Prevention, Early Intervention and Support for Aboriginal and Torres Strait Islander People who have Experienced Sexual Violence

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Contents

Acknowledgements:

1.1 Definitions of Sexual Violence and Sexual Assault

Sexual violence includes rape, sexual assault, sexual abuse, unwanted sexual advances, harassment and intimidation at work and elsewhere, being forced to watch or engage in pornography, sexual coercion, having sexual intercourse out of fear of what a partner might do, and forced prostitution and human trafficking *(Council of Australian Governments, 2011)***.**

Sexual assault includes any behaviour of a sexual nature that causes someone to feel uncomfortable, frightened, intimidated or threatened; sexual behaviour that someone has not agreed to, where another person uses physical or emotional force against them *(Centre Against Sexual Assault, 2018)*. Sexual assault is an abuse of power and is never the fault or responsibility of the victim *(Centre against Sexual Assault, 2018*).

1.2 Rates of Sexual Violence and Assault in Australia

Around 1 in 5 women, and 1 in 20 men in Australia have experienced sexual violence since the age of 15 *(Australian Bureau of Statistics, 2016)***.**

The number of sexual assaults recorded are at an all-time high and continue to rise. Reported sexual assaults increased for the sixth consecutive year in 2017, with an 8% national increase overall *(Australian Bureau of Statistics, 2018)*.

More than 4 out of 5 sexual assault victims were female (82 % or 20,556 victims); 25% of all victims were aged between 15 and 19 years at the time of reporting to police; and 60% of victims were assaulted in a private dwelling *(Australian Bureau of Statistics, 2018)*.

1.3 Sexual Violence in Aboriginal and Torres Strait Islander Populations

Aboriginal and Torres Strait Islander women experience higher rates of serious violent victimisation, including sexual violence, than non-Aboriginal and Torres Strait Islander women *(Mouzos & Makkai, 2004; Urbis Keys Young, 2004; Wundersitz, 2010).*

It is difficult to estimate the number of Aboriginal and Torres Strait Islander people who are sexually assaulted due to unreliable recording, under reporting, and non-disclosure by many victims. However, rates of sexual assault are thought to be two to five times higher for Aboriginal and Torres Strait Islander people, than for non- Aboriginal and Torres Strait Islander people *(Bryant & Willis, 2008; Mullighan, 2008; Wundersitz, 2010)*. Recent figures show Aboriginal and Torres Strait Islander people are around three and a half times more likely to have been the victim of sexual assault compared to non-Aboriginal and Torres Strait Islander people *(Australian Bureau of Statistics, 2017a; Australian Institute of Health and Welfare, 2018)*.

1.4 Sexual Assault and Young People

Sexual Assault and Young People

• **Girls, young women and Aboriginal and Torres Strait Islander young people disproportionately affected**

• **Girls aged 10-24 greatest % of sexual assault victims**

• **Children and young people comprise over half of all reported sexual assaults**

In 2017, just over half of reported sexual assaults for both women and men in Australia were of children and young people *(Australian Bureau of Statistics, 2017b)*. Overall, girls aged from 10 to 14 comprise the greatest proportion of victims of sexual violence, with those aged 15 to 24 the second highest category *(Centre Against Sexual Assault, 2018)*. In Queensland, youth sexual violence is a state-wide issue that affects young people in urban, regional and remote communities. The communities most affected by youth sexual violence and abuse are those that include the highest prevalence of social, economic and intergenerational disadvantage *(Queensland Government, Department of Child Safety, Youth and Women, 2018)*.

Consistent across culturally diverse groups of people, including Aboriginal and Torres Strait Islander groups, young women aged under 24 years are disproportionately affected, and at the highest risk of sexual victimisation *(Queensland Government, Department of Child Safety, Youth and Women, 2018; Urbis Keys Young, 2004)*. This victimisation history places these young women at greater risk of being re-victimised *(Urbis Keys Young, 2004)*. The prevalence of sexual violence against women, men, girls and boys is a constant factor in many Aboriginal and Torres Strait Islander communities, therefore concern for one group of victims should not be elevated over another *(Urbis Keys Young, 2004)*.

1.5 Main Perpetrators and Locations of Sexual Violence

Sexual violence is strongly gendered, with many more women reporting having experienced sexual violence than men *(Australian Bureau of Statistics, 2016).*

In 2016 in Australia, on average, police recorded 52 sexual assaults each day against women and around 11 against men *(Australian Institute of Health and Welfare, 2018)*.

