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Problem Sexual Behaviour in Children: A Review of the Literature

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Abstract

In July 2007 it was reported that an 11-year-old boy forced two pre-school-aged girls to have sex with him, infecting both with sexually transmitted diseases (Gosch, 2007).

In early 2008 a group of teenage and pre-teen boys allegedly raped a six-year-old boy (Murphy, 2008).

The childhood experiences of Indigenous Australians have been the subject of sustained national attention in the last year, with such stories of sexualised behaviour now a media mainstay. Each of the major jurisdictional Task Force or Inquiry reports into violence in Indigenous communities also indicate concern about this issue.

Childhood problem sexual behaviour broadly encompasses acts of aggressive or coercive sex by children towards other (usually younger) children. This review surveys the scholarly and clinical literature on this issue, identifying the recurrent contexts and correlatives for children who present with these kinds of behaviours.

The literature reveals such behaviours are far more prevalent where particular conditions of disadvantage also prevail. Experiences of childhood trauma, compromised educational outcomes, adverse socio-economic conditions, homelessness or an unstable home-life, intellectual impairment, and exposure to drug or alcohol misuse are just some of the conditions of disadvantage that increase the risk of childhood problem sexual behaviour.

The prevalence of compounding factors of disadvantage in Indigenous communities provides a picture of the deeply interconnected layers contributing to this increased risk. Yet the literature also emphasises the protective factors that might mitigate these risks, pointing to the possibilities for reducing childhood problem sexual behaviour if attention is directed to multi-systemic issues of context rather than focusing on anomalous individual behaviour. Casting the literature on problem sexual behaviour against the complex contexts of disadvantage in some Indigenous communities reveals the need for long-term multi-systemic response. A permanent reduction in the prevalence of problem sexual behaviour in children will only be possible with sustained and comprehensive engagement, and a culturally appropriate agenda aimed at redressing contexts and consequences of structural disadvantage.

1 Throughout this review the term “culturally appropriate” is used to signify the importance of consultations and program design being attuned to the specificities of Indigenous perspectives, beliefs, and customary practices. This is not to imply that all Indigenous perspectives are uniform, or that what may be culturally appropriate in one context will necessarily be culturally appropriate for all contexts.
Preface

Major Task Force and Inquiry reports\(^2\) on the conditions in Indigenous communities\(^3\) reveal that Indigenous leaders, community members and health practitioners are concerned that child sexual activity is now becoming the norm. Any number of recent media reports support this, with regular stories of Indigenous children in contact with the juvenile justice system or child protection agencies as a result of their coercive sexual behaviour with other Indigenous children. Despite the increasing public awareness of this issue there appears to be very little academic material acknowledging the existence, prevalence or characteristics of child sexual activity in Australian Indigenous families and communities. Moreover, it appears that there is very little by way of Indigenous-focused response to this issue, resulting in an urgent need for thorough empirically grounded research as well as culturally appropriate and soundly evaluated prevention and intervention initiatives.

Although there is an under-acknowledgement of this issue in Australia there is a large body of international scholarship on juveniles who exhibit sexually violent or coercive behaviours toward other juveniles.\(^4\) Research undertaken in the United States and the United Kingdom emphasises options for clinical treatment, the logistics of coordinating multi-agency response, and the causes and correlatives for coercive sexual behaviours in adolescents. Much of this literature has tended to focus on adolescents and there is an urgent need for increased studies on young children engaging in problem sexual behaviour.\(^5\)

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3 The term communities is not used here as a homogenising term. The diversity of Indigenous peoples in Australia is such that circumstances in one community cannot be assumed to reflect communities elsewhere. The use of the term “communities” is used in the context of the HREOC suggestion that “the term ‘community’ is misleading in the Australian context because many Indigenous settlements are artificial constructs that bring together disparate clan and language groups” (HREOC, 2006, p. 89), or groups of families.

4 There are a number of extensive studies on Canadian Aboriginal youth sex offenders. See, for example, Rojas, E., et al., 2007.

5 To draw a clear distinction between childhood and adolescence is problematic in both cultural and disciplinary terms. As Jan Kociumbus suggests “definitions of childhood and adolescence are historical constructions, varying across time” (1997, p. ix). Such definitions are also culturally contingent, and care needs to be taken to avoid generalised assumptions that do not account for diverse childhood experiences, pre-marital rites and ceremonies, and complex familial structures. As Victoria Burbank suggests “social and cultural reactions to . . . physical maturational changes” are not universal (1998, p. xi). Definitions of childhood and adolescence are further complicated by disparities between physiological or sociocultural definitions. Within Australia the legal definitions of age of consent and age of culpability differ between jurisdictions, with further jurisdictional disparity evident in judicial and law enforcement response. Against this definitional complexity this report uses the term “child” to refer to all those below the age of consent. (17 years in most Australian jurisdictions).
The smaller body of work published in Australia also favours adolescents rather than children with much of this work heavily influenced by international clinical studies. There are, however, a handful of reports based on Australian practitioner data that do focus on young children who engage in problem sexual behaviour. This literature surveys and evaluates the very limited number of existing therapeutic programs in Australia, and provides interview data with practitioners working with children exhibiting problem sexual behaviour. In the main, this research reinforces the findings of the international scholarship, both in terms of the contributing factors to problem sexual activity in children, but also in terms of the need for multi-faceted and contextually based cognitive behavioural therapeutic programs in response. More importantly, this burgeoning field of study indicates how far we have to go both in understanding the extent of the problem in Australia and in fashioning appropriate programs for prevention and intervention.

Dr Joe Tucci is Chief Executive Officer of the Australian Childhood Foundation (ACF), an organisation that has taken a lead in responding to childhood problem sexual behaviour. Tucci et al., (2006) claim an urgent need for investment in a dedicated research and response agenda (Staiger et al., 2005b). To effectively address this issue researchers and practitioners require comprehensive empirical data on problem sexual behaviour in children across all sectors of Australian society, including Indigenous communities.\(^6\)

\(^6\) A collaborative research paper produced by the NSW Department of Juvenile Justice highlights the fact that the framework for responding to children with problem sexual behaviour needs to be contingent upon the specificities and contingencies of children’s circumstances. At present there are chronic gaps in knowledge and service delivery in this regard. “For example, it is currently unknown the extent to which Aboriginal youth make up the population of adolescent sex offenders in this country and how their needs differ from other groups who may be represented” (Kenny et al., 1999b, p. 2).
SCHOLARSHIP ON PROBLEM SEXUAL BEHAVIOUR IN CHILDREN

METHODOLOGICAL AND IDEOLOGICAL DIFFICULTIES IN RESEARCHING CHILDREN WITH PROBLEM SEXUAL BEHAVIOUR

A number of the difficulties in gathering data on childhood problem sexual behaviour in the Australian context are evident in the international context as well. Ethical considerations place restrictions around research and analysis of children with problem sexual behaviours but there are also historical and ideological factors contributing to what amounts to a silence around this issue. Children engaging in problematic sexual behaviour is not a new phenomenon, nor is it something that occurs only in discrete locales where particular environmental or socio-economic conditions prevail. Problem sexual behaviour in children is a far greater issue than has been publicly acknowledged either internationally or in Australia and the continued failure to confront this issue in an honest and systematic way seriously jeopardises effective preventative and rehabilitative response.

