

Telling stories about child abuse and neglect, and adult sexual assault

Dr Leah Bromfield & Dr Antonia Quadara
Australian Institute of Family Studies

with thanks to Professor Alan Hayes



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Story 1

Symbolic economies of victimisation



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System at fault in death of baby (Australian 21 Apr 2008)

Boy's death shames us all
(Daily Telegraph, 4 Mar 2005)

Killer mum gets baby
(Herald-Sun 27 Sep 2008)

**Abused children were left to die
(Australian 7 Sep 2006)**

Neglect or murder - either way these people are free
(Daily Telegraph, 25 Nov 2004)

**Children in protective care beaten, starved
(Australian, 27 Apr 2009)**

**Evil father used own children as sex objects
(Herald-Sun 3 Jun 2008)**



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Police charge 'hot chocolate rapist' *The Age*, August 24 2007

Five years for granny rapist, *Daily Telegraph*, 25 February 2009

'Vicious' rapist out in two years, *Canberra Times*, 17 March 2009



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33 teacher sex cases - predators in our midst (Daily Telegraph, 20 March 2009)

Jailed for school girl sex Teacher faces 18-month term
(Herald Sun, 24 May, 2008)

**44 per cent of males, 32 per cent of females
believe that rape results from men not
being able to control their need for sex
(Taylor, 2007)**

It was an horrific experience for your victim to return to her home to be confronted by you, a complete stranger armed with a bread knife, and then be subjected to your degrading and humiliating behaviour for a sustained period. (Victorian County Court Case)



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Story 2

Vulnerability to victimisation



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Gender-based vulnerability

- **For both groups gender is a key vulnerability for sexual abuse/assault:**
 - ◆ Males and females experience child sexual abuse and sexual assault
 - ◆ Girls 3 times more likely to be the subject of a substantiated case of child sexual abuse than boys
 - ◆ Women 3.5 times more likely to be sexually assaulted than men over their lifetimes
 - ◆ Sexual assault against men decreases dramatically after 45 years of age



Age-based vulnerability

- **For child abuse and neglect:**
 - ◆ Infants more physically vulnerable: most likely to be fatally abused and represent almost 42% of children removed
 - ◆ Vulnerability changes over time: neglect vs. sexual abuse
- **For sexual assault:**
 - ◆ 18-34-years is the peak age for sexual assault
 - ◆ Adolescence crucial time as young people are beginning relationships and socialising differently
 - ◆ Older women continue to experience sexual assault (both by partners and in aged care facilities)



Domestic violence

- **For child abuse and neglect:**
 - ◆ Domestic violence is second most common characteristic in child protection cases
 - ◆ Witnessing domestic violence is a form of abuse
 - ◆ Emotional abuse (which includes witnessing DV) is the most commonly substantiated abuse type
- **For sexual assault:**
 - ◆ For women who had been sexually assaulted in a month period, 21.1% were assaulted by a previous partner, and 7.7% by a current partner
 - ◆ Sexual violence is commonly experienced by women in the context of domestic violence
 - ◆ Women are very reluctant to disclose this form of domestic violence



Mental health

- **For child abuse and neglect:**
 - ◆ Parental mental health problems is third most common characteristic in child protection cases
- **For sexual assault:**
 - ◆ Mental health problems are often a consequence of sexual assault
 - ◆ Poor mental health is also a factor in re-victimisation for survivors of sexual assault



Substance misuse

- **For child abuse and neglect:**
 - ◆ Parental alcohol and drug (licit and illicit) misuse is **the** most common characteristic in child protection cases
- **For sexual assault:**
 - ◆ Alcohol remains a central facilitator voluntarily consumed in social contexts
 - ◆ Most common form of drink-spiking is the addition of extra alcohol in drinks (rather than drugs).



Disability

- **For both groups disability is a key factor:**
 - ◆ Vulnerability increased by individuals' cognitive impairment and inability to communicate clearly
 - ◆ US population-based study, children with disabilities 3.4 times more likely to be maltreated than non-disabled peers
 - ◆ Women with an intellectual disability are 50-90% more likely to be subjected to a sexual assault than women in the general population
 - ◆ Perpetrators are more likely to target disabled for child sexual abuse and sexual assault as they are less likely to be detected



State and institutional care

- **For child abuse and neglect:**
 - ◆ Multiple Inquiries highlighted problems of abuse in care (e.g. Qld CMC; SA Mullighan)
- **For sexual assault:**
 - ◆ Women in institutional care experience high levels of sexual violence
 - ◆ Women in correctional facilities have significant histories of child and adult sexual assault
 - 90% of Aboriginal women and 82% of non-Aboriginal women in prison have been sexually abused;
 - 42% of women in Queensland prisons had histories of sexual abuse prior to the age of 16



