

Royal Commission into Institutional Responses to Child Sexual Abuse

**Issues Paper 9 – Addressing the risks of child
sexual abuse in primary and secondary schools**

Submission

**Children with Disability Australia
September 2015**

Children with Disability Australia (CDA) welcomes the opportunity to provide feedback regarding the Royal Commission's ninth issues paper, *Addressing the risk of child sexual abuse in primary and secondary schools*.

CDA has provided a number of submissions to the Royal Commission to date regarding the sexual abuse of children with disability. These include:

- CDA issues paper, *Enabling and protecting: Proactive approaches to addressing the abuse and neglect of children and young people with disability* (November 2012);
- Scoping paper regarding sexual abuse of children with disability (September 2014); and
- Submission to Royal Commission Issues Paper 8 - *Experiences of police and prosecution responses* (June 2015).

There is currently no national data on the prevalence of sexual abuse of children and young people with disability in Australia. International research indicates that children with disability are approximately 3.14 times more likely to be sexually abused than other children.¹ While existing research clearly indicates that children with disability are a high risk group where sexual abuse is concerned, the prevalence of sexual abuse of students with disability is unknown and CDA has received few direct reports of sexual abuse in education settings. Publicised cases of sexual abuse of students with disability, including the Royal Commission's ninth case study into St. Ann's Special School in Adelaide and the case of students with disability being sexually abused on school buses in South Australia in 2011,² have rightly prompted significant community concern. However it is important to note that there is a clear lack of data, research and information in this area.

CDA is, however, frequently informed of students with disability experiencing other types of abuse in education settings, including physical abuse, restraint, seclusion, chronic bullying and abuse and neglect arising from inadequate care and support. Often, incidents are not recognised as abuse because the child involved has a disability. Restraint and seclusion that is justified as 'behaviour management' is an example of this. While these experiences do not necessarily fit within the Commission's terms of reference, they demonstrate that schools can be a highly unsafe setting for students with disability. CDA's submission to the recent Senate Inquiry into *Violence, abuse and neglect against people with disability in institutional and residential settings* provides a detailed account of experiences of abuse of students with disability and is attached for consideration.

While CDA has received few direct reports of sexual abuse of children with disability in schools, a number of key considerations are raised below.

KEY CONSIDERATIONS

Peer to peer sexual harassment

CDA has received a small number of reports of peer to peer sexual harassment and abuse within school contexts. Students with disability have been subject to sexual taunting and harassment in the school yard, as well as incidents of assault such as having their pants pulled down by peers. In other cases, the privacy and personal space of children with disability is not respected. An example of this is other students attempting to enter a toilet stall whilst a child with disability is using the facilities.

The following are other incidents which have been reported to CDA:

¹ P Sullivan et al. 2000, 'Maltreatment and disabilities: A population-based epidemiological study,' *Child abuse and neglect*, Vol. 24, No. 10, p. 1257.

² N Whiting 2015, 'SA buses to get CCTV, GPS technology after disabled children allegedly abused by driver,' *Australian Broadcasting Corporation*, viewed 11 September 2015, <http://www.abc.net.au/news/2015-02-17/cctv-and-gps-installed-in-adelaide-buses-used-disabled-children/6132542>.

Mainstream schools have not met (my daughters) needs... (she was) sexually harassed by students and teachers – Parent.

My daughter attended a social program, (where) she was shown and directed to massage violent male students... This was excused away in the complaints process, no one questioned this or supported my daughter's need for specialist counselling. She was manhandled by up to four adults, including males. She learnt about fear, failure, humiliation, isolation, violence, abuse – the list goes on – Parent.

School transport

The issue of transport to school has raised a number of issues of significant concern. Policy and procedures vary in each jurisdiction. The most prominent concerns relate to the length of travel, pre-employment and ongoing screening of staff, qualifications and professional development for bus personnel and widespread inadequate policies and procedures. A number of incidents have occurred nationally, which illustrate that this is an environment where children with disability appear to be very vulnerable.