Aboriginal and Torres Strait Islander women also experience sexual assault at between 4 and 8 1/2 the rates of Aboriginal and Torres Strait Islander men *(Australian Bureau of Statistics, 2017b)*. This sexual violence frequently takes place in the woman's family home *(Australian Bureau of Statistics, 2016; Australian Institute of Health and Welfare, 2018)*. The majority (between 67% and 84%) of Aboriginal and Torres Strait Islander sexual assault victims know the offender, often being their current or previous partner *(Australian Bureau of Statistics, 2017b)*.

1.6 Factors Influencing Non-Disclosure for Aboriginal and Torres Strait Islander Victims of Sexual Assault

Literature indicates around 90% of violence (including sexual violence) against Aboriginal and Torres Strait Islander women goes undisclosed *(Robertson, 2000; Taylor & Putt, 2007; Wild & Anderson, 2007; Willis, 2011)*.

Agencies and services in Queensland responding to Aboriginal and Torres Strait Islander domestic and family violence and sexual assault confirmed that most Aboriginal and Torres Strait Islander women find it difficult to disclose sexual violence, particularly if it relates to an intimate partner. Literature and consultation revealed that there are many barriers towards disclosure of sexual assault, especially in rural and remote Aboriginal and Torres Strait Islander communities. Barriers can include cultural considerations, fear of the police/authorities, and fear of the offender/community members.

Cultural Considerations

- difficulty interacting with non-Aboriginal and Torres Strait Islander police and other authorities *(Mullighan, 2008; Wild & Anderson, 2007)*,
- fear of being misunderstood, when English is not the victim's first language *(Mullighan, 2008; Wild & Anderson, 2007)*,
- a lack of gender specific services:
  - o female victims may experience shyness, real or perceived intimidation; or due to cultural gender protocols, be unable to disclose sexual assault to male police or authorities *(Aboriginal Family Violence Prevention Legal Service Victoria, 2010a; Freeman, et al., 2014; Taylor & Putt, 2007; Wild & Anderson, 2007)*, and
  - o Aboriginal and Torres Strait Islander men may prefer, or be obliged to discuss 'men's stuff' with other males *(Freeman, et al., 2014, p. 359)*,
- a lack of awareness of concepts like marital or relationship rape, or the perception that such behaviours are not unlawful *(Aboriginal Family Violence Prevention Legal Service Victoria, 2010a; Robertson, 2000)*,
- culturally insensitive, or racist responses by police and services *(Aboriginal Family Violence Prevention Legal Service Victoria, 2010b; Goldsworthy, 2015; Robertson, 2000; Taylor & Putt, 2007)* and
- a lack of understanding of the act, due to factors such as the young age of the victim *(NSW Government. Maternity, Child and Young People's Health, 2018)*.

Fear of Police and Authorities

- fear of re-victimisation during the criminal justice process *(Department for Women in New South Wales, 1996)*,
- fear of contact and a general distrust of police due to unsatisfactory responses in the past *(Aboriginal Family Violence Prevention Legal Service Victoria, 2010b; Robertson, 2000; Taylor & Putt, 2007)*,
- deep mistrust of mainstream justice systems and authorities, due to the post-colonisation history of authorities operating as oppressors, rather than agents of justice *(Department for Women in New South Wales, 1996; Goldsworthy, 2015)*, and
- poor governance and corruption, and few, if any checks on authority in some communities:
  - o those with cultural and political authority and control often have a great influence, directly or indirectly, over whether a victim discloses *(Mullighan, 2008)*.

Fear of The Offender or Community

- fear of reprisals against the victim or their children including 'payback' - culturally related violence retribution *(Robertson, 2000; Taylor & Putt, 2007; Willis, 2011)*,
- fear of the perpetrator and their family *(Goldsworthy, 2015)*,
- non-disclosure as a 'survival strategy', particularly for those who have been assaulted by an intimate partner *(Parkinson, 2008)*,
- social and cultural pressure to protect the perpetrator from police violence and from removal from their community *(Goldsworthy, 2015)*,
- shame, guilt and fear that their kin and community might find out *(Goldsworthy, 2015)*, and
- stigmatisation and being ostracised from their family and community *(Aboriginal Family Violence Prevention Legal Service Victoria, 2010b; Taylor & Putt, 2007; Willis, 2011)*

While the reasons for non-disclosure are complex, future efforts to increase disclosures and provide access to appropriate services must address the "the cycles of intergenerational violence and cultures that establish violence as normative" *(Willis, 2011, p. 9)*.

