# HealingFoundation

Strong Spirit • Strong Culture • Strong People

# Looking Where the Light Is:
# creating and restoring safety and healing

*A cultural framework for addressing child sexual abuse in Aboriginal and Torres Strait Islander communities*

# REPORT

# Contents

# 1. Introduction

In 2016, in response to the *Royal Commission into Institutional Responses to Child Sexual Abuse*, The Healing Foundation released a discussion paper titled *Restoring our Spirits – Reshaping our Futures.* It set out a culturally based healing framework for understanding and responding to trauma experienced by Aboriginal and Torres Strait Islander people who were sexually abused as children within public and private institutions. A range of recommendations were made to create change at a community, family and individual level to address the ongoing impacts of trauma stemming from institutional abuse. One of the recommendations was for The Healing Foundation to develop culturally based healing responses to protect children who have been sexually abused from further harm and to address the needs of perpetrators of child sexual abuse to stop the cycle of intergenerational abuse.

In responding to this recommendation, The Healing Foundation brought together a Knowledge Circle of key Aboriginal and Torres Strait Islander service providers and survivors along with relevant non-Indigenous practitioners and researchers. The Knowledge Circle shared cultural, practice and research knowledge related to understanding, preventing and responding to child sexual abuse.

This paper sets out a culturally based practice framework for understanding and responding to child sexual abuse. The framework is designed to create and restore safety and healing for Aboriginal and Torres Strait Islander children, families and communities. It takes a holistic view of sexual abuse in terms of its causes and impacts on children, families, perpetrators and communities and proposes an integrated response to the complex challenges of those causes and impacts.

The concept of creating and restoring safety and healing connects the present with the past and future. It draws upon the enduring strength and resilience of Aboriginal and Torres Strait Islander cultures to drive safety and healing for children, families and communities along with relevant literature on child sexual abuse, trauma and healing.

The framework addresses:
- the context of child sexual abuse and gaps in current approaches to addressing it
- values led approaches
- key elements and strategies for creating and restoring safety and healing

# 2. Context

## a. Nature and impact of child sexual abuse

Definitions of child sexual abuse differ across Australian jurisdictions according to government policy and legislation. Variations occur in relation to age, consent, the nature of the behaviours and the relationship between the victim and perpetrator. There is therefore no consistent definition of child sexual abuse that covers all behaviours, relationships between victims and perpetrators, and contexts in which it occurs.

The World Health Organization (1999, in Quadara, Nagy, Higgins and Siegel, 2015) defines child sexual abuse as:

*The involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared and cannot give consent, or that violates the laws or social taboos of society. Child sexual abuse is evidenced by this activity between a child and an adult or another child who by age or development is in a relationship of responsibility, trust or power, the activity being intended to gratify or satisfy the needs of the other person. This may include but is not limited to:*

- *the inducement or coercion of a child to engage in any unlawful sexual activity*
- *the exploitative use of a child in prostitution or any unlawful sexual activity*
- *the exploitative use of a child in a pornographic performance and materials (p.62).*

Child sexual abuse occurs in a range of relationships and circumstances including:
- abuse by a parent or family member
- abuse by a person known to them within the community (e.g. someone in a position of authority in sport and recreation activities, school, church, out of home care)
- abuse by a stranger

Children or young people themselves may also engage in harmful sexual behaviour with other children and young people. There are difficulties in defining what constitutes harmful or sexual behaviour due to the age and development of the children involved, the age at which children are considered 'culpable', and concerns about the impact of labelling children (El Murr, 2017; Shlonsky, Albers, Tolliday, Wilson, Norvell and Kissinger, 2017). Ell-Murr (2017) provides the following definitions:

*Problem sexual behaviours - applies to children under 10 years old, who are below the age of criminal responsibility. It describes sexual behaviour or behaviours that are outside the typical range for age and /or stage of development of children.*

*Sexual abusive behavior - applies to children and young people aged 10 to less than 17 years old, that is, the cohort still defined by the criminal law to be minors but who have reached the minimum age of criminal responsibility.*

Child sexual abuse and the resulting trauma can affect a child's immediate and longer term physical and mental health, behaviour and development. Impacts include:

- anxiety, depression and other mental health issues
- physical health issues, immediate and ongoing
- self-harm and suicide
- risk taking behaviours, including alcohol and substance use
- neurodevelopmental impacts
- education and workforce participation
- difficulties with personal relationships and parenting
- subsequent abuse in childhood and/or adulthood

The child or adult's experience of disclosing sexual abuse to others will also contribute to these impacts by either supporting their safety and recovery or adding to their trauma. Where children have not been believed, research and clinical experience indicates this is extremely distressing and potentially re-traumatising, with lifelong negative impacts.

The impact of child sexual abuse is broader than the child themselves. It can affect families, communities, cohesion and culture in the following ways:

- trauma to the non-offending parent, siblings and other family members
- rekindling of undisclosed or unresolved trauma in others
- shame to family and community members
- impaired parenting capacity of non-offending parent
- conflict and breakdown in family and community relationships
- economic hardship
- disconnection from culture and diminished participation in cultural processes

Similarly, the perpetrator and their family and community can be impacted by the abuse in the following ways:

- shame to family and community members
- conflict and breakdown in family and community relationships
- disconnection from culture and diminished participation in cultural processes
- criminal sanctions, including imprisonment
- banishment from the community

Some perpetrators have also been victims of child sexual abuse. Being named as a perpetrator may put other perpetrators within the family or community at risk of being discovered, which in turn may lead to family and lateral violence.

Over time, the impact on individuals, families and communities can erode cultural values and processes though collective trauma, Intergenerational Trauma, impaired parenting ability over multiple generations, kinship conflict and behavioural issues linked to trauma and victimisation, including violence (Anderson, Bamblett, Bromfield, Chan, Maddock, Menzies, O'Connell, Pearson, Walker, and Wright, 2017). It is therefore crucial that responses to child sexual abuse address all impacts on victims, perpetrators, families and communities.

People may disclose child sexual abuse when the abuse occurs and/or later in life. Opportunities to ensure safety, address harm and prevent further harm may therefore arise at any point.

Research suggests the earlier people disclose, the better their life outcomes. The trauma of holding a secret and the shame it manifests causes immense harm. The Royal Commission into Institutional Responses to Child Sexual Abuse demonstrated that many Aboriginal and Torres Strait Islander people have suffered significant trauma after keeping sexual abuse to themselves for more than 20 years.

