

**Assessing the different dimensions
and degrees of risk of child sexual abuse
in institutions**

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**Report to the Royal Commission into Institutional Responses
to Child Sexual Abuse**

Project team

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Royal Commission
into Institutional Responses
to Child Sexual Abuse

Preface

On Friday 11 January 2013, the Governor-General appointed a six-member Royal Commission to inquire into how institutions with a responsibility for children have managed and responded to allegations and instances of child sexual abuse.

The Royal Commission is tasked with investigating where systems have failed to protect children, and making recommendations on how to improve laws, policies and practices to prevent and better respond to child sexual abuse in institutions.

The Royal Commission has developed a comprehensive research program to support its work and to inform its findings and recommendations. The program focuses on eight themes:

1. Why does child sexual abuse occur in institutions?
2. How can child sexual abuse in institutions be prevented?
3. How can child sexual abuse be better identified?
4. How should institutions respond where child sexual abuse has occurred?
5. How should government and statutory authorities respond?
6. What are the treatment and support needs of victim/survivors and their families?
7. What is the history of particular institutions of interest?
8. How do we ensure the Royal Commission has a positive impact?

This research report falls within theme one.

The research program means the Royal Commission can:

- obtain relevant background information
- fill key evidence gaps
- explore what is known and what works
- develop recommendations that are informed by evidence, can be implemented and respond to contemporary issues.

For more on this program, please visit www.childabuseroyalcommission.gov.au/research

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Executive summary

Aims

The purpose of this research was to establish a means of differentiating between types of institutions in terms of level of risk of child sexual abuse according to the characteristics of the institution and the kinds of activities that it organises. It draws on the existing research concerning risk factors in relation to child sexual abuse and examines how these risk factors might operate cumulatively in the context of institutions. It examines to what extent various risk factors might be clustered more within some institutions or activities than other institutions or activities. Some of the groundwork for this has been laid by the research literature on situational risk. This research report goes beyond this, however, to explore how the existing body of research on individualised risk factors for victimisation and for offending might be applied to the task of identifying greater or lesser risks of child sexual abuse in institutional contexts.

In considering these issues, a distinction is drawn, where appropriate, between adult–child abuse and child-to-child abuse since the way in which the risk factors for each are clustered in institutions is, to some extent, different.

Research questions

The research questions are as follows:

1. What are the essential components in an effective typology of risk of child sexual abuse in institutional settings?
2. How should these components be represented in a typology (single-risk continuum; low–high; two-dimensional quadrant approach; other)
3. How should the components be measured and applied in institutions within the Royal Commission’s Terms of Reference?

These questions are answered by seeking to identify which institutions and activities may constitute more risky environments for child sexual abuse than others. This involves working out, as far as possible, where individual vulnerabilities may be clustered (for example, services for abused or neglected children). This includes discerning where there is heightened situational risk and vulnerability risk, where propensity risk might be disproportionately clustered, and where institutional risk creates a culture in which, even if child sexual abuse is disclosed, it is unlikely to lead to a strong disciplinary response.

In answering these questions, it is important to distinguish between activities and institutions. There is much evidence already from the work of the Royal Commission that complaints of abuse have been highest in institutions providing out-of-home care – constituting 40 per cent of all complaints of child sexual abuse made in private sessions. ‘Out-of-home care’ refers to contemporary and historical settings including foster care, children’s homes and orphanages. The large residential children’s homes, which have all since been closed, involved a particularly high level of risk. That is evident across the range of organisations that ran those facilities. Complaints of abuse in educational contexts are the next highest proportion of all complaints.

Nonetheless, it may not be appropriate to treat all institutions within a particular category as homogeneous. For example, there have been much higher levels of complaints of child sexual abuse in residential homes, schools and other activities run by some religious organisations than others, and this does not seem to be merely a reflection of the size of those organisations and their population reach. It is therefore important to differentiate the overall risk of a sector such as out-of-home care, and the risks involved in individual organisations within that sector.

There are also differences in risk profile within the same institution, depending on the activities conducted. So, for example, a child welfare organisation that ran children’s homes may have had a substantial history of reported abuse in those homes, while the same organisation has recorded no complaints of abuse in relation to its support groups for young mothers with infants and pre-school age children. The institution and the activity therefore need to be differentiated. In popular discussion of the issues, these are often conflated.

Therefore, a three-tier model might be useful to differentiate the overall risk of a sector, the risks involved in individual organisations within that sector, and the activities within the institution. This is because different responses are likely to be appropriate at these three levels – policy approaches more at the sector level, governance approaches at the level of the individual institution, and management and practice at the activity level. The specific elements of risk that are important are likely to depend on the context and the purpose of risk assessment – what risk is to be managed for what purpose.

The four dimensions of risk

To identify the essential components in an effective typology of risk of child sexual abuse in institutional settings, the methodology for this study involved examining the literature

on four dimensions of risk. These dimensions have been identified in terms of the risk of victimisation or the risk of perpetration of child sexual abuse. They are:

- situational risk – arising from the opportunities for abuse that the environment offers
- vulnerability risk – arising from the characteristics of the children cared for
- propensity risk – arising from a greater-than-average clustering of those with a propensity to abuse children and young people
- institutional risk – stemming from the characteristics of an institution that may make abuse more likely to occur or less likely to be dealt with properly if disclosed.

In relation to the first three dimensions of risk, the task of differentiation involved identifying the extent to which these risks are elevated in certain institutional contexts. The research evidence on situational risk and vulnerability risk helps differentiate the degree of risk of child sexual abuse associated with different kinds of activity. An analysis of propensity risk and institutional risk helps differentiate the degree of risk of child sexual abuse associated with different kinds of institution that conduct activities with children because of their characteristics and staffing profile.

Situational risk

Differential situational risk is conceptualised in terms of two elements. The first is the opportunity to be alone with a child unseen, which makes it easier to ‘groom’ a child and facilitates the move from innocent relational behaviour to unlawful sexual acts. The second is the opportunity to form relationships that could involve physical contact or emotional closeness, and which may precipitate crossing acceptable professional boundaries and/or abusive behaviours. Residential institutions of all kinds, including juvenile detention or immigration detention centres, carry an elevated situational risk, as do boarding schools, and boarding houses in day schools. Some situational risk is associated with any school environment or long day care setting, particularly given the substantial amount of time that children spend in these institutions. Some health care settings also involve elevated situational risk, as do youth camps and family day care.

A challenging aspect of preventing child-to-child abuse is that these aspects of situational risk are normal features of many organisations and institutions where children and young people reside together or participate in school together.

Situational risks can be classified as risks that are modifiable or unmodifiable. An unmodifiable risk arises in activities that, by their very nature, tend to allow more opportunity for a perpetrator to be alone with a child and therefore cannot be modified. Examples include foster care settings in which the nature of family life is such that time alone with children is just a normal part of the family environment. Modifiable risks are those in which, with some effort, the inherent situational risk can be reduced. There are few institutional settings in which the risk of abuse is unmodifiable. Child safe organisations are those that have sought to minimise the modifiable situational risks to the extent that is reasonably possible.

Vulnerability risk

A heightened vulnerability risk arises where an organisation is working with children and young people who are, according to the available research evidence, at a greater risk of sexual abuse than other children. Children and young people with an elevated vulnerability risk may be disproportionately clustered in certain kinds of organisation or areas of the community. There is an interaction with situational risk because some vulnerable children may be clustered in residential settings where that risk is elevated.

The main factor influencing vulnerability risk is the age of the child, because the research evidence indicates that young children are less vulnerable to sexual abuse than upper primary and lower secondary school age children. Other reasons a child or young person's vulnerability may be significantly greater than average includes characteristics such as intellectual disability, some other forms of disability, a background of family breakdown or dysfunction, a prior history of maltreatment and a strong motivation not to disclose.

Propensity risk

Factors affecting the assessment of propensity risk in an institutional context include the staffing profile of an organisation in terms of gender, and situations where an adult is living in a residential or family setting with non-biologically related children.

Gender is the most significant issue. Although some women sexually abuse children, the great majority of perpetrators of child sexual abuse are male. That means institutions with a predominantly male staffing profile have a greater risk of problems with child sexual abuse than those with a predominantly female staffing profile. This does not mean that institutions should be discouraged from having largely male staff. Children and young people need male role models and involvement. The relatively small proportion of men who sexually abuse children ought not to cast a shadow over the great majority of non-abusive

men who work with children and young people, and who make a significant and beneficial contribution to children's lives. It does mean that institutions and organisations with mostly male staff, and which have elevated vulnerability risk or situational risk profiles, need to give particular attention to strategies that will moderate that risk.

When children and young people live in a residential or family setting with those to whom they are not biologically related, there is an elevated propensity risk. While biological fathers abuse children, it is statistically much more likely that stepfathers, or other men with whom the mother has an intimate relationship, will do so. In institutional terms, that suggests an elevated risk in foster care, for example.

Institutional risk

Numerous factors are relevant to the assessment of institutional risk. Several factors are related to an assessment of whether abuse is more likely to occur. These are:

- factors that impair prevention efforts
- situations where the organisational ethos is such that child protection is not given priority
- organisational cultures that facilitate misconduct.

Many other institutional factors affect the likelihood of disclosure of abuse and the organisation's willingness to act protectively if abuse is disclosed.

Characteristics of organisations with a tendency towards inadequate protective responses include:

- a culture of not listening to and respecting children
- close-knit and longstanding relationships between the adults, making it more difficult for leaders to believe that the abuse has occurred
- a strong ethos of group allegiance
- an aura of respectability that makes it very difficult for parents to believe disclosures
- a primary deference to the rules that govern the organisation, to the exclusion of the civil authorities
- internal disciplinary processes that are manifestly inadequate
- a culture that discourages complaints
- invisible child protection and complaints policies
- a tendency to place a greater importance on the protection of reputation than on the wellbeing and protection of children

- a culture of minimising the significance of child sexual abuse.

The various case studies conducted for the Royal Commission provide numerous illustrations of substantial failures by organisations to act protectively once abuse is disclosed, and to respond appropriately to victims.

Difficulties in developing a risk typology

While there is likely to be some agreement about the different elements that should be included in a typology of risk, developing a typology that would attract widespread agreement is fraught with difficulty for a number of reasons. First, developing a classificatory scheme that distinguishes among organisations with respect to their risk of child sexual abuse requires evaluating qualitatively different risk factors according to a common quantitative yardstick. To do so goes beyond the research evidence since there is essentially no data available to inform such an assessment. The evidence base is not there for finely grained differentiation, although some differentiation is certainly possible, drawing on the cumulative body of research and experience in this area.

There is also little reliable quantifiable data across the various dimensions of risk to assist in separating out risks that are highly correlated or confounded. If children with characteristic *x* tend to be clustered in care settings with characteristic *y*, our current knowledge base makes it difficult to say how much of the heightened risk of sexual abuse, compared with children of a similar age and gender in the general community, is due to characteristic *x* and how much to characteristic *y*.

Assessing risk cumulatively

For these reasons, developing any typology involves judgment calls, on which experts might reasonably differ. In this typology, we indicate, in relation to each kind of risk, institutions that are likely to be lower- or higher-risk based on the population of children and young people that an institution of that kind is likely to serve, the kinds of activities in which it is engaged and the institutional character of the organisation.

It must be emphasised that the assessment of gradations of risk are generalisations based on the available research as well as some assessment of the factors involved in the Royal Commission case studies. Necessarily, the gradations of risk also involve some intuitive judgments informed by knowledge and experience. This is an important limitation of the study. The report offers an evidence-informed theory for how to quantify risk, but it needs empirical testing.

In developing the cumulative measure, situational risk and vulnerability risk are both foundational since child sexual abuse can occur when there is both propensity and opportunity. An institution with a low situational risk starves even the committed sex offender of opportunity, or greatly increases the likelihood of detection. Perpetrators exploit the particular vulnerabilities of children in all sorts of ways to gain their participation or acquiescence, or to overcome their resistance. Whether the heightened vulnerability arises from low self-esteem, the need for love and attention, an intellectual disability, or some other factor, perpetrators are likely to find it easier to overcome the resistance of a child with a heightened vulnerability than otherwise, unless the perpetrator uses force or threats of harm. It follows that while situational risk is a precondition for sexual abuse, vulnerability risk makes it more likely that the child will be targeted and will not resist – or be able to resist – the sexual advances. It follows from this, that where particularly vulnerable children and young people are disproportionately clustered in institutional settings, the vulnerability risk in that institution or activity is likely to be greater, holding situational risk, propensity risk and institutional risk constant.

Assessing the risk of child-to-child sexual abuse

There are also difficulties involved in developing a typology that includes both adult–child abuse and child-to-child abuse. Some factors relevant to the risk of adult–child abuse also apply to child-to-child abuse, such as vulnerability risk. However, any analysis of differential risk requires specific attention to how the risk of child-to-child abuse might be clustered more within some institutional contexts than others. There is a situational risk of child-to-child abuse in any setting where children and young people are together – for example, in schools, for sports activities, at youth clubs, and for out-of-school-hours activities such as dance or drama classes. Opportunities to be alone or unobserved arise wherever children and young people are together, even in the most well-supervised of institutional environments. This makes it difficult to identify disproportionate situational risk of child-to-child abuse in different kinds of activity run by institutions.

In general terms, the greatest risk arises when children and young people are together in co-residential institutional settings – for example, foster care or residential out-of-home care, a boarding school environment, a juvenile detention centre or a residential facility for young people with a psychiatric disorder.

Co-schooling in a day school involves a lower level of risk because opportunities for children and young people to be alone and unsupervised are fewer than in a residential setting.

However, sexual abuse may occur after school, based on relationships developed during school hours, if the opportunity exists for unsupervised out-of-school interactions.

The lowest level of risk occurs for children and young people participating together in limited-duration activities outside the school context – for example, in community sports.

In addition to vulnerability risk and situational risk, particular characteristics of children with harmful sexual behaviours need to be considered in terms of propensity risk.

Conclusion

The report concludes by illustrating the cumulative rating system for adult–child abuse by reference to a range of institutions and activities from high-risk through to low-risk.

Chapter 1: Introduction

The Royal Commission into Institutional Responses to Child Sexual Abuse commissioned this research to establish a means of differentiating between levels of risk of child sexual abuse according to the kind of institution and the kind of services that institutions provide.

It draws on existing research concerning risk factors in relation to child sexual abuse and examines how these risk factors might operate cumulatively in the context of institutions. To some extent, this is a 'greenfield' project. While there is a substantial literature concerning risk factors that make some children more vulnerable than others, and which seeks to explain why perpetrators abuse children and young people sexually, much less attention has been paid to how various risk factors might be clustered more within some institutions or activities than others.

Some of the groundwork for this typology has been laid by the research literature on situational risk. This research report goes beyond this, however, to explore how the existing body of research on individualised risk factors both for victimisation and offending might be applied to the task of identifying greater or lesser risks of child sexual abuse in institutional contexts, taking a cumulative approach to the different risk factors.

Definitions

The Royal Commission's definition of child sexual abuse is:

'Any act which exposes a child to, or involves a child in, sexual processes beyond his or her understanding or contrary to accepted standards. Sexually abusive behaviours can include the fondling of genitals, masturbation, oral sex, vaginal or anal penetration by a penis, finger or any other object, fondling of breasts, voyeurism, exhibitionism and exposing the child to or involving the child in pornography (Bromfield, 2005). It includes child grooming which refers to actions deliberately undertaken with the aim of befriending and establishing an emotional connection with a child to lower the child's inhibitions in preparation for sexual activity with the child.'

This definition also includes child-to-child abuse, defined as abusive acts or incidents in which both the victim and the alleged perpetrator are less than 18 years old.

The Royal Commission's definition of an institution is that it provides activities, facilities, programs or services through which adults may have contact with children. This includes a

diverse array of organisations, such as faith-based organisations and services, voluntary sporting associations and clubs, schools of all kinds, services for children with disabilities, and juvenile justice facilities. Out-of-home care organised officially under the auspices of a government department or non-government agency also falls within the definition.

These definitions underpin the analysis given in this report. The analysis requires an assessment of the differential risk of child sexual abuse across:

- institution types: for example, out-of-home care, schools, child care centres and sporting clubs
- provider types: for example, volunteer groups, government services and faith-based activities and services.

The risk of sexual abuse to be examined is prescribed by the Royal Commission's Terms of Reference and definition of child sexual abuse in institutional contexts. This includes not only the risk arising from the activities of an institution but also abuse by an official, employee or volunteer associated with an institution where the institution may, by its activities or otherwise, create the circumstances or conditions in which child sexual abuse could occur.

For child-to-child abuse, some care needs to be taken in applying this definition of institutional responsibility where the abuse does not occur within the context of the work of that organisation. For example, while a school might have some measure of responsibility for sexual abuse of one pupil by another pupil during the lunch recess, it is more difficult to see how it could be held responsible for sexual abuse occurring outside school hours unless grooming or associated bullying behaviours began and were carried out in the school setting with inadequate attention or action by the school. By way of contrast, an out-of-school-hours care service might have institutional responsibility for employing a care worker who gains the opportunity to babysit children outside his position of employment based on his role within that care service (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014b). There are screening processes for the employment of staff, codes of conduct for staff and supervision requirements that explain why an organisation might be held responsible for the wrongs committed by an employee outside the work environment; and such factors may be inapplicable to the context of child to-child abuse.

This report will consider how to assess the levels of risk in different kinds of institutions. It will be argued that some institutions involved in caring for children have a much higher risk

of sexual abuse than others; but in examining this, it is important to have a sense of perspective. As Wolfe et al. (2003, p 179) noted:

‘In recent years publicized accounts of allegations of past and recent child abuse have been made in almost every type of institution serving children in the community, including churches, schools, nursery schools, sports and voluntary organizations ... Educational and vocational institutions; religious and spiritual institutions; sporting, cultural, and recreational organizations; and special needs facilities are part of every community, and in the vast majority of cases they operate in a safe and caring manner. When allegations of child abuse, either past or present, publicly emerge from one of these settings they are the exception, not the rule (references omitted).’

Research questions

The research questions are:

1. What are the essential components in an effective typology of risk of child sexual abuse in institutional settings?
2. How should these components be represented in a typology (single-risk continuum; low-high; two-dimensional quadrant approach; other)?
3. How should the components be measured and applied in institutions within the Royal Commission’s Terms of Reference?

The project needs to be situated in the context of a range of other research projects that the Royal Commission has instigated. In this project, the Royal Commission has not asked us to conduct a comprehensive literature review on risk factors for child sexual abuse. This work has been done by Kaufman and Erooga (2016). Much of that literature review addresses risk factors at an individual level. We have been asked to apply the existing literature to the extent that it assists in developing a typology that would allow for assessing different levels of risk in institutions and activities. That involves assessing the extent to which children who are particularly vulnerable to abuse are clustered in certain kinds of institutions or activities, and the extent to which that clustering may be an issue in terms of propensity to commit sex offences against children.

Nor were we asked to identify the factors associated with being a child safe organisation. That work has been done for the Royal Commission (Royal Commission, 2016) in consultation with a group of experts (valentine et al., 2016). The Royal Commission has also

published a report on the role of organisational culture in child sexual abuse that occurs in institutional contexts (Palmer, 2016) and a discussion paper on disability and child sexual abuse in institutional contexts (Llewellyn, Wayland & Hindmarsh, 2016).

Drawing on this work and other existing literature, the focus of this project is to identify which institutions and activities may be more risky environments for child sexual abuse than others. This involves working out, as far as possible, where individual vulnerabilities may be clustered (for example, services for abused or neglected children), where there is both heightened situational risk and vulnerability risk (for example, a residential facility for abused or neglected children who cannot safely live at home and cannot easily be fostered), where propensity risk might be disproportionately clustered (for example, where children with harmful sexual behaviours are accommodated together with other children who are at heightened risk of being victimised), and where institutional risk creates a culture in which, even if child sexual abuse is disclosed, it is unlikely to lead to a strong disciplinary response.

In so doing, the Royal Commission requested that we use a range of illustrations from the Royal Commission case studies. These assist in showing how certain kinds of institutions and activities have in the past had a much more extensive history of child sexual abuse than others, and what factors in the life of the organisation might have led to this.

Activities where risk is inherently substantial

While the Royal Commission's case studies have examined a considerable range of institutions providing a variety of services to children and young people, the evidence from the private sessions is that complaints of abuse have been highest in institutions providing certain kinds of services. The highest number has been in institutions providing out-of-home care – constituting 40 per cent of all complaints of child sexual abuse made in private sessions (OOHC Consultation Paper, 2016, p 13). Out-of-home care includes contemporary and historical settings including foster care, children's homes and orphanages. The residential children's homes involved a particularly high level of risk and that is evident across the range of organisations that ran those facilities. Complaints of sexual abuse in educational contexts also comprise a high proportion of all complaints, and to the extent that abuse occurred in the context of a boarding school or boarding house, there is some overlap with the data on abuse in out-of-home care.

Since these residential facilities were run by different types of organisation – religious and secular – it may be inferred that particularly high risks are associated with the activity of running residential children’s homes.

Differences between and within institutions

It is not appropriate, however, to treat all institutions within a particular category as homogeneous. There have been much higher levels of complaints of child sexual abuse in some religious communities than in others. This does not seem to be merely a reflection of the size of those communities.

