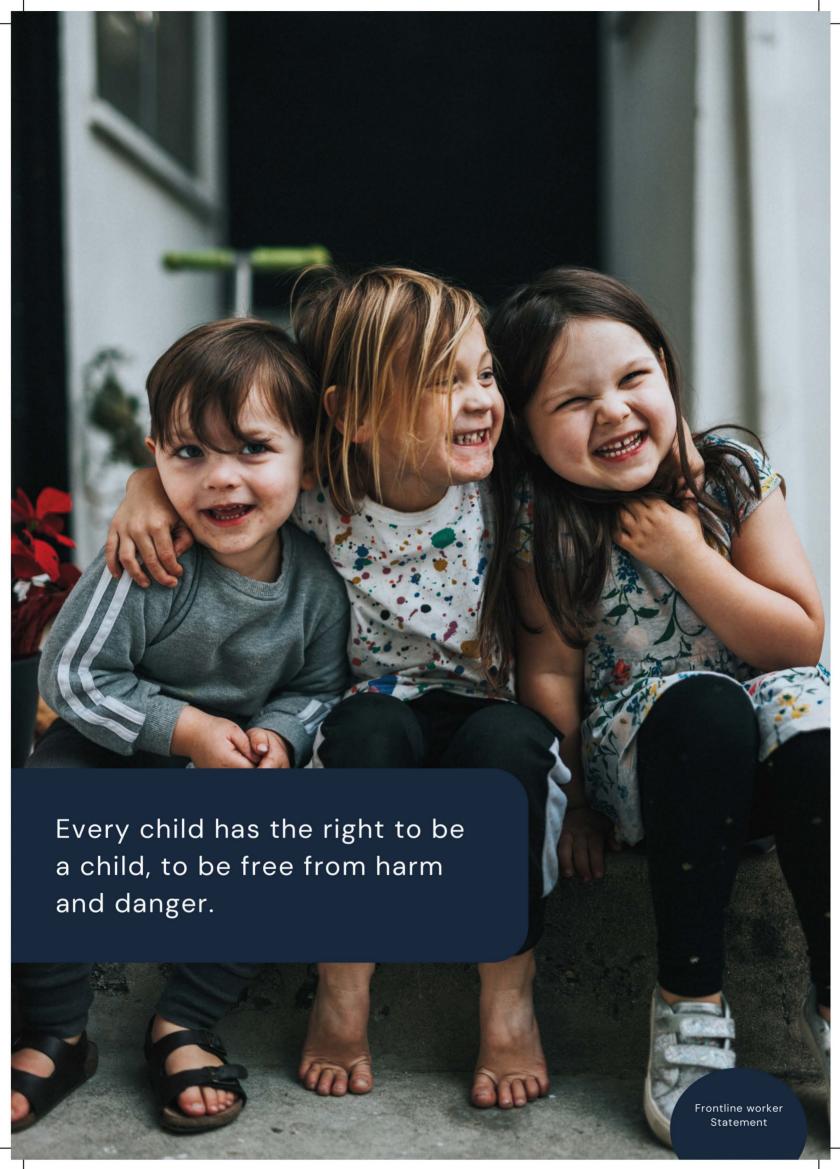


CHILD SEXUAL ABUSE REFORM 2024 WHAT MATTERS MOST

Researchers: Alex Morris, Morag MacSween, Tunya Petridis.

The following people helped to facilitate this consultation: Adie Delaney, Carla Johnson, Christie Dixon, Des Parsell, Ebony Griggs, Ely Chase, Emma Corrigan, Jess Gulliver, Lucy Crowley, Lucy Mercer-Mapstone, Mez Wilson, Morag MacSween, Tunya Petridis, Tom Duff, Una Lalagavesi, and Yvona Nouzova.

To maintain confidentiality of participants we have not named the facilitators from Community Groups, Service Providers or individuals. Some of the Victim and Survivors are known in the paper by a pseudonym.



What Matters Most

I would like to recognise contributions from those with lived experience of child sexual abuse. Their expertise and insights are the cornerstone of our collective endeavour to craft and enact the Child Sexual Abuse Reform Strategy and Action Plan. We are profoundly grateful for the courage and leadership shown by Victim-Survivors and community members whose experiences have not only shaped this initiative but also paved the way for transformative changes in our approach to addressing and preventing child sexual abuse in Tasmania.

I would also like to thank the Tasmanian Government for resourcing this report through Department of Premier and Cabinet to ensure that the community could safely and meaningfully contribute towards the initial development of the Child Sexual Abuse Reform Strategy and Action Plan. I recognise that this is the beginning of a more consultative approach to strategy development and thank those displaying courage and leadership within the Tasmanian Government to ensure that collaboration is at the core of the Child Sexual Abuse Reform Strategy and Action Plan moving forward. Change is not easy, but it is essential.

This report encapsulates critical insights from Victim–Survivors, community groups, and specialist practitioners. Their input has been instrumental in identifying the necessary steps toward meaningful reform and underscores the importance of involving those most affected by child sexual abuse at every stage of our strategic planning. This report accurately represents the views of those involved in the consultation, without censorship or direction. Those who contributed could do so anonymously, online, in person, in groups or individually. They could be supported therapeutically through this process or contribute independently.

A total of 143 people contributed to the content of this report between March – April 2024. This includes a number of people who identified as LGBTQIA+, people living with disability, people experiencing economic disadvantage, people experiencing homelessness, people who are foster carers, young people, and older people, new Australians, Aboriginal communities, rural and remote communities, culturally and linguistically diverse communities.

The feedback from Victim-Survivors, articulated through eight key messages, includes:

- the urgent need for safe places for children to report abuse
- the necessity of mandatory, explicit consent and relationships education
- a transformation of our criminal justice system to better serve Victims-Survivors
- and the right to specialised, long-term support.

Our engagement with community groups echoed and expanded upon these messages, emphasising the cultural shifts needed within our systems, workplaces and broader community. They have underscored the need for increased funding and greater accountability to restore and maintain public confidence.

Additionally, specialist practitioners have provided deep insights into the nuanced responses required to effectively address child sexual abuse. Their contributions emphasise the importance of understanding the unique experiences of Victim–Survivors and the societal attitudes that often invalidate these experiences. They remind us that each Victim–Survivor is an expert in their own experience and deserves our full belief and support.

This report calls for the creation of an informed and supportive community that recognises and responds to the unique needs of each Victim-Survivor. Our approach must be comprehensive, multidimensional, and continuous, ensuring that no one is re-traumatised by the systems meant to support them.

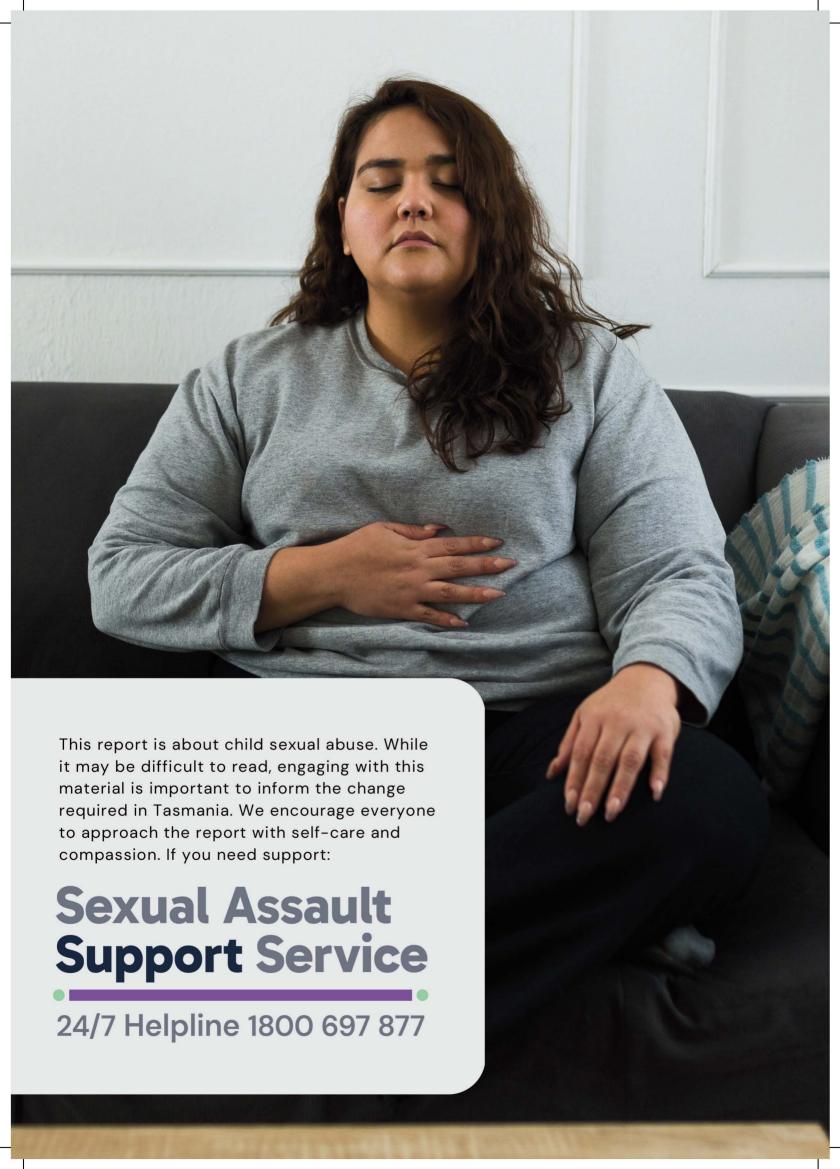
This report is not merely an analysis: it is a call to action. It mandates those of us with the power to enact change, to listen, learn and act decisively. We owe it to every child, every Victim-Survivor, and every Tasmanian to ensure our response to child sexual abuse is as effective and empathetic as possible.

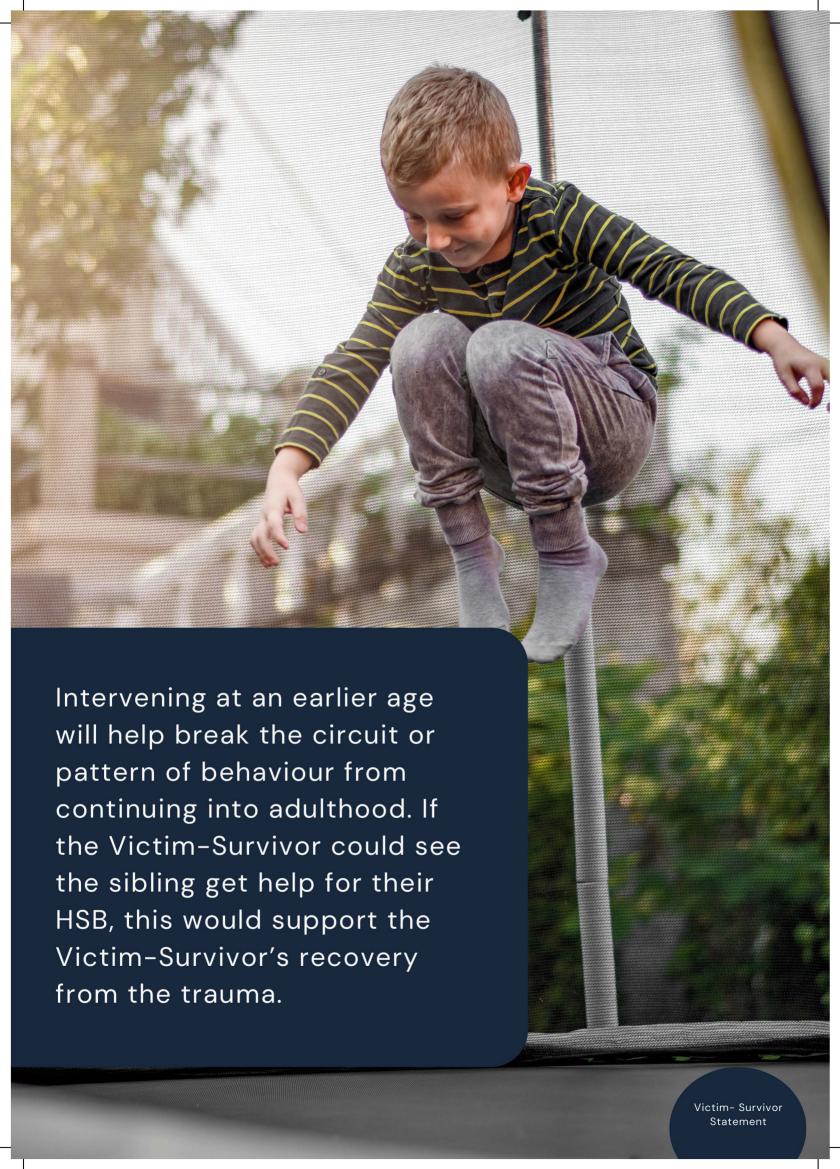
Together we can create a safer, more supportive Tasmania for all.

Sandi Doherty

Acting CEO,

Sexual Assault Support Service





KEY MESSAGES

Victim-Survivors

Victim-Survivors have 8 key messages for the Tasmanian Government:

- 1. Children need a place to go, outside their family, to tell a safe adult that they are being sexually abused.
- 2. Across age groups and across Tasmanian communities, we need a step change in awareness, knowledge and beliefs.
- 3. Consent and Relationships Education needs to be mandatory, direct and explicit, designed with the understanding that there will be children, young people and adults in the classroom who are being or have been subjected to abuse.

 Messages need to be crystal clear.
- 4. Recognition of the profound impact of sexual abuse should lead to adequate funding for long-term, specialist support for Victim-Survivors, and for prevention initiatives.
- 5. Mainstream services need to be traumainformed and child-sexual-abuse aware.
- 6. The criminal justice system is failing Victim-Survivors.
- 7. Tasmania has fallen behind in its response to child sexual abuse, and confidence in Government is low.
- 8. The voices of Victim-Survivors should be front and centre in Child Sexual Abuse Reform.

Community

Conversations with Community Groups echoed these messages, arguing that Tasmania needs a cultural shift in systems, workplaces, and communities, significant uplift in funding for therapeutic services and prevention programs, and renewed confidence in Government.

In some places, Community Groups added particular emphases.

Community Groups expressed concern about expecting school to be the major point of disclosure, and argued that consent and sex education should be a shared responsibility between parents and schools. That being said, Community Groups consider that many parents in Tasmania are ill-equipped for this role, and are themselves lacking in awareness, knowledge and confidence.

Community Groups see intergenerational child sexual abuse and the small size of the State as significant challenges in Tasmania. Child sexual abuse is normalised in some places and a fear of social fallout is a further barrier for young people and their parents.

Community Groups added one further key message:

9. Social media, pornography and influencers are shaping young people's expectations and behaviour around sex and consent in highly concerning ways.

Specialist Practitioners and Frontline Workers

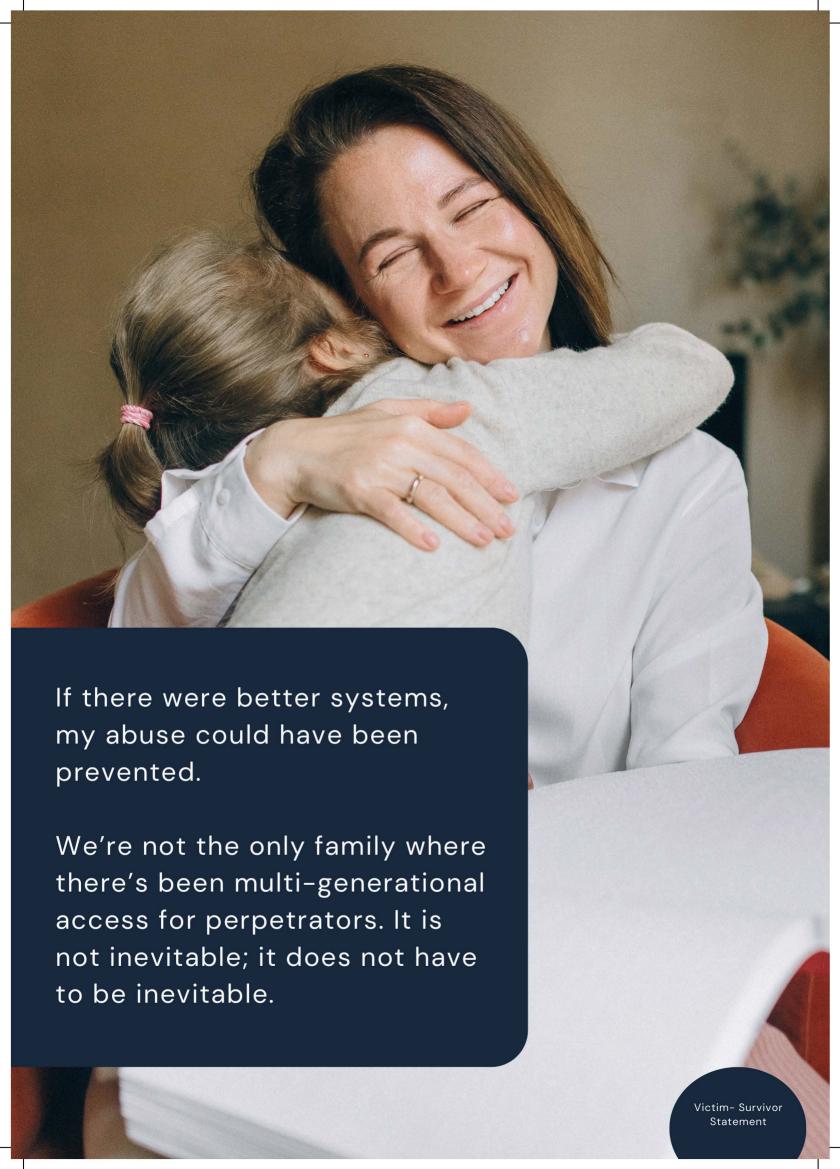
We asked Specialist Practitioners and Frontline Workers who support people impacted by sexual abuse what Tasmania needs to **Know**, **Believe** and **Do** to respond well to child sexual abuse.

