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ADDRESSING THE NEEDS OF THOSE WHO HAVE EXPERIENCED ABUSE IN CARE AS CHILDREN: IMPLICATIONS OF FINDINGS FROM THE ROYAL COMMISSION*

HON JUSTICE PETER MCCLELLAN AM**

The Royal Commission into Institutional Responses to Child Sexual Abuse has been instrumental in “changing the conversation” around sexual abuse. Our public hearings in particular have brought widespread attention to the nature and extent of institutional child sexual abuse, and have helped to reduce the stigma associated with it. The following article is based on an address given at the Association of Children’s Welfare Agencies National Conference in Sydney on Monday 15 August 2016. It shows that a profound change in public attitudes towards children has taken place — from a time when the norm of “children should be seen but not heard” prevailed, to today’s increasing acceptance of a child’s special vulnerability to harm. With greater recognition that children should participate in decisions that affect them, and that they deserve equal protection, institutions are reforming and internalising “child-safe” practices. We are at an important point in the social history of children in Australia.

* Editor’s note: The following article is a written publication of an address provided by the Hon Justice McClellan AM at the Association of Children’s Welfare Agencies National Conference in Sydney on Monday 15 August 2016. As a consequence, this article does not conform to general *Journal* standards with concern to referencing and format. Respectively, the speech is confined to the date it was given and does not include more recent developments.

**The Hon Justice McClellan AM is the Chair of the Australian Royal Commission into Institutional Responses to Child Sexual Abuse, and a Judge of Appeal in New South Wales. Prior to this, he was the Chief Judge at Common Law of the Supreme Court of New South Wales, having been appointed to that position in 2005. He holds degrees in both Arts and Law from the University of Sydney.

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I INTRODUCTION

On 26 September 1924 in Geneva an event of great significance occurred. The League of Nations adopted the first international human rights document concerned specifically with the rights of children: *The Geneva Declaration of the Rights of the Child* of 1924. Through that document humanity declared formally, and for the first time, that it ‘owes to children the best that it has to give’.

The 1924 Declaration was later to form the basis of a more comprehensive document: *The Geneva Declaration of the Rights of the Child* of 1959.¹ Proclaimed by the General Assembly of the League’s successor, the United Nations, the preamble to the declaration affirmed that children were entitled to those rights set down for all people in the *Universal Declaration of Human Rights*,² while recognising that ‘the child by reason of his physical and mental immaturity, needs special safeguards and care’.³

The Geneva declarations were later embedded into the Preamble of what has become the most ratified treaty in the world: *The Convention on the Rights of the Child*.⁴ Through this document the rights of children are articulated far more comprehensively and with

¹ *Declaration of the Rights of the Child*, GA Re 1386(XIV), UN GAOR, 14th Session, 841st Plen Mgt, Agenda item 64, Supp No 16, Un Doc A/4354, (20 November 1959).

² *Ibid* Preamble para 2.

³ *Ibid* Preamble para 3.

⁴ *Convention on the Rights of the Child*, opened for signature 20 November 1989, 1577 UNTS 3 (entered into force 2 September 1990).

a greater level of sophistication than ever before. Whereas the length of the 1924 Declaration is roughly half a page and is comprised of five principles, the 1990 Convention is an extensive document made up of over 50 articles setting out the obligations of State parties.

The Australian Government ratified the *Convention on the Rights of the Child* in December 1990. The adoption of the Convention has both symbolic significance and practical consequences in Australia. It has been a critical step in our society, being prepared to look at the manner in which the obligations owed to children have been met, acknowledge wrongdoing, and provide practical means to redress those wrongs and assist in the healing of those who have suffered.

The growing willingness to recognise the rights of children has occurred against a background of profound social change. When the Royal Commission first sat on 3 April 2013 I said:

Australians of recent generations have lived through a period of rapid change across many aspects of society. Many changes can be identified. One which is important for the work of this Royal Commission is our preparedness to challenge authority and the actions of those in power in areas where would not previously been contemplated. We have seen significant changes in the manner in which power is distributed throughout the community. The women's movement and the fact that women now hold positions of responsibility in government and business are markers of many of the changes which have occurred. These changes have brought with them a need and capacity to reflect on the functioning of institutions and the behaviour of individuals within those institutions.