Prior to the 1990s problem sexual behaviour in children was often explained as “normal experimentation or developmental curiosity” (Veneziano and Veneziano, 2002, p. 247), and there is some concern that this thinking continues to pervade contemporary responses to child sexual activity (Ryan, 1997). Ideological constructions of childhood innocence contribute to a reluctance to admit that children are capable of engaging in sexualised behaviours that exceed commonly accepted developmental or experimental bounds. Indications that children might engage in coercive sexual behaviour have often been met with shock and denial. The lack of reliable national data on the prevalence of childhood problem sexual behaviour notwithstanding, reports from the media, community members, and service delivery providers all point to a serious problem in Australia. In their history of Child Protection in Australia, Dorothy Scott and Shurlee Swain argue that this has long be the case:

Research had always shown that the most common type of unwelcome sexual experience of children was that inflicted by another child or adolescent, but the issue had largely been ignored, perhaps because it was inconceivable that a child could sexually abuse another child. (Scott and Swain, 2002, p. 171)

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5 The ACF has identified the “reluctance of parents, teachers and others to report to agencies any incidences of these behaviours in young children. Even if reports are made, the service system often fails to acknowledge the significance of the problem and frequently does not record reliable data” (Staiger, Kambourgkoulous et al. 2005b, p. 3).

6 Difficulties in responding in Australia are exemplified by the fact that The Children’s Protection Society (CPS) introduced an Adolescent Sex Offender Treatment program in 1994, and found that “other agencies providing services to victims of sexual assault were unwilling to become involved with young offenders, despite the fact that many of these offenders were also victims of sexual abuse themselves” (Scott and Swain, 2002, p. 170).

9 Freda Briggs identifies the dangers associated with unquestioned ideals of childhood innocence when she writes “Children are made vulnerable by ignorance, which many adults mistake for ‘innocence’” (Briggs, 1989, p. 1).
The historical and ideological reasons for this kind of silence and denial are complex, and they continue
to manifest in the lack of attention given child sexual assault compared to domestic violence and sexual
assault against adults.\footnote{Child sexual assault is often subsumed by discourse on domestic violence. The term “family violence” is often reported as the term favoured by Indigenous people yet this term has also been criticised for subsuming, and perhaps euphemising, child sexual assault. The Gordon report provides commentary from Indigenous people who criticise “family violence” as a term that implies that it is a positive family activity.} Scott and Swain (2002) chart the slow process by which Australian agencies came to acknowledge the sexual assault of children as a major problem, and they go on to identify a
similar delay in the recognition of problem sexual behaviour in children. “What is perhaps most surprising
about children sexually abusing children is not the time it took to discover this phenomenon, but the lack
of analysis it has received” (p. 171). This assessment is supported by the Doctoral research of Joanne
Hatch, who argues that although sibling abuse is by far the most common type of intra-familial sexual
abuse\footnote{Hatch quotes two UK studies in support of this. The large sample survey conducted by the NSPCC revealed that sibling abuse is twice as common as that perpetrated by a father or a step-father. The predominance of sibling sexual assault comparative to father or step-father – child incest is also supported by the recent study conducted in the UK by Laurence (2003).} this fact has been overlooked for decades in favour of an emphasis on father-child incest (Hatch, 2005). This pervasive culture of discursive silence and denial must be broken if Tucci’s recommendations regarding an increased investment in research and response are to be heeded (Tucci et al., 2006).

Neglecting research on childhood sexuality functions both to perpetuate dominant ideologies of
innocence and to exacerbate the already significant gap in our understanding as to what constitutes
devolutional sexual behaviour. Contemporary researchers confronting the issue of problem sexual
behaviour in children find that they are hampered by both this paucity of research but also by the
inadequate and inconsistent understandings of what constitutes “normal” childhood sexuality and
“problem” sexual behaviour. The ACF report that the result is a compromised response:

\emph{The lack of a conceptual frame for understanding children’s sexual development results in the
potential for a number of different interpretations to be made about the behaviour and puts into
jeopardy an effective system response.} (Staiger, et al., 2005b, p. 3)

Definitions of “normality” and “deviance” are subjective and socially and culturally specific and, given the
aforementioned socio-cultural sensitivities, definitions are all the more contingent in the context of child
sexual activity. Nonetheless, the conceptual and legislative framework required for coordinated response
to incidents of problem sexual behaviour requires that we distinguish between “developmental” sexuality
in children and behaviours that might be considered problematic, either for the child initiating the contact
or for the subject of their attention.

\textbf{DEFINITIONS AND TERMINOLOGY}

Although definitions vary most scholars agree that coercion and consent are central concepts in defining
problem sexual behaviour in children. For Allan coercive sex constitutes deviant behaviour (Allan, 2005)
as for Becker, who defines non-deviant adolescent sexuality as “noncoercive sexual interaction with a
peer” (Becker, 1998, p. 197, qtd. in Lovell, 2002, p. 2). “Coercion” has come to be pivotal in Australian
definitions as well. In their 2006 Australian Institute of Family Studies Issues paper on young people with
problematic sexual behaviours Cameron Boyd and Leah Bromfield adopt the U.S. scholar Ryan’s tripartite model of analysis of the extent to which “equality, consent and coercion” are present in the relationship of the young people concerned (Ryan, 1997 qtd. in Boyd and Bromfield, 2006, p. 2). Boyd and Bromfield (2006) caveat this by emphasising that whilst these definitions are conceptually useful it is not possible to provide a standardised measure for determining behaviours as either “normal” or “deviant”. The UK National Society for the Prevention of Cruelty to Children (NSPCC) is also reluctant to categorically polarise normal and deviant sexual behaviours in children. In her NSPCC report Elizabeth Lovell stresses the importance of considering childhood sexual behaviour in terms of a continuum so that “normal” or developmental activities are not wrongfully represented:

The sexual behaviour of young people can be seen on a continuum from mutually agreed experimentation to very serious crimes such as stalking and multiple rape. Many children engage in activities that form a normal part of their sexual development (Gil and Cavanagh-Johnson, 1993; Ryan and Land, 1997). Much of this behaviour is not abusive and forms an important and necessary part of the learning process. Other types of behaviour are harmful and not appropriate. (Lovell, 2002, pp. 1-2)

Although studies undertaken to date have been fraught with methodological difficulties including insufficient empirical data, difficulties with data set comparability, and definitional disparities, one aspect on which scholars agree is that to generalise about children who engage in sexually harmful behaviours would be non-representative and would likely be harmful in itself. Researchers seem to agree that this group of young people is heterogenous and that response needs to be multi-systemic and customised according to individual and contextual factors (Nisbet et al, 2005).

There is general consensus among scholars that to term juveniles “sex offenders” would have negative consequences in that the label would inhibit the impetus to change. It can also be argued that this term is not representative of the full spectrum of child sexual activity that is reflected in Lovell’s notion of the continuum. Several researchers have suggested that the phrase “young people who engage in sexually harmful behaviours” better encapsulates the spectrum of activity whilst avoiding the punitive, paedophilic and pathological associations of the term “sex offenders” (Boyd and Bromfield, 2006, p. 2; Lovell 2002, p. 2; and Veneziano and Veneziano, p. 254).