No religious community has been free of child sexual abuse cases – and that is no doubt true of non-religious institutions – but the various organisations and institutions that make up the Catholic Church have had a particularly high number of complaints in comparison with other churches. This is the case in Australia and in many other countries in which the Catholic Church is not the only substantial faith community (Parkinson, 2014). Nonetheless, it is important to note that the Catholic Church is a myriad of different organisations, consisting mainly of dioceses and religious Orders, submitting to the overall leadership of the Pope and answerable to various bodies in the Vatican. Any analysis of abuse histories within Catholic dioceses, religious orders and organisations needs to take account of that diversity.

In assessing the level of risk of child sexual abuse, it is therefore necessary to distinguish between the risk arising from the activities conducted and the risk associated with the specific institution that runs that activity. In popular discussion of the issues, these are often conflated.

There are also differences in risk profile within the same institution, depending on the activities conducted. So, for example, a child welfare organisation that ran children’s homes may have had a substantial history of reported abuse in those homes, while the same organisation has recorded no complaints of abuse in relation to its support groups for young mothers with infants and pre-school age children.

What then, differentiates the higher-risk environments from the lower-risk environments for the care of children? To what extent is the problem – or has the problem been in the past – one of high-risk activities and to what extent is it high-risk institutions?

Even if it can be shown, as various case studies have, that certain institutions were grossly negligent in their responses to known sexual predators, to what extent is the past a

roadmap for the future assessment of risk in institutional contexts? Undoubtedly, most institutions have learnt from the tragic history of child sexual abuse in the context of their activities, and child protection efforts are much more rigorous than they once were. Are organisations that have had a particularly sorry record of child sexual abuse in the past necessarily the highest risk institutions in the future?

These are difficult questions to explore and the answers to those questions may be contentious. It is necessary first to consider how risk varies in terms of the activities that institutions organise and the kinds of services they provide, and then to consider what factors give rise to a greater than average institutional risk in the running of those activities or the delivery of those services.

Second, it is important to be clear about the purpose of the typology and the contexts in which it may be used. This is because the framework is likely to differ depending on its purpose, who is likely to apply it and in what context. The three main purposes are identification, assessment and risk management. It might be used, for example, to assist organisations and institutions to self-assess the risk and to think about and develop ways to reduce that risk. It might be used externally by a regulatory body to guide internal and external reporting of risk and prevention policies. It might also be used to guide organisation or system design or review. Lastly it might guide the development of outcome measures for research and the evaluation of risk management processes.

Methodology

The methodology for this study was to examine the literature on four dimensions of risk and to identify the extent to which these risks are elevated in certain institutional contexts. These dimensions include:

- situational risk
- vulnerability risk
- propensity risk
- institutional risk.

These four kinds of risk were chosen because in the research literature they have been identified as being different dimensions that aid understanding of the problem (Irenyi, Bromfield, Beyer & Higgins, 2006). The research evidence on vulnerability risk and situational risk assists in differentiating the degree of risk of child sexual abuse associated

with different kinds of activity. The third and fourth kinds of risk concern the nature, characteristics and staffing profile of the institution.

The risk of child-to-child abuse is considered within this overall framework, but it is important to note some differences in the patterns of abuse. In comparison with abuse perpetrated by adults, child-to-child abuse may be more likely to occur in the context of harassment, bullying, or even clumsy or careless sexual experimentation. Children with harmful sexual behaviours may also be more likely than adults to demonstrate these behaviours in groups. There are various aspects of institutional risk associated with the selection, training and supervision of staff, as well as handling complaints of abuse against staff, which are inapplicable to the risk of child-to-child abuse.

A heightened vulnerability risk arises where an organisation is working with children and young people who are, according to the available research evidence, at a greater risk of sexual abuse than other children. Children and young people with an elevated vulnerability risk may be disproportionately clustered in certain kinds of organisation or areas of the community. A heightened situational risk exists where the nature of the activity concerned, or the setting within which care takes place, present many opportunities for adult predators to be alone with children or young people in a way that increases opportunity for abuse. Activities that are inherently one-on-one, such as piano lessons or individual sports coaching, are situations of increased situational risk. So too are long-term residential facilities in which the nature of the institution makes it hard to prevent opportunities for adults and other residents to be alone with children if they want to create the circumstances for that to occur.

Institutions may have a staffing profile that gives rise to a higher propensity risk. The analysis of propensity risk begins from the premise that not all human beings are equally likely to engage in the sexual abuse of children and young people. An organisation with a predominantly or entirely male staffing profile, such as a sports club for young male athletes, needs to be alert to the fact that this profile increases the statistical probability that it will have issues with sexual abuse compared with, say, a club providing an activity for girls of a similar age and run by women.

Institutional risk arises from characteristics of the organisation and its culture, which makes it more or less prone to provide opportunities to perpetrators to abuse children or to fail to protect children who disclose abuse. As far as possible, the focus of this part of the report is on externally identifiable institutional risk factors, for these are the factors that are most useful in terms of devising external regulation. However, attention is also paid to risk

factors that are not readily identifiable by those outside the organisation, since these factors can be helpful in internal self-assessment by the organisation. Awareness of these factors may assist prevention efforts.

This analysis is supported by various illustrations from the Royal Commission's case studies to show how the different kinds of risk translated, in those contexts, into the abuse of children. The material from the Royal Commission is not, of course, a form of research evidence that can be used to demonstrate a greater likelihood that abuse will occur in particular contexts or if certain preconditions are present. There is no control group or counter-factual. Rather, the case studies are used to demonstrate how the factors implicated in an elevated risk of sexual abuse were present in various contexts that have been the subject of the Royal Commission's examination. Most adverse (and positive) incidents and outcomes are not the result of only one or two factors but are cumulatively 'determined' (Jewkes, Sen & Garcia-Moreno, 2002; Teten Tharp et al., 2012).

Gradations of risk

In relation to each kind of risk, we indicate which institutions are likely to be lower- or higher-risk along a spectrum, based on the population of children and young people that an institution of that kind is likely to serve, and the kinds of activities in which it is engaged. It must be emphasised that these gradations of risk are generalisations that represent extrapolations from the existing body of knowledge.

Relationships between different kinds of risk

Although analysed separately and categorised in these ways, the different kinds of risk are not necessarily independent. Vulnerability risk and situational risk may be correlated, for example, since many children and young people with a heightened vulnerability risk are also clustered in institutions that present a heightened situational risk. This is particularly so for those vulnerable children and young people who need long-term residential care.

Vulnerability risk may also be the other side of the coin from propensity risk. As discussed in the next chapter, the risk of child sexual abuse in institutional settings is relatively low in activities involving children from birth until they commence formal schooling, but it is much higher for children in the upper primary school years and for adolescents. Furthermore, the professionals or volunteers involved with pre-school activities are mostly female.

In the following chapters, we analyse the different kinds of risk separately but taking account of the overlap between them, to try to identify the cumulative impact of multiple

risk factors in different kinds of institutional or care settings. This will also involve taking account of the different forms of abuse involving adult–child and child-to-child abuse.

Chapter 2: Risks according to the nature of the activity

There are two dimensions of risk according to the nature of the activity undertaken. The first is situational risk, arising from the increased risk of sexual abuse in contexts where the opportunities for sexual abuse are greatest. The second is vulnerability risk, which needs to be considered because some children are more at risk of sexual abuse than other children, and may be clustered in institutional care settings because of those characteristics.

Situational risk

One of the most influential theories to explain the preconditions for sexual abuse by adults is that of Finkelhor (1984). Although it is not without its critics (Ward & Hudson, 2001), it remains a theory with considerable explanatory power as a framework for understanding how sexual abuse occurs. Finkelhor's four preconditions are that the perpetrator must be motivated to commit child sexual abuse; the perpetrator must overcome any internal inhibitors to the sexual abuse of a child; the perpetrator must overcome external inhibitors to gain the opportunity to perpetrate the abuse, and the perpetrator must overcome resistance by the victim.

Situational risk is concerned primarily with the third precondition. An institutional setting presents a high level of situational risk in circumstances where the nature of the activity regularly gives adults who may have a propensity to abuse children or children with harmful sexual behaviours, the opportunity to be alone with children, or the circumstances of the activity or institution are such that potential perpetrators do not find it difficult to create opportunities to be sufficiently unobserved to facilitate the abuse.

The Case Study of Stephen Larkins (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014a) illustrates how perpetrators in programs with ineffective child protection strategies may create situations that allow abuse to occur. Larkins had children overnight at his home and slept with a young child in a tent.

Situational risk in the research literature has a number of different aspects (Smallbone, Marshall & Wortley, 2008). These include the physical facilities in which the activity occurs (allowing for greater or lesser capacity for observation of activities by other staff), organisational climate and the quality of child protection policies. Characteristics of the particular organisation are considered under the heading of institutional risk.

Elevated situational risk

An elevated situational risk could be defined as one in which the social ecosystems of a potential perpetrator and a potential victim converge in time and space in the absence of another person present who would otherwise protect the child (Smallbone, Marshall & Wortley, 2008, p 39). This convergence of social ecosystems occurs most obviously in family settings, but it may also occur in a range of institutional contexts.

In Figure 1, the differential situational risk of abuse by adults in institutions is conceptualised according to two elements. The first is the opportunity to be alone with a child unseen, which makes it much easier to 'groom' a child for those who are motivated to do so. The opportunity to be alone facilitates the move from innocent relational behaviour to unlawful sexual acts and is particularly relevant to intentional, predatory behaviour. The second is the opportunity to form relationships that could involve physical contact and/or emotional closeness, and which may precipitate crossing acceptable professional boundaries and/or abusive behaviours. This accommodates risks of child sexual abuse where the behaviour is not predatory, nor even premeditated. The abuse may occur where a staff member is engaged with the child in a continuing relationship that has the potential to lead to emotional closeness and/or physical contact. Some relationships such as that between a foster carer and a child, or the care of a child with a disability, may even be expected to provide for some level of physical contact or emotional closeness in the everyday work of caring. This may present temptations to cross acceptable professional boundaries.

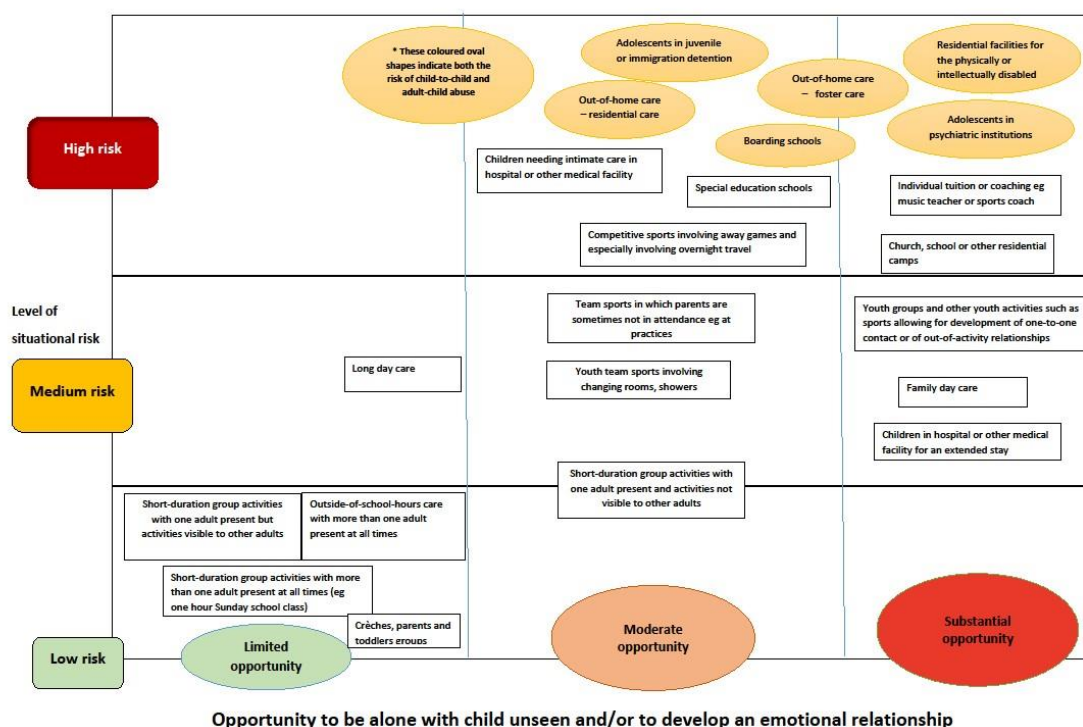


Figure 1. Elements of situational risk for various activities and institutions

The two elements of situational risk are related but distinct. Situations in which an adult is alone with the child may offer a limited opportunity for abuse if there is no opportunity to build a relationship that facilitates the child’s engagement with, or acquiescence in, acts of a sexual nature. An example is a doctor in a surgery who sees an adolescent without the parent present. It is more likely that sexual abuse will occur as a result of deception concerning the claimed medical necessity for touching of genitalia, than grooming in this situation (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016a, pp 15–27). Conversely, the opportunity to form relationships that could involve physical contact or emotional closeness may not lead to abuse if there is no opportunity for the abuse to occur undetected, even if such a context creates an increased risk of temptation to engage in sexual activity. The lowest risk occurs when neither opportunity is available, as exemplified by the short-duration activities with other adults present in the bottom sector of Figure 1.

The presence of other children may not necessarily be protective. Some perpetrators engage in brazen sexual abuse of children when other children are around. Brother Gregory Sutton, for example, would touch children sexually while they were sitting on his lap during class time or with another child present, as well as when alone with an individual child (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015e, pp 70–1, 73). Such surreptitious sexual touching of primary school children, if observed by other children at all, may well not be identified by the children as unlawful conduct.

Residential institutions of all kinds, including juvenile detention or immigration detention centres, carry an elevated situational risk, as do boarding schools or boarding houses in day schools. These situations, in the top right hand sector of Figure 1, frequently provide an adult with both the opportunity to be alone with a child, and to develop an emotional relationship with the child. This may present temptations to cross acceptable professional boundaries. Where this involves work alone with the child such as counselling, pastoral care, and involvement with personal care-taking such as bathing or dressing, the risks are considerably elevated.

The situational risk of child-to-child abuse is greatest for children in out-of-home care and children with physical and intellectual disabilities in residential facilities, adolescents in juvenile or immigration detention, and in psychiatric institutions, and boarding schools. These are marked in Figure 1 by coloured oval shapes in the body of the figure and are in the high-risk zone. Child-to-child abuse may take the form of bullying or ‘hazing’ with sexualised elements. A group may be involved in such behaviours. Nonetheless, most cases occur in circumstances where the child with harmful sexual behaviours has the opportunity to be alone with the child or young person.

There is some situational risk of child-to-child abuse associated with any school environment and long day care setting, particularly given the substantial amount of time that children spend in these institutions. Some health care settings also involve elevated situational risk, as do youth camps and family day care. A challenging aspect of preventing child-to-child abuse is that these aspects of situational risk are normal features of many organisations and institutions where children and young people reside together or participate in school together.

Since ‘grooming’ the child is a calculated part of the strategy of some perpetrators to gain the child’s acquiescence and ‘silence’ (Conte, Wolf & Smith, 1989; Elliott, Browne & Kilcoyne, 1995; O’Leary, Koh & Dare, 2017), there is a very high situational risk in institutional settings if the potential perpetrator and potential victim are together in contexts that offer

long or frequent interactions. This is most likely to be the case in residential settings, particularly in circumstances where the residential institution is the ordinary home of both the potential victim and the potential perpetrator.

Boarding schools and children's homes run by male religious orders provide an example of high situational risk. Typically, the brothers would live on the school grounds or in a residence very close by. For example, the Marists Case Study (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015e, p 36) described the situation at the Marist College in Canberra where Brother Kostka Chute offended against numerous boys:

'Brother Chute lived in the Brothers' residence on the grounds of Marist College. The residence was about 60 to 70 metres from the nearest school building, adjacent to the playing fields. There were about 12 Brothers living in the residence at the time and each Brother had a bedroom.'

The case study also noted that he had an office that provided opportunities to be alone with children, unseen (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015e, 2015, pp 36–7):

'In the early years, his office was located in the 'Year 7 corridor', which meant that the door opened directly onto a verandah. Inside the office there was access to a windowless storeroom. Many of Brother Chute's victims complained that they were sexually abused by Brother Chute in the classroom (with or without others present), his office and/or the storeroom to his office.'

Kostka sexually abused children on many occasions in his room at the Brothers' residence (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015e, pp 38–9). He also allowed children to spend time with him in his office when they had nothing to do, including if they wanted to skip class. A number of children were abused in his office.

Brother Gregory Sutton also abused a number of primary school age children both on school premises and in his bedroom at the Brothers' residence (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015e, pp 70–1, 75).

In other situations also, teachers or the responsible adults live together with, or in relatively close proximity to, the children. This was a characteristic of some children's homes and also of some boarding schools.

Residential settings

As the Marist cases and many other Royal Commission case studies demonstrate, a residential setting for the care of children gives rise to greater opportunities for the sexual abuse of children. This includes boarding schools, children's homes, foster families, and residential facilities for children and young people with intellectual disabilities or psychiatric disorders. There is also an elevated risk of child-to-child abuse in these settings, as children and young people of different ages live together in non-familial environments and without the protective element of having a trusted parent to whom they can disclose abuse (Margolin & Craft, 1990). They also have the opportunity to be alone together unobserved.

There is also a high situational risk in any compulsory detention facility for children and young people. This includes not only juvenile justice facilities (Beck et al., 2013) but also immigration detention centres, on the mainland of Australia or elsewhere. Most children who remain in some form of immigration detention centre are there with a parent or guardian who may be able to fulfil a protective role but who may also be depressed, emotionally unavailable and feel powerless. Unaccompanied minors – children and young people who have travelled to Australia without their families – may be especially vulnerable to abuse in a detention centre facility.

Day schools

While boarding schools present a particularly elevated situational risk, some situational risk is associated with any school environment, both for adult-child abuse and child-to-child abuse. In particular, secondary school environments, which offer opportunities for teachers to be alone with students or to form friendships with them, may lead to sexual abuse that takes place beyond the school boundaries. Child protection policies therefore need to address these issues by establishing legal obligations and boundaries for teacher-student relationships.

Addressing child-to-child abuse requires general prevention measures such as child protection education concerning any form of unwanted sexual contact, anti-bullying programs (to the extent that indecent assaults can be a means of bullying) and changes to the infrastructure to increase visibility in parts of the school where abuse might otherwise occur away from view.

Health care settings

The provision of health care, especially intimate care that involves touching the child's genitalia, also offers many opportunities for sexual abuse, giving rise to an elevated situational risk. As the Royal Commission explained in Case Study 27 (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016a, p 4):

'Medical practitioners, health professionals and hospitals are responsible for improving and maintaining the health of their patients. Patients, who are in a vulnerable state of illness, place their trust in health care providers. Patients, and the parents of child patients, place such trust in medical practitioners that they permit those medical practitioners to view and touch intimate parts of the patient's anatomy. Patients permit these acts because of the close nature of the health practitioner-patient relationship and because they believe that a health practitioner is acting in pursuit of a higher purpose of assisting the patient with his or her illness or injury and not out of personal sexual gratification.

Children often follow instructions from health care providers without question and the private one-on-one nature of therapy places children in a vulnerable position.'

There is some overlap with the category of residential settings, as stays in hospital for a relatively long period arguably fall within the category of residential care contexts.

The situational risk involved in the provision of health care to children, and in particular, adolescents, is illustrated by the offending history of Dr John Rolleston (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016a). Rolleston was at various times a general practitioner seeing patients in his surgery. Sometimes teenage boys would go into the surgery alone with him while a parent or grandparent remained in the waiting room. Under the guise of conducting a medical test, he masturbated his boy victims to ejaculation. Typically, they acquiesced, assuming, though sometimes with considerable doubts, that it was a legitimate medical procedure (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016a, pp 15-27). This case, albeit an unusual one, illustrates how children need not be alone for a long time with a perpetrator, or even to see him frequently, for sexual abuse to occur. Typically, appointments with general medical practitioners last between 10 and 25 minutes.

Appointments with psychologists may also offer an opportunity for the health professional to spend significant amounts of time alone with a child, providing an opportunity for abuse. The Royal Commission reported on the case of one boy who was sexually abused by Mr

Frank Simpson in a treatment facility associated with a hospital. The boy was being treated for asthma, which was thought to have a psychosomatic origin. He was about 11 years old at the time. Simpson engaged him in ‘play therapy’ that involved getting the child to perform oral sex on him. His mother, who brought him to the appointments, stayed in the waiting room (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016a, pp 60–1).

Family day care

Family day care gives rise to a significant situational risk, because typically one adult, most commonly a woman, has the care of a number of children other than her own without another adult present. Typically, while the situational risk is high, the overall risk of sexual abuse is quite low given the lower vulnerability risk of very young children and the very low propensity risk for female caregivers. Nonetheless, the risks involved in family day care are not negligible, especially if other adults or older children who might have a sexual interest in the children have opportunities to spend time with them without another protective adult present.

Individual tuition

Any situation where there is individual tuition, such as individual maths teaching, music lessons, or coaching in individual sports, gives rise to a situational risk. The risk is moderated by the brief periods when potential perpetrator and potential victim are alone, and because children usually return to their primary caregiver or to another trusted adult immediately afterwards, representing for the perpetrator, a significant risk of disclosure. Music lessons for younger children typically last half an hour and if the parent is not present, he or she may be waiting nearby or will return to collect the child.

Many, if not most, music teachers are individual service providers and are not part of a larger organisational structure. They fall outside the definition of an institution. The definitional boundaries can be blurred, however, where a music teacher offers boarding accommodation to overseas students, and is closely aligned with a musical agency (see, for example, Cashmore et al., 2016, p 208).