A picture is emerging for us that although sexual abuse of children is not confined in time — it is happening today — there has been a time in Australian history when the conjunction of prevailing social attitudes to children and an unquestioning respect for authority of institutions by adults coalesced to create the high-risk environment in which thousands of children were abused.

The societal norm that “children should be seen but not heard”, which prevailed for unknown decades, provided the opportunity for some adults to abuse the power which their relationship with the child gave them. When the required silence of the child was accompanied by an unquestioning belief by adults in the integrity of the carer for the

child, be they youth worker, teacher, residential supervisor or cleric, the power imbalance was entrenched to the inevitable detriment of many children. When, amongst adults, who are given the power, there are people with an impaired psycho-sexual development, a volatile mix is created.

Although the primary responsibility for the sexual abuse of an individual lies with the abuser and the institution of which they were part, we cannot avoid the conclusion that the problems faced by many people who have been abused are the responsibility of our entire society. Society's values and mechanisms which were available to regulate and control aberrant behaviour failed. This is readily understood when you consider the number of institutions, both government and non-government, where inadequate supervision and management practices have been revealed and acknowledged by contemporary leaders of those institutions. It is confirmed by the development, in recent years, of regulatory control by government over many institutions which provide for children, and the development of education programs and mechanisms by which problems can be more readily brought to attention. The most obvious is Working With Children regulations, but there are many others. I am sure that we all hope that from the tragic personal stories and institutional failures revealed in our public hearings the community will be reminded that both individual institutions and governments failed in their responsibility for children. Where once silence was demanded, a child's complaint, however tentative in its communication, must be heard and given an appropriate response. Whatever the nature of the institution and however its members are respected by the community we must all accept that there may be members of trusted institutions who fail in their duty towards children. The power of the institution must never again be allowed to silence a child or diminish the preparedness or capacity of adults to act to protect children.

II ROYAL COMMISSION UPDATE

The Royal Commission has now held 42 public hearings. Public hearings have a significant role in driving institutional and regulatory change. Many institutions who have not themselves been the subject of a public hearing have already responded to the problems revealed in similar institutions and have implemented change or reviews intended to improve the safety of children in their care.

Hearings have been held in every state in Australia. We will soon commence our 43rd public hearing — an inquiry into the response of Catholic Church authorities in the Maitland-Newcastle region to allegations of child sexual abuse by clergy and religious.

The Commissioners have now listened to the personal stories of more than 5500 survivors in private sessions. For those of you who are not aware, a private session with one of our Commissioners provides an opportunity for a survivor, or a survivor's family member, to tell their story of abuse in a protected and supportive environment. It is the primary way for the Commissioners to bear witness to the abuse and trauma inflicted on children who suffered sexual abuse in an institutional context.

A further significant component of work is our research and policy development program. This has had the assistance of national and international experts across many disciplines. The program has four broad areas of focus: prevention, identification, response, and justice for victims.

As of July, the Commission has published 26 research reports and two consultation papers. We have released 11 issues papers and received over 850 submissions in response to those papers.

We have also released two final reports: our Working with Children Checks Report was released in August 2015 and contains 36 recommendations; and our Redress and Civil Litigation Report was released in September 2015 and contains 99 recommendations.

I have now referred over 1600 matters to authorities, mainly police, with a view to the possible prosecution of an offender. Many have resulted in charges and arrests. We have been advised that over 60 prosecutions have commenced as a result of these referrals.

III A ROYAL COMMISSION FOR ALL OF AUSTRALIA

The Royal Commission which I chair is a Commission for all of Australia. It is, in fact, seven Royal Commissions. We have a letters patent from the Commonwealth and from every state in Australia.

This national focus is of significance. If we are to start by accepting, as I believe we must, that all Australian children deserve to be equally protected, then the challenges of federalism become immediately apparent. An almost inevitable consequence of multiple

parliaments, and multiple bureaucracies, is that across the jurisdictions inconsistent law and policy emerges.

Inconsistency is problematic not only in relation to protecting children from abuse. Similar challenges emerge for survivors in their attempts to pursue justice through the criminal or civil law or through alternative redress mechanisms.

In an oft-quoted passage, Justice Brennan has observed that '[i]nconsistency is not merely inelegant' but suggests 'an arbitrariness which is incompatible with commonly accepted notions of justice'.⁵

Consistency has emerged as a key theme in the final reports we have already published.