For the purposes of this report the term “problem sexual behaviours” will be used in accordance with the preferred terminology of the ACF.12 This term is favoured because “the child is positioned in relation to the behaviour rather than being ‘totalised’ by it . . . [and] the conceptualisation considers the impact of social and cultural factors” (Staiger et al., 2005b, p. 3). The concepts that underpin the ACF definition of “problem sexual behaviour” are slightly more nuanced than Ryan’s emphasis on consent, coercion and equality. The ACF refer to the work of Cunningham and McFarland (1991) to “stress that sexual activity between children of any age that involves coercion, bribery, aggression or secrecy, or involves a substantial age difference” should be considered problematic and in need of attention (qtd. in Staiger

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12 In instances where other descriptions or terms are used these reflect the terminology of the author/s cited.
et al., 2005b, p. 8). Thus consent, coercion and equality remain central to ACF definitions, but problem sexual behaviour is also identified by sexual behaviour that contravenes family and community values, or that takes place out of context (i.e. in public):

There are three ways behaviour can be problematic. Firstly, the behaviour puts the child at risk, interferes with his or her development and relationships, violates rules, is self-abusive and/or is defined by the child as a problem. Secondly, the behaviour causes others to feel uncomfortable, occurs at the wrong time or place, conflicts with family or community values, and is abusive. Thirdly, the behaviour can involve coercion and unequal power. (Staiger et al., 2005b, p. 3)

On the basis of this broad definition and in reviewing the available literature on childhood sexual development the ACF use the work of Sharon Araji (1997) to chart common examples of problem sexual behaviour in children of various age groups. For children aged 0-5 years the following sexual behaviours would be characterised as problematic:

- Curiosity about sexual behaviour becomes an obsessive preoccupation
- Exploration becomes reenactment of specific adult sexual activity
- Behaviour involves injury to self
- Children's behaviour involves coercion, threats, secrecy, violence, aggression or developmentally inappropriate acts.

For children aged 6-10 years the following would constitute problem sexual behaviour:

- Sexual penetration
- Genital kissing
- Oral copulation
- Simulated intercourse

Children aged 10-12 years whose behaviour “involves sexual play with younger children” would cause concern. “[I]t is highly unusual and problematic for children of this age to be involved in sex play with younger children” (2005b, p. 3-8).

This provides a useful and much needed guideline but, again, it is important to consider that definitions of appropriate and inappropriate behaviours are subjective and culturally specific, and definitions of consent are often similarly contingent. Researchers need to resist the apparent comfort offered by fixed definitions or exhaustive lists of “normal” or “problem” behaviours. These cannot be assumed to reflect the complexity of childhood behaviour, and in each instance of sexual behaviour a whole host of contributing factors would need to be considered. It is also crucial that we acknowledge the implications associated with the use of these definitions outside of the context of clinical research.

13 This is exemplified in a recent major Australian sexual health study of 2,388 students (15-17 years-old) in which 14.9 per cent of girls reported that they had unwanted sex because “their partner thought they should” (Smith, 2003). This indicates the degree to which coercion characterises adolescent sexual experiences in the broader Australian population.
Varied interpretations of definitions, jurisdictional discrepancies as to the age of consent and the age of criminal responsibility, judicial discretion, and difficulties surrounding child legal statements all contribute to the problems associated with the term “consent”. Definitional quandaries such as these have long beleaguered effective research and response to problem sexual behaviours amongst children. Scott and Swain express concern that as problem sexual behaviour in children becomes more widely acknowledged (and necessarily so) it may “like other forms of child abuse, become reified as a social problem” whereby “counsellors and therapists colonise children’s sexuality as another area of child rearing that requires specialist expertise and control” (Scott and Swain, 2002, p. 171). These authors are firm advocates of a broader acknowledgement of, and more effective response to, problem sexual behaviour in children. Their important caveat is that societal panic and unstable definitions might result in childhood sexualities (in general) being pathologised. This is an important reminder of the fact that constructions of childhood innocence can indeed operate as something of a double-edged-sword of denial. Erroneous assumptions that childhood is universally characterised by pre-sexual innocence position children as beyond reproach, and thus risk factors to problematic behaviour might be overlooked. On the other hand, the reluctance to avoid pathologising childhood sexualities might, if taken too far, contribute to both our lack of understanding of the developmental stages of childhood sexualities and those acts that might be seen as excessive to developmental bounds.

14 This definitional and legislative instability is also a likely contributor to the current situation in Australia in which it is extremely rare that juveniles are prosecuted for sexual offences against other juveniles. The recent prosecution of Indigenous juveniles from Kulumburu is an exception, particularly in contrast with the more recent case in Far North Queensland. The six juvenile and three adult males who all pleaded guilty to the 2005 rape of the ten-year-old Indigenous girl from Aurukun received a warning and no criminal conviction. Although above the age of criminal responsibility these juvenile boys were assumed too young for even the suspended sentences awarded the adult offenders. District Court Judge Sarah Bradley’s speculative assertion that the ten-year-old victim “probably agreed” to have sex with the three adult and six juvenile males attributed the victim with the responsibility of granting consent five years prior to the time in which she would legally be deemed able to do so. This inverted logic demonstrates the difficulties associated with definitions of age of consent, actual consent, and age of criminal responsibility. Legislative confusion is reflected in Indigenous communities also. The NT Inquiry reported “many Aboriginal people were still confused as to the age of consent” (p. 71).

15 Judith Bessant and Rob Watts, amongst others, argue that in the early 21st century, children and young people “are one of the most regulated groups of people in Australia” (p.3). Nationally, there are 47 statutes dealing with child welfare and juvenile justice.

16 Jan Kociumbas provides a history of the means by which the sexualities of Australian children have been pathologised in a series of moral panics. Of particular relevance is the section entitled “Juvenile sexuality as a disease” (1997, pp. 135-147).
FOCUSBING ON SITUATIONAL FACTORS RATHER THAN INDIVIDUAL PATHOLOGY

Increased attention to problem sexual behaviour in children presents the risk that dominant definitions and understandings regarding adult sex offender behaviour might simply be mapped onto children. Were this to occur the important arguments about the heterogeneity of children displaying problem sexual behaviour would be overlooked, and childhood sexuality, in general, would be homogenised and pathologised (akin to the fears expressed by Scott and Swain, 2002). To transpose terminology, conceptual models, or response recommendations in this way would be to conflate childhood acts of problem sexual behaviour with adult sexual offences against children. A move such as this would also risk neglecting the developments that have occurred in theorising and responding to instances of adult sexual offending against children. Given the development of this scholarship has been slow and hard-won it is crucial that the same misconceptions that characterised early responses to adult sex offenders do not characterise early responses to children displaying problem sexual behaviours.

