

Experts By Experience: What we can learn from Commission of Inquiry Case Studies

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Executive Summary

Background

The Commission of Inquiry into the Tasmanian Government's Responses to Child Sexual Abuse in Institutional Settings (the Commission of Inquiry) recommended that Government develop a Child Sexual Abuse Reform Strategy and Action Plan (the Strategy), and that the Strategy should be *informed by the voices of children and young people and adult victim survivors of child sexual abuse*.

A key part of delivering on that commitment is ensuring that a sharp focus on what children, young people and adults have already told us about child sexual abuse in Tasmania is not consigned to the past, but rather that it guides and shapes the development of the Strategy. To that end, the Department of Premier and Cabinet (DPAC) requested independent analysis of all Case Studies in the Final Report of the Commission of Inquiry (the Report).

The purpose of our work is to crystallise what we can learn from the experience of the Victim-Survivors of institutional child sexual abuse who courageously shared their experience, insights and expertise with us via the Commission of Inquiry.¹

Our Approach

We looked at the meaning that Victim-Survivors made of their experience. We also looked at the key factors which shaped that experience, some of which would not have been known to Victim-Survivors until the publication of the Report.

We drew learning from both of these sources, and this paper sets out the **9 key themes** which emerged from our analysis. For each theme, we note the number of Case Studies in which the theme clearly emerged, and identify key concepts which assist our understanding both of the Victim-Survivor experience, and of responses to it. We ask readers to bear in mind the fact that a theme was not captured in a case study should not be taken to mean that it did not exist in the Victim-Survivor's experience.

We also share our **observations** as subject matter experts.

¹ Further information on the analysis, including our methodology, is at Attachment I.

Our Conclusions

We identified 9 key themes:

1. The insight and expertise of Victim-Survivors adds significant value to our understanding of the impact and dynamics of child sexual abuse.
2. Victim-Survivors resist abuse and seek safety.
3. There was a continuum of responses to disclosures, ranging from ill-informed and incompetent to violently abusive.
4. Responses to disclosure compounded trauma.
5. Disclosure did not protect children.
6. Victim-Survivors demonstrated greater commitment to protecting children from abuse than responding agencies.
7. On occasion, Victim-Survivors experienced a better response.
8. Responding agencies at times identified with the abuser.
9. Within the closed institution of Ashley Youth Detention Centre, abuse was organised, collective and collaborative.

We argue that the 23 key concepts set out in Table 1 below are key to understanding both Victim-Survivors' experience, and the institutional response to their experience. Some of these were noted in the Report. ²

Table 1 Key Concepts

Experts by Experience	Bureaucratic Ritualism	Confirmation Bias	Closed Institutions
Co-design with Victim-Survivors	Continuous Traumatic Stress	See No Evil, Hear No Evil, Speak No Evil	Sites of Conscience
Resistance	Moral Injury	In-Group Favouritism	Powerful Perpetrators
Behaviours that Challenge	Institutional Betrayal	Motivated Blindness	Situational Crime Prevention
Bystander Effect	Betrayal Trauma	Confirmation Bias	Just Culture
Grooming	Cognitive Dissonance	Organised Abuse	Anti-epistemology

Finally, we make 4 observations:

1. It has been our experience that adult attention commonly gravitates towards other adults, and away from children, even in child-focused work such as child protection casework. In child sexual abuse, this tendency is compounded by the wish to turn away from disowned truths.
2. Child sexual abuse reform in Tasmania, if it is to achieve real outcomes for children, young people and adult Victim-Survivors, will be a complex and challenging endeavour over decades.
3. In our view, focused leadership development is a critical component of reform.
4. The Commission of Inquiry Report should be understood as a 'meta-disclosure' to the Tasmanian community.

² Our focus was on the Case Studies, not the Report as a whole. We identified these key concepts from our analysis, and subsequently noted that some, but not all, of the concepts were also noted by the Commission.

Discussion

In the main, the abuse described in the Case Studies is historical. However, we must face the fact that examples of more recent abuse in the Report echo the same issues and underlying themes. We know that changes in legislation, policy, and procedure are essential. We also know that on their own, they are inadequate to protect the children and young people of today from the ongoing risk of sexual abuse.

As the Australian Institute of Family Studies commented in relation to the Royal Commission:

*Some institutions are finding it challenging to accept the consequences of the Royal Commission. While some are understandably overwhelmed by, but committed to, the task of making significant organisational changes, others have become defensive...Rather than be defensive, the work of the Royal Commission should be considered a gift. The work shines an uncomfortable light on the dark past, and even on the murky present, which can help to provide the motivation to address the contemporary leadership challenge: how to ensure we have acknowledged and learned lessons from the past, and implemented strategies to bring about the necessary safeguarding revolution within organisations. This is not something that can simply be imposed upon organisations - organisations must also be willing to make change from within. We will not be able to maximise the opportunity for sustainable change if the leaders of our organisations do not respond accordingly.*³

Children are being sexually abused in Tasmanian institutions today. Anchoring the Strategy in the insights and expertise of the Victim-Survivors who so courageously shared their experience, insights and expertise with us is a key way of ensuring that we keep the lessons of the past firmly in our minds as we build a better future. We commend DPAC for its commitment to turning towards, rather than away from, *the dark past* and *the murky present* in its vital work of leading us all in the transformation of Tasmania's response to child sexual abuse.

Caveat

While the perspectives of victim-survivors who participated in the Commission of Inquiry are incredibly valuable, they cannot be assumed to be representative of the perspectives of all victim-survivors of child sexual abuse. Victim-survivors who spoke to the Commission are a distinct group, with a number of key differences from victim-survivors more broadly. The Royal Commission into Institutional Responses to Child Sexual Abuse (the Royal Commission) found that on average, it takes victim-survivors 23.9 years to disclose abuse to anyone.⁴ The Independent Inquiry into Child Sexual Abuse in the UK noted in its Final Report that up to two thirds of children are not able to disclose abuse during childhood.⁵ That Inquiry heard from the National Society for the Prevention of Cruelty to Children that a high number of incidents of sexual abuse might go *unreported, undetected, unprosecuted and untreated*.⁶ In line with this, many institutional witnesses told the Inquiry that they had received very few reports of sexual abuse.⁷

A note on names

To protect their privacy, many of the Victim-Survivors whose evidence was contained in the Commission of Inquiry's Report were referred to by pseudonyms. For consistency we have used those same pseudonyms in this Report. Where pseudonyms were not used, we have obtained consent from those Victim-Survivors to refer to them by name.

³ Australian Institute of Family Studies *Risk profiles for institutional child sexual abuse* 2016

⁴ Royal Commission into Institutional Responses to Child Sexual Abuse *Final Report* 2017

⁵ Independent Inquiry into Child Sexual Abuse *Final Report* 2022

⁶ *ibid*

⁷ *ibid*

Theme 1 The insight and expertise of Victim-Survivors adds significant value to our understanding of the impact and dynamics of child sexual abuse

Case Studies show victim-survivors demonstrating deep insight about the impact of sexual abuse, the factors which sustain it, and what needs to change to protect children. We noted this theme in 25 of the 42 Case Studies.

- Norman was subjected to repeat sexual abuse and neglect by staff in Ashley Juvenile Detention Centre (AYDC). His mother told the Commission that Norman did not share his experience with her *because he knows how much it will affect her and he doesn't want her to worry about it forever.*
- Azra was subjected to sexual abuse in Out of Home Care (OOHC); from this, she has developed insight and expertise about what needs to change to protect children. Central to this is listening to the voices of adults who grew up in out of home care and developing strategies to help break the intergenerational cycle of out of home care: *We need to stop relying on that one social worker. Each child and family needs that village of support.*
- Rachel was subjected to sexual abuse by a teacher at her school. She shared with the Commission her insight into the drivers of the flawed and damaging response to the abuse: concerns about the reputation of the perpetrator and the Education Department, and concerns about potential defamation action, were prioritised over Rachel's wellbeing.
- Lucas' five-year-old granddaughter was subjected to sexual abuse by a foster carer while she was in respite care. He shared with the Commission his insight that the chronic shortage of carers leaves the OOHC system vulnerable to carers *not doing it for the right reasons.*

Key Concepts Experts by Experience Co-design with Victim-Survivors

Experts by Experience

From the human rights perspective, children are simultaneously vulnerable to abuse and entitled to protection *and* human rights holders with a right to be heard and taken seriously in decision-making and action. ⁸ Victim-Survivors who spoke to the Commission - both as children, and as adults reflecting on their experience as children - demonstrate that their contribution goes beyond respecting their entitlement to be heard; they add significant value to our understanding of institutional child sexual abuse.

