



Commissioner for Children and Young People
Western Australia

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The Honourable Matthew Swinbourn MLC
Chair
Standing Committee on Environment and Public Affairs
4 Harvest Terrace
WEST PERTH WA 6005

Dear Chair

Inquiry into children and young people on the Sex Offenders Register – Questions on Notice

Thank you for the opportunity to provide additional information to the Standing Committee on Environment and Public Affairs regarding the mandatory registration of children and young people on the Community Protection Offender Reporting Register.

Please find below my responses to the four Questions on Notice received 19 August 2019 on the topic of addressing harmful sexual behaviours in young people. As I said in my initial submission to this inquiry, it is critical that the Committee consider in its deliberations how to best protect the rights and best interests of young offenders as well as the rights and best interests of non-offending children and young people living in our community. I believe that a legislative framework that facilitates the provision of preventative activities and therapeutic supports in relation to harmful sexual behaviours in young people is a key element to protecting the rights and interests of both of these groups of young people.

1. What kind of treatment or therapy do children and young people who have exhibited harmful sexual behaviour need?

In 2017 my office worked with the Australian Centre for Child Protection to develop a guide to inform understanding of the breadth of services and supports required to effectively respond to the emerging issue of children who display harmful sexual behaviours towards other children. The report produced, *A Continuum of Responses for Harmful Sexual Behaviours*, sets out in detail the need for a variety of services and approaches that meet the diverse needs of children and young people who display harmful sexual behaviours and are appropriate to the context of the behaviour occurring. The report advocates for a *"strategic and well implemented multi-agency response at all levels of the community, including individuals, families, schools, government and specialised services."*

To maximise the effectiveness of therapeutic responses we need to be intervening at the earliest opportunity when harmful sexual behaviours can be first identified and ensure that subsequent therapeutic responses are tailored to:

- the nature of the behaviour on the continuum of problematic to violent;
- the underlying cause of the behaviour; and
- the developmental, environmental and cultural needs of the child concerned.

Effective individual interventions will include working with parents or care givers who are well placed to support appropriate interventions, and providing a collaborative, multi-agency response in recognition of the complexity of the environments in which harmful sexual behaviours occur. For example, a child may require a coordinated response involving their school, therapeutic service providers, their parents or carers, and, if necessary, the criminal justice system.

The Royal Commission into Institutional Responses to Child Sexual Abuse has also made critical recommendations in regard to the responses required to address harmful sexual behaviours. It is important that in implementing these recommendations Commonwealth and State governments work collaboratively to invest in an appropriate level of response that comprehensively addresses the prevention, early intervention and management of harmful sexual behaviours for children and young people.

With particular regard to therapeutic treatment, the Royal Commission outlined the following best practice principles for such responses¹:

- A contextual and systemic approach should be used;
- Family and caregivers should be involved;
- Safety should be established;
- There should be accountability and responsibility for the harmful sexual behaviours;
- There should be a focus on behaviour change;
- Developmentally and cognitively appropriate interventions should be used;
- The care provided should be trauma-informed;
- Therapeutic services and interventions should be culturally safe; and
- Therapeutic interventions should be accessible to all children with harmful sexual behaviours.

The Royal Commission stated in its report that these principles are relevant to children of all ages. I believe they should be taken into account in the development of any Western Australian intervention strategies and supports. Unfortunately there is a lack of evidence at present regarding best practice interventions specifically for children aged under 10 years who display harmful sexual behaviours and for children who are not subject to a criminal prosecution.

Considerable work needs to be done to shift the focus from criminal prosecution to a therapeutic response in Western Australia, particularly if we are to intervene at an earlier point

¹ Royal Commission Into Institutional Responses to Child Sexual Abuse (2017) Final Report Children with Harmful Sexual Behaviours. Volume 10, pp192-193

when Harmful Sexual Behaviours, or early indicators of them, are emerging. Evidence suggests that a barrier we currently face in terms of early intervention is that the current emphasis on a criminal justice response acts as a deterrent for parents and caregivers to come forward when they are concerned about a child's behaviour. In developing a more comprehensive framework for responding to harmful sexual behaviours we need to consider a public health approach that would allow for a thorough understanding of the scope of the issue, identify the different points and appropriate types of intervention (from a primary through to a tertiary level), and monitor intervention effectiveness through evaluation and data collection.

2. Do therapeutic measures help to reduce the likelihood of re-offending?

As an emerging field there is a paucity of evidence in regard to the efficacy of therapeutic interventions, particularly in the Australian context. More research is required to build our understanding. However, some promising practices have been identified in the Royal Commission's research². These include child-focused and family centred approaches, individualised treatment options, and collaborative models that facilitate a multidisciplinary approach to address multiple issues the child may be experiencing.