This framework seeks to ensure Aboriginal and Torres Strait Islander children and families have supportive, open and safe structures that prevent sexual abuse, identify early warning signs and intervene where required. This framework will encourage early disclosure when abuse does occur and create healing systems that prevent years of harm.

## b. Causes of sexual abuse

Child sexual abuse involves the deliberate misuse of power and trust to exploit and harm children. A range of internal and external factors can influence the perpetration of child sexual abuse. Quadara, Nagy, Higgins and Siegel (2015) identify a number of theories for how and why child sexual abuse occurs. These include Finkelhor's Four Preconditions model, Ward's Pathways model, rational choice and situational choice theories, and situational crime prevention theories. Collectively, these theories identify the individual, social and situational factors that influence the sexual abuse of children. However, as noted by Quadara et al (2015), they do not address the cultural context in which sexual abuse of Aboriginal and Torres Strait Islander children occurs.

**For Aboriginal and Torres Strait Islander people, the impact of colonisation on culture and family and community capacity to provide safety is a significant factor in understanding the broader context of trauma and child sexual abuse.**

Knowledge Circle members were clear that child sexual abuse does not belong in Aboriginal and Torres Strait Islander cultures.

*There is no documented evidence to indicate child sexual abuse was a problem in Aboriginal and Torres Strait Islander communities before colonisation. Evidence gathered in the course of the four inquiries does not support the myth that Aboriginal culture condones child sexual abuse in any way (Anderson et al, 2017 p.33).*

*It is the storyline of the impact of colonisation – we need to write a new storyline.*

The story of colonisation is a story of profound trauma for Aboriginal and Torres Strait Islander people, caused by past and ongoing discriminatory and disempowering practices. These include the forcible removal of children from their families, communities and culture; the denial of language and cultural expression; the introduction of disease, alcohol and drugs; and violence and abuse.

Three significant inquiries provide insight into the trauma faced by Aboriginal and Torres Strait Islander people – the *Royal Commission into Aboriginal Deaths in Custody* (RCIADIC), *Bringing them Home: Report of the National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from Their Families and the Royal Commission into Institutional Responses to Child Sexual Abuse.* These reports identify past government policies as a major cause of current and ongoing trauma. They also highlight efforts to eradicate culture and the destruction of parenting practices including through the institutionalisation of children in harsh, inhumane and abusive conditions.

The *Bringing them Home* inquiry concluded that forcibly removing so many children as part of the Stolen Generations was an act of genocide contrary to the *Convention on the Prevention and Punishment of the Crime of Genocide,* ratified by Australia in 1949. The convention specifically includes 'forcibly transferring children of [a] group to another group' with the intention of destroying the group.

Tatz (2017) describes the impact of colonisation as 'a deculturation of people who had one of the world's best practices in terms of childrearing, aged care, incest prohibition, kinship reciprocity and art recording'. Tatz argues that after missions and settlements were closed, the structure that held these communities together fell away, and relatively ordered societies became disordered. 'Values dissipated and disappeared … incest prohibitions fell away and child molestation appeared … Conflict resolution, always under unwritten rules … to regulate harm, became murderous assaults. Reciprocity went out the window and a selfish pattern emerged. Not only homicide but suicide – unknown in Aboriginal culture and practice – began, with today's cluster of suicides the second-highest on the planet (next to Greenland).'

*The impacts of colonisation, the erosion of tribal authority was when the problems started.*
*Colonisation impacts the systems that are established to deal with the issue of child sexual abuse.*
*Abuse was taught by the colonisers.*

*We're all dealing with the impacts of colonisation, intergenerational and trans-generational trauma.*
*Child sexual abuse is a manifestation of that.*

Generations of children were sexually abused in missions and this level of trauma became normalised. Parents who had been sexually abused as children saw their children abused and had no recourse to action. Many children also abused other children. This sometimes continued back in communities after missions closed.

Anderson et al (2017) argue that the closure of missions and settlements created a vacuum which 'is likely to have heightened the risks and vulnerability of Aboriginal and Torres Strait Islander children to outside perpetrators' (p.42).

Tribal authority to deal with offenders was not valued or sustained in western legislation, which subsequently had limited understanding and strategies for dealing with child sexual abuse until after federation.

Aboriginal and Torres Strait Islander peoples were colonised by a nation with very poor attachments, empathy and regard for children's rights. It was not until the 20th century that Australia saw significant changes in sexual offence legislation and acknowledgement of the rights of children (Boxall, Tomison and Hulme, 2014).

O'Brien (2008) outlines how continuing structural factors of Indigenous disadvantage and distress constitute ongoing risk pathways to problem sexual behaviour in children. These include the intergenerational normalisation of violence; the silence, fear and shame in addressing violence; the instability of the home environment, including out of home care arrangements; family disruption and the resulting lack of role models; adverse socioeconomic conditions including poor housing and overcrowding; low levels of school engagement and performance; substance abuse; poor health and wellbeing; parental criminal activity and imprisonment; youth crime and detention; exposure to pornography; and the resulting trauma of all of these factors.

The report by the Telethon Kids Institute (Anderson et al, 2017), titled *Aboriginal and Torres Strait Islander children and child sexual abuse in institutional contexts*, found:

> *Aboriginal and Torres Strait Islander people were dehumanised and women and children sexualised. Allegations of abuse against them were denied even in the face of overwhelming evidence. While colonisation broke up diverse and sophisticated systems of governance and lore in traditional Aboriginal and Torres Strait Islander communities, this was replaced with a western legal system that discriminated against Aboriginal and Torres Strait Islander peoples, provided little protection and actively prevented parents from caring for their children (p.18).*

Community capacity to overcome the challenges of colonisation in general, and sexual abuse in particular, has been severely diminished due to the breakdown of cultural structures and processes that previously prevented harm.

Trauma resulting from colonisation has been transmitted across generations. The mechanisms by which this occurs include:
- a loss of attachment relationships with caregivers
- the impact on parenting and family functioning
- resulting parental physical and mental illness
- disconnection and alienation from extended family, culture and society (Milroy, 2005 in Dudgeon, Watson and Holland, 2017)

The transmission of trauma continues today through imposition of government policies, lack of autonomy for Aboriginal and Torres Strait Islander communities, lack of acknowledgement of cultural governance and knowledge, lack of funding for community controlled organisations, lateral violence and racism. This trauma can only be resolved through a focus on self-determination and sovereignty.

