



Anglicare Victoria Submission

Inquiry into the Handling of Child Abuse by Religious and Other Organisations

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1 Introduction

Anglicare Victoria was formed through an act of Parliament - the *Anglican Welfare Agency Act 1997*, which joined together three of Victoria's long-established Anglican child and family welfare agencies - the Mission of St. James and St. John, St. John's Homes for Boys and Girls and the Mission to the Streets and Lanes.

Combined, these three former agencies had over 260 years experience in providing care and support services to Victorians.

- The Mission to the Streets and Lanes commenced in 1886 providing food, shelter and pastoral care to women and children in inner-city Melbourne.
- In 1919, The Mission of St. James and St. John was established. This was originally a city mission, however, within a few years the organisation began focusing more broadly on the needs of homeless children, lone mothers and families in need.
- In 1921, St. John's Homes for Boys was established. By 1958, the home had also begun caring for young girls and changed its name to St John's Home for Boys and Girls.

Today, Anglicare Victoria is a leading social services organisation, with a total expenditure of over \$50 million. The majority of this expenditure is on Department of Human Services (DHS) funded out-of-home care services and family services. During any given week, Anglicare Victoria works with around 1000 families within our family services, and supports close to 200 foster care placements and 60 residential care and unaccompanied minor placements. However, the agency also provides a great many other community programs, many of which are funded from the agency's own resources. These include counselling and targeted therapeutic services, crisis accommodation, financial counselling and emergency aid.

To accomplish this significant work to the high standard that the agency has set for itself, Anglicare Victoria employs a staff of over 800 professionals – including social workers, psychologists and other community and welfare professionals - and works with approximately 1200 volunteers. This staff is managed through a corporate governance structure incorporating a Board, Anglicare Victoria Council, CEO, executive staff group and a hierarchy of highly experienced and qualified regional managers, program managers and team leaders. All staff and volunteers across the organisation operate within a well developed architecture of policies, procedures and accountability mechanisms, including internal and external auditing. These policies and procedures are all structured in accordance with relevant legislation, as well as professional and funding guidelines.

Anglicare Victoria is a modern, highly professionalised and robustly managed agency that provides programs supporting tens of thousands of disadvantaged children, young people and adults from diverse families and communities across Victoria. In doing this work, the agency observes its mission statement: "to create a more just society, by expressing God's love through service, education and advocacy."

It is from this standpoint of foundation, experience and capability that Anglicare Victoria makes this submission into the Victorian Parliament's Inquiry into the Handling of Child Abuse by Religious and Other Organisations. The agency is firmly of the position that every child and young person has the right to experience safety, wellbeing and healthy development. Child abuse is unequivocally wrong. It constitutes both a grave betrayal of trust, and a momentous failure in fulfilling the responsibility that all of us have to nurture and protect children and young people, whether in familial, community or organisational contexts.

2 The prevention of child abuse in organisational contexts: Anglicare's processes and recommendations

A key risk factor that has been identified in relation to child abuse is 'opportunity'. Both international and Australian research supports the notion that perpetrators of child abuse create or take advantage of opportunities to abuse children and young people (Irenyi, Broomfield, Beyer & Higgins, 2006). In one study involving 205 offenders in Melbourne, 39% of perpetrators studied had accessed children through participation in an organisation (Petraitis & O'Connor, 1999). Another Australian study of convicted child sex offenders found that 18.9% accessed their victims in organisational contexts, such as sports clubs and scouts (Smallbone & Wortley, 2001).

As with all community organisations, Anglicare Victoria can be vulnerable to infiltration by those who either have the intention to abuse children, or who are otherwise of such character that they may abuse children if presented with sufficient opportunity. Furthermore, given the nature of Anglicare Victoria's child, youth and family focused programs, much of the work in which agency staff and volunteers engage must necessarily take place in private locations such as people's homes, residential care facilities and other community spaces.

Sadly, it is this necessity which underlies community organisations' vulnerability to infiltration by child abusers. Additionally, organisations like Anglicare Victoria who provide out-of-home care programs face the risk of psychosocially unwell young people in foster or residential care perpetrating abuse against other children with whom they are placed. In recognition of these risks, Anglicare Victoria has adopted a series of agency-wide supervision, education and accountability procedures which operate to maximise safety by minimising opportunities for abuse to occur. As researchers into child abuse within institutional contexts have stated, 'the task of protecting children in the care of organisations is multi-faceted. It requires attention to three key areas. These are:

- Administrative functions (ensuring adoption of the latest screening and other personnel practices);
- Physical environments (to reduce opportunities for situational maltreatment);
- Organisational culture (creating a child-focused environment of respect) (Irenyi, Broomfield, Beyer & Higgins, 2006, p. 16).'

2.1 Protection measures employed in Anglicare Victoria

2.1.1 Screening and personnel practices

With regard to the use of screening and other personnel practices, Anglicare Victoria complies fully with relevant DHS guidelines, as well as legislation such as the *Working with Children Act 2005*.

In accordance with these, Anglicare Victoria requires that:

- All staff and volunteers undergo and maintain a current national police check, and Victorian Working With Children Check, before they are allowed to engage in agency work.
- All carers who provide out-of-home care to children and young people through Anglicare Victoria are registered with DHS, as per their guidelines. Such registration is removed in cases of misconduct, resulting in exclusion from being allowed to provide further out-of-home care for children.

For carer registration to be successful, the carer must pass a complete criminal history check and working with children check. Furthermore, before Anglicare Victoria places any child or young person with a carer, the agency requests what is known as a 'disqualification check' of that carer, which is facilitated by DHS as part of their carer registration facility, and involves another criminal history check and Working With Children Check being carried out. This ensures that both DHS and Anglicare Victoria possess the most up-to-date criminal-records history about any carer who is being considered for a placement.