The concept of expertise through experience is well recognised in mental health, disability and family violence, based on the understanding that people who have lived experience can contribute to service planning, development and evaluation, and to de-stigmatising education for staff and awareness raising for the broader public. There is a rich literature exploring the different definitions of expertise by experience, best practice for engaging Victim-Survivors in collaborative work, and ways of working in non-tokenistic partnership. ⁹ In recent years, governments across Australia have demonstrated growing understanding of the importance and value of Lived Experience in public policy.

Co-Design with Victim-Survivors

The insight and expertise demonstrated by Victim-Survivors who spoke to the Commission aligns with the perspective of co-design expert KA McKercher, who recently argued that involvement of people with Lived Experience in co-design is often premised on the assumption that what they have to contribute is limited to their stories: *We bring more than the stories of how we've been harmed. Who we are and what we've experienced shapes what we think and what we make.* She urges co-designers to think carefully about the consequences of revisiting and disclosing harm, to ensure where sharing stories is part of the process, that it is properly resourced so that it is therapeutic rather than retraumatising. She challenges us to reflect:

- Can we build from what's already known?
- Can we explore what's been documented and suppressed, overlooked or ignored?
- Can we focus on resistance and survival?
- Can we see ourselves in others' stories and build from there? ¹⁰

⁸ Amongst other rights enshrined in the UN *Convention on the Rights of the Child*, children have the right to be protected from sexual abuse and sexual exploitation. They also have the right to be heard, and to have their views given due weight in accordance with their age and maturity, in all matters affecting them, including in matters related to their abuse and protection from abuse (*Convention on the Rights of the Child*, opened for signature 20 November 1989, 1577 UNTS 3 (entered into force 2 September 1990), arts 12, 19 and 34).

⁹ Cataldo M et al *On Our Own Terms* study in progress; NSW Council of Social Service *NCOSS Lived Experience Framework Principles and practices for Lived Experience partnerships* 2021; Safe + Equal *Sources of lived experience in the family violence sector: issues paper* 2022;

¹⁰ KA McKercher *retelling trauma shouldn't be the only ticket to co-design* LinkedIn 2024

Theme 2 Victim-Survivors resist abuse and seek safety

Case Studies show Victim-Survivors resisting abuse and seeking safety wherever this was possible, adopting direct and indirect strategies to limit the abuse. We noted this theme in 17 of the Case Studies.

- Norman's mother Eve told the Commission that Norman asked her to stop advocating for him, and that he stopped disclosing to her how he was feeling. She later discovered that this was a self-protective strategy, as he was subjected to invasive and unlawful strip searches every time she visited.
- Katrina Munting was subjected to sexual abuse by a teacher at her school. After another teacher formed suspicions about the abuse, Ms Munting thought that the abuse would stop. She was *devastated* that nothing was done, and concluded: *I had to make it stop and that was excruciating trying to work out how do you do that, how do you make something stop? It's essentially an ingrained pattern of power.* She then reported the abuse to Police without support.
- Max was subjected to repeat sexual abuse in AYDC, including Harmful Sexual Behaviour (HSB) from older boys. Max tried in numerous ways to resist and report the abuse. He made direct disclosures, and complained via the Commissioner for Children and Young People. Max told the Commission

After I started speaking to the Children's Commissioner the staff started treating me like shit. They stopped giving me food and drinks when I asked for them and would say 'you get what you get when you get it'. Before I started calling the Children's Commissioner they would just give things to me when I asked for it.

Max damaged the ceiling in his room in order to be moved away from the abusive older boys, and this was successful. In 2021 Max used challenging behaviours to succeed in his wish to be transferred to an adult prison to escape AYDC: *I just kept going and I would have code blacks called on me every day. I kept hitting staff and stuff like that.*

- Otis made the decision not to disclose because to do so seriously risked his living conditions. He told the Commission that the staff who sexually abused him were in control of *his television time, his bedtime and his life...*
- Brett initially sought safety by making complaints to staff about his treatment in youth detention; he subsequently made the decision to stop, because *it made it 100 times worse' when staff responded by making life even harder.*

Key Concepts Resistance Behaviours that Challenge

Resistance

The concept of resistance to abuse was first noted in 2005 by three Canadian academics working with Calgary Women's Emergency Shelter. They argued: *Whenever people are abused, they do many things to oppose the abuse and to keep their dignity and their self-respect. This is called resistance. The resistance might include not doing what the perpetrator wants them to do, standing up against, and trying to stop and prevent violence, disrespect and oppression. Imagining a better life may also be a way that victims resist abuse.*¹¹

The concept of resistance was extended from adults to children in an international study of child victim-survivors of domestic violence across four European countries. Children told the researchers about a range of creative strategies they used in situations of domestic violence: carefully managing what they say, and who they talk to, to control what is known about their family; redefining who counts as family to exclude abusers and include trusted non-relatives; creating dens and hideaways to go to with their siblings when violence was active; thinking of alternative worlds, fantasy spaces and fantasised futures; making a game of hiding, reclaiming childhood; and physical resistance.¹²

Behaviours that Challenge

Max describes a strategic choice to use behaviours that challenge to achieve an end. However, even where children and young people are not able to either make or articulate such a choice, behaviour has meaning. The Australian Childhood Foundation makes the following key points:

- the term 'behaviours that challenge'...broadens the focus of interest from what the child or young person is 'doing' to understanding that these behaviours both hold meaning as well as have an impact not just for those affected by the behaviours but for the child or young person themselves;
- many of the behaviours that challenge shown to us by children and young people are often their best attempt at coping, connecting, and communicating; and
- in order to make meaning of behaviours that challenge we need to look below the surface of the behaviour to what the function of the behaviour is, or what need it is communicating or meeting.

¹³

¹¹ Calgary Women's Emergency Shelter *Honoring Resistance: how women resist abuse in intimate relationships* 2005

¹² Callaghan JEM Alexander JH *Understanding Agency and Resistance Strategies: children's experiences of domestic Violence* University of Northampton 2015

¹³ Australian Childhood Foundation Centre for Excellence in Therapeutic Care *Practice Guide Responding to behaviours that challenge* 2021

Theme 3 There was a continuum of responses to disclosure that ranged from ill-informed and incompetent to violently abusive

We note this theme in all Case Studies.

Victim-survivors describe responses to their disclosures which appeared to be entirely uninformed about the impact of trauma, the dynamics of child sexual abuse, the ways in which children disclose, perpetrator tactics and bystander resistance. Beyond that, responses did not reach basic standards of competence or compliance with existing organisational policy, let alone best practice. At one end of this continuum, the Department of Education publicly aligned themselves with the alleged abuser, and the Teachers' Registration Board gave entirely wrong advice to Kerri. At the other end of the continuum, Otis told the Commission that when staff were not content with the sexual acts he was performing, they became physically violent and threatened to take away his bedding or his canteen privileges.

Ill-informed and incompetent responses were prevalent across James Griffin's decades of offending:

Angelique Knight told the Commission:

I don't know if James Griffin did take photos of me and that bothers me ... I was really annoyed ... and it felt like Peter Renshaw was just brushing me off again. I felt like I was nothing and just a number to him.

Tiffany Skeggs told the Commission of a Child Safety Services worker:

her words to me was that I should not continue engaging in that behaviour, that I should know that it's inappropriate to sit on his knee, I need to change what's happening

and

it was known to police by this point, it was known to... (Child Safety Services) ...and no person with an ounce of experience in engaging with children or taking child sex abuse disclosures from children engaged with me in any way, and the only opportunity that I had at that point to disclose was on a phone call with a stranger in front of my mother.

It is critical to recognise that the way that children communicate difficult messages is not always easy for adults to hear; children often do not have the language to articulate what has happened to them, they often do not understand what has happened but know that they feel terrible. Zoe's incremental disclosure over time is entirely typical of children's disclosure, but was misunderstood and mischaracterised as *contaminated*. Faye's insight that had Caseworkers visited more frequently and followed up on the known risk, she may have disclosed earlier aligns with research on disclosure: adults need to give children opportunities to disclose.

This group of victim-survivors were at times acutely aware of what appeared to be serious negligence, an unnecessarily adversarial approach, and the indifference of responding agencies and regulators to known and significant risks. For Ben, Norman and Max, the poor response they received was not an unintended consequence or carelessness, but the intended result of deliberate decisions and actions. These perspectives align with the findings of multiple inquiries across jurisdictions: organisational reputation is valued above child safety. Grooming, not just of children but of adults around them, is a significant contributor to this failure.