> *Child sexual abuse is part of everything else that is happening and has to be addressed as such.*

### c. Gaps in current approaches

While there have been some advances in funding culturally based healing services for Aboriginal and Torres Strait Islander people, there is a continuing failure to understand the need for such services, and provide the funding required to support sustained healing. The relationship between trauma, social and economic disadvantage and a range of social issues continues to be misunderstood. These issues include child abuse, family violence, drug and alcohol abuse, longterm chronic illness and early death (Feliti, Anda, Nordenberg, Williamson, Spitz, Edwards, Koss and Marks, 1998). The focus is often placed on symptoms rather than understanding the root cause.

The ill health, breakdown in community structures and reduced life spans resulting from colonisation have distorted the population pyramid in Aboriginal and Torres Strait Islander communities, with large numbers of children and not enough adults to meet their needs. As a result many communities have not been able to adequately address the cumulative trauma they

have endured and in some instances this has increased the risk of harm. This highlights the critical importance of working at the community level: too often, responses are geared towards individuals or families without also addressing the community processes and structures needed to support them.

Aboriginal and Torres Strait Islander communities accept responsibility for addressing child sexual abuse. However, they cannot be expected to respond to this challenge alone. Responsibility must be shared by communities and organisations, the broader Australian community, including mainstream organisations and state, territory and federal governments.

In particular, there is a need to enable Aboriginal and Torres Strait Islander communities to exercise autonomy and discharge their responsibility. Changing population demographics must be considered as part of this: family safeguards have been diminished, so the need for services to provide these functions is essential.

Enabling autonomy requires governments and others to resource and support community led responses that create and restore safety by strengthening cultural processes and structures and providing culturally based healing responses to sexual abuse. In addition, governments and others need to develop broader strategies and policies to address the impacts of trauma and social and economic disadvantage in urban, rural and remote communities.

It is clear that current approaches to preventing and responding to child sexual abuse are not working. Discussions with Knowledge Circle members highlighted a number of gaps in current mainstream approaches to addressing child sexual abuse. These include:

- a narrow understanding of safety that focuses on immediate and physical safety rather than longterm emotional, cultural and spiritual aspects of safety
- a focus on identification, reporting and investigation that doesn't sufficiently address prevention and healing over a lifetime or reflect an understanding of culture as a protective factor
- a focus on individuals in terms of the victim and perpetrator without proper consideration of the impact on other family members, the community, or the intergenerational impact of trauma
- a focus on the role of external authorities that seek to intervene to ensure safety but in effect displace those best placed to ensure safety and healing. This fails to acknowledge and enable the resources available within families and communities
- a failure to understand and address the historical and continuing impact of colonisation, in particular the impact on communities' capacity to maintain cultural processes that previously prevented child sexual abuse
- a lack of research into treatment and recovery of survivors
- a failure by mental health services to provide culturally effective responses
- a lack of consistency across states and territories in criminal justice responses to child sexual abuse
- a lack of clarity about the use of community reparative responses in promoting perpetrator responsibility and accountability

## 3. A framework for creating and restoring safety

It is time for a new approach to restoring safety and healing in Aboriginal and Torres Strait Islander families and communities. An approach that:

- is culturally based
- is values led
- empowers children, families and communities by building skills, confidence and resilience
- restores connections to cultural systems and processes
- is healing focused
- integrates cultural and clinical (or therapeutic) approaches to healing and recovery
- is informed by evidence
- can be evaluated from both a cultural and western perspective
- is cost effective

# 4. A values led approach

*We need to have a space driven by values; we need to set a direction. It needs to address the process and then identify a lifelong way for people to come together to talk about these issues and reinstate cultural practices.*

Knowledge Circle members identified eight values to drive the development of a culturally based response to child sexual abuse:

- safety
- respect
- empathy
- reciprocity
- unconditional positive regard for children
- truth
- empowerment
- hope

These values are based on Aboriginal and Torres Strait Islander world views, which are both diverse and fluid. All communities would be able to understand and relate to these values within their own world view.

### a. Safety

*Be aware of how we create safety and warmth – everything about them (children) matters.*

*We would have increased places of safety for our children where they can seek safety.*

*We need to create environments where children know that nothing is so bad it has to be secret – it creates communities where people can't ignore what's going on.*

*Frameworks are needed for addressing the conditions of safety for children.*

Safety is ensuring a child's physical, emotional, cultural and spiritual wellbeing. Sexual abuse impacts all aspects of a child's wellbeing. All children have a right to grow up safely within their family, community and culture.

### b. Respect

*Respect for lore and culture.*

*Respect for the people, particularly children and their families and carers.*

*Respect for diversity. Not just cultural diversity, but diversity in responses that combines spiritual cultural understanding as well as therapeutic processes.*

Respect is accepting lore and cultures; understanding the diversity of cultures and traditions; and acknowledging everyone's worth, dignity, roles and contributions.

### c. Empathy

*Perpetrators as well as victims must receive appropriate support. We must be aware of unconscious bias.*

*Work in a non-judgmental space that informs longterm sustainable healing.*

Empathy is understanding another person's feelings, perspective and circumstances. It means being able to listen and respond to both victims and perpetrators without judging their attitudes or behaviours. It does not mean condoning their attitudes and behaviours.

### d. Reciprocity

*I see stronger communities working towards stronger connections.*

*Giving back the connection to culture – I want to see men who can face up to the challenges when they're raising children. Women who can walk proud and kids who feel safe and experience nurturing.*

Reciprocity is about how the individual is connected to family, clan and country; our sense of belonging; and our obligations and responsibilities to each other. In particular, it is about our shared responsibility for raising our children.

### e. Unconditional positive regard for children

*Work should be child centred and work out to the community. The child is to be believed unconditionally.*

A child centred approach involves focusing on the rights and needs of children. It recognises their unique feelings and experiences. Unconditional positive regard involves understanding children's behaviour and supporting their development by setting boundaries and teaching social, moral and cultural norms.

### f. Truth

*People having confidence to share a story of what happened to them or what sort of hurt they're doing to another.*

*It's about truth – the language of colonisation is now problematic. They don't understand it and don't experience it. This dialogue needs to take place to share a history of truth. We use words now in a way that has no meaning.*

*The importance of our nation understanding truth and the processes of colonising can't be ignored.*

Truth involves bearing witness to wrongdoing and seeking acknowledgement, reparation and restoration at an individual or collective level. It is about acknowledging and recognising suffering and survival. It can be in relation to a child whose human rights have been violated by sexual abuse, or the individuals, groups and communities whose human rights have been violated as a result of colonisation. It is about hearing them, standing alongside them and taking action to ensure their protection and safety from further harm and promote healing. Truth telling can be important in restoring the individual, family and collective narrative.