Among the important lessons to be taken from the scholarship on adults who sexually offend against children are the reservations that many scholars now have about employing previously popular typologies adult offender behaviour as paedophilic. To conceptualise sexual offences against children as heterogenous is not to understate the effects of child sexual abuse or to diminish the culpability of those who offend against children. Rather, differentiating between the various types of behaviour allows for a more accurate and nuanced understanding of possible causes and correlatives for these behaviours.

In their Australian study of 182 adult males serving custodial sentences for sex offences against children Smallbone and Wortley (2001) argue that paedophilia is a pathologising term, the overuse of which misrepresents the circumstances contributing to the sexual abuse of children. This argument also pervades the U.S. scholarship on child sexual assault and Catherine Itzin (2000) and Liz Kelly (2000), in particular, suggest that the inappropriate application of the term ‘paedophile’ medicalises behaviour as only being evident in a “certain type of person” (Kelly and Regan, 2000, p. 78). This results in diverting much needed attention from social issues of power, control and the construction of gender roles (Kelly and Regan, 2000; Itzin, 2000). The empirical work conducted by Smallbone and Wortley (2001) affirms this and they suggest that the representation of paedophilia as paraphilic is undermined by data that reveal the diversity of criminal activity that is likely to both precede and follow the offence/s against children. Smallbone and Wortley (2001) contend that prior and subsequent offending patterns for child sex offenders are more likely to be non-sexual than sexual. The argument here is that rather than being a discrete crime type sexual offences against children are symptomatic of broader dysfunction or “extensions of more general antisocial patterns of behaviour” (p. 6).
Signaling a departure from the pathologised typology of the “sex offender” this line of argument resonates with Lovell’s suggestion that in juveniles the risk of sexual re-offending is far less than the risk of violent non-sexual re-offending (2002, p. 4). A possible explanation for this might be found in the work of Veneziano and Veneziano who contend that children who engage in sexually harmful behaviours with (or against) other children are situationally rather than preferentially motivated. There is general agreement amongst scholars that the vast majority of children engaging in problematic sexual behaviors are not motivated by a pre-existing sexual predilection for children but that their behaviour results from the particularities of their context or situation. To consider the impetus for offending behaviour as situational casts light on the environment that gives rise to this behaviour. Issues of context and cultures of behaviour recur in the literature as causes and correlatives for problem sexual behaviour amongst children (Boyd and Bromfield; Veneziano and Veneziano; Staiger, et al., 2005a).

This attention to culture, context and correlatives rather than individual aberrance is crucial for three main reasons. Firstly, attention to environmental and situational aspects acknowledges that the harmful behaviour is not innate to the young person, rather, the influences to which the child has been exposed play a role in shaping both the options and the decision-making processes that lead to the problematic behaviour. Secondly, emphasis on individual pathology attributes entire culpability to the child. This amounts to a form of blaming the victim given Lovell’s argument that these children are also victims of their environment. Thirdly, by shifting attention to the power dynamics, gender roles, and social and cultural trends there is scope to challenge the processes by which harmful behaviours are enabled and/or normalised. What all of this indicates is that a long-term reduction in the prevalence of problem sexual behaviour in children will require systemic intervention to address the contexts and consequences of structural disadvantage.

**CIRCUMSTANCES OF INDIGENOUS DISADVANTAGE AND THE NEED FOR CONTEXTUALISED RESPONSE**

To shift focus from the individual and on to the community context requires a careful analysis of the familial, social, cultural, economic, material and educational aspects of the lives of children who engage in problem sexual behaviour. The situational factors contributing to these behaviours in children are evident in Staiger’s account of the kind of background experienced by children that have been referred to the ACF for therapeutic treatment. “For these children, their early life experiences are filled with anger, confusion, sadness and fear. Their relationships with significant adults in their lives are plagued with loss, violence and most of all a sense of alienation and lack of attunement” (Staiger et al., 2005a, p. 53).

More specifically, the ACF report that children with problem sexual behaviour are more likely to also be experiencing the following:

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17 There are a number of compelling feminist arguments regarding the means by which the dominant social and cultural ideas about male sexuality are left unchallenged when rape or assault victims are blamed for the assault (see Carrington, 1997). The crucial point in this is that if the victim is blamed then the power structures that give rise to the assault are not only left intact, they are validated. The recent case of the 10 year-old girl in Aruken who was judged to have “probably agreed” to sex with her nine rapists is an exemplification of this.

18 Any discussion of family structures needs to be mindful that Indigenous conceptualisations of family, kinship and familial obligations differ vastly from Anglo-Australian definitions. Judy Atkinson writes that family refers not only to “blood relationships or extended kin networks” but also to relationships forged by other means where “people care for and support each other” (2002, p. ix-x). Family networks and familial responsibilities cannot be assumed to be uniform for all Indigenous peoples, and Anglo-Australian definitions of neglect and parental care need to be attuned to this.
Experiences of trauma, loss and alienation

Physical and/or sexual abuse

Witnessing incidents of family violence

Illicit drug use or alcohol abuse by parents or caregivers (Staiger et al., 2005a, pp. 22-23)

These aspects are repeatedly cited as precursors and correlatives to problem sexual behaviours in children. By casting these factors against what we know of the situation in certain Indigenous communities it becomes apparent that not only are these precursors and correlatives evident, they are often characteristic of life in some communities. Attention to these “conditions” and the cyclical dynamism by which they are perpetuated offers a means of addressing and destabilising the culture whereby aggression and harmful sexual behaviours are now normalised. In this sense the proposed response to problem sexual behaviour amongst children in Indigenous communities is less about focusing on individual behaviour, and more about addressing the contextual factors of systemic disadvantage that constitute risk pathways to problem sexual behaviours.

This is a move that fits with the current thinking on addressing violence and child sexual abuse in Indigenous communities. The importance of addressing contextual factors in response to violence and child sexual abuse is now broadly agreed within the literature with an increasing recognition that “programs focused solely on the individual seem destined to fail if they do not take into account community context” (Reppucci et al., 1999, p. 411, qtd. in Stanley et al., 2003, p. 4). As Chris Cunneen and Terry Libesman write “[a]s long as the problem is viewed as the problem of an individual, it may be that little progress will be made towards preventing child abuse and neglect in Indigenous communities” (2002, qtd. in Stanley et al., 2003, p. 16). “It is contended that the abuse and neglect of Indigenous children needs to be understood within a framework that acknowledges the contribution of multiple societal, community, family and individual factors” (Stanley et al., 2003 p. 14).
RISK FACTORS AND CORRELATIVES TO PROBLEM SEXUAL BEHAVIOUR IN CHILDHOOD

A number of scholars stress the importance of understanding problem sexual behaviour in the context of early life and family experiences" (Lovell, 2002; Morrison, 1999; Staiger et.al 2005a; Araji, 1997). Whilst there appears to be a strong body of scholarship that supports this emphasis on childhood experiences, it should also be said that identifying the circumstances of children presenting with problematic sexual behaviours and then extrapolating retroactively from that to reified notions of childhood trauma as unequivocally causal is methodologically risky. Not all victims of childhood trauma go on to engage in problem sexual behaviour. Any identification of perceived pathways needs to be seen as contingent to individual circumstances, given that as Vimpani et al., (2002) argue “risk does not equate to destiny” (p. 26), and as Hatch points out, “identification of specific predictive, or risk factors still proves to be a challenge” (2005, p. 11).