Aboriginal and Torres Strait Islanders

- **For child abuse and neglect:**
 - ◆ Aboriginal and Torres Strait Islander children over-represented in:
 - child protection (**6 x more likely** to substantiated)
 - out of home care (**9 x more likely** to be in care)
 - ◆ Several Inquiries shown sexual abuse significant problem - but under-reported
- **For sexual assault:**
 - ◆ Aboriginal and Torres Strait Islander women are **35 times more likely** to be hospitalised due to family violence-related assaults (includes sexual assaults) than non-Indigenous women



Concentrated disadvantage

- **Area and Socio-economic disadvantage**
 - ◆ Child protection concentrated in families and neighbourhoods with the greatest levels of poverty
 - ◆ Concentration because individual families with the poorest outcomes typically end up living in the poorest areas (e.g., public housing estates)
 - ◆ Recent study using LSAC data showed neighbourhoods have a unique influence on children's outcomes
 - ◆ This finding is consistent with international research



Story 3

Trauma



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Applying trauma theory

- **Trauma, Attachment & Development**
- **Discourse**
 - ◆ Recognised impacts
 - ◆ Trauma as sign of abuse/neglect
 - ◆ Avoid traumatic events by prevention or detection
- **Recovery v. PTSD & treatment**
- **Discourse**
 - ◆ Empowerment
 - ◆ Choice
 - ◆ Agency
 - ◆ Privacy
 - ◆ Treat impacts of trauma



Impact of trauma

- **For victim/survivors of child abuse and neglect and sexual assault:**
 - ◆ Experience a major traumatic event
 - ◆ Often repeated maltreatment/assaults (complex/chronic trauma)
- **Trauma is associated with range of adverse outcomes**
 - ◆ Poor physical and mental health
 - ◆ Reduced capacity for social participation and functioning (e.g. labour force participation, social isolation)
 - ◆ Reduced wellbeing
- **'Risky' behaviours often way of responding or coping with trauma (e.g. D&A to minimise traumatic memories)**



Story 4

Who harms women & children?



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Who harms women & children?

● Child Sexual Abuse

- ◆ a study of 205 extra-familial child sex offenders in Melbourne revealed that 85% were aged from 20 to 50 years

● Child Maltreatment

- ◆ Both mothers and fathers physically abuse children (sometimes other relatives)
- ◆ neglect is predominantly perpetrated by biological parents



Child Abuse, Child Sexual Abuse and Sexual Assault

	Male						Female		
	Family member	Other relative	friend	ExPartner	Current Partner	Other known	Unknown	Family Member	Other relative
Sexual assault over 15*	39%			21.10%	7.70%	32%	21.80%		
Child Sexual Abuse*	16.50%	35.10%	16.50%	NA	NA	26.40%	8.60%		
Child Physical Abuse	(Father) 40%				(Mother) 49%				
Child Neglect									

* Taken from Personal Safety Survey



Young people and sexual assault

Table 2. Relationship of the perpetrator to the young person

Study	Parent	Other relative	Family friend	Acquaintance/ Neighbour	Other known person (Boyfriend)	Stranger
Young People and Domestic Violence (National Crime Prevention, 2001) <i>Female</i>					14%	
Personal Safety Survey (ABS, 2006)	(Father/Stepfather)	(Male)				
<i>Female</i>	16.5 %	35.1%	16.5%	15.4%	11%	8.6%
<i>Male</i>	5% [*]	16.4%	15.6%	16.2%	27.3%	18.3%
International Violence Against Women Survey 2002 (Mouzos & Makkai) <i>Female</i>	2%	(Male) 33% [^]	(Friend/family friend) 20% [^]	17% [^]	14% [^]	13% [^]
National Survey of Adolescents (Hanson et al. 2003) <i>Both sexes</i>	(Father/Stepfather) 4.3%	17.5%		(Unrelated acquaintance) 52.8%		23.6%

* Statistic to be used with caution

[^] Percentages based on the 16% of respondents who said they had been sexually abused by a non-parent



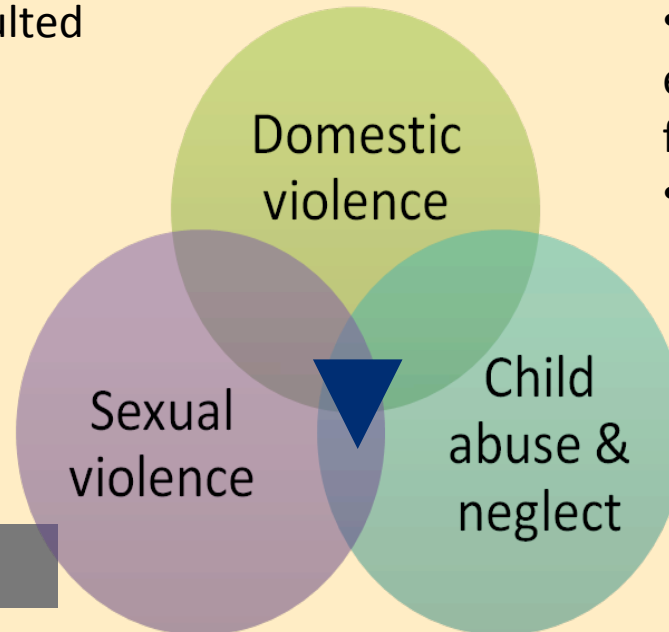
Overlapping experiences for women as victims of violence