Finally, Victim-survivor accounts in the Case Studies clearly demonstrate that the way children communicate when they disclose - incrementally, often over an extended period of time - can seem unbelievable and insubstantial, especially in the face of powerful institutions with a vested interest in maintaining the status quo.

Victim-survivors in these Case Studies felt dismissed, disbelieved and entirely unheard, and indeed were dismissed, disbelieved and unheard.

No-one believes me, no one, I can't trust what goes on here, I can't go back (Zoe)

I very much feel that, until this day, that we have been portrayed as liars (Rachel)

Key Concepts Bystander Effect Grooming Bureaucratic Ritualism

Bystander Effect

The Bystander Effect was first defined by Latane and Darley in 1970, following a rape-murder in Canada in 1964 which was observed by 38 people, none of whom intervened. Latane and Darley's Process Model of Help Giving identified five stages through which the bystander must pass in order to intervene: notice the situation; evaluate it as serious; assume personal responsibility; decide whether you have the skills needed to intervene; and decide to help. ¹⁴There are three key barriers to reaching step 5:

- *pluralistic ignorance* i.e. if other bystanders are not acting, we may assume the situation is not serious;
- *diffusion of responsibility* i.e. the greater the number of bystanders present, the lower the likelihood that anyone will intervene; and
- *evaluation apprehension* i.e. fear that your intervention may not succeed, or may be negatively viewed by others. ¹⁵

More recent studies have found that the level of perceived dangerousness of a situation can reduce or reverse the bystander effect. ¹⁶

Grooming

The National Office for Child Safety describes grooming as *behaviours that manipulate and control a child, as well as their family, kin and carers, other support networks, or organisations in order to perpetrate child sexual abuse*. The intent of grooming is to:

- gain access to the child or young person to perpetrate child sexual abuse
- obtain sexual material of the child or young person
- obtain the child or young person's trust and/or compliance
- maintain the child or young person's silence, and/or
- avoid discovery of sexual abuse. ¹⁷

Grooming behaviours are not necessarily explicitly sexual, directly abusive or criminal, and may be consistent with behaviours or activities in non-abusive relationships. They can often be difficult to identify and may only be recognised in hindsight. ¹⁸ Grooming behaviours may constitute child sex abuse offences. ¹⁹ O'Leary et al argue that perpetrators groom parents and carers by *befriending them and positioning themselves as 'safe'*, and groom institutions to accept them as *insiders*. ²⁰

¹⁴ Latane, B. Darley, J.M. *The unresponsive bystander: Why doesn't he help?* 1970

¹⁵ Urschler, D. F. *Bystander Effect* Oxford Bibliographies 2015

¹⁶ *ibid*

¹⁷ Royal Commission into Institutional Responses to Child Sexual Abuse 2017: Final Report Volume 1 p323

¹⁸ [Grooming | National Office for Child Safety](#)

¹⁹ Communication with intent to procure a child or young person to engage in an unlawful sexual act, or with intent to expose a child or young person to indecent material, is an offence under section 125D of the *Criminal Code Act 1924* (Tas).

²⁰ O'Leary, P. Koe, E. Dare, A. *Grooming and child sexual abuse in institutional contexts* RCIRCSA 2017

Insider status is then used to manipulate or bypass safeguarding procedures and avoid suspicion from colleagues. Further, *because of their role as an insider, if detection or disclosure does occur, it is less likely that concerns raised will be addressed in an appropriate manner, such as through a thorough and transparent investigation.*

Mandel et al argue that perpetrators of domestic violence groom systems as well as individuals; they note common system vulnerabilities, and identify steps to *perpetrator proof* organisational systems. One of the key agency vulnerabilities targeted in domestic violence is equally, perhaps more, relevant in child sexual abuse: *a tendency to believe the calm presentation of a perpetrator as compared to the more emotional presentation of the survivor.*²¹

Bureaucratic Ritualism

Sociologist Robert Merton defined bureaucratic ritualism as *a greater devotion to rules and regulations than to organizational goals.* Attention to the minutiae of policy and procedure can take precedence over the achievement of the outcomes for clients which policy and procedure were originally designed to produce. The dangers of bureaucratic ritualism increase with the volume of procedure, and can also lead to *trained incapacity* i.e. inability to think creatively or act independently, particularly in new or unfamiliar situations.²²

Fader and Dum investigated bureaucratic ritualism in a reintegration service for young offenders. They observed that *case workers and administrators became beholden to daily demands related to billing, paperwork, and meeting minimum standards, supplanting the larger goal of individualized care for young people returning from placements. Outputs, not outcomes, became the measure of success.* More hopefully, they also identified a group of aftercare workers *who resisted the organizational pressures to become bureaucratic ritualists and instead became or remained proactive caregivers.*²³

²¹ Mandel, D. Mitchell, A. Stearns Mandel, R. *How Domestic Violence Perpetrators Manipulate Systems* undated

²² [6.3 Formal Organizations – Introduction to Sociology: Understanding and Changing the Social World](#)

²³ Fader, J. J. Dum, C. P. *Doing time, filling time: Bureaucratic ritualism as a systemic barrier to youth reentry* Child & Youth Services Review 35(5) 2013

Theme 4 Responses to disclosure compounded trauma

In our view, the response to the disclosures of children and young people in the Case Studies was so poor that it became part of the experience of abuse. The length of time taken in responses significantly extended and exacerbated the negative impact of trauma. Judith Herman argues that since *the core experiences of psychological trauma are disempowerment and disconnection*, recovery requires empowerment and new connections which enable *trust, autonomy, initiative, competence, identity, and intimacy*. With few exceptions, the responses to disclosure for the victim-survivors in the Case Studies continued their disempowerment and did not function as trustworthy or competence-building connections.²⁴ We noted this theme in 33 of the Case Studies.

I am starting to question the legitimacy of the process and whether it is worth it for me. ... [The Government] are dragging their feet as much as they can. The length of time that the process has taken makes me feel betrayed and worthless, and I am starting to question the legitimacy of the process and whether it is worth it for me. ... [The Government] are dragging their feet as much as they can. I personally feel like they are weighing up my longevity. They hope that I die of an overdose, die of murder, die in prison – because I chose to go the civil route. I know they won't want to give me a cent. They see it that I've already cost the state money. It doesn't matter what happened to me as a child, it only matters what I have done since then ... The process of trying to seek compensation has eaten me up from the inside. (Ben)

I'm not sure I can even begin to recover and learn to live like a normal person. I'm completely ruined (Azra)

In Zoe's case, after the initial sexual assault, the Commission notes that her disclosures had *never been adequately investigated by Launceston General Hospital, Child Safety Services, Tasmania Police or relevant professional regulatory bodies*". Zoe said *No one believes me, no one, I can't trust what goes on here, I can't go back*. Ultimately, this meant that Zoe refused to seek medical treatment and she died alone at home from health issues. This starkly and tragically demonstrates the cumulative impact of compounding traumatic experiences that began with the sexual assault and continued through the process of disclosure and inadequate investigations.

The impact on victim-survivors was compounded by their awareness of community acceptance, tolerance, or dismissal of the abuse, and by intimidation of their parents. We found examples of intimidation of parents trying to advocate for their children - crude with Norman's mother, and disguised with Zoe's father. This both reduced the capacity of parents to act as resources for their children, and provided fertile ground for the development of complex PTSD, where children entirely reasonably formed the view that their parents were unable to protect them.

Responses were almost entirely fixated on investigation of the allegation. There are few instances of support being offered to victim-survivors. Alongside the lack of support, the investigation process itself was abusive in most instances, most strikingly with child victims being directed to re-enact the abuse. On many occasions, internal investigators strayed significantly beyond their remit, inappropriately taking on the roles of Child Safety or Police; on other occasions, they failed to follow basic internal investigative practice, particularly in verifying information provided to them.