Along with screening processes being applied to each carer, they are also applied to any adults (including the carer's biological children and relatives) who may reside, even temporarily, within the carer's household. Such individuals are required by Anglicare Victoria to pass a Working With Children Check, as are any babysitters that the carer may use from time to time.

Furthermore, Anglicare Victoria has in place a babysitting policy, which requires that, in addition to passing a Working With Children Check, babysitters must be chosen on the basis of having a positive approach to behaviour management, and agree not to use corporal punishment of any kind on children and young people under their supervision. Decisions about the use of babysitters are negotiated with case managers.

The overall thrust of the above procedures is to ensure that Anglicare Victoria and DHS can effectively screen out any individuals with concerning criminal histories when making decisions about who will have contact with children and young people within their care settings. This is a very important initiative in preventing child abuse, however, we believe that decision-makers involved in this Parliamentary Inquiry should consider two caveats with regard to it.

Firstly, as researchers into child abuse within institutional contexts have stated, 'Screening is not without its limitations. Such practices rely on previous offences [and]... Research has also indicated that, when charged, the majority of perpetrators detected do not have prior convictions for any form of child maltreatment, and thus would not have been detected by screening processes (Irenyi, Broomfield, Beyer & Higgins, 2006, p. 17).' Accordingly, whilst screening processes must be a part of any effective set of protections designed to prevent abuse in institutional contexts, it is important not to be overly reliant on these processes, and to thereby consider them sufficient alone in minimising the likelihood of abuse occurring.

Secondly, it is important to recognise that the imposition of screening on all adults who may have contact in private spaces with children and young people can have unintended, negative consequences. An example of this is when DHS used to only approve children in out-of-home care sleeping over at a friend's house if that friend's parents had undergone a criminal history check. Whilst well-intentioned, this policy resulted in children and young people in care avoiding going to sleepovers due to their awareness of the stigma this might bring to them. This, in turn, only served to further the social isolation that such vulnerable young people were already experiencing, not to mention resulting in them missing out on what might have otherwise been a resilience-enhancing, normalised activity. For these reasons, DHS abolished this screening requirement with regard to one-off sleepovers.

Anglicare Victoria does not consider that the emergence of any unintended consequences related to screening practices, such as the above, should automatically constitute grounds for the abolishment of screening procedures in all contexts and situations. Rather, we believe that where such consequences become apparent, consideration should be given to whether risk to children and young people can be adequately assessed and minimised through other practices. For example - in relation to the issue of allowing children's sleepovers – Anglicare Victoria and DHS now consider it sufficient to rely on the judgement and direction of case-managers. This decision-making process is informed by principles set out by DHS, and involves case-managers engaging in comprehensive discussion with carers, conducting risk assessments, and then making informed decisions about whether or not to allow children in care to sleep over at friends' houses. We believe that this is a good example of an effective alternative to formal screening, as it relies on suitably qualified and supervised professionals engaging in a structured decision-making process for which they are held fully accountable.

2.1.2 Reducing opportunities for situational maltreatment

Anglicare Victoria has developed and implemented a raft of policies and practices designed to reduce opportunities for child abuse to occur within the context of the agency's programs and work.

For instance, all Anglicare Victoria staff and volunteers are supervised by team leaders and program managers, and required to account for their activities in program documentation.

Furthermore, all clients, upon initially engaging with any Anglicare Victoria program, are given plain language brochures which explain their right to make complaints about service, as well as the fact that children have the right to make such complaints, also. Within these brochures, the processes

for having complaints heard are clearly set out. As several researchers have identified, the ability for those connected with an organisation to feel empowered to make complaints and allegations is an important preventative factor with regard to child abuse (Bichard, 2004; Utting, 1991; Wardhaugh & Wilding, 1993). This is because organisations' increased receptiveness to receiving complaints reduces potential abusers' opportunity to "get away with" their crimes.

In relation to out-of-home care, all foster care placements are case-managed by qualified and supervised staff whose work with carers emphasises carer support, but also placement monitoring. All such case management is conducted in accordance with the DHS *Minimum Standards and Outcome Objectives for Home Based Care Services in Victoria*, as well as the *CSO Registration Standards Performance Criteria*.¹

A crucial component of this case management, with respect to reducing opportunities for situational maltreatment of children, is that case managers have regular face-to-face contact with children and young people in care which is separate to their contact with carers. This allows case managers to gauge how a child or young person is responding to their placement, and gives the child or young person opportunity to safely voice any concerns or complaints that they might have.

Furthermore, as carers are fully aware of this process, we consider that this acts as a deterrent for them to engage in abuse of children or young people placed in their care.

In addition to the above process of monitoring placements, Anglicare Victoria case managers seek to train and educate carers regarding appropriate ways of responding to the often challenging behaviours that children and young people placed in their care might exhibit. This is very much a central purpose of out-of-home care case management, as "skilling up" and supporting carers can prevent the use of abusive disciplinary practices in moments of stress and frustration.

2.1.3 Creating a child-focused environment of respect

Anglicare Victoria is very much a child-focused organisation. Children and young people's wellbeing and safety are at the core of the agency's mission, purpose and values, and this is well reflected within our policy architecture and program focus.

Given the nature of the type of work the agency does, most "frontline" staff are required to have training in social work, psychology, community services or some other welfare-oriented knowledge base.

Furthermore, staff receive a great deal of on-the-job training and supervision aimed at improving their knowledge about children's development, as well as those experiences which threaten it. As a result of this, Anglicare Victoria staff members typically have an advanced understanding of the dynamics and indicators of child abuse, as well as the importance of "hearing the voices" of children and young people – of artfully engaging them in discussion, rather than just "talking about" them and affording them no opportunity to speak. All of this strongly contributes to the child-focused culture within the agency.

¹ Copies of these can be provided upon request, or accessed through the Department of Human Services.