In relation to Working with Children Checks, the present position is that each state and territory has its own scheme. The schemes are inconsistent, complex, and operate independently of each other. The consequence is that children are being afforded different levels of protection depending on the state or territory in which they are located. I have previously described the lack of a national framework for Working with Children Checks as 'a blight upon the communities' efforts to provide effectively for the protection of children'.

In our report we recommended a national approach. That approach would involve the establishment of a centralised database. The effect would be one accreditation which would operate across jurisdictions. We also identified a set of standards so that key aspects of Working with Children Checks regimes are dealt with in the same way. There would be consistency with respect to who requires a check and how a person's records are accessed.

In relation to redress, the fundamental need identified in the report is for a single national redress scheme to be established by the Australian Government but funded by the institutions in which survivors were abused. A national scheme fulfils a key requirement necessary to ensure equal justice for survivors; it ensures that survivors would be treated equally regardless of the institution, or place in Australia, in which they were abused.

⁵ *Re Drake and Minister for Immigration and Ethnic Affairs (No 2)* (1979) 11 FLR 203.

Regulation and oversight of institutions is a further area in which consistency emerges as an important issue.

IV REGULATION AND OVERSIGHT

Our terms of reference require us to inquire into, among other things, 'what institutions and governments should do to achieve best practice in encouraging the reporting of, and responding to, reports or information about allegations, incidents or risks of child sexual abuse and related matters in institutional contexts'.

Across Australia there are a range of oversight bodies that monitor aspects of child welfare, in particular the welfare of children in the care and protection system. These include Ombudsmen Offices, Reportable Conduct Schemes, Children's Commissions, Community Visitors Schemes, Child Advocates and Children's Guardians, and Crime and Misconduct Commissions.

There are also various regulatory mechanisms in place in Australia. The larger regulatory bodies include non-government schools accreditation boards, early childhood and care regulators, and medical sector regulators. These bodies also have different features across jurisdictions.

The Commission is concerned with examining what these different approaches to the regulation and oversight of institutions that exist amongst the jurisdictions means for the protection of children. Accordingly, we have commissioned research on this issue which we intend to publish in due course.

I can share with you today some preliminary findings from that research undertaken for the Royal Commission by Professor Ben Mathews of the Queensland University of Technology. In relation to the six types of oversight bodies mentioned previously, Professor Mathews found there is a great deal of variation in the presence, nature, scope, and power of these bodies. The exception is Ombudsmen's Offices which are largely similar. Several of these bodies or mechanisms do not exist in every jurisdiction and no Australian state or territory has a dedicated Children's Ombudsman. Differences in these bodies arise from differences in their constitutive legislation. That legislation sets out the parameters within which each body operates. In addition, State and Territory Governments invest more heavily in some agencies than others. Some of these bodies,

will as a result, have features and resourcing that allows for greater oversight of relevant institutions. Currently New South Wales is the only jurisdiction to have a reportable conduct scheme. And Queensland appears to have the most extensive community visitors' scheme. With the exception of the reportable conduct scheme, which is focused on institutional child sexual abuse, the research appears to indicate that, overall, there does not appear to be either frequent or wide-ranging engagement by oversight bodies with matters concerning institutional child sexual abuse.

Preliminary findings regarding regulatory bodies covering non-government schools, early childhood education and care, and the medical sector have some common positive elements, such as criminal history checks. However, they approach some important areas, such as staff training about child sexual abuse, very differently.

There are related concerns in respect of the regulation of smaller organisations such as sporting, cultural, arts, and recreation groups. These organisations are largely self-regulated but there are large numbers of children involved in their activities. Recent data shows that in NSW alone, in the 12 months prior to April 2012, almost 539 000 children aged between the ages of five and 14 participated in at least one sport outside of school hours. There is a risk of child sexual abuse occurring in any of these institutions although this risk will vary depending on the context. Our recent public hearings into performing arts centres (Case Study 37) and sporting clubs and institutions (Case Study 39) have focussed on these issues. We will be publishing our reports on these cases studies in the coming months.