²⁴ Herman, J. L. *Recovery from psychological trauma* Psychiatry & Clinical Neurosciences 2002

Key Concepts **Continuous Traumatic Stress**
Moral Injury
Institutional Betrayal

Continuous Traumatic Stress

The concept of continuous traumatic stress was first developed in post-apartheid South Africa by Eagle and Kaminer. Noting that traumatic stress diagnoses are based on the assumption of past trauma and current safety, they proposed a new concept to describe the experience and impact of living in contexts of realistic current and ongoing danger, such as protracted political or civil conflict or pervasive community violence. They identified four key components of continuous traumatic stress: context; time; the presence of real and perceived threat; and the absence of external protective systems. Many of the victim-survivors who spoke to the Commission had abuse experiences which were: experiences compounded across contexts; extended over time; with continuing threats of retaliation and isolation; and with external systems functioning as dismissive or punitive, rather than protective. ²⁵

Moral Injury

Moral injury is the impact of witnessing, involvement in, and exposure to, events or situations that they consider to be *morally transgressive*. ²⁶ Moral injury was first seen as relevant to military service, and has been defined as *the lasting emotional, psychological, social, behavioral, and spiritual impacts of actions that violate a service member's core moral values and behavioral expectations of self or others*. ²⁷

Moral injury is increasingly applied in other contexts, including child sexual abuse. ²⁸ McGillivray's research with parents of children who had been subjected to sexual abuse found that many parents *feel as though they have committed 'moral violations' by being unable to prevent the abuse and experience thoughts and beliefs of 'moral failure'*. ²⁹ She comments that what is commonly understood as burnout may mask moral injury in a broad range of groups who have witnessed or been exposed to *moral conundrums* in the course of their work. ³⁰ The risk of moral injury and concomitant development of PTSD is exacerbated by witnessing, knowing about, or thinking one should have been aware of child sexual abuse, but that one either failed to, or was unable to protect children. It can also apply to people who subsequently realise that their actions or inactions enabled abuse.

²⁵ Eagle, G. Kaminer, D. *Continuous traumatic stress: Expanding the lexicon of traumatic stress* Peace and Conflict: Journal of Peace Psychology 2013 19(2)

²⁶ ter Heide, F.J.J. Olf, M. *Widening the scope: defining and treating moral injury in diverse populations* European Journal of Traumatology 14(2) 2023

²⁷ [about moral injury](#)

²⁸ McGillivray, C. *Empirical Extension of the Theory of Moral Injury: Investigating the Role of Intrapersonal Moral Injury Cognitions through Paradigmatic Models in Non-Offending Parents of Children who have Experienced Sexual Abuse* Bond University 2023

²⁹ [New research to support families impacted by child sexual abuse | Bond University | Gold Coast, Queensland, Australia](#)

³⁰ *ibid*

Institutional Betrayal

Defined by Freyd, the concept of Institutional Betrayal refers to *wrongdoings perpetrated by an institution upon individuals dependent on that institution, including failure to prevent or respond supportively to wrongdoings by individuals...committed within the context of the institution*. When institutions cover up sexual violence, institutional betrayal undermines recovery. Institutional betrayal can occur in relation to isolated incidents, or in relational to systemic issues; it can include betrayal by omission, and betrayal by commission.

Freyd and Smith have documented psychological harm caused by institutional betrayal.³¹

³¹ Smith, C. P. Freyd, J. J. *Dangerous Safe Havens: Institutional Betrayal Exacerbates Sexual Trauma* Journal of Traumatic Stress. 2013 26 (1)

Theme 5 Disclosure did not protect children

In most cases, disclosure did not stop the abuse of the disclosing child or young person. In most cases, the response to disclosure did not recognise, did not believe, or did not respond to risk from the abuser to other children. We noted this theme in 28 Case Studies.

Addison's experience in disclosing abuse by her foster parents, and of physical abuse being witnessed, was of a long period of no response. Addison told the Commission that she disclosed the abuse to a teacher at her school who immediately confronted her foster mother Vanessa. This resulted in more severe physical punishments from Vanessa, *sometimes using knives*. Addison remembered also telling Department case workers of the abuse but said, time and time again, she was not believed: *They didn't do anything about it*. She said one case worker witnessed her being physically abused by Vanessa but chose to ignore it. It was not until Addison and her sister *weren't taking no for an answer* that they were finally moved to other foster homes. When Addison said she was being abused by her 'foster uncle', she told the Commission that Department staff told her to not worry about it because the abuser was already being investigated for another matter.

Faye's experience was that the Department of Communities failed to protect her from a known risk of sexual abuse, and also failed to protect other children: her sibling was left in the placement, other children were placed there, and the family's request that only girls be placed with them was accepted. These actions occurred despite their adult son being a known risk to young women. Faye said:

they had the opportunity to protect me, but they didn't...they also failed to visit us more frequently, which they said they would...if they had have followed up I may have disclosed the abuse earlier,

Other than a short-lived response to protecting younger children from adolescents demonstrating harmful sexual behaviours in Ashley Youth Detention Centre, responses did not protect other children from the risk posed by the perpetrators/alleged perpetrators of sexual abuse against any of the Victim-Survivors in the Case Studies, or indeed other children.

In the Case Study examining the experiences of a group of 22 children and young people in Out-of-Home Care, it appears that most alleged abusers were not held accountable, children and young people remained with them, and children and young people continued to be placed with them.

In addition:

- Orson continued to be raped for up to 5 years following disclosure
- Children in Family B were subjected to harmful sexual behaviour by Andy, despite this having been disclosed by children in Family A
- Warren described repeat sexual abuse from staff in Ashley Youth Detention Centre from age 14 to 19

We take the opportunity to note that adult action, rather than children's disclosure, must function as the main plank of prevention strategies.

Key Concepts

Betrayal Trauma Cognitive Dissonance Confirmation Bias

Betrayal Trauma

Betrayal trauma was first defined by psychiatrist Jennifer Freyd as occurring *when the people or institutions on which a person depends for survival significantly violate that person's trust or well-being.*³² Betrayal trauma has also been examined as a type of moral injury.³³

Institutional betrayal refers both to abuse or mistreatment by someone associated with the institution, and failure by the institution prevent abuse or mistreatment, or respond supportively to abuse or mistreatment which happened in the institution.³⁴ Freyd notes multiple studies confirming that the impact of a poor, blaming or victimising response to disclosure of sexual assault exacerbates the trauma of the assault itself. She notes: *when sexual harassment and assault occur in the context of an institution - a school, the military, a workplace - the behavior of institutional leaders can become a powerful force in how the victim fares.*³⁵

Cognitive Dissonance

The theory of cognitive dissonance was developed by psychologist Leon Festinger.³⁶ The theory suggests that we are uncomfortable with inconsistencies in our thoughts, feelings or behaviour. When we learn new information that challenges a deeply held belief, or when we act in a way that challenges how we are used to seeing ourselves, we are motivated to resolve the discomfort that arises, i.e. to restore *cognitive consonance*. We can do this in different ways, ranging from changing our beliefs or our behaviour to ignoring or dismissing new information and denying or compartmentalizing unwelcome thoughts.³⁷

Confirmation Bias

Confirmation bias *is the tendency to favor information that confirms existing beliefs or values. People exhibiting this bias are likely to seek out, interpret, remember, and give more weight to evidence that supports their views, while ignoring, dismissing, or undervaluing the relevance of evidence that contradicts them.*³⁸

Confirmation bias leads us to:

- search for evidence which supports our pre-existing beliefs or hypotheses:
- interpret evidence that confirms our pre-existing beliefs more positively than evidence which challenges them: and
- remember confirming information better than challenging information.³⁹

³² Freyd, J.J. *Betrayal trauma* 2008

³³ ter Heide, F. J. J. and Olff, M. *Widening the scope: defining and treating moral injury in diverse populations* European Journal of Psychotraumatology 14(2) 2023.

³⁴ Smith, C.P. Freyd, J.J. *Institutional betrayal* *American Psychologist* **69** 2014

³⁵ Freyd, J.J. *When sexual assault victims speak out, their institutions often betray them* *The Conversation* 2018

³⁶ Festinger, L. *A Theory of Cognitive Dissonance* 1957

³⁷ [Cognitive Dissonance | Psychology Today](#)

³⁸ [Confirmation Bias In Psychology: Definition & Examples \(simplypsychology.org\)](#)

³⁹ *ibid*

Theme 6 Victim-Survivors demonstrated greater commitment to protecting children from abuse than responding agencies

Victim-survivors in the Case Studies were exponentially more committed to the protection of other children than responding agencies and regulators, despite the fact that it is the latter, not the former, who have a legal duty of care to protect children. Kerri Collins' experience is a clear example: Ms Collins' persistence in seeking to protect children was not matched either by services or by the regulator. We saw this theme in 14 Case Studies.

Victim-survivors were more likely to be disbelieved than believed. Despite being disbelieved, many of the victim-survivors in these Case Studies were indefatigable in their commitment to pursue justice as a means to protect other children. It is clear that for many, they embody *the survivor mission*.

Sam Leishman told the Commission:

I hope that by speaking about my experiences, this can lead to a change to the way in which the Department engages with victim-survivors of child sexual abuse from within the education system in Tasmania. It is my hope that Commissions of Inquiry, solicitors and formal processes don't need to get involved to encourage the Department to constructively engage with people like me, who have already suffered so much.