We need to know that:

- everyone's experience is their own; there isn't a scripted set of responses
- Victim-Survivors can get support; recovery is possible
- societal attitudes and victim-blaming myths perpetuate harm

We need to believe:

- people when they disclose
- every child has the right to be a child, to be free from harm and danger
- the Victim-Survivor is the expert in their experience



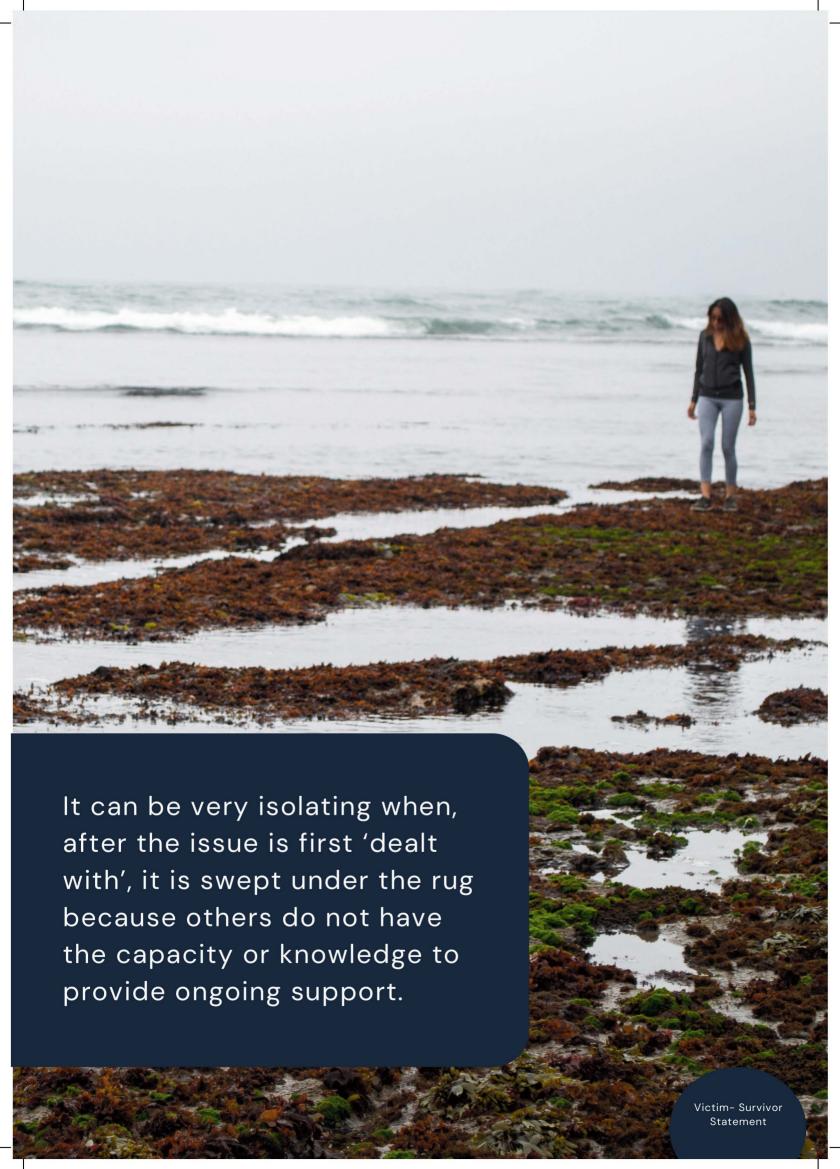


We need to:

- support Victim-Survivors to recover and heal
- foster a culture of empathy, understanding, and solidarity within the community
- provide long-term support and pathways, rather than just a reactive response

Specialist Practitioners added one further key message:

10. Those who have something to gain from the way things have been - perpetrators - and those who have something to lose from challenging the status quo will be the biggest opposition to change, but also the greatest reason to keep pushing for it.



Background

The Department of Premier and Cabinet (DPAC) commissioned Sexual Assault Support Service (SASS) to develop and run a series of initiatives to engage the community and Victim-Survivors in the design of the Child Sexual Abuse Reform Strategy and Action Plan (the Strategy).

This Report presents our analysis of the key messages about what matters most in Tasmania's response to Child Sexual Abuse, across five engagement activities: Client Survey (n=45); 1:1 consultations with Victim-Survivors (n=8); Small Group consultations with Victim-Survivors (n=4); Community Groups consultation (n=74); and a Survey of Frontline Workers and Specialist Sexual Assault Practitioners throughout Tasmania (n=12).

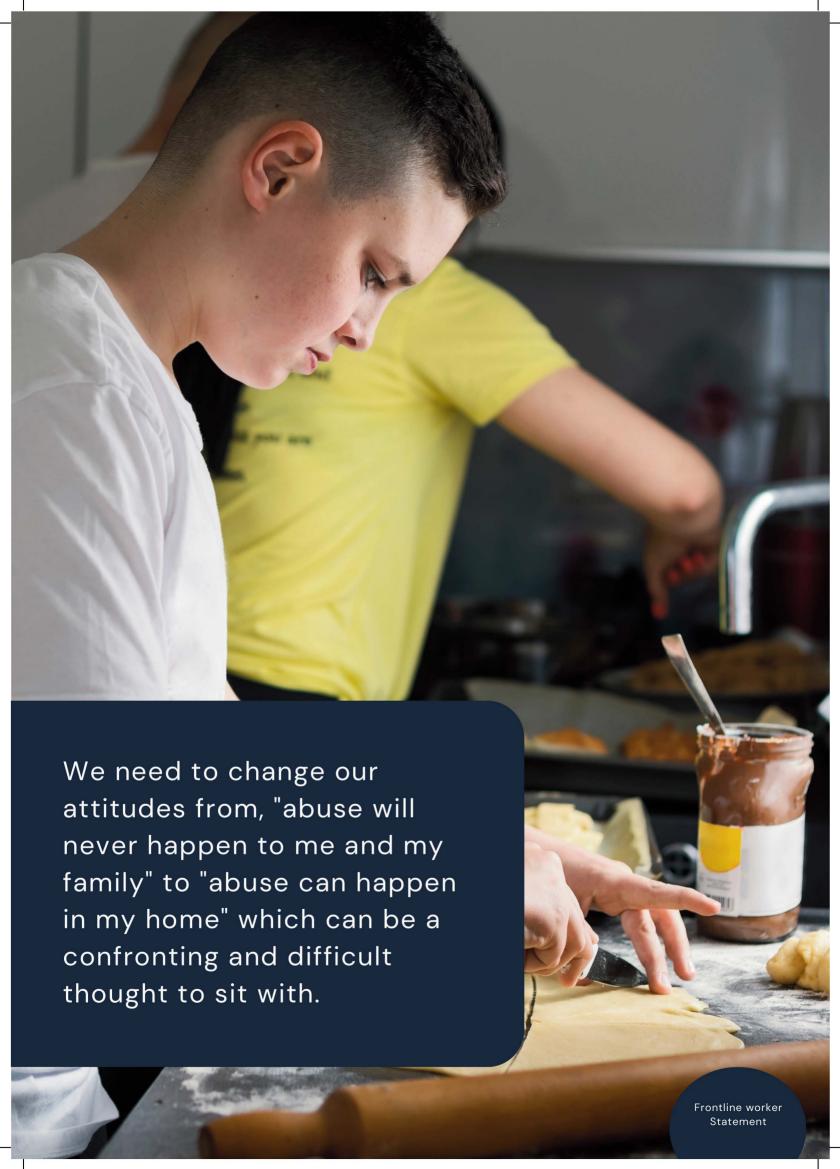
Methodology: Mixed Methods and Triangulation

The mixed methods approach allows for a deeper exploration of a research question by combining qualitative and quantitative data. Mixed methods research can explore more complex research questions than either qualitative or quantitative approaches alone.

Triangulation is a core element of qualitative research, allowing researchers to test the validity of their analysis by considering the subject of inquiry through a variety of lenses. [1] We use investigator triangulation and data source triangulation in this project.

Investigator Triangulation

Investigator triangulation involves using multiple researchers to examine the research question. Best practice is to include researchers with different backgrounds, expertise, and perspectives in analysing and interpreting the data.



Methodology: Mixed Methods and Triangulation

This reduces the risk of bias, and increases the validity of findings. [2]

- Dr Morag MacSween is a researcher and former executive leader in statutory child protection. Morag has viewed the data through research and change-management lenses.
- Alex Morris is a SASS Educator. Alex has viewed the data through adult learner and community education lenses.
- Tunya Petridis is a Clinical Supervisor. Tunya has viewed the data through developmental trauma and clinical supervision lenses.

Data Source Triangulation

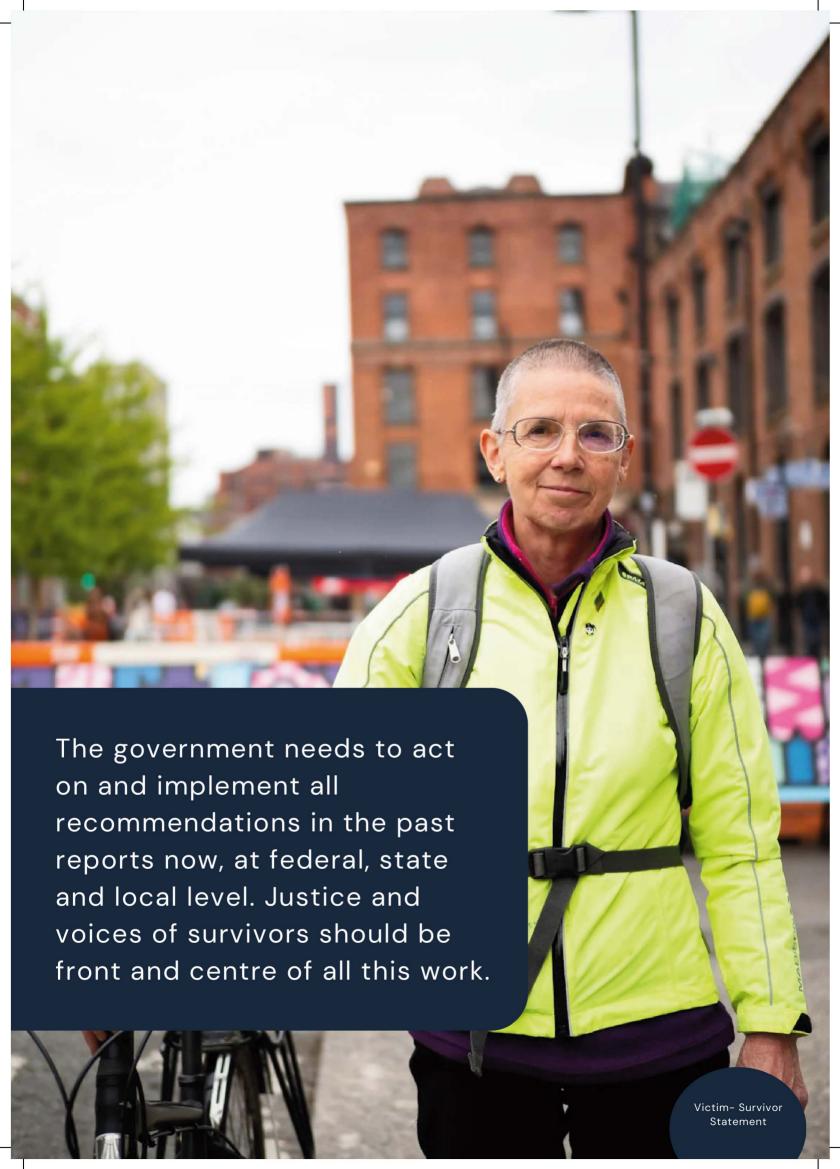
Our analysis draws on data from three sources: Victim-Survivors of child sexual abuse, Community Groups, and specialist Sexual Assault Services staff.

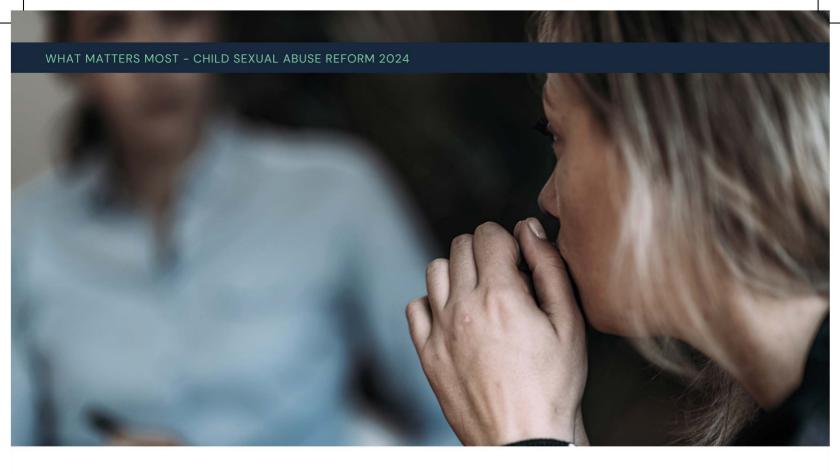
Data Gathering

Data has been collected via: online surveys; semistructured, trauma-informed one-to-one interviews; and semi-structured, trauma-informed groups.

Data Analysis

Data has been analysed thematically.





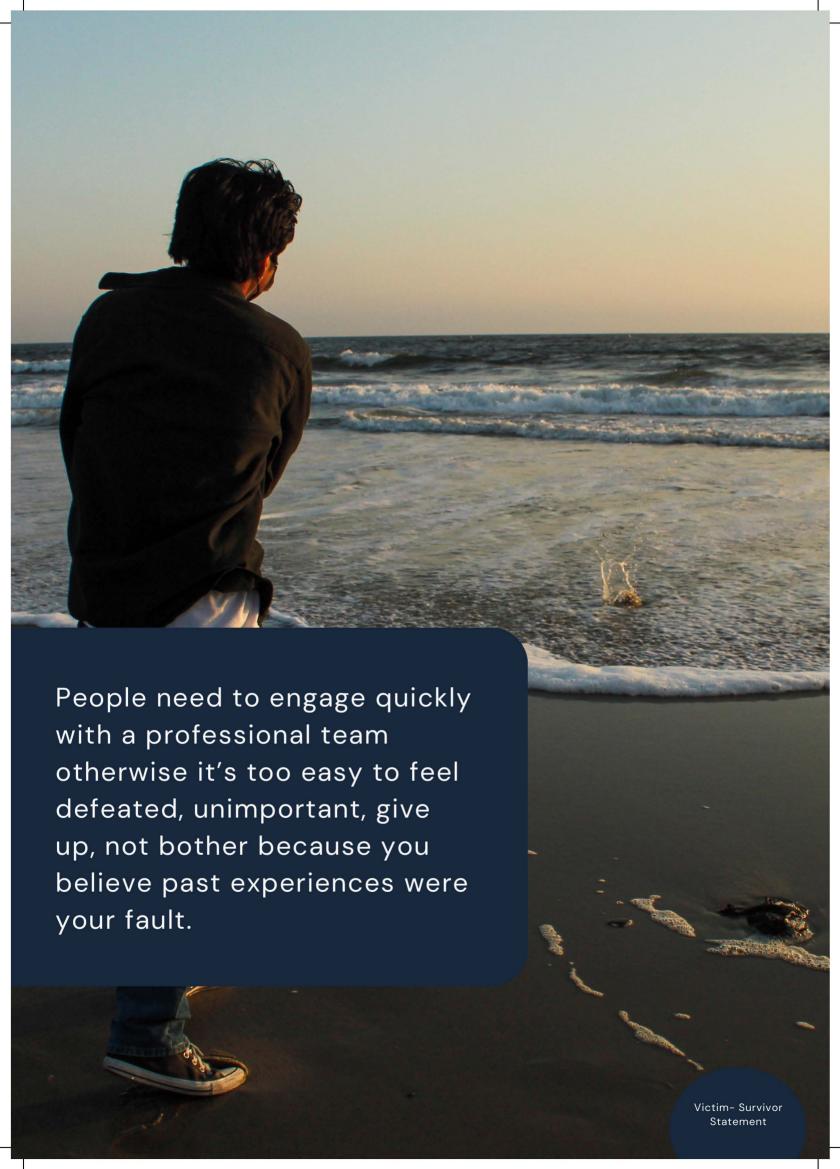
Victim-Survivors

We spoke to 12 Victim-Survivors in one-to-one interviews and in small groups; 45 current and former SASS clients participated in an anonymous online survey. Eight themes were most commonly identified by Victim-Survivors.

Children need a place to go, outside their family, to tell a safe adult that they are being sexually abused.

This needs to be well known, and safe adults need to be well-trained and well-supported. Schools are best placed to offer this support. Good practice here will serve 3 purposes: stopping abuse of the child who discloses; preventing abuse of other children; and reducing the risk of re-victimisation of the child who discloses.

Ophelia said that her school refused to let her report her abuse to Police at the school, and as a result she didn't report for four years. She said: Schools are a facility for young adults and young children to have spaces to feel safe and learn and grow; schools are not just for teaching and learning...school has a duty of care in those hours you are there. Children should be able to report to an officer in their school if they need to, not go all the way down to the station, somewhere they're not familiar with. Public schools are part of the Government and should provide a space in that school where children can feel comfortable to talk to an officer with a support person present.



Karen said that child sexual abuse in early years is a predictor for re-victimisation: It affects your core beliefs; these were normal behaviours, not unusual behaviours to me at all, and I had a real vulnerability afterwards...keeping to yourself makes you more vulnerable; the better you deal with the first instance, it's protective, as much as it makes you sad and guilty (as a parent you need to) let that go and (tell your child) we will get you back to a point where you know exactly what consent is.

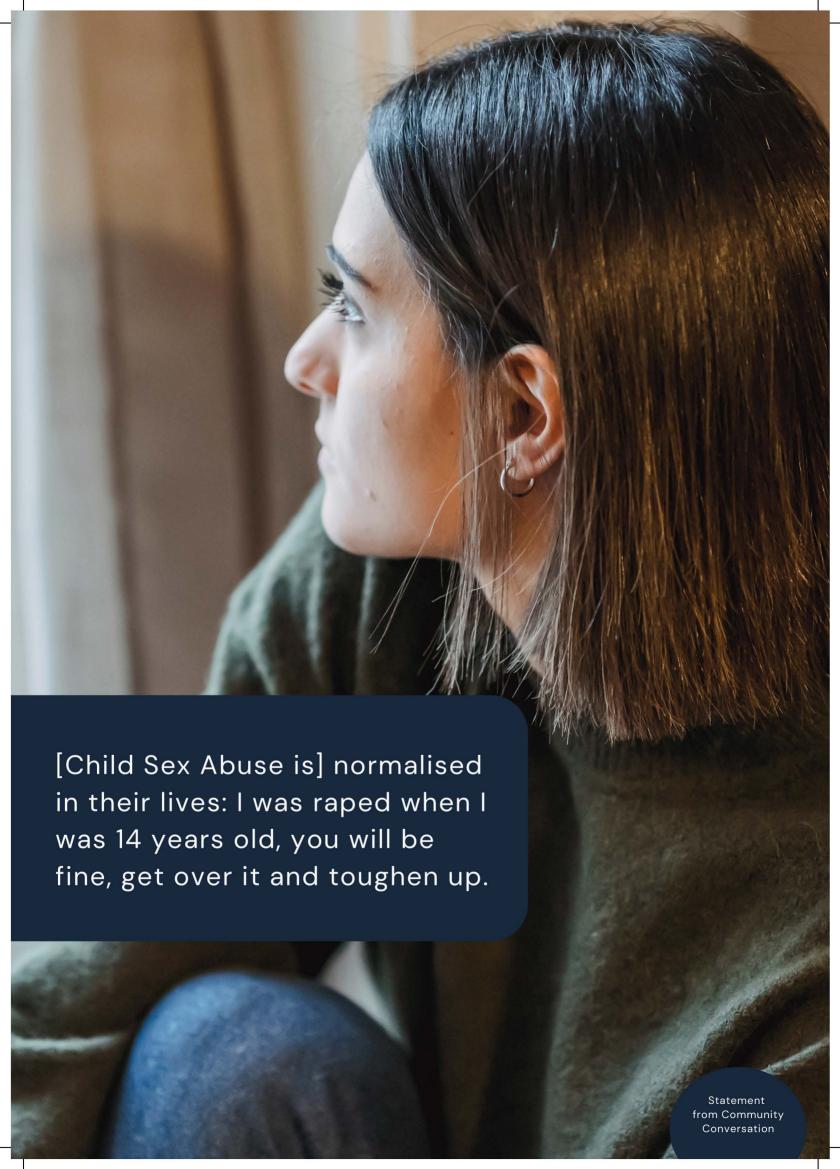
Caroline suggests a: 'Safe Body person' (in schools) ...this person is someone you can tell if there's something happening with your body; the person is used to someone telling them that, it won't be a surprise, a coming out of nowhere thing.