### g. Empowerment

*Teaching kids about believing their intuition – I knew something was wrong, I feel it here – equipping young people with a way to express it.*

*Empowerment must be given back, responsibility must be given back, communities must be given leadership at the core.*

Empowerment means increasing strength, control, power, choice and reliance at individual, family and community levels.

### h. Hope

*What keeps me going is the hope that things can change. I get really concerned that we won't have a next generation. I live in hope but we need a determined process to move forward.*

Hope is believing things can be better and often striving to make them better. It involves supporting others who are vulnerable and may be struggling to believe things can get better.

## 5. Key elements

Safety is the centrepiece of healing. Safety has a number of dimensions; physical, emotional, social, cultural and spiritual. Sexual abuse affects all dimensions of a child's safety and longterm development. If safety is to be restored, responses to child abuse and neglect must address each of these dimensions.

The place and care of children in Aboriginal and Torres Strait Islander cultures is central to family, community and cultural life. Kinship relationships, systems and processes within communities 'grow children up' to understand and contribute to all aspects of life. A child's sense of safety is created by family and community and it is a responsibility shared by both. Aboriginal and Torres Strait Islander people invest in children to carry forth traditions, customs and stories. It is therefore integral that the next generation is safe and nurtured physically, emotionally, spiritually and culturally.

A child's safety is best ensured by understanding and strengthening cultural child rearing practices.

Lohoar, Butera and Kennedy (2014) found that a collective community focus on child rearing benefits children. They set out how collective approaches to child rearing help children to:
- be physically safe
- develop feelings of self-confidence and trust in others
- cultivate discipline and learning through positive role modelling
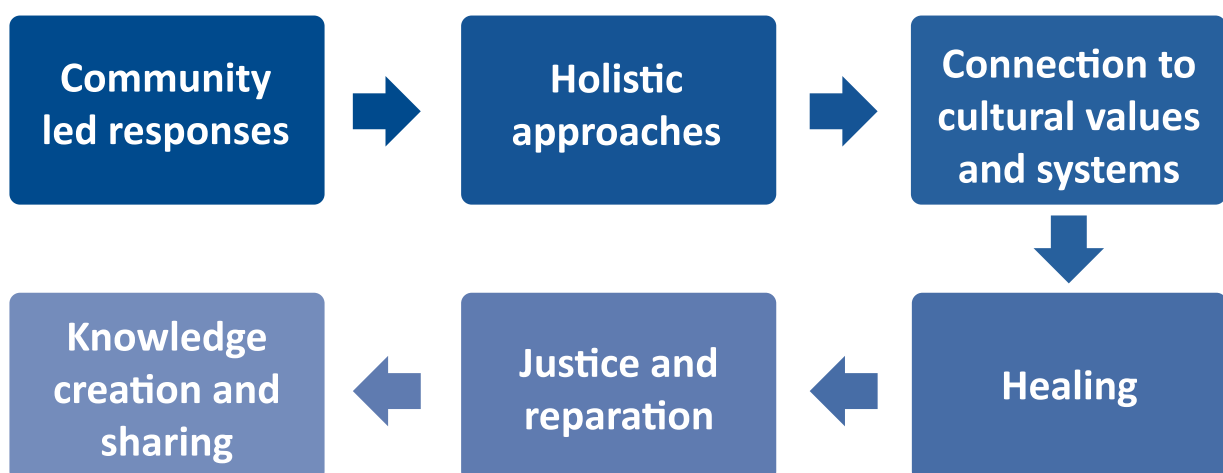- access a wider range of support when they experience difficulties

Collective approaches to child rearing can provide parents with practical, social and psychological support, by:
- identifying situations when a child's safety is at risk
- providing practical childcare support
- helping parents to cope with the stresses of child rearing
- providing parents with confidence, security and trust in the local community

Connection to culture supports safety and protects children. Anderson et al (2017) outline the increasing recognition worldwide that positive connection to one's culture also helps children to develop their identity; fosters positive self-esteem, emotional strength and resilience; and increases the number of secure attachments around the child.

However, as noted earlier in this paper, when cultural processes and systems are diminished, communities often struggle to create safety for children and families. It is therefore critical work is undertaken at the community level to strengthen or reestablish cultural processes and systems, and reconnect people to culture. This will provide the foundation for establishing safety and addressing the needs of children and families, as well as perpetrators of sexual abuse.

The key elements of creating and restoring safety and healing are:

**Community led responses** → **Holistic approaches** → **Connection to cultural values and systems** → **Healing** ← **Justice and reparation** ← **Knowledge creation and sharing**

## a. Community led responses

*Communities leading their recovery, communities leading their healing.*

Australian and international evidence confirms the effectiveness of Indigenous-led service design and delivery in consistently producing better results. This evidence links community empowerment to positive social and emotional wellbeing outcomes for individual community members (Australian National Audit Office, 2012; Chandler and Lalonde, 1998 in SNAICC, 2016).

Place-based strategies acknowledge community responsibility and enable communities to exercise that responsibility. 'This approach facilitates a more in depth exploration of the problem, and nuanced tailoring of the response. This ensures that local dimensions of the problem are defined and understood, given that abuse dynamics, underlying causal mechanisms, and opportunity structures (i.e. how, when or where an offence occurs, and who offends against whom) will differ from location to location.' (Rayment-McHugh, Adams, Wortley and Tilley, 2015).

It is important that local community protocols and governance arrangements are identified and used to empower communities. Where cultural processes and systems have been eroded, additional support, including in assisting communities to understand trauma and its impacts, may be required to enable restoration. This is addressed more fully below, under 'Connecting to cultural values and systems'.

## b. A holistic approach

Maintaining safety and healing requires a holistic approach to understanding and responding to the needs of children, adults abused as children, families, perpetrators and communities impacted by child sexual abuse.

Gee, Dudgeon, Schulz, Hart, and Kelly, in Dudgeon, Milroy, and Walker, (2014) identify seven sources of social and emotional wellbeing:

1. connection to body
2. connection to mind and emotions
3. connection to family and kin
4. connection to community
5. connection to culture
6. connection to country
7. connection to spirituality and ancestors

A holistic response to the needs of children who have been sexually abused, perpetrators and their families requires each of these connections to be addressed.