The process for victims to engage with and obtain information from the Department needs to be much clearer, with fewer barriers. It also needs to be focused on the needs of the individual victim-survivor. People like me need answers - even if they are not easy to hear.

Otis told the Commission that he would sometimes volunteer to go on excursions outside of Ashley Youth Detention Centre, or to go to the storeroom with staff, taking the place of a younger child who was in Ashley for the first time. Otis knew that off-property trips and the storeroom were locations with no CCTV where Ashley staff would sexually abuse young people. Otis told the Commission that he was prepared to be abused rather than know or see others being abused. He also said that he *has reached a point in his life where he wants to talk about what happened, so others are not subjected to similar abuse*.

Rachel gave evidence at Commission Hearings. She said:

I just don't want anyone to ever go through what I've gone through...I want to advocate for those children that usually, that can't speak; I want to advocate for parents or caregivers that - I've seen what it's done to my mother. I've physically seen how it's just ripped her apart, how it's ripped me apart.

Azra said:

It's too late for me, but it shouldn't be too late for them.

Many of James Griffin's victims demonstrated incredible commitment to keeping other children safe:

I had this innate feeling that other children were at risk on the ward and I knew I couldn't pretend it didn't happen anymore. It was no longer just about me and I had a duty to do something about it, both as a mum and as a social worker (Kylee Pearn)

My reason for seeking his [her GP's] help, other than for personal reasons, was because I was aware James Griffin was employed at Launceston General Hospital in the paediatrics ward. I was concerned he would come into contact with children through his work. (Young woman, not named)

from a personal perspective I regret opening my mouth...(but)...I would do it all over again in a heartbeat to help others and create the change that is happening now'. (Tiffany Skeggs)

As the Report notes:

What was apparent to us is that the people who most berated themselves for their decisions and actions were those least responsible for Mr Griffin's abuse - victim-survivors. We witnessed the anguish of many victim-survivors who believed that they alone were being abused by Mr Griffin and felt wracked with guilt when the extent of his abuse became known. They expressed to us that they should have raised the alarm. These feelings come from a deep concern for others and for the protection of children, which we greatly admire, but it is not a burden victim-survivors of abuse should have to carry. It is not their responsibility to protect others from their abuser. It is the responsibility of institutions tasked with their care and protection.

Key Concept Survivor Mission

Judith Herman describes the Survivor Mission as follows: *most survivors seek the resolution of their traumatic experience within the confines of their personal lives. But a significant minority, as a result of the trauma, feel called upon to engage in a wider world. These survivors recognize a political or religious dimension in their misfortune, and discover that they can transform the meaning of their personal tragedy by making it the basis for social action. While there is no way to compensate for an atrocity, there is a way to transcend it, by making it a gift to others. The trauma is redeemed only when it becomes the source of a survivor mission.*⁴⁰

Working collaboratively with others to raise awareness, provide support or prevent victimization is recovery-promoting: it supports empowerment, and provides trustworthy connection.

⁴⁰ Herman, J.L. op cit

Theme 7 On occasion, Victim-Survivors experienced a better response

We made efforts to identify better practice. Sadly, we were only able to do this a better response in 4 Case Studies.

Sam Leishman was sexually abused by a teacher at his school in 1978. When the Royal Commission began in 2014, Mr Leishman for the first time realised that his experiences were *not uncommon*. For the first time in 36 years, he understood that what Mr Harington had subjected him to was child sexual abuse. Mr Leishman described this as a *light bulb moment*:

I rang the Royal Commission and that was - that was a great moment for me because it was like a little bit of a weight off my shoulder, and they were fantastic; they arranged a hearing for me - a private session for me and that initiated a lot of things that eventually led to me - the charges and everything against him...by speaking openly and honestly, I was able to view Harington's behaviours objectively and I began to put things into perspective.

Mr Leishman discovered through this process that Harington had abused other students, and this encouraged him to report to Police. In 2015, Harington pleaded guilty to multiple charges of sexual abuse related to several Victim-Survivors, including Mr Leishman. Mr Leishman described his experiences of the National Royal Commission, police and the Tasmanian justice system more broadly as *an overwhelmingly positive one*. He said: *The police get a lot of bad press, but they were very good with me*. He described how valuable it was to feel like his matter was important and relevant, even though it happened a long time ago. In giving his victim impact statement in court, he said:

I was able to defend a child [myself] that had been confused, ashamed and bullied to the point of despair - forced to manage the most complex of emotions in isolation.

The Case Study about harmful sexual behaviour from Andy involved children from two families. The response to the second family was markedly different to the response to the first. The Department took a range of actions. They notified the Strong Families, Safe Kids Advice and Referral Line and Police; they convened a School Leadership Team meeting to respond to the issues, formed a Student and Family Support Team for Family B, and convened a Planning Team to respond to the needs of all students, including Andy. The Department offered psychological support, social support, assistance with moving schools, tutoring, financial support and ongoing communication to Family B. They worked closely with Andy's family on his behaviour, and offered them psychological and practical support. School staff prepared Risk Management Plans for Andy, including regular supervision. The Department increased the level of funding to Andy's school, to assist in putting supervision and supports in place for Andy. Lastly, the school communicated with families of all children at the school about the supports available.

Warren was subjected to repeat sexual abuse by multiple offenders from age 14 to 19 in Ashley Youth Detention Centre. He was unique among Ashley witnesses in telling the Commission that some staff at Ashley treated him like a human being, rather than just a criminal, and tried to help him out and keep him out of trouble. Warren said he also learned how to read and write at the school at Ashley Youth Detention Centre and had the opportunity to learn life skills such as woodworking and being a barista.

Lastly, the Commission of Inquiry reviewed the case files of 22 children who had been in Out-of-Home-Care between 2013 and 2020 who were known to have been, or strongly suspected to have been, subjected to child sexual abuse before coming into care. The Commission was strongly critical of the response in many cases, but also noted some *reasonable* responses. They found that investigation and assessment to some

degree happened, that Police were consistently involved, that there were some active interventions, and children demonstrating harmful sexual behaviour were referred for specialist support.

Key Concept The Trauma-Informed Organisation Institutional Courage

The Trauma-Informed Organisation

Wilson et al tell us:

In the simplest terms, the concept of trauma-informed care is straightforward. If professionals were to pause and consider the role trauma and lingering traumatic stress plays in the lives of the specific client population... how would they behave differently? ...How can they better help their traumatized clients heal? ... [b]y looking at how the entire system is organized and services are delivered through a 'trauma lens', what should be done differently? The answer can be used to guide practice, policy, procedures, and even how the physical caregiving environment is structured. ⁴¹

A trauma-informed organisation understands the prevalence of trauma in their client groups - and among their staff. Further, the trauma-informed organisation understands that trauma-informed practice is helped by trauma-informed systems and culture, and hindered where these are absent.

Institutional Courage

The antidote to institutional betrayal is institutional courage. ⁴² Institutional courage is *an institution's commitment to seek the truth and engage in moral action, despite unpleasantness, risk, and short-term cost. It is a pledge to protect and care for those who depend on the institution.* Building on her groundbreaking work on institutional betrayal, Freyd founded the Center for Institutional Courage in 2020. She said: *For the past decade, my graduate students and I have spent so much energy on institutional betrayal - discovering how harmful it is, how prevalent it is. I started thinking, 'It doesn't have to be this way.'* ⁴³

The Center's current focus is on addressing sexual violence in institutions, conducting and funding research into how best to translate institutional courage into action, and providing resources and assessment tools to support *systems-level, cultural change in our institutions and society.* ⁴⁴

⁴¹ Wilson, C. Pence, D. M. Conradi, L. *Trauma Informed Care* Encyclopedia of Social Work 2013

⁴² Platt, M. Barton, J. Freyd, J.J. *A betrayal trauma perspective on domestic violence* in Tark, E. Buzawa, E.S. (eds.). *Violence against Women in Families and Relationships* 2009; <https://www.institutionalcourage.org/>

⁴³ [Center for Institutional Courage](https://www.institutionalcourage.org/)

⁴⁴ *ibid*

Theme 8 Responding agencies at times identified with the abuser

We noted 10 examples in the Case Studies where responding agencies explicitly or implicitly identified with the abuser. Perhaps the most striking example was the joint public statement published by the (then) Department of Education and (teacher) Wayne in a local paper, stating that he had been cleared of misconduct.

Charlotte told the Commission that it was not possible to report the abuse she was subjected to by an older boy in AYDC because she was concerned that his friends would retaliate. However, she also formed the view that nothing would happen even if she could report the abuse to staff, because *the young person was a long-term detainee and favoured by staff*.