1.7 Inadequacy of Service Access for Aboriginal and Torres Strait Islander Victims of Sexual Assault

The majority of service responses in Aboriginal and Torres Strait Islander communities are, or have been, culturally inappropriate and ineffectual *(Prentice, Blair, & O'Mullan, 2017)* due to:

- a lack of Aboriginal and Torres Strait Islander-specific victim support services *(Aboriginal Family Violence Prevention Legal Service Victoria, 2010a)*,
- mainstream services lacking Aboriginal and Torres Strait Islander staff *(Aboriginal Family Violence Prevention Legal Service Victoria, 2010a)*,
- cultural and language barriers to accessing relevant authorities *(Goldsworthy, 2015)*,
- a lack of reporting mechanisms in remote locations *(Goldsworthy, 2015)*,
- a lack of integrated and coordinated service delivery practices *(Closing the Gap Clearinghouse, 2016)*,
- applying a simplistic approach to policy development to deal with entrenched issues *(Closing the Gap Clearinghouse, 2016)*,
- operating with a lack of cultural awareness *(Closing the Gap Clearinghouse, 2016)*,
- unsustainable responses that rely solely on short-term government funding *(Closing the Gap Clearinghouse, 2016)*.

While Indigenous agencies and services concurred with the above points, they also emphasised the need for responses to consider local context, family connections and adopting an approach that supports healing.

2   Review of Best Practice for Prevention, Early Intervention and Support for Victims of Sexual Violence

There is insufficient evidence, and no current agreement, on what works, or constitutes best practice for sexual violence prevention or response, for both Aboriginal and Torres Strait Islander and non-Aboriginal and Torres Strait Islander populations in Australia *(Australian Institute of Family Studies, 2017; McCalman, et al., 2014; Quadara & Wall, 2012)*. Despite these concerns, a review of literature has identified various aspects of best practice for prevention, early intervention and support that may relate to the Australian context.

2.1   Types of Prevention

Types of prevention include primary prevention, secondary prevention (early intervention) and tertiary prevention (response or support):

Primary Prevention

Primary prevention includes preventing sexual violence / assault before it occurs, including initial perpetration and victimisation *(Carmody, et al., 2009; Quadara & Wall, 2012)*; tackling the underlying causes of sexual assault and abuse; and increasing protective factors that promote pro-social behaviour such as respectful relationships *(Quadara & Wall, 2012)*.

Early Intervention and Identification (Secondary Prevention)

Early intervention and identification involve the early detection of risks for victimisation and perpetration; the immediate response after sexual violence to deal with the short-term consequences and responding to those at risk of victimisation; and preventing re-occurrence or progression of sexual assault *(Carmody, et al., 2009)*.

Response (Tertiary Prevention)

Tertiary prevention includes responses after sexual violence has occurred; preventing or improving consequences and impacts for victims of sexual violence; providing support for victims; providing behaviour change programs for perpetrators; and policing and criminal justice systems *(Carmody, et al., 2009)*.

2.2 Primary Prevention

Primary prevention key components

- **Culturally appropriate design and implementation**
- **Begin in early primary school years**
- **Community driven**
- **Long term and sustainable**
- **Holistic and flexible approach**

Components of Effective Mainstream Primary Prevention Programs

School-based programs

Several characteristics of successful school-based prevention programs for sexual assault, in both Australia and the United States of America have been identified *(Carmody, et al., 2009; Casey & Lindhorst, 2009; Nation, et al., 2003)*. Across these studies, key requirements for ensuring effective prevention interventions for sexual assault prevention for young people were consistent regarding program characteristics, matching the program to the target population, and implementation and evaluation.

Program characteristics:

- comprehensive program development *(Carmody, et al., 2009; Casey & Lindhorst, 2009; Nation, et al., 2003)*,
  - o multicomponent interventions addressing critical domains (family, peers and community) that influence the development/perpetration of adverse behaviour *(Nation, et al., 2003)*:
  - o effective, varied delivery/teaching methods that focus on increasing awareness and understanding of the problem behaviour, and acquiring or enhancing skills *(Carmody, et al., 2009; Flood, Fergus, & Heenan, 2009; Nation, et al., 2003)*,
- theory-based (such as using the theory of change model) *(Carmody, et al., 2009)*:
  - o sound theoretical rationales or frameworks *(Casey & Lindhorst, 2009)*,
  - o based on accurate information, and
  - o supported by empirical research *(Nation, et al., 2003)*.
- emphasis on positive development *(Casey & Lindhorst, 2009)*:
  - o promote strong, positive relationships and supports positive outcomes *(Nation, et al., 2003)*.
- sufficient dosage:
  - o adequate intervention to produce the desired effects, and
  - o follow-up to maintain the effects *(Nation, et al., 2003)*.
- coherent conceptual approaches to program design, contextualised programming *(Carmody, et al., 2009; Casey & Lindhorst, 2009)*,
- focused on structural contributors *(Casey & Lindhorst, 2009)*,
- a program logic *(Carmody, et al., 2009; Flood, Fergus, & Heenan,et al., 2009)*.