Notwithstanding, studies on the circumstances of children and young people engaging in problem sexual behaviours consistently reveal a number of commonalities and as such they point to possible risk pathways. The NSPCC study by Lovell reveals that the majority of children and adolescents presenting with problematic sexual behaviours are adolescent males whose lives are characterised by social isolation, poor social skills, inadequate support and supervision, poor academic performance, poor behaviour at school, and truancy (Lovell, 2002). Lovell’s emphasis on contextual dysfunction echoes the arguments made by Veneziano and Veneziano who suggest that in addition to sexual abuse “factors such as family instability, disorganisation, and violence have been found to be frequent among youths who engage in sexually abusive behaviour” (p. 250). Clinical research from the U.K. further supports this, with reports from the NSPCC that children under ten years of age referred for their problem sexual behaviour were described as having “particularly troubled backgrounds with a history of physical and sexual abuse, substance misuse, emotional victimisation or abandonment, and . . . high rate[s] of psychiatric, learning or medical problems (Cavanagh Johnson, 1998; Lane with Lobanov-Rotovsky, 1997, qtd in Lovell 2002. p. 4).

Lovell (2002) confirms that young people with learning difficulties are over-represented amongst those referred to the NSPCC for problem sexual behaviour, and the majority of this cohort have been subjected to physical or sexual abuse, or neglect.19 Veneziano and Veneziano also contend that physical and sexual abuse and neglect result in a variety of negative outcomes for adolescents, one of which is sexual perpetration:

EFearly developmental trauma and familial dysfunction appear to be more common and severe in the histories of youths with sexual behaviour problems than in those of adult sex offenders. (Hunter and Becker, 1994, qtd. in Veneziano and Veneziano, p. 250)

19 Statistics from American studies on very young sexual perpetrators suggest that between 25 per cent and 50 per cent had been victims of sexual abuse. (Cavanagh Johnson, 1998, and Becker and Hunter, 1997. qtd. in Veneziano and Veneziano, p. 249-250).
Scholars and clinicians repeatedly cite prior traumatisation as a risk factor to youthful sexual perpetration. Dr Michael Gliksman, clinical senior lecturer at Sydney University, said that in his experience, children younger than eight and a half years who abused other children were “acting out what they are being taught (by someone). At that age they can’t possibly know the full implications of what they are doing” (qtd. in Dalton, 1999). Child protection specialist Professor Freda Briggs agrees:

> When a child abuses others, enquiries should be made as to how the abuser learned what to do. It is possible that the behaviour was learned from personal experience (as a victim) or from pornography. When a female child is involved in sexual behaviour with older boys, it is sometimes found that she initiates the sexual behaviour, having learned it from being sexually abused herself. (Briggs, 1989, p. 7)

Briggs writes that children who repeatedly exhibit sexualised behaviours toward other children, dolls, and adults are often victims of long-term abuse; “the child has been taught to please the abuser in this way” (p. 5). According to Briggs there are a number of additional behaviours that may be displayed by child victims of sexual abuse. These include attention seeking behaviour, frequent truancy, blatant stealing, self-harm, alcoholism, drug abuse, prostitution and suicidal behaviour” (4).

**COMPROMISED DEVELOPMENTAL OUTCOMES FOR CHILDREN**

Lending weight to both the literature’s emphasis on the causal function of situational factors and the arguments for response at a systemic rather than an individual level, a number of Australian studies of risk pathways to criminal behaviour indicate the importance of acknowledging the effects borne by environmental factors during formative years. In a research paper for the Australian Institute of Family Studies, Vimpani et al., (2002) work very closely with The National Crime Prevention study of 1999 to emphasise the importance of the social environment in determining the overall wellbeing and developmental health of the child.

In recent years there has been a resurgence of interest in research on childhood development due partly to concerns about “deteriorating indices” of childhood adjustment to changes in society and family, but due also to an increasing recognition that socio-economic inequity in the early years of life impacts adversely on developmental pathways, particularly with regards to the effects of stress, poor parenting and poor nutrition (Vimpani et al., 2002). Research from the United Kingdom also indicates the degree to which life outcomes are contingent on early experiences. Keating and Hertzman (qtd. in Vimpani et.al., 2002, p. 18) coined the term “developmental health and wellbeing” to describe the developing human organism’s response to experiences and environmental circumstances. They contend that the “physical and mental health, wellbeing, coping and competence of human populations arise in large part as a function of the overall quality of the social environment. (Vimpani et al., 2002, p. 3)
From this, Vimpani et al., (2002) claim “many of the problems of adult mental health, addictive behaviour and crime have their roots in the experiences and environments encountered during early childhood, the most rapid period of human development” (p. 14). Further, they maintain that longitudinal studies undertaken in the US reveal that “low levels of ‘attachment’ or a lack of connection to family and school are serious risk factors for many health outcomes in adolescents (for example, emotional distress, suicidal behaviour, violence and substance abuse)” (p. 18).

Both the NCP study and the work by Vimpani et al., are concerned with the environmental factors that affect childhood development in the broader community rather than Indigenous communities specifically. This work does, however, demonstrate that the greatest environmental risks to compromised developmental outcomes for children are the same as those listed elsewhere in this report as of overwhelming concern due to their prevalence in certain Indigenous communities.

It is crucial that consideration of the contemporary specificities of childhood development in Indigenous communities be contextualised according to the complexities of Indigenous customary child rearing and socialisation practices. These practices and processes cannot be assumed to be uniform across all Indigenous communities, and nor can these be considered to have remained static over time. Notwithstanding, the contemporary circumstances for Indigenous children have been shaped by practices, processes and beliefs that differ from those that have held in broader Australian society.

The anthropological literature on this is limited, yet the work of Annette Hamilton (1981) and Coombs et al., (1983) details specific empirical studies of childhood socialisation in select remote Indigenous communities. The findings of these now dated studies cannot be applied nationally, nor mapped unproblematically onto contemporary Indigenous contexts. Moreover, directing attention to these customary child-rearing practices is not to suggest that Indigenous children are always and necessarily guaranteed the familial care required to ensure positive developmental outcomes. Awareness of these customary and historical contexts of child socialisation and the varying degrees to which these may still inform contemporary practices in some contexts is nonetheless important.

The literature highlights a range of relevant issues in terms of gendered child rearing practices, the importance of pre-adolescence in the assumption of adult gendered roles, Indigenous learning principles, and processes for modelling appropriate behaviours. Contextually specific and nuanced understandings of child socialisation practices are a necessary component in understanding the contemporary challenges faced by children in certain Indigenous communities. The following discussion of “risk factors” to compromised developmental outcomes for children does not imply a homogenous or Eurocentric benchmark for child socialisation and childhood experience.