Sexual assault and DV

- A fifth of women sx assaulted by former partner.
- 7.7% assault by current partner (none reported to police)
- Catalysts for SXA : pregnancy, separation, childbirth.

CSA

- Between 1 in 3 and 1 in 5 women have experienced CSA.
- CSA is associated with sexual assault as a young person and in adulthood.



Domestic Violence

- 23% of women have experienced violence from a former or current partner (PSS)
- Catalysts for DV: separation

- Stats on clients in CP and DV, poor mental health, secure care
- DV 2nd most common characteristic in CP cases



Story 5

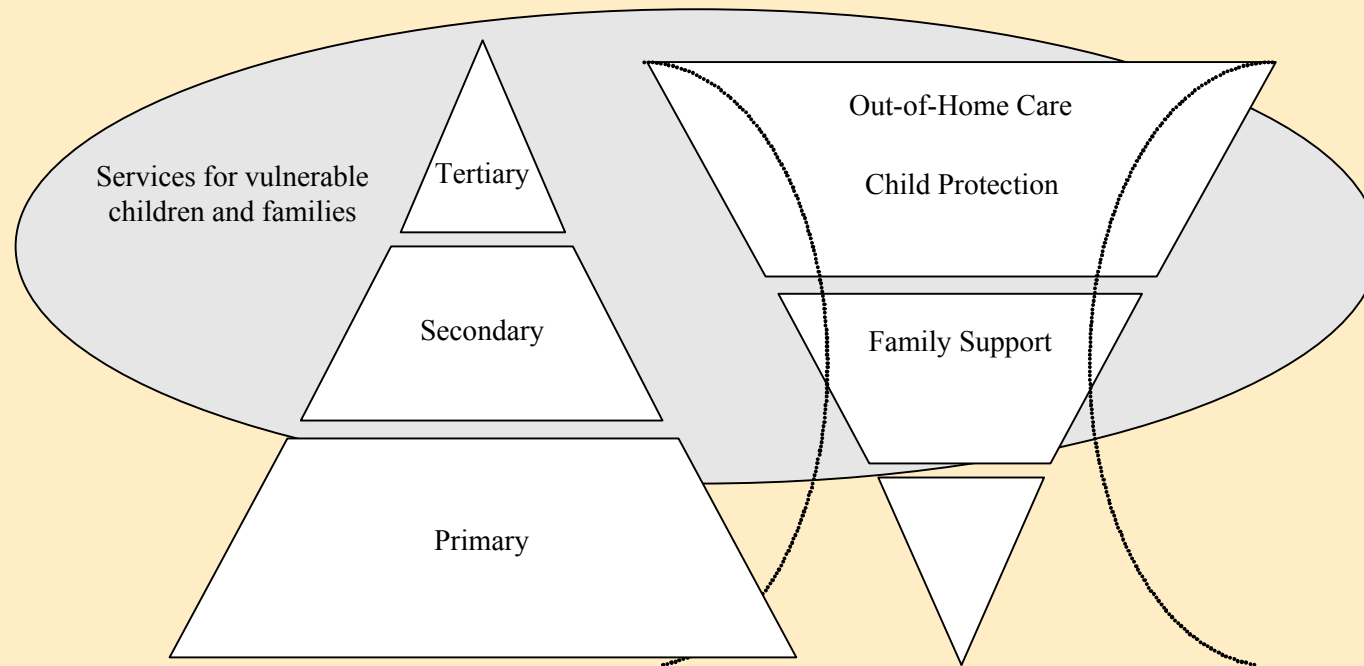
Systems responses



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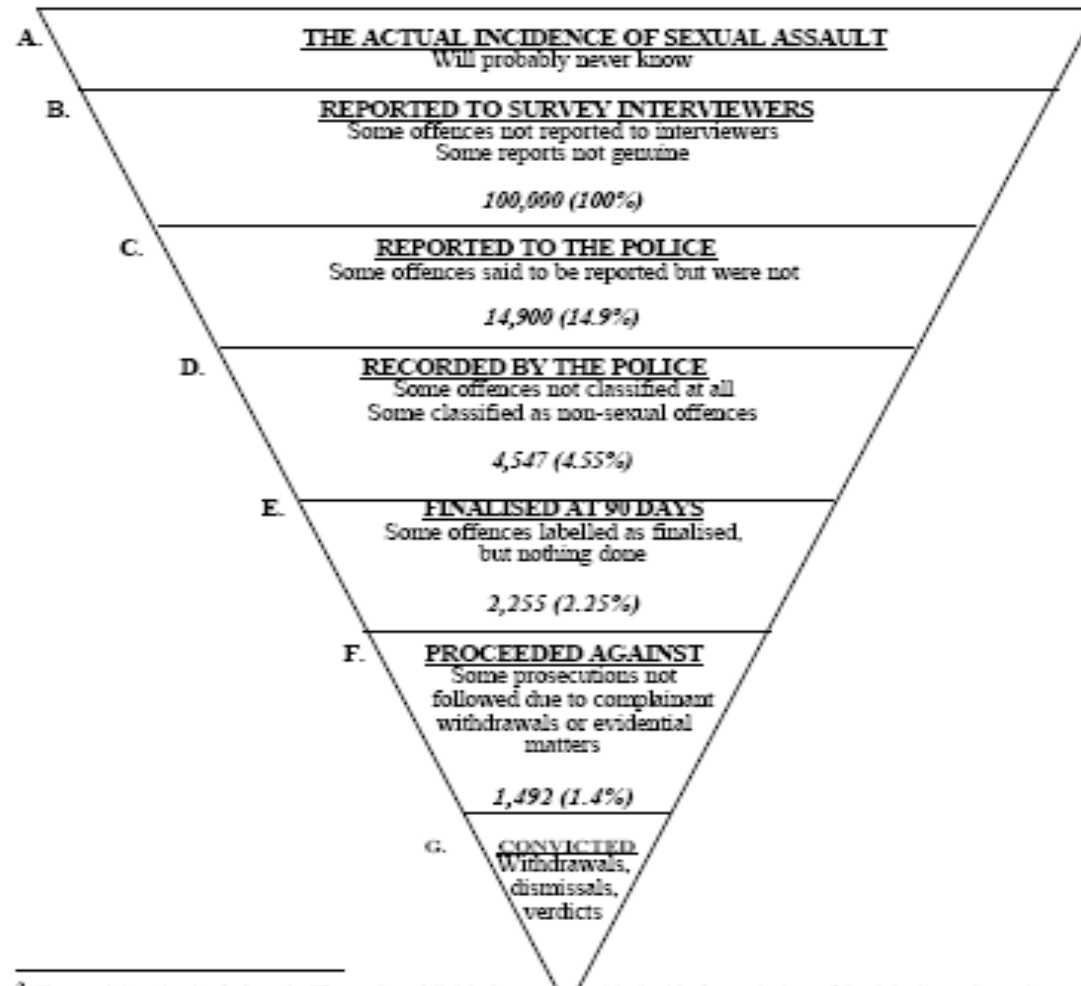
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Public health model versus expenditure



ASXA Pyramid

Figure 2. Attrition of sexual assault cases



² The model and calculations in Figure 2 and Table 3 are used with the kind permission of Pat Mayhew, Consultant Criminologist at the Australian Institute of Criminology, on secondment from the British Home Office. Box 1 details the adjustments that produced the attrition rates. Calculations based on differing data sets are likely to yield different rates of attrition.



Conclusion

- **Symbolism of victimhood**
 - ◆ Claim to reject
 - ◆ Influences systemic framing and responses