Matching program to the target population:

- inclusive, relevant and culturally sensitive practice *(Carmody, et al., 2009; Casey & Lindhorst, 2009; Flood, Fergus, & Heenan, et al., 2009)* that:
  - o is tailored to the community and cultural norms of the participants, and
  - o includes the target group in planning and implementation *(Nation, et al., 2003)*.
- appropriately timed:
  - o initiated early enough to have an impact on the development of the problem behaviour, and
  - o sensitive to the developmental needs of participants *(Nation, et al., 2003)*,
- community engagement *(Casey & Lindhorst, 2009)*.

Implementation and evaluation:

- training and professional development of educators including:
  - o well-trained staff *(Carmody, et al., 2009)*, and
  - o training towards implementation of the intervention *(Nation, et al., 2003)*.
- effective evaluation *(Carmody, et al., 2009; Casey & Lindhorst, 2009; Flood, Fergus, & Heenan, et al., 2009)* including:
  - o outcome evaluation - clear goals and objectives, and
  - o systematically document results relative to the goals *(Nation et al., 2003)*.

Components of Effective Primary Prevention Programs for Aboriginal and Torres Strait Islander Peoples

Data are lacking on the effectiveness of mainstream and Aboriginal and Torres Strait Islander-specific family (including sexual) violence prevention programs *(Closing the Gap Clearinghouse, 2016; McCalman, et al., 2014)*. However, practitioners consider the following practice principles as important in successful implementation of violence (including sexual violence) prevention programs with Aboriginal and Torres Strait Islander communities:

- led and driven by community *(Australian Human Rights and Equal Opportunity Commission, 2007)*,
- community involvement, engagement and a strong acceptance over time *(Closing the Gap Clearinghouse, 2016)*,
- sensitive to cultural diversity *(Hayes, Gray, & Edwards, 2008)*,
- culturally appropriate service delivery and program integration *(Closing the Gap Clearinghouse, 2016)*,
- holistic focus and a flexible approach *(Closing the Gap Clearinghouse, 2016)* and
- planning for long-term sustainability *(Closing the Gap Clearinghouse, 2016)*.
- focus on the specific issue/impacts of sexual assault, while positioning it within the broader family/community violence context, reflecting the relationships and interconnections that Aboriginal and Torres Strait Islander peoples have *(Urbis Keys Young, 2004)*.

Crucial components of effective primary prevention for Aboriginal and Torres Strait Islander populations have also been identified in research *(Urbis Keys Young, 2004)*.

Importantly, the delivery medium needs to be tailored with the specific target community in mind, including:

- visual and verbal messages should form the basis of campaigns,
- arts and dramatic formats are identified as appropriate media, including for children and young people,
- messages and presentation should be developed and tested with the target community, and
- campaigns should be translated into key community languages *(Urbis Keys Young, 2004)*.

Type of Messages:

Primary prevention campaigns should include the following types of messages:

- using readily understood language, naming the specific behaviours and defining them as 'sexual assault',
- describing the impacts of sexual assault including the long-term costs and consequences to victims,
- information on where to go for help, and tailoring contact points for the audience,
- the level of taboo in a community should be reflected, along with a willingness to address the issue of sexual assault, for example:
  o a message that sexual assault is not culturally based and should not be upheld in practices framed as 'cultural',
  o the view that sexual assault is a 'cultural rite of passage' and an excuse for sexually assaulting young women may need to be addressed,
- using community development theory and starting 'where the target community is at',
- positively framed messages to encourage the community to support abuse victims, and to emphasise positive expectations of intimate relationships,
- using the language of a target community:
  o community participation in the development of the material,
  o testing of the material,
  o evaluation that determines the effectiveness of the language in achieving the desired impact, and
  o evidence-based programs to better coordinate and build on existing activity *(Urbis Keys Young, 2004)*.

Access to Information:

Increased access to information regarding sexual assault is required, using strategies including:

- physical access to information for Aboriginal and Torres Strait Islander people,
- tailored information resources,
- using existing well-placed, well-networked Aboriginal and Torres Strait Islander agencies, centres, and neighbourhood houses for information dissemination to communities,
- increasing Aboriginal and Torres Strait Islander representation within key agencies and forums to:
  o develop, implement and promote effective ways of working internally and externally to government, and
  o development of culturally specific ways of working across diverse Aboriginal and Torres Strait Islander communities,
- increasing the dissemination of key research findings to Aboriginal and Torres Strait Islander stakeholders *(Urbis Keys Young, 2004)*.