Accordingly, those connected with Anglicare Victoria quickly become aware that the behaviours of children and young people engaged with the agency will be carefully and forensically considered by knowledgeable professionals, and that these professionals will insist on children and young people's voices being directly heard. As with Anglicare Victoria's aforementioned complaints management policies, this child-focused culture acts as an important preventative factor with regard to child abuse (Utting, 1991). Again, this is because determined offenders who may infiltrate the agency are more likely to quickly understand that they are at an increased risk of being detected if they attempt to create opportunities to inflict abuse (Irenyi, Broomfield, Beyer & Higgins, 2006).

Another element of Anglicare Victoria's child-focused culture which operates to prevent child abuse in care settings is the agency's focus on promoting sex education for children and young people in care. As researchers have identified, an effective behaviour which can be used by children to deter abusers from engaging in sexual contact with them is to state assertively that such contact is unwanted (Smallbone and Wortley 2000). Age-appropriate sex education is thus protective, as it empowers children and young people to be more informed of what is considered both appropriate and inappropriate physical contact, and their right to reject unwanted and inappropriate physical advances – as well as strategies for doing so assertively (Irenyi, Broomfield, Beyer & Higgins, 2006).

In addition to the above, Anglicare Victoria also ensures that children and young people in care settings are informed of their rights to safety and security within these settings. This is accomplished through comprehensive induction processes which are engaged in by Anglicare Victoria staff. In residential care settings, these induction processes are reinforced through provision of a *Client Code of Behaviour* booklet, which explicitly outlines to young people:

- Their right to live in a safe environment where their rights are respected.
- That they have the right to make complaints that will be treated seriously and investigated fairly.
- That no other young people in the unit are allowed in their room without their permission.
- That others in the house have the right not to feel or be threatened by them.
- That drugs, drug paraphernalia and weapons are not allowed in the house.
- That it is unacceptable to be under the influence of alcohol and other drugs whilst in the unit.

It is commonly accepted that a predisposing factor in the abuse of children in church settings is, and has been, the power imbalance between church worker and child. This imbalance has many sources including: the perceived knowledge and leadership of the church worker in matters of ethics; a culture of reticence to discuss sexuality; a culture of secrecy among those in authority and; failure to acknowledge children's rights. Anglicare Victoria works carefully to minimise these factors in order that children in the agency's care feel strong, knowledgeable and assertive, and can have their voices heard. We believe that this is what creating a child-focused culture is all about.

2.1.4 Summary and recommendations

Anglicare Victoria's experiences and capability in preventing child abuse within the context of the agency's work are particularly relevant to this Parliamentary Inquiry. As an independent organisation with linkages to the Anglican church, we believe that we have instituted training, processes and standards which serve effectively to prevent child abuse in our organisational context .

In being completely forthcoming, much of our capability in this respect stems from our meeting of legislative requirements and DHS guidelines which we must observe in order to carry out the work we are contracted to do. It seems, then, that we are an example of the effectiveness of legislation and Government regulation with regard to this issue – certainly an example that should be considered when pondering how to address the apparent failures of some other religious organisations in preventing child abuse within their organisational context.

We believe, however, that our capability in preventing the maltreatment of children and young people within our organisational context is not due entirely to legislation and regulation. Rather, a more complete explanation regarding what positions Anglicare Victoria to act protectively and prevent abuse is that this legislation and regulation find synergy with the organisational culture, corporate governance structure and professional skill base of the agency. Indeed, it is the confluence of these factors that is so protective of children and young people whose care is our charge.

In light of these lessons, we believe that it is the role of Government to use legislation and regulation, as well as promotional initiatives and awareness-raising to ensure that children and young people involved with any religious or other types of organisations are better protected. Such preventative efforts must target organisational policies and procedures, but also organisational structure, culture and knowledge.

Specifically, we make the following recommendations to this Parliamentary Inquiry:

1. *That the vetting procedures outlined within the Working With Children Act 2005 be made obligatory for all religious and other organisations involved with children and young people, with regard to all employees and volunteers. Where the imposition of such screening practices may have unintended, negative consequences for children and young people – as in the example of sleepovers raised previously in this submission – consideration should be given to whether risk to children and young people can be adequately assessed and minimised through other practices.*
2. *That Government consider the expanded use of screening practices - as outlined in recommendation 1 above - to constitute just one of a number of important strategies designed to protect children and young people in organisational contexts. It is crucial to consider, in this respect, that many of those people who either have the intention to abuse children, or who are otherwise of such character that they may abuse children if presented with sufficient opportunity, may have no criminal record.*

3. *That Government enforce regulation to ensure all employees and volunteers within religious and other organisations involved with children and young people are subject to adequate supervision and accountability. The function of such regulation should be to ensure that those who have contact with children and young people in organisational settings are sufficiently monitored so as to deter perpetration of abuse. This could be achieved through a number of different processes, such as regulation ensuring appropriate line management, the provision of auditing, and so on. The effectiveness and appropriateness of various monitoring and accountability processes will differ depending on organisational context.*
4. *That Government utilise legislation and regulation to ensure that children and young people connected with any organisation are made aware of processes for making complaints, and encouraged to do so.*
5. *That all organisational settings through which children and young people may receive extended lodging which is arranged informally (taking place in church-owned properties, church camp facilities, sports coaches' family homes, and so on) be subject to regulation consistent with the DHS Minimum Standards and Outcome Objectives for Home Based Care Services in Victoria. Crucially, where such extended lodging takes place in these settings, there must be a requirements for carers (that is, any adult providing "parental-like" care within these contexts) to be formally registered as carers with DHS. These "placements" should then receive monitoring and support from case managers. Furthermore, children and young people who are staying in such settings need to be made explicitly aware of their rights with regard to safety and privacy.*
6. *That the Government engage all religious and other organisations involved with children and young people in awareness-raising and educational initiatives around the use of authoritative guidance practices, and the avoidance of abusive disciplinary practices.*
7. *That the Government engage all religious and other organisations involved with children and young people in awareness-raising and educational initiatives around the dynamics and indicators of child abuse. Professionals within these organisations, including clergy, should be required to engage with such education as part of their initial, formal training.*
8. *That the Government utilises legislation and regulation to ensure that all children and young people receive age-appropriate sex education at school and in other relevant institutional settings. This education must have adequate focus on: informing children and young people of what is considered both appropriate and inappropriate physical contact; enabling children and young people to discuss sexual matters, and; highlighting to children and young people their right to reject unwanted and inappropriate physical advances – as well as strategies for doing so assertively.*