21 Other studies have linked low levels of attachment with the development of adult sexual offending behaviour (Smallbone and Dadds, 1998, qtd. in Hatch, p. 3).
RISK PATHWAYS TO JUVENILE OFFENDING

Developmental criminology posits that there are a number of risk factors that increase the likelihood of offending when present at specific developmental stages of childhood. A recent longitudinal study of 41,700 Queensland children indicates that of the risk factors to offending behaviour “none are as consistent as the detrimental effect of child abuse and neglect” (Stewart et al., 2002, p. 1). It is important to note, however, that the findings of this study clearly indicate that not all maltreated children go on to offend. There are certain factors associated with child maltreatment that appear to increase the chances of offending and determine whether the offending behaviour is likely to be life-course-persistent or evident only in adolescence.

Of the 41,700 Queensland children born in 1983 Indigenous children were over-represented in both the child protection data and the juvenile justice data. Maltreated Indigenous children were found to be four times more likely to offend than non-Indigenous children. This variance can be explained, in part, by considering the vastly different experiences of child maltreatment for Indigenous and non-Indigenous children. Notifications are more likely to be substantiated for Indigenous children, and there is a greater likelihood that Indigenous children will be the subject of repeat notifications (AIHW, 2006). Maltreatment of Indigenous children is also more likely to persist into adolescence and there is a greater likelihood that these children will be placed in out-of-home care (Stewart et al., 2002). These differences reveal more than the disproportionate extent to which Indigenous children suffer maltreatment: each of these variables are identified as predictors of the likelihood of offending behaviour in childhood and adolescence.

This Queensland study is important in that it contributes to the body of knowledge on the causal link between maltreatment in childhood and the early commission of offences. These findings are particularly salient in terms of Indigenous children, however, in that both the prevalence and the particularities of child maltreatment of Indigenous children demonstrate increased risk pathways to juvenile offending. Moreover, and more positively, this report points to opportunities to reduce the over-representation of Indigenous juveniles in the criminal justice system by preventing or lessening maltreatment, thereby interrupting the causal pathways to youthful offending.

SELF-REPORTED CONCERNS OF AUSTRALIAN CHILDREN

Importantly though, it is not just health practitioners, child development specialists and criminologists who identify specific risk factors as cause for concern. Often without a voice in the discourses that concern them most, Australian children and young people have an important role to play in conveying what they regard to be issues of concern. Mission Australia’s (2007) annual survey of Australian young people aged 11-24 years provides one of the most representative longitudinal data sets for both the self-reported issues of concern for young people, and where they turn for help if they experience personal problems.22

22 Of the 29,000 children and young people who responded to the 2007 Mission Australia survey nearly 1,700 were Indigenous. This total data set comprised residents from every state and territory, capturing responses from those living in capital and non-capital cities. In 2007 the multi-modal online and paper based delivery of the simple 12 question survey aimed to attain a broadly representative data set whilst also going some way toward mitigating the low response rate caused by compromised literacy in some young people. In all, the broad based survey and its six-year longitudinal data set offer a valid source for understanding the self-reported concerns of young Australians.
Body image, family conflict and coping with stress are the top three concerns for the broadest Australian sample. Indigenous respondents identified body image, alcohol and family conflict as their major issues of concern. Indigenous children were far less likely to report difficulties in coping with stress than their non-Indigenous counterparts. Instead, over a third of Indigenous children reported alcohol as one of their major concerns (Mission Australia, 2007). Moreover, the figures on Indigenous children who are concerned about alcohol remain high even in the sample’s youngest age group. Nearly a third of the 11-14 year-old Indigenous children surveyed indicated they considered alcohol to be a significant concern (Mission Australia, 2007).

Family conflict is a major concern for both Indigenous and non-Indigenous Australians, yet both groups overwhelmingly reported that family relationships topped the list of the things they most valued (Mission Australia, 2007). The role family play in young people’s lives is complex as it is not only a source of stress but also a major source of support. The top three sources of advice and support for Indigenous and non-Indigenous respondents were identical; friends, parents and relative/family friend. Although the sources of advice are the same for Indigenous and non-Indigenous children, Indigenous children rely on these sources proportionately less as they are more than twice as likely to seek assistance from a community agency than their non-Indigenous peers (Mission Australia, 2007). This information is instructive, as are the data on the kinds of issues about which Indigenous children are likely to require additional information.

When asked whether they had adequate information on the issues that were of concern to them Indigenous respondents most commonly indicated that they would like more information on the following: (listed in order of frequency) sexuality and sex education; alcohol and drugs; depression; suicide and self harm; school and study; sexual abuse and family conflict (Mission Australia, 2007). These findings should not be interpreted as suggesting that Indigenous youth currently access advice from community agencies on sexuality, alcohol, drugs, etc. Rather, the survey findings point to both a service delivery need and opportunity. By virtue of the fact that they are twice as likely to access community agency advice than their non-Indigenous peers the crucial information gaps identified by Indigenous respondents are compelling for those interested in service delivery reform. This is all the more so given that each of the issues Indigenous youth have identified as service delivery needs are listed as risk factors to compromised developmental outcomes, pathways to crime, and problem sexual behaviour.

The finding that family conflicts are a primary source of concern for Indigenous children is also borne out in data from Kids Help Line.23 The three major reasons that children seek support from Kids Help Line are for assistance regarding family relationships and peer relationships, and assistance in moderating their own behaviour (Kids Help Line, 2006). These are the top concerns for both Indigenous and non-Indigenous children, although the proportions differ such that for Indigenous children family relationships, self-behaviour, and peer relationships are of primary concern, whereas for non-Indigenous children it is issues associated with family, peers and self-behaviour that prompt contact with Kids Help Line.

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23 In 2006 Kids Help Line registered a total of 539 counselling sessions with Indigenous children and young people. This represents a 26 per cent increase in demand since 2005. This increase may not be solely attributable to increased need in Indigenous children. In 2006 Kids Help Line promoted their services at Croc Festivals in parts of remote Australia in an effort to engage Indigenous children in need. This increased demand may reflect a need that has been unmet previously due to a lack of awareness amongst Indigenous children of the services offered by Kids Help Line. An earlier information sheet with data on callers from Indigenous backgrounds indicates that data regarding ethnicity are recorded for only approximately 25 per cent of calls (Kids Help Line, 2005, p. 1). This indicates the need for counselling services for Indigenous children (already disproportionate to population) is likely to be much higher than Kids Help Line figures suggest.
In recent years there has been an alarming upward trend in the number of children from all backgrounds seeking assistance in regulating their own behaviours. Kids Help Line report that this is now the third most common concern for all children, and the second most common concern for Indigenous children, ahead of relationships with their peers. "The nature of concerns about managing emotional and behavioural responses are varied but include anger management, violent behaviour, self-injurious behaviour and coping with traumatic experiences" (Kids Help Line, 2006, p. 13).

Grouped together these behaviours indicate that children and young people are experiencing difficulties in coping with their circumstances and in effectively navigating complex familial and developmental pathways. Whilst they look to their family for advice and support it is very often family conflict that is the source of their concern in the first place. Kids Help Line report that of the 57,000 counselling sessions conducted in 2006 more than 21,000 of these were with children who were significantly distressed and/or ‘at risk’ (Kids Help Line, 2006, p. 11). The findings of these recent national surveys of children demonstrate the urgent need for increased attention to both risk pathways and protective factors for children.