Target primary school aged children:

By targeting prevention initiatives at key transition points in children and young people's development, it is hoped to divert young people from harmful pathways before adverse behaviours are well established. For Aboriginal and Torres Strait Islander young people, prevention activities beginning in early primary school are recommended. Reasons for this include:

- children's gender identity is forming, therefore providing a key opportunity to promote positive role models, moral codes, and understandings of power use and misuse,
- children's attitudes, knowledge and behaviour are being shaped, and there is a greater openness to positive influences that can affect lifelong behaviours *(Butchart, Phinney, Check, & Villaveces, 2004; Urbis Keys Young, 2004; Wolfe, Jaffe, & Crooks, 2006)*,
- 'patterns of intimate relationship violence have not had as much time to develop' for this age group *(Rosewater, 2003, p. 9)*,
- issues of power and healthy relationship development begin in the early years, so education must begin early *(Urbis Keys Young, 2004)*.
- children and young adults spend much of their time at schools, offering "a mass and captive audience" *(Ellis, 2008, p. 125)*,
- schools are able to facilitate partnerships between young people, parents, teachers, and others such as social workers and counsellors *(Hassall & Hannah, 2007)*.

Consideration of school-based programs for Aboriginal and Torres Strait Islander young people

Many Aboriginal and Torres Strait Islander youth experience high levels of community and family violence, child abuse and school withdrawal rates *(Keel, 2005; Stanley, Tomison, & Pocock, 2003)*. School-based programs are also limited to those who attend school, thereby excluding those young people who leave early *(Urbis Keys Young, 2004)*. In order to frame sexual assault in the broader context of sexual/human relationships (including gender relations and sexual ethics) programs must commence significantly earlier than high school. This approach, which is strongly supported for Aboriginal and Torres Strait Islander young people, acknowledges the difficulties young people face in negotiating intimate relationships, and provides techniques to teach them to negotiate the language and power dynamics of intimacy *(Urbis Keys Young, 2004)*.

2.3 Early intervention (secondary prevention)

Early intervention (secondary prevention) key components

• **Aboriginal and Torres Strait Islander and/or culturally appropriate workforce**

• **Family and recovery orientated**

• **Co-ordinated with other key services and programs**

• **Awareness raising and education of the community**

Early intervention, or secondary prevention, in the context of sexual assault, considers the known risk factors for both victims and perpetrators of sexual assault, and targets prevention programs towards these 'at risk' groups *(Urbis Keys Young, 2004)*.

General Principles for Early Intervention

Early intervention for Aboriginal and Torres Strait Islander people must include person-centred care, local development, culturally informed programs, and empowerment for Aboriginal and Torres Strait Islander people to make the best choices *(HealthVic, 2018)*, and holistic community responses, including cultural healing practices *(Urbis Keys Young, 2004)*.

Aboriginal and Torres Strait Islander men are showing an increasing willingness to discuss sexual assault and acknowledge responsibility as the gender most likely to offend. This provides an opportunity to intervene with these men *(Victorian Indigenous Family Violence Task Force, 2003)*.

Principles for Early Intervention for Aboriginal and Torres Strait Islander Peoples

Early intervention for sexual assault with Aboriginal and Torres Strait Islander peoples must consider the following:

- sexual assault should be framed within the family/ community violence context, which better captures the cultural and family breakdown affecting many Aboriginal and Torres Strait Islander people:
  - o 'community violence' is useful as it draws attention to non-familial sexual assaults,
  - o ensure sexual assault is the key focus, and not absorbed by family violence issues in general.
- the use of creative programs such theatre groups, interactive computer games using culturally appropriate colours and images, local languages, and people telling stories through drama, song and art,
- considering levels of taboo and sensitivity surrounding relationships and who speaks to whom about different issues,
- careful consideration of appropriate referral points, particularly in rural/remote areas where limited access to telephones/internet is likely,
- include non-offending men in discussions, as they may lead to change in negative community attitudes *(Urbis Keys Young, 2004)*,
- applying basic community development principles in all prevention work
  - o engaging community leaders, individuals and agencies,

  - o cooperatively developed messages,
  - o coordination with related effort, and
  - o promotion of ownership in the work being undertaken.
- using comprehensive, long term prevention programs rather than one-off events which may raise issues for communities without the capacity to respond appropriately,
- reinforcing the knowledge that sexual assault is not a culturally-based practice must underpin all prevention initiatives, including:
  - o addressing the shame factor associated with sexual assault particularly for the victim and their family so other family members do not reject the victim, and
  - o that family support is central to the wellbeing and recovery of the victim *(Urbis Keys Young, 2004)*.
  - o culturally appropriate health workers including Aboriginal sexual assault counsellors are engaged *(ACSAT, n.d.)*,
  - o engage Aboriginal and Torres Strait Islander people in the delivery of forensic health services *(ACSAT, n.d.)*