Conversely, some driving schools employ multiple driving instructors and fall within the definition. This is also the case with some coaching colleges offering lessons after school hours to students in various subjects to supplement their school-based learning. Teachers of musical instruments who give music lessons under the auspices of a school’s extra-curricular program also come within the definition of being part of an institutional context.

The case of AOA, who was abused by the school principal, David Lawrence, at a private school in Tasmania, illustrates how creating the opportunities for individual tuition can provide the situational context in which abuse can regularly occur (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015h). AOA was an only child being brought up by his father, a widower. The principal offered to give him private French lessons in his office. Molestation regularly occurred as they sat on the couch together looking at French texts, and progressed to other forms of sexual abuse (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015h, p 26).

Youth camps and sporting activities

The older the child, the more common it will be for him or her to be involved in activities that allow relationships with non-related adults to develop, which can become friendships. The sports coach, the youth group leader and the music teacher may relate to the adolescent more as older friend and mentor than as adult in loco parentis. Such relationships also allow for more natural one-to-one interactions than is typical with primary school age children.

As children get older, they are more frequently in situations where they are away from the care of a parent or parents for extended periods. Such activities include camps organised by schools, church groups or the scouts, or trips for competitive sports. Any overnight or extended-stay camp involves an elevated situational risk both of adult–child and child-to-child abuse, which is usually mitigated by the fact that there are many other children and young people and other adults at the same activity. Nonetheless, where the activity is such as to provide a context for grooming over a period of time, extended periods away from parents may give opportunities for abuse.

The coaching of elite athletes provides a particular example of situational risk in relation to sports. Parent and Demers (2011, pp 120–21) describe the risks associated with sports coaching generally:

‘... the power of coaches, the predominance of performance over the well-being of athletes and the many opportunities for abuse offered by sport seem to constitute important risk factors. At the relational level, coaches have considerable influence over athletes, since they are often seen as parental figures. The coach's authority is also rarely questioned by parents or athletes. Thus, there is a great risk that this type of abuse may be kept quiet and that the adult may take advantage of this situation (references omitted).’

Leahy, Pretty and Tenenbaum (2002) reported that girls in organised competitive sports faced twice the level of risk compared with boys, for both elite and youth sports.

Modifiable and unmodifiable situational risks

Situational risks can be classified as risks that are modifiable or unmodifiable. An unmodifiable risk arises in activities which, by their very nature, tend to allow more opportunity for a perpetrator to be alone with a child, leading to a heightened risk of sexual abuse. Examples include foster care settings in which the nature of family life is such that time alone with children is just a normal part of the environment. While some level of risk can be addressed by training foster carers, setting rules and supervising placements, the degree of prevention that can be achieved in these ways should not be overestimated. The nature of a foster care placement is that it is meant to provide a family setting for the child.

Modifiable risks are those in which, with some effort, the inherent situational risk can be reduced. Child safe organisations seek to minimise the modifiable situational risks to the extent that this is reasonably possible (Royal Commission, 2016). There are few institutional settings in which the risk of abuse is unmodifiable. In most situations, some steps can be taken to reduce the risk.

Vulnerability risk

All children and young people are vulnerable to child sexual abuse (Irenyi et al., 2006). However, some are more vulnerable than others.

In Figure 2, the differential vulnerability risk in institutions is conceptualised by proposing the degree of risk (low, medium and high) for children (vertical axis) of different ages (horizontal axis) in different kinds of institutions and circumstances.

The figure suggests that the vulnerability risk of child-to-child abuse is greatest for adolescents in out-of-home care juvenile detention and in psychiatric institutions, especially where some residents have previously been victims of child sexual abuse.

Age

The age of the child is identified as an important factor in assessing the degree of risk; but Figure 2 should not be understood as a simple continuum of increasing risk based on age, with 17-year-olds more vulnerable than 13-year-olds who are more vulnerable than eight-year-olds.

The majority of victims, and the higher risk, is clustered in the upper primary and lower secondary age ranges – that is, between about 10 and 15 years of age (Black, Heyman & Smith Slep, 2001), with older teenagers also being victimised in quite substantial numbers. This is consistent with police data from New South Wales and South Australia, with nearly two-thirds of reports to police involving complainants aged 10 to 17, and 37 per cent aged 14 to 17 (Cashmore et al. 2016, pp 60–1 and 137–8). It is also reflected in the data from the private sessions analysed in the Royal Commission’s Interim Report. Of those who knew what age they were when the abuse first started, about 73 per cent were eight to 11 or older (Interim Report, 2014, vol 1, p 286).

The research evidence would appear to indicate that very young children have a low level of vulnerability risk in comparison with upper primary and lower secondary school age children, although there are particular difficulties with the identification of abuse of young children that could lead to under-detection and diagnosis. Furthermore, little is known about the risk to young children of sexually abusive behaviours by older children.

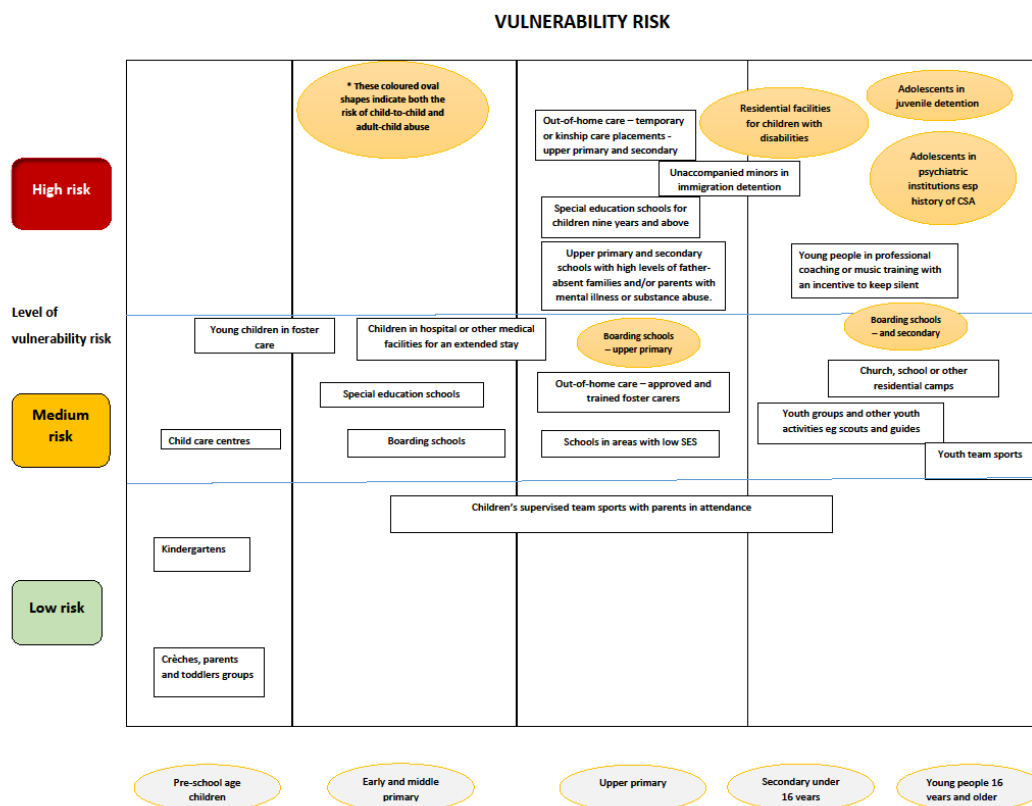


Figure 2. Vulnerability risk

This does not mean there is no risk of sexual abuse for infants and young children. Pre-schoolers can be victims of child sexual abuse in institutional care settings such as childcare centres (Faller, 1988; Finkelhor & Williams, 1988). The case of Vanessa George and the Little Ted Nursery in England (Plymouth Safeguarding Children Board, 2010) demonstrates the need for awareness not only that pre-schoolers may be vulnerable to sexual abuse, but also that the perpetrator could be female. Vanessa George, a married woman with children of her own, was associated with a man and another woman she met through Facebook. She sexually assaulted several children at the nursery and took photographs, sending them to the others. They in turn shared photographs with her of their sexual abuse of children. George admitted seven sexual assaults of children and six counts of distributing and making indecent pictures (Bunyan & Savill, 2009). Two other women associated with the male perpetrator were also convicted of sex offences against young children (Jenkins, 2010).

While the preponderance of the research evidence suggests that young children – in particular children below school age – are at a lower risk of abuse than older children, this needs to be qualified by the fact that young children may not identify what has occurred as sexual in nature, or may have little recall of their early childhood experiences (Finkelhor & Baron, 1986). The sexual abuse of young children may therefore simply be less identified and less recorded in memory or less retrievable. Some abuse could also be masked if it occurs in the context of meeting a child’s intimate care needs. This may explain the low levels of abuse of young children in police data (Bureau of Justice Statistics, 2000; Cashmore et al., 2016; Leach, Powell & Anglim, 2016), conviction statistics (Carlstedt, Forsman & Söderström, 2001) and in adult reports of childhood sexual abuse (Finkelhor & Baron, 1986). In New South Wales and South Australia, for example, children who were under six years at the time of the alleged offence comprised 16 per cent of child victims reported to police (Cashmore et al., 2016).

Even taking into account that more abuse of children may occur than can be identified or is reported, there is reason to believe that there is less abuse of young children because of what we know about offender behaviour. A child will not be sexually abused unless an adult or child or young person has a motivation to do so. That depends on the capacity for a child to give to an adult or young person some kind of sexual stimulation or pleasure. Young children are, for anatomical reasons, less likely than older children to be the victims of penetrative sexual abuse (De Jong, 1998; Johnson, 2004). The evidence from the literature on perpetrators also suggests that fewer men are sexually attracted to young children than to children of middle primary school age and upwards (Seto, 2004).

Thus, while young children are particularly vulnerable because of their high care needs, and their limited capacity to identify that intimate physical contact involving genitalia is either sexually motivated or wrong, there is good reason to believe that there are in fact far fewer sex offenders against infants and pre-schoolers than older children (Finkelhor, Turner, Ormrod & Hamby, 2009).

Not only is there a low propensity for risk in pre-schools and childcare centres but there may also be a relatively low situational risk. Organisations running activities for pre-schoolers typically have multiple adults around, depending on the number of pre-schoolers, because of the high care and supervision needs of young children. The children are typically gathered in large, open environments with secure boundaries, such as the main teaching room or playground of a pre-school. This is protective in terms of child sexual abuse. It makes it

harder for perpetrators to be alone with young children than when children are older and undertake more activities outside of the family – in which opportunities for abuse may arise.

The age distribution of victims is illustrated by a national representative sample of children and young people between two and 17 in the United States. Finkelhor et al. (2005) and, Finkelhor, Ormrod & Chaffin (2009) found that in a one-year period, 0.9 per cent of children aged two to five were reported to have had some experience of sexual victimisation; for school-aged children, the figures were 2.0 per cent for children six to nine, 7.7 per cent for those 10 to 13, and 16.3 per cent for adolescents 14 to 17. Victimization included sexual harassment. The higher percentage of adolescents experiencing some form of sexual victimisation reflects the fact that attraction to pubertal and post-pubertal adolescents is biologically within the normal spectrum of sexual attraction (although not acceptable socially or legally) and need not be explained by reference to paedophilia.

In assessing degrees of risk according to age, there is some difficulty in determining how to categorise the risk to young people 16 years and above. The Terms of Reference for the Royal Commission define a child as being under 18. How to categorise the risk to 16- and 17-year-olds is complicated by the issue of legal consent. In most states and territories, the age of consent is 16 (Boxall, Tomison & Hulme, 2014). It is 17 in South Australia. Even in the states where the age of consent is 16, there may be an older minimum age of consent where the perpetrator is in authority over the victim.

A relationship may be abusive notwithstanding that the victim has given a legal consent because of the differential of power and abuse of trust that may be involved in the context of the relationship. For this reason, even apparently consensual relationships between adults may be a breach of professional standards if the relationship is, for example, one of doctor and patient, counsellor and client, or minister of religion and parishioner.

An exploitative or abusive relationship between an adult and a 16 or 17-year-old will not be documented in research that classifies sexual abuse as occurring when the child is under 16 (Cashmore et al., 2016). Nor, if the young person has given consent, will it be recorded in police data on allegations of sexual assault unless the perpetrator is in a position of authority or for some other reason the sexual relationship breaches the criminal law.

For these reasons, how the risk of sexual abuse of 16- and 17-year-olds is assessed is likely to depend on the definition of abuse and the datasets from which prevalence information is drawn.

In formulating policy to respond to the degree of risk in institutional care settings, it is not easy to differentiate the risk between young people under 16 and those 16 to 17 for the following reasons:

- (i) As a practical matter, few institutions for young people cater only for 16- and 17-year-olds. There are high schools for students in Years 11 and 12 only, but there are similar issues of power imbalance and sexual exploitation by teachers as at general high schools for children in Years 7 to 12. Perhaps driving schools are the only kind of organisation serving young people for whom the 16th birthday is of particular significance.
- (ii) Few organisations serving children and young people have markedly different systems in place for those under 16 compared with those 16 or older. They may have different groups for children and young people of different ages, but the same child protection policies and practices across the institution.
- (iii) There is widespread community acceptance that a relationship between an adult professional and an adolescent who is 16 or 17 may well be exploitative and abusive even if the adult does not thereby commit a criminal offence.

Heightened vulnerability

Age is one factor in terms of vulnerability to sexual abuse, but it interacts with other aspects of vulnerability. Some children and young people are at much greater risk of being abused than others of the same age. Wurtele (2012, pp 2433–44) summarises the research literature on this as follows:

‘Although all minors are vulnerable to sexual exploitation, certain youth appear to be at greater risk for victimization by staff. These include children who have been previously victimized, youth with low self-esteem or self-confidence, who live in single-parent homes (especially boys without father figures), lack strong relationships with parents and peers, along with sexual minority youth. Young people with disabilities (mental and physical) are also at greater risk for sexual abuse in institutions, particularly youth with speech and language disabilities, serious emotional disturbances, or intellectual impairments.’

Similarly, Smallbone, Marshall and Wortley (2008, p 135) report that in comparison with non-abused children, children who experience sexual abuse are more likely to have poorer academic performance and more behavioural problems. They also tend to come from more disadvantaged and risky neighbourhoods, and from unhappy families characterised by

divorce, separation or discord (Fergusson, Lynskey & Horwood, 1996). They are also more likely to have histories of physical abuse, neglect and prior sexual victimisation (Cashmore & Shackel, 2013).

Such lists are helpful only to a certain extent when it comes to differentiating risk within institutions. Children and young people with low self-esteem or self-confidence are likely to be found in all kinds of organisations working with those of their age group; those who lack strong relationships with parents and peers may also be found in many different institutional contexts. Identifying characteristics that lead to heightened vulnerability is only useful to the extent that children with at least some of these characteristics are clustered in particular institutional care environments.

Even so, there are some institutional settings in which there may well be much greater concentrations of children with these characteristics than others.

Children living in a home without one or both parents

An example is children living in a home without one or both parents (Butler, 2013; Laaksonen et al., 2011). Children in families living without one or both parents are disproportionately at risk of abuse and neglect and this is reflected in child protection statistics (Australian Institute of Health and Welfare (AIHW), 2008, p 32). Being a single parent is associated with having new partners, a need to share housing, and possibly being less able to supervise children when working longer hours or being able to afford better quality care arrangements.

Perpetrators who target children intentionally tend to choose children who are socially isolated and who have poor self-esteem (Conte, Wolf & Smith, 1989; Elliott, Browne & Kilcoyne, 1995; Erooga, Allnock & Telford, 2012) as well as those who have fewer protective adults they can turn to (Fleming, Mullen & Bammer, 1997). They may also target children and young people who are emotionally needy and responsive to attention from a potential father figure as a replacement for their 'absent' father (Fater & Mullaney, 2000; Isley et al., 2008; Smallbone, Marshall & Wortley, 2008, pp 136–7). These characteristics and mood disorders such as depression in adolescents (Barber, 1994), can be an outcome of family dysfunction (Fergusson, Lynskey & Horwood, 1996) and breakdown (Amato, 2005; Kim, 2011).

About 40 per cent of all children will experience one of their biological parents living elsewhere by the time they are 15 to 17 years old (Australian Bureau of Statistics, 2015), an

increase from around 25 per cent some 20 years ago (de Vaus & Gray, 2004, p 15). For the most part, the parent living elsewhere is likely to be the father.

While parents from every part of the community could find themselves in the position that their marriage or de facto relationship has broken down, there are reasons why, at least after the separation, they are more likely to be clustered in lower-income neighbourhoods. Even if the parents are in higher bands of socio-economic status prior to the separation, they are very likely to experience a significant reduction in their standard of living for some time afterwards. This is especially so for mothers with children (Andreß et al., 2006; Weitzman & Maclean, 1992). Fathers also experience a drop in living standards in contrast to their situation prior to separation, after taking account of child support transfers (Braver & O'Connell, 1998; McManus & DiPrete, 2001). The economies of scale in running one household are lost when the parties have to organise themselves into separate households with two lots of rental or mortgage costs and duplication of many other expenses. For mothers who have withdrawn from workforce participation to care for their children, and who do not re-partner, the financial struggle may be a particularly long and difficult one, despite considerable government assistance (de Vaus et al., 2014; Funder, Harrison & Weston, 1993).

It follows that, while a substantial minority of all children in Australia have at least one biological parent living elsewhere, there is likely to be a disproportionate number of such children concentrated in areas with low socio-economic status (SES), and this may mean that, for example, there may be a higher proportion of children in schools in those areas who are particularly vulnerable to sexual exploitation.

This may be an explanation for why, in some studies, low socio-economic status is correlated with child sexual abuse, although to a lesser extent than other forms of abuse or neglect (Drake & Pandey, 1996). Put differently, the risk of child sexual abuse in schools and universal services for children and young people is not distributed evenly across the socio-economic spectrum. Children and young people who are at a higher risk of sexual abuse may be disproportionately clustered in certain areas, as well as certain kinds of institutions. This suggests the need for particular alertness in schools and other facilities that operate in low SES areas, with a high proportion of children or young people with a parent living elsewhere.

Children with certain kinds of disability

More than 170,000 children aged zero to 14 in Australia have a severe or profound disability, with the most common disabilities being intellectual, sensory/speech, physical and psychiatric (Australian Institute of Health and Welfare (AIHW), 2016a, p 116).

Children with disability are at heightened risk of child sexual abuse (Brunnberg, Bostrom & Berglund, 2012; Higgins, 2010; Llewellyn, Wayland & Hindmarsh, 2016; McEachern, 2012), but some differentiation needs to be made between types of disability (Jones et al., 2012). One large epidemiological study in the United States found that children with disabilities (including psychological disorders) were 3.14 times more likely to be sexually abused than children without disabilities (Sullivan & Knutson, 2000). However, that differential risk was not uniform across all kinds of disability. Deaf and hard-of-hearing children and children with visual impairments were at only a slightly greater risk according to this study (although a retrospective Norwegian study by Kvam (2004) found that deaf children were two to three times more likely than children without a disability to be sexually abused). Children and young people with behavioural disorders were 5.5 times more likely to be sexually abused. Children with an intellectual disability were four times as likely to be sexually abused, and children with speech and language impairments were almost three times as likely (Sullivan & Knutson, 2000, pp 1265–6).

Case Study 9 on a school for children with intellectual disabilities in South Australia illustrates not only the special vulnerability of children with intellectual and communication disabilities but also the difficulties in employment checks and investigating the allegations (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015a).

The heightened risk associated with intellectual disability is particularly well-documented (McDaniels & Fleming, 2016; Wissink et al., 2015). One Dutch study found that children and young people with a mild intellectual disability were almost three times as likely to be sexually abused in out-of-home care as other children (Euser et al., 2016, p 87).

For these reasons, it is important to consider the heightened risk associated with institutional care contexts in which children with certain kinds of disability are concentrated. As Llewellyn, Wayland and Hindmarsh (2016, p 28) observe:

‘[C]hildren with disability spend a great deal of time in a range of institutional contexts. Some of these institutional environments are not ‘normalised’. This means that the only children present will be those with disability, for example in situations such as respite care, Special Olympics, classes for children with disability, and school

transport. In many contexts, there may be one adult or very few adults unrelated or not known to the child. This creates an environment in which there is little oversight of adult or older peer behaviour.'

Children with an intellectual disability, children with speech and language impairments (Brownlie et al., 2007), and those with behavioural disorders may be particularly vulnerable. These children are subject to intimate care from others and less likely to be able to articulate complaints of abuse (Gore & Janssen, 2007; Robinson, 2013, 2016).

Further research is needed to understand the extent to which the elevated risk for children with some kinds of disability is the consequence of the greater risk of sexual abuse in institutional settings in which children with disabilities are clustered and the extent to which their care is left to unrelated adults. Is it also, as Robinson (2013, p 5) suggests, that the social 'constructions of people with disability as damaged, "other", less than human, and needing to be "kept in their place"' are dominant and powerful modes of social and cultural operation' that 'have informed the development of the structures and services provided to people with disability today'? Given the current state of the evidence, certain kinds of impairment are associated with elevated risk in institutions, but the possible impact of these other mediating factors needs to be taken into account in interpreting the available research data. The interactions are discussed in Chapter 4.

Children and young people with an incentive to remain silent

Some children and young people are vulnerable because disclosing abuse will impact upon their life chances, making them very reluctant to tell anyone. This can be so, for example, for a child or adolescent who is a gifted musician or athlete and who is very dependent upon a particular teacher or coach. As Wolfe et al., (2003, p 183) observed:

'Some children and youth fear that disclosure will jeopardize their aspirations or interfere with their special training or opportunities, fears that lead them to accommodate themselves to the circumstances.'

