 2001/2 and to the finding of the Aboriginal Justice Advisory Council's 2002 report *Speak Out, Speak Strong* that approximately 70% of Aboriginal women in NSW prisons had been sexually assaulted as children.

### Aims

ACSAT's primary aims were to examine child sexual assault in Aboriginal communities, review how government and non-government agencies in NSW respond and make recommendations about how these responses could be improved.

### Method

Information for this report was gathered from:

- Review of literature and relevant research;
- Written submissions, and other information, from government agencies;
- Consultations with Aboriginal communities across NSW;
- Consultations with government and non-government agencies.

The starting point for analyses was current research into child sexual assault in Aboriginal communities, the Aboriginal community's perspective of child sexual assault and the issues they identified with current service responses.

This perspective was then matched with services provided by government and non-government agencies and gaps and barriers were identified. Recommendations were formulated to address these gaps and overcome barriers. (ACSAT recommendations, along with the outcomes these recommendations were formulated to achieve, are tabled at the end of this executive summary).

### Overview and Findings

#### The Aboriginal Community's Perspective on Child Sexual Assault

Child sexual assault was described as a 'huge issue' in every consultation ACSAT took part in. Both boys and girls were known to be victims and perpetrators were most often described as men who were grandfathers, fathers, step-fathers, uncles, cousins or brothers of the child. Often, perpetrators were also reported as being important people within the community.

Consultation participants often described sexual assault in their communities as intergenerational and they explained this in a number of ways. Child sexual assault was seen as being passed from one generation to the next. Some perpetrators had sexually assaulted a number of generations of children. Sibling abuse was considered rife and in some communities, the same perpetrator had sexually assaulted a whole generation of children from one extended family.

ACSAT found that child sexual assault was not well understood in Aboriginal communities, which meant it often went undetected. This lack of understanding also contributed to a culture of silence, denial, and inappropriate responses such as protecting the perpetrator rather than the child. It also made it possible for perpetrators to 'groom' their victim without

being noticed. Communities believe that these factors, among others, enable the abuse to continue unchecked.

Child sexual assault in Aboriginal communities is rarely reported. Communities acknowledged that reporting was difficult for all victims of child sexual assault. They felt that this difficulty was compounded for Aboriginal children by factors such as complex extended family and community networks; geographic isolation; mistrust of the service system; and poor responses from existing service providers.

Community attitudes as to what should happen to perpetrators varied. However, a number of participants stressed the importance of having a clear understanding of they dynamics of child sexual assault before making any decisions about treatment of perpetrators.

Every community spoken to by ACSAT agreed that child sexual assault has a devastating, and life-long impact on those who experience it and on their families and communities. Consultation participants believed that child sexual assault is one of the key, underlying factors in the high levels of violence, substance abuse, criminally offending behaviour and mental health issues that many Aboriginal communities are grappling with today. Research supports these links.

Communities and research identified a number of factors that influenced the incidence of child sexual assault. These include: substance abuse; social and economic disadvantage; exposure to pornography and sexualised society; the 'normalisation' of violence (or intergenerational cycle of violence); the presence of family violence, unresolved trauma and grief; breakdown of family and community structures; lack of community engagement with the issue; lack of support for community-driven solutions; and inadequate responses from service providers.

#### The Relationship between Child Sexual Assault and Family Violence

There is little research that specifically considers the relationship between child sexual assault and family violence. The research that there is suggests there is a strong link between the two forms of violence. Communities and research suggest that the presence of family violence in Aboriginal communities has a number of consequences that can influence the incidence of child sexual assault. This link requires further comprehensive research.

#### The Statistics

Data collected by NSW Government agencies suggest that Aboriginal females were almost two and a half times more likely to be victims of child sexual assault than non-Aboriginal females. However, this data only reflects incidents of child sexual assault in Aboriginal communities that are reported and where the Aboriginality of the victim is recorded. It is widely accepted that child sexual assault is an under-reported crime, particularly when it occurs in Aboriginal communities.