3 Responding to allegations of abuse concerning current clients: existing agency processes and recommendations.

As we have stated throughout this submission, Anglicare Victoria prioritises ensuring that our organisational processes, standards and direct operations undertaken by our staff and volunteers are focused on preventing child abuse from occurring within the agency's care settings.

It is the firm belief of Anglicare Victoria that all organisations, religious or otherwise who are involved with children and young people must act rigorously to prevent child abuse in institutional contexts. However, it is also vitally important that all religious and other such organisations are prepared to effectively receive and respond to any allegations of abuse that may be made concerning existing clients, patients, community members (or any other term for people connected with an organisation who are not employees of, or volunteers with that organisation).²

3.1 Effectively receiving and responding to allegations of abuse

Within a review of research on child maltreatment in organisations, the Australian Institute of Family Studies published the following principles with regard to how organisations can demonstrate capacity to encourage disclosures of abuse alleged to have occurred in organisational contexts, and to respond appropriately to these allegations:

- *Act on all disclosures:* All disclosures should be acted upon, regardless of how long ago the maltreatment occurred, who is disclosing and who is the alleged perpetrator.
- *Encourage early disclosure:* Research shows that maltreatment is often not disclosed until some years after the first incident, during which time the perpetrator has victimised many more children. Organisational policies ought to encourage children to disclose as soon as possible.
- *Clarify unacceptable behaviour:* All children and adults connected to an organisation need to be aware of what is deemed acceptable behaviour from both parties and that every person is equally accountable for their behaviour. Each person must also be aware of the consequences of unacceptable behaviour.
- *Empower children and adults to disclose:* Children and adults should be confident that all people involved with the organisation will be heard if they disclose maltreatment, no matter who the perpetrator is, and that all disclosures will be treated equally.
- *Be transparent:* Responses to disclosures must be open and transparent and involve the police, the statutory child protection services or other relevant authority. Managers or church leaders should not be given the power to determine the guilt or innocence of a person alleged to have perpetrated child maltreatment.

² Please note, Anglicare Victoria also believes that it is vital for organisations to be prepared to receive and respond to allegations of abuse concerning former clients. Our processes, views and recommendations regarding this are detailed in part 4 of this submission.

- *Respond appropriately to criminal behaviour:* Organisations must recognise the criminal status of abuse. Most child maltreatment and all sexual abuse is criminal behaviour and must be referred to external authorities (police and statutory child protection departments) (Irenyi, Broomfield, Beyer & Higgins, 2006, p. 19).

Anglicare Victoria fully supports the above principles, with their focus on being approachable, seeking justice and ensuring the protection of victims and other community members. These principles are reflected in the agency's policies and practices that are related to this issue.

Again, to be completely forthcoming, the specific direction of our policies and practices in this respect largely stems from the type of Government work we are contracted to do, and the legislative requirements and DHS guidelines with which our policies and practices must consequently accord.

Over 80% of our funding is for DHS programs (chiefly out-of-home care and family services). Any allegations that are made relating to current employees, carers or volunteers within these programs fall within the parameters and requirements of the *DHS Guidelines for Responding to Quality of Care Concerns in Out of Home Care*, the critical incident reporting obligations outlined within Anglicare Victoria's service agreement with DHS,³ the *Working with Children Act 2005* and the *CSO Registration Standards Performance Criteria*. Accordingly, Anglicare Victoria has incorporated the directions of all of the above within the agency's *Reporting Concerns About Children and Young People's Safety and Wellbeing* policy (see Appendix 1). This policy, which was developed by Anglicare Victoria in September 2008, accords fully to the principles previously outlined in this section (3.1) of this submission. Furthermore, Anglicare Victoria has in place a *Critical Incident Reporting Policy* (see Appendix 2), which was also developed in September 2008.

All allegations that a child or young person has been abused by a current employee, carer or volunteer, or another client within the context of a DHS-funded program constitute "Category One Critical Incidents", which are the most serious category of incident. In accordance with Anglicare Victoria's *Critical Incident Reporting Policy* and DHS requirements, these allegations are immediately reported to: the "critical incident reporter" at DHS, which is usually the program service advisor; the relevant child protection unit manager as well as any child protection caseworkers and team leaders involved with the child or young person (where they are on a child protection order); both middle and senior managers within the relevant Anglicare Victoria program, and; Anglicare Victoria executive management, including the Deputy CEO, Community Services, and CEO. This ensures that all allegations of abuse are responded to with a swift, effective and accountable investigation that prioritises the safety of children and young people, and involves the police where criminal behaviour has been alleged.

³ These are in accordance with the DHS critical incident categorisation and reporting policies and procedures (available at <http://www.dhs.vic.gov.au/funded-agency-channel/about-service-agreements/incident-reporting/human-services>) as well as previous DHS critical incident categorisation and reporting policies and procedures, which have always classified allegations of abuse as category one incidents.