Case Study 15, involving Simone Boyce and Swimming Australia, provides an example of these factors. Ms Boyce told the Royal Commission that, given how well regarded Mr Volkens was in the swimming community, she believed that, if she was to have any future in competitive swimming, she could not complain and that no-one would believe her (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015f, p 38).

In one case that was successfully prosecuted, after delayed reporting and successive trials, a music teacher had abused a series of talented adolescent boys whom he had sponsored

from an overseas country. He provided them with tuition, board and access to prestigious piano competitions so it had been very difficult for them to disclose the abuse (Cashmore et al., 2016). Their abuse came to light as the result of a younger child living with his parents who disclosed his abuse.

Concern about prospects for marriage may be another reason why some victims have a strong incentive to remain silent. This is likely to be so particularly for children and young people who are devoutly religious (Tishelman & Fontes, 2017). Fontes and Plummer (2010, p 500) observe:

‘Even where the sexual abuse did not involve penetration, rumors of sexual abuse might interfere with a girl’s marriage prospects. The girl’s value does not rest solely on her actual virginity but also on her ‘honor’ [sic] or her reputation. The notion that girls are less valuable as brides if they are not virgins inhibits disclosure of sexual assaults in numerous countries throughout the world and in numerous ethnic communities in the United States. In some Arab communities, if a child is rumored to have been abused sexually, it may hurt the marriage prospects of all the child’s siblings.’

Perceived impurity or loss of virginity may also lead to a sense of shame that can inhibit devoutly religious children from disclosing abuse. In the Catholic context, Margaret Kennedy (2000, p 131) explains:

‘Girls and women have been taught that the physical fact of virginity indicates spiritual valour ... Catholic children dress in white dresses for their first Holy Communion day as a sign of ‘purity’. What if, in fact, you are not ‘pure’ on your first communion day? For young children do not make the distinction between penetrative and non-penetrative sexual acts. Sexually abused children do not feel pure, they feel bad, and are they really going to tell their religious parents, teachers or ministers they have been involved in sex? No. So guilt is added to the shame.’

Notwithstanding changes in sexual mores over the years, the sense of shame that children of devout faith experience as a consequence of being sexually violated is likely to remain strong (Tishelman & Fontes, 2017).

Heightened risk due to prior victimisation

There is considerable evidence that a history of sexual victimisation is strongly associated with further child sexual abuse (Boney-McCoy & Finkelhor, 1995; Classen, Palesh & Aggarwal, 2005; Fergusson, Horwood & Lynskey, 1997).

In an Australian study of 183 children and young people identified by a child protection unit at a major hospital as having been sexually abused, Swanston et al. (2002) found that approximately one in six were notified for sexual abuse in the six years following the study; one in 10 also had prior notifications for sexual abuse. A few of these incidents related to sexual abuse by caregivers with whom the child was placed after being removed from the home, but the majority occurred when the child was living in the same household in which the initial abuse occurred. Re-victimisation of children appeared, therefore, to be a marker of ongoing family dysfunction that impaired the protection of children by caregivers.

While in some cases the re-abuse may be by the same perpetrator, a significant association has been found between prior and subsequent sexual abuse of children where cases of re-abuse by the same perpetrator have been excluded (Boney-McCoy & Finkelhor, 1995). One explanation is that children who have been sexually abused are more likely to exhibit sexualised behaviour as a learnt response to the abuse and early onset of sexual activity (Fergusson, Horwood & Lynskey, 1997). One of the traumagenic dynamics of child sexual abuse is traumatic sexualisation (Finkelhor & Browne, 1985). Experience of sexual abuse may also deplete already existing low levels of self-esteem and emotional security, engendered by feelings of shame, learnt helplessness, and being 'spoilt goods' (Krahe et al., 1999; Smallbone, Marshall & Wortley, 2008, p 151).

It is not only sexually abused children who are at heightened risk of further sexual abuse. There is evidence that children who have been subjected to other kinds of abuse and neglect may be just as vulnerable to later sexual abuse, including in their adult years (Widom, Czaja & Dutton, 2008).

In terms of child sexual abuse in institutional contexts, the children most likely to be vulnerable to sexual abuse are those in out-of-home care and juvenile justice facilities. Children in out-of-home care who have been removed from a parent due to sexual abuse are at an elevated risk of sexual abuse in a foster care or residential care context (Biehal et al., 2014). The risk may be from people other than the foster carers, including other children living in the foster home or residential care setting (Benedict, Zuravin, Brandt & Abbey, 1994; Euser et al., 2013; Timmerman & Schreuder, 2014). Young people in juvenile

detention centres are more likely than other young people in the general population to report having experienced child abuse and neglect and to have been in out-of-home care. For example, 60 per cent of young people in juvenile detention in the 2009 NSW Young People in Custody Health Survey reported experiencing at least one form of childhood abuse or neglect (with some evidence of under-reporting); 27 per cent reported that they had been in out-of-home care before the age of 16 (Indig et al., 2011, pp 31–2 and 157–8). Young people in juvenile detention may also be both the victims of sexual abuse and the perpetrators of abuse against other residents (Beck et al., 2013).

In summary, children are more at risk in some settings due to the nature of the activity that provides opportunities for an adult to be alone with the child and/or to develop and exploit an emotional relationship with the child. The opportunity to exploit the relationship will apply to some forms of child-to-child abuse but this may also be a form of bullying and may occur in groups; being alone may be less important than being without appropriate adult supervision. Some children are also more at risk due to particular vulnerabilities and they may also be clustered in higher-risk settings. As figures 1 and 2 show, there is a coincidence or overlap between the two types of risk, with the same types of institutions having the highest risks.

Chapter 3: Risks arising from the characteristics of the institution

This chapter outlines two kinds of risk – propensity risk and institutional risk – that concern the nature, characteristics and staffing profile of the institution, and the culture of the institution that may facilitate abuse and impair prevention efforts.

Propensity risk

Propensity risk in relation to an institutional setting refers to the risk that there will be perpetrators of sexual abuse within the organisation and focuses on the staffing profile of the organisation and associated factors. As with the other kinds of risk, the focus is on where there is a disproportionate clustering of risk in an institutional context.

Propensity risk has been extensively studied at the individual level. Much is known about the characteristics of those who offend against children. Although sex offenders against children are popularly characterised as paedophiles, in reality, these offenders are heterogeneous.

There is no one psychological profile for a person who sexually abuses children (Proeve, Malvaso & Delfabbro, 2016; Wortley & Smallbone, 2006). Only some perpetrators of sexual abuse of minors can be classified as paedophiles. While definitions of paedophilia vary, it is typically defined in terms of intense sexual attraction to pre-pubertal children (Finkelhor & Araji, 1986), although more inclusive definitions extend to a sexual attraction to early pubertal children (World Health Organization, 2014: F65.4).

Many sex offenders in institutional settings abuse adolescents (Proeve, Malvaso & Delfabbro, 2016). For example, in the Catholic Church, figures provided by the Congregation for the Doctrine of the Faith of over 4,000 cases known to it indicates that about 60 per cent of the cases concerned offences by men against male adolescents, 30 per cent against adolescents of the opposite sex, and 10 per cent offences against pre-pubescent children (Böhm et al., 2014, p 640). Consistent with these figures, a German analysis of 78 forensic evaluations with offending priests found that only 12 per cent of offenders met the diagnostic criteria for paedophilia (Böhm et al., 2014, p 643). The John Jay College study of child sexual abuse by priests in the United States found that 80 per cent of cases involved the abuse of boys, and that 78 per cent of victims (boys and girls) were aged 11 or older (Terry, 2008). In a study of child sexual abuse in the Anglican Church of Australia, 46 per cent of the male victims and 42 per cent of the female victims reported that they were first abused between 14 and 17 years of age (Parkinson, Oates & Jayakody 2012).

Much sexual abuse in the general population is part of a pattern of anti-social behaviour. Many of those identified as sexually offending against children have also been found to engage in and to be convicted of a range of non-sex offences, including property offences (Harris, Knight, Dennison & Smallbone, 2011; Parkinson et al., 2004; Smallbone & Wortley, 2001; Weinrott & Saylor, 1991).

The two main dimensions of propensity to abuse children then appear to be sexual interest in children or adolescents and anti-social tendencies. Paedophilia represents only part of the problem.

What, if anything, can be said about propensity risk for whole institutions? The main propensity risks are from those who are sexually deviant or engage in criminal or anti-social behaviour. There are few institutions other than juvenile detention facilities where it could be said that those with these characteristics are disproportionately clustered. Unless there is a disproportionate clustering of individuals with a propensity for abuse in certain activities or institutions, it is not possible to differentiate between institutions on this dimension. The discussion that follows outlines some relevant aspects of clustering, but noting that the predictive value of these risk factors is quite weak. There are other propensity risks that are not clustered within some institutional settings more than others and are therefore not included in this analysis.

Gender and propensity risk

First, the great majority of perpetrators of child sexual abuse are male. That means that if an institution's staffing profile is predominantly male, then it has a greater risk, statistically, of child sexual abuse occurring than if the staffing profile is predominantly female. There is also a greater likelihood of child-to-child abuse by males.

Acknowledging that it is men, far more than women, who abuse children sexually does not require that institutions with a largely male staff should be discouraged. Children and young people need male role models and male involvement. The fact that a relatively small proportion of men sexually abuse children ought not to cast a shadow over the great majority of men who work with children and young people, and who make a significant and beneficial contribution to children's lives.

It does mean nonetheless that institutions or organisations with mostly male staff, and which have elevated vulnerability risk or situational risk profiles, need to give particular attention to strategies that will moderate that risk. It may be also, given the gendered

pattern of offending, that there is a greater propensity risk of abuse in boys' institutions or in institutions where boys predominate.

Women who abuse

Twenty or thirty years ago, it was thought that sexual abuse by females was very rare indeed, and where women were involved with the sexual abuse of children, it was usually at the instigation of male perpetrators, often in poly-incestuous family cases (Faller, 1987).

Very few women are identified as perpetrators in official data such as police and court statistics. Data from the Winnipeg Family Violence Court is illustrative of the pattern in official data. Between 1992 and 1997, 3 per cent of child sexual perpetrators were identified as female (Ursel & Gorkoff, 2001). Similar figures emerged from a large American study using data from National Incident-Based Reporting System in the United States (McCloskey & Raphael, 2005). Analysis of New South Wales and South Australian police databases over a 20-year period also indicates that fewer than 4 per cent of reports involved a female person of interest (Cashmore et al., 2016).

However, self-reports by victims reveal higher proportions of female perpetrators. For example, a review of over 8,500 self-reports of child sexual abuse during a one year period found that 9 per cent of the disclosures were of sexual abuse by a female perpetrator (Harrison, 1993).

In a study of reported child sexual abuse in the 1998 Canadian Incidence Study of Reported Child Abuse and Neglect, Peter (2009) found that 10.7 per cent of identified perpetrators were female. It should be noted, however, that nearly half of these were under 15 years old, while only about 30 per cent of the male perpetrators were under that age. It seems that females comprise a higher proportion of perpetrators in cases of child-to-child abuse than in cases of adult-child abuse. The New South Wales police data also indicate a similar but less marked trend for a higher proportion of young persons of interest to be female, comprising 6.9 per cent of those aged under 15, 4.3 per cent of those aged 15 to 18 and only 2 per cent aged 40 and older (Cashmore et al., 2016).

Little is known about female perpetrators of child sexual abuse in institutional contexts. Gallagher (2000), in a search of 20,000 child protection files from eight English and Welsh regions to find reports of child sexual abuse in institutional contexts, recorded that 96 per cent of the perpetrators in institutional contexts were male and 4 per cent female. The three female abusers were involved in only two cases. In one, male and female foster

parents acted in concert. In the other, the case involved abuse by a female childminder and her adult daughter. Similarly, Shakeshaft and Cohan (1994) found, in telephone interviews with 225 superintendents, that 4 per cent of the teachers investigated for educator sexual misconduct were females. Mostly the young people concerned were older middle school or high school girls, and these relationships were described by the superintendents as romantic attachments.

It may be that the rates of sexual misconduct by female teachers with high school students (whether male or female) are higher than these percentages suggest (Cameron et al., 1986; Solis & Benedek, 2012). However, reliable data, with representative samples of respondents, are hard to find. Shakeshaft (2004) reviewed the literature but the definition of 'sexual misconduct' in certain of these studies was extremely wide, while other studies were based on newspaper reports. It may well be that self-reports of sexual relationships between high school students and female teachers are much higher than reported incidents that appear in child protection statistics, because some of the young people involved do not identify the sexual relationship as constituting sexual abuse by the female teacher.

The elevated propensity risk in boys' schools

Boys' schools are likely to have a higher number of male staff than the other types of schools. Conversely, girls' schools are likely to have a higher number of female staff. This suggests that there is likely to be an elevated risk in boys' schools.

The elevated risk in boys' schools is illustrated by the Royal Commission's Case Study 23 concerning Knox Grammar (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016d). In this independent boys' school, which has classes from Kindergarten through to Year 12, five teachers who were at, or had been at, the school, were charged with child sex offences against students and subsequently convicted. Another teacher at the school, about whom there were also suspicions of sexual abuse, was convicted of indecent exposure. The case study records evidence from complainants that four other staff members committed sexual abuse: one teacher (codenamed ARB) sexually assaulted a boarding pupil (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016d, pp 19–20); another (codenamed ARZ) was said to have been 'sleeping with' a student for two years (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016d, p 47); a third, a resident master, had a three-year 'affair' with a student which began when the boy was 16. There was also a deceased teacher against whom two victims gave evidence in the case study (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016d, pp 15, 19). In total then, at least 10 staff had either been convicted of sex offences or

have been accused of child sexual abuse while employed at the school during a period of some 20 years. The gender mix of the staff may of course be only one of the factors that led to such a poor record in terms of child sexual abuse. Other factors include a culture of minimisation by school leadership (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016d, 2016).

Another reason why boys' schools are likely to have more victims than girls' schools or co-educational schools has to do with the patterns of sex offending against boys. While overall, girls are about twice as likely to be victims of sexual abuse as boys (taking account of intrafamilial and extrafamilial abuse), sex offenders who target boys outside of a family context tend to have a much higher number of victims than those who abuse girls outside the family. For example, McKillop, Smallbone and Wortley (2016) reported on self-reported offending by 56 offenders who sexually abused more than one victim in comparison with 27 offenders who sexually abused a single victim only. A significantly higher proportion of those who acknowledged being multiple victim offenders reported first abusing a child outside of a family context and reported a significantly stronger sexual attraction to male children than single victim offenders.

This is consistent with evidence that offenders who engage in sexually abusive behaviour towards males, self-report many more victims than those who target females – some of whom may be situational offenders who engage in just one unlawful sexual relationship. In a landmark study of self-reports of offences by sex abusers in treatment programs in the United States, Abel et al. (1987) reported on 561 subjects. Those who engaged in extrafamilial abuse reported a median number of 4.4 male victims per extrafamilial and 1.3 female victims (Abel et al., 1987, p 17).

Because men who abuse boys outside of the family are more likely to have large numbers of victims in comparison with those who abuse girls (Abel et al., 1987; Richards, 2011), and because of a tendency for staffing profiles of single sex schools to reflect the gender of the students, there may be many more victims in boys' schools than girls' schools. The position in relation to co-educational schools is not as clear.

Juvenile justice facilities

There is also likely to be an increased propensity risk in juvenile justice institutions. The risk of abuse by adults may be no higher than in any other residential institution, but there is also a risk of abuse by other young people detained in the facility. Since some sexual abuse of children and adolescents is part of a broader pattern of anti-social behaviour, it should

not be surprising that young people committed to juvenile detention facilities for either sex offences or other kinds of offences might abuse other young people who are detained in the same institution (Harris et al., 2011; Parkinson et al., 2004; Smallbone & Wortley, 2001; Weinrott & Saylor, 1991).

Case Study 30, on juvenile justice institutions in Victoria, records accounts of victims who were abused by staff and visiting social workers, but also by other older residents in the institutions (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016c).

Evidence on sexual abuse in juvenile justice facilities is limited. The second National Survey of Youth in Custody involved 8,707 young people in 326 juvenile detention facilities across the United States; 91 per cent of the respondents were male. 8.2 per cent of males and 2.8 per cent of females reported sexual activity with staff; 5.4 per cent of females and 2.2 per cent of males reported forced sexual activity with another young person at a facility (Beck et al., 2013). In the previous 12 months, approximately 1.7 per cent of young people said they had non-consensual sex with another youth in the institution, including giving or receiving sexual gratification, and oral, anal or vaginal penetration (Beck et al., 2013, p 9).

This study also reported very high rates of sexual misconduct by female staff working in juvenile detention facilities. Only 44 per cent of all staff and 34 per cent of front-line staff were female but the majority of staff involved in sexual relations with the detained young people were female. Given more than 90 per cent of respondents were male, this may simply reflect the distribution of heterosexual orientation across the population. Rates of young people involved were higher for those 17 years and older (over 8 per cent) than for those 15 or younger (5.8 per cent) (Beck et al., 2013, p 20). About 60 per cent of the young people reporting sexual relations with staff indicated that it was consensual (Beck et al., 2013, p 23). Other sex involved physical force, threat of force, other force or pressure, or being given money, favours, protections or special treatment (Beck et al., 2013, p 23). The young males who engaged in consensual sexual relations with female staff or who responded to inducements such as special treatment may not have interpreted sexual relations as abusive.

Even still, juvenile justice facilities ought to be seen as higher-risk environments in terms of propensity risk due to the correlation between criminal and anti-social behaviour and the sexual abuse of others.

Non-related co-residence

There is much evidence that biological parenthood is a protective factor in terms of child sexual abuse. Although a lot of attention has been paid to father–child incest (and in particular, father–daughter incest), the evidence indicates that the risk of abuse from stepfathers, other men in intimate relationships with mothers and more distant male relatives, is higher than for biological fathers (Faller, 1990; Margolin, 1992; Russell, 1984), taking into account the proportion of children who spent time in a family setting without both biological parents. The elevated risk to children from non-biologically related adult males in the home extends to all forms of maltreatment (Radhakrishna et al., 2001).

In the institutional context, foster care involves an elevated propensity risk, not only from non-biologically related male caregivers but from other children and young people in the home (Margolin & Craft, 1990; OOHCC Consultation Paper, 2016). This is combined with a substantial situational risk, which is an issue for other residential facilities for children as well.

The issue of celibacy and increased propensity risk

One question, on which further research is needed, is to determine whether mandatory celibacy as a condition for admission to the priesthood or a religious order, increases propensity risk. The issue of celibacy is very sensitive because it is largely an issue for one faith community, the Catholic Church, which mandates that all clergy and religious live celibate lives. The Orthodox Churches allow priests to marry before entering the ordained ministry; but bishops are chosen from those who are celibate (Smith, 2015).

Celibacy is also practised in other religions as part of an ascetic tradition of spirituality (Olson, 2007). It was one of the obligations of the ‘sannyasins’ who follow the teachings of Satyananda yoga, the belief system that undergirded the life of the Mangrove Mountain ashram, explored in Case Study 21 (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016b, pp 10, 12). The evidence given in the case study indicates widespread non-compliance with this obligation of celibacy. The requirement seems to have been regularly breached, not only by the spiritual leader of the ashram and his de facto (secret) wife, but by many other members of the ashram (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016b, pp 45–6). The evidence also indicated that the Indian founder of the movement, Satyananda, had many sexual relationships with young women in the ashrams (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016b, pp 31, 55, 62).

Celibacy is a matter of theological or philosophical conviction and it is for churches and other religious communities, like all voluntary organisations, to work out for themselves their doctrines and the terms and conditions of their communal life – including the eligibility requirements for positions of leadership (Harrison & Parkinson, 2014).

Nonetheless, given the history of child sexual abuse in Catholic institutions, and the little that is known about other ostensibly celibate religious communities, it is reasonable to consider, unconstrained by theological factors or a defensive disposition, whether a requirement of celibacy may make men in organisations that mandate celibacy more likely to commit sex offences against children and young people under 18 than comparable professionals who are not required to be celibate.

Demonstrating a willingness to consider this issue, the Truth, Justice and Healing Council, representing the Catholic Church to the Royal Commission, has cautiously acknowledged that ‘obligatory celibacy may also have contributed to abuse in some circumstances’ (Truth, Justice and Healing Council, 2014, p 23).

On one side of the ledger, there is no clear evidence of a causal link between a commitment to celibacy and the sexual abuse of children or adolescents (John Jay College, 2011), although it would be difficult to prove such a link.

Furthermore, arguably, celibacy itself cannot explain choice of sexual expression. That is, if a priest or religious was inclined to break a vow of celibacy, there is no reason why he should target minors. He might have sexual relations with adult women or men, depending on his sexual orientation. Nonetheless, there may be some connection between celibacy in the Catholic Church and the sexual abuse of boys. Some priest-offenders who are heterosexual in orientation have rationalised their abusive behaviour on the basis that sexual activity with boys is not a breach of their vow of celibacy whereas sexual relations with a woman would be (Lothstein, 2004). Different levels of sexual contact falling short of intercourse have also been excused in this way (Ormerod & Ormerod 1995, p 25). In a survey conducted as part of the research for *Towards Understanding*, the discussion paper on sexual abuse in the Catholic Church in Australia, respondents noted that perpetrators within the Church dissociated their abusive behaviour from their commitment to celibacy. Indeed, a high number of respondents described perpetrators they knew as having a strong commitment to celibacy (Towards Understanding, 1999, p 44).