THE IMPORTANCE OF MAINTAINING PROTECTIVE PATHWAYS

In general, factors identified to have a protective function include the existence of “secure relationships in multiple settings (school, home, peers), the adoption of clear health and social values, and the acquisition of good interpersonal skills” (Mission Australia, 2007, p. 19). Mission Australia data and the Kids Help Line statistics indicate that the familial connectedness required as a protective factor is undermined for many Australian children, an argument supported by the ACF. Analysing the national YouthScan survey of children between the ages of 10 and 17, Tucci et al., (2006) stress the importance of children being exposed to appropriate behaviour modelling and sufficient protective measures by adult family members. Consistent with the findings of the Mission Australia survey respondents to the YouthScan questionnaire idolise those close to them rather than celebrities, and it is from their parents and friends that they will seek advice about the world, their relationships, their bodies, and so on.24 Once more, this reliance on familial role modelling and support is counter-pointed by children’s claims that they are stressed, growing up too quickly, and seeking more time with their families.

More than ever before children are exposed to the adult world. Yet, many are poorly equipped to deal with it. This study reveals that many children lack confidence in themselves and feel that they are not doing well enough. They are experiencing emotional turmoil with the incidence of children feeling worried, sad and angry on a regular basis concerningly high. (Tucci et al., 2006, p. 19)

The demand on Kids Help Line for counselling on family relationships, and the data from both Mission Australia and YouthScan all point to children’s continued faith in familial support, despite a decrease in the provision of such. All indications are that children themselves are reporting that their primary protective factor of familial connectedness is eroding.

24 Indigenous and non-Indigenous children and young people report equally that the people they most admire are family (30.3%), friends (14.1%), with entertainers (7.9%) and sports figures (7.4%) ranked third and fourth respectively (Mission Australia, 2007).
THE STRUCTURAL FACTORS OF INDIGENOUS DISADVANTAGE AND DYSFUNCTION THAT CONSTITUTE RISK PATHWAYS TO PROBLEM SEXUAL BEHAVIOUR AND CHILD SEXUAL EXPLOITATION

The “structural disadvantage” in Australian Indigenous communities is profound. The Northern Territory Board of Inquiry into the Protection of Aboriginal Children from Sexual Abuse published its findings in April 2007, stating that “sexual abuse of Aboriginal children is common, widespread and grossly under-reported” and that “everything we have learned. . . convines us that . . . [this is symptomatic of] a breakdown of Aboriginal culture and society” (Wild and Anderson, 2007, p. 14). The “historical, present and continuing social dysfunction” identified by the NT Inquiry (p.14) is of concern to Indigenous leaders also. In her 1999 report Professor Boni Robertson writes that “[t]he dire situation of Indigenous children must be seen as inextricably linked to extreme poverty, the breakdown of traditional family obligations and the immeasurable loss of connection to the land and cultural fragmentation” (p. 186). Noel Pearson announced publicly in 2000 that “the nature and extent of our problems are horrendous. . . suffice to say that our society is in a terrible state of dysfunction”.

The American scholar Garbarino (1995) writes of the “toxicity” of social environments that may lead to “an increased potential for abusive or neglectful behaviour in families, or higher incidence of other social ills” (paraphrased by Stanley et al., 2003, p. 8). Factors of such toxicity might include high crime rates, poverty, unemployment, poor housing, and an under resourced education system. This notion has been taken up by Australian researchers as having some application in terms of conceptualising situations of increased risk pathways to crime. The National Crime Prevention report on violence in Indigenous communities identifies the deleterious effects that social dysfunction has on behavioural patterns in children: “considerable research has shown an association between stressful, negative community conditions, and maladaptive coping behaviour and social dysfunction” (Stanley et al., 2003, p.8). Memmott et al., (1999, 2001) term this self-perpetuating pattern in Indigenous communities “dysfunctional community syndrome” (p. 3) and this concept has gone on to inform aspects of the Gordon Report, the report produced by the NT Inquiry, and Boni Robertson’s 1999 report:

The [Queensland] Task Force found convincing evidence to justify the label ‘dysfunctional community syndrome’ that is being applied to many Indigenous Communities. . . . there is a crisis of huge proportions. (p. 19)
There are a number of ways in which the causes for this dysfunction have been theorised. Some authors emphasise the historical factors of violence and colonial dispossession as giving rise to the state of Indigenous communities, others see alcohol, welfare dependency, or isolation as the major cause of systemic dysfunction. Memmott et al., (1999, 2001) offer a model that incorporates a broad range of factors into a system of tripartite causality. Underlying, situational and precipitating factors are the terms used to describe the three broad classifications of factors contributing to violence in Indigenous communities. Memmott’s (1999, 2001) model reflects the increasing acknowledgement that the circumstances of violence are caused by a range of interrelated factors, and that prevention or response programs need to be designed to offer a multi-faceted and systemic response:

(i) precipitating causes that most clearly trigger an episode of violent behaviour,
(ii) situational factors, that predispose violence to occur or exacerbate its likelihood, and
(iii) underlying issues that constitute a historical patterns of disruption involving Indigenous systems of law, morals, authority and punishment, and the onset of widespread social and psychological problems which are now being passed from generation to generation, (1999, 2001, p. 2)

Simplistic responses to Indigenous violence and disadvantage are tantamount to scapegoating in that they tend to isolate and blame one causal factor such as alcohol. To do so is to overlook the underlying or historical factors contributing to the excessive alcohol consumption in the first place, and to misunderstand the precipitating factors that trigger a violent episode in conjunction with a drinking binge. “Alcohol is commonly blamed for Indigenous violence, but should be more correctly viewed as an exacerbating or situational factor than a direct cause” (Memmott et al., 1999, 2001, p 2). Thus, effective response must target each layer of this interconnected causality. It is likely that a similar argument could be made regarding problem sexual behaviour in children. Pornography (as a situational factor) cannot be targeted as the only causal factor. Underlying factors of trauma and familial disruption, combined with the situational factors of overcrowded housing, poverty and pornography are exacerbated by precipitating causes such as an instance of excessive alcohol consumption.

It is of considerable concern that a number of the aspects in which Indigenous disadvantage is most notable are also recorded in the literature as risk pathways to violence, problem sexual behaviours in children and child sexual exploitation. Indigenous communities could be described as being at particular risk of violence due to the preponderance of the underlying, situational and precipitating factors of violence as they are described by Memmott et al., (1999, 2001). Overcoming Indigenous Disadvantage: Key Indicators 2007, lists headline indicators by which Indigenous disadvantage is measured and against which the Government charts progress in addressing this disadvantage (SCRGSP, 2007). Analysis of just some aspects of systemic disadvantage in Indigenous communities provides a picture of the deeply interconnected layers contributing to this increased risk.