2.4 Support (tertiary prevention)

Support (tertiary prevention) key components

• **Victim-centred**

• **Holistic health approach**

• **Culturally appropriate response and assessment**

• **Collaborative**

• **Evaluate to build an evidence base**

Support strategies, also known as tertiary prevention, recognise the risk of repeat victimisation and harm and the risks of reoffending, and aim to reduce these risks *(Urbis Keys Young, 2004)*. There is currently very little evidence of effective tertiary prevention/support strategies or programs, or ways in which to confidently guide policy and practice for effective strategies for responding to sexual assault with Aboriginal and Torres Strait Islander populations *(McCalman, et al., 2014).*

Service responses for Aboriginal and Torres Strait Islander Sexual Assault Victims

When providing services for Aboriginal and Torres Strait Islander victims of sexual assault/violence, it is important to be victim-centred, flexible and consultative with this population, who may:

• choose to only work with Aboriginal and Torres Strait Islander counsellors/advocates,

• choose to not work with Aboriginal and Torres Strait Islander counsellors/advocates,

• feel more welcome in a service that meets their cultural needs,

• prefer workers to do outreach work in their community rather than travel to services and maintain appointment times, and

• require additional support for complex needs associated with alcohol and drug use, gambling, inadequate housing and legal difficulties *(Anderson & Wild, 2007)*.

The basis for service provision must also include:

• diverse staffing and ongoing cultural awareness training, and

• acknowledgement of the disadvantage many Aboriginal and Torres Strait Islander people experience in Australian society *(Closing the Gap Clearinghouse, 2016)*.

• sustained awareness-raising and service promotion through:
   o local resource development,
   o branding with a language name for sexual assault, and
   o providing contact details for who and where to report.

• education at community events and in schools,

• training health practitioners to respond in culturally appropriate ways, including for assessments,

• safe houses with dedicated workers, 24-hour response, and a free call 1800 number,

• prevention rather than just intervention,

• youth drop in services, and

• increased parental involvement *(McCalman, et al., 2014)*.

Other requirements

Other requirements to support Aboriginal and Torres Strait Islander peoples include:

• greater collaboration between adult and child sexual assault sectors at policy and practice level, to more fully understand the place of prevention in tertiary services,

• better coordination of prevention activity *(Urbis Keys Young, 2004)*,

• improving links between victim and offender systems, to inform the development and implementation of sexual assault prevention programs, such as:
   o collaborative prevention efforts between victim and offender sectors, and
   o provision of both victim and offender programs beyond the criminal justice system, within holistic health contexts *(Urbis Keys Young, 2004)*,

• include offender programs focusing on:
   o alcohol and other drug issues,
   o culturally relevant matters such as cultural healing,
   o the broader understanding of social and emotional wellbeing *(Urbis Keys Young, 2004)*,

• recognising and addressing the complex historical, social and cultural factors influencing service assess *(Prentice, Blair, & O'Mullan, et al.,2017)*.

• contribute collaboratively to the research agenda *(Urbis Keys Young, 2004)*, and

• evaluation of programs to build the evidence base for what works in responding appropriately to sexual assault with Aboriginal and Torres Strait Islander people *(Closing the Gap Clearinghouse, 2016)*.

2.5 Existing programs

Existing program key components

• **Culturally specific programs**

• **Strengths-based / community development focus**

• **Confidentiality and empowerment**

• **Official evaluation of programs needed**

Aboriginal and Torres Strait Islander Programs

Love Bites

Love Bites is an educational program designed to prevent family violence and sexual assault by supporting teenagers aged 14 to 17 years to develop healthy and respectful relationships *(Australian Centre for the Study of Sexual Assault [ACSSA], 2013)*. The program consists of educational workshops regarding domestic and family violence and sexual assault, followed by creative workshops to consolidate the information. The creative works are used in local campaigns, developed and led by the young people, to prevent violence against women in the community *(National Association for Prevention of Child Abuse and Neglect [NAPCAN], 2014)*.

Love Bites has been adapted for use in 100 Australian communities, including metropolitan, regional and remote Aboriginal and Torres Strait Islander communities *(NAPCAN , 2014)*. Program coordinators work in partnership with Aboriginal and Torres Strait Islander services and facilitators with local knowledge, to run culturally-specific programs, using local language and myths *(ACSSA, 2013)*. While this program has not been evaluated with Aboriginal and Torres Strait Islander teens, it has been evaluated with teens in Sydney, and found positive effects on their attitudes towards domestic violence and gender relations. A lack of comparison group, however, limited the ability to attribute these changes to the program *(Ellis, 2008; Flood & Kendrick, 2012)*.