**Children need to be supported to:**
- understand their role and place within family and community
- understand development including sexual development and identity
- understand protective knowledge and behaviours including what is safe and unsafe
- trust their intuition and know how and where to seek help if they feel unsafe
- connect to body, mind and emotions
- connect to culture (kinship, clan, country, spirituality)

**Adults abused as children need to be supported to:**
- understand their role and place within family and community
- understand their role in teaching children about protective behaviours
- understand sexual abuse, identify and respond to concerns and access help
- understand the impact of sexual abuse on their development and relationships with others
- understand trauma and its impact
- understand the need to access ongoing assistance
- connect to body, mind and emotions
- connect to culture (kinship, clan, country, spirituality)

**Families need to be supported to:**

- understand their role in the community
- raise and protect children
- understand sexual development
- understand problem sexual behaviours, identify concerns and access help
- understand sexual abuse, identify concerns and access help
- understand the impact of problem sexual behaviours and abuse and the need to access ongoing assistance
- connect to body, mind and emotions
- connect to culture (kinship, clan, country, spirituality)

**Perpetrators need to be supported to:**

- understand their role in family and community
- take responsibility and be held accountable for their actions through child protection and criminal justice responses
- be visible and engaged in culturally based healing if communities are to be safe
- understand the impact of sexual abuse and the need to access ongoing assistance
- connect to body, mind and emotions
- connect to culture (kinship, clan, country, spirituality)

**Communities need to be supported to:**

- rebuild and restore cultural practices and systems
- strengthen governance and local protocols
- support families in caring for children
- acknowledge and understand problem sexual behaviours and child sexual abuse, and the links between domestic and family violence and sexual assault
- understand trauma and its impacts
- promote safe people and safe places
- connect to cultural systems (spiritual, ceremonial)
- manage disclosures, ensuring victims are protected and perpetrators are held accountable for their abuse
- lead recovery and healing

Government policy and program initiatives to address child sexual abuse need to reflect a holistic understanding of social and emotional wellbeing and its impact on individuals, families and communities. Service responses must be integrated and tailored to children, adults abused as children, families, perpetrators and communities.

### c. Connecting to cultural values and systems

*Culture revival is so important.*

*When we're disconnected from cultural roles that's when things go wrong. If we can go through cultural retrieval, cultural revolution, we can change that.*

*There's clan governance and that clan governance becomes the community governance. We bring language, ceremony, song, respectful relationships back to the centre. We share knowledge. It's vibrant, it's rich, and it's resourceful.*

*While we need to do business in a contemporary way, it's important that our culture and our past inform that. How do we dig up old wisdoms and bring them into the light?*

Strategies to create and restore safety and healing in communities must reflect local cultural values and systems. These values and systems vary between and within Aboriginal and Torres Strait Islander cultures, as does the impact of colonisation and the removal of children on the cultural values and systems.

It is therefore important to work with local communities to identify their values and systems and where necessary reinstate and reconnect to them. It is through these processes that traditional knowledge systems can be accessed to address problems like child sexual abuse.

Hovane (2012, 2014) identified core principles for responding to child sexual abuse in a 'culturally secure and effective manner'. The four principles are respect, reciprocity, relationships and responsibilities. These involve 'being respectful, observing reciprocal obligations and responsibilities, observing and maintaining important relationships to land, culture, family, kin and community, and being accountable and taking responsibility for one's behaviour' (Hovane, 2014).

On a broader level, cultural revitalisation can be supported by addressing racism and promoting respect for Aboriginal and Torres Strait Islander people (Anderson et al, 2017; Dockery, 2011). Anderson et al (2017) in *Aboriginal and Torres Strait Islander children and child sexual abuse in institutional contexts*, conclude:

> *This report also suggests that past and contemporary racism has contributed to the risks that Aboriginal and Torres Strait Islander children face in contemporary institutional settings. Therefore it may be of value to investigate whether cultural revitalisation can play a role in reducing risk by challenging stereotypes about Aboriginal and Torres Strait Islander people and educating non-Aboriginal peoples to acknowledge and value the diversity of Aboriginal and Torres Strait Islander cultures (p.44).*

Dockery (2011) argues that attachment to culture and a strong sense of identity increase the wellbeing of Aboriginal and Torres Strait Islanders and improve socioeconomic outcomes. He suggests Aboriginal and Torres Strait Islander cultures should therefore be preserved and strengthened. He notes, however, that the reason for this does not appear obvious to non-Indigenous people and suggests this is because they do not derive wellbeing from Aboriginal and Torres Strait Islander cultures. In response to this dilemma he argues:

> *In the current pursuit of equity between Indigenous and non-Indigenous Australians, increasing non-Indigenous Australians' knowledge, understanding and respect of Indigenous cultures may well be the most important gap to close (p.19).*

### d. Healing

Healing refers to gaining and sustaining hope, a sense of identity and belonging, wellbeing, empowerment, control and renewal. Healing is a journey (The Healing Foundation, 2016).

> *Healing is not an outcome or a cure but a process; a process that is unique to each individual. It enables individuals, families and communities to gain control over the direction of their lives and reach their full potential. Healing continues throughout a person's lifetime and across generations. It can take many forms and is underpinned by a strong cultural and spiritual base (The Healing Foundation, 2015 p.1).*

The NSW Aboriginal Child Sexual Assault Taskforce (ACSAT) report defines healing as:

> *A dynamic and unfolding process of individual and collective problem solving. It has a practical dimension, in relation to changing community structures and ameliorating social conditions, and a therapeutic dimension, in relation to changing the embedded negative value systems, which have accompanied cultural marginalisation and dispossession (ACSAT, 2006 p.282).*

Recognition of the connections between and impact of violence, social and economic disadvantage, racism and dispossession from land and culture is an essential element of healing (Social Justice Report, 2004).

*If we had prevention increasing in community, where healing and recovery was happening in a meaningful way, we'd have a system driven by culture, and giving back culture.*

For Aboriginal and Torres Strait Islander people, culture is central to the healing process. Reinstating and reconnecting communities to their core cultural values and systems is fundamental to healing. It unlocks the knowledge systems and tools to heal and thereby create and restore safety.