In Victoria, bus transport is provided to students enrolled in special schools. Presently the policy is that the travel time for each journey can be up to two hours for a student to travel to or from school – a potential of four hours per day. CDA has known that children, from as young as five years of age, are spending four hours a day traveling to and from school.

My eight year old son used to spend up to four hours a day travelling to and from his school which was less than 10km away from our home – Parent.

In different jurisdictions it is unclear what mechanisms there are for training and supervision of staff that drive or chaperone on these transport services. The limited or poor policies and procedures in relation to school transport, notably regarding supervision, creates a significant risk. For example, in many cases there is one driver and one chaperone supervising up to 50 students. A lack of appropriate supervision can allow peer to peer harassment to occur.

The lack of supervision of staff employed in school transport services has also allowed instances of sexual abuse to occur. This was highlighted in the two South Australian cases mentioned above. At St. Ann's Special School, a bus driver employed by the school sexually abused as many as 30 students during his time working at the school. Being the bus driver with no supervision meant he was able to groom and abuse the children without scrutiny for years.³

Safeguards

It is the view of CDA that any measures to ensure the safety of students with disability in schools should include a focus on addressing negative attitudes towards disability. This must occur through adopting a rights based, person-centred culture that values students people with disability.

It is often suggested that increased surveillance be used as a preventative safeguard for children with disability, for example by placing closed circuit television (CCTV) cameras in services accessed such as school buses. Considerations regarding whether CCTV cameras are appropriate need to be balanced with children's rights to privacy. Further, surveillance should not be used as a sole safeguard in lieu of a comprehensive prevention and protection policy and robust safeguards.

³ Royal Commission into Institutional Responses to Child Sexual Abuse 2015, *Report of case study number nine: The responses of the Catholic Archdiocese of Adelaide and the South Australian Police, to allegations of child sexual abuse at St. Ann's Special School*, Commonwealth of Australia, p. 12.

National Safe Schools Framework

The *National Safe Schools Framework* provides guiding principles to support the creation of safe and supportive school communities. In particular, it focuses on bullying, harassment, aggression and violence in schools.⁴ However, policy frameworks in this area has limited focus on ableism and the specific risks experienced by students with disability regarding bullying, harassment and abuse in education settings. CDA supports the development of policy that specifically addresses ableism and prompts all students and staff to rethink negative attitudes regarding disability.

Education regarding healthy relationships

Having access to education regarding safety and healthy relationships is important for all children. However it is evident from direct experiences of children with disability that opportunities for education regarding sex and healthy relationships are often denied.

Further, children who require regular support with personal care can have less opportunity to define and protect their personal space and may be reliant on adults to impart the importance of boundaries. These factors have been identified in research as increasing children with disability's vulnerability to experiencing sexual abuse.⁵

All children should be able to access developmentally appropriate education regarding healthy relationships and who to tell if you don't feel safe. It is important that students with disability are able to access sex education. It is also important that the needs of students with disability are considered in any policy recommendations made by the Royal Commission and other inquiries regarding provision of education about healthy relationships and sex education.

Thank you for the opportunity to contribute to this consultation and please do not hesitate to contact CDA if there are any questions regarding issues raised in this submission.

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⁴ Australian Government Department of Education 2014, *The National Safe Schools Framework*, Commonwealth of Australia, Canberra, viewed 12 August 2015, <https://www.education.gov.au/national-safe-schools-framework-0>.

⁵ I Wissink et al. 2015, 'Sexual abuse involving children with an intellectual disability (ID): A narrative review,' *Research in developmental disabilities*, Vol. 36, p. 28, D Skarbek et al. 2009, 'Stop sexual abuse in special education: An ecological model of prevention and intervention strategies for sexual abuse in special education,' *Sexuality and disability*, Vol. 27, p. 157.