#### Overarching Government Responses to Child Sexual Assault in Aboriginal Communities

##### Policy Frameworks for Working with Aboriginal People

The Commonwealth and NSW Governments have agreed frameworks for working together to provide services to Aboriginal communities and improve outcomes for Indigenous Australians. These frameworks commit both governments to working with each other, and in partnership with Aboriginal communities, to: address disadvantage; improve access to services; provide services the community identifies it needs in ways that are appropriate; improve accountability of government services; and tackle agreed priority areas.

The specific detail of how the governments will work together, and on what, are enshrined in the Bilateral Agreement between the two governments.

The NSW Government has also developed the *Two Ways Together, NSW Aboriginal Affairs Plan (2003–2012)* to guide how it will work with Aboriginal communities to address disadvantage.

##### The Commonwealth Government's Overarching Response to Child Sexual Assault in Aboriginal Communities

In reviewing the Commonwealth Government's overarching response to child sexual assault in Aboriginal communities, ACSAT found that there is no national policy framework outlining the Commonwealth Government's position on child sexual assault and that child sexual assault has not been included in the Bilateral Agreement between the Commonwealth and NSW Government.

The Commonwealth Government provides a number of funding programs for family violence, however there is limited funding available to specifically address child sexual assault in Aboriginal communities. Initiatives such as the Family Violence Prevention Legal Services are well received in Aboriginal communities and should be expanded to cover the state.

The Commonwealth Government can help to get child sexual assault onto Aboriginal regional and community plans via its Indigenous Coordination Centres.

#### Whole of NSW Government's Overarching Response to Child Sexual Assault in Aboriginal Communities

When examining the whole of NSW Government's response to child sexual assault in Aboriginal communities, ACSAT found that there is no state-wide policy framework that specifically addresses child sexual assault in Aboriginal communities and child sexual assault is not explicit in the current Two Ways Together – Aboriginal Affairs Plan (2003-2012) framework. In addition, the way the NSW and Commonwealth Governments work together to address child sexual assault needs to be clarified and the links strengthened.

ACSAT also found that service responses to child sexual assault were not being provided in a holistic way. A holistic response would include: understanding Aboriginal families and communities as interlinked networks; providing coordinated service responses; reviewing interagency guidelines; unifying definitions of child sexual assault across agencies; addressing child sexual assault at the same time as addressing social and economic disadvantage; and appropriate physical locations for services. Services need to be provided holistically and this needs to be effectively co-ordinated.

There are a number of issues with the way data is collected by NSW government agencies, including: inconsistent recording of Aboriginality; use of different key definitions across agencies; agencies recording data across different time periods; and information being lost because the categories used to collect data are sometimes ambiguous. These issues result in data being less useful than it could be and also makes it difficult to correlate and compare data across agencies.

The NSW Commission for Children and Young people currently has no programs that specifically address the safety and well-being of Aboriginal children and young people.

Child sexual assault is currently not on local, regional, state or national agendas. There is limited government leadership of the issue of child sexual assault in Aboriginal communities at the political or the agency level. The NSW Government, via its Department for Aboriginal Affairs, has a role in helping communities to put it on the agenda and develop local strategies to address it. The NSW Government needs to provide funding streams for local Aboriginal initiatives to address child sexual assault.

There is a lack of awareness and understanding about child sexual assault among Aboriginal communities and among service providers and this is impacting on the levels of reporting and on the way services respond.

Communities expressed concern that the findings of ACSAT won't be published and that the recommendations won't be implemented. They felt that they had contributed to many government inquiries in the past that had not been acted upon. ACSAT believes that an implementation strategy needs to be developed to ensure a coordinated and timely government response to its findings. ACSAT noted the success of having the NSW Police *Aboriginal Strategic Direction Policy* audited by the NSW Ombudsman. It believes it would be useful to have the NSW Ombudsman conduct a similar audit of the implementation of ACSAT recommendations across the whole of NSW Government and each of the relevant government agencies.