V REGULATION AND OVERSIGHT OF OUT-OF-HOME CARE

Inconsistencies between the states' and territories' regulation and oversight systems also exist in relation to out-of-home care. This is despite the adoption of the National Standards for Out-of-Home Care. Across the country there are different service provider accreditation systems, mandatory reporting requirements, and complaint management systems. This means that children receive different levels of protection, care, and support depending on their circumstances and geographical location.

Following our Consultation paper on out-of-home care issued in March 2016, we are considering the following issues:

- Should core oversight functions be conducted by a body external to, and independent of, the relevant jurisdiction's lead department and all service providers?
- Should independent oversight of complaints handling be conducted by a body independent of the lead department and all service providers? That is, should a 'reportable conduct scheme' be implemented in each jurisdiction?
- Should there be nationally consistent minimum standards for assessing and authorising all carers?
- Should the accreditation of all government and non-government out-of-home care providers be to a nationally consistent minimum standard?
- Should there be a body that is responsible for assessing and granting applications for accreditation, independent of the relevant jurisdiction's lead department?
- Should the accreditation body retain ongoing responsibility for monitoring accredited providers to ensure their continued compliance with the conditions and standards of their accreditation?
- Should all carers be reassessed on a regular basis?
- Should there be a register of carers in each jurisdiction, containing relevant information about all applicant and authorised carers?

The current approach to regulation and oversight, in the out-of-home care space and more broadly, appears to be far from consistent. If our goal, as a society, is to do our best to protect all children from child sexual abuse then these inconsistent systems are impossible to justify. The safety of a child should not depend on the state or territory in which they reside. There can be little doubt that there is time for greater uniformity in relation to regulation and oversight mechanisms across the nation.

VI OUT-OF-HOME CARE

Out-of-home care is an area of central concern to the Royal Commission. It will not come as a surprise to you that of all the categories of institutions identified by people who have had private sessions with us, out-of-home care is the largest. Our latest analysis

indicates that 43 per cent of victims in private sessions reported sexual abuse in out-of-home care. However, it is important to understand that this category includes historical care institutions such as orphanages and homes that no longer exist, as well as contemporary out-of-home care environments such as foster care.

There were more than 43 000 children in out-of-home care in 2014 in Australia. There has been an 82 per cent increase nationally in the number of children in care over the past decade. We have heard concerns that the current out-of-home care system does not adequately protect children from sexual abuse, or respond as well as it should when abuse occurs. We know that children in out-of-home care are at a heightened risk of sexual abuse.

The task of preventing and responding to child sexual abuse in out-of-home care has often been limited to sexual abuse perpetrated by foster carers, residential care staff, and professionals. Notwithstanding the importance of remaining vigilant about this risk, two other forms of child sexual abuse require more attention in order to properly protect children in care. These are child sexual exploitation and child-to-child sexual abuse.

Child exploitation is concerned with when children are coerced or manipulated into engaging in sexual activity in return for something such as alcohol, money, or gifts. The perpetrator often initially grooms children for this abuse online. The sexual exploitation of children in care, particularly residential care, is a serious problem in out-of-home care. It raises a number of issues including:

- The lack of coordinated and cross-sector protocols, procedures, and responses particularly among out-of-home care service providers, child protection services, and the police
- The lack of preventative measures, such as strategies for when children are missing from their placement; and the enforcement of social media policies and education within out of-home care, child protection services, and the police
- The need to address the barriers to children disclosing sexual exploitation

We have heard in public hearings that child-to-child sexual abuse is a serious and common problem in contemporary out-of-home care.

We have been informed that when a child first enters care, trained professionals need to make thorough assessments and placement matching decisions. We understand that children with sexually harmful behaviours, their carers and their families, need adequate and timely access to specialised trauma-informed services and support programs.

Evidence before the Commission suggests that placement and treatment options for children need to be identified, strengthened, and implemented in every state and territory, to address the complex needs of children with sexually harmful behaviours.