Maha said: Victim-Survivors need a safe person to go to, particularly if the young person is currently experiencing the abuse and the home is where the abuse is occurring. Abuse thrives in silos – even family silos. To break this circuit society needs to create opportunities for young people to engage with safe people outside of the home, for example, within schools...There should be RAISE mentors in every school in Tasmania.[3]

However, one Survey Respondent said: Provide them with safe ways to access help if they need it, because when a child's life is being threatened at home, they aren't going to be able to tell their teacher something's going on.

Across age groups, and across Tasmanian communities, we need a step change in awareness, knowledge and beliefs.

The community, and services, need to understand the dynamics of child sexual abuse and its true impact. Children, young people and adults need to know how common child sexual abuse is, what the indicators are that a child may be being abused, how children disclose, how to respond, and where to get support. For Victim–Survivors, the impact is long–lasting, well into adulthood, and recovery is hard work. There are repercussions across the whole family; parents, siblings, grandparents and extended family all need support. Impact can come out in behaviour, as well as in words; we need to understand triggers, and 'translate' behaviours, rather than jump to conclusions. Child sexual abusers are opportunistic and predatory; they target and groom not only children but the adults around them. Child sexual abusers are present in all walks of life, in all places in our community: they are people we know, people we work with, people we love. Victim–Survivors are present in all walks of life, in all places in our community: they are people we know, people we work with, people we love.



Charlotte said that her family think her daughters are just being shits, that they have experienced years of being misunderstood, and in their healthcare every intervention has been traumatic.

Sarah said that her family knew about her abuser but dismissed it as made-up stories, because they could not comprehend things like this happen... I don't know how to get the message across to people that if your child is giving indications, it's so unlikely that a child under 18 is manufacturing fantasies.

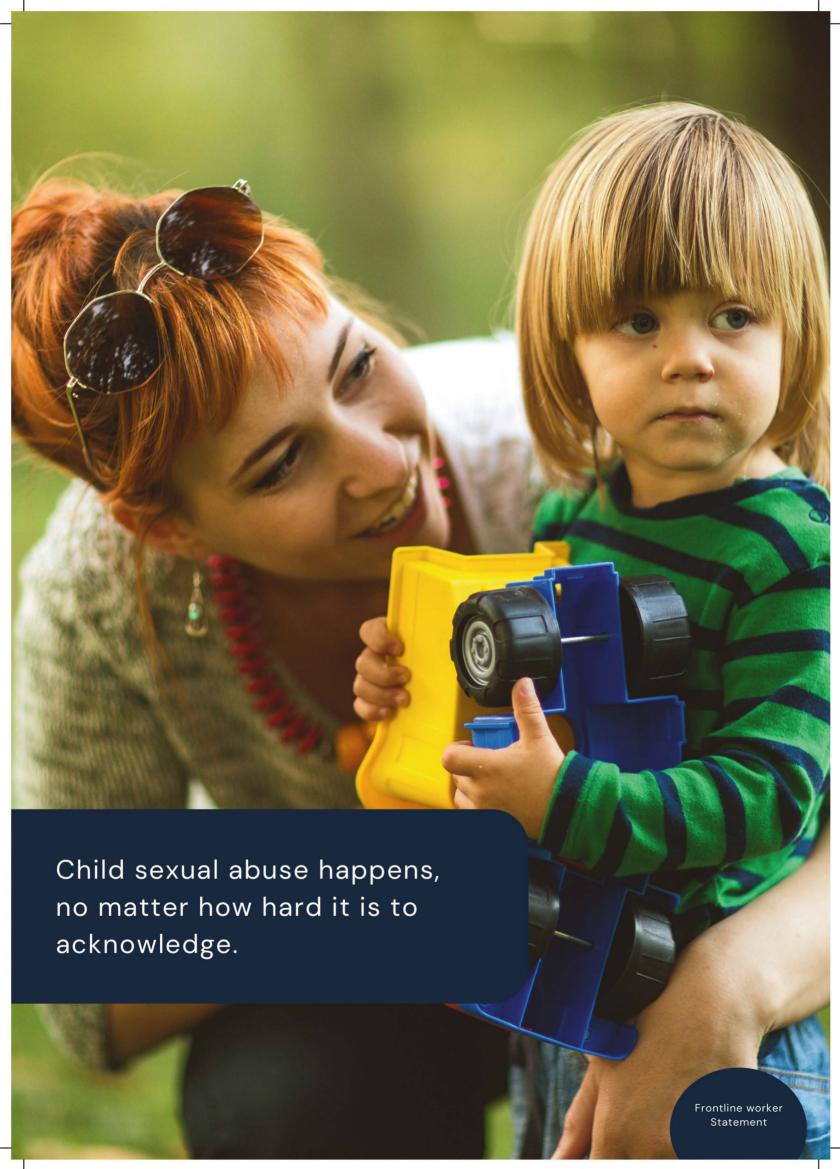
Caroline said that: We should not discount, not stereotype abuse as coming from low socio-economic groups, being good Christian people, having good jobs, big houses is not something that stops abuse from happening. She also talked about the significantly increased risk of sexual violence for People With Disabilities: so many children are never going to reach a cognitive point to do EMDR or talk therapy, it comes out as behaviours, behaviour is communication; we need more intense consent education for children with disabilities and their caregivers.

Karen said: In childhood my body knew, but not my mind: the specifics rolled out when I was 32 when I entered a wonderland of triggers. If I saw these biscuits, smelled that smell, heard that song...The impetus to brush things off is so powerful.

Anna said: Where do we begin? I personally feel it will take a complete overhaul of the current systems (that I truly believe don't work), from the top to the bottom and from the bottom to the top. A revolutionary change in societal-cultural norms (perceptions-preconceived bias included).

June said that it's vital to: Give loved ones the resources to support the Victim-Survivor, so others know how to appropriately respond, as well as how to manage and support on an ongoing basis. It can be very isolating when, after the issue is first 'dealt with', it is swept under the rug because others do not have the capacity or knowledge to provide ongoing support. In directly supporting a victim-survivor, always asking what they need to feel safe and supported – ask, don't assume.

Ruth said: We need to shift the focus back onto the perpetrator and the series of events that lead to that person becoming a risk; parents and the community need education on how abuse happens and on grooming behaviours...(so there can be)... greater vigilance around abuse; I had to teach my parents how to respond... education would support parents in being more equipped....(and)...reduce worries about how they will be viewed by the community... we need to change our attitudes from, "abuse will never happen to me and my family" to "abuse can happen in my home" which can be a confronting and difficult thought to sit with.





Survey Respondents said:

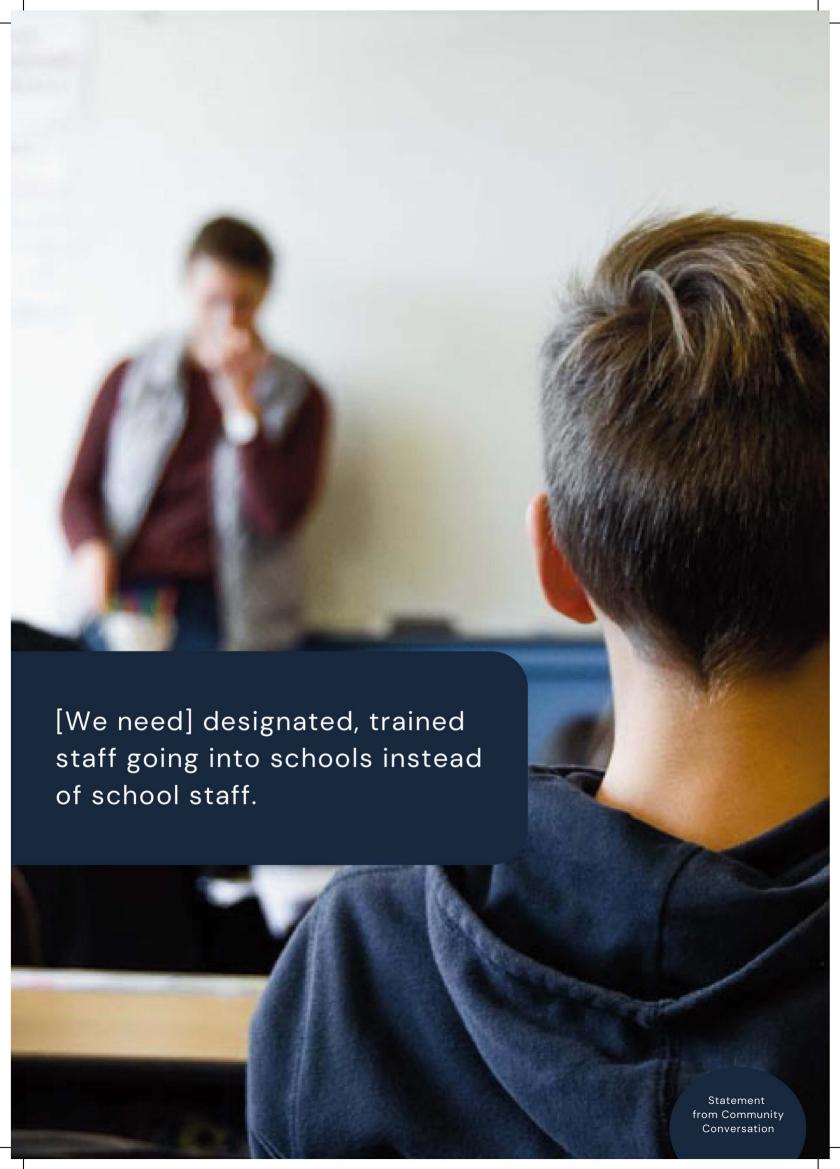
I think there needs to be a public campaign to fight the shame associated with being subjected to sexual violence which prevents people from seeking support and talking about it.

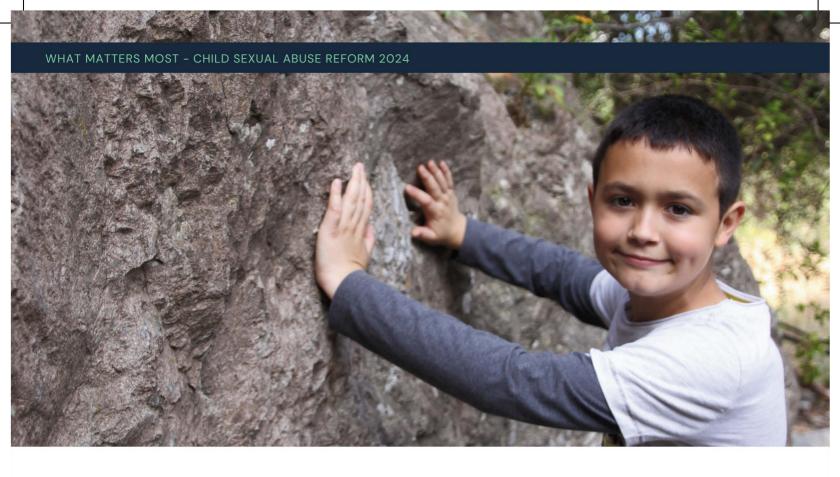
Since most sexual abuse of children happens within the family or extended family, the government needs to have sufficiently trained people to handle this and prevent the family going into 'close-down' mode and 'pretend it didn't happen mode' in order to protect the family image.

Survey Respondents also talked about the need to challenge myths and misconceptions about sexual violence:

More of an emphasis on shifting patriarchal/sexist attitudes that lead to gendered violence. This could happen through more campaigns in the media, talks in schools, etc. Information packages for parents could be good too to try and instil these values, so that instead of only teaching their daughters to say 'no' and to be safe at night, they have conversations with their sons about affirmative consent and respecting women.

We need to also focus on dismantling rape culture and misogyny in our society.





Consent and Relationships Education needs to be mandatory, direct and explicit, designed with the understanding that there will be children, young people and adults in the classroom who are being or have been subjected to abuse. Messages need to be crystal clear.

Caroline said that people should have to present a Certificate of Participation in Consent Education before they get a Working With Vulnerable People clearance.

Karen said: Your body is your body – if you've already been taught that's not true, none of that means anything to you; stranger danger stuff – it's so much harder to speak out if it's someone you're meant to trust, your little brain has no way of comprehending that.

June said education is critical: Teaching children, young people and adults about consent ('stop it at the start' principles) and appropriate behaviour, using the correct terminology for bodies and for appropriate/inappropriate behaviour (clear, direct language for rape/abuse/assault/etc.), and how to identify and communicate uncomfortable or bad behaviour. An important element is reducing the stigma, shame and heavy weight associated with using direct language (for body parts or inappropriate behaviour, etc.) so that it's easier for people to use when it really matters...We need to know the risks and the red flags.

Anna said: There needs to be training (annually) for anyone in government, in any agency, to sit through extensive and intensive (trauma-informed, evidence-based) training regularly – as in, mandated compliance.

Survey Respondents said:

I think the first step is educating people. Educating young children about what is and isn't okay, not only when it comes to what happens to them, but also what they do to others.

We need to implement better consent education in our schools which should be mandatory for all.

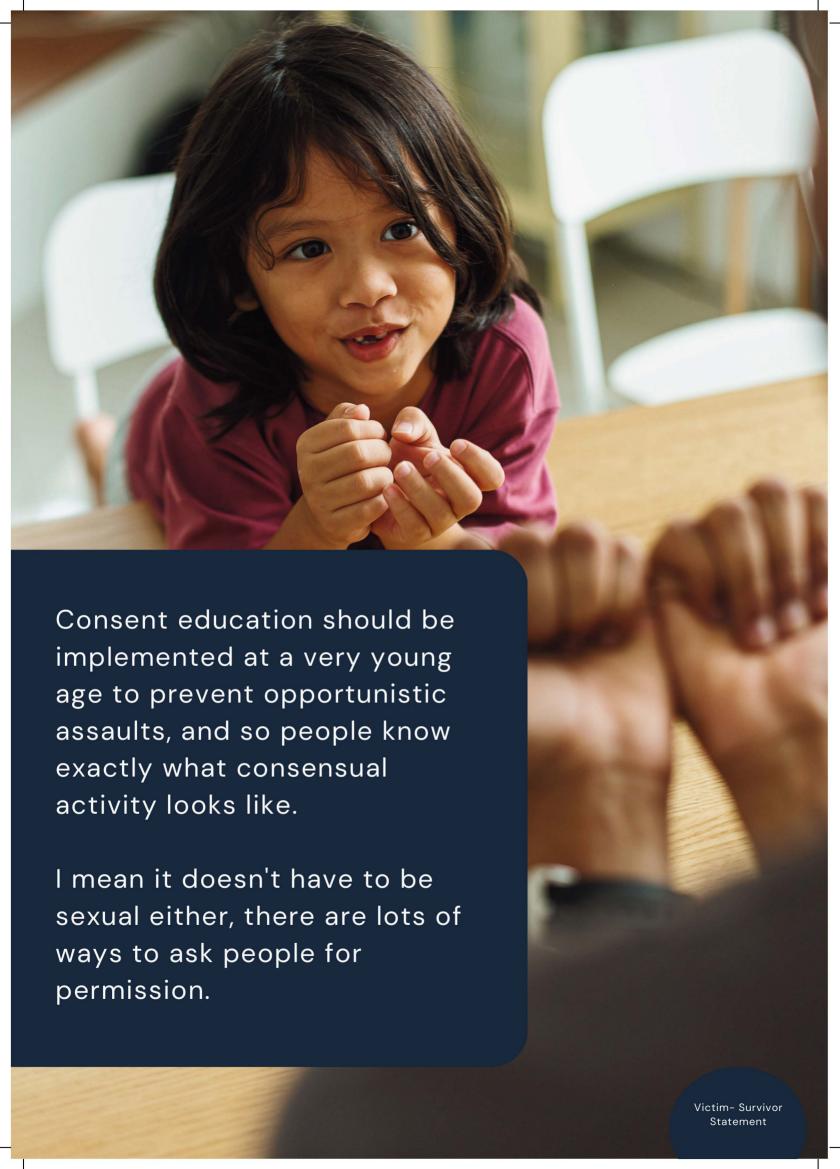
Education, education, education. Safe and Equal Vic, have great resources for teenagers and kids that should be distributed in all Tassie schools. [4] They're free, just have to pay for shipping. I would like to see SASS take the lead on The Shark Training in Tasmania for all Grade 5 years and upwards, in addition to offering it at Neighbourhood Houses around the state, like on a tour. [5]

Greater awareness & education for young girls in particular.

Sex education needs to be improved. I think we need to get rid of the way people feel shame talking about sex and so (?) we need to get young people confident talking about it so they actually have the language to tell someone if something has happened to them.

I think we need to implement some sort of boundary system starting in school. I feel like people's boundaries are disrespected all the time e.g. children are forced to hug or touch people when they don't want to and are treated like the problem when they express they don't wish to be touched. We see this with adults who struggle to set boundaries with other people and feel like they must be physical with others (in sexual and not sexual contexts) because they feel so horrible about saying no. Therefore, I think if children are taught to respect their own/other people's boundaries from a VERY young age, and are taught how to communicate about sex without shame, a massive prevention strategy would be formed.

And of course, consent education should be implemented at a very young age to prevent opportunistic assaults, and so people know exactly what consensual activity looks like. I mean it doesn't have to be sexual either, there are lots of ways to ask people for permission (e.g. 'can I please have your pen?' 'no' 'ok'). As students get older, I think they should be explicitly taught what IS consensual, not



what is NOT consensual. I see a lot of students get shown that tea video on consent, but I don't think it really hits home. At the end of the video, you know more about what non-consensual sex looks like than consensual, which might sound alright, but I don't think is. Students must know what consent looks like.

Better education for young people and families around consent. With specific attention to those who maybe cannot easily understand appropriate social conduct – autistic community, neurodivergent people as well as a focus on queer education too.

Teach consent to students in schools (age appropriate).