The John Jay College research team (John Jay College, 2011) has argued that the pattern of complaints in the United States indicated a concentration of allegations of abuse in the

1960s and 1970s, with a decline from the mid-1980s onwards. Given that celibacy was a constant throughout this period, it cannot explain the differences in reported abuse from different decades. However, as Parkinson (2014) has pointed out, this analysis confuses the incidence of child sexual abuse with the incidence of its disclosure. Research has consistently shown that men in particular who disclose childhood sexual abuse tend to delay many years before doing so. In a study of disclosures of abuse in the Anglican Church of Australia, Parkinson, Oates and Jayakody (2010) found that on average it took men 25 years to report their abuse, and women 18 years. Reporting patterns are greatly affected by the publicity given in a particular time period to child sexual abuse in institutional contexts (Parkinson, Oates and Jayakody, 2010; Smith, Rengifo & Vollman, 2008).

Furthermore, the John Jay College analysis may confuse propensity with opportunity. The propensity to abuse children may be constant while the opportunity to do so diminishes. As awareness of the problem of child sexual abuse has developed, so the opportunity for abuse has declined and the risks associated with disclosure have increased. Opportunities for abuse have also declined for various reasons, including the reduction in the number of priests and religious over the past 40 years and their declining involvement in both day and boarding schools (Cahill, 2012). In 1965, there were 3,654 religious women and men teaching in Catholic schools in New South Wales, representing 69 per cent of all teachers in Catholic schools. Forty years later, in 2005, there were only 165 and many of these were working in part-time roles or in a support capacity. They represented 0.9 per cent of all teachers in Catholic schools (Canavan, 2006).

The number of priests and religious accused of sexual abuse may have declined in recent years but this may reflect a decline in the number of child sexual abuse cases generally, as prevention efforts and community awareness of the issue have increased.

On the other side of the ledger, there seems to be a large body of evidence to suggest that the Catholic Church has had a much higher incidence of reported child sexual abuse than other churches or secular institutions. In its Interim Report, the Royal Commission reported from its private sessions data that in 68 per cent of cases of survivors reporting abuse in faith-based institutions, the institution was Catholic. The next highest was Anglican (25 per cent). Of all the institutions where abuse was reported, including government and private, Catholic institutions were still the most common, comprising 41 per cent of all institutions (Royal Commission 2014, p 290).

These figures are out of proportion to the numbers of Catholic institutions in comparison with those of other faith communities or governmental bodies. In 1961, 25 per cent of the

population identified as Catholic and 19.6 per cent of Australian school students were enrolled in Catholic schools (Cavanan, 2006). The numbers fluctuated in the 40 years thereafter between 17.6 per cent and 20 per cent (Cavanan, 2006). The Catholic Church certainly ran many children's homes and orphanages, but so did other churches, charities and government entities (Senate Community Affairs Reference Committee, 2004, pp 40–61).

There are also disparities in terms of criminal convictions. For example, the Victorian Police identified all convictions for sexual abuse of minors in that state between January 1956 and June 2012 involving members of religious organisations. There were 370 victims of abuse in the Catholic Church compared with 37 in the Anglican Church, 36 in The Salvation Army, and 18 involving Judaism. The figure for the number of victims in the Catholic Church was 10 times higher than in the Anglican Church (Victoria Police, 2012). This does not reflect the religious affiliation of people in the general population; in the 1991 Census, 41 per cent of the Victorian population who declared an adherence to the Christian faith identified as Catholic and 26 per cent as Anglican (Australian Bureau of Statistics, 1994).

The Royal Commission's data on complaints of child sexual abuse by priests and members of religious orders (Royal Commission, 2017) reinforces the impression that rates of child sexual abuse have been extremely high, at least in some religious orders and dioceses.

It is certainly possible that cases of alleged child sexual abuse have declined considerably in recent years, but the question remains whether there remains an over-representation in comparison with other comparable faith communities and secular organisations. No recent data is available to answer this question authoritatively.

The apparent over-representation in the past may of course have explanations other than celibacy, including institutional risk factors; or celibacy could be implicated along with a range of other factors.

If celibacy is implicated, what might be the causal pathways? Celibacy is certainly unlikely to be a factor in explaining paedophile attraction. While definitions of paedophilia vary, it is typically defined in terms of intense sexual attraction to pre-pubertal children (Finkelhor & Araj, 1986), although more inclusive definitions extend to a sexual attraction to early pubertal children (World Health Organization, 2014: F65.4). A commitment to celibacy would appear to be irrelevant to this. Paedophiles are not infrequently married men. However, only some perpetrators of sexual abuse of minors can be classified as paedophiles. There is no one psychological profile for a person who sexually abuses children (Wortley & Smallbone, 2006).

Catholic priests who abuse minors are a heterogeneous group with varying offence histories (Plante, 2015). Figures provided by the Congregation for the Doctrine of the Faith of over 4,000 cases known to it, indicates that about 60 per cent of the cases concerned offences by men against male adolescents, 30 per cent against adolescents of the opposite sex, and 10 per cent offences against pre-pubescent children (Böhm et al., 2014, p 640). Consistent with these figures, a German analysis of 78 forensic evaluations with offending priests found that only 12 per cent of offenders met the diagnostic criteria for paedophilia (Böhm et al., 2014, p 643). The John Jay College study of child sexual abuse by priests in the United States found that 80 per cent of cases involved the abuse of boys, and that 78 per cent of all victims (boys and girls) were 11 or older (Terry, 2008).

Much of the clergy offending against minors arises from opportunity and may not reflect a longstanding sexual interest in minors of a certain age or gender (Holt & Massey, 2012; Keenan, 2011; Terry & Freilich, 2012). One explanation for opportunistic and non-violent sex offending by priests and male religious against adolescents, is a desire for intimacy that is missing from their personal lives (Doyle, Sipe, & Wall, 2006), and this is one way in which celibacy may be implicated. Wurtele (2012, p 2444) explains how such personal difficulties may lead to the sexual abuse of minors:

‘Rather than transgress with intention and premeditation, many others appear to make bad judgments and fall into sexual relationships ... especially when they work in settings where there are opportunities for unguarded access to youth along with the absence of effective risk-management strategies. Staff sexual misconduct (SSM) of youth most likely occurs when there is the combination of adults who: 1) may be having personal or professional troubles and in need of intimate contact; 2) work with adoring and often needy adolescents exploring their own sexuality; and 3) work in organizations where there are opportunities for adults to commit sexual boundary violations with youth.’

The link with celibacy may therefore indicate a ‘perfect storm’ with several factors coming together:

- priests or religious who suffer from loneliness and unfulfilled sexual desires, or otherwise feel the need for intimate contact
- adolescents, mainly boys, who may be in need of love and attention or are isolated from ready parental support
- ample opportunity for unguarded access to these young people without attracting suspicion.

It must be acknowledged that the Catholic Church in Australia has paid considerable attention to its processes of selection of priests and religious and their training or ‘formation’, in the light of the sexual abuse crisis in the Church. It has sought to identify and screen out men with sexual problems in choosing who should be accepted into seminary, and also to give better support to men in their calling of celibacy (Fisher, 2014). These are positive steps, although to the extent that the Church relies on bringing in priests from overseas to supplement its aging Australian cohort of priests, greater rigour in selection for ordination in Australia is only a partial safeguard.

Undoubtedly these are difficult issues; at this stage, the association between celibacy and child sexual abuse is only correlational, and causal pathways have not been demonstrated. Nevertheless, it is an issue that deserves further consideration.

Propensity risk as part of a typology

Much more could be said about propensity if the focus were on what leads people to abuse children at the level of individual psychopathology. This is not the purpose of this research report, but has been addressed in other Royal Commission publications (Proeve, Malvaso & Delfabbro, 2016). The issue is where propensity risk might be disproportionately clustered within institutions. Beyond making general points about the gender profile of staff and the risks associated with a cluster of young people who have anti-social behaviours, propensity risk does not offer a great deal of assistance in differentiating between institutions in terms of overall risk profile. It is nonetheless, part of the picture in the overall assessment of risk.

Institutional risk

Institutional risk refers to the characteristics of the institution, independently of the activities that it conducts, and which may increase child protection risks. Not all of the characteristics to be discussed are externally identifiable, so that will limit its utility in developing a regulatory framework that relies purely on such identifiable risk factors. Factors that are not visible from outside the institution may, however, be identified to assist institutions to reflect and self-assess where their vulnerabilities might be in terms of child protection.

The two dimensions of institutional risk

In assessing institutional risk, attention must be paid to the characteristics of institutions that give rise to a greater risk of abuse, as well as to factors that affect the likelihood of

disclosure of abuse and the organisation's willingness to act protectively once abuse is disclosed.

These two elements are closely related at the extreme of institutional risk, where there is what Smallbone, Marshall and Wortley (2008, p 170) describe as a 'pathological institution'. They observe:

'Official inquiries and reports on CSA [child sexual abuse] in residential institutions are replete with harrowing case studies describing the actions of staff who have clearly given themselves licence to do as they please ... In many cases the abuse is endemic and sustained over many years. Offending occurs not just because staff are secure in the belief that they will not be caught; there is a pervasive culture of abuse that has a distorting effect on individual moral judgement. From a situational prevention perspective, it is more productive to think in terms of pathological institutions than pathological individuals.'

The Retta Dixon home (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015c) may perhaps be described as that kind of pathological institution, and certain of the Christian Brothers' institutions in Western Australia may at times have had similar characteristics (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014d). In pathological institutions, multiple staff are known to have engaged in sexual abuse, and it is a reasonable likelihood either that they knew what each other were doing or the culture was such that they turned a blind eye or engaged in a conspiracy of silence (Palmer, 2016).

Pathological institutions are often closed and inward looking and the culture of abuse may be endorsed or facilitated or engendered by someone in leadership. Erooga (2012, p 32) comments:

'The 'corruption of care', it is suggested, is more likely to occur in enclosed, inward-looking organisations. Organisations managed along hierarchical lines can become so highly controlled that it is not possible to challenge their practices. The abuser in this type of organisation is more commonly an authority figure in the institution and protected, albeit unwittingly, by the hierarchical systems in place.'

The opposite of a pathological institution is a protective one. In a protective institution, someone who is thinking of engaging in unlawful sexual activity with a minor can be certain that if the abuse is disclosed, not only will they be dismissed, but the matter will be reported to the police immediately. In pathological institutions, the risk-benefit analysis for sex

offending may lead a ‘rational’ perpetrator to take the risk (Shover & Bryant, 1993). In a protective institution, a rational risk-benefit analysis ought to lead to the opposite conclusion. One aim of policy and practice therefore would be to increase the risk and cost of detection to a perpetrator.

Characteristics of institutions that give rise to greater risks of abuse

In broad terms, there are three dimensions of this kind of risk. The research literature on this is very limited, and so to some extent these categorisations are drawn from a wider body of theory on organisational culture (Palmer, 2016). The three dimensions are:

- factors that impair prevention efforts
- situations where the organisational ethos is such that child protection is not given priority
- organisational cultures that facilitate misconduct.

The literature is mainly directed to adult–child sexual abuse. It is difficult to identify specific institutional risk factors for child-to-child abuse, other than a failure to adopt, implement and make known general child protection policies. Critical to the prevention of child-to-child abuse is that children are made aware that abusive behaviour towards them – which may take the form of sexualised bullying – will not be tolerated, and that they should feel safe enough to report issues to staff or a parent (Cashmore, Dolby & Brennan, 1993, p 119; Moore et al., 2015; Moore et al., 2016a; Robinson, 2016). Nonetheless, some specific institutional risk factors for child-to-child abuse are associated with residential care arising from the way an institution selects children and young people to live together, and this may in turn be influenced by cost factors that limit available options. For example, an organisation may, for cost reasons, place a young person who has been known to engage in predatory sexual behaviour towards other children and young people in a residential setting with children who are vulnerable to sexual exploitation (Australian Broadcasting Corporation, 2016). That increases the risk of child-to-child abuse.

Factors that impair prevention efforts

Organisations working with children and young people are heterogeneous. For the most part, the case studies conducted for the Royal Commission have focused on organisations with paid staff, or large volunteer organisations such as the Scouts, which have adult leaders who have a continuing role in the organisation. However, many organisations working with children are quite small and local, and their leadership changes from year to year. They rely on volunteers and may have a greater demand for volunteers than a ready

supply of people willing and suitable to take on those roles. They may also experience quite a high turnover of volunteers from year to year. Some of that turnover naturally occurs as children age out of a program. That is, parents may volunteer to help run a program that their child participates in, but may not continue to do so when their child moves up in age and stage to other groups. Examples are volunteer organisers of playgroups for pre-schoolers, volunteer coaches and other helpers in community-based sports programs such as local soccer clubs, and Sunday school teachers in churches or other similar faith communities.

A high turnover of staff, or difficulties in recruiting staff, ought to be seen as a risk factor in terms of effective screening. It may be that the risk is greatest with small volunteer organisations that have difficulty in recruiting the level of volunteer support needed.

High staff turnover increases the risk to children for several reasons. Most importantly, children benefit from positive and trusting relationships with the staff in institutions that care for and educate them. Children need time to develop trust in carers, teachers and other workers. This is disturbed when an institution has trouble retaining good staff and there is little continuity. This is exacerbated for children who have had abusive and neglectful experiences and have difficulty in establishing trusting relationships. If children do not have someone they can trust to tell if they are abused, then the abuse is likely to continue undetected. On a practical level, high staff turnover may make it more difficult to screen staff adequately before work commences. One of the major strategies in preventing child sexual abuse is to prevent those with a disposition towards the abuse of children from having unsupervised contact with them. This includes proper screening processes that need to go far beyond merely criminal record checks given the very small proportion of all credible complaints of child sexual abuse that result in a conviction (Cashmore et al., 2016). Screening processes need to involve not only the data available for Working With Children Checks, but also checks with referees and others who would be in a position to know something about the applicant – for example, the religious leader of the person's previous religious congregation (Parkinson, 2003); or a leader of a sports organisation with which the applicant has previously been a volunteer coach.

Organisations that have trouble recruiting staff may have particular difficulty in operating screening processes effectively. Even if mandatory official record checks are always conducted prior to the commencement of employment, this goes only some way to assist in prevention. It is much harder to regulate and monitor the adequacy of referee checks. Furthermore, there may be a tendency to lower standards where a person seems suitable

and a position needs to be filled. Arguably, there is a particular vulnerability for organisations that have a high turnover of volunteers and a paucity of willing and available personnel. Organisations struggling to recruit volunteers may be more inclined to give someone the benefit of the doubt than organisations with the luxury of choice.

High staff turnover rates also inhibit a history of accumulated or corporate knowledge, and trusted lines of communication.

Where child protection is not given priority

There are features of organisational culture that also give rise to a greater risk that adult–child abuse will occur, in particular where child protection is not given priority. This will be so, for example, where the organisation has a culture of staff ignoring child protection policies, making it less likely that screening processes and codes of conduct will be effective in reducing the risk of sexual abuse; where the organisation does not make clear its expectations concerning staff-student relationships; and where the organisation does not have a clear and well-understood focus on children’s wellbeing. These factors may be illustrated by the case studies conducted for the Royal Commission.

Organisations with a culture of staff ignoring child protection policies

In evidence for Case Study 2, Professor Stephen Smallbone, an expert on prevention of child sexual abuse, said that ‘rules about adult–child and child–child relationships should be unambiguous, widely disseminated, and supported by staff supervision and training. Where adults interact with children, even excellent policies will not mean an organisation is child safe unless there is a clear understanding of how the policies actually affect staff behaviour and experience’ (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014b, p 27).

An organisation may have child protection and complaints policies to satisfy regulators or insurers, but these are of little value unless they are accepted and implemented. Codes of conduct must be enforced.

Case Study 2 was an examination of the case of Jonathan Lord, who gained the opportunity to abuse children in the course of his work for YMCA Caringbah, in Sydney. Professor Smallbone gave evidence about the implementation of the policies in the context of YMCA Caringbah. He concluded that staff were:

- unaware of the detail of relevant policies
- unsure how to identify concerning events or behaviours

- unsure how and to whom they could or should express concerns (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014b, p 29).

The Royal Commission found that there was ‘a serious breakdown in the application of YMCA NSW’s child protection policies’ (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014b, p 30). One aspect of that failure is in the process by which Jonathan Lord was recruited. The Commission found that YMCA NSW failed to comply with its own Safeguarding Children policy in its recruitment and screening of Jonathan Lord, primarily through the conduct of the responsible manager, who did not:

- discuss with Lord, when reviewing his CV, his most recent employment and whether he had previously been the subject of an employer investigation
- contact Lord’s current or most recent employer, Camp America, who had dismissed him as a camp counsellor due to suspicious behaviour with an eight-year-old child
- contact three referees
- record the oral reference given by a staff member
- ask relevant questions to the only referee for whom she recorded her enquiries
- complete the written account of the reference check
- carry out background checking (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014b, p 37).

The Royal Commission found that, had YMCA NSW complied with its recruitment policies, it is likely that Lord would not have been employed (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014b, p 38).

The Royal Commission found that these were not merely failures of an individual manager and the failures were not isolated. YMCA NSW failed in its responsibility to train staff sufficiently at YMCA Caringbah, in compliance with the recruitment and screening aspects of its child protection policy (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014b, pp 35–7). It also regularly failed to comply with the requirements for Working with Children Checks under the *Commission for Children and Young People Act 1998* (New South Wales) (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014b, pp 40–2). There were no proper induction procedures for new staff as its policies required (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014b, 43–7). It failed to train its staff adequately in its child protection policies (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014b, pp 50–1, 64, 66). Several staff, including Lord and his manager, babysat children who attended the centre on a private

basis, in breach of YMCA policy (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014b, pp 57–9). The failure to provide adequate child protection training to staff during Lord’s employment contributed to his conduct with children being unreported (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014b, pp 54, 64, 66).

Munro and Fish (2015, p 25–6), commenting on this case study, observe that it is an example of how ‘local rationality’ was engendered in the work group to create assumptions about the unimportance of strictly following procedures. That is, there were not merely multiple failures at an individual level, but its organisational culture made it acceptable within the group not to follow strict child protection protocols. They note that:

‘People respond both to the overt organisational messages in formal statements on policies and priorities, and to the covert messages often conveyed through actions rather than words.’

The case illustrates the importance of implementing proper screening processes and insisting on adherence to codes of conduct.

Organisations with a lack of focus on children’s welfare and wellbeing

If an organisation does not have a clear organisational commitment to children’s welfare, which is well understood by all staff, it may be more vulnerable to the predations of sex offenders. Erooga (2012, pp 30–1) observes:

‘Without clear aims and objectives for the organisation, secondary aims become predominant. The efficient operation of the organisation becomes the key concern, at the expense of consideration of the legitimate interests and needs of the individual.’

The risk is higher in institutional care settings where children’s welfare and wellbeing are not at the heart of the institution. Where staff tend to view children as troublesome and difficult, they may be more concerned about managing their behaviour than caring for them. Where they see caring for children as simply a job, they are unlikely to invest effort and attention; children who have had adverse experiences are likely to respond negatively in a negative feedback loop. When children do not have positive protective relationships, they are vulnerable to grooming by sexual abusers, less likely to report abuse and less likely to be believed if they do so. A study of 19 offenders in institutional care settings reported

that none of them ‘described an organisational culture which was directly focussed on the welfare of children and young people’ (Erooga, Allnock & Telford, 2012, pp 70–1).

Lack of respect for the clients of an institution also allows staff to continue abusive practices without feeling guilty, and this in itself may reinforce the lack of respect (Cashmore, Dolby & Brennan, 1993, p 63; Palmer, 2016).

Organisations in which expectations about staff-student relationships are unclear

If expectations about relationships between staff and children or young people are rarely spelled out, and boundary lines, where drawn, are poorly policed, then an organisation is more vulnerable to abuse occurring (Erooga, Allnock & Telford, 2012, p 71). The Marist Brothers Case Study (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015e) records the activities of two offenders, Brothers Kostka and Sutton, who abused children in various places at the schools in which they taught, including the Brothers’ residence. The headmaster at the time gave evidence that he did not know about rules concerning students visiting the Brothers’ residence (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015e, p 38), and it might therefore be inferred that there were none. It ought therefore to be unsurprising if other Brothers did not take issue with Brother Kostka for having children in his room at the Brothers’ residence, during which times sexual abuse offences occurred (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015e, pp 38–9).

Organisational culture that facilitates misconduct

There are other aspects of organisational culture that can lead to a higher incidence of child sexual abuse as well. Palmer (2016), drawing on the theory of organisational culture, indicates that culture can facilitate misconduct in two ways. First, the culture can endorse assumptions, values, beliefs, and norms that cast wrongdoing in a positive light. Ashforth and Anand (2003, p 9) observe that ‘deviant (sub)cultures insulate actors from the wider culture with its countervailing norms and beliefs’. This may occur particularly in organisations with relatively tenuous connections to the values of the wider culture.

Secondly, organisational cultures can endorse techniques of neutralisation that stipulate extenuating circumstances in which wrongdoing can be considered acceptable. Ashforth and Anand (2003) identified various techniques of neutralisation that facilitate misconduct in organisations generally. Some are applicable to child sexual abuse. One of the ways of neutralising is to deny that the behaviour is harmful. The abuse of boys, for example, might be rationalised as harmless, or a rite of passage – the induction of a teenager into sexual

experience. Another form of neutralisation identified by Ashforth and Anand (2003, pp 20–1) is the denial of victimisation. They gave the example of senior officials of the Catholic Church in Boston who contended that victims had invited the sexual advances from priests.