Mildura family violence and sexual assault campaign

The Victoria Police and Aboriginal and Torres Strait Islander community leaders in Mildura, Victoria, developed a public awareness campaign to reduce family violence and sexual assault, using television commercials and posters to communicate anti-violence messages. The campaign was considered promising (best) practice for community education and development. It recognised the diversity of Aboriginal and Torres Strait Islander peoples, responded to the needs of individual communities, built on community knowledge and strengths, and was based on partnerships between government and non-government organisations *(Human Rights and Equal Opportunity Commission [HREOC], 2008)*. This campaign has not been officially evaluated, therefore it is not known whether it has reduced family violence or sexual assault rates in Mildura. Anecdotal evidence however, suggests it has resulted in better recognition of family violence and sexual assault, and higher rates of reporting to police *(Closing the Gap Clearinghouse, 2016)*.

Balgo women's law camp

The Balgo traditional women's law camp is located in very remote Western Australia. The camp was established in 2007 by the Kapululangu Women's Law and Cultural Centre, one of Australia's most remote women's centres. The camp is operated annually and is designed to increase young women's understanding of, and capacity for, handling conflict and violence and reinforce the strengths of culture and community. It provides Elders with the opportunity to pass their knowledge onto the younger generation. Participants are able to discuss problems within their communities, including family violence and sexual assault, and identify strategies to eliminate them. While this is a positive initiative, enabling women to connect with their culture, land and themselves *(dé Ishtar, 2007)*, it is not known how the program subsequently affects family violence (and sexual assault) rates in the Balgo region. *(Closing the Gap Clearinghouse, 2016; Kapululangu Women's Law and Culture Centre, 2013)*.

International Indigenous Programs

Tiaki Tinana – New Zealand

Tiaki Tinana is a Maori-specific program, established in New Zealand in 2006, in response to sexual offences against Maori children and young people. Tiaki Tinana promotes the prevention of sexual violence within Maori communities, using a cultural focus, rehabilitating offenders and healing survivors. By raising awareness, the program assists communities to incorporate practical, everyday strategies to prevent sexual violence. Using a kaupapa framework (principle or policy reflecting Maori language, knowledge and culture), both clinical and cultural knowledge are included in the response strategy *(Te Puni Koriki, 2018)*.

The central components of Tiaki Tinana include:

- using a kaupapa Maori framework to deliver sexual violence prevention education;
- translating complex clinical information (from clinical experience a strong base of academic and clinical research on sexual offending and prevention) into everyday language;
- prevention opportunities in everyday whanau environments;
- awareness of how offending behaviour can develop, and situations and environments where the opportunity to offend exists; and
- targeting and tailoring messages for teenagers, young people, and their care givers *(Te Puni Koriki, 2018)*.

While there is a lack of empirical evidence to indicate the efficacy of programs like Tiaki Tinana in reducing sexual offending in New Zealand, Thornley *(2013)* found that approaches likely to be effective in New Zealand for Indigenous (Maori) people include:

- kaupapa Māori (principle-based) approaches,
- strengths-based and community development approaches,
- strengthening cultural and family/whanau, and
- integration of cultural and clinical competence *(Cooper, 2012; Memmott, Chambers, Go-Sam, & Thomson, 2006; Shea, Nahwegahbow, & Andersson, 2010; Victoria Department of Human Services, 2012)*.

Native American programs

As identified by Clairmont *(2011)*, programs and services that respond to sexual assault for Native American people have been found to include the following elements:

- adapt culturally appropriate processes into services and programs,
- accessible to community members,
- use language and communication styles adapted to the audience,
- offer choices that will protect confidentiality and reduce stigma,
- coordinated community responses, including law enforcement and criminal justice, and
- make use of community strengths.

Two major principles for all services include confidentiality and empowerment. This includes returning control back to the victim by offering choices and providing accurate and thorough information about victim's rights to confidentiality and anonymity *(Clairmont, 2011)*.

Preliminary work being conducted to address sexual assault within Native American tribal communities includes:

- coordinated community responses and increased collaboration across jurisdictions,
- tribal codes on sexual assault,
- examination and improvement of investigations and prosecution protocols,
- regenerating indigenous forms of justice,
- increasing community awareness of sexual assault, and
- fighting to exercise inherent sovereignty *(Clairmont, 2011)*.

Mainstream Australian and International Programs

World Health Organization (WHO) framework

A WHO (2010) review of evaluations of international prevention programs for intimate partner and sexual violence against women, found that few were rigorous enough to demonstrate the effectiveness of programs *(World Health Organization [WHO] & London School of Hygiene and Tropical Medicine, 2010)*. WHO has subsequently developed a framework for policy and program development for the prevention of intimate partner and sexual violence reported in *Preventing intimate partner and sexual violence against women: taking action and generating evidence (Closing the Gap Clearinghouse, 2016; WHO & London School of Hygiene and Tropical Medicine, 2010)*.