#### NSW Agency Responses to Child Sexual Assault in Aboriginal Communities

##### Department of Community Services

When examining the Department of Community Services (DoCS) response to Aboriginal experiences of child sexual assault, ACSAT found that communities understood that there was considerable pressure placed on DoCS staff and on the agency as a whole. Participants in some consultations reported that the DoCS workers in their area were doing a good job and really making efforts to work with the community.

However, ACSAT also found that many Aboriginal people continue to fear and mistrust DoCS as a consequence of past practices towards Aboriginal people. This fear is compounded by a lack of understanding of DoCS and what it can do and the supportive roles it has. It is also compounded whenever DoCS respond inappropriately or inconsistently

to a report of child sexual assault, do not keep the families informed about what is happening with a case or don't make appropriate referrals for support. ACSAT found that for many, the current service system has not been successful in overcoming the wrongs of the past or in building trust within communities.

ACSAT also found that the relationship the Aboriginal community has with DoCS is complex and varies from community to community. In some communities, there was a perception that DoCS was too involved with families and was not letting Aboriginal parents be involved in decisions about their children. In other instances, communities believed that DoCS did not do enough and that even if they reported child sexual assault to DoCS, DoCS would not take action.

There are few stable out-of-home care placements available for Aboriginal children and young people. In some instances children have been placed in out-of-home 'kinship' care but have remained exposed to risk of violence and sexual assault from someone within this care environment. DoCS need to thoroughly assess and monitor out-of-home care placements to ensure they are safe for children *before* a child is placed there. Where a stable 'kinship' out-of-home care placement exists, DoCS need to provide adequate financial and practical supports to enable it to continue.

Communities identified a need for some DoCS staff to improve their understanding of Aboriginal culture and engage more with local communities. Communities where there was an Aboriginal Child, Youth and Family Strategy worker were more positive about DoCS and knew more about the services DoCS provide. Communities recognised the importance of getting family support early but found that most early intervention and prevention programs were not Aboriginal specific and therefore were difficult to access.

DoCS acknowledge the impact of past practices and have made a commitment to 'encourage positive relationships and bridge cultures' with Aboriginal communities. It reports it is in the final stage of developing an *Aboriginal Strategic Plan* and the DoCS Executive have made 'a clear commitment to make Aboriginal child protection one of the organisation's top priorities over the next few years'. ACSAT believes that the implementation of the *Aboriginal Strategic Plan*, and these commitments, should be audited by the NSW Ombudsman, in a similar way to its audit of NSW Police's *Aboriginal Strategic Direction*.

In addition, DoCS have attempted to employ more Aboriginal staff. However, many Aboriginal workers employed by DoCS report feeling overworked and overwhelmed and not properly supported. As a result, DoCS has difficulty attracting and retaining Aboriginal staff.

ACSAT found that: young people aged 16-18 are falling through a service gap, with many communities not aware that DoCS are supposed to provide support for this age group; the *Negotiating Consent* package produced by the NSW Violence Against Women Unit could be made more effective by including an Aboriginal specific strand; and sexually transmitted infections (STI's) are not being reported to DoCS.

### NSW Police

When examining NSW Police response to child sexual assault in Aboriginal communities, ACSAT found that NSW Police had acknowledged the tensions between police and the Aboriginal community and has begun to make inroads into addressing this tension and building relationships with communities through its Aboriginal Strategic Direction. When police are involved with the local Aboriginal community in a positive way, and respond appropriately to Aboriginal reports of crime, reports of child sexual assault from the community increase. Some positive relationships between police and Aboriginal communities were reported.

However, there are still a number of historical barriers that prevent Aboriginal people from reporting to police when they become victims of crime. An inappropriate response by police reinforces these barriers, further alienates Aboriginal people from the police and prevents them from reporting child sexual assault. Some inappropriate responses were reported, suggesting that some police do not have the skills required to work effectively with Aboriginal people, nor to respond to child sexual assault.