For the minority of programs Anglicare Victoria provides that are not DHS-funded, the agency has in place a *Critical Incident Reporting Policy for Community Programs and Parish Partnerships*, (see Appendix 3), which directs the organisational response to allegations of abuse in the context of these programs. This policy, which was first developed in July 2006, also accords with the principles previously outlined in this section (3.1) of this submission, and requires that all allegations that a child or young person has been abused by a current employee or volunteer, or another client within the context of a non-DHS-funded program be immediately reported to middle and senior management within the relevant program stream, and the Deputy CEO, Community Services. Moreover, all allegations of criminal behaviour are required to be reported to DHS and the police. Therefore, Anglicare Victoria's response to any allegation of abuse in an organisational context is consistent, irrespective of program context or program funding.

Data against several categories of critical incident reports concerning allegations of abuse in all Anglicare Victoria programs from 2008 to 2011 are available in Table 1, below. The dates of all specific allegations, and data for 2012 were not available at the time this submission was written.

	2008	2009	2010	2011
Physical assault – staff to client	3	7	6	22
Threatened assault – staff ⁴ to client	3	3	3	0
Quality of care concerns ⁵	16	25	16	21
Total	22	35	25	43

Table 1: Number of critical incidents concerning allegations of abuse in all Anglicare Victoria programs by type and year.

In accordance with the parameters of Anglicare Victoria's *Discipline* policy (see Appendix 4), which was developed in May 2006, where a staff member or volunteer is alleged to have criminally abused a child or young person, they are suspended from duty pending investigation of this matter. Where such allegations are substantiated according to the scope of the Agency investigative process, employment/voluntarism is terminated. If an offence is considered to be of a criminal nature then both the Police and the Department of Human Services are notified. Further employment/voluntarism in positions working with minors would then be prohibited for such people, as they would lose their Working with Children Check, and pending charges/convictions against them would be discoverable when conducting national police checks.

Where the subject of an allegation of abuse is a foster carer or other person within the care setting (for example, another child or young person placed in the home, or a family member of the carer), a child protection unit manager will decide whether children and young people need to be removed from this care setting and whether the foster carer needs to be stood down from caring duties whilst an investigation is pending.

⁴ "Staff" refers to employees and volunteers.

⁵ Note: this data includes all allegations that a child or young person was abused whilst in a foster care or residential care placement. Reports may have related alleged perpetration of abuse by carers, other clients in the care setting, or other people in the care setting.

We consider the processes outlined throughout this section (3.1) of this submission to be sound and effective. Again, as is the case with our preventative measures, we assert that our capability in encouraging disclosures of organisational abuse, and responding to them appropriately, is not entirely due to legislation and regulation. Rather, this is in part due to the synergy of such law and guidelines with Anglicare Victoria's child-focused culture, corporate governance structure and professional skill base.

3.2 The approach we strive to avoid: factors that underlie discouragement of disclosure and ineffective responses to allegations of abuse

As previously stated in this submission, given the focus of Anglicare Victoria's programs, most "frontline" staff are required to have training in social work, psychology, community services or some other welfare-oriented knowledge base.

Furthermore, staff receive a great deal of on-the-job training and supervision aimed at improving their knowledge about children's development, as well as those experiences which threaten it.

As a result of this, Anglicare Victoria staff members typically have an advanced understanding of the dynamics and indicators of child abuse, as well as the importance of "hearing the voices" of children and young people – of artfully engaging them in discussion, rather than just "talking about" them and affording them no opportunity to speak. All of this contributes significantly to the child-focused culture of the agency. Accordingly, there exists a great "fit" between Anglicare Victoria's culture, organisational structure and the rules and regulations we are required to observe with regard to responding to allegations of abuse.

Not every religious and other organisation that is involved with children and young people, however, has the same sort of program focus as Anglicare Victoria. Because of this, some organisations employ few or no workers who possess the knowledge and skill base as those who work for our agency. We do not intend to diminish the professionalism of those workers and volunteers within other organisations and who have different fields of expertise. However, we do believe it is important for this Inquiry to consider the following: that such workers are less likely to have a strong understanding of the dynamics and indicators of child abuse, and so will be less well equipped to respond effectively when allegations are made that such abuse has occurred within their organisational context.

Compounding this risk is the fact that, where such workers are not required to be "child abuse experts" due to the nature of their work, it is far less likely that the organisations for which they work will have to abide by such regulatory frameworks as does Anglicare Victoria. Again, these include the legislation and DHS guidelines previously mentioned in this submission which direct Anglicare Victoria's response to allegations of organisational abuse - and which we have extended in our internal policies to pertain to non-DHS funded programs.

We consider that where the above two risk factors may act in confluence within some organisations, or even just within particular programs within organisations, this is potentially a significant risk for those making allegations of abuse. Specifically, we are concerned that in such organisational settings, it is far less assured that responses to allegations of organisational

abuse prioritise the pursuit of justice, and the effective protection of victims and community members. It is the belief of Anglicare Victoria that such a confluence of risk underlies the mishandling of child abuse allegations that has occurred within some religious and other institutions.

As the Australian Institute of Family Studies has stated within its review of research on child maltreatment in organisations, when religious and other institutions handle disclosures of abuse “the wrong way”, this often involves an initial minimisation and denial of allegations of abuse, coupled with a failure to encourage the reporting of alleged assaults to police (Irenyi, Broomfield, Beyer & Higgins, 2006). Indeed, it seems that this lack of willingness to “dob in” perpetrators to external authorities is a common feature of those now publicly known instances where abuse allegations have been handled poorly. This appears to be a particular risk in church contexts.

Where such gross mishandling occurs, internal processes seem to frequently be used to address the issue instead. These processes are highly likely to be inadequate for pursuing justice and protecting victims and other community members. Furthermore, such inappropriate responses are likely to be underpinned by misinformed sex-role beliefs that diminish men’s responsibility for inflicting sexual abuse and promote victim-blaming (Irenyi, Broomfield, Beyer & Higgins, 2006).