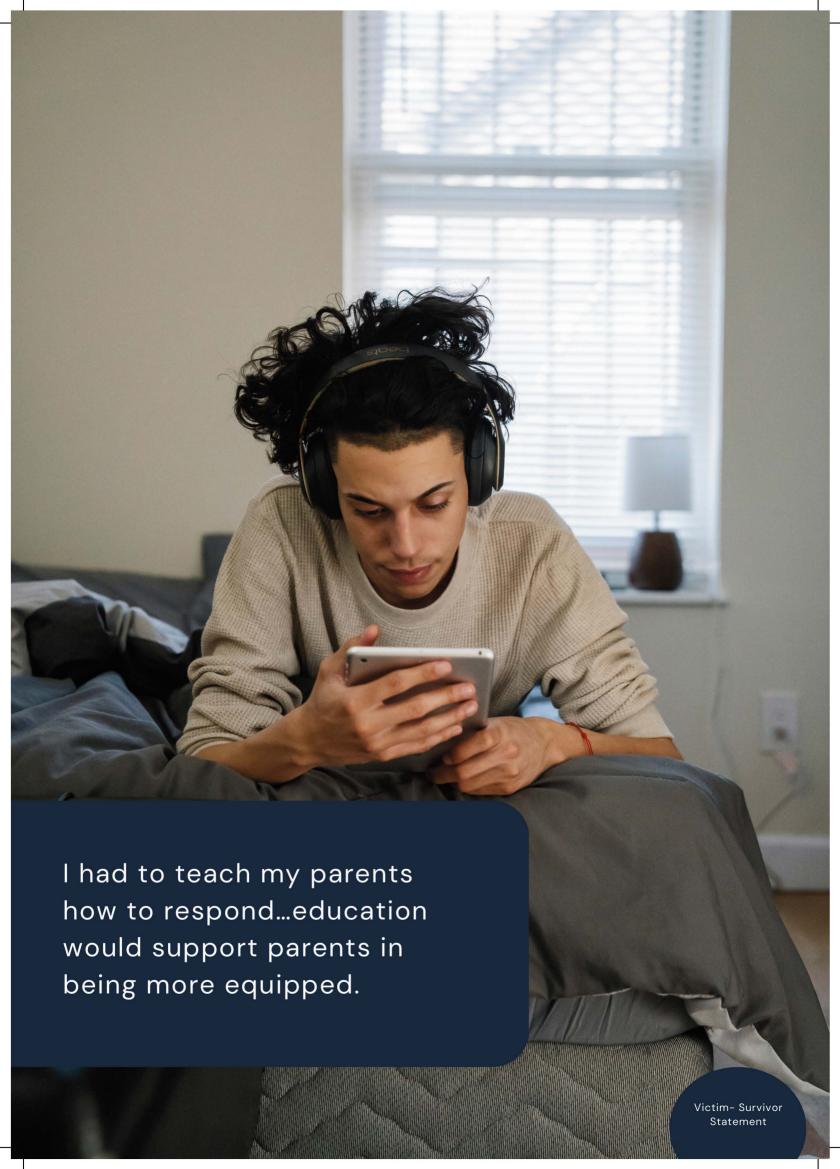
Mandatory respect training in workplaces.

Recognition of the profound impact of sexual abuse should lead to adequate funding for long-term, specialist support for Victim-Survivors, and for prevention initiatives.

Diana said: My experience in Tasmania, the support I've had on a personal level has been very good, but SASS isn't available straight away: we need more support for Victim-Survivors on an individual level, it's not one session, you need to build a relationship, and Government needs to support that.

Maha said that there should be more funding for prevention, including interventions for young people using Harmful Sexual Behaviours (HSB): Intervening at an earlier age will help prevent the pattern of behaviour from continuing into adulthood. If the Victim–Survivor could see the sibling get help for their HSB, this would support the Victim–Survivor's recovery from the trauma as they would be able to see the other young person taking responsibility for their actions and being accountable, and this would help Victim–Survivors see that it was not their fault. It's not about the Victim–Survivor seeing the person who engaged in HSB suffer but it is important for them to see that they own what happened, and other people can see who he is. It is important that there's greater visibility of the person who engaged in HSB, to ensure the safety of other young people, and that appropriate support can be provided.

4



This was a major concern for Survey Respondents:

The government can provide more funding to appropriate services, like SASS, not CatholicCare or Anglicare (they are NOT the appropriate services). The government can provide a safer space for people to be heard & to empower the victims, NOT the perpetrators.

The government needs to up their funding and support for sexual abuse education and related services, such as counselling etc. It was not that easy to initially get a SASS appointment due to very high demand & long waiting lists.

Assist people to overcome the impacts of the abuse and improve their life circumstances.

Funding and awareness. Generate more services to women escaping sexual and domestic abuse.

More money to hire more people in this industry. People need to engage quickly with a professional team otherwise it's too easy to feel defeated, unimportant, give up, not bother because you believe past experiences were your fault.

Provide services to help the victim and anyone associated with the abuse.

Funding and increase in availability of organisations like SASS for those who need support.

The government needs to put more money into actual counselling services and not hotlines.

Less wait times and more people to help faster - this would see the trauma reduced and although services would be needed earlier, they would likely not be needed for as long. People would cope better.

I had to wait 6 months before I could engage with SASS. For many people I can imagine that is too long to wait. Unfortunately, I understand that that is the reality for health services in Tasmania but it is a barrier for many people.

A number of Survey Respondents echoed Ruth's comments about additions to 1:1 therapy: We should explore alternatives to therapy: peer-led support groups; peer advocates; and trauma-informed coaches. [6]

Mainstream services need to be trauma-informed and child-sexual-abuse aware.

Justine said that the Royal Women's Hospital in Melbourne has a clear message about sexual violence all through its website – we know about this, we can manage it, you're safe with us, we can help you...it needs to be up there loud and proud like this in the Royal Hobart Hospital.

Sarah said that neither her TAFE counselling course nor her training in a youth counselling service offered adequate training and support around trauma: obviously it was spoken about, but it wasn't targeted... (in practice) it was the most extreme sexual abuse you've ever heard of in your life.

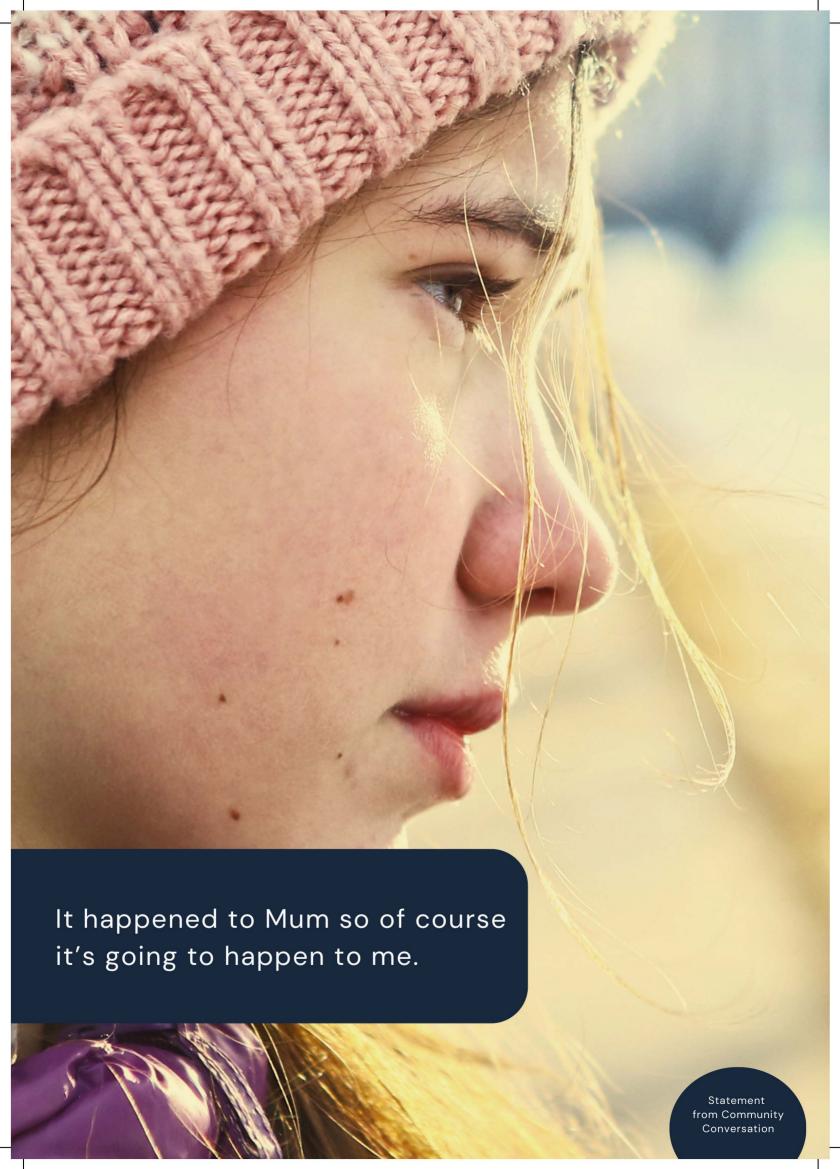
Karen said: It would be really beneficial for all health professional to have a sexual health subject, how to look after someone who has trauma...trauma-informed care is a big buzzword, but it's not quite done in the way it should be, it's all about mental illness. People will often disclose to a nurse after a seizure or a fall, but nurses aren't necessarily going to know what to do. They need to be able to say, I can absolutely handle this, I can talk to you about this, I can point you in the right direction.

Caroline said: We need to hear: we think this is awful. We are really angry. We want to make changes. We're disgusted. We're horrified. We want to make change. It's the last place anyone wants to hear robotic responses... Make people uncomfortable. Get it out of your system in training, not in front of a survivor.

Anna said that it is critical that: No person that a victim-survivor interacts with within the system (including counselling services, Police, DPP, etc.) has the power to dismantle and railroad that person's progression in moving forward (whatever that looks like). What I mean here is that any one person, no matter what position they hold, in any department of justice, holds the power to make or break, for lack of a better word, someone's journey of reporting, seeking support or advice/information.

She added: I can now see how victim-survivors will forgo important medical checkups and exams because of their experience with sexual assault and the retraumatising impact they can have; and as a result, will have lower life expectancies. This has been a reminder of how far reaching and long lasting the impacts of trauma can be; it is confronting and saddening that there will be other things that come up in my future that will trigger me that I didn't expect. Medical examiners need to be trauma-aware and their practices trauma-informed because

Victim-survivors will forgo important medical checkups and exams because of their experience with sexual assault and the retraumatising impact they can have; and as a result, will have lower life expectancies.





the person they are examining may have a sexual abuse history, and that needs to be a consideration when any invasive procedure is needing to be performed.

Maha said that when she went through the Victims of Crime (VoC) process, she found TAS VoC to be very unhelpful and shut off and she ended up being supported through the ACT VoC service...TAS VoC did not even tell her about Tasmanian support programs for Victim-Survivors and were very closed off to supporting her because her abuse did not happen in Tasmania. Maha said they still could have linked me in with SASS at the very least...VoC should be the heart of referral pathways for free support. [7]

Survey Respondents also commented on mainstream services.

Provide training for professionals, such as teachers, healthcare workers, social workers, and law enforcement personnel, on recognising signs of abuse, responding appropriately, and reporting incidents effectively.

A wraparound approach with other services that have the same value system.

...and strongly emphasised the need to believe Victim-Survivors:

Please believe everything what a person has said, what has happened to them.

Take us seriously.

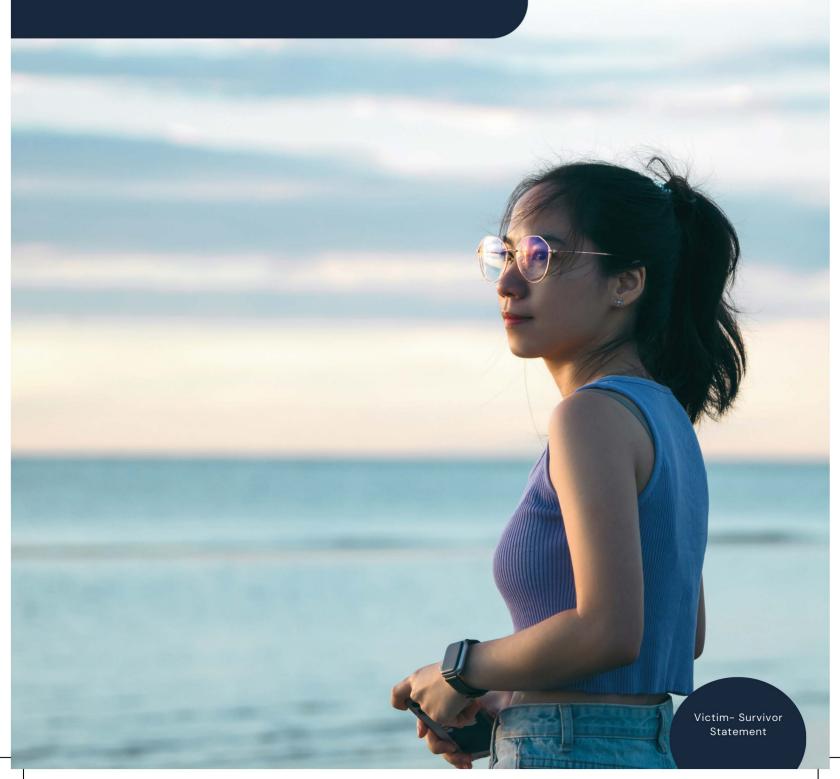
Believe survivors rather than putting them on trial and interrogating them.

Being more aware, sympathetic and not too quick to judge.

Being compassionate, show empathy. Do not judge. Listen to the whole story. Don't put up barriers. Make the victim feel that they have been listened to and believed.

[7] We research and collaborate to transform the health sector response to domestic violence and abuse. (gcphn.org.au)

When you're reporting, the first thing an officer should say is you're not in trouble, you are brave, you have done nothing wrong, this is not your fault.



Criminal justice system failing Victim-Survivors.

Ophelia said that her experience of reporting sexual assault to Police left her feeling that she was at fault, and she doesn't think she would report to Police if she was assaulted again. She recommends: When you're reporting, the first thing an officer should say is you're not in trouble, you are brave, you have done nothing wrong, this is not your fault; thank you for trusting us and sharing your experience.

Caroline said: Men continue to do this because our justice system is designed to protect them, they know they'll get away with it.

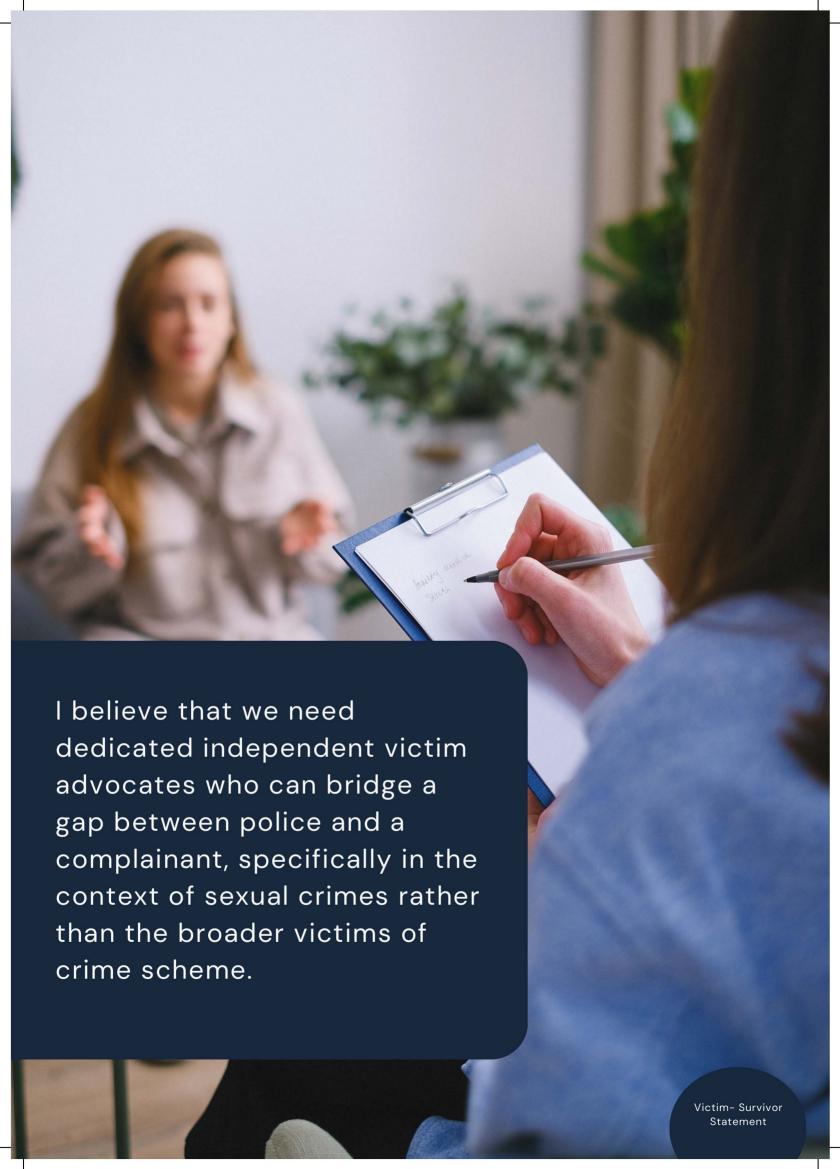
Sarah said: For all of the years and years and years of abuse – he was sentenced to 18 months and served 4. Which makes it all a bit pointless. I went through the court system, made statements, was examined by psychiatrists, all of the shit I went through. What's the point? I serve a life sentence.

Karen said: If there were better systems, my abuse could have been prevented. We're not the only family where there's been multi-generational access for perpetrators. It is not inevitable; it does not have to be inevitable.

Anna said we need: More opportunities of discussing reform for the outrageously outdated laws that underpin sentencing. Look at other ways of how we do "justice"? What does that look like for victim-survivors?

Justine said that we should explore alternative routes to justice: As a survivor of incest, I wanted the abuse to stop. I didn't want my family to be broken up. That's a huge and unfair responsibility on a young person to break up the family, it's terrifying to think you're going to lose everything. Interventions with the abuser to stop the behaviour, fully disclosed within the family so that the manipulation and the lies don't cut it anymore, law enforcement officers notified, oversight child protection. Some other people might prefer the father to be taken away, but that would have been destructive for me. Like the Indigenous Murri court, where there's accountability, a pathway forward.

Ruth said: The justice system is a retraumatising process in itself; I wonder if there is a way that you could bypass the current system? I would like to see restorative pathways for families with skilled mediators to support the family in repairing the harm caused.



Diana said: My Court case went nowhere. It was a real disappointment the time it took, 4 or 5 years, a dreadful experience. I don't think it's fair to have that amount of time for people. I understand the process, the perpetrator has to be protected as well, I don't have an issue with that, but I do have an issue with the time and lack of insight into how that works for the survivor. It's hard enough to recount it all, but over a long period of time makes it harder.

The criminal justice system is a major issue for Survey Respondents:

We need a program for intermediaries to be appointed when a person makes a complaint to police. There is not enough information currently available that adequately explains a person's rights and how the process works. I believe that we need dedicated independent victim advocates who can bridge a gap between police and a complainant, specifically in the context of sexual crimes rather than the broader victims of crime scheme.

People need to have more examples of successful prosecution, or just an example of what speaking out can do. I personally found the police not helpful, and I was extremely unsupported and even low key ridiculed when I tried to make a report. If the people supposed to be all for justice and protecting people aren't educated or know the significance of their words and actions, who are we supposed to go for help?

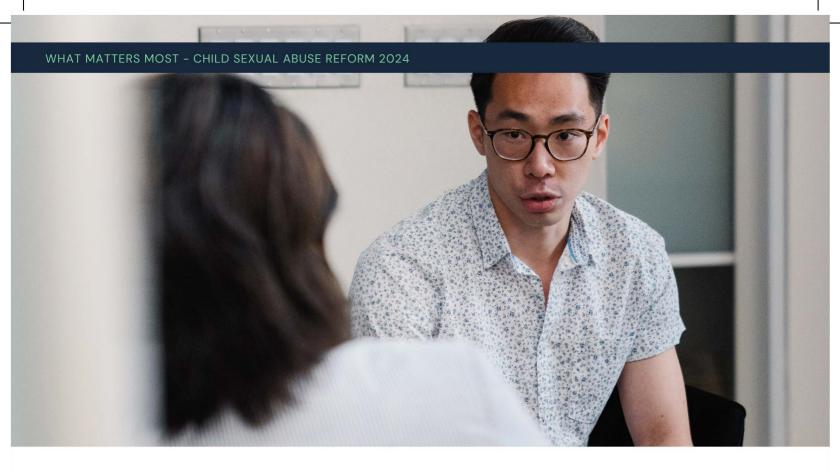
Making sure that law enforcement has all undergone trauma-informed training, as there is a lot of sexism still in the police force from what I've heard.