I would like to draw the Committee's attention to the United Kingdom's Harmful Sexual Behaviour Framework³ (the UK Framework), developed by the National Society for the Prevention of Cruelty to Children. The UK Framework states:

"Interventions should be child-focused and based on rigorous assessment... Effective support should target presenting sexual behaviour problems as well as broader issues in the child or young person's early experience (unresolved trauma, experiences of abuse, family issues). Engagement with the family or carers is vital in supporting change and welfare for children and young people."

The UK Framework further highlights the focus on strengths-based or resilience-based approaches that work with the broader contextual elements, such as family relationships, in addition to working with the young person individually.

Importantly the UK Framework also states, *"Most children and young people who demonstrate Harmful Sexual Behaviours don't go on to become adult offenders, particularly with the right interventions and support. Research suggests that non-sexual re-offence is more common than sexual recidivism, emphasising the need for interventions to focus on broad-based behaviour and developmental goals."*

3. Are specialist services available in WA?

In addition to the *Continuum of Responses for Harmful Sexual Behaviours* report, my office also undertook a mapping of services available for Western Australian children and young people

² Ibid (pp177)

³ Hackett S, Branigan P and Holmes D (2019) Harmful Sexual Behaviour Framework: An evidence- informed operational framework for children and young people displaying harmful sexual behaviours. Second edition, London, NSPCC.

who display harmful sexual behaviours or have been victims of such abuse. I have attached a copy of this report, which is also available on my website. The mapping report concluded that in Western Australia:

- The only state-wide prevention strategy is education of children through the school curriculum. There are no quality control or monitoring mechanisms in place regarding this strategy.
- There are no readily identifiable educational strategies for parents or community members state-wide.
- The majority of funded services and government responses are within the child protection system that primarily facilitates the reporting of child-at-risk concerns.
- The current service system is being supplemented by a large number of private practitioners who are providing services privately or with government funding.
- There are no specialist services for children with harmful sexual behaviours in Western Australia; services are provided by general child sexual abuse services.
- The key issues for the service system (as identified by service providers) are insufficient service availability, inadequate service funding, increasing acuity and complexity of client presentation, how services work with each other and workforce and development issues.

The Royal Commission also conducted research into the availability of these services. It concluded that there were significant gaps in the availability of specialist services for children with harmful sexual behaviours across Australia, and did not identify any such services in Western Australia. Of note is the fact that the Royal Commission quoted the Western Australian Government's submission on harmful sexual behaviours as identifying that assessments were being conducted by professionals with insufficient expertise⁴. This is concerning given the potential ramifications of unskilled assessments and their effect on interventions. Other gaps of particular concern occur in relation to children under the age of 10 years and therapeutic responses that are culturally appropriate.

Clearly, significant investment will be required to build intervention services that are accessible to those children who need them. Attention will also need to be paid to building an evidence base through the evaluation and monitoring of service effectiveness to ensure positive outcomes for the individual, their family and the broader community.

My office has been supporting the Western Australian Government's implementation of the Royal Commission's recommendations regarding harmful sexual behaviours. I also recently supported a number of staff from generalist child sexual abuse services to attend the Australian and New Zealand Association for the Treatment of Sexual Abuse (ANZATSA) conference in Brisbane as a strategy to commence building the necessary skills and knowledge in this State, particularly regarding the development of culturally appropriate services for Aboriginal people.

⁴ Royal Commission et al (pp172)

4. Are there any other legal or social interventions that will assist children and young people exhibiting harmful sexual behaviour?

Prevention activities are significant in reducing the likelihood of children and young people engaging in inappropriate behaviour unwittingly. The UK Framework again is illustrative of this, stating:

"Education and health are the universal services accessed by almost all children and young people. Schools have a key role to play in the primary prevention of Harmful Sexual Behaviours via a range of initiatives; provision of quality advice and work with children, young people and their families; and sensitive risk and casework management. Personal, social, health and economic education and sex and relationships education should aim to provide information and facilitate discussion about sex and consent and how children, young people and their parents can get further support and advice."⁵

My office has also raised concerns about the increased sexualisation of children and young people and access to sexualised information and imagery through advertising, media, and social media. While again the evidence is limited, it is important to understand the link between these factors and their impact on children and young people who display harmful sexual behaviour. I am supportive of further research being undertaken in this area.

Thank you again for the opportunity to provide this additional information to your inquiry.

Yours sincerely,



COLIN PETTIT

Commissioner for Children and Young People WA

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⁵ Hackett et al (2019)