3.3 Summary and recommendations

The experience of Anglicare Victoria is that the DHS *Guidelines for Responding to Quality of Care Concerns in Out of Home Care* and the *Working with Children Act 2005* contain adequate mechanisms for directing organisational responses to allegations of abuse - as well as other concerns about children and young people’s safety and wellbeing.

We note, however, Finding 12 of the *Report of the Protecting Victoria’s Vulnerable Children Inquiry*, which outlines some of the complexities surrounding the issue of mandated reporting for religious institutions. These complexities, of course, should be taken into account when considering a legislative response enforcing mandated reporting – particularly the issue of religious organisations being diverse in terms of their demonstrated capacity to appropriately respond to abuse allegations.

Ultimately, though, organisations being mandated to report suspicions and allegations of child abuse that has occurred within their organisational contexts - as the previously mentioned DHS guidelines enforce - is highly protective of children and young people.

In consideration of this, and in consideration of the risk factors which underlie poor organisational responses to disclosures of abuse, we make the following recommendations:

1. *That all religious organisations be mandated to report suspicions or allegations of abuse that has occurred within their organisational contexts to child protection and the police, in line with Recommendation 47 of the Report of the Protecting Victoria’s Vulnerable Children Inquiry.*

As a child and family welfare organisation, Anglicare Victoria believes that the protection of children and young people is of paramount

importance. In this spirit, we assert that legislation called for by this Inquiry should in fact go further than that called for in Recommendation 47 of the Report of the Protecting Victoria's Vulnerable Children Inquiry. Specifically, we believe that no exemption for information received during the rite of confession should be made. Child abuse, after all, thrives on secrecy. Government can allow it no safe haven within any religious or other organisational context.

As Anglicare Victoria has previously stated with regard the issue of broadening mandatory reporting, however, it will be vital for child protection, police and other relevant authorities to be sufficiently resourced so that all allegations of abuse can be investigated in a timely and effective manner.

2. *That the Government engage all religious and other organisations involved with children and young people in awareness-raising and educational initiatives around the dynamics and indicators of child abuse.*

3.3.1 The impact of Quality of Care processes on foster carers.

As a leading welfare organisation providing a significant proportion of Victoria's out-of-home care services, Anglicare Victoria is experienced in handling allegations made by and about children and young people in care which concern them allegedly having been abused in these care settings.

In accordance with DHS guidelines, and the principles of appropriate response to such allegations cited in section 3.1 of this submission, Anglicare Victoria takes every allegation we receive seriously. The agency always ensures that such allegations are met with a swift and transparent response facilitated by executive management within the agency. This response encourages disclosure, seeks to protect children and young people, and always immediately involves child protection and, in the event that criminal behaviour is alleged, the police.

In the course of providing such responses to allegations concerning children in out-of-home care over the years, Anglicare Victoria has come to understand an unfortunate fact; some children and young people, as well as parents who have had children and young people removed from their care due to protective concerns, make false allegations of organisational abuse in order to try to alter placement arrangements with which they are unhappy.

It is very important to reiterate at this point that Anglicare Victoria treats all allegations of child abuse within care settings as legitimate and serious, and never minimises or denies alleged abuse prior to a full investigation involving child protection having been carried out.

In reality, though, when false allegations are made, this has the effect of "burning" carers. Foster carers are, after all, volunteers who make extraordinary sacrifices in order to provide care to vulnerable children and young people who cannot live at

home. When such false allegations are made, the resulting investigative process in which carers must then become engaged can be experienced by them as fatiguing, demoralising and even traumatising. Many times, this inflicts the ultimate consequence of the carer going “on hold”, and ceasing to provide placements in their homes for children and young people. Whilst there are many factors, including economic and other structural factors, that have contributed to the decline in the number of foster carers in Victoria, the impact of investigations on carers who have been the subjects of false allegations is significant.

Thus Anglicare Victoria has some suggestions concerning how this investigative process could be improved in order to minimise the chance of those carers who are falsely accused becoming disillusioned and leaving the role of foster care. In this respect, we make the following recommendations:

- 1. That child protection ensures their investigative response to allegations of abuse in care is as swift as possible, and not unnecessarily “dragged out” due to workload pressures.*
- 2. That the child protection worker/s who conduct the investigation are comprehensively informed of the nuances of the placement they are investigating, including the profile and history of the child or young person and carer/s involved (particularly any history of false allegations having been made by children, young people or their biological parents in previous placements).*
- 3. That the same child protection worker/s can see the investigation through to completion. Unfortunately, when the investigative process is unnecessarily slow, this may mean that several shifts of child protection workers come and go, and that successive workers involved are not necessarily fully informed of the nuances of the placement, as per recommendation 12 above.*
- 4. That a senior placement and support worker or manager chair each investigation, and that they be impartial – that is, not hitherto involved with the placement, or those facilitating it, in any way. This would enable carers to continue receiving the support of their case-managers, with whom they have established relationships (and, in our experience, to whom they are most likely to turn for support anyway), whilst minimising the impact of bias on the investigation through establishment of the impartial chair.*
- 5. That a review be conducted by Government into the management of allegations of abuse in care, so as to produce refined models of best practice with regard to this issue.*

4 Responding to allegations of abuse concerning former clients: existing agency processes and recommendations.

4.1 The legacy of former agencies: the good, and the terrible

As stated in the introduction to this submission, Anglicare Victoria was formed through an act of Parliament - the *Anglican Welfare Agency Act 1997*, which joined together three of Victoria's long-established Anglican child and family welfare agencies - the Mission of St. James and St. John, St. John's Homes for Boys and Girls and the Mission to the Streets and Lanes.

The Mission of St. James and St. John began providing services in the late 19th century, whilst St. John's Homes for Boys and Girls and the Mission to the Streets and Lanes began their work in the early 20th century. From this period, right up until 1997 when these three agencies were amalgamated to become Anglicare Victoria, approaches to providing care for vulnerable children, young people and adults underwent a dramatic evolution.