Aboriginal communities and NSW Police acknowledge the need for more Aboriginal police and more female Aboriginal community liaison officers. NSW Police are working on this through its Aboriginal recruitment strategy.

### NSW Health

Overall, Aboriginal communities were positive about the quality of health services provided by NSW Health. Aboriginal

community workers who took part in consultations were aware that NSW Health provided training about child sexual assault via the Education Centre Against Violence (ECAV) and they were very positive about ECAV's work. However, ACSAT also identified a number of barriers to NSW Health providing an effective response to Aboriginal experiences of child sexual assault.

ACSAT found that people were often confused about the roles of all the different health workers and were often not aware of the services provided by sexual assault services. Some consultation participants reported to ACSAT that the telephone counselling for child sexual assault, funded through NSW Health, is not culturally appropriate. Drug and alcohol and mental health services are not adequately responding to the possibility/likelihood that their clients may have experienced child sexual assault.

Some NSW Health Services are difficult to access for Aboriginal people. It was often reported that there are not enough forensic services available, particularly in rural and regional areas. Similarly, there are not enough counsellors or support workers who are able to respond to child sexual assault in Aboriginal communities. Referral requirements restricted this access even more, resulting in victims often experiencing lengthy delays in accessing counselling and support. ACSAT also identified that it is unclear what sort of counselling models work well for Aboriginal people.

While NSW Health runs the only publicly funded treatment program (outside of a correctional facility) for adolescent sex offenders and pre-trial diversion treatment program for adult offenders of child sexual assault, these programs are only resourced to take a small number of participants and they haven't been very effective for Aboriginal offenders. ACSAT found that there are no publicly funded treatment programs for adults who sexually offend but are not implicated in the criminal justice system.

Consultations identified a need for a network of advocacy and support workers who can provide support to Aboriginal families who have experienced child sexual assault from disclosure through to recovery. NSW Health was considered the ideal agency to host this network as most communities reported a good rapport with their local health services.

### Joint Investigative Response Teams

Overall, when community members were involved in a joint investigation response, they were satisfied with the coordination and management of cases. However ACSAT found that most communities remained confused about the functions of JIRT, the roles and responsibilities of the various JIRT officers and how a JIRT response differed from a DoCS or Police response. Few people realised that NSW Health was part of JIRT.

Comments from communities about JIRT responses suggest that some JIRT staff did not understand Aboriginal culture or the implications of child sexual assault occurring in an Aboriginal community. This was reflected in interviewing and communication styles that did not accommodate Aboriginal cultural practices and were not very effective with Aboriginal children and young people. Families also reported that they were not kept informed about what was happening with the investigation and this made them feel as though they were not getting any response. These factors, coupled with the absence of Aboriginal people in JIRT service delivery, either as staff or community partners, makes the JIRT experience for Aboriginal victims and their families very difficult.

Many Aboriginal people have difficulty attending JIRT offices, particularly in rural and remote areas, as they often have to travel long distances and may not be able to access or afford transport. Where transport is required, community members said they would prefer to be transported by NSW Health, as most do not feel comfortable travelling with DoCS or Police.

Communities often reported that they didn't feel reported by JIRT. NSW Health needs to be more involved in the JIRT response by providing counselling and support services as soon as possible. ACSAT found that co-location of JIRT offices (i.e. DoCS and Police at the same premise) was an effective way of providing services as it promotes a positive working relationship between agencies and provides a more effective and convenient response to Aboriginal children and their families. ACSAT believes a NSW Health worker should also be positioned in all co-located JIRT offices. JIRT also needs to develop working relationships with local and regional support services that may already be providing support to families involved in a JIRT investigation. JIRT needs to let these agencies know how to provide support in ways that will not impact on the investigation.

When ACSAT spoke with a JIRT, or one of its member agencies, throughout the course of this inquiry it found that no one agency has overall responsibility for the coordination and leadership of JIRT.