We have been told that more needs to be done to better protect children from, and respond to, issues of child-to-child sexual abuse in out-of-home care. We are specifically considering:

- The shortage of home-based care for children with sexually harmful behaviours
- Inappropriate matching of these children with other vulnerable children in residential and home-based care
- The insufficient treatment responses for children across Australia who display sexually harmful behaviours
- The lack of policies, procedures, and/or best practice guidelines for preventing and responding to child-to-child sexual abuse in out-of-home care
- The lack of nationally consistent accreditation and professional development training for counsellors working in this field
- The shortage of expert advice and assistance for foster and kinship/relative carers
- Carers receiving insufficient information about the child's background
- The lack of nationally consistent identification and terminology in relation to child-to-child sexual abuse in out-of-home care, and the resulting impacts on data collection and knowledge

All these issues were explored in detail in our recent consultation paper on out-of-home care. We have published 55 submissions in response. They are currently being

considered and will help inform our final recommendations, which will be published in December next year.

VII CHILD-SAFE ORGANISATIONS

A key aspect of the work of the Commission is to identify what makes an institutions “child-safe”.

The concept of “child-safe” would be familiar to most of you. However, if placed in the social history of institutionalised care of children, it is relatively recent. The idea of a child safe organisation emerged in Australia in the last decade in response to increased community awareness of the vulnerability of children to harm, including children in care of institutions. This awareness arose partly in response to high profile cases of, and public inquiries into, child maltreatment in institutional settings.

Through our work we have been repeatedly presented with examples of institutions failing to keep children safe from abuse. We have identified problems in leadership, governance, and culture. We have seen problems with implementing child-safe policies. We have seen problems with complaint handling and identifying the needs of vulnerable children, amongst others.

Over some months, we have worked to identify specific elements that organisations should adopt in order to be child-safe. This has involved an extensive analysis of available research and evidence. We identified a preliminary list of elements which we considered fundamental to a child-safe institution. We had these elements tested in a research study that obtained feedback from a panel of 40 Australian and international experts. This group included academics, children’s commissioners and guardians, regulators and other child safe industry experts and practitioners. The panel agreed that the elements we had identified were relevant, reliable, and achievable. The research study, ‘Key Elements of a Child Safe Organisation Research Study — Final Report’, will be published on our website in due course.⁶

⁶ This Final Report is now available, see: Kylie Valentine et al, ‘Key Elements of a Child Safe Organisation Research Study — Final Report’ (Report, University of New South Wales, June 2016) <<http://childabuseroyalcommission.gov.au/getattachment/5d988506-a260-4b7a-b5bc-4f5555f2d2ca/Key-Elements-of-Child-Safe-Organisations>>.

The Royal Commission's final report will include an entire volume on making institutions child safe. However, by publishing this research study and disseminating the child safe elements now, institutions can work on strengthening their child safe practices without having to wait for our final recommendations.

The 10 elements that we have identified are:

- Child safety is embedded in institutional leadership, governance, and culture
- Children participate in decisions affecting them and are taken seriously
- Families and communities are informed and involved
- Equity is promoted and diversity respected
- People working with children are suitable and supported
- Processes to respond to complaints of child sexual abuse are child focused
- Staff are equipped with the knowledge, skills, and awareness to keep children safe through continual education and training
- Physical and online environments minimise the opportunity for abuse to occur
- Implementation of child safe standards is continually reviewed and improved
- Policies and procedures document how the organisation is child-safe

We are now considering the best way to implement these child-safe elements. This must involve consideration of the role of the Commonwealth, State and Territory governments in the implementation of child-safe elements, and in ensuring ongoing commitment to them. While we have not finalised our recommendations, we have identified a number of relevant factors. Child-safe standards should be nationally consistent, and that there should be some form of compliance mechanism. Compliance should be monitored and enforced.

VIII LISTENING TO, AND BELIEVING, CHILDREN AND YOUNG PEOPLE

Society's shifting attitudes towards children have come to value the importance of giving children and young people a voice. Article 12 of the *Convention on the Rights of the Child*

requires State parties 'to assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child'.⁷ As I identified earlier, taking children seriously and allowing them to participate in decisions that affect them is an important element of what makes an institution child-safe.

Children who are empowered are more likely to disclose harm. Early and safe disclosure is critical. As we have learnt, the trauma caused by being silenced or disbelieved can be as impactful as the abuse itself.

The Royal Commission has been listening to young children and young people. We have conducted 60 private sessions with people aged under 25, and a number of young people have taken part in our roundtables on schools and child safe organisations. Young people have given evidence in public hearings, including one into out-of-home care, and more recently, into performing arts centres. We have engaged with multicultural youth advocates. Commissioners have hosted workshops with young people to discuss safety in organisations. The voice of children and young people is apparent through our work and will be prominent in our final recommendations.