*Where is the expertise in treatment of sexual abuse with the body? The spirit? I don't see it. A lot of psychologists are only focusing on the mind.*

**Responses to child sexual abuse must:**
- focus on the body, mind, culture and spirit
- support the particular healing and recovery needs of children, men, women and gender diverse community members
- address impacts over the life course
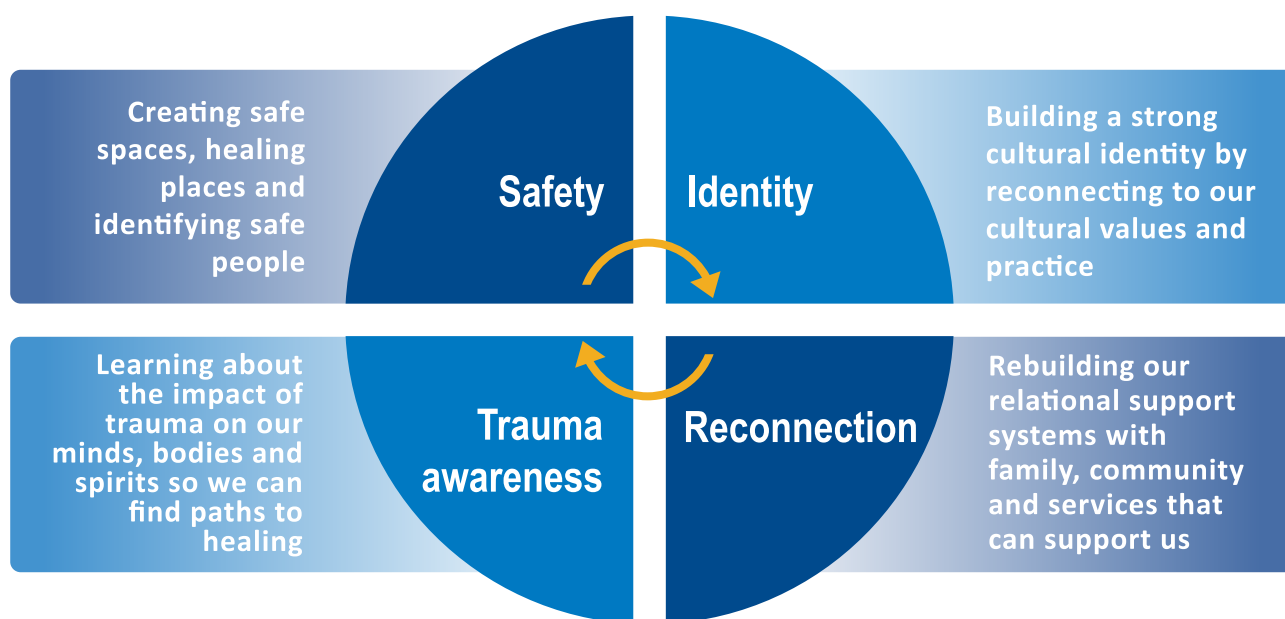- provide multiple pathways to healing and recovery

*There needs to be a privileging of Aboriginal and Torres Strait Islander peoples' knowledge of healing.*

The Royal Commission reported the high proportion of men (64.3%) who came forward and spoke of their experiences of child sexual abuse. This highlights the previously untold story of boys and men, and supports the need for a gendered response.

Healing and recovery considers reconnection and re-empowerment at both interpersonal and collective levels to rebuild safe connections in communities.

**The Healing Foundation's experience indicates a need for healing to support trauma recovery across four key pillars:**
- **safety**
- **identity**
- **reconnection**
- **trauma awareness**



Creating safe spaces, healing places and identifying safe people — **Safety**

**Identity** — Building a strong cultural identity by reconnecting to our cultural values and practice

Learning about the impact of trauma on our minds, bodies and spirits so we can find paths to healing — **Trauma awareness**

**Reconnection** — Rebuilding our relational support systems with family, community and services that can support us

This approach is achieved through co-design: engaging Aboriginal and Torres Strait Islander individuals, families, Elders, services and partners in identifying their own strengths, resources, issues and solutions, and developing responses together. This process ensures community healing projects are created by the community, informed by evidence, are practical and can create real, local change.

*We need a language of cultural healing our way and language for clinical healing – can those two come together?*

*Healing needs to draw from both therapeutic practice and revitalisation.*

*Working together, clinical and Aboriginal and Torres Strait Islander community can build a bridge and establish respect.*

*We need to provide cultural authority on the traditional aspects and cultural humility on the western part.*

Dudgeon, Watson and Holland (2017) highlight the multilayered trauma experienced by Aboriginal and Torres Strait Islander people, the challenges this presents for health and mental health workers, and the importance of collective healing programs that work alongside individual clinical approaches. Healing often requires an integrated cultural and therapeutic response focused on body, mind, culture and spirit. Responses must be based on:

- respect
- a shared language
- two-way learning
- agreed tools and approaches
- safe spaces

In this way, the use of individual counselling, therapies and medication can be combined with traditional healing, ceremony, language, arts and visits to country to address trauma.

This represents a major challenge for mental health services. Historically, mental health services have failed to support recovery over the longer term with most focused on crises. For example, the Access to Allied Psychological Services (ATAPS) initiative focuses on short term individual psychological services for eligible people. This is not consistent with a culturally based understanding of trauma and recovery, and people's needs over the lifespan.

Further work is required to ensure mental health services are aligned with a culturally based collective response to the needs of Aboriginal and Torres Strait Islander people.

### e. Justice and reparation

In addressing child sexual abuse the primary focus is the safety of children within the context of their family, community and culture. A number of systems are in place to address the safety of children including child protection, justice and corrections. It is important that healing responses to child sexual abuse acknowledge and work alongside these systems. Communities need to have knowledge about justice and child protection responses and develop local processes to work with these systems.

The justice response is particularly important from victim and perpetrator perspectives, but justice responses are not sufficient on their own. Reparative responses involving perpetrators are also required. They must focus on safety, accountability, transparency and healing. Where men are imprisoned as a result of sexually abusing children it is imperative they have access to culturally based healing both while in prison and in the community upon release.

In a values based model, child sexual abuse is a breach of Aboriginal and Torres Strait Islander values, customs and protocols. Sexually abusing a child means the perpetrator has moved away from cultural values and practices, and in particular from their role as a protector of children. To reconnect and make reparations for their crimes, perpetrators must take responsibility for their actions and walk closer to a cultural values system.