Remove predators from community faster. Investigate with better strategies to not re traumatise the victim. Have support available immediately and through police investigations.

Laws need to exist to allow the Police to make immediate arrests of those responsible for the abuse and to facilitate life sentences for those found guilty. The justice system needs to support the victim and punish the perpetrator!

Changing legislation around consent to an affirmative consent approach (like QLD has recently done) would also be good.

Police interviews!! We were not aware that SASS can support you at interviews. Mine was interviewed in front of his school principal without me there. This caused him great shame. Also, the police interviewing should not be wearing firearms. This is terrifying.



Allow support person to be available prior to police interviews and investigations and support right from the start. Many people are dealing with this for the first time and have no idea how to navigate the system and this causes more trauma than needs to be inflicted on victims.

The Tasmanian government needs to better fund the Department of Public Prosecutions and police. There is currently an abysmal rate of alleged sexual offences which proceed to be charged. The wait time for the DPP to decide whether charges should be laid is far too long.

There also needs to be serious consideration of our consent laws and potentially reforming them. While we require affirmative consent in Tasmania, it can be a defence for an accused if they reasonably believed that the person consented. This needs serious consideration and overhaul because the conviction rate is so low and declining.

Harsher penalties in place.

One of the most traumatic things for victim survivors is not being believed, or worse being questioned about their story.



Tasmania has fallen behind in its response to child sexual abuse, and confidence in Government is low.

Sarah believes that child sexual abuse is deeply rooted, normalised and institutionalised in Tasmania: It happened to my mum, it happened to my sister, it's just what happens. It's so routine and so normal, from family to family, generation to generation. How can we let this happen? I just want to cry thinking about it. So many clients (in a youth counselling service) said I told my mum, she told me it happened to her too, and that was the end of the conversation. I don't want to hear about it, I don't want to talk about it, that's just what happens. I lost count of the number of times clients told me the same story. It's probably everywhere, but Tassie is a very small community, and no-one talks about how routine and how normal. Often people don't even recognise that things that have happened to them were abuse. Nobody stops it, nobody cares, half the time they don't even notice.

She also said: One of the worse things about this entire Inquiry, it's submitted and the Government will leaf through it and nothing will change, nothing. The history of Inquiries is they look at it, say that's terrible, that's shocking, they close it, they put it in a drawer and nothing will happen.

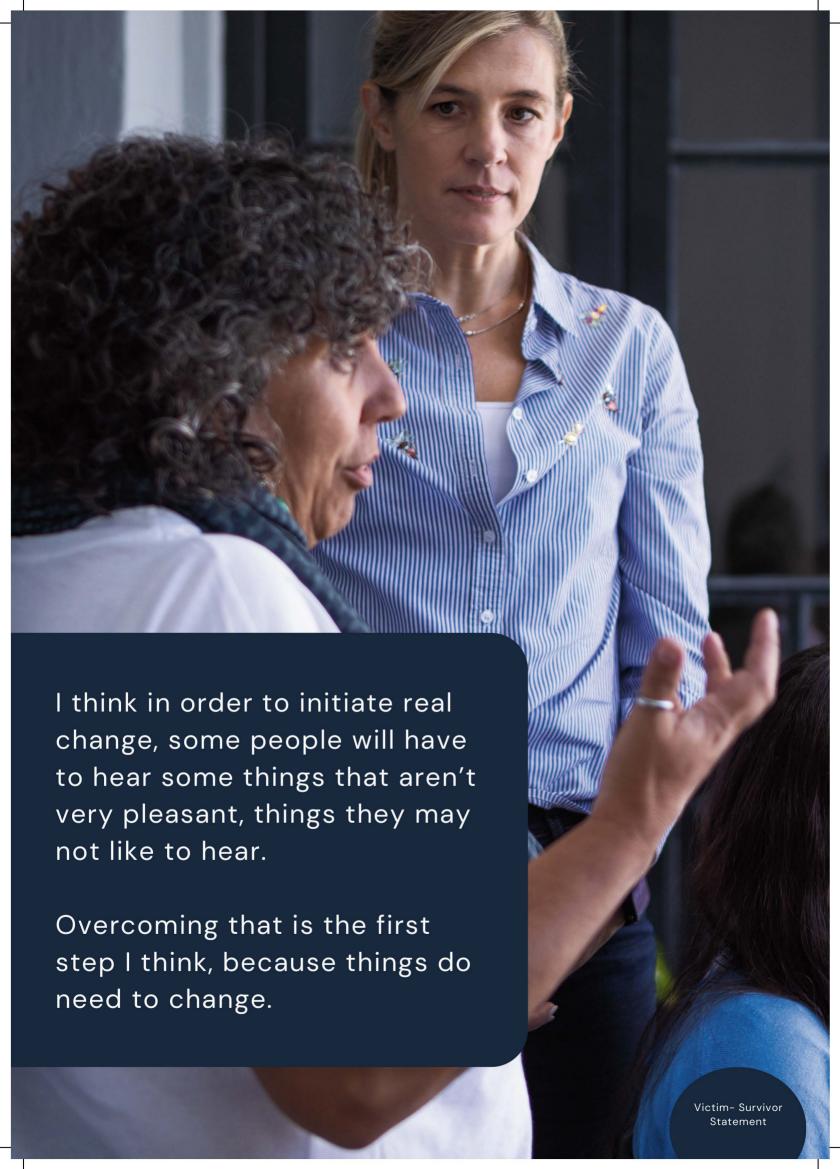
Anna said: I am quite cynical at this response and inquiry. For survivors and those on the ground with lived experience, words are words and talk is cheap. The government talks A LOT. I wonder how the general response was to this report? And people's appetite for contributing? Given that this is the very system that survivors are often so mistreated and deeply traumatised by.

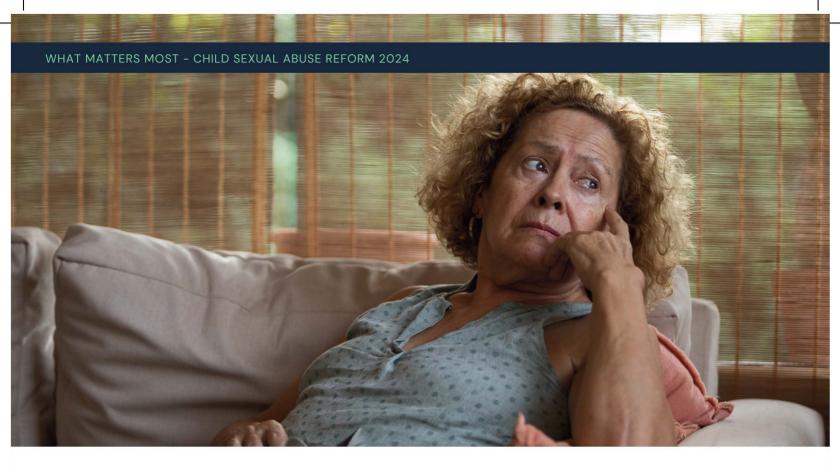
Survey Respondents said:

I can't speak for men and their experiences, but as a woman myself, I've realised sexual abuse of all kinds happen so often and to a lot of people, women share stories and experiences among themselves, but rarely there are people who speak out because they feel they won't be supported. People think Tasmania is a safe place, but those who do just haven't had experiences like these yet.

I think we should look to other jurisdictions because Tasmania seems to fall behind in this regard.

Put the needs of the victim before the excuses of the perpetrators. Victims need to feel heard and supported. That doesn't exist in Tassie.





They can actually care and follow through on recommended changes. I think the entire culture in government about this is too laid back and I'm not sure how that can change.

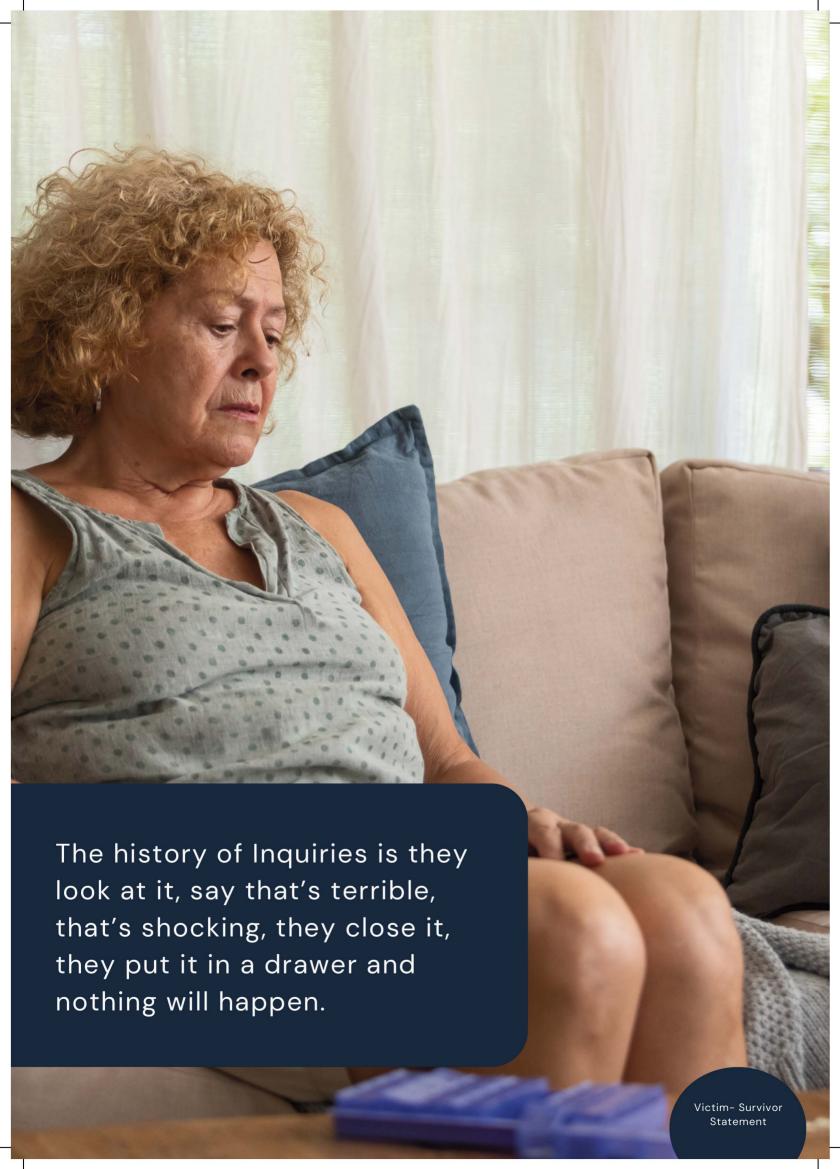
I think the government should be more willing to respond to survivors. First though they should work on implementing recommendations that came about from the Royal Commission into Institutional Responses to Child Sexual Abuse.

So many, many reports have been done over the years. No more money spent on research we already know about. The government needs to act on and implement all recommendations in the past reports now, at federal, state and local level. Justice and voices of survivors should be front and centre of all this work.

Hold government agencies accountable for their response to sexual abuse cases and ensure transparency in how cases are handled. Establish mechanisms for oversight, monitoring, and evaluation to track progress and identify areas for improvement.

The voices of Victim-Survivors should be front and centre in Child Sexual Abuse Reform.

The survey of SASS clients asked whether, and how Victim-Survivors would like to be involved in Reform going forward. Respondents said that they strongly believe that Victim-Survivors' voices should be heard directly, and unfiltered. Some Victim-Survivors support surveys, and others groups or committees.



As someone currently going through this myself, I am really keen to provide my insight into the system.

Offer vouchers in exchange for their feedback and time. I would be wary of doing online meetings with sexual assault survivors outside of SASS clients as a group because of retraumatisation, and also because I would worry about safety, confidentiality and privacy talking about such intimate topics. A working group of SASS Clients with sexual assault/abuse lived experience would definitely be where I would start and is what a few agencies I'm connected with have started doing as of last year.

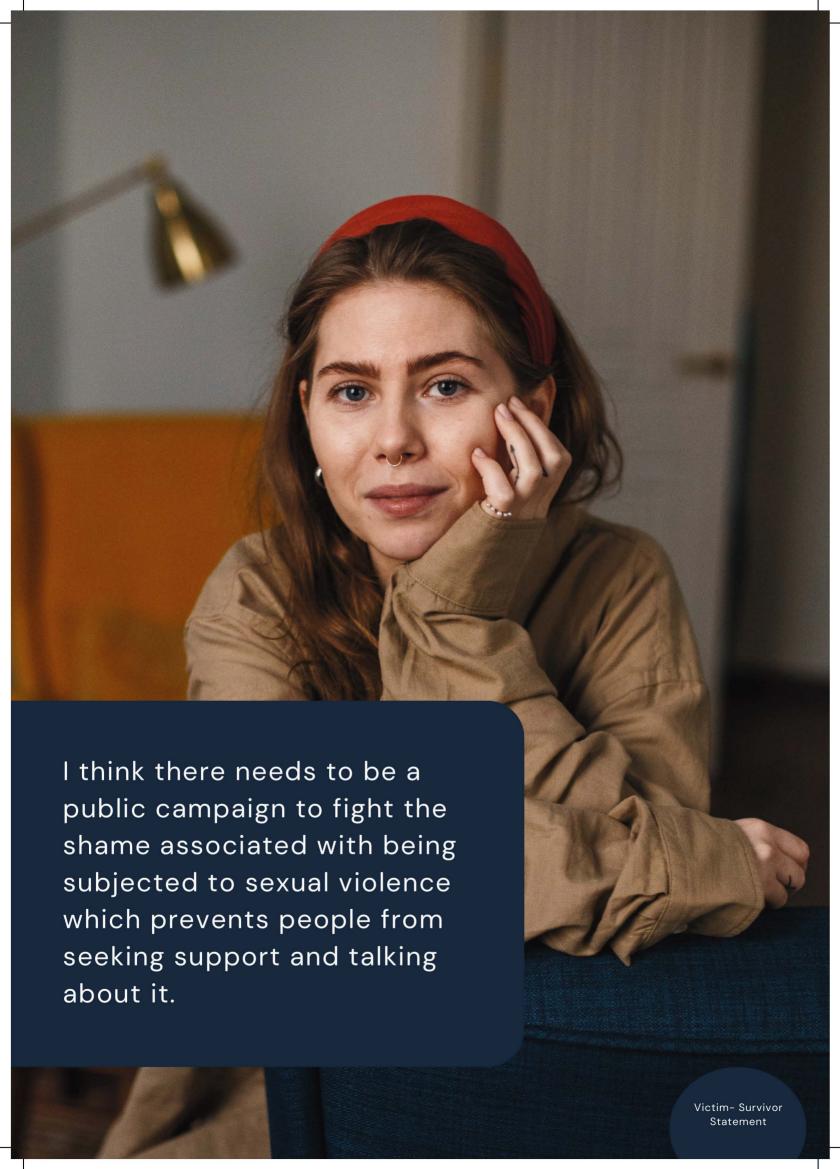
I think that it would be good to ask volunteers to come forward for a round table discussion in the first instance. This could identify broader themes and issues. I think it would be important to give the option to keep people's names or identities anonymous from one another so that people could share without the fear of being recognised. I also think it would be important to avoid the typical 'working group' or community consultation group that Government departments normally use. It would be counter-productive and harmful to have bureaucrats leading a conversation such as this. It would need to be a space where people could share their raw, unfiltered thoughts without the feeling of judgement or of being censored or silenced.

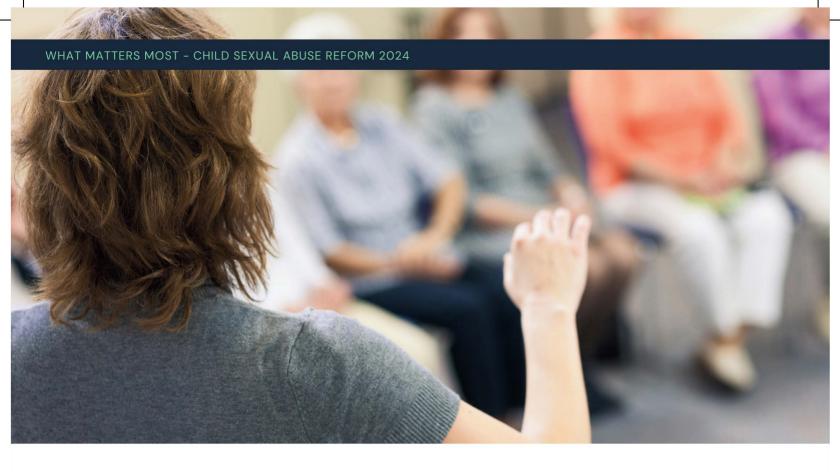
Having honest conversations is a start. I think in order to initiate real change, some people will have to hear some things that aren't very pleasant, things they may not like to hear. Overcoming that is the first step I think, because things do need to change. This anonymous form feels like a safe way to express my thoughts and feelings as well.

Keep the door open through conversation, people passing on their knowledge and experience through SASS. I know I'm making people aware of the help we can get, in saying that it's unfortunate so many people do not know of this service until something happens.

Adopt a trauma-informed approach in all engagement activities, recognizing the impact of trauma on individuals with lived experience and ensuring that interactions are sensitive, supportive, and empowering.

But support and participation must go hand in hand: I feel that I could talk to a group of people about my life experiences. But without the help I receive now, I wouldn't be here today.





Community Groups

While the key themes identified by Victim-Survivors also emerged in conversations with Community Groups, we found overlaps, differences of emphasis, and one additional concern.

Children need a place to go, outside their family, to tell a safe adult that they are being sexually abused.

Community Groups agreed that there need to be easier ways for children to disclose. However, they said that there is not enough funding to support Teaching Assistants in schools to support children, especially children that are vulnerable and need a trustworthy and consistent person. Some schools have over 500 children. One group said that teachers need specialised training to support children who are being subjected to sexual abuse.

Community Groups also talked about young people not speaking out or seeking support because they are worried about threats from their peers, or being outcast by their peers: youth have a fear of social fall-out if they speak up or call it out.



Across age groups, and across Tasmanian communities, we need a step change in awareness, knowledge and beliefs.

This theme was strongly supported by Community Groups, who consider that Tasmania needs a *cultural shift in systems, workplaces, and communities*. Community education should promote empathetic and validating responses to Victim–Survivors, and accountability for perpetrators.