- **Points of divergence**
 - ◆ Should not be ignored as irrelevant
 - ◆ Critical reflection on where and why differ
 - ◆ Can enrich understanding of our sector



Violence across the life course

- **Examine points of intervention**
 - Prevention
 - Early intervention
 - Opportunities for intervention
(escalating up in tertiary services)
- **Systemic issues that may contribute to or ameliorate across lifespan**



Inter-sectoral collaboration

- **Shared clients**
- **Need to think about inter-sectoral collaboration**
- **Progress in**
 - ◆ DV & Sexual Assault
 - ◆ DV and Child abuse/neglect
- **Need to start having conversations between**
 - ◆ child abuse/neglect and sexual assault
 - ◆ child abuse/neglect, sexual assault, DV & other related (eg health, housing, drug treatment)



Primary prevention

- **Different systems**
- **Different challenges & change-agendas**
- **Primary prevention as shared solution**
- **Creating healthy**
 - ◆ Relationships
 - ◆ Families
 - ◆ Communities
- **Working together towards attitudinal and behavioural change**
 - ◆ Social marketing



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Level 20, 485 La Trobe St Melbourne 3000

(03) 9214 7888

National Child Protection Clearinghouse

www.aifs.gov.au/nch

Australian Centre for the Study of Sexual Assault

www.aifs.gov.au/acssa



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