#### Office of the Director of Public Prosecution

ACSAT found that where Aboriginal people had received support through the court process from an ODPP Witness Assistance Service (WAS) officer, they felt very supported. Most Aboriginal people said they would prefer to receive this support from an Aboriginal person. However, the small number of Aboriginal WAS officers employed means that access to this support is limited.

WAS officers and prosecutors need a greater understanding of Aboriginal culture and Aboriginal experiences of child sexual assault in order to provide effective support to Aboriginal victims of crime and their families and successfully prosecute offenders in child sexual assault matters where the victim is Aboriginal.

#### The Judiciary

During consultations, comments made to ACSAT about court processes suggest that some judicial officers have little understanding of Aboriginal culture and an incomplete understanding of child sexual assault and this impacts on their capacity to provide fair arbitration in these matters. The evaluation of the recent Child Sexual Assault Specialist Jurisdiction Pilot confirms this finding. It suggests that, despite having been given a comprehensive information manual on child sexual assault, some judicial officers were still not using all of the measures now available in law to support child witnesses going through the court process.

#### Attorney General's Department

When examining the Attorney General's Department (AGD) responses to Aboriginal experiences of child sexual assault, ACSAT found that a number of initiatives trialed in Child Sexual Assault Jurisdiction Pilot have begun to improve the experiences of children, young people and their families going through the court process.

However, ACSAT also found a number of barriers to Aboriginal people effectively accessing the criminal justice system. Court processes are still long and traumatic for Aboriginal children

and their families and sentencing of offenders is perceived as inconsistent and often being too lenient. Across all services, there is a lack of culturally appropriate material explaining court processes and preparing people for court.

There are a number of barriers to Aboriginal victims of crime accessing Victims Services, including: a lack of awareness of Victims Service and the counselling and compensation they can access from this service; limited access to Aboriginal counsellors or counsellors experienced in working with Aboriginal people; difficulties physically getting to counselling sessions as people may have to travel long distances and may not be able to access, or afford, transport; and the cap on counselling provided under Victims Services Approved Counselling Scheme (22 hours) is too low for some Aboriginal victims of crime.

ACSAT found that the Victims Services Remote/Regional Coordinator positions, which would be key to promoting Victims Services to Aboriginal communities, are vacant and have been for some time.

#### Department of Corrective Services

When examining the Department of Corrective Services (DCS) response to child sexual assault in Aboriginal communities, ACSAT found that Aboriginal people are over-represented in the DCS system. In 2003/4, Aboriginal people made up approximately 19% of the average number of male offenders, and 28% of the average number of female offenders, in custody on any given day<sup>1</sup>, yet they make up only 1.5% of the general population over the age of 15 years in NSW.

Research suggests there is a high likelihood that Aboriginal prison inmates are also survivors of child sexual assault. DCS reported that while some support may be provided to female inmates if they disclose a history of child sexual assault, male inmates are actively discouraged from addressing their issues while they are incarcerated. In addition, ACSAT found that DCS staff do not always respond supportively when disclosures of child sexual assault are made by inmates. Aboriginal communities believe this is a lost opportunity, as for some, the time away from family and community can provide the space they need to begin healing from the assault.

DCS does not try and identify survivors of child sexual assault on admission and provides no support programs that

specifically address the issue. In DCS programs for inmates that aim to reduce the likelihood of re-offending, ACSAT found no specific reference to the experience of child sexual assault as a possible causal factor in offending behaviour. Data about inmates who are also survivors of child sexual assault is not collected, so DCS does not have an overview of the extent of the issue among the Aboriginal prison population.

In relation to Aboriginal sex offenders, ACSAT found that it was not known whether the sex offender programs being run in DCS facilities were effective for Aboriginal people. While DCS has developed an Aboriginal cultural program that runs in parallel with its sex offender program and aims to help Aboriginal inmates access the program information more effectively, ACSAT believes that an Aboriginal specific program needs to be developed.

Communities reported that the transition of a sex offender back into the community is often conducted without community involvement and without adequate support from DCS and this is putting children and young people at risk.