After the teacher who subjected him to sexual abuse as a child was convicted and jailed, Sam contacted the then Department of Education:

by that point I had questions as well: I wanted to know why he was teaching at my school, what other complaints they had about him, who knew what, was there any record of any sort of meetings and so forth that had taken place, what were the circumstances around his transfer to another school: I thought they were reasonable things to want to know

Sam was astonished to discover that Harrington's permission needed to be given before this information could be shared with him, and felt *completely stymied by the process*. He was unaware that consultation rather than permission was in fact required.

Walter was employed at AYDC. The Report notes that Walter at least 31 allegations of abuse, including child sexual abuse were made against Walter from the late 1990s to as recently as 2022. Concerns were raised with the Department, the Ombudsman, the Commissioner for Children and Young People, Tasmania Police, and via the Abuse in State Care Program claims and civil claims. Allegations included *inappropriate touching of female detainees, sexual abuse while strip searching a detainee, forced oral sex and rape... physical abuse or excessive use of force*. AYDC management investigated some of these concerns, but concluded that his behaviour was *ill advised*, but that he did not have *any inappropriate intent*. Pivotal to that conclusion was Centre management's view that previous allegations of sexual abuse perpetrated by Walter should not be considered because of procedural fairness and Walter's right to privacy. Walter ultimately left the Department in the late 2010s by mutual agreement and received a lump sum payout. He retained his Working With Vulnerable People clearance until 2020s. The Department believed that disciplinary proceedings could not be repeated in relation to the same issue; this is an example of entirely wrong interpretations of procedural fairness, privacy and disciplinary proceedings contributing to Walter avoiding sanctions on his behaviour.

Children from two families were the victims of harmful sexual behaviour from Andy. The first family, known as Family A in the Report, told the Commission that in their view the school's response was entirely inadequate. The said that *privacy concerns* were cited as the basis for not sharing information with them about the steps that were being taken, and Andy's right to an education was cited as the reason that he was not removed from the school.

It is clear that a different response to Family A is likely to have prevented Family B's children experiencing harmful sexual behaviour from Andy.

Key Concepts

See No Evil, Hear No Evil, Speak No Evil
In-Group Favouritism
Motivated Blindness
Confirmation Bias
Bureaucratic Ritualism

See No Evil, Hear No Evil, Speak No Evil

In *Trauma and Recovery*, Judith Herman wrote:

It is very tempting to take the side of the perpetrator. All the perpetrator asks is that the bystander do nothing. He appeals to the universal desire to see, hear and speak no evil. The victim, on the contrary, asks the bystander to share the burden of pain. The victim demands action, engagement and remembering...

In order to escape accountability for his crimes, the perpetrator does everything in his power to promote forgetting. Secrecy and silence are the perpetrator's first line of defense. If secrecy fails, the perpetrator attacks the credibility of his victim. If he cannot silence her absolutely, he tries to make sure that no one listens. To this end, he marshals an impressive array of arguments, from the most blatant denial to the most sophisticated and elegant rationalization. After every atrocity one can expect to hear the same predictable apologies: it never happened, the victim lies, the victim exaggerates, the victim brought it upon herself; and in any case it is time to forget the past and move on.

The more powerful the perpetrator, the greater is his prerogative to name and define reality, and the more completely his arguments prevail. ⁴⁵

In-Group Favouritism

In-group favouritism, also referred to as in-group bias, is understood to be a universal human function of trusting and favouring people we perceive to be like us, or a member of the same social group. When a person identifies with a group, the group becomes a *central part of an individual's self-concept*, and they *acquire benefits conferred to the ingroup*, and trust in-group members more readily.

Membership of a group with status can become a way to *maintain a positive identity and bolster self-esteem*; developing positive beliefs about the in-group in turn sustains self-esteem. ⁴⁶

⁴⁵ Herman 1992 *op cit*

⁴⁶ Spadaro, G. et al *Identity and Institutions as Foundations of Ingroup Favoritism: An Investigation Across 17 Countries* *Social Psychological and Personality Science* 1 (11) 2023

Motivated Blindness

Motivated blindness is *the systematic tendency to overlook others' unethical behavior when it is not in our best interest to acknowledge it... if we have an incentive to view someone positively, accurately assessing the ethicality of their actions becomes challenging.* ⁴⁷ Francesco et al argue that there are four elements to motivated blindness:

- the motivated tendency to overlook the unethical behavior of others when recognizing the unethical behavior would harm us;
- the tendency to ignore unethical behavior when ethicality erodes slowly over time;
- the tendency to ignore unethical behavior unless it is clear, immediate, and direct; and
- the tendency to assess unethical behaviors only after the unethical behavior has resulted in a bad outcome, but not during the decision process. ⁴⁸

Confirmation Bias

Confirmation bias is *the tendency to favor information that confirms existing beliefs or values. People exhibiting this bias are likely to seek out, interpret, remember, and give more weight to evidence that supports their views, while ignoring, dismissing, or undervaluing the relevance of evidence that contradicts them.* ⁴⁹

Confirmation bias leads us to:

- search for evidence which supports our pre-existing beliefs or hypotheses;
- interpret evidence that confirms our pre-existing beliefs more positively than evidence which challenges them: and
- remember confirming information better than challenging information. ⁵⁰

⁴⁷ Silverthorne, S. *Blind Spots: We're Not as Ethical as We Think* Harvard Business Review April 2011

⁴⁸ Francesco, D. Moore, D.A. Bazerman, M. H. *See no evil: When we overlook other people's unethical behavior* 2010

⁴⁹ [Confirmation Bias In Psychology: Definition & Examples \(simplypsychology.org\)](http://www.simplypsychology.org/confirmation-bias)

⁵⁰ ibid

Theme 9 Within the closed institution of Ashley Youth Detention Centre, abuse was organised, collective and collaborative

In our view, child sexual abuse perpetrated in AYDC is markedly distinct from child sexual abuse in other institutions in Tasmania, both quantitatively and qualitatively

The abuse was physical, sexual and psychological. It was continuous, direct and indirect. It included significant elements of coercive control: isolation; surveillance; reward and punishment. It reminded us of Salter and Woodlock's research into organised abuse, both in its perpetration over time and by groups, and in the *ignorance, exploitation... (and) inaction* which occurred in response.⁵¹

The Commission observed that the Royal Commission's consideration of total/closed institutions was relevant to AYDC.⁵² Children and young people in AYDC were closed off from the outside world. They were imprisoned in an *alternative moral universe*, unable and fearful to report their experiences of abuse to the outside world. Staff exercised power to abuse children and young people with impunity, to promote abuse of younger vulnerable children by older children, and to enforce inculturation of new staff and children and young people into violence and abuse. The Commission continued to hold concerns about the safety and wellbeing of children and young people at AYDC at the close of their deliberations.

Ben told the Commission that staff saw the young people detained at AYDC as *the scum of society*. This was a key factor in the normalisation of abuse and mistreatment. Ben described watching as new staff were absorbed into this system:

there was the perception that any staff who didn't follow these rules would not have a job. On countless occasions I witnessed staff new to Ashley be ridiculed by long term staff because they did not join in on restraints. These new staff would quit or get kicked out for not toeing the line. In my opinion they were the sort of people that should have been employed at Ashley. They could have made a difference if they weren't continually pushed out.

Ben's experience also highlights the way in which AYDC functioned as a cPTSD-promoting and criminogenic environment:

I... wanted to be a criminal, and making complaints is not what criminals do. In a way we wanted to be like the people that were abusing us. We wanted to be big and tough. We believed that we only had one way out and that way was violence.

Comments made by Dr Laura Janes, Legal Director of the Howard League for Penal Reform, to the UK Independent Inquiry into Child Sexual Abuse are relevant here. She has found that children in custody feel that they will not be believed. When they are offered help to make a complaint, they say 'There's no point. It's not going to make any difference.' She argues that, against the overarching power imbalance, it is unsurprising that children think their word stands for little.⁵³

⁵¹ Salter, M. Woodlock, D. *The anti-epistemology of organised abuse: Ignorance, exploitation, inaction* 2023

⁵² Palmer, D. *The role of organisational culture in child sexual abuse in institutional contexts*, report prepared for the Royal Commission into Institutional Responses to Child Sexual Abuse, Sydney, 2016. The operation of detention centres as total/ closed institutions was considered by the Royal Commission and the Tasmanian Commission of Inquiry applied this analysis to its examination of AYDC.