Community Groups said that myths around sexual violence persist:

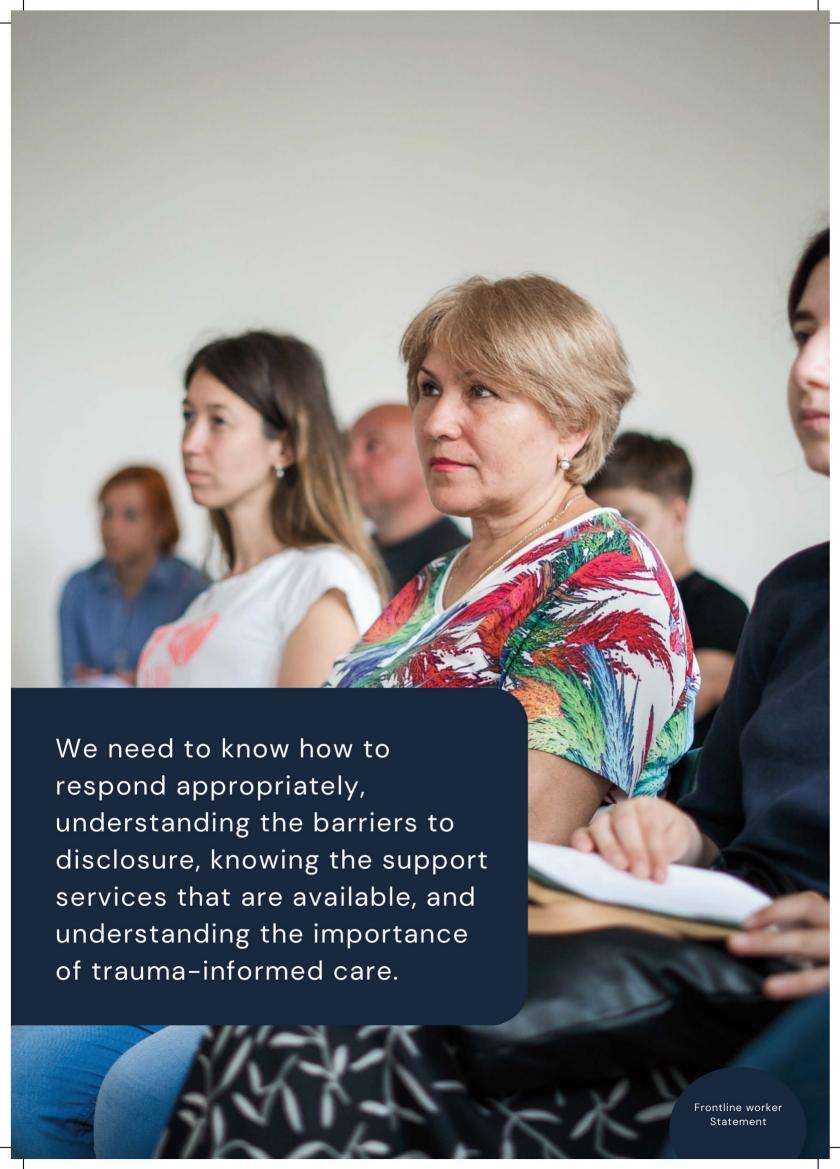
- · male needs must be met
- women are hyper-sexualised and men are aggressors or macho
- sexual violence cannot happen within relationships, or must be accepted to keep the relationship
- children who are subjected to child sexual abuse will automatically grow up to be predators
- it is only Stranger Danger that we need to worry about
- child sexual abuse only happens in certain families or communities.

One group commented: we need more education around the less conspicuous types of perpetrators: it's not just the scruffy bogan down the road who's got no money, perpetrators can also be well respected and powerful people in the community.

They also identified a need to raise awareness and educate around HSB treatment and prevention of HSB, for parents, teachers and the wider community. Young people who have use HSB need reassurance that they will not automatically become perpetrators.

Community Groups said that they are working with clients who do not recognise sexual harm as sexual harm, especially for clients subjected to sexual abuse as children. They are also working with intergenerational child sexual abuse: We have clients attending our service who were children when they first attended and are now coming with their own children. For some parent Victim-Survivors, sexual abuse has been normalised in their lives: I was raped when I was 14 years old, you will be fine, get over it and toughen up, and the cycle is perpetuated.

Community Groups strongly emphasised parent needs. They are working with parents who themselves need education on how to teach their own children about consent and what is proper language. Some families are not aware of what consent and child sexual abuse are. Groups see a gap in parenting skills and values across generations, and lack of awareness of current information and resources to support discussions



around consent, disclosure and body autonomy. This is a particular issue for families with low health literacy, but talking about sex and sexual violence is a *taboo discussion* for many families, perhaps particularly those with *strong beliefs in religion*, *Catholic families*, where religious and cultural beliefs may have limited education around sex and sexual violence.

Groups also commented on the continuation of traditional parenting models or authoritarian parenting, where children's voices are not being heard or validated, and children are not believed. Finally, groups talked about parents not wanting to disclose information because they are afraid the children will be removed by Child Safety. These foundational issues need to be overcome before parent education can focus, as it needs to, on building a warning system to empower people to understand grooming, predatory behaviour and abusive behaviour.

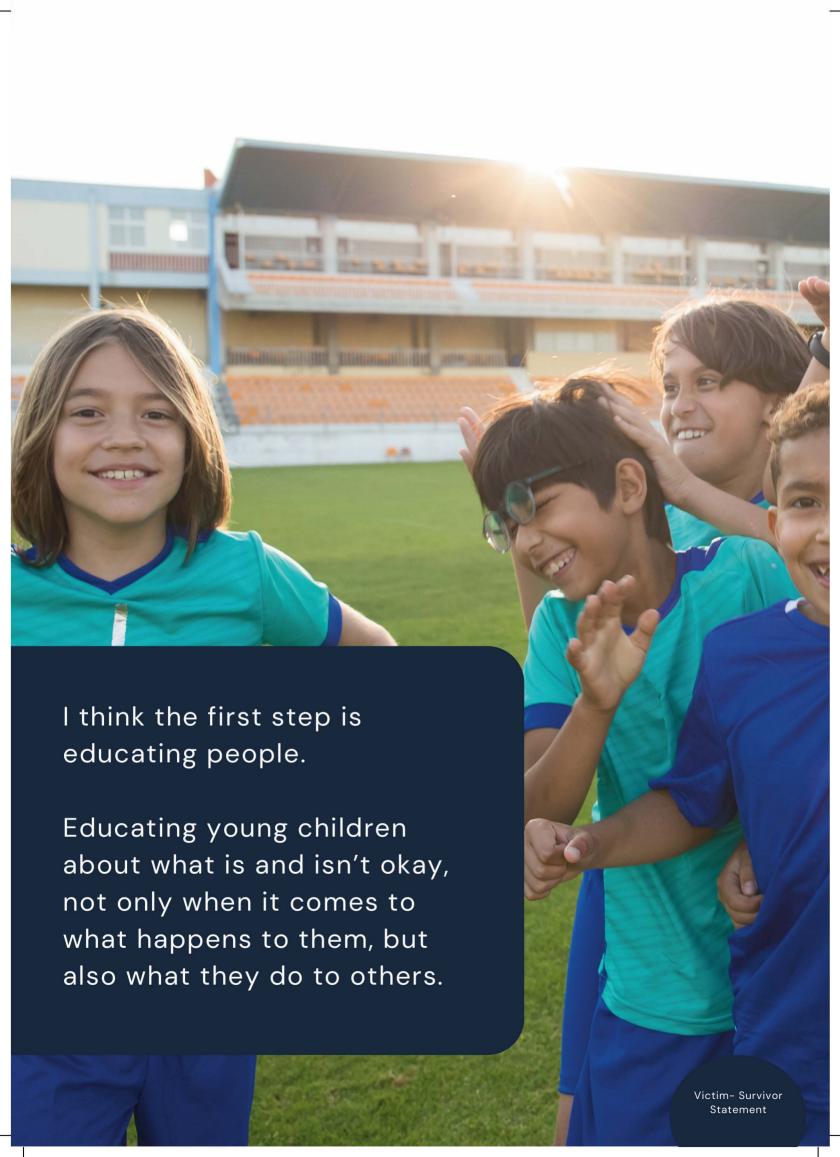
Finally, Community Groups also provided advice about the specific needs of migrant communities, People With Disabilities (PWD), and people living in poverty:

- more training is needed in the disability sector where many cases go unreported.
 Stigma still exists that PWD are not sexually active, and there are specific issues for people who are non-verbal around consent and disclosure, what is acceptable behaviour and what is not acceptable behaviour.
- one group identified the need for more workshops for diverse communities, and better language diversity in training and education sessions. Social media is a way to connect with migrant audiences, but there is a need for better language diversity in online resources around sexual harm.
- there needs to be a focus on poverty and homelessness: I am working with a 14-year-old who is living on the streets and having to rely on sex work to survive.

Consent education needs to be mandatory, direct and explicit, designed with the understanding that there will be children, young people and adults in the classroom who are being or have been subjected to abuse. Messages need to be crystal clear.

Community Groups strongly support consent education. One group recommends it should be mandatory for University students, and for all young people detained in Correctional Facilities. Another group recommends designated, trained staff going into schools instead of school staff.

However, Community Groups are concerned about the balance or responsibility between families and schools. Groups argued that:



- children copy behaviour they see in adults; we need to address adult education too; and
- schools have many roles, and there is a lot of pressure placed on teachers; the message should be driven by parents; schools are a good contact point but it shouldn't be solely a teacher's responsibility.

One group recommends a program of *foundational basics* for the Tasmanian community.

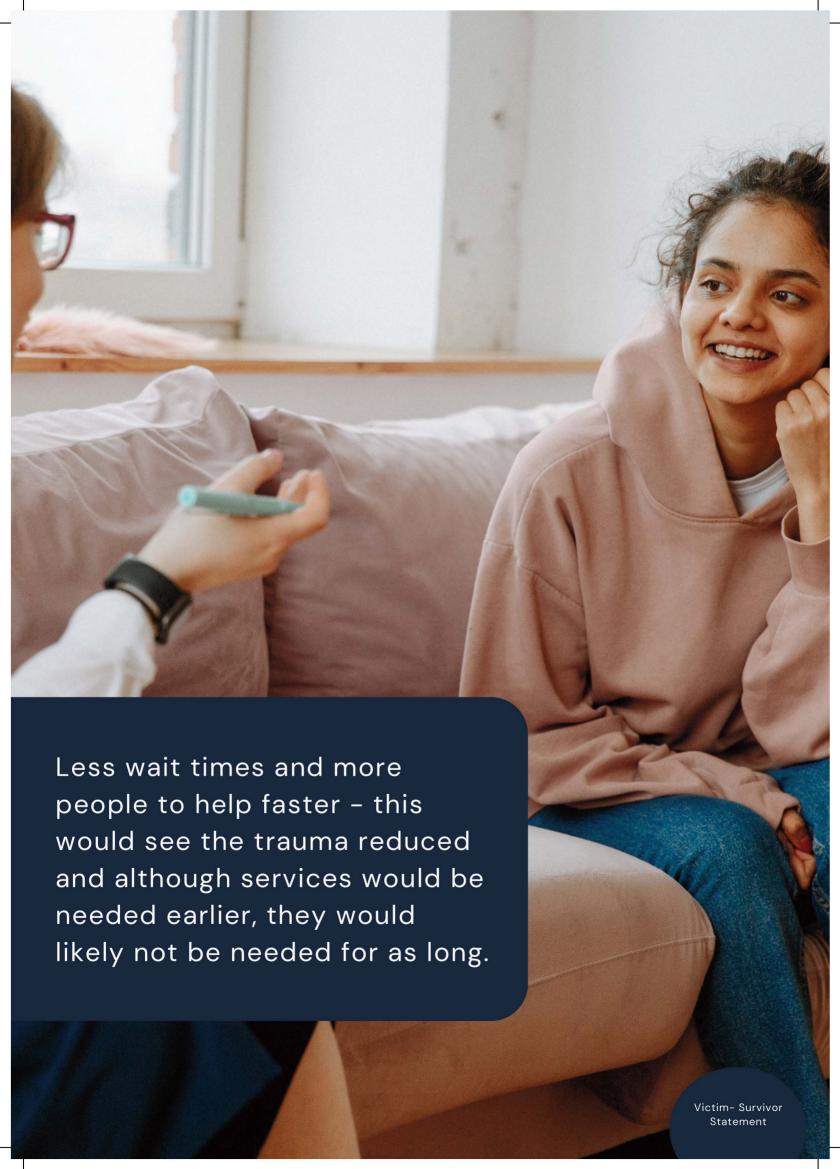
Recognition of the profound impact of sexual abuse should lead to adequate funding for long-term, specialist support for Victim-Survivors and for prevention initiatives.

Community Groups echoed Victim-Survivors recommendation for increased funding for counselling and for prevention.

Several groups commented on the current waiting times to access specialist counselling from SASS and Laurel House, and the negative impact this has on children's development and the family as a whole. Groups also commented on limited access to social work and psychology services in schools, and about *school counsellors working limited days due to funding*. Community Groups argue that every child who needs counselling should have access to it.

Groups also commented on how valuable it would be for some services – for example, women's and young people's shelters – to have counselling available on site. For all services working with children and young people, there should be funding for training around sexual safety and disclosure support. This would allow staff to notice and confidently address issues earlier, preventing ongoing harm.

All young people in detention should have access to sexual assault counselling.



6

Mainstream services need to be trauma-informed and child-sexual-abuse aware.

Community Groups commented on the need for child safe principles to be embedded in all services working with children, and offered specific comments for three groups:

- Child Safety staff need more training and greater understanding of child sexual abuse. Alongside this, their reputation is that they evade their processes and abuse their position of power.
- Counsellors, Chaplains and school social workers need training in trauma-informed practice.
- For the CALD community, lack of access to translators outside the community can act as a barrier to seeking help.

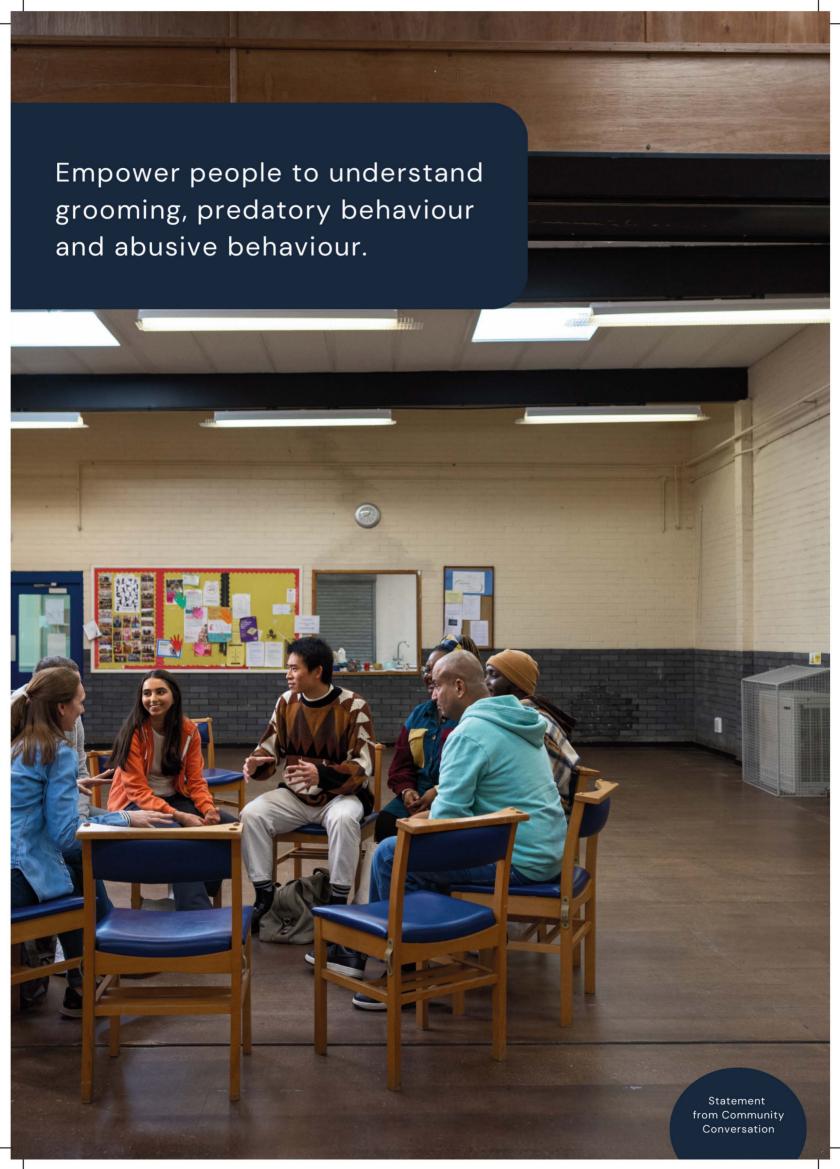
One group argues that systemic issues like institutionalised sexism and victimblaming attitudes can undermine trust in seeking support.

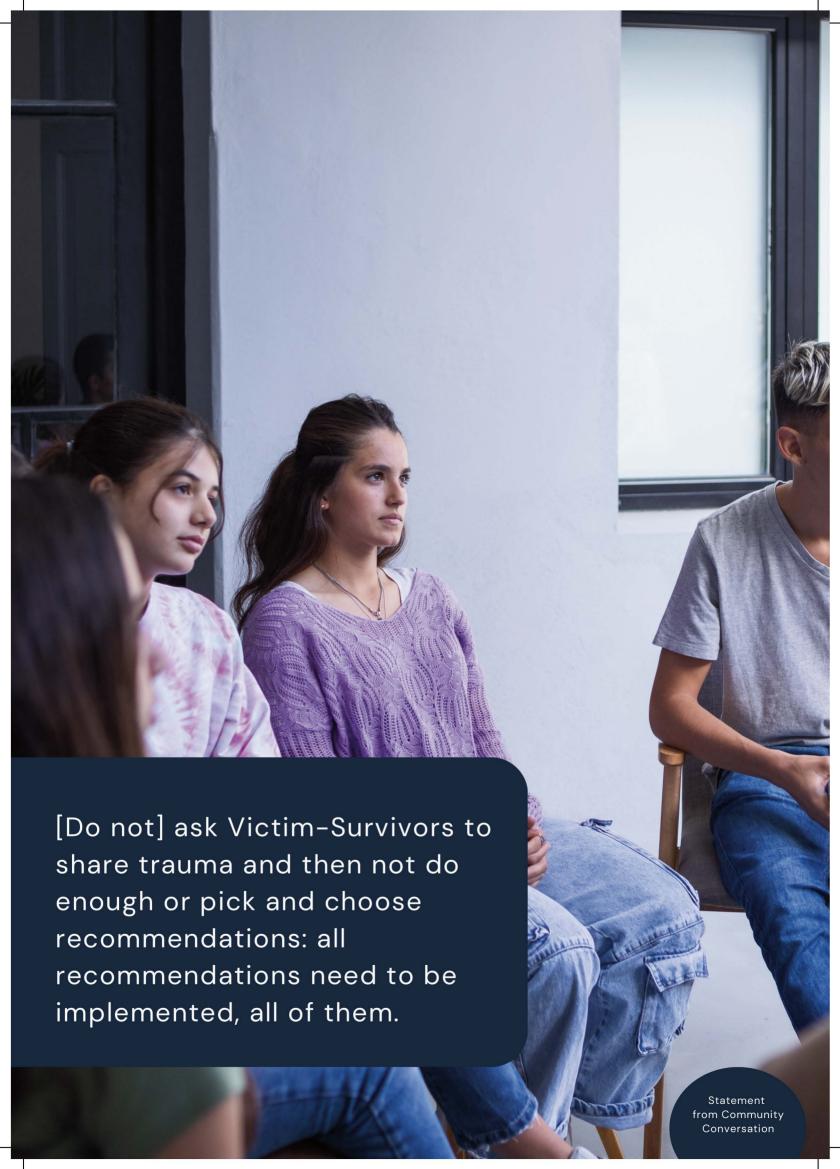
Criminal justice system failing Victim-Survivors.