Hovane, Dalton (Jones) and Smith in Dudgeon, Milroy, and Walker (2014) set out an Aboriginal psychological approach to the rehabilitation of Aboriginal offenders, grounded in law and culture. They suggest that 'communities, families, and individuals have cultural schemas which provide localised frameworks or guidelines for living, and for undertaking other tasks such as interpreting various situations, and for solving problems'. Cultural schemas include values, beliefs and principles (as outlined earlier in this paper). This understanding underpins a holistic offender rehabilitation model involving five interconnecting levels:

- Aboriginal and Torres Strait Islander law and culture: cultural maintenance and identity
- offender-specific rehabilitation programs
- education/learning knowledge
- training/learning skills
- employment/work

Further work is required to integrate community justice responses to child sexual abuse with child protection and criminal justice systems. It is critical community justice responses do not further victimise or lead to coercion of victims.

## f. Knowledge creation and sharing

The development and implementation of healing responses to child sexual abuse needs to be informed by the available evidence and, in turn, it needs to inform the evidence base through knowledge creation and sharing.

The Healing Foundation has undertaken considerable work in identifying a program logic and theory of change for healing programs and developing a monitoring and evaluation framework to support knowledge creation.

According to the theory of change, sustainable healing is most likely to occur when the following elements are present (The Healing Foundation, 2016):
- the policy context enables healing
- healing networks and champions lead healing
- healing responses deliver local healing opportunities

This theory of change provides a broader context of healing in Aboriginal and Torres Strait Islander communities where responses to child sexual abuse can be developed and implemented. Evaluating healing approaches is critical in continuing to develop the evidence base.

# 6. Strategies at the individual, family and community levels

Child sexual abuse is a complex problem and, in the context of Aboriginal and Torres Strait Islander communities, requires a range of strategies to create and restore safety and healing at various levels.

Five strategies for creating and restoring safety and healing at individual, family and community levels are:

Community wide approach

Restoration of cultural authority and values

Co-design

Evaluation and evidence creation

Community healing

These five strategies are not intended as linear steps. Instead they are a set of interrelated activities within a culturally safe process undertaken with communities. The way in which this unfolds will vary from community to community depending on local needs and context.

## a. A community wide approach includes:

- identifying key Elders, families, clans, groups, organisations and key partners
- identifying safe people
- establishing safe places

### b. Community healing involves work that supports:

- learning about the impact of colonisation, its impact on communities, and its relationship to social and economic disadvantage
- learning about trauma and how it affects the mind, body and spirit of individuals, families, communities and cultures
- identifying pathways to healing
- creating a community of safety for children
- ensuring support for disclosure, reporting and healing is prioritised
- creating a community of responsibility, accountability and healing of perpetrators

### c. Restoration of cultural authority and values involves:

- exploring and reconnecting to cultural values
- rebuilding cultural governance, authority and relational support systems with family and community
- locating the solutions to issues, building on community strengths and resources in community knowledge systems

### d. Co-design – empowerment, capability strengthening and driving change – involves:

- taking large issues and breaking them down to develop solutions
- using evidence to inform conversations about needs, resources and services
- supporting safe and open discussions about tough issues
- developing plans to address community, family and individual needs
- identifying, accessing and coordinating people, resources and services to implement plans
- monitoring progress and modifying plans as necessary

### e. Evaluation and evidence creation involves:

- measuring change from an evidence-informed perspective
- establishing an evaluation framework to:
  - measure outcomes and build knowledge at the local level
  - develop the evidence base

Collectively, these strategies reflect best practice in preventing and responding to child sexual abuse. They draw upon cultural knowledge and are consistent with the eight critical elements of quality healing in addressing trauma and promoting healing, outlined by The Healing Foundation.

## 7. Conclusion

*If we look at today's life as the lamp post where the light is, it shines on the prevention of child sexual assault and healing and recovery.*

With the conclusion of the *Royal Commission into Institutional Responses to Child Sexual Abuse*, it is important to honour the courage of Aboriginal and Torres Strait Islander survivors of child sexual abuse. The work of the Royal Commission has laid bare the profound impact of sexual abuse and the complexity of responding effectively. We must ensure no stone is left unturned in our endeavours to prevent further harm and promote healing and recovery.

The sexual abuse of Aboriginal and Torres Strait Islander children is an insidious problem based in the darkness of colonisation and its continuing impact on children, families and communities, in particular the resulting disconnection from culture. Current approaches to addressing child sexual abuse are not working due to a lack of cultural understanding of and culturally based responses to the problem. The time for getting this right is now. Aboriginal and Torres Strait Islander cultural understanding, knowledge and wisdom are the light by which the safety and healing of children, families and communities can be created and restored.

By looking where the light is, this paper has documented a cultural framework for creating and restoring safety and healing, that:
- is values led and focused on safety, respect, empathy, love, unconditional regard for children, truth, empowerment and hope
- sets out key elements, including holistic approaches, community led responses, knowledge creation and sharing, connecting to cultural values and systems, justice and reparation, and healing
- identifies key strategies to guide and support effective implementation with communities

The Royal Commission has made a number of recommendations in relation to advocacy, support and treatment services for survivors, including:
- providing access to tailored treatment and support services for as long as necessary
- funding Aboriginal and Torres Strait Islander healing approaches as an ongoing, integral part of advocacy, support and therapeutic responses

The way forward is clear. However, the challenge of creating and restoring safety and healing is enormous. It requires longterm commitment from Aboriginal and Torres Strait Islander people, communities and organisations; the broader Australian community and mainstream organisations; and collaboration between state and federal governments.

The Healing Foundation looks forward to working in partnership with others in responding to this challenge.

# 8. References

Aboriginal Child Sexual Assault Taskforce (2006) *Breaking the silence, creating the future: addressing child sexual assault in Aboriginal communities in NSW.* NSW Attorney General's Department, Sydney.

Anderson, P., Bamblett, M., Bromfield, L., Chan, S., Maddock, G., Menzies, K., O'Connell, M., Pearson, G., Walker, R. and Wright, M. (2017) *Aboriginal and Torres Strait Islander children and child sexual abuse in institutional contexts.* Report for the Royal Commission into Institutional Responses to Child Sexual Abuse, Sydney.

Australian Human Rights Commission (2004) *Social Justice Report.* Aboriginal and Torres Strait Islander Social Justice Commissioner. Human Rights and Equal Opportunity Commission, Sydney.