ACSAT found that DCS has a role to play in developing prevention and treatment programs for adults who display sexually offending behaviour but are not yet involved in the criminal justice system.

#### Department of Juvenile Justice

When examining the Department of Juvenile Justice (DJJ) response to child sexual assault in Aboriginal communities, ACSAT found that Aboriginal children and young people are grossly overrepresented in the juvenile justice system. In 2003/4, Aboriginal children and young people made up 43% of the average number of children and young people in custody on any given day<sup>2</sup>, yet they make up less than 2% of the general population aged 10 to 18 years<sup>3</sup>.

DJJ reports that if detainees disclose a child sexual assault history, or it is identified in the screening process of new detainees, they are referred to Justice Health for appropriate support and services. However, ACSAT found that the screening processes used by DJJ were unlikely to identify experiences of child sexual assault victimisation among young Aboriginal detainees. Any data about child sexual assault victimisation that is collected is not being collated or analysed in any clear way. In addition, most DJJ staff

displayed limited knowledge of the dynamics of child sexual assault in Aboriginal communities and how experiences of child sexual assault might impact on the behaviour of the victim.

There are few programs specifically for Aboriginal detainees and while DJJ is in the process of developing more, none of these will address child sexual assault. Aboriginal detainees also appear to have limited access to child protection education. The impact of experiences of child sexual assault on criminally offending behaviour is not specifically addressed in any programs that aim to reduce the likelihood of re-offending.

It is not known whether sex offender treatment programs for juvenile sex offenders are working for young Aboriginal detainees as this needs to be evaluated and a more effective model may need to be developed. ACSAT also found that DJJ has a role to play in developing prevention and treatment programs for children and young people who display sexually abusive behaviour but are not yet involved in the criminal justice system.

#### Department of Education and Training

When examining the Department of Education and Training (DET) response to child sexual assault in Aboriginal communities, ACSAT found that overall, communities were positive about their local schools and educational facilities.

ACSAT found that while some communities said their local schools were performing their child protection responsibilities adequately, others reported that some teachers in their local schools were not reporting child sexual assault to DoCS even though they knew it was happening and they were mandated to do so.

Participants believed that teaching protective behaviours to Aboriginal children and young people was a vital component to addressing child sexual assault in Aboriginal communities and that schools were the ideal place for this learning to occur. However, they stressed that any teaching and learning about child protection and protective behaviours to Aboriginal children and young people must be culturally appropriate and would ideally involve the local community in its development and delivery. The *Negotiating Consent* package developed by the NSW Violence Against Women Unit was well received and should be run in all secondary schools.

There are a number of Aboriginal people employed within the DET system. However, the community believed that more Aboriginal staff are needed in student support roles, particularly counsellors and welfare positions. It is important that Aboriginal staff working in schools understand the indicators and dynamics of child sexual assault and the impact it has on communities so they can provide appropriate support to students, their families and the school. ACSAT found that further research is required about the specific support needs of Aboriginal children and the best ways to provide this support. ACSAT found that the human services courses, welfare courses and counselling courses being offered through TAFE need to include teaching about child sexual assault in Aboriginal communities.

### Department of Housing

When examining the Department of Housing (DoH) response to Aboriginal child sexual assault, ACSAT found that Aboriginal communities are often unaware that emergency and alternative accommodation is available to families in crisis as a result of child sexual assault.

ACSAT also found that DoH is often the first point of contact between Aboriginal communities and government agencies and that, this contact is regular. Communities believed it was possible that people could disclose child sexual assault to a DoH staff member and that it was crucial that they knew how to respond/refer appropriately and supportively.

Another issue raised was that many Aboriginal communities experienced chronic overcrowding in their houses and this increased the vulnerability of children.

### Non-Government Organisations

When examining the response of non-government organisations (NGOs) to child sexual assault in Aboriginal communities, ACSAT found that communities believed that most NGOs provided a flexible service that responded to their needs. For many Aboriginal people, NGOs are the only service they will use.