Community Groups expressed particular concerns around the Police response to sexual violence. The practitioner working with the 14-year-old forced into sex work said that she is treated with disgust by the Police, and others commented on lack of empathy from Police when there is a disclosure.

Several groups argued that there is an urgent need for trauma training in Tasmania Police, commenting that poor past experiences create ongoing lack of trust into the future, with sexual crimes not being reported, Groups commented on clients telling them that they have made disclosures which are dismissed without explanation, and that they called police who did not accept that they were in danger: *There seems to be a broken sense of trust and safety with our clients; they need to be heard and trusted.* There appear to be particularly problematic Police attitudes to migrant communities, substance users and the homeless.

Community Groups also commented that Court is not a safe place for Victim–Survivors, who are frequently retraumatised. Lack of explanation of legal process and long waiting times are particularly difficult. One participant said: It is not uncommon for clients to say I don't know if it was worth it after going through the court process.





7

Tasmania has fallen behind in its response to child sexual abuse, and confidence in Government is low.

Community Groups share Victim-Survivors concerns about whether Government will respond comprehensively to the Recommendations of the Royal Commission and the Commission of Inquiry. Government must not ask Victim-Survivors to share trauma and then not do enough or pick and choose recommendations: all recommendations need to be implemented, all of them.

As noted above, Community Groups echoed Sarah's view that Tasmania faces the challenge of intergenerational child sexual abuse. Breaking the cycle of intergenerational abuse means a fundamental reframing of the idea of that's how it is and we have to live with it and it happened to Mum so of course it's going to happen to me, recognising unhealed trauma in families and people operating out of their trauma. This challenge is exacerbated by the unique issue which face small communities, where there can be increased lack of privacy and rumour after disclosure, and real concerns about the response of the community and peer pressure. Community Groups talked of clients who are worried about what their friends and neighbours will think, whether they will be believed, and about everyone knowing and judging them. For some clients, these fears mean that they do not disclose, and do not get support.

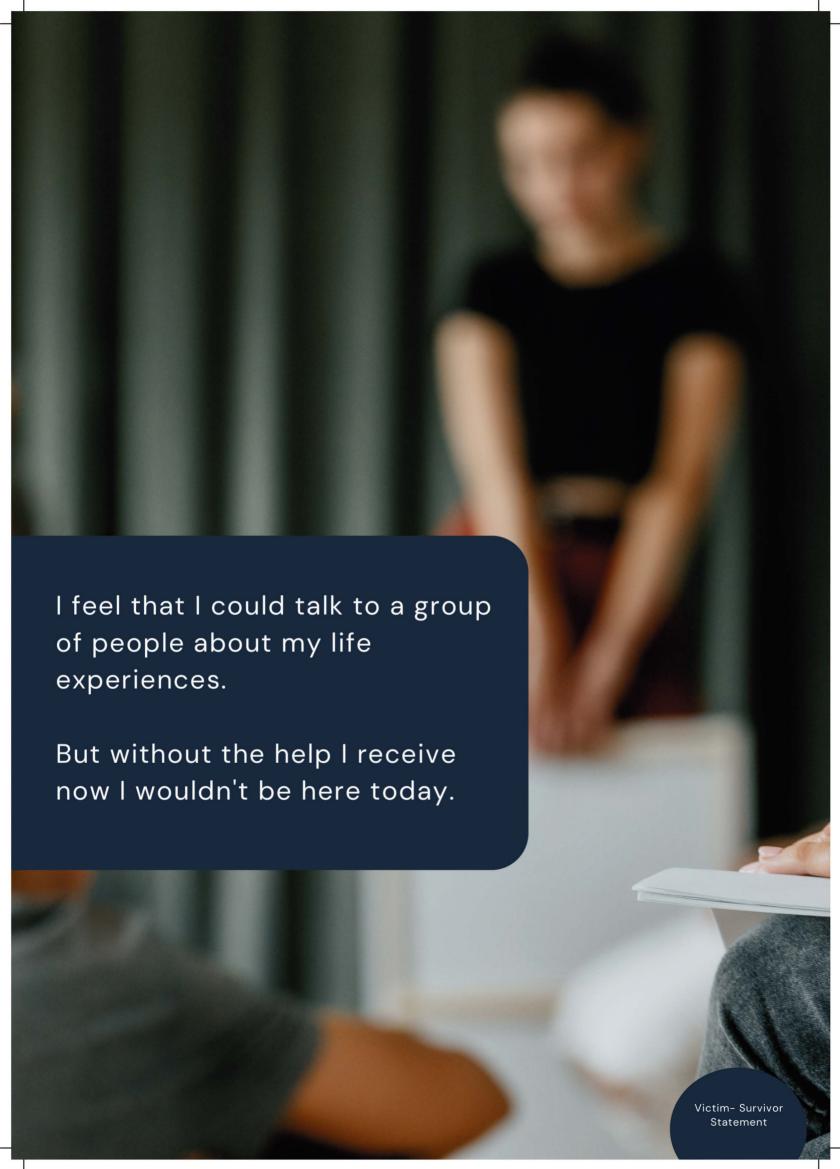
Community Groups made three direct comments about the Tasmanian Government. For some groups, it becomes risky to speak out when the operation of your service is reliant on funding. One group commented that information sharing between and within Government Departments is not done well, to the extent that it functions almost as gate-keeping information that may help communities. Thirdly, one group said that there is a perception that the people working in the COI response team don't believe complainants/Victim-Survivors and that this is filtering down to the community.

8

The voices of Victim-Survivors should be front and centre in Child Sexual Abuse Reform.

Community Groups strongly support the centrality of the Victim-Survivor voice.

One additional theme emerged from Community Group conversations. Groups talked about the impact of social media and pornography, particularly on young people, and the need for education on e-safety.



They argue that pornography and social media influencers such as Andrew Tate are exercising significant influence through unmonitored internet access, and for some children, this is how they learn about sex.

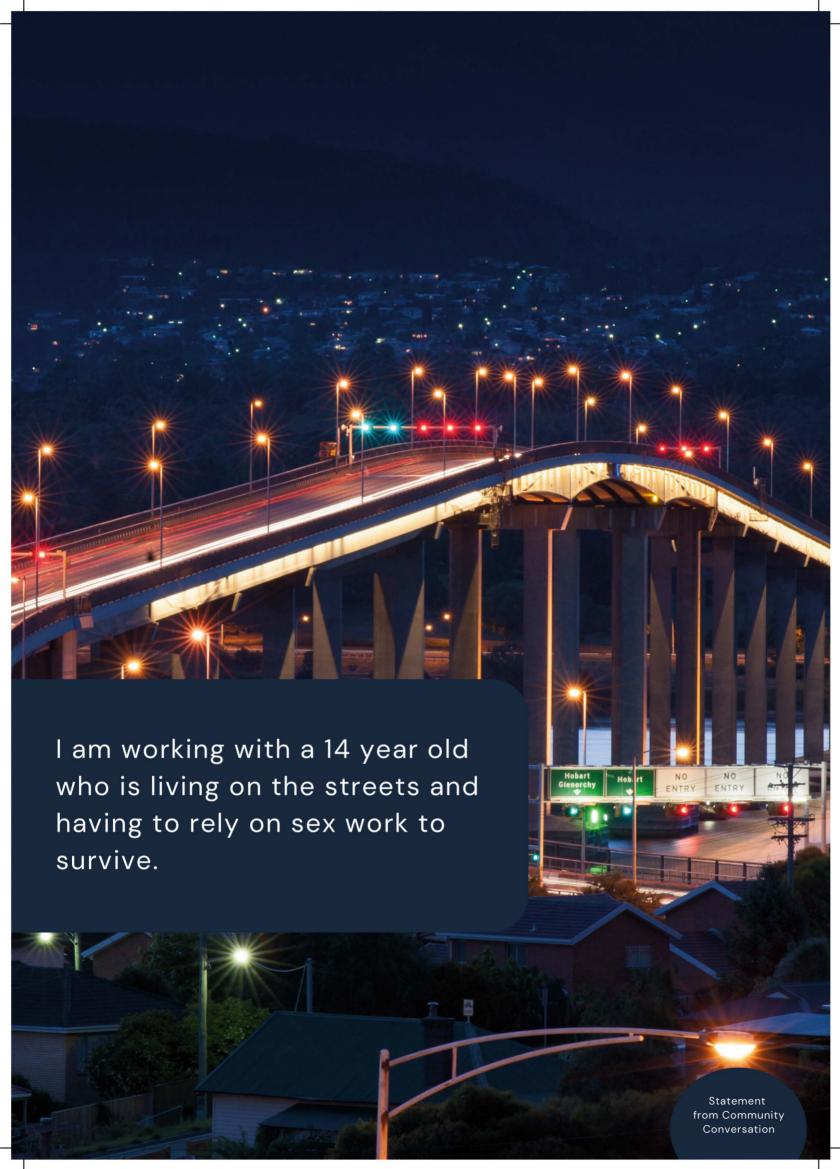
Further, some parents that are not confident in discussing sex rely on social media to educate their children.

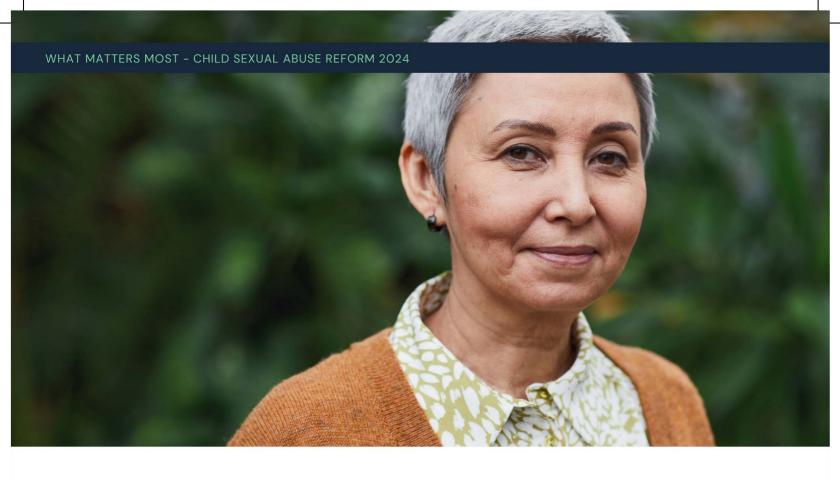
One group said that grooming is present on children's PlayStation, on video games, on TikTok, on any form of social media and pornography can have a soul-destroying impact on young women. Groups are concerned that boys are bringing Tate's values into the classroom.

One member of the community contacted SASS to share his views on child sexual abuse reform. Carl said: I saw the advert of a poster pole in town...I felt compelled to get in touch. My first ever girlfriend was raped by a mutual friend. I don't think she's ever told anyone but me. That made it really important to me to treat women right, I saw how much it can destroy people's lives, and impact on those around them.

An avid podcast listener, Carl wants to add thinking about the potential for an early, preventative approach to child sexual abuse reform in Tasmania, based on an approach being trialled in Germany. The Charite Hospital Institute for Sexual Medicine in Berlin began running the prevention project Dunkelfeld (dark field) in 2011. The program is now available in 10 other cities, and is colloquially known as the 'don't offend' program, offering mental health and behaviour modification support. [8] Carl is very clear: I am not defending paedophilia at all, but if men can own their shit and come forward, it should be promoted. Paedophilia ideation can get men deeper and deeper into the dark web. In prison they are put in touch with other paedophiles. It's not going to work if we wait for them to offend. This could be one of the ways we put an end to sexual violence. We need to look outwards and see what is happening around the world.

^{[8] &}lt;u>How Germany treats paedophiles before they offend | Mental health | The Guardian</u>. Please note, SASS is not advocating any particular program.





Therapeutic Specialists and Frontline Workers

We consulted 12 sexual assault Therapeutic Specialists and Frontline Workers who support people impacted by sexual abuse via an anonymous online survey, asking them what we need to **Know**, what we need to **Believe**, and what we need to be able to **Do** to prevent child sexual abuse and respond well when it has already happened.

What do we need to Know?

- that we are wired for survival and therefore our automatic reactions serve to keep us safe. Behaviour never exists out of context but sometimes we aren't going to know that context
- those who have something to gain from the way things have been (e.g. perpetrators), or something to lose from change will be the biggest opposition to change, but also the greatest reason to keep pushing for it
- consent is a must, and can be withdrawn at any time
- that perpetrators of child sexual abuse don't fit a stereotype
- how to respond appropriately, understanding the barriers to disclosure, knowing the support services that are available, and understanding the importance of trauma-informed care
- that societal attitudes and victim-blaming myths perpetuate harm
- what it looks like, the warning signs, how trauma may present in ways that are frustrating for those around the victim
- that everyone's experience is personal and their own; there isn't a scripted set of responses to sexual abuse, some people report immediately some don't, some are affected immediately, in some there are delayed symptoms and impacts

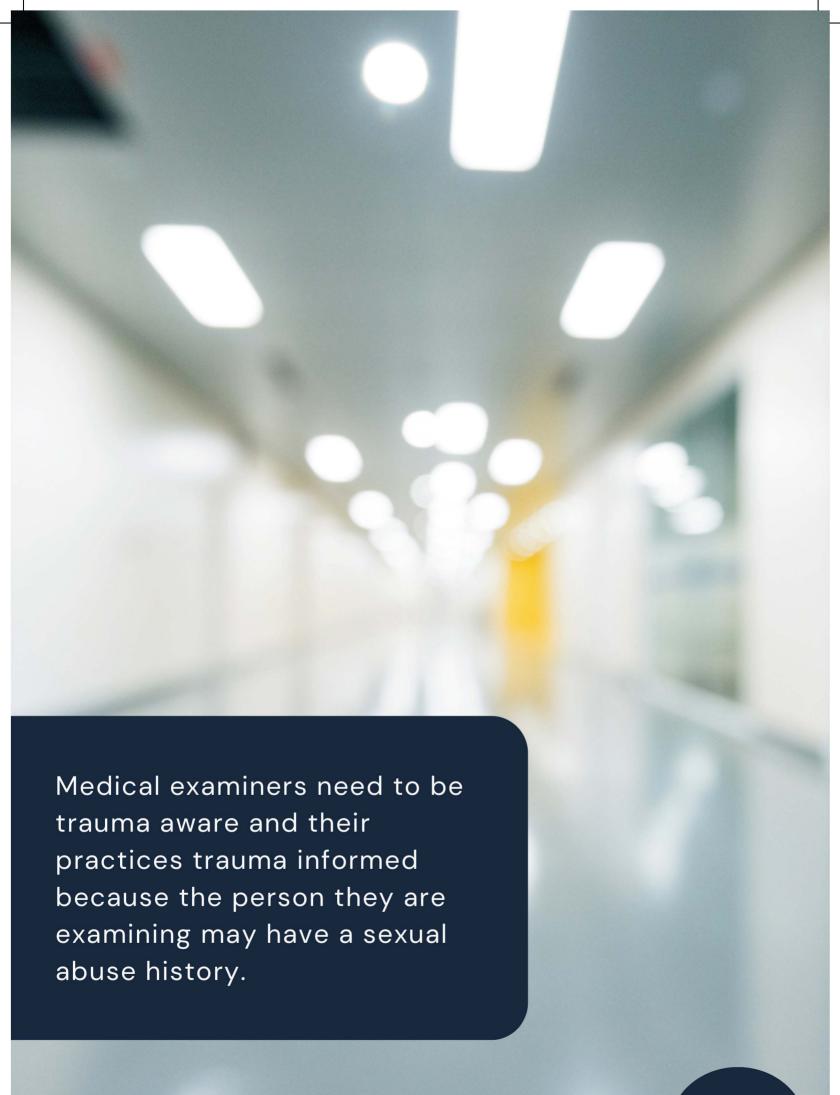
- Victim-Survivors can get support
- the importance of trauma informed training for any organisation that works with vulnerable members of the community
- that child sexual abuse is not 'just' penetration

What do we need to Believe?

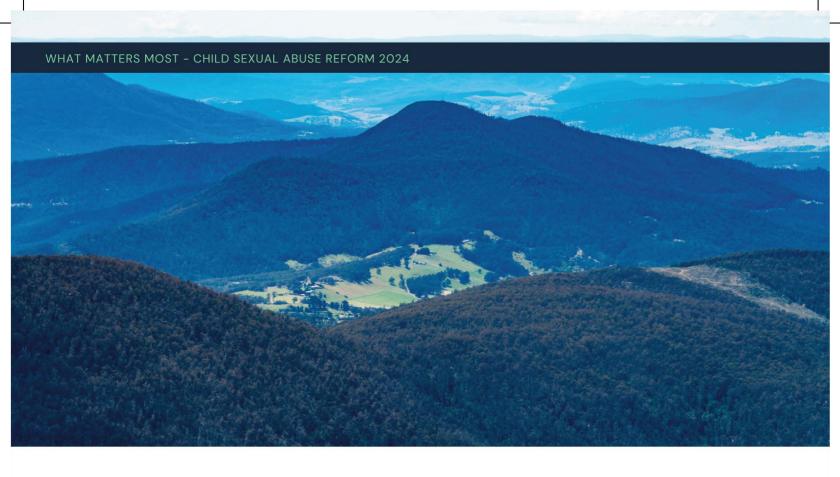
- that child sexual abuse happens, no matter how hard it is to acknowledge
- ...their story without questioning. One of the most traumatic things for victim survivors is not being believed, or worse being questioned about their story.
- ...people when they disclose. Believe that how we respond to people can have a big impact on their recovery and progression from victim to survivor.
- ...believe and investigate allegations of abuse from victims, don't shy away from the discomfort
- ...that it is not the victim survivor's fault
- ...that every child has the right to be a child, to be free from harm and danger
- ...that every survivor deserves compassion, respect, and dignity
- ...that the survivor is the expert in their experience
- ...that how we respond to disclosures reflects broader attitudes towards Victim-Survivors

What do we need to be able to Do?