Characteristics of institutions that give rise to greater risks of inadequate responses

There are numerous characteristics of organisational culture that make it less likely that they will respond appropriately and protectively when abuse is disclosed (Palmer, 2016). Organisations with these characteristics or vulnerabilities may allow perpetrators to continue to abuse or give the message to potential abusers that on a risk–benefit assessment, it is worth taking the risk to offend.

While this list is unlikely to be exhaustive, some characteristics of organisations with a tendency towards inadequate protective responses include that they have:

- a culture of not listening to and respecting children
- close-knit and longstanding relationships between the adults, making it more difficult for leaders to believe that the abuse has occurred
- a strong sense of in-group allegiance
- an aura of respectability that makes it very difficult for parents to believe disclosures
- a primary deference to the rules that govern the organisation to the exclusion of the civil authorities
- internal disciplinary processes that are manifestly inadequate
- a culture that discourages complaints
- invisible child protection and complaints policies
- a tendency to place a greater importance on the protection of reputation than on the wellbeing and protection of children
- a culture of minimising the significance of child sexual abuse.

Organisations with a culture of not listening to and respecting children

A crucial issue in institutions, which has emerged clearly from the literature (Cashmore, Dolby & Brennan, 1993; Robinson, 2016) and from the private sessions and case studies, is the denial of voice to children. This reflects a culture in which children are not listened to, and their views are not respected. This goes well beyond having an accessible complaints mechanism. Even if the institution has a complaints mechanism that children are aware of, they may not be confident that they will be listened to and not victimised if they make a complaint.

The more pervasive underlying problem is when the staff members are not accessible and not trusted by children to be sensitive and responsive, and to meet their needs (Cashmore, Dolby & Brennan, 1993). Accessibility means being physically and emotionally available when children are willing and able to talk. Too often staff in residential care and other institutions are preoccupied and overloaded, or only able to offer help according to a timetable that reflects the needs of the organisation rather than those of children and so not really 'there' for children (Moore et al., 2016b).

Organisations with close-knit and longstanding relationships between the adults

Organisations in which people have known each other for a long time, and in which there are relationships of trust between adults, can be more vulnerable to child sexual abuse than organisations in which the leaders may take a more dispassionate and objective view of applicants for a position working with children.

Religious communities that are quite small typically have this characteristic, since few people either join it or leave it in any given year. Members may have grown up together, and been part of the same groups for a very long time. There may be longstanding ties of relationship and of marriage between the families. This is evident, for example, in the Yeshiva Case Study (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016e, p 54). The Royal Commission observed:

'Historically, and presently, members of the incorporated associations and the Committee of Management were often connected through personal friendships and familial ties. Key employees of the Yeshivah Centre and the members of the Committee of Management were closely connected by family, longstanding friendships or relationships of marriage.

The close-knit nature of the community required the leadership of Yeshivah Melbourne to be alive to, and deal transparently with, perceived or actual familial and personal conflicts of interest.'

A second reason why an organisation may be close-knit, with longstanding relationships between the adults, is that the population of an area is very stable. Again, faith communities provide an illustration. Towns or suburbs with a large concentration of family homes and relatively high levels of home ownership may well be quite stable and therefore religious congregations within those areas may also be quite stable. Other local church congregations are quite transient. Churches with large number of students attending typically have quite a high turnover of attendees in any given five-year period. Some inner

city populations are quite transient as well, with a tendency for people to move out to the suburbs when they start families.

It is not only religious communities that may have such close-knit and longstanding relationships between the adults. That could happen in other spheres of life as well: for example, elite sporting organisations in which a relatively small number of administrators and coaches have all known each other very well. Small Aboriginal communities, especially in remote regions, may also be very close-knit.

Where relationships in an organisation or community are close and longstanding, it can be difficult for members of the community to believe allegations made against someone they believe they know well. This is especially so when they had no previous reason to suspect him or her of any wrongdoing. As Munro and Fish (2015, p 19) observe, confirmation bias may help to explain this:

‘Once we have formed an opinion, we are slow to revise it; we are more likely to notice evidence that supports it and overlook or interpret ambiguous evidence in a way that confirms rather than challenges our opinion.’

Where adults have known each other for a very long time, and the relationship is in general terms a positive one, confirmation bias may be particularly strong. It can be difficult to see the significance of behaviours that, to a more dispassionate observer, might be seen as troubling. There are many ways in which evidence can be explained away (Munro & Fish, 2015, p 20).

This is illustrated by the Australian Christian Churches Case Study. One senior pastor was involved in dealing with allegations made against his youth pastor, who was also his son-in-law. He failed to take action despite numerous people raising concerns about the ‘relationship’ between the youth pastor and an adolescent boy (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015d, p 69). He acknowledged being ‘blind-sided’ by his relationship to the perpetrator (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015d, p 72). The Royal Commission found that he had a conflict of interest because of his personal relationship and family relationship with the perpetrator. This conflict contributed to his inability to take appropriate action to protect the adolescent, despite being repeatedly advised of behaviour by the perpetrator that ought to have caused concern (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015d, p 73). The Royal Commission also found that the then National President of the Australian Christian Churches had a conflict of interest in dealing with allegations

against his own father (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015d, p 35).

If an organisation is very close-knit, it may mean that the group does not see the same need for screening processes and checks on suitability as would be the case in other organisations such as sports clubs for children in which relational ties between the adults are relatively weak, and in which new volunteers may be unknown or mostly unknown to the leadership.

Another feature of close-knit organisations is that a level of ‘groupthink’ may develop concerning the moral superiority of the group and its beneficial nature, which may make it especially hard for members to believe that child sexual abuse could occur in their midst.

Organisations that are close-knit may also handle cases of suspected allegations of child sexual abuse less well given that members of the group may be less willing to report other members than in a group where personal connections are more tenuous. Palmer (2016, p 29) notes that human beings tend to seek interaction with others in their environment and for this reason staff may be reluctant to report co-workers whom they suspect or even believe are engaged in child sexual abuse, fearing that this would disrupt their valued relationships. This is likely to be the case especially in organisations where relationships are of very long standing.

However, it should be noted that there may also be a protective element in organisations that have close-knit relationships. If a person is suspected of having a propensity to abuse children, for example because he has been convicted of some form of sexual misconduct with the child in the past, then the community may be able to protect other children from abuse with the benefit of that knowledge. This assumes that the community is close-knit and has a strong child protection ethos.

Organisations that engender a strong sense of group allegiance

People in organisations that have a strong sense of group allegiance may find it more difficult than those in other organisations to accept that one of their personnel has committed sex offences against children. Arguably, strong loyalty to a group or institution provides a psychological motivation for disbelieving child sexual abuse allegations. Palmer (2016, p 30) describes ‘in-group bias’ as a belief by group members that they are ‘better than non-group members in multiple dimensions’ which in a highly cohesive group ‘may generate ... a sense of moral superiority’. Jean Bartunek (2006, p 18) notes for example, that the Vatican

and Cardinal Law reacted to the criticisms of the Archdiocese of Boston for its handling of sexual abuse by priests as based on bigotry and bias by those who reject the Church's values.

Minto et al., (2016) reported on two studies, involving together more than 1,000 participants, that investigated the role of group allegiances in contributing to the failure of institutions to respond appropriately to allegations of child sexual abuse. Participants were asked to respond to an account of allegations of child sexual abuse against a Catholic priest. Catholic participants were more protective of the accused priest than other participants, and were more sceptical of the accuser. The researchers reported that the effect was particularly pronounced among strongly identified Catholics and persisted even where the case as presented indicated that the priest had a prior history of child sexual abuse allegations being made against him by other complainants – suggesting a higher likelihood of guilt.

Where there is a strong sense of solidarity between the members of the organisation or professional staff working within it, this may make the organisation defensive or disbelieving when allegations are made against one of the members of the group.

Organisations that engender an aura of respectability, which makes it very difficult for parents to believe disclosures

This has been a feature of abuse within certain church communities, particularly the Catholic Church where the standing of the priest has made it difficult for children to be believed when they have disclosed abuse, and difficult for parents who accept those accounts to be heard. For example, the victims of Marist Brother Chute reported that either they were not believed or that they felt they would not be believed if they told. AAB's account was that he went to the headmaster of his school, a Marist Brother, and told him that Brother Chute had sexually abused him. However, AAB 'felt as though he was not believed by his mother or the school' and speculated that the matter may not have been taken further because his maternal uncle was a priest (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015e, p 28). AAJ said he was too frightened to tell anyone. The Royal Commission report recorded that 'he could not tell his mother because she revered the local priests and they frequently came to their house to watch TV' (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015e, p 29). In other cases, children and parents did have the courage to complain about Chute's predations, but no action was taken (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015e, pp 31–8).

Organisations with a primary deference to the rules that govern them

Where an organisation has its own disciplinary code and processes for dealing with allegations of misconduct, it may fail to protect children from abuse if it has a primary deference to those rules to the exclusion of the civil authorities.

Appropriately, many organisations working with children, such as schools, have rules and processes for dealing with allegations of wrongdoing against staff. Organisations need ways of investigating and dealing with complaints of abuse against personnel who are working in the organisation. This is because so many cases are not resolved through the criminal justice system or through external investigatory processes that reach definitive conclusions. Complainants ought to be encouraged to go to the police, but some adult complainants will choose not to do so. In other cases, referral to the police or child protection authorities has not resulted in a definitive conclusion concerning the allegations and the organisation has responsibility to make its own determination about the suitability of that person to work with children.

For these reasons, institutional rules and procedures for investigating sexual abuse allegations are arguably essential. However, it is problematic if the organisation has a primary deference to those rules to the exclusion of the civil authorities, whether those rules are formal or based in the belief system of the group. It ought to be standard practice for all organisations working with children to encourage complainants to go to the police and to assist them to do so. If the organisation explicitly or implicitly discourages complainants from going to the external authorities, and has a primary deference to its own procedures, then the child protection advantages to be gained from criminal prosecution are not achieved. Even if an offender is dismissed from the organisation, the deterrent effect of that action may be limited and the opportunities for systemic protection lost.

Parkinson et al., (2002, p 348) explained the benefits of criminal prosecution as a child protection strategy:

‘Although not all cases are suitable for prosecution, and the wishes of children and parents need to be respected, arguably prosecution of offenders is an important strategy to combat child sexual abuse, alongside other strategies. Successful prosecution provides a means of reinforcing community condemnation of the crime, and may be a means of mandating treatment. Criminal convictions are also important to efforts at prevention of further abuse. Limited protection of the community is provided by custodial sentences.

More importantly perhaps, criminal record checks provide a basis for other prevention measures. Foster carers, youth workers, teachers, health workers and others who have unsupervised contact with children are subject to criminal record checks in many jurisdictions, and some jurisdictions also place prohibitions on the employment of convicted sex offenders in child-related work.'

The problem of having a primary deference to internal rules and processes is mainly, if not exclusively, an issue in relation to religious organisations. The institutional risk arises when the belief system or culture of the organisation is such that there is a very strong commitment to deal with matters internally, to the exclusion of external authorities such as the police.

Religious communities that see themselves as governed by internal procedures and either do not see the need to involve the civil justice authorities, or are resistant to their involvement, are more likely than other organisations to deal inadequately with perpetrators who are credibly accused of the sexual abuse of children (for example, Royal Commission into Institutional Responses to Child Sexual Abuse, 2016f; Royal Commission into Institutional Responses to Child Sexual Abuse, 2016e).

Internal disciplinary processes that are manifestly inadequate

Where the internal procedures are manifestly inadequate to deal with allegations of child sexual abuse, there is little chance that the issues will be dealt with appropriately.

The protocols of the Jehovah's Witnesses, considered in Case Study 29, illustrate procedures that may make it very difficult for those responsible to reach a conclusion that a child has been sexually abused (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016f). For any action to be taken, there must be a confession by the perpetrator or the evidence of two credible witnesses (*Watchtower*, 2012, p 3). This two-witness requirement derives from the interpretation and application of two passages of Scripture (Adams, 2005, p 42). First, Matthew 18:15-16:

'Moreover, if your brother commits a sin, go lay bare his fault between you and him alone. If he listens to you, you have gained your brother. But if he does not listen, take along with you one or two more, in order that at the mouth of two or three witnesses every matter may be established.'

Secondly, Deuteronomy 19:15:

‘No single witness should rise up against a man respecting any error or any sin, in the case of any sin that he may commit. At the mouth of two witnesses or at the mouth of three witnesses the matter should stand good.’

Reference is also made by the apostle Paul to a two (or three) witness requirement in 2 Corinthians 13:1.

Because these are treated as Scriptural Principles for the determination of any matter of misbehaviour, the Jehovah’s Witnesses would appear to be theologically committed to the two-witness rule.

The two-witness requirement is very difficult to satisfy in the context of child sexual abuse. The guidance indicates that if ‘two persons are witnesses to separate incidents of the same kind of wrongdoing, their testimony can be deemed sufficient to take judicial action’ (Watchtower, 2012, p 3). It follows that the test for finding wrongdoing may be satisfied if two children who are regarded as credible both testify against an alleged perpetrator. However, in one of the cases analysed by the Royal Commission, the disciplinary body had knowledge of allegations of abuse by a father of four sisters. Still its Judicial Committee did not reach a finding of child sexual abuse against the perpetrator (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016f, pp 35–6). That appears to have been modified following the perpetrator's appeal against being ‘disfellowshipped’ but a finding of ‘porneia’ or sexual misconduct, was not recorded on the document recording the decision to disfellowship (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016f, pp 41).

The requirement is also to have two credible witnesses. Whether the victim is to be regarded as a credible witness depends on a range of factors. The guidance book for elders (Watchtower, 2010, p 133) states:

‘The following questions should be answered with regard to the accuser: (1) What is the level of maturity of the child or youth? (2) Is he (or she) describing conduct that one his age would not normally know about? (3) Is the child or his parents known to be serious, mature? (4) Is his memory consistent, or is it intermittent, or does it involve repressed memories? (5) What is the reputation of the parents? (6) Are they spiritually and emotionally mature?’

These tests would appear to make it more difficult for a younger child than an older child to be considered credible because of his or her lack of maturity. Furthermore, a child’s allegations might be discounted because of the attributes of a parent. Even if these tests

for credibility can be satisfied, it is very unusual for there to be a witness to child sexual abuse other than the victim and alleged offender. The guidance indicates that if ‘two persons are witnesses to separate incidents of the same kind of wrongdoing, their testimony can be deemed sufficient to take judicial action’ (Watchtower, 2012, p 3). It follows that the test for finding wrongdoing may be satisfied if two children who are regarded as credible both testify against an alleged perpetrator. This may occur in some cases, but only when victims come forward at the same time.

The Royal Commission also considered the case of Father John Nestor (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014e). Father Nestor was convicted of child sexual abuse, but subsequently acquitted on appeal. The Bishop of Wollongong at the time, Bishop Wilson, took appropriate steps to remove Father Nestor from parish ministry on the basis of the information available to him that there was an unacceptable risk of child sexual abuse. He did so following a *Towards Healing* assessment, and on advice from his Professional Standards Committee. He also decreed that Father Nestor could not return to parish ministry unless he had first gone through an assessment by Encompass Australia, which was an organisation established by the Church to assess and treat perpetrators of sexual abuse (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014e, p 23). However, Father Nestor strongly resisted the restraints on his ministry and appealed to the Congregation for Clergy (CFC) in Rome in October 1998 (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014e, p 26). He had support from other clergy in the diocese.

The Congregation for Clergy took more than two years to decide the matter. In December 2000, it upheld Father Nestor’s appeal to it and ordered that Father Nestor be returned to full public ministry (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014e, p 27). The Congregation for Clergy held that the *Towards Healing* assessment and Bishop Wilson’s subsequent decree had failed to comply with the proper canon law processes (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014e, p 27). Reasons included:

- there was no evidence that the investigative materials were kept in the secret archive of the Diocese, as required under canon law
- there was no written, sworn testimony from the complainants and the complaints were not verified by recognisable legal means
- Nestor requested, and was not afforded, the opportunity of a canonical process to prove his innocence

- the standard of proof adopted by the *Towards Healing* assessors was not consistent with the requirements of Canon law and in particular, that the standards of ‘balance of probabilities’ and ‘unacceptable risk’ were foreign to canon law.

In February 2001, the Diocese of Wollongong appealed to the highest judicial authority in Rome, the Apostolic Signatura, with support from the Australian Catholic Bishops’ Conference (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014e, pp 30–1). The appeal to the Apostolic Signatura was successful, and the decision of the Bishop was upheld; but the appeal took over five years to be determined (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014e, p 32). The Royal Commission found that the long delay in determining this case had an adverse impact on the Diocese of Wollongong and contributed to uncertainty about Nestor’s status.

The organisation has a culture that discourages complaints

An organisation is at higher risk for sexual abuse if people within the organisation, or associated with it, feel it would damage their careers or that they would suffer other repercussions, if they raise concerns about sexual abuse.

Case Study 12, concerning sexual abuse by a teacher at an independent school in Perth, is illustrative. The teacher was observed on multiple occasions engaging in behaviours that indicated an inappropriate level of physical familiarity with primary school age children and which could have been interpreted as grooming behaviour. There were eight complaints against the teacher between 1999 and 2005. Ten years after the first concerns arose, he was charged with indecent dealing with a child under 13 years in relation to five children at the school and eventually convicted.

In this case study (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015b, p 34), the Royal Commission found that:

‘... there was evidence of a culture at the school where some of the staff members and one parent felt that, if they raised concerns about another staff member, they may be ostracised by parts of the school community.’

Three teachers who raised concerns ‘all gave evidence that they experienced trepidation in raising with the school the offending teacher’s behaviour towards some students’ (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015b, p 31). One reported that a male teacher had tried to run her over (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015b, p 32). Another wrote a detailed letter to the head

of the preparatory school listing her concerns about the teacher's behaviour, which was prefaced by saying that she thought very long and hard about raising the issue. She trusted that 'there will be no negative repercussions of any kind for me doing what I believe is both morally and professionally ethical' (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015b, p 32–3). A third teacher wrote:

'The incidents I have outlined and the decision to write this letter have caused me personal and professional distress. I am fully aware of the possible repercussions of my actions in writing this letter, and I have thought long and hard about it.'

She requested that her name remain confidential. The mother of one of the victims spoke to the headmaster about the offending teacher's behaviour. She gave evidence that 'she was very scared and concerned she would look stupid' (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015b, p 34).

There are examples from other case studies of people being highly reticent to raise concerns or to report abuse for fear of professional repercussions. AEA was abused by his swimming coach as a teenager. As an adult, he felt he could not approach Swimming Australia to address the sexual abuse he experienced because he thought it might damage his coaching career (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015f, p 156). He felt 'ostracised by the swimming community' when his story was made public (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015f, p 157).

AWF was abused by a medical practitioner on two occasions in his general practice surgery. Later, he became a doctor himself and found himself working in the same hospital as the offending practitioner. He did not disclose his abuse because he was intimidated by the perpetrator, who was a more senior doctor, and was concerned that reporting the abuse may adversely affect his career at the hospital (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016a, p 16).

When an organisation discourages complaints, perpetrators can continue to abuse children uninhibited. The culture of discouraging complaints may therefore be directly implicated in the continuing sexual abuse of children or in the perpetrator finding new victims. If just one person, even two people, who are connected with an organisation are reticent to make complaints or to raise issues with the management, this might be put down to individual factors; but in any institutional context where a number of people report feeling inhibited about raising issues, and fear repercussions, this indicates a cultural problem in the organisation.

The organisation has invisible child protection and complaints policies

Child protection policies need to be available to all parents. The Royal Commission found that at YMCA Caringbah, where Jonathan Lord worked and abused a number of children, the organisation did not have an effective system for ensuring that staff and parents were aware of and understood its child protection policies (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014b, p 29). One of those policies was that staff should not babysit children who attend the centres or engage in other such outside activities with them. The Commission found that YMCA Caringbah's failure to ensure that parents knew of and understood YMCA NSW child protection policies contributed to Lord not being reported for his conduct in babysitting and attending outside activities with children involved in the YMCA program (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014b, p 61).

Had the babysitting rule been known to parents and rigorously enforced by the manager, it is unlikely that Lord would have had the number of babysitting opportunities that he had, and his opportunities to abuse children would have been reduced. Good child protection policies incorporate a variety of safeguards and protective factors, but these are of no value unless adhered to. If parents, and not just staff, need to be aware of various rules, appropriate signage to parents, or other means of disseminating information, ought to be developed.

It is also important that parents know how to make complaints. In the Perth Independent School case, one parent whose child was abused was completely unaware of any school procedures or policies to assist her in making a complaint about a teacher. This was so, even though she had been a liaison parent, president of the Parents and Friends Association and did volunteer work at the school (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015b, pp 34–5).

The organisation places a greater importance on the protection of its reputation than on the protection of children

When institutions fear the loss of their reputation and funding contributions, they may attempt to deal with an allegation of abuse internally or 'cover it up' in 'damage control' mode (Rindfleisch & Rabb, 1984). The abuse may be seen as an anomaly, the 'problem of the staff member (and child), not the institution' and the perpetrator may be reprimanded or 'let go' or simply moved to another institution (Westcott, 1991, p 16). There are numerous findings in the Royal Commission case studies that leaders with responsibility in an

organisation acted, or failed to act, out of a concern to protect the organisation. For example, the Royal Commission found that a Regional Commissioner for the Scouts was influenced by his desire to protect the reputation of the Scouts in New South Wales (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014a, p 16). YMCA NSW was motivated in part by a desire to protect its reputation in requiring staff to sign a confidentiality agreement after parents reported to the police a sexual offence committed by Jonathan Lord (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014b, p 88). The Hutchins School of Tasmania received advice from its solicitors to respond less than positively to a request from a former abused student for an apology. The motivation for so doing was not to avoid legal liability – the complainant was willing to release the school from that - but out of a desire to protect the school’s reputation (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015h, p 41).