We feel it is important to acknowledge that throughout this long period, there were clients who received adequate or even excellent care. This care was provided by dedicated and nurturing men and women, and it is important to honour the valuable work that these people performed, sometimes in very challenging contexts such as economic depression and world war.

Despite these "good stories", there were many vulnerable children, young people and adults who, tragically and terribly, experienced abuse perpetrated by those charged with their care, or by others within those care settings. Children and young people placed within institutionalised out-of-home care were particularly vulnerable to this abuse.

In 2004, the Senate Community Affairs References Committee released its now famous report into the experiences of such children and young people throughout the previous century. This report was titled *Forgotten Australians: a report on Australians who experienced institutional or out-of-home care as children*. The committee's report led to much greater awareness of the plight of these vulnerable children and young people, and the damaging effects of their experiences of abuse. This ultimately culminated in several formal apologies being made to the Forgotten Australians, including an apology on behalf of the Victorian Government from Premier Bracks in 2006, and an apology on behalf of the Australian Government from Prime Minister Rudd in 2009, and an apology from the Anglican Diocese of Melbourne in 2004.

Anglicare Victoria recognises that some Forgotten Australians who were placed into care by or with the Mission of St. James and St. John, St. John's Homes for Boys and Girls and the Mission to the Streets and Lanes, experienced such abuse. The agency considers all such incidences of abuse to be unequivocally wrong, and takes very seriously its ethical obligations to work effectively with those victims of abuse who approach the agency seeking redress.

4.2 Working with heritage clients from Anglicare Victoria's three predecessor agencies

Anglicare Victoria considers that it has a responsibility to provide assistance and support to former clients who were raised in institutional care facilitated by the organisation's three predecessor agencies. This assistance and support is multi-faceted.

For example, some of these former clients have developed their own traditions with regard to holding reunions and other get-togethers, and, in recent years, Anglicare Victoria has begun to offer support with regard to facilitating these functions.

In addition to this, the agency is developing a repository of photographs of children and young people from when their time in the care of the Mission of St. James and St. John, St. John's Homes for Boys and Girls and the Mission to the Streets and Lanes. Former clients of these agencies will be able to access photographs of themselves through this service.

4.3 Providing access to records

Anglicare Victoria also retains responsibility for keeping and facilitating access to case records of the three predecessor agencies that were amalgamated to become Anglicare Victoria. Former clients of these three agencies are able to access their records from the agency. These records may pertain to time spent in institutionalised care. Protocols for accessing records are outlined in the agency's *Access by Former Clients to Anglicare Victoria Out-of-Home Care Client Records* policy (see Appendix 5). It is a normal part of Agency process to review policy according to a schedule of pre-determined dates. This policy was most recently revised by Anglicare Victoria in April 2012.

Anglicare Victoria recognises that the issues which prompt people to apply for records will generally have powerful personal significance for them and members of their family. For some former clients, they may be experiencing a life crisis or developmental phase in which it becomes apparent to them (or those close to them) that they are still grappling with issues from their childhood. This may be related to experiences of abuse whilst in care, and for such people, a request for access to records may precede, coincide with, or follow an allegation being made to Anglicare Victoria regarding such abuse.

Because of the importance of these requests, they are handled directly by Anglicare Victoria's Heritage Client Liaison Officer, who works within the office of the Deputy CEO, Community Services.

In accordance with the recommendations of the aforementioned Senate Community Affairs References Committee's 2004 report, responses to requests for records are approached in such a way as not to hinder access by care leavers to information about their childhoods. To the fullest extent allowed under the provisions of the *Information Privacy Act Victoria 2000*, the *Commonwealth National Privacy Principles*, and the *Health Records Act Victoria 2001*, as well as in respect to the agency's duty of care, Anglicare Victoria makes as much information available as it can to former clients.

Furthermore, wherever possible and acceptable, the agency endeavours to take former clients through the content of their files during a face-to-face interview.

During the course of these interviews, a copy of each former client's file is provided to them, minus information that is legally required to be restricted by the abovementioned legislation.

4.4 Responding to allegations of abuse concerning former clients when they are seeking financial compensation

Usually when Anglicare Victoria receives an allegation that a former client was abused whilst in the care of one of the agency's three predecessor agencies, this is made by the former client's legal representatives. In such instances, where former clients are seeking financial compensation, Anglicare Victoria's process is to immediately provide any relevant file documentation sought by the legal representative on the authority of the former client, and to refer the matter to an independent consultant - currently the Director of Professional Standards for the Anglican Diocese of Melbourne.

The consultant reviews the statement of claim and the supporting material provided by the former client's solicitor, as well as any historical file material held by Anglicare Victoria. The consultant also considers any further background information known to the consultant and/or to Anglicare Victoria.

Anglicare Victoria acknowledges that it is often difficult to substantiate or, alternatively, disprove accounts forwarded by former clients in regard to their individual experiences. In this context, Anglicare Victoria and the Anglican Diocese of Melbourne choose to respond to allegations of abuse concerning former clients in a pastoral, rather than adversarial manner. In this spirit, we acknowledge the former client's account of their experiences and engage in alternative dispute resolution, generally a mediated conference involving legal representative/s.

Anglicare Victoria supports and encourages the former client to attend any meetings concerning management of their allegation, and attempts to engage with them throughout the allegation-management process. This is done in order to allow the complainant to express their opinions and experiences to a willing audience in an environment where they will be heard, and in which Anglicare Victoria can learn from the past. Where appropriate, a verbal and written apology is offered directly to the former client. It is through this process of discussion and learning that agreed settlements with regard to financial assistance are usually reached. If settlement is reached, a Deed of Release is agreed between Anglicare Victoria, the former client and their legal representative.