- listen, hear and support without judgement
- ...all we can to prevent this occurring in the future
- have ongoing supports and services that respond in a trauma-informed framework
- include Victim-Survivor voices in future policy and service system/program development
- commit to challenging damaging myths to create a more supportive environment for Victim-Survivors
- recognise and be alert to signs of possible abuse
- provide immediate support and validation
- support survivors to recover and heal
- foster a culture of empathy, understanding, and solidarity within the community to create a safer and more supportive environment for Victim-Survivors to come forward and seek help
- provide long-term support and pathways, rather than a reactive response
- call out poor behaviour, taking small steps to make a difference



Victim- Survivor Statement



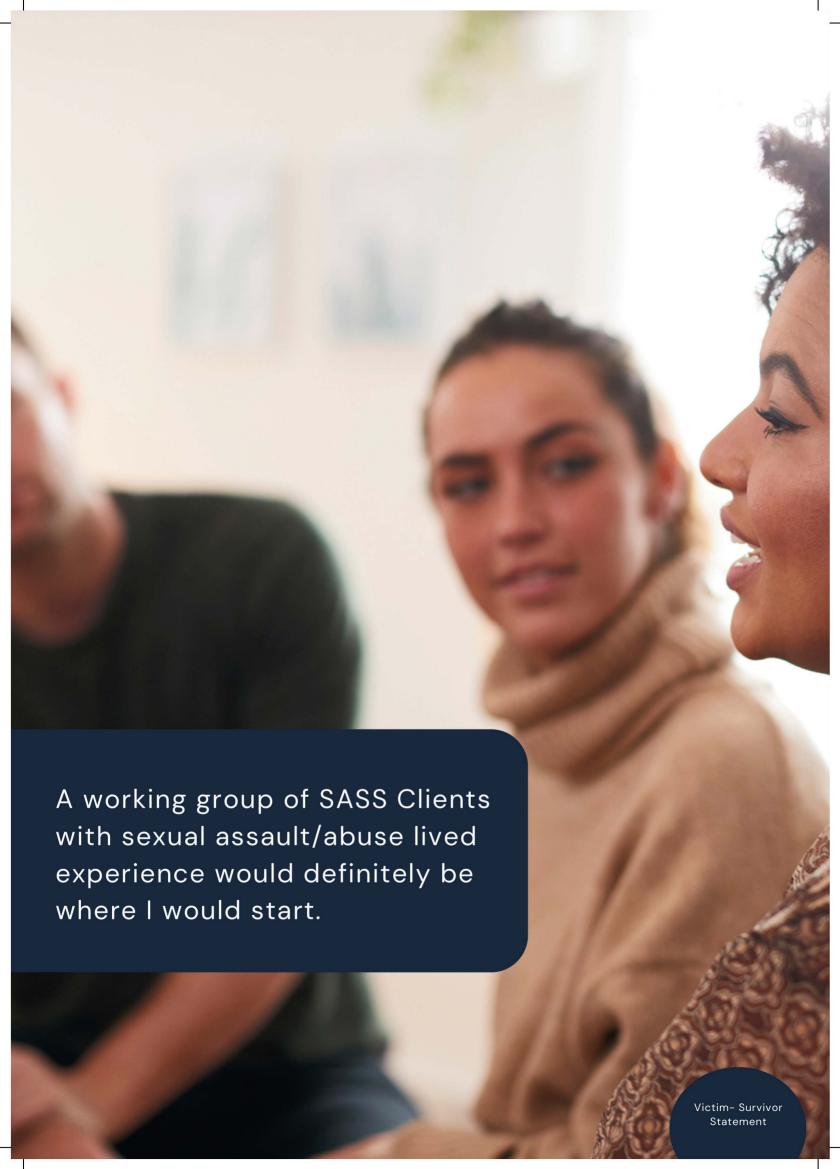
Discussion

As we reflected on what Victim-Survivors, Community Groups and Therapeutic Specialists told SASS, we noted key concepts which are critical to the way forward. Some of these were identified in a previous piece of work for DPAC [9]:

- Victim-Survivors who responded to the survey, and Victim-Survivors who participated in interviews share a commitment to using their experience to support constructive change. This is what Judith Herman called the **Survivor Mission**. [10]
- Victim-Survivors and Therapeutic Specialists emphasised the unique knowledge about child sexual abuse which comes from experience, and the importance of Victim-Survivor voice in child sexual abuse reform. The concept of Expertise By Experience is well recognised in the literature, as is Co-Design with Victim-Survivors.
- The concept of **Behaviours that Challenge** is also relevant. Therapeutic Specialists talked about trauma responses as sometimes challenging for those around the Victim-Survivor.
- Victim-Survivors and Community Groups doubt the commitment of the Tasmanian Government to reform. The concept of **Bureaucratic Ritualism** is relevant here.
- Community Groups are particularly concerned about **Grooming**, in person and online.
- Therapeutic Specialists in particular emphasised how critical it is that we believe Victim-Survivors, and how damaging it is when we do not. Judith Herman's perspective on bystander response is again helpful here, and is summarised in the prior report as See No Evil, Hear No Evil.

^[9] MacSween, M. Petridis, T. Melhem, M. Expertise By Experience: what we can learn from Commission of Inquiry Case Studies DPAC Tasmania 2024

^[10] Herman, J.L. Trauma and Recovery: from domestic abuse to political terror 1992



Four additional concepts are relevant to perspectives in this report:

Nothing about us without us

One of the Victim-Survivors we spoke with talked about the work of Safe & Equal Victoria. They argue:

We have to transform universal programs and messages delivered to create change at whole-of-population level - by elevating the voices and leadership of marginalised and oppressed communities. Another widely-used concept that captures this is 'nothing about us without us', which grew out of international campaigns and organised by people with disabilities.

For us, this is not only about a commitment to social justice principles, but is essential in making sure programs actually achieve their aims in ways that are effective and do no harm. [11]

Trauma-Informed Practice

Victim-Survivors, Community Groups and Therapeutic Specialists all talked about the need for trauma-informed practice in the Tasmanian service system. The lack of trauma-informed practice in the police and criminal justice response to child sexual abuse is a deep concern. Dr Cathy Kezelman from the Blue Knot Foundation writes:

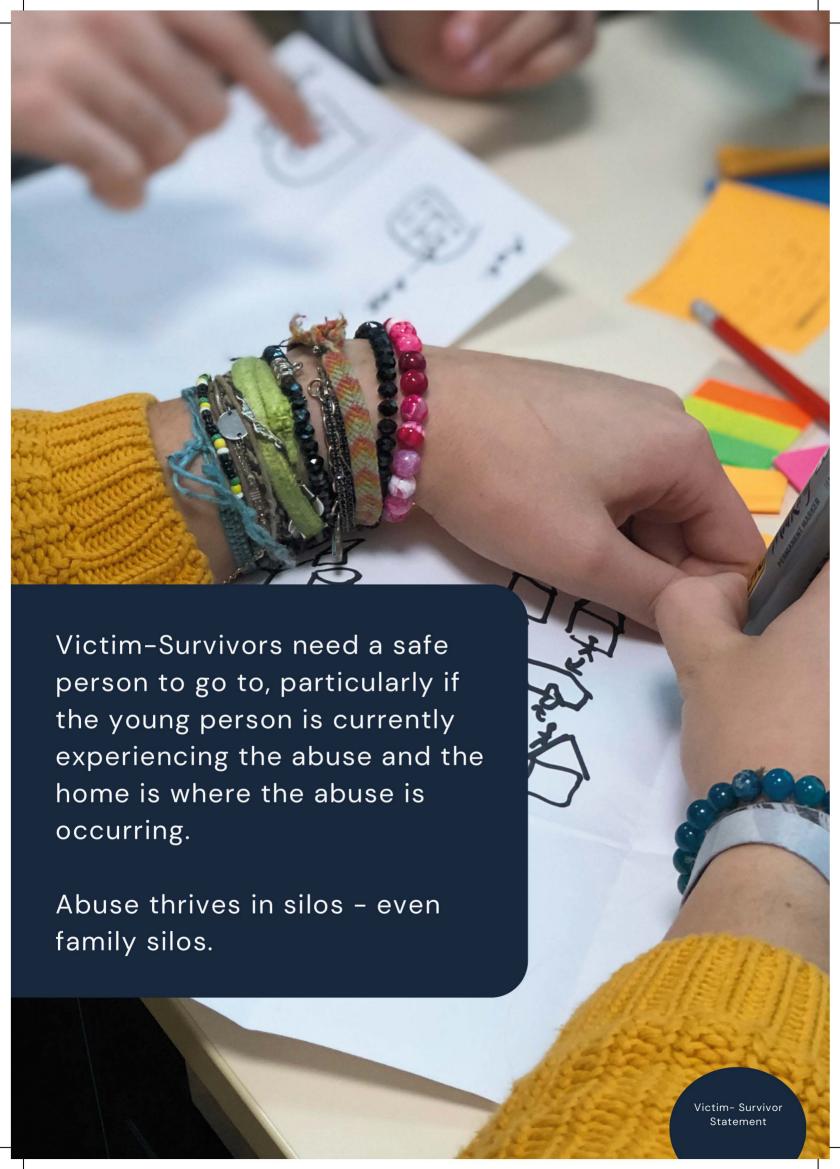
Trauma Informed Practice is a strengths-based framework which is founded on five core principles – safety, trustworthiness, choice, collaboration and empowerment as well as respect for diversity.

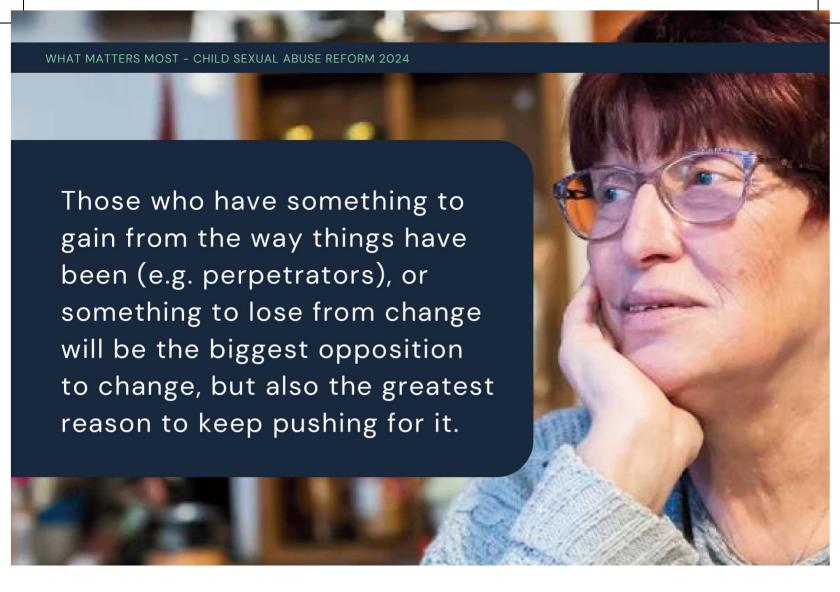
Trauma informed services do no harm i.e. they do not re-traumatise or blame victims for their efforts to manage their traumatic reactions, and they embrace a message of hope and optimism that recovery is possible.

In trauma informed services, trauma survivors are seen as unique individuals who have experienced extremely abnormal situations and have managed as best they could... Becoming trauma informed necessitates a cultural and philosophical shift across every part of a service. [12]

^[11] Intersectionality In Primary Prevention (safeandequal.org.au)

^[12] Trauma informed practice | Mental Health Australia (mhaustralia.org)

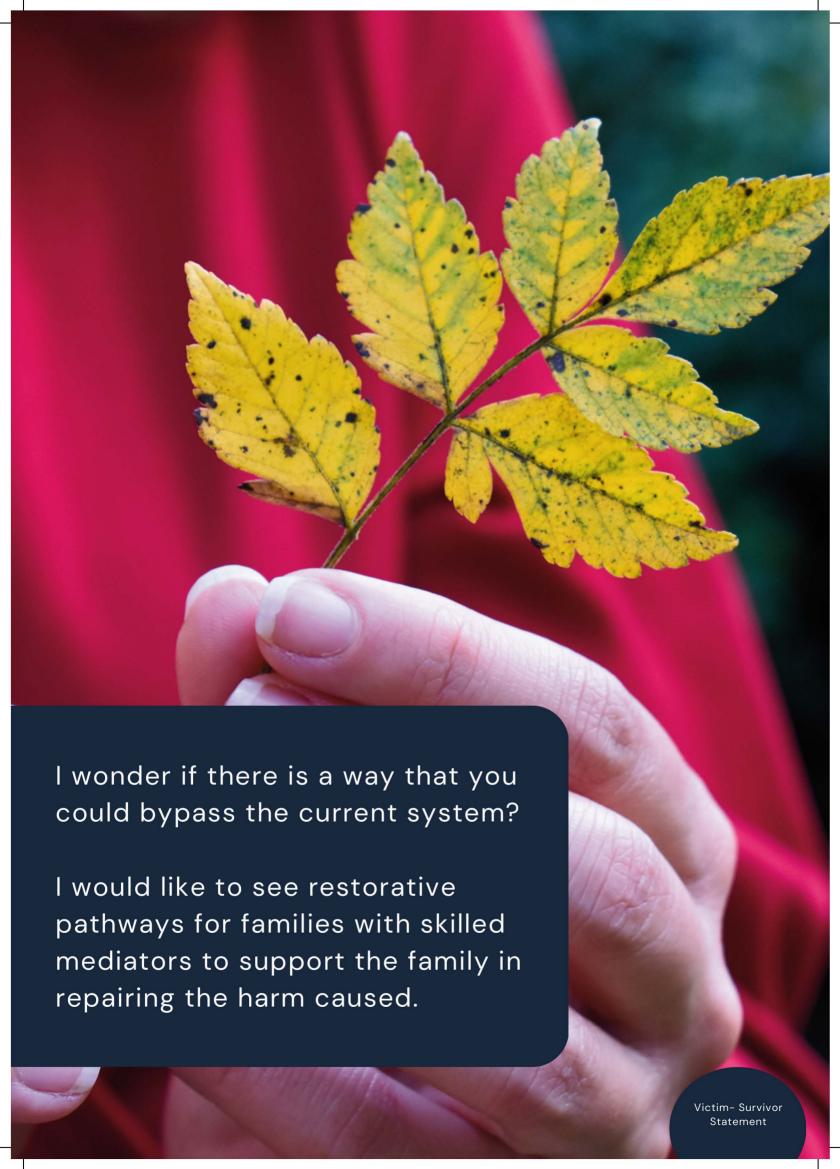




The Socio-Ecological Model of Violence

Victim-Survivors, Community Groups and Therapeutic Specialists all talked about myths and beliefs which support rather than challenge child sexual abuse. Most often applied to violence against women, the socio-ecological model of violence is equally relevant to child sexual abuse. Our Watch argue that work to change individual values and beliefs must be supported by work to address how social norms are embedded in organisations and institutions. [13]

It is in this context that consent education is delivered to young people. If gender in equality is not explicitly recognised and named up, teaching young people to ask for, give and refuse consent risks reinforcing, rather than challenging, the structures, norms and practices that sustain sexual harm.



The socio-ecological model of violence against women

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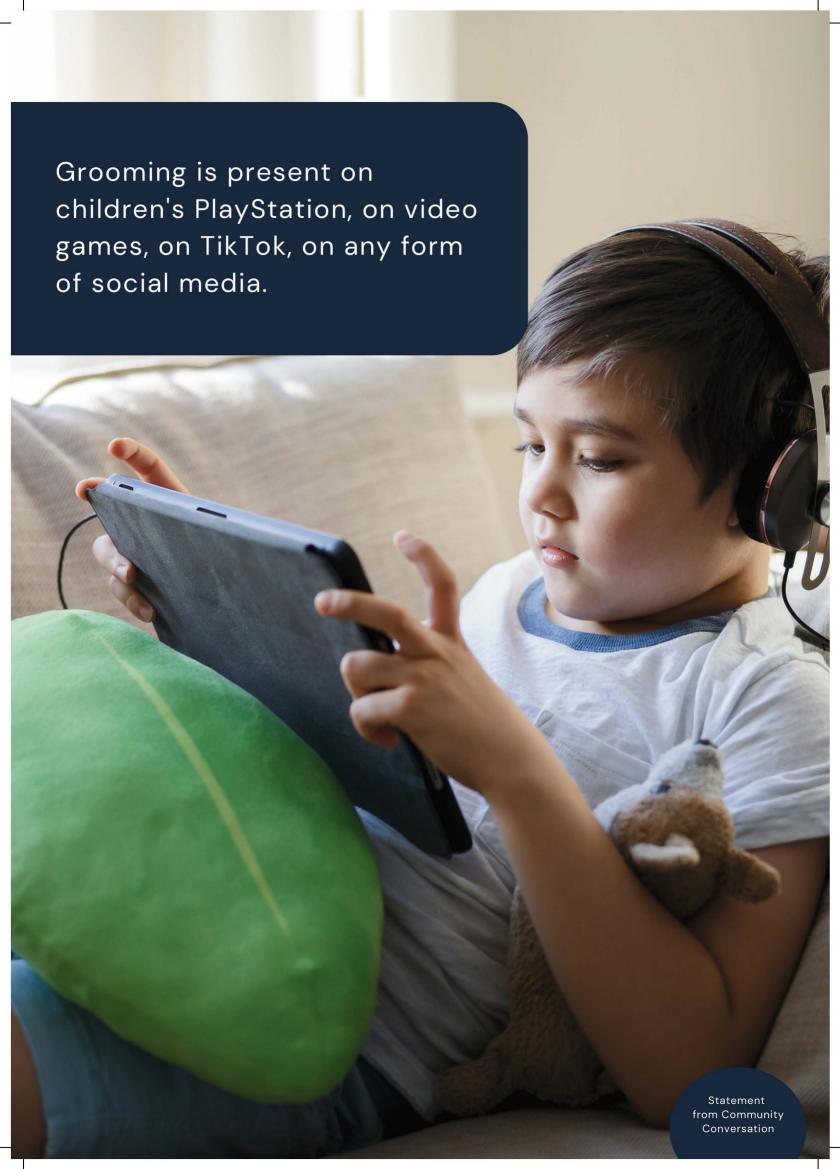
Examples of structures, norms and practices found to increase the probability of violence against women, at different levels of the social ecology. Societal System and institutional Organisational and community Individual and relationship STRUCTURES, NORMS AND PRACTICES

Dominant social norms supporting rigid roles and stereotyping, or condoning, excusing and downplaying violence against women.

Failure of systems, institutions and policies to promote women's economic, legal and societal autonomy, or to adequately address violence against women.

Organisation and community norms, structures and practices supporting or failing to address gender inequality, stereotyping, discrimination and violence.

Individual adherence to rigid gender roles and identities, weak support for gender equality, social learning of violence against women, male dominance and controlling behaviours in relationships.



Shame

Victim-Survivors talked about how difficult it is to speak out about child sexual abuse. Children are worried that they will be judged, that they will not be believed, or that disclosing will lead to the break up of their family. Sarah talked about having to 'confess' that she had been sexually assaulted when she contacted SASS:

If you go to SASS, you're confessing, even if you're not ready to confront it. I am obliged to confess to therapists and counsellors. If I had to choose one word to describe it, it's the weight of the confession.

The centrality of shame within complex trauma is increasingly being discussed in the literature, and addressed in therapy. McElvaney et al note that shame is a significant contributor to psychological distress following child sexual abuse, an inhibitor of child sexual abuse disclosure, and a challenging emotion to overcome in therapy. [15] Brenner notes that social taboo, external stigma, well-founded concern for repercussions including bias in the legal system, reactions in one's family and social circles, and fears of victim-blaming join with internal, or "self-stigma", to shift decision-making toward secrecy.

The literature is of course clear that while shame is a feature of the emotional experience of Victim-Survivors, it is entirely undeserved; child sexual abuse is wholly and entirely the responsibility of the perpetrator, not the victim. But what we do need to do is destigmatise disclosure and reduce stigma and the sense of shame and blame that children too often carry. Part of that is believing the disclosure, part of that is understanding grooming, and part of it is changing disclosure from an experience that too frequently compounds trauma to an experience of safety, belief, dignity and support.