This six-step framework *(WHO & London School of Hygiene and Tropical Medicine, 2010, p. 75)* includes:

1 **Identifying key partners and develop partnership working arrangements,** developing a shared vision, and developing skills and capacity in leadership and advocacy

2 **Define and describe the nature of the problem** by defining intimate partner and sexual violence, describing the nature and size of the problems, developing capacity to assess health needs and impacts

3 **Identify potentially effective programs**

4 **Develop policies and strategies,** agree upon a framework for joint policy and strategy development, prioritise effective programs

5 **Create an action plan to ensure delivery,** agree upon the process and timetable for implementation, agree upon and define roles and responsibilities of others, develop professional skills, undertake further training, establish effective networks

6 **Evaluate and share learning** plan and implement appropriate evaluation, learn and share evidence and promising practice.

Australian school-based violence prevention programs

Schools are one of the main settings where preventive efforts to address violence and promote respectful relationships takes place. Two Australian programs are, the Sexual Assault Prevention Program for Secondary Schools (SAPPSS), and the healthy relationships program Respect, Protect, Connect *(Flood, Fergus, & Heenan, et al., 2009)*. SAPPSS uses a whole-of-school community approach to prevent sexual assault, and includes training for all staff, curriculum for students in Years 9 and 10, and a peer educator component. SAPPSS was found to increase young people's understanding of sexual assault issues, and their ability to discuss them in an open, respectful and appropriate manner *(Centre Against Sexual Assault House, 2008)*.

The Respect, Protect, Connect program comprised a 2- or 8-week program, completed by Year 8 and 9 students from high schools in southern metropolitan Victoria. Respect, Protect, Connect was found to produce an improvement in the attitudes of the boys who took part in the program; while all students found the program to be beneficial (Fergus, 2006). There was no indication whether Aboriginal and Torres Strait Islander students participated in either SAPPS or Respect, Protect, Connect program; or were involved in the evaluation, therefore it is unknown whether these programs are successful with these students.

School-based programs, however, are not always useful with Aboriginal and Torres Strait Islander students *(Closing the Gap Clearinghouse, 2016)*, for the following reasons:

* traditionally high level of school withdrawal rates amongst young Aboriginal and Torres Strait Islander people, therefore an alternate approach is required to reach this target group *(Stanley, Tomison, & Pocock, 2003)*

* young Aboriginal and Torres Strait Islander people are more likely to have been victimised at an earlier age, therefore prevention and intervention programs are required at a much earlier point *(Urbis Keys Young, 2004)*.

2.6 Engagement with Aboriginal and Torres Strait Islander Agencies and Service Providers in Queensland

Key learnings

• **Holistic approach considering the social and emotional wellbeing of each individual**

• **Awareness of, and abidance with local community protocols when entering Indigenous communities**

• **Practitioners should maintain links with elders and community to build and maintain cultural competency**

The Murrigunyah Family and Healing Centre was a key partner in the development of this paper. Murrigunyah is one of the only sexual violence counselling and support services in Queensland delivering these services specifically for Aboriginal and Torres Strait Islander victims of sexual violence.

Murrigunyah works from a holistic and cultural perspective to support the spiritual, social and emotional interests of Aboriginal and Torres Strait Islander women.

Essential factors when responding to Aboriginal and Torres Strait Islander victims of sexual assault were highlighted by Murrigunyah practitioners as being part of their existing approach. These were also reinforced by other service providers as necessary components of responding to Aboriginal and Torres Strait Islander sexual assault victims. These factors included the need to:

• strengthen cultural identity and connections in the family and community,

• have an awareness of social and emotional wellbeing,

• have an awareness of domestic, family and sexual violence dynamics, and prevention methods, and

• have an awareness of spiritual and cultural healing.

Practitioners from Murrigunyah, along with other agencies and service providers, emphasised that in working with Aboriginal and Torres Strait Islander women and children across the prevention spectrum there is no 'quick fix'. Rather a holistic view taking into account historical, community, family and spiritual considerations is needed. All agencies and service providers who provided comment expressed a preference to making a difference in primary prevention and early intervention work, in particular working with children and young people in schools to educate them about respectful relationships.

Consultation also reinforced:

• that there were high levels of non-reporting of sexual assault

• there are difficulties in making meaningful, sustainable change regarding the prevalence/reporting of sexual assault, including:

  o lack of Aboriginal and Torres Strait Islander specific services

  o lack of awareness of the needs of Aboriginal Torres Strait Islander sexual assault victims,

  o lack of Aboriginal and Torres Strait Islander workers in sexual assault and domestic and family violence sectors across Queensland

3   Conclusion

This paper provides information to assist practitioners to work towards best practice for prevention, early intervention and support for Aboriginal and Torres Strait Islander people impacted by sexual assault. The principles and key messages throughout provide a framework for practitioners to utilise in this complex work.

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