Australian National Audit Office (2012) *Capacity Development for Indigenous Service Delivery.* Auditor-General, Canberra.

Boxall, H., Tomison, A. M. and Hulme, S. (2014) *Historical review of sexual offence and child sexual abuse legislation in Australia: 1788-2013.* Prepared for the Royal Commission into Institutional Responses to Child Sexual Abuse. Australian Institute of Criminology, Canberra.

Cashmore, J. and Shackel, R. (2013) *The long-term effects of child sexual abuse.* Child Family Community Australia, CFCA Paper No.11. Australian Institute of Family Studies, Melbourne.

Chandler, M., and Lalonde, C. (1998). *Cultural Continuity as a Hedge Against Suicide in Canada's First Nations,* Lavoie, J. et al (2010). "Have investments in on-reserve health services and initiatives promoting community control improved First Nations' health in Manitoba?", *Social Science and Medicine*, 71(4), August, 717 in SNAICC (2016) *Discussion Paper: An evidence-based approach to address over-representation of Aboriginal and Torres Strait Islander children in out-of-home-care.* Family Matters, Secretariat of National Aboriginal and Islander Child Care, North Fitzroy.

Dockery, A. M. (2011) *Traditional Culture and the Wellbeing of Indigenous Australians: An analysis of the 2008 NTSISS.* CLMR Discussion Paper Series 2011/1. The Centre for Labour Market Research, Curtin Business School, Curtin University, Perth.

Dudgeon, P., Watson. M. and Holland, C. (2017) Trauma in the Aboriginal and Torres Strait Islander Population. *Australian Clinical Psychologist. Vol.3, Issue 1.*

El-Murr, A. (2017) *Problem sexual behaviours and sexually abusive behaviours in Australian children and young people: A review of available literature.* CFCA Paper No.46. Child Family Community Australia. Australian Institute of Family Studies, Melbourne.

Esposito, C. and Field, E. (2016) *Child Sexual Abuse: What does the research tell us? A literature review.* Department of Family and Community Services, Ashfield.

Feliti, V. J., Anda, R. F., Nordenberg, D., Williamson, D.F., Spitz, A. M., Edwards, V., Koss, M. P. and Marks, J.S. (1998) Relationship of Childhood Abuse and Household Dysfunction to Many Leading Causes of Death in Adults: The Adverse Childhood Experiences (ACE) Study, *American Journal of Preventive Medicine, Vol. 14, No. 4.*

Frankland, R., Bamblett, M., Lewis, P. and Trotter, R. (2010) *This is 'Forever Business': A Framework for maintaining and restoring cultural safety in Aboriginal Victoria.* Victorian Aboriginal Child Care Agency, Preston.

Gee, G, Dudgeon, P., Schulz, C., Hart, A. and Kelly, K. *Chapter 5: Aboriginal and Torres Strait Islander Social and Emotional Wellbeing* in Dudgeon, P., Milroy, H. and Walker, R. ed. (2014) *Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice.* Telethon Institute for Child Health Research/Kulunga Research Network in collaboration with the University of Western Australia. Commonwealth of Australia, Canberra.

Healing Foundation (2014) *Training and Education: Journey to Healing – December 2012-November 2013,* Canberra.

Healing Foundation (2015) *Glossary of Healing Terms,* Canberra.

Healing Foundation (2016) *Restoring our Spirits – Reshaping our Futures: Creating a trauma aware, healing informed response to the impacts of institutional child sexual abuse for Aboriginal and Torres Strait Islander people,* Canberra.

Hovane, V. (2012) Cultural insights provide guidance on Aboriginal sexual abuse. *InPsych, Vol.34, Issue 6.*

Hovane, V., Dalton (Jones), T. and Smith, P. *Chapter 30: Aboriginal Offender Rehabilitation Programs* in Dudgeon, P., Milroy, H. and Walker, R. ed. (2014) *Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice.* Telethon Institute for Child Health Research/Kulunga Research Network in collaboration with the University of Western Australia. Commonwealth of Australia. Canberra.

Lohoar, S., Butera, N. and Kennedy, E. (2014) *Strengths of Australian Aboriginal cultural practices in family life and child rearing.* Child Family Community Australia, CFCA Paper No.25, Australian Institute of Family Studies, Melbourne.

Milroy, H. (2005) Preface. Zubrick, S. R., Silburn, S. R., Lawrence, D. M., Mintrou, F. G., Dalby, R. B., Blair, E. M. (Eds). *The Western Australian Aboriginal Child Health Survey: The social and emotional wellbeing of Aboriginal young people (Vol.2)* in Dudgeon, P., Watson, M. and Holland, C. (2017) Trauma in the Aboriginal and Torres Strait Islander Population. Australian Clinical Psychologist, Vol.3, Issue 1.

O'Brien, W. (2008) *Problem Sexual Behaviour in Children: A Review of the Literature.* Australian Crime Commission, Canberra.

Quadara, A., Nagy, V., Higgins, D. and Siegel, N. (2015) *Conceptualising the prevention of child sexual abuse.* Final Report. Research Report No.33. Australian Institute of Family Studies, Melbourne.

Rayment-McHugh, S., Adams, D., Wortley, R. and Tilley, N. (2015) 'Think Global Act Local': a place-based approach to sexual abuse prevention. *Crime Sci, Vol.4, Issue 22.*

Secretariat of National Aboriginal and Islander Child Care (2013). *Whose voice counts? Aboriginal and Torres Strait Islander participation in child protection decision-making* in SNAICC (2016) Discussion Paper: An evidence-based approach to address over-representation of Aboriginal and Torres Strait Islander children in out-of-home-care. Family Matters, Secretariat of National Aboriginal and Islander Child Care, North Fitzroy.

Shlonsky, A., Albers, B., Tolliday, D., Wilson, S., Norvell, J., Kissinger, L. (2017). *Rapid evidence assessment: Current best evidence in the therapeutic treatment of children with problem or harmful sexual behaviours, and children who have sexually offended.* Royal Commission into Institutional Responses to Child Sexual Abuse, Sydney.

Tatz, C. (2017) *Australia's Unthinkable Genocide*, Xlibris.

World Health Organization. (1999). *Report of the consultation on child abuse prevention* in Quadara, A., Nagy, V., Higgins, D. and Siegel, N. (2015) *Conceptualising the prevention of child sexual abuse.* Final Report. Research Report No.33. Australian Institute of Family Studies, Melbourne.

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