Many NGOs reported feeling unsupported by government agencies. In addition, they felt that there is insufficient funding for them to provide a service that truly meets community need. There is a prevalence of one-off, project

funding available and they believed that this leads to an ad hoc delivery of services.

While all NGOs involved in consultations were aware of their reporting obligations, some individual staff members indicated that they weren't sure what this meant. Community members also expressed concern that some NGOs weren't making a report even when one was clearly required. As NGOs are often the first, and in some instances the only, point of contact for Aboriginal people who have experienced child sexual assault, it is crucial that they are aware of their reporting obligations and are able to provide an effective response. As such, NGOs need access to training on the dynamics of child sexual assault in Aboriginal communities.

Staff of NGOs reported that they wanted clearer guidelines for instances where they were required to provide support to their own family and/or community.

### Alternative Models for Addressing Child Sexual Assault

ACSAT looked in detail at the model currently being implemented in NSW and then searched for areas within Australia and around the world where a modified or different model is being used to effectively respond to child sexual assault in Indigenous communities.

In this context, ACSAT considered the differences in approach between adversarial (where cases are tried in a court before an impartial judge and guilt must be proven beyond reasonable doubt), inquisitorial (where the court is actively involved in determining the facts of a case) and restorative (where key parties to the dispute meet with the aim of repairing harm) systems of dispensing justice, as well as identifying different ways of working with existing services and new ways of responding.

The alternative models being implemented outside of NSW that are discussed are:

- Specialist sexual offences courts in South Africa, where certain courts have been dedicated to prosecuting sexual offence cases;
- Cherbourg Critical Incident Group in Queensland, where a group of community women meet with other community members and government agencies on a regular basis to develop and drive a local response to child sexual assault in the Cherbourg community;



- The Community Holistic Circle Healing process of Hollow Water, Canada, a model developed by an Indigenous Canadian community where a disclosure of child sexual assault triggers an immediate *community* response which supports and protects the victim and begins 'working with' the offender to get them to admit to the offence. If the offender admits their guilt, they are offered the choice of going through the criminal justice system or remaining in the community and participating in an intensive community-based treatment and healing process. If the offender does not admit their guilt, the community hands them over to the police

ACSAT considers the discussion of alternative models to be introductory rather than definitive. The theory and principles behind each approach is complex and the appropriateness of various responses to child sexual assault in Aboriginal communities requires careful consideration and thorough research.

### Creating the Future

ACSAT has completed a thorough review of child sexual assault in Aboriginal communities and the way the NSW Government and non-government sectors respond. This review has identified the devastating effects that child sexual assault is having on Aboriginal communities and an overwhelming desire among community members for the abuse to stop and healing to begin. It has also revealed a comprehensive government system of child protection and criminal justice that has many barriers and gaps in the way services are provided to Aboriginal people. These barriers and gaps are rendering this response ineffective for most Aboriginal people who are seeking help to deal with child sexual assault.

ACSAT has formulated many recommendations that aim to overcome these barriers to access and eliminate service gaps. Once implemented, these measures will allow both the government and the community to work together more effectively and in turn, provide more positive outcomes to Aboriginal people.

However, ACSAT believes that more is required. Aboriginal communities and ACSAT believe that NSW needs an effective, cooperative response to child sexual assault that is *community driven* and works with government agencies in

genuine partnership. This would require the development of a new model.

ACSAT believes that in order to truly realise the vision of Aboriginal communities, the recommendations of this Taskforce need to be implemented at the same time as a new model for responding to child sexual assault in Aboriginal communities is researched and developed.

### Endnotes

- 1 Corporate Research, Evaluation and Statistics Unit, DCS statistical data provided to ACSAT 19 January 2006.
- 2 NSW Department of Juvenile Justice, *Annual Report 2003/2004*.
- 3 Standing Committee on Law and Justice, 2000.

*The full text of this document, including a substantial number of Taskforce recommendations, is available online at the website of the Aboriginal Child Sexual Assault Taskforce < <http://www.lawlink.nsw.gov.au/acsat> >.*