The Royal Commission found in its case study on Satyananda yoga, that the parent organisation, the Bihar School of Yoga in India, took a stance of first protecting the institution (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016b, p 86):

‘We are ... satisfied on the evidence before the Royal Commission that, when those responsible for management of the Bihar School of Yoga first heard about the Royal Commission’s investigation of the sexual abuse of children by Akhandananda, their primary concern was to minimise the risk of damaging the reputation of Satyananda yoga. The Bihar School of Yoga’s response did not properly prioritise the welfare of survivors over the interests of the ‘brand’ of Satyananda yoga. There is no evidence before the Royal Commission of any expression of support by the Bihar School for the survivors of sexual abuse prior to the public hearing.’

It is apparent from many other Royal Commission case studies that the protection of an institution’s reputation has proved to be a powerful driver of behaviour in all kinds of institutions, and not only religious organisations.

A culture of minimising the significance of child sexual abuse

Smallbone, Marshall and Wortley (2008, p 35) have identified how particular subcultures, though otherwise pro-social, may promote norms that weaken prohibitions against sex offending against children:

‘Recent problems with sexual abuse in the Catholic Church and other religious institutions illustrate how, for groups of individuals who might otherwise aspire to the highest moral standards, values attached to the protection of institutional and personal reputations, for example, can be given more weight than values attached to the protection of children. It seems clear that in these circumstances the effects of CSA [child sexual abuse] can be institutionally construed in terms that minimise or overlook the personal harm that may be caused.’

Case Study 23 on Knox Grammar in Sydney (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016d) records numerous accounts of sexual abuse by several members of staff that were known to the headmaster at the time. They variously involved teachers fondling boys’ genitalia, propositioning them for oral sex or showing them pornographic material. Either these issues were not dealt with at all, or their seriousness was minimised (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016d, p 69). The headmaster of the day told the Royal Commission that at the time he considered it more serious that a teacher was giving students alcohol and cigarettes than that he was molesting them (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016d, p 28). While sometimes staff were removed from particular positions within the school, a number of teachers against whom credible and serious allegations of child sexual abuse were made continued to teach at the school for many years.

The Royal Commission found that the headmaster at the time covered up cases of child sexual abuse and deliberately misled a senior police officer who came to the school to investigate allegations against several teachers (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016d, pp 59–65, 69).

Another example is the Marist Brothers. In Case Study 13, the Royal Commission recorded how the Marist Brothers recorded and referred to allegations of sexual abuse made against two of its members. The word that was regularly used was ‘inappropriate’ – for example ‘inappropriate touching’, ‘inappropriate sexual behaviour’, or ‘inappropriate hugging’ (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015e, for example, pp 27, 33–5, 39, 43, 50). This use of euphemism indicates a culture of minimisation. Had the language of ‘child rape’, ‘child sexual assault’ or ‘child sexual abuse’ been used, perhaps the organisation might have made a stronger response to the various allegations.

Assessing institutional risks cumulatively

In summary, organisations have a high level of institutional risk where they have characteristics that give rise to a greater risk of child sexual abuse. However, factors that affect the likelihood of disclosure of abuse or the organisation's willingness to act protectively once abuse is disclosed are also relevant, as they affect a potential offender's risk-benefit analysis (Shover & Bryant, 1993). In some institutions, several of the characteristics identified may be applicable.

Chapter 4: A typology of risk

The previous chapters outlined a range of elements that might be considered in a typology of risk by reference to four dimensions of risk.

Institutions that care for children and provide services and activities for children vary considerably in size, type and function. The risk to children of sexual abuse within these institutions differs depending on the type and size of the institution, the type of governance of the organisations involved, the population of children they serve, and the nature of services they provide.

The different kinds of risk in the typology framework can also be seen in the context of an ecological model that shows where the risks manifest, and where they can be addressed in a broader context (Figure 3). This is likely to be helpful in assisting institutions and organisations to assess their own risk and in assisting regulatory agencies to monitor risk. For example, the vulnerability of children and the propensity of potential perpetrators are located at the individual level, and are modified by the institutional context, particularly in relation to the situational risk associated with the nature of the activity. The institutional level is strongly influenced by the purpose and culture of the institution including the directives of the overall organisation (for example, a church or government agency) and sector (for example, out-of-home care or juvenile justice) to which it belongs. Different institutions within the organisation and sector may carry different levels of risk according to their management and governance. Finally, the system level sets the policy and regulatory regime under which such institutions operate.

Managing the risks of the system and the institutions within it therefore needs to be addressed at each level; assessing the risk for institutions is likely to focus on the individual and institutional levels. An important consideration discussed later is the extent to which such risks are relatively easy to modify, and can be done so in a way that increases the risks to potential perpetrators without making institutions and the nature of the activities within them unsustainable.

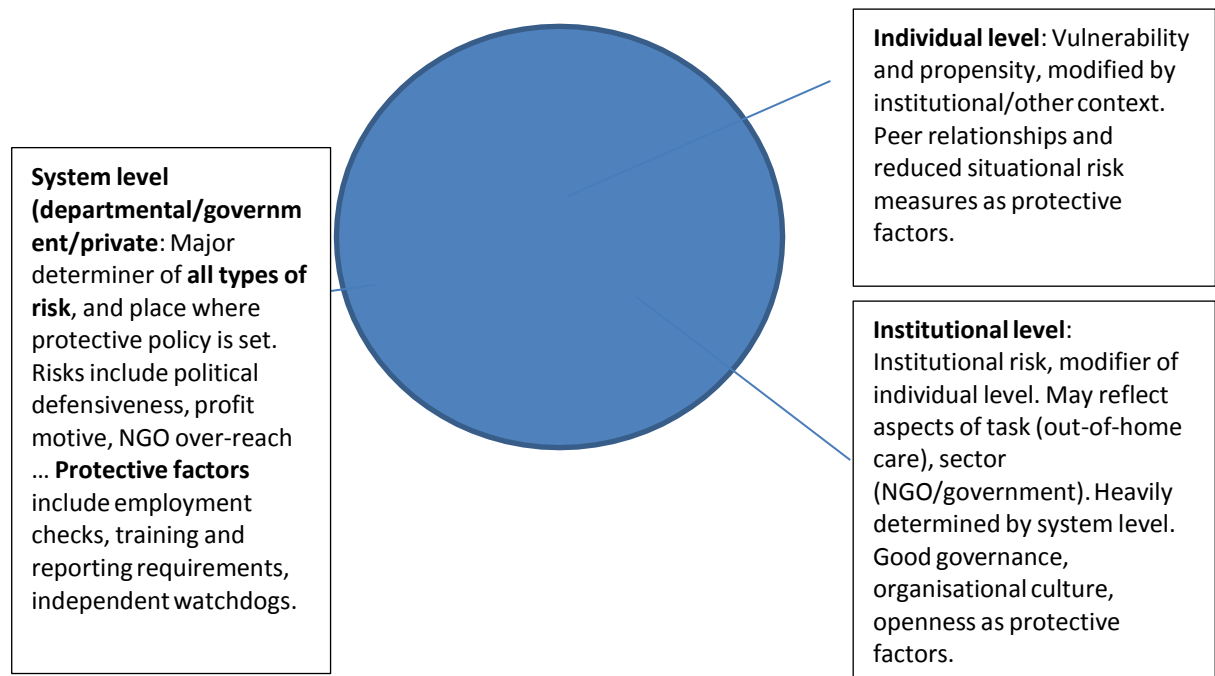


Figure 3. Three-level ecological model

Bearing this broader ecological model in mind, the aim of the following discussion is to bring the various dimensions and elements of risk together to provide a framework to guide thinking about prevention, internal and external assessment and risk management. It also outlines how the various dimensions and elements of risk might be combined to provide some assessment of the risk in different types of institutions that care for children and provide services and activities for them. The framework might be used, for example, to assist organisations and institutions to self-assess the risk and to think about and develop ways to reduce that risk. It might be used externally by a regulatory body to guide internal and external reporting of risk and prevention policies. It might also be used to guide organisation or system design or review; and lastly it might guide the development of outcome measures for research and the evaluation of risk management processes.

Limitations in research evidence for a typology

It is important to consider the issues and difficulties in developing a typology, the most fundamental of which is that developing a classificatory scheme that distinguishes among organisations with respect to their risk of child sexual abuse goes beyond the research evidence.

The limited evidence base

While the evidence base is not there for finely grained differentiation, some differentiation is certainly possible, drawing on the cumulative body of research and experience in this area. What can be said with reasonable confidence is that organisations with high levels of situational or vulnerability risk have overall a rather greater risk profile than organisations with a low score on these criteria.

There is also little reliable quantifiable data across the various dimensions of risk that assists in separating out risk that is highly correlated or confounded. For example, the research evidence is clear that children and young people with an intellectual disability are at a considerably higher risk of sexual abuse than children and young people who do not have such a disability. While there are several reasons why an intellectual disability may increase the risk, it is not clear how much of the risk identified in the research arises from the situational risk involved in the care settings in which children and young people with intellectual disabilities tend to be clustered.

Similarly, children in out-of-home care often have a heightened vulnerability to child sexual abuse before they enter the foster care or residential care environment. They may engage in sexualised behaviour due to prior sexual abuse, putting them at higher risk of further abuse, and they may be indiscriminate in whom they trust, or may have difficulty trusting adults (Schofield & Beek, 2006; Schuengel, Oosterman & Sterkenburg, 2009). How much of the cumulative risk of abuse in out-of-home care is due to heightened vulnerability risk and how much to heightened situational risk?

Put differently, if children with characteristic *x* tend to be clustered in care settings with characteristic *y*, our current knowledge base makes it difficult to say how much of the heightened risk of sexual abuse, compared with children of a similar age and gender in the general community, is due to characteristic *x* and how much to characteristic *y*. The available data are mostly correlational. One option is to compare children in different kinds of out-of-home care settings (foster care, kinship care and residential care) but the differences in the characteristics of children who are placed in these different settings make it difficult to draw firm conclusions from these comparisons.

Differentiating adult–child abuse from child-to-child abuse

The second issue to be considered when developing a typology is the difficulty in trying to cover adult–child and child-to-child risk within one typology.

In developing a typology that differentiates between activities and institutions based on the risk of child-to-child abuse, it is necessary to identify where that risk might be disproportionately clustered. The problem in doing so with child-to-child sexual abuse is that there is a situational risk of such abuse in any setting where children and young people are together – for example, schools, sports activities, youth clubs, and out-of-school-hours activities such as dance or drama classes. This makes it difficult to identify disproportionate situational risk in different kinds of activity run by institutions.

What can be said in terms of the research literature is that there is a significant risk of child-to-child sexual abuse in residential care and in juvenile justice institutions (Attar-Schwartz, 2014; Euser et al., 2013; Font, 2015; Timmerman & Schreuder, 2014). In the study by Euser et al., for example, 57 per cent of adolescents who reported being sexually abused in residential care indicated this was by another adolescent in the same residential facility.

A qualitative study involving 28 children and young people in residential care in Australia also reported that the older respondents indicated that they were exposed to sexualised behaviours and often felt under pressure to have sex with other residents, whereas being sexually abused by workers was highly unlikely (Moore et al, 2016b). These young people reported, however that what kept them safe from harm was accessibility to trusted workers and other adults (Moore et al., 2016b, pp 64-65). Again, this risk is elevated by a combination of vulnerable children and young people, the absence of a protective parent, and the opportunity for older – generally unrelated – peers with adverse childhood experiences and anti-social behaviours to coerce other children to engage in sexually exploitative activities.

There is likely to be a heightened risk where children who have a particular vulnerability are accommodated with children who have a greater than average propensity to engage in harmful sexual behaviours towards other children (Australian Broadcasting Corporation, 2016; Moore 2016b). It is likely that several particular elements of vulnerability will elevate the risk of sexual abuse or exploitation from other children; these include children's prior sexual abuse because of its association with sexualised behaviours and traumatic sexualisation as well as children having been subjected to other types of abuse and neglect. The same factors as elements of propensity risk will also increase the risks coming from other children because of the elevated rate of anti-social behaviours, although this does not mean that abused children are necessarily abusive (Cashmore, 2011; Smallbone, Marshall & Wortley, 2008). The other propensity factors are gender (being male) and being co-resident

with other non-related children. The situational risk is unsupervised access in closed environments, particularly residential settings.

Furthermore, while any comprehensive child protection strategy must take account of the extent to which children may be vulnerable to abuse by other children, the strategies for preventing child-to-child abuse are likely to be different to those for adult–child sexual abuse. Child-to-child sexual abuse cannot be prevented using many of the most familiar child protection strategies. Working with Children’s Checks and other strategies to do with decision-making about employment of staff do not address the risk of child-to-child abuse. Child protection policies that aim to restrict the opportunities for adults to be alone with children without another adult able to observe interactions also do not assist in preventing a child abusing another child. However, some situational prevention strategies may have utility in preventing sexual abuse by other children. For example, building design requirements that improve visibility into rooms within the building may help prevent child-to-child abuse as well. If children have access to trusted adults this increases the chances that they will disclose any abuse, and this awareness may discourage abusers.

For these reasons, the typology framework is generally more applicable to the abuse of children or young people by adults, although much of the discussion also includes consideration of factors that indicate a greater than average risk of child-to-child abuse. This typology would need to be empirically validated, and further work done on the question of whether adult–child abuse and child-to-child abuse can sensibly be included in a single typology.

Different aetiologies of child sexual abuse

A further difficulty, which is reflected in the rationale for differentiating between sexual abuse by adults and by other children and young people, is that there are different motivations for sexual abuse and different characteristics of perpetrators (Proeve, Malvaso & Delfabbro, 2016; Wortley & Smallbone, 2006). While some offenders meet the diagnostic criteria for paedophile attraction, others become emotionally involved with the victim, and abuse by others reflects broader anti-social behaviours. To some extent at least, these represent different kinds of propensity risk for institutions. No reliable data exist to make finely grained distinctions between the propensity risk profiles of different organisations.

With these important caveats, what can be said about developing a typology of risk? While finely grained differentiation is not possible, we know enough, particularly about vulnerability and situational risk, to develop at least some kinds of hierarchy of risk. While

recognising that it is not possible to assign an odds ratio, much public policy rests on estimates and approximations, or best available human judgments.

The essential elements of elevated risk

How do situational, vulnerability, propensity and institutional risks, and the various elements within each type of risk, relate?

To recap, situational and vulnerability risk pertain to the nature of the activities and propensity and institutional risk to the characteristics of the institution. While our outline of the different types of risk has drawn out the conceptual differences, it is important to recognise that there is a degree of overlap between them in terms of the aspects of people and organisations that they point to, and the likely statistical correlation between them. They might be usefully thought of as providing different windows into a complex situation, compared with the ever-present danger of projecting organisational or collective problems onto individuals. The different types of risk can be used in various ways. Individually, they can be used to identify risks that are apparent through that window. They can also be combined in various ways that compound the risk, as outlined below.

The starting point is situational risk because it deals with the opportunity to abuse and provides the trigger for concern. There are several elements that might trigger some concern; the other kinds of risk add cumulatively to the overall likelihood that an institution is prone to sexual abuse. Child sexual abuse disproportionately happens when perpetrators (adults and peers) can readily be alone with children in one-to-one activities in private/closed spaces that are not visible to other observers, or otherwise have the opportunity to abuse them without being detected or reported. For example, an activity that involves individual one-on-one music tuition, with no other adult present, in a closed room without a glass door or other visibility might constitute a relatively high situational risk. The situational risk is increased when the perpetrator has the opportunity to groom the child or, with adolescents, to form 'romantic attachments'. In adult-child abuse, these strategies can maintain the child's compliance, reluctance to disclose the abuse, and willingness to give evidence if the abuse does come to light.

Conversely, the situational risk will be low in situations where children and young people are always in groups, where there are at least two adults in situ at all times and where the physical environment allows for free visibility. For example, an activity such as a toddler play group involving mothers in a group activity in a large open area where all are visible to each other, would present minimal risk.

No institution is without risk, however. The committed paedophile sex offender may well find ways to commit sex offences even in institutional contexts with a low situational risk. Some are brazen and others are surreptitious. However, it is much harder to abuse children in circumstances where the nature of the organisation's activities and the manner in which they are conducted make it very difficult to be alone with a child. Even if this obstacle can be overcome, the risk of detection and the likelihood of the child disclosing the abuse may be sufficiently high to deter some potential perpetrators.

An institution with a low situational risk can therefore starve even the committed sex offender of opportunity, or greatly increase the likelihood of detection. For this reason, situational risk is a necessary but not sufficient condition for sexual abuse to occur.

The combination of situational and vulnerability risk

A number of elements relate to the vulnerability of the children involved and particularly the clustering of children with these characteristics as outlined in Figure 2. These include children's age (increasing with age), intimate care needs, communication difficulties, prior abuse and neglect, and lack of parental support/availability. Prior sexual abuse elevates child's vulnerability because it is associated with children having learnt inappropriate sexualised responses, which may be seen as provocative and justifying sexualised interactions with them.

Perpetrators exploit the particular vulnerabilities of children in all sorts of ways to gain their participation or acquiescence or to overcome their resistance. Whether the heightened vulnerability arises from low self-esteem, the need for love and attention, an intellectual disability, or some other factor, perpetrators are likely to find it easier to overcome the resistance of a child with a heightened vulnerability than otherwise. In child-to-child sexual abuse, bullying may produce similar capitulation with vulnerable victims.

A residential out-of-home care institution will have an elevated vulnerability risk if it caters for young adolescents who have experienced abuse and neglect, particularly sexual abuse, and if they do not have parents who are accessible, emotionally available and supportive. Similarly, a residential institution that cares for children who have multiple disabilities, have difficulties communicating and require intimate care will have an elevated vulnerability risk particularly if any of those children do not have parental support. When the activities involving intimate care are carried out in one-on-one care in private spaces, and allow an adult to develop an inappropriate emotional connection without any supervision, the risk for children escalates.

So, while situational risk is a precondition for sexual abuse, vulnerability risk makes it more likely that the child will be targeted and will not resist – or not be able to resist – a perpetrator’s sexual advances. As Smallbone, Marshall and Wortley (2008, p 85) observed:

‘[A] key risk factor for sexual abuse offending in adulthood is physical and emotional proximity to (especially emotionally vulnerable) children in circumstances where the potential offender is in an unsupervised care-giving and authority role, and especially in circumstances where a secure attachment bond has not been established with the child.’

Adding propensity risk

When the opportunity to engage in abuse is combined with vulnerability and low resistance and the likelihood of detection is low, a ‘honeypot’ is created. When propensity risk is added, the risk can become realised in an exploitative dynamic in the meeting of the child and a potential perpetrator. The propensity risk is greater where the staffing profile is predominantly male, but noting and keeping in perspective, that the vast majority of men do not sexually abuse children. There is elevated propensity risk of child-to-child abuse in institutions in which children or young people with a history of sexual abuse or criminal and anti-social behaviours live in close proximity. This includes juvenile justice institutions and residential out-of-home care.

Foster care provides another illustration of the interaction of different risk factors. There is a heightened situational risk, and often a heightened vulnerability risk related to the reasons children have had to be removed from their parents. Having non-biologically related men co-resident with the child represents an elevated propensity risk, as does the presence of non-biologically related adolescents. If there were no, or very little, situational risk then heightened vulnerability and propensity risks would not make much difference.

Adding institutional risk

Finally, adding institutional risk, for the reasons outlined in Chapter 3, in combination with the other risks is likely to increase the chances that a child will be abused or that the handling of a disclosure of abuse will be inadequate. This may lead to continuing abuse of that child or other children.

For institutional risk, there are two main sets of elements relating to the characteristics and culture of the institution that increase the risk of abuse and of an inadequate response. The characteristics of institutions that increase the risk of abuse include a high turnover of staff

or volunteers; a strong authority and power hierarchy; limited communication with, and influence from, the outside community; a culture that does not expect children to be listened to, but does expect compliance; and one that was not intolerant of past sex offending by adults in the institution. A strong sense of group allegiance with close-knit and longstanding relationships between the adults, a primary deference to the rules that govern the organisation to the exclusion of the civil authorities, and invisible child protection and complaints policies, are characteristics of institutions that increase the risk of inadequate responses.

Total institutions

This combination of elevated institutional risk with other risks is to be found, for example, in what Erving Goffman (1961, p xiii) called ‘total institutions’. He defined them as ‘a place of residence and work where a large number of like-situated individuals, cut off from the wider society for an appreciable period of time, together lead an enclosed, formally administered round of life’. This is a materially different environment from the norm that prevails in the community. As Goffman (1961, pp 5–6) explains:

‘A basic social arrangement in modern society is that the individual tends to sleep, play and work in different places, with different co-participants, under different authorities, and without an overall rational plan. The central feature of total institutions can be described as a breakdown of the barriers ordinarily separating these three spheres of life. First, all aspects of life are conducted in the same place and under the same single authority. Second, each phase of the member’s daily activity is carried on in the immediate company of a large batch of others, all of whom are treated alike and required to do the same thing together. Third, all phases of the day’s activities are tightly scheduled, with one activity leading at a prearranged time into the next, the whole sequence of activities being imposed from above by a system of explicit formal rulings and a body of officials. Finally, the various enforced activities are brought together into a single rational plan purportedly designed to fulfil the official aims of the institution.’