Anglicare Victoria does not tolerate abuse, harassment or other such serious misconduct within its communities. Accordingly, the response to a former client alleging abuse is based on the following principles:

- Taking all complaints very seriously, with any lessons learnt from individuals' complaints being taken into account when refining Anglicare Victoria and Anglican Diocese of Melbourne policies and practices.

- Offering respect, pastoral care and support to anyone who makes a complaint.
- Being as open, transparent and accountable as possible while respecting the rights of complainants to privacy and to make their own informed choices about whether to engage with Anglicare Victoria.
- Supporting complainants in making a report to police where allegations of abuse involve behaviour that may constitute a criminal offence.⁶
- Inviting any person who has been abused, no matter when, to come forward and make the matter known, so that his or her ongoing needs can be addressed.

Anglicare Victoria considers that the above principles are sound, ethical and respectful to former clients.

Since 2007, Anglicare Victoria has received a total of 32 complaints from former clients that they were abused whilst in care, where these complainants were seeking compensation. One complaint was received in 2007, five were received in 2008, one was received in 2009, six were received on 2010 and eight were received in 2011. Of these, 21 received compensation, whilst the remaining 11 claims remain outstanding and are yet to be settled. It should be noted that claims of abuse in care can come from clients of any of the predecessor organisations (the Mission of St James and St John, St John's Homes or the Mission to the Streets and Lanes can be received by any living person so can therefore relate to a time that goes back numerous decades.

In some cases, Anglicare Victoria has made, in addition to compensation payments, direct and substantial payments to cover former clients' medical expenses – including expenses related to private counselling, support and other specialist services.

As a condition of settlement, Anglicare Victoria requires complainants to enter into a confidentiality agreement whereby they agree not disclose the terms of their settlement to anyone other than their legal advisors, accountants, insurers and to auditors. Anglicare Victoria also requires complainants to enter into an undertaking that they will not bring future claims against the agency. However, our compensation process does not preclude complainants from applying for compensation elsewhere.

Details about complaints and complainants are made available to staff within Anglicare Victoria on a need-to-know basis only, and are never disclosed to the public.

4.5 Responding to allegations of abuse concerning former clients when they are not seeking financial compensation

Very occasionally, a former client who states that they are not seeking financial compensation contacts Anglicare Victoria and alleges that they were abused whilst in the care of one of the agency's three predecessor agencies. When this occurs, the matter is handled directly by senior agency staff working for the office of Anglicare Victoria's CEO, or the office of the agency's Deputy CEO Community Services.

During initial contact with such complainants, Anglicare Victoria's first priority is to seek to ensure their psychological wellbeing and safety. To this end, the agency offers to facilitate provision of urgent support services to

⁶ Note: this is not always possible, as in some cases alleged perpetrators are deceased.

the complainant in order to assist in easing any immediate emotional distress, and to manage any mental health risks that may be exacerbated at this time. If the complainant makes it clear that they would prefer to work with other agencies independent of Anglicare Victoria, they are referred to appropriate external bodies such as VANISH Inc. or Care Leavers Australia Network (CLAN).

When dealing with complainants who state that they do not wish to seek financial compensation, Anglicare Victoria informs them of their right to seek such redress by engaging with a legal representative.

4.6 Summary and recommendations

When any person makes an allegation to a religious or other organisation that they experienced child abuse whilst in a care of that institution, the organisation is faced with an inevitable tension. On the one hand, responsible workers will seek to promote the wellbeing and healing of the complainant. On the other hand, however, such allegations frequently coincide with the pursuit of financial compensation, so organisations will inevitably be mindful of limiting their financial liability, at least to some extent.

Anglicare Victoria asserts to this Parliamentary Inquiry that the abovementioned tension has the potential to negatively influence how organisations respond to allegations of abuse in care settings concerning former clients, patients, community members (or any other term for people previously connected with an organisation). We believe that our processes for responding to such allegations, whilst by no means perfect, adequately promote justice and the pursuit of healing.

We draw to the Inquiry's attention the fact that, given child abuse is a largely hidden phenomenon, evidence to substantiate its incidence in individual cases can be scant, or even non-existent - particularly with regard to incidents which are alleged to have occurred years, or decades ago. Anglicare Victoria recognises that it is difficult for former clients to substantiate their allegations of abuse and/or inadequate care with corroborative evidence, much as it is difficult for Anglicare Victoria to obtain evidence that abuse did not occur. This "evidentiary vacuum" creates difficulties in responding to such allegations.

Anglicare Victoria has previously made an apology to Forgotten Australians and the agency is very committed to hearing from former clients who have experienced harm and injustices whilst in care, so that we can help these people as best we can, and learn from them.

From this perspective, Anglicare Victoria approaches claims for financial compensation in a spirit of fairness and genuine pursuit of redress. The agency actively instructs our consultants who engage in mediations not to take an adversarial approach in dealing with such claims. Rather, we prefer to see these matters resolved so as to avoid forcing former clients into situations where they must prove Anglicare Victoria's liability, or where the agency attempts to disprove their allegations.

We believe that we have developed a fair and protective system. Our former clients are afforded the opportunity to be heard, to be seriously listened to, for their experiences to be understood and for an apology to be

offered – as well as compensation negotiated - where appropriate. This practice of atonement and redress reflects the values of Anglicare Victoria.

In providing this response over the years, we have learned several key lessons. These underpin the recommendations we now make to this inquiry regarding how religious and other organisations can best respond to allegations of historical, organisational abuse:

1. *That independent oversight in managing such allegations is extremely important.*
2. *That systems for managing such allegations need to be guided by principles such as those outlined in section 4.4 of this submission.*

In addition to the above, the agency takes the view that:

3. *The Victorian Government should introduce within Victoria a designated redress schemes for care leavers, such as those enacted in Tasmania, Queensland and Western Australia. It would be important that such a scheme provide opportunity for Forgotten Australians to voice allegations and seek compensation where these people otherwise do not have access to fair and effective redress processes.*

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