⁵³ Independent Inquiry into Child Sexual Abuse, Final Report, UK 2022

The sexual abuse Warren experienced was organised, coordinated and collaborative; staff worked together in team and facilitated each other's abuse, acting as a network of sex offenders. Warren told the Commission that the staff who abused him were consistently on the same shifts, working together. He told no one, because the staff threatened to tell other young people in detention that he was *informing* and made threats against his family.

Erin told the Commission that it was *pointless making complaints or speaking up*. She said:

I learned that you don't say anything in Ashley, it was more trouble than what it was worth. I would describe the staff at Ashley as being like a pack of animals. Some of them had been working there for 30 years. They all went to school together. They were all from Deloraine, which was a small country town. They all looked after each other.

Charlotte told the Commission that the staff member responsible for supervision at the time she was detained was *known to turn a blind eye to pretty much anything*.

Fred told the Commission that the Franklin Unit at AYDC was known as *the gladiator pit*, because *it felt like the staff treated fights between them as a sport*.

Taken together, the experiences of young people at AYDC paint a picture of endemic physical and sexual abuse which was normalised in the culture.

Simon told the Commission:

an older staff member would regularly sit and watch young people shower through a viewing panel intended for suicide prevention. Simon said that the staff member became so notorious for this behaviour that he earned the nickname 'dirty old dog' from some young people.

Erin told the Commission that she found out that young men were allowed to watch her in the showers from the staff office that separated the girls' unit from the boys' unit. She was frequently strip searched by multiple male staff, who told her they all had to be there for her safety. Erin felt they treated the strip searches *like a show*.

The Commission concluded that AYDC *is not fit for purpose as a youth detention facility, and that it should be shut down as soon as possible...the current model is not working - for staff, detainees or the broader community*. While the Commission welcomed the Tasmanian Government's decision to close AYDC and develop a therapeutic and evidence-based youth justice model, they expressed disappointment at indications that the closure date of September 2024 may shift, and said:

We hold grave concerns for the safety and wellbeing of all detainees at the Centre. While we acknowledge that the process of replacing Ashley Youth Detention Centre is complex, we consider the closure of the Centre should be treated with urgency.

The Department for Education, Children and Young People (DECYP) has published a Youth Justice Blueprint 2024 - 2034. The Blueprint outlines the five strategies identified as needed to *realise a truly therapeutic youth justice system in Tasmania*. The Blueprint repeats the commitment to close AYDC, and replace it with *new, fit for purpose youth justice facilities...* (which use) *...a therapeutic model of care*. AYDC will be replaced by a *smaller detention center in the South, with assisted bail and supported residential facilities located in the North and the South of the State*. DECYP has also developed *Keeping Kids Safe: A plan for Ashley Youth Detention Centre until its intended closure*.

The Government is exploring the potential to use the AYDC site for a new adult correctional facility.

Simon told the Commission that he advises against this: many adults in prison were remanded into AYDC as children, and were assaulted or sexually abused there. Simon holds strong concerns that being sent to an adult prison on the AYDC site will be seriously retraumatizing. He said:

They will put their head down on their pillow at night and think about what happened to them as kids. They will have flashbacks. The whole place should just go.

As independent reviewers, we share Simon's concerns, and suggest the most trauma-informed use of the AYDC site is as a Site of Conscience.

Key Concepts **Organised Abuse**
Closed Institutions
Sites of Conscience
Anti-epistemology

Organised Abuse

Organised abuse is child sexual abuse perpetrated by multiple adults, acting together. Professor Michael Salter identified five types of organised abuse:

- network abuse: networks of non-family offenders targeting large numbers of young people;
- institutional organised abuse: sexual abuse of children by people who work with them;
- familial organised abuse: sexual abuse of children by family and people outside the family;
- ritual abuse: child sexual abuse which is structured in a ceremonial or ritualistic way; and
- technology-facilitated organised abuse: sexual abuse of children by multiple adults which is facilitated or distributed online.⁵⁴

Salter and Woodlock argue that despite robust evidence of a *marked propensity to collaborate in the exploitation of children, entrenched and pervasive scepticism* about the extent, or even the existence, of organised abuse. They suggest that this may function as a *defence mechanism against intolerable realities*.⁵⁵

Scepticism sustains ignorance, ignorance sustains inaction, and inaction allows abuse to both continue and proliferate.

Closed Institutions

The term total institution was coined by sociologist Everett Hughes, but brought to wide public attention by sociologist Erving Goffman. Goffman defined the total institution as *a place of residence and work where a large number of like situated individuals cut off from the wider society for an appreciable period of time together lead an enclosed formally administered round of life*. Total institutions include prisons, boarding schools, convents and psychiatric hospital. Daily life in the total institution is markedly different from living in the community, where we live, work and socialise in different places, and with different people.

⁵⁴ <https://www.organisedabuse.com/info>

⁵⁵ Salter, M. Woodlock, D. *The anti-epistemology of organised abuse: Ignorance, exploitation, inaction* 2023

Further, each day's activities are imperatively and tightly scheduled in accordance with a system of rules and the demands of a body of officials.⁵⁶ What is expected of the individual is behavioural conformity and active acceptance and internalizing of the institution's conception of what it is to be a "proper" person. What is expected of staff is managing the dual view of patients, inmates or students as unique individuals and material to be processed, and the gaps between the acceptable public face that is enshrined in their formal structures - upon which they depend for funds and legitimation - and those practices through which their real work gets done.

Cultural factors associated with closed institutions may make them more conducive to perpetration of child sexual abuse, particularly because they may be resistant to timely detection and discourage effective response to child sexual abuse.⁵⁷

In its consideration of research on total institutions, and the operation of contemporary juvenile detention centres as closed institutions, the Royal Commission noted that:

*Because they may also promote secrecy, and withhold information about their own operations (from children themselves, staff and external authorities) opportunities for (more extreme) abuse are enhanced, while detection efforts and meaningful responses are impeded.*⁵⁸

The Commission of Inquiry used the term Closed Institutions, and we use that term in our analysis. The Commission also noted the risks of child sexual abuse associated with the closed institutional setting of youth detention.

Sites of Conscience

The concept of Sites of Conscience developed in response to a central paradox of trauma, tragedy and cruelty: *the need to remember often competes with the equally strong pressure to forget. Even with the best of intentions - such as to promote reconciliation after trauma by "turning the page" - erasing the past can prevent new generations from learning critical lessons and destroy opportunities to establish peace now and well into the future.*⁵⁹

The International Coalition of Site of Conscience describe sites as *a place of memory - such as a historic site, place-based museum or memorial - that prevents this erasure from happening in order to foster more just and humane societies today...not only do Sites of Conscience provide safe spaces to remember and preserve even the most traumatic memories, but they enable their visitors to make connections between the past and related contemporary human rights issues. Sites of Conscience are about Preserving Memory, Promoting Truth and Pursuing Justice.*⁶⁰

Anti-epistemology

Salter and Woodcock argue that organised abuse has been relegated to the margins of criminological concern, largely because of entrenched scepticism, and a pervasive impetus to deny and turn away, rather than investigate and explore.⁶¹ They argue that Galison's concept of anti-epistemology is relevant here i.e. *the processes by which knowledge is obscured, deferred or simply never produced.*⁶²

⁵⁶ Goffman, E. *Asylums: Essays on the Social Situation of Mental Patients and Other Inmates* 1961

⁵⁷ Palmer, D. Feldman, V. McKibbin, G. *The role of organisational culture in child sexual abuse in institutional contexts* Royal Commission into Institutional Responses to Child Sexual Abuse 2016; Royal Commission Volume 15

⁵⁸ *ibid*

⁵⁹ [Home - Sites of Conscience](#)

⁶⁰ *ibid*

⁶¹ Salter & Woodcock, *op cit*

⁶² Galison, P. *Removing knowledge* Critical Inquiry 31(1) 2004

Observations

It has been our experience that adult attention commonly gravitates towards other adults, and away from children, even in child-focused work such as child protection casework. In child sexual abuse, this tendency is compounded by the wish to turn away from disowned truths.

As adults, we need to make a disciplined effort to tune into children, even more so when children are trying to tell us things that we don't want to hear, things that are painful, inconvenient and hard to believe. Without such effort, adult responses to disclosure can be characterised by cognitive dissonance, confirmation bias, and motivated blindness. We can see agencies missing, overlooking or downplaying risk in order to avoid action understood as counter to their interests, as their interests are perceived (i.e. organisational reputation). This is consistent with what we have seen so far in the Case Studies.

A striking example is Lucas' evidence to the Commission of Inquiry that neither Child Safety nor the non-government provider had inspected the house of the foster-carers, and that both agencies approach was shaped by the chronic shortage of carers. Lucas' view was that the Department and the NGO were not motivated to identify risks of abuse that could have led to deregistration of the carers.