In line with this commitment, and to complement our work on child safe organisations, we have commissioned special research into children's views of safety.

We have published the report, 'Taking Us Seriously: Children and young people talk about safety and institutional responses to their safety concerns'.⁸ This research was conducted by the Australian Catholic University in partnership with Griffith University, the Queensland University of Technology, and Southern Cross University.

The study involved 10 focus groups with 121 children and young people conducted in a range of institutional settings including out-of-home care, schools, youth activities, and childcare centres. As well as including the direct views of children themselves, the study was guided by three children and young people's reference groups who advised the research team on methodology and analysis.

⁷ *Convention on the Rights of the Child*, above n 4, art 12.

⁸ Tim Moore et al, 'Taking Us Seriously: Children and young people talk about safety and institutional responses to their safety concerns' (Report, Institute of Child Protection Studies, Australian Catholic University, August 2015) <<https://www.childabuseroyalcommission.gov.au/getattachment/33a95fc9-0e8d-41da-ac9f-31f625794d4f/Taking-Us-Seriously>>.

Interestingly, when it comes to defining safety, children and young people differentiate between “being safe” and “feeling safe”. They assess safety differently from adults by relying more on initial immediate reactions to a person, place or experience, rather than their past experience. Children and young people generally agreed that institutions were safer when the institution focused on helping children and young people. This is demonstrated in the way adults interact with children; things children can do there; and signs that children are welcome. For example, child-friendly posters, pictures, and play areas.

Children also said institutions were safer when they valued their participation. This is demonstrated in the way adults and children interact, and the value the institution places on understanding children’s fears, concerns, needs, and wishes. It is also demonstrated by having mechanisms in place for children to complain, shape strategies, and provide feedback.

Children and young people believed institutions were safer when they provided a safe physical environment. Children felt most safe in ordered and child-friendly environments. They valued physical signs such as fences, security cameras, cameras, and locks. They felt the best way of determining whether the environment is safe is to observe how children behave there.

Children and young people felt institutions were safer when they proactively protected children and young people from unsafe people and experiences. This included identifying issues early and informing children of potential threats and hazards. It included actively communicating with children and their safety concerns, and employing safe and trusted adults. In addition, it included being open to monitoring by an external agency.

Finally, they felt institutions were safer when they employed safe and trusted adults. This included adults who are available when children and young people need them, and who are able to talk about sensitive issues. It included adults who prioritise children’s needs and concerns over the needs of other adults and institutions. It also included adults who do what they say they will do.

Earlier this year, we released a report that explores how children and young people with disability view their safety and safety needs within institutions. This research is

particularly important. To date, research in the child sexual abuse context has paid little attention to the perspectives of children from this cohort.

The study involved 22 children and young people aged between seven and 25, all of whom have a cognitive impairment; many with multiple impairments. Six family members and 10 professionals were also interviewed individually and in small groups. Researchers used a range of creative research methods to develop an understanding and experience of personal safety in institutions. This included photo elicitation, pictorial mapping, story-boards and walk-along interviews.

Not surprisingly, the report found that children and young people expressed being safe as: feeling safe and secure; being protected; not being hurt; not trusting strangers, and having some control of their situation. It found that families and professionals seek to build a sense of safety by providing a loving foundation, and building capacity and confidence. They also create safety by building networks and taking action on behalf of children and young people. Factors that help children and young people with disability and high support needs feel and be safe included being in a secure space. For most, this was home. Other factors included having friends and feeling known and valued.

However, children and young people said it can be very hard to know what is safe or unsafe. Few remembered learning about safety, either at school or anywhere else. Things that made it difficult for them to feel and be safe included the impact of having experienced various forms of abuse, and peer pressure. Being under-supported through transitions also made it difficult for them to feel and be safe.

Further, families and professionals viewed children's and young people's understanding of safety as limited. They shared concerns about how the ways in which service systems operate make it very difficult for these particular children and young people to identify trustworthy and untrustworthy people in their lives. We will be publishing research into the views of safety of children in residential care, in due course.