Goffman was writing about institutions generally. Total institutions for children represent a merger of ordinarily differentiated spheres of life. Children in the general community live with, and are raised by, at least one parent; attend school; often engage in sports in community-based organisations; and may have other extracurricular activities, such as music lessons or going to a dance school. In the total institution, all of these normally

differentiated activities take place (if at all) in the one residential setting and under the aegis of one central authority.

All residential institutions for children are forms of total institution, but some represent a more comprehensive environment for children's lives than others. Boarding schools are total institutions, but typically they are only so during term-time, and indeed children and young people may see their parents on occasions during term-time if the parents visit, or the child goes home for the weekend. Residential out-of-home care institutions are forms of total institution, as are juvenile detention facilities.

The orphanages and children's homes, which were the context for so much physical and sexual abuse of children in the past (Senate Community Affairs Reference Committee, 2004), were total environments for the children in every respect. That is, they had no life nor connection outside of the institution's control and often no life outside of its walls.

In case studies, the Royal Commission has examined a number of total institutions that no longer exist, but which were run by organisations or governments that have a continuing obligation to support abuse victims from those institutions. The four orphanages and training schools run by the Christian Brothers in Western Australia (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014d) offer an example. For the Brothers, there was no differentiation between home and work – a Brother might even live in a room off a children's dormitory. The children's entire lives were spent within the institution and under its control. Two of these institutions were in quite remote areas and so the children were isolated. Such formal education as they had – and at one institution at least, this was very little – was provided on-site. These were total institutions, from the child's perspective and that of the Brothers. These were institutions in which boys and male adults lived a common life, on shared premises and had little communication with the outside world apart from occasional inspection visits (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014d).

The Retta Dixon Home (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015c) was another such institution. According to the Royal Commission report (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015c, p 15):

'The home was situated in the Bagot Aboriginal Reserve on the outskirts of Darwin. A fence separated the home from the rest of the reserve.

The home generally housed between 70 and 100 children at any one time. Children were housed in dormitory-style accommodation. Most children stayed at the home until they were 18 years of age. They attended local schools. They received religious instruction and were required to attend church regularly.'

Although the children had some life outside of the four walls of the home, their lives were essentially controlled by the authority figures within those walls. The Royal Commission recorded that most former residents of the home who gave evidence said that they did not report the abuse at the time for various reasons. Some did not understand it to be wrong and later felt too ashamed and frightened to report the abuse. Others said there was nobody they could report the abuse to. Two witnesses gave evidence that no one, whether the welfare services or the government of the day, ever inquired about their welfare and there was no one that they could speak to about the abuse (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015c, p 29). Some children did report abuse to authority figures in the home such as the superintendent; but these reports fell on deaf ears (Royal Commission into Institutional Responses to Child Sexual Abuse, 2015c, p 31).

The North Coast Children's Home (Royal Commission into Institutional Responses to Child Sexual Abuse, 2014c) and the Bethcar Children's Home (Royal Commission into Institutional Responses to Child Sexual Abuse ,2015g) provide other examples of total institutions.

While total institutions of this kind no longer exist, the case study into the Mangrove Mountain ashram (which continues to exist today) illustrates a form of total institution that may emerge from new belief systems or ideologies (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016b). In the 1970s and 1980s at least (the time period covered by the case study), the teachings in the ashram emphasised total devotion to the spiritual leader. The members of the ashram were to forgo the normal ties of intimate partnerships and relationships with the family of origin. They gave up their name, their personal property, their hair, their clothes and their connection with mainstream community (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016b, p 53). Children were separated from parents and raised separately. The Royal Commission was 'satisfied that the Mangrove ashram was a closed community which was underpinned by rituals and a belief system that made it untenable for the children to report' the spiritual leader's sexual abuse to any adult or person subservient to him (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016b, p 54).

The elevated risk in total institutions

Total institutions present a high cumulative risk of child sexual abuse in terms of adult–child and child-to-child abuse in comparison with other institutions, for four reasons. First, the residential context gives ample opportunity for perpetrators to be alone with children without being observed. Second, children are completely under the authority of the adults in the institution and so may have no realistic alternative but to comply with their demands to engage in sexual activities. Third, the children in these institutions had no parents actively involved in their lives to whom they could disclose the abuse or to whom they could turn for protection. Fourth, there is little oversight or influence over the norms of the institution from the outside environment. The closed nature of such institutions isolates them from the mores and observation of the broader society and allows them to establish a culture of their own in which the wants of some more powerful members can override the needs of the less powerful and more vulnerable.

The importance of having a protective parent or guardian around is illustrated by a Queensland study of 87 adult males who were imprisoned between 2007 and 2009 for sexual offences against a child under 16 years. Leclerc, Smallbone and Wortley (2015) found that net of other effects, the presence of a potential guardian was strongly and negatively associated with the occurrence of penetrative sexual abuse ($p = .009$). The effect of the presence of a potential guardian decreased the odds of penetration occurring by 86 per cent.

In total institutions, there will of course be other adults around who have the potential to detect sexual abuse occurring or to intervene in circumstances where the perpetrator is transgressing established boundaries – for example, having a child in his bedroom. However, they are unlikely to have the closeness of relationship or the instinctual concern for protection that a parent has for their own child. In a closed community tied to devotion to a spiritual leader, they may also find it difficult to challenge the leader for to do so is to challenge their own beliefs in his purity (Royal Commission into Institutional Responses to Child Sexual Abuse, 2016b).

Children with no parent or guardian actively involved in their lives are for this reason particularly vulnerable to sexual abuse and may reside in care settings that represent total institutional environments – for example, unaccompanied minors in immigration detention and young people in juvenile detention.

Out-of-home residential care as a form of total institution

Outside of the context of punitive or mandatory detention, there are not many long-term residential institutions in which children and young people live away from their parents on an ongoing basis. The pattern of the last 30 years or so has been towards deinstitutionalisation for children and vulnerable adults (Australian Institute of Health and Welfare (AIHW), 2001). The ever-increasing numbers of children on child protection orders needing out-of-home care, however, mean that there is increasing difficulty in finding suitable kinship care or foster care placements. In 2014–15, one in 20 of the 43,400 children and young people in out-of-home care were in residential care facilities. Higher proportions than the national average were reported in Queensland (8 per cent), South Australia (14 per cent) and the Northern Territory (10 per cent) (AIHW, 2016b, pp 48, 51). By contrast, 10 years ago, in 2004–05 there were 23,695 children and young people in out-of-home care, of whom 4 per cent were in residential placements (AIHW, 2006, p 45). That is, under 950 children were in residential care on 30 June 2005 compared with about 2,170 children 10 years later.

The number of children in out-of-home care has been rising steadily both in absolute numbers and per 1,000 children in the population (Royal Commission into Institutional Responses to Child Sexual Abuse in Out-of-Home Care Consultation Paper, 2016). Between 1996 and 2005, the number of children in out-of-home care in Australia increased by 70 per cent (AIHW 2006, p 44) and the number has continued to rise since then. At 30 June 2005, the rate of children aged zero to 17 in out-of-home care was 4.9 per 1,000 (AIHW 2006, p 50). There continues to be a marked disparity in the rates for Aboriginal and Torres Strait Islander children (52.5 per 1,000) and non-Indigenous children (5.1 to 5.5 per 1,000) (AIHW, 2016b, p 54).

If this trend continues, and it shows no signs of abating, it can be expected that not only will more children be in family-based out-of-home care but an increasing number (and perhaps an increasing proportion of all children and young people in out-of-home care) will need to be housed in residential care facilities or other non-familial settings.

Children in residential or congregate care settings are more likely to be sexually abused than children in foster care and their same-age peers in the general population (Euser et al., 2013; Font, 2015). They are exposed to a much greater number of caregivers who do shift work in a 24-hour, seven-days-per-week facility. To the extent that these workers have a caring relationship with the children, this is a professional work-based relationship rather than a personal one.

Assessing cumulative risk

Not all the different dimensions of risk are equally easy to discern. In particular, elements of institutional risk may be difficult to identify from outside of the institution.

Many of the characteristics identified in the previous chapter that indicate a heightened degree of institutional risk cannot be discerned without a fair degree of knowledge or familiarity with the institution. These include a culture of staff ignoring child protection policies; a lack of clear expectations concerning staff-student relationships; a lack of a clear and well-understood focus on children's wellbeing; a culture of not listening to and respecting children; an aura of respectability that discourages belief of disclosures of abuse; internal disciplinary processes that are manifestly inadequate; a culture that discourages complaints; a culture of minimising the significance of child sexual abuse; and a tendency to place a greater importance on the protection of reputation than on the wellbeing and protection of children. However, some may be measured by auditing the organisation. A survey of children and young people could, for example, ascertain the extent to which they feel listened to or feel safe in the organisation (for example, Moore et al., 2016b). Others may be identified by external regulatory and auditing agencies such as the Children's Guardian in New South Wales, which monitors out-of-home care providers.

Even if some factors are not readily discernible by those external to the organisation, they are important in assisting organisations to self-reflect on the extent to which their characteristics and organisational culture may expose children to a greater risk of sexual abuse than might be the case in organisations with different characteristics and organisational culture.

Application to institutions

In summary, the overall framework provides a cumulative measure that gives more weight to an elevated vulnerability risk and an elevated situational risk. It gives the highest risk assessment to activities or institutions where both kinds of elevated risk are present, and in institutions that contain the elements of a 'total institution' that are separated from the general community and where there is a culture of not listening to children. Where there is an interaction, the risk represented by just combining those elements may underestimate or overestimate the cumulative effect. For example, the combined effect of a child who has communication difficulties and not having parental support may be dramatically increased by the 'addition' of a third factor such as needing intimate care or having sexualised behaviours – or being in an environment where there is ample opportunity for someone so minded to be alone with a child. There are a number of examples in risk calculation and in

determining crisis outcomes that may represent a tipping point – ‘the point at which a series of small changes or incidents becomes significant enough to cause a larger, more important change’ (Oxford Dictionary Online).

In any comprehensive assessment of risk, account must also be taken of protective factors. An organisation may score highly on vulnerability risk and situational risk; it may even have a heightened propensity risk. However, if it is well managed, if the culture is child focused, and child protection issues are given high priority, then the incidence of child sexual abuse in that institution may be lower than in organisations with lower vulnerability and situational risk profiles.

The application of this typology framework to institutions can be illustrated by reference to a variety of activities that may be conducted by institutions. The assessment of risk is made with reference to the different levels of situational and vulnerability risk illustrated in figures 1 and 2 (see Chapter 2) and the degree of cumulative risk involved. In developing this way of measuring risk, only those factors that are likely to be visible externally are used.

High risk

All residential institutions represent a high situational risk. A juvenile justice detention centre perhaps illustrates the highest level of risk. So also does residential out-of-home care and boarding schools. The risk is from staff and other residents. It is very difficult, in an environment of this kind, to prevent peer-to-peer abuse, to prevent children from being alone one-on-one and unseen without significant risks to children’s privacy. The vulnerability risk is also very high. Many young people with criminal histories have experienced sexual abuse earlier in their lives (Swanston et al., 2002) and come from families that are dysfunctional on many measures. Children who have experienced sexual abuse are more vulnerable to subsequent abuse by other perpetrators (Swanston et al., 2003). Those incarcerated in juvenile detention centres are adolescents, and so may attract the sexual interest of adults with a heterosexual or homosexual orientation within the normal spectrum of biologically driven attractions. Sexually abused young people may be motivated not to disclose for fear of repercussions from the perpetrator or the perpetrator's friends who remain in the same detention centre.

Propensity risk is also high: those in a juvenile detention centre live with others who have criminal histories and anti-social tendencies. The combination of vulnerability risk and propensity risk in a situational environment where it is difficult to take effective measures for protection makes the risk of peer-to-peer sexual abuse high in this context, and

particularly high for male detention centres. Even if institutional risk is low, a juvenile detention centre may score highly on a cumulative scale.

The risk to children and adolescents in immigration detention centres may not be much lower, albeit that very few children remain in detention. The situational risk is high due to co-residence in a confined or at least limited area. The vulnerability risk is associated with age and prior trauma; it may be moderated if children have parents who are able to play a protective role there as well. For unaccompanied adolescents in immigration detention, the vulnerability risk is very high indeed. The propensity risk arises from having non-biologically related males in a residential environment. The institutional risk is high to the extent that these organisations are not child focused and are also isolated from public and external scrutiny (Australian Human Rights Commission, 2014).

Boarding schools, or boarding houses within day schools, also illustrate a high degree of situational risk because of the residential context. There is not an inherently greater vulnerability risk than in day schools, although individual children may have an elevated vulnerability and there may be a greater vulnerability in schools with a high proportion of Indigenous children. The main vulnerability that is generalised to the population of the institution is related to age. Upper primary and secondary school children have a higher vulnerability risk as they are more likely to be the object of sexual interest to adults than younger children. The degree of propensity risk is largely dependent on the staffing profile. The degree of institutional risk can best be assessed by looking at the elements of the institution that would characterise it as a total institution.

The combined vulnerability risk and situational risk of a boys' boarding school or boarding house in a day school could reasonably be assessed as very high, with propensity and institutional risk adding further to the risk profile.

The highest risk, however, would be associated with institutions that also contain elements of, and meet the definition of, a total institution. A boarding school in which staff and children are co-resident, where there is a strong hierarchy of power and authority, a strong sense of allegiance to the good name of the school, and which has child protection policies that are hard to access and scarcely mentioned beyond initial teacher induction, would score highly on those elements. Any organisation with a strong hierarchy of adult authority and control over the lives of children, which has a culture of separation from the outside world, and which discourages communication with outsiders, would also be scored highly. This includes residential care institutions and juvenile justice detention centres.

Moderate risk

There is some situational risk of child-to-child sexual abuse associated with any school environment and long day care setting, particularly given the substantial amount of time that children spend in these institutions. As a result, these settings would be classed as demonstrating moderate risk.

In contrast to a boys' boarding school or boarding house, the risk associated with a girls' boarding school or a boarding house in a girls' school is much lower if, as might be expected, the staffing profile is female. This is because of the low ratio of adult female perpetrators to adult male perpetrators.

Non-residential activities generally carry a lower risk profile because of the lower situational risk. An example would be youth activities such as sports or youth groups in which the opportunity for abuse during the activity itself is quite limited, but the activity provides a context and opportunity for the development of a one-to-one relationship outside of the times when the activity takes place. This might be regarded as a moderate situational risk.

The vulnerability risk in such a context is typically individualised, apart from age. That is, upper primary school age children and adolescents have the highest vulnerability risk and individuals within that group may have elevated levels of risk due to family dysfunction, family breakdown, prior history of abuse or for other such reasons. Young people with higher levels of vulnerability because of these factors are not typically clustered in ways that allow for types of institution to be identified as constituting a higher risk. However, in general terms, and for the reasons given in Chapter 2, where the youth group or sports activity takes place in a low-SES area, there is likely to be a greater concentration of children and young people who have experienced family dysfunction or family breakdown, which may give rise to a greater vulnerability to predation. As noted in Chapter 2, an effect of separation is very often reduced financial circumstances, which drives parents with children to live in lower-cost housing areas and to share housing.

Assessing the risk of youth activities that provide the opportunity for the development of one-to-one relationships in which sexual abuse occurs is not straightforward. The situational risk for a girls' activity is likely to be lower than for boys' activities. The vulnerability risk for upper primary school children and adolescents might also be assessed as marginally higher in low-SES areas or for elite athletes. The propensity risk is largely dependent on the gender of those running the activity. It may be that the average level of propensity risk for an organisation or activity with a predominantly male staffing profile is

higher in an activity run by an organisation that insists on male celibacy, but this issue remains contentious.

Added to that is the institutional risk. That will vary from one institution to another but it should not be assumed that organisations that have apologised profusely for past shortcomings do not represent a continuing institutional risk. Especially where transgressions have been relatively recent, and leaders who have engaged in cover-ups and deceptive conduct have not been removed from the organisation, the organisation may well represent a continuing risk to children.

What might be low-risk activities?

Short-duration activities for young children with parents present a very low situational risk. A mothers' and toddlers' playgroup offers an example. Also, quite low-risk is a crèche where there are multiple helpers looking after infants and very young children for a limited amount of time. These children are certainly vulnerable in many respects given their size and level of dependence on caregivers, but propensity risk is likely to be low if parents and female caregivers predominate. Even if the crèche is run by an organisation that has had a sorry history of child sexual abuse in the past, the institutional risk, in relation to this particular activity, does not add much to the overall assessment that the activity is a relatively low-risk one.

A one-hour Sunday school class with multiple primary school children and at least two adults present at all times also represents a relatively low risk as long as there is strict adherence to the rule that adults are not permitted to leave the classroom to go off with individual children. The activity is short in duration and the opportunity to groom an individual child is very limited. The vulnerability risk depends on the circumstances and again, a low-SES area might have a greater concentration of more vulnerable children, but the risk remains qualified by the low situational risk. Propensity risk tends to be low in Sunday school classes, which typically have many female helpers. The institutional risk may be moderate because Sunday school programs rely heavily on volunteers and there is sometimes a reasonably high turnover. That can make screening and training processes more difficult to implement thoroughly. However, overall the risk is low.

Conclusion

These are simply illustrations of how risk might be assessed by reference to the different risk factors. Rating overall vulnerability risk may be difficult unless the organisation or activity caters for a particular group specifically. The vulnerability risk for a group of adolescents with intellectual disabilities or autism is relatively straightforward, for by definition, 100 per cent of participants fall into a category where there is an elevated risk. A general community youth organisation is much more difficult to assess – it depends to what extent, to the knowledge of the rater, there is a clustering of children and young people with an elevated degree of vulnerability in that activity.

On one view, such a differential assessment of risk may seem unnecessary. It could be argued that there should be a high priority given to child protection, and comprehensive risk management strategies should be implemented, however low the risk is on a comparative basis.

The difficulty is that such intense efforts may not be sensible, proportionate or sustainable. Sustainability of child protection efforts beyond the initial roll-out of policies and training is essential if an organisation is not to drift into failure. That involves constant monitoring and reinforcement (Munro & Fish, 2015, p 34).

Effective resource allocation requires risk assessment to determine where efforts are best concentrated (Douceck, English, DePanfilis & Moore, 1993). The need for proportionality is particularly important in organisations that involve large numbers of volunteers – for example, community sports organisations and churches. Only a few years ago such volunteer organisations were entirely unregulated except to the extent that general law provisions applied to their activities. That position has changed now due to child protection concerns; but the degree of regulation of services for children needs to be in some way proportionate to the degree of risk that justifies that regulation. If child protection regulations impose onerous requirements on activities with minimal risk of sexual abuse (for example, mothers' and toddlers' play groups), it is likely that sooner or later people will cease to volunteer for such roles, or that the work of child protection will be undermined because of a perception that the rules lack rationality or coherent justification.

For these reasons, in working out the appropriate level of regulation for different kinds of activity, or different kinds of institution, there is a need for balance between responding

appropriately to risk and not imposing such onerous requirements that organisations are unable to sustain the effort, or people are discouraged from getting involved.

There also needs to be a balance between sensible child protection and not stifling the good in adult–child relationships. In particular, there is a danger that the identification of men as by far the most likely to abuse children will further diminish male involvement in activities for children’s nurture and support. That would be a grave detriment to children’s wellbeing overall. If it takes a village to raise a child, the villagers cannot be constantly watched or chaperoned without some loss to the capacity of the village to be a well-functioning and healthy community in which the child can flourish. As Moore et al. (2016a) state in summarising more recent research exploring ‘how children and young people negotiate and mitigate interpersonal, environmental and physical risks’:

‘[R]isk is a necessary and appropriate part of childhood, and [that,] in a risk-averse society, children may be at greater risk when overly protective adults restrict their movements, limit their relationships with positive adults and develop harm minimisation strategies that isolate them rather than keep them safe.’

Positive relationships with parents, other family members, and other adults and children outside the family, are essential for children’s healthy development; but the children most at risk of not having these relationships are those who need them most and who often have most difficulty in establishing trustful relationships (Cashmore & Paxman, 2006; Schofield & Beek, 2006). These children include children in out-of-home care, those in juvenile detention facilities, and in immigration detention. For children who live in such institutional contexts, a factor critical to their wellbeing is the quality of the human relationships within them. Are there adults and peers that children and young people perceive to be reliable and caring – people they can count on when they need them? As Margaret Meade said, ‘A child needs someone who knows what happened yesterday’ (Cashmore, Dolby & Brennan, 1993). Because children’s wellbeing is closely linked to their relationships, institutions and services need to focus on how children can establish and maintain positive and protective relationships.

With these caveats, the proposed typology offers a way of assessing differential levels of risk with some element of judgment and averaging involved. It needs to be tested by applying it to comparative data of the incidence and prevalence of child sexual abuse in different institutions, taking account of the overall caution that there are many limitations to incidence and prevalence data, particularly with few large-scale reliable studies in Australia.

In conclusion, it is important to remember that children and young people:

‘often characterised safety in relation to others: they felt most safe when they had adults and peers around them that they trusted and who would protect them from danger; that they had faith in these people because they knew they cared about children; that they knew them well enough to identify when they were unsafe; that they took time to be with children and took their worries and concerns seriously, acting on them when appropriate (Moore et al., 2016a, p 16)’

It is also important to remember that institutions need to take a holistic approach to prevention and focus more broadly on wellbeing, rather than an exclusive focus on safety concerns (valentine et al., 2016).

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Case Studies

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