Child sexual abuse reform in Tasmania, if it is to achieve real outcomes for children, young people and adult Victim-Survivors, will be a complex and challenging endeavour over decades.

Many senior staff gave evidence about legislative and policy changes which, they argue, mean that responses today would be very different. We know, however, that policy change does not on its own lead to behaviour change, particularly where the assumptions that drive behaviours are hard to acknowledge. Concerningly, some senior staff demonstrated limited understanding of child sexual abuse, confusion about the application of law and policy, and lack of awareness of learning from, and commitments made in relation to, the Royal Commission.

In our view, focussed leadership development is a critical component of reform.

In our view, leadership which genuinely safeguards require leaders to:

- face Institutional Child Sexual Abuse, understanding: the drivers of abuse behaviours; how Powerful Perpetrators operate; and the organisational factors which support or hinder abuse behaviours; and
- prevent Institutional Child Sexual Abuse, embedding Just Culture, putting Situational Prevention into practice, and developing Institutional Courage.

The Commission of Inquiry Report should be considered as a ‘meta-disclosure’ to the Tasmanian community.

To be successful, the Strategy needs to engage the community, and recognise the broad range of familiarity with the Report and the Government’s response to it. Many Victim-Survivors are intimately familiar with, and re-traumatised by, the experiences of child sexual abuse shared with the Commission, and the history of Tasmania’s failure to protect children. Some sections of the Tasmanian community have already formed the view that Government’s response to the Commission has been avoidant. We can reasonably expect that the ripple effect impacts much more broadly on leaders, managers, front-line workers, clients and the community.

The Australian Institute of Family Studies argues that:

*When a child discloses that he or she has been abused, it is an opportunity for an adult to provide immediate support and comfort and to assist in protecting the child from the abuse. It is also a chance to help the child connect to professional services that can keep them safe, provide support and facilitate their recovery from trauma. Disclosure is about seeking support and your response can have a great impact on the child or young person’s ability to seek further help and recover from the trauma.*⁶³

A distancing and bureaucratic approach will not take us where we need to be. The Strategy gives us the opportunity to demonstrate clearly to the community that Tasmania is committed to, and competent in, protecting children and young people from child sexual abuse, now and into the future. It gives us the opportunity to facilitate recovery for those who have already been subjected to sexual abuse as children, and to increase the confidence of children who are being sexually abuse now that they can come forward. It gives us an opportunity to rebuild trust and confidence in Government and Non-Government service providers that they are alert to the ever-present risk that their staff includes among them people who will opportunistically, and people who will strategically, abuse children. It gives us an opportunity to assure Victim-Survivors that we *share the burden of pain*, and that we intend to demonstrate *action, engagement, and remembering*.

⁶³ Australian Institute of Family Studies *Responding to children and young people’s disclosures of abuse* 2015

Key Concepts **Powerful Perpetrators**
Just Culture
Situational Crime Prevention
Institutional Courage

Powerful Perpetrators

Eroga et al argue that there are critical differences between the strategies used by, and the organisational response to, *powerful perpetrators* as compared to more junior members of institutions. ⁶⁴ They argue that powerful perpetrators use position, reputation, wealth and power to *hide in plain sight*, and that there is virtually no research literature focussing on this cohort of abusers. Noting that the UK tradition of individual Serious Case Review is not present in Australia or the US, the study used case studies from the Royal Commission, UK Serious Case Reviews, and US media reports. They compared strategies used by powerful perpetrators to those used by less powerful perpetrators, and found a series of significant differences, including:

- using an organisational or external position of power to gain the trust of staff;
- making clear to others that their behaviour was above question; and
- using anger, denial, and power to lessen the chance that their behaviour will be reported.

They note that in a number of cases, despite being reported for child abuse within an organisation, powerful perpetrators were supported in their career. ⁶⁵

Just Culture

The concept of a 'just culture' began to influence healthcare following the publication in 2020 of *To Err is Human: Building a Safer Health System*. Key findings of the research were that medical error is common, mistakes are inevitable, we need to consider system failings alongside human error, and we need to create cultures in which reporting rather than covering up error is the default stance. ⁶⁶

A just culture is one which recognises that systems, culture and human error lead to mistakes. Punitive approaches which blame all mistakes on individuals leave faulty systems untouched. 'Blame-free' approaches which place all responsibility on the system and none on the practitioner are also not the answer. The Royal Commission into Institutional Responses to Child Sexual Abuse and the Commission of Inquiry into the Tasmanian Government's Responses to Child Sexual Abuse in Institutional Settings clearly demonstrate that the behavioural choices of some employees include opportunistic and planned child sexual abuse, grooming and child sexual exploitation. ⁶⁷

⁶⁴ Eroga, M. Kaufman, K. Zatzkin, J. G. *Powerful Perpetrators, hidden in plain sight: an international analysis of organisational child sexual abuse cases* Journal of Sexual Aggression 2019

⁶⁵ *ibid*

⁶⁶ Institute of Medicine *To Err is Human: Building a Safer Health System* 2000

⁶⁷ Sexual Assault Support Centre *Clinical Governance Framework* 2024

Situational Crime Prevention

The Australian Institute of Crime Prevention describes situational crime prevention as a primary prevention measure directed at stopping crime before it occurs; the focus of situational crime prevention is on reducing *crime opportunities*.⁶⁸ Professor Stephen Smallbone notes that situational crime prevention represented a move away from considering all crime as a deliberate act committed by *an already motivated or criminally disposed offender* to recognising that criminal behaviour can occur through a coincidence or combination of individual and situational characteristics: *this perspective accounts for why otherwise ordinary people, not just those who are especially criminally disposed, sometimes also commit crimes, even serious violent and sexual crimes*. Crimes can be prevented by reducing opportunity and removing precipitating factors.⁶⁹

⁶⁸ [Understanding situational crime prevention | Australian Institute of Criminology \(aic.gov.au\)](#)

⁶⁹ Smallbone, S. *Situational Crime Prevention* National Organisation for the Treatment of Abuse 2019

Attachment I: Methodology

We completed a full scan of the Report, and identified 42 Case Studies which directly or indirectly shared the Victim-Survivor experience. Those Case Studies are detailed in Table 1 below. We applied the research principle of triangulation to our analysis of the Case Studies.

Table 1: Case Studies included in our analysis

Volume	Case Study
3	(Case study) Katrina
3	(Case study) Jeremy
3	(Case study) Brad
3	(Case study) Sam
3	(Case study) Andy
3	(Case study) Kerri
3	(Case study) Mark
3	(Case study) Wayne
4	(Case example) Orson and Ivan
4	(Case example) Linda
4	(Case example) Brett
4	(Case example) Addison
4	(Case example) Hudson
4.1.2	Detailed analysis of 22 OOHC cases
4.3.1-4	Four suspensions
4	(Case example) Azra
4	(Case example) Faye
4	(Case example) Lucas
5	(Case example) Warren
5	(Case example) Charlotte
5	(Case example) Fred
5	(Case example) Oscar
5	(Case example) Simon
5	(Case example) Erin
5	(Case example) Jane
5	(Case example) Otis
5	(Case example) Brett
5	(Case example) Ben
5	(Case example) Eve
5	(Case example) Max
5	A complaint by Max (a pseudonym)
5	Case Study 1: 3.13 Common Themes
5	Harmful sexual behaviours: Max, Henry, Ray
5	Allegations of child sexual abuse against staff at AYDC: 6.2 Walter
5	8.2 Ira
5	8.3 Lester
5	8.4 Stan
5	8.5 Enduring themes we saw in our case examples
5	9.9 Reflections on the Department's responses to Ira, Lester and Stan
5	14.1 Our observations of responses from 2021 onwards
6	James Griffin
6	A complaint against Dr Tim (a pseudonym)

Triangulation

Triangulation is a core element of qualitative research, allowing researcher to test the validity of their analysis by considering the subject of inquire through a variety of lenses. There are four types of triangulation: (a) method triangulation; (b) investigator triangulation; (c) theory triangulation; and (d) data source triangulation.⁷⁰ I propose to rely on investigator triangulation in Phase I of this work.

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. This reduces the risk of bias, and increases the validity of findings.⁷¹

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⁷⁰ Denzin, N.K. (2012) Triangulation 20. *Journal of Mixed Methods*, 6; Flick, U. (2004) Triangulation in qualitative research, in *A Companion to Qualitative Research* (ed. U. Flick, E. von Kardoff, and I. Steinke)

⁷¹ Aransiola, O.J. (2024) Triangulation in Research researchmethods.net