IX POSITIVE IMPACTS OF THE ROYAL COMMISSION

A significant amount of momentum has been created as a result of this Royal Commission. Change has been taking place at individual, organisational, and community levels. Many people who have shared their story either in a private session or in a public

hearing have reported feeling unburdened and empowered as a result. Some have described the experience as a positive step towards healing and recovery. Many organisations that have been charged with the care of children have taken positive steps towards righting wrongs of the past. Since the commencement of the Royal Commission, we have witnessed dozens of apologies from institutions big and small.

Bravehearts have reported a significant increase in the number of participants in the workshops and training programs they conduct. In the 2010/11 financial year Bravehearts trained 375 people on how to better identify and respond to child sexual abuse and other harm. The number of participants has increased in each year since 2011. In the 2014/15 financial year, Bravehearts trained 3127 people. Bravehearts founder Hetty Johnson attributes this increase to the impact of the Royal Commission.

The Royal Commission has been instrumental in “changing the conversation” around sexual abuse. Our public hearings in particular have brought widespread attention to the nature and extent of institutional child sexual abuse. In doing so, we have helped reduce the stigma associated with it. Karen Willis, the chief executive of Rape and Domestic Violence Services Australia, has said that the Royal Commission has helped remove the shame felt by victims of child sexual abuse. She says more people are calling the Rape and Domestic Violence Service as a result.

Heartfelt House provides support to adult survivors of childhood sexual abuse, their family and friends on the north coast of NSW. Executive Director Vicki Atkins says the demand on the service has tripled since the Royal Commission was announced. By November 2014, calls to Adult Survivors of Child Abuse (‘ASCA’) — now called the Blue Knot Foundation helpline — quadrupled since the start of the Royal Commission only the year before. President Dr Cathy Kezelman said the Royal Commission had encouraged more people to come forward.

Our work is leading to significant legislative change. In June this year, ACT Chief Minister Andrew Barr introduced a reportable conduct scheme to the Legislative Assembly — a law designed to force institutions to report abuse complaints to an independent authority. According to media reports, Mr Barr told the Assembly: “The Royal Commission has shown that there are still too many dark places within institutions to hide those who would harm children, and there are still those who draw the blinds

rather than face the embarrassment or damage that illumination may bring'.⁹ The ACT Ombudsman will be given new powers of oversight and scrutiny of internal investigations, essentially allowing it to prevent abuse complaints from being swept under the carpet.

In New South Wales this year the Government passed legislation removing time limitations on civil claims for child sexual and serious physical abuse. The changes will apply to past child abuse as well as child abuse that occurs in the future. The impact of this legislative change is significant. It removes barriers to civil justice for people who have suffered abuse and acknowledges the many years it can take for people to summon the courage to disclose their abuse. The Queensland Government has recently announced that it intends to introduce legislation to remove the statute of limitations for victims of child sexual abuse in institutions, such as schools. Limitation periods for child sexual abuse survivors were abolished in Victoria in 2015.

Whilst our work has generated a momentum for change, we must be aware that the Royal Commission will come to an end. Registrations for private sessions close in six weeks. We have finalised our public hearing schedule. Our work finishes in December next year. Until then we ask that you remain engaged with our work. There will be further opportunities to be involved in our policy and research initiatives over the next 12 to 18 months. We hope you will take the opportunity to respond to our consultation paper on records and record keeping to be released in August.

We expect to publish our consultation paper on criminal justice issues in September. We also expect to release further issues papers, and invite submissions on them. We also plan to hold a research symposium later this year. As researchers, educators, policy makers, advocates, front line workers, and clinicians who are committed to improving the lives of children, it will be up to you to build on the legacy of the Commission and keep up the momentum for change.

We are at an important point in the social history of children in Australia. This Royal Commission represents a once in a lifetime opportunity to acknowledge that we, the entire Australian community, failed to care for so many of our children. A failure that has

⁹ Christopher Knaus, 'Scheme set to prevent cover-up of institutional child abuse in ACT', *Canberra Times* (online), 10 June 2016 <<http://www.canberratimes.com.au/act-news/scheme-set-to-prevent-coverup-of-institutional-child-abuse-in-act-20160609-gpf85z.html>>.

had often devastating consequences. It also represents an opportunity; the opportunity for us as a nation to commit to the promise made in the 1924 Geneva Declaration — to give to children the best that we have to give.

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