25 Boni Robertson argues that that for violence to be addressed effectively attention must be given to addressing systemic disadvantage, including unemployment, poor health, low educational attainment, poverty, and alcohol/substance abuse (1999).
INTER-GENERATIONAL NORMALISATION OF VIOLENCE

The theory of the victim-to-offender cycle is derived from the landmark 1962 article “The Battered Child Syndrome” (Kempe, 1962). This conceptualisation of abuse as cyclical has influenced the work of researchers and clinicians for several decades but it is now broadly criticised on the basis of inconclusive data regarding the extent to which victims of abuse do go on to engage in sexually abusive behaviours. This critique is bolstered by gendered analyses of victim and offender statistics that reveal whilst the vast majority of victims of abuse are girls the largest number of offenders continue to be male.26 Were the cycle representative female offenders would vastly outnumber male (Kelly, 1996). This constitutes a point of tension in the scholarship in that whilst academics challenge the theory that prior victimisation is a guaranteed pathway to sexual offending practitioner data continues to reveal that family background and prior traumatisation are contributing risk factors to sexually abusive behaviours in both adults and children.

Although obtaining accurate data on violence in Indigenous communities remains a challenge, the available statistics indicate that violence of all types is disproportionately high in comparison to the Australian population as a whole (Memmot et al., 1999, 2001). The ubiquity and severity of violence means that the vast majority of children are likely to have been exposed to sexual violence in some way, and this is not without consequences for the next generation of children.27 Indigenous violence is seen to be “so severe that it is highly likely that another generation of Indigenous people will be scarred by this present trauma” (Stanley et al., 2003, p. 26). Findings from consultations with Indigenous and mainstream agencies responding to sexual violence reiterate this, with respondents identifying that the normalisation of violence has become intergenerational (Thorpe et al., 2004). Boni Roberston (1999) writes “[c]hildren who witness violence towards others may be at risk of replicating the violence at a later time if their social environment accepts that type of behaviour” (p.15).

Debates as to whether the victim-to-offender cycle is representative do not account for this circumstance. Arguably, the cycle does reflect the situation in Indigenous communities in that, in some instances, violence is so prevalent that there is a diminished sense that the behaviour is harmful or unlawful. With limited modelling of alternate pathways of behaviour violence is likely to go unquestioned. Dr Harry Blagg’s (1999) extensive study of adolescent violence in the Indigenous communities of Northam and Derby supports this, and Blagg concludes that acceptance of aggression as normal is a learned behaviour:

Young people in Indigenous communities both witness and are subject to violence from an early age. This routinisation and normalisation of violence as a ‘natural’ part of social interaction has damaging long-term consequences if left unchallenged. (Blagg, 1999, p. 15)

26 Contemporary theories on behavioural responses to victimisation posit that whilst girls who have been abused tend to internalise their response, boys externalise their response (aggressive behaviours, etc). This is not seen as explanatory of the disproportionate number of male sex offenders, or male offenders generally.

27 International scholarship on childhood development highlights the deleterious effects of children witnessing violence in their formative years. "Ososky (1997, p. 7) argued that the literature demonstrates a strong link between an early history of witnessing violence and later adolescent problems of delinquency and violent behaviour, accompanied by “high levels of aggression and acting out…anxiety, behaviour problems, school problems, truancy and revenge seeking.” (qtd. in Hatch, p. 4-5) Further, SNAICC’s handbook on confronting the problem of child sexual abuse underscores the cyclical damage inflicted on children who are victims of violence. “Although many of us believe our kids will always bounce back when confronted by family violence, this is just not true. Our kids are just not coping” (1991, p. 1). The ACT, NSW and Tasmania have recently expanded their definitions of the circumstances in which a child is in need of protection to include the exposure of the child to domestic violence causing harm or risk of harm (Matthews, p. 229).
Submissions to the NT Inquiry also indicated that “violence, including both physical and sexual violence, has become such an accepted behaviour in Aboriginal communities that it is now an integral part of children’s socialisation and this acceptance has now been normalised and crossed generations” (p. 199). Concerns about this normalisation are echoed in reports to the NSW Task Force wherein sexual assault was seen as something that had to be tolerated: “A young mum. She said to me. “Well, you know, she should put up with it, you know. I had to put up with it, why can’t she?” Like it’s a rite of passage, like that’s acceptable” (p. 51). Similarly, the recent commission of inquiry into child sexual abuse conducted by the Honorable E.P. Mullighan reports that young girls on the APY lands are resigned to abuse as inevitable. “[G]irls accept that they will be sexually abused . . . . [t]hey simply believe that resistance is futile” (p. xiii).

Indigenous scholar Professor Judy Atkinson argues that violent behaviour becomes the norm in families where there have been cumulative intergenerational impacts of trauma on trauma on trauma, expressing themselves in present generations as violence on self and others (qtd. in Memmott et al., 1999, 2001). Empirical research conducted by Indigenous scholar Dr Kyllie Cripps also reveals the “vicious cycle” created by childhood exposure to violence (2004, p. 111). The 1999 National Crime Prevention study of violence in Indigenous communities also expressed concern about the impacts of violence as a learned behaviour:

The witnessing and experiencing of violence from a young age was shown to manifest later in life as being strongly associated with both a desensitisation towards violence and a predisposition towards becoming violent in one’s own relationships. (Memmott et al., 1999, 2001 p. 44)

The severity of this context of normalised violence underscores the necessity for sustained research and enquiry into the occurrence of childhood sexual activity both in the broader Australian context and in Indigenous communities specifically. Jefferson writes that despite the fact that rates of sexual violence are “shockingly high” in Indigenous communities, and rates of crime in rural Australia have increased considerably, family and domestic violence in rural settings has been a neglected area of both criminological and sociological research (Jefferson, 2006).

SILENCE, FEAR AND SHAME: IMPEDIMENTS TO ADDRESSING VIOLENCE

The desensitisation to violence of which Homel (1999) writes is but one aspect of the pervasive silence around issues of family violence and child sexual assault. The literature on domestic violence and sexual assault indicates that disclosure is always harrowing for victims. The complex interplay of psychological responses, fears for personal safety, and the trauma of recounting events in clinical and judicial settings are major impediments to reporting. This is the case for all victims of sexual assault. The Women’s Safety Survey reported that only 15 percent of women who had experienced a sexual assault within the last 12 months elected to report this to police. (ABS, 1996).

For Indigenous victims the challenges are even greater. The Mullighan inquiry (2008) identified that disclosure is often prevented by fear, intimidation, and the risk of inter-familial retribution (p. 22). Non-disclosure is also attributed to fears about families being torn apart. An Aboriginal woman with extensive experience working on the APY lands reported:
Often it is not disclosed because family members do not want to see the family destroyed by it and they keep it inside and protect it in a way. Also they are concerned as to what family members will do if they confront the perpetrator. (qtd. in Mullighan, 2008, p. 29)

Shame is also reported as a contributing factor to the incidence of non-disclosure. The Mullighan inquiry heard that “children become adept at hiding sexual abuse” in order to avoid the shame associated with revelation (2008, p. 38). The inquiry also found that in some cases the fear of children being removed prevents reporting. These fears all stem from concern about the consequences of the medical, law-enforcement, legal and community response to disclosure. Divergent views were also presented to the inquiry, with some suggesting that the lack of response is the problem. Some Anangu believe that disclosure is pointless as the services on the APY lands are insufficient to provide the necessary response (p. 38). Certain health professionals in the region support this view, suggesting that mandatory reports are often not met with the necessary response. According to one health professional:

You would like to think that the report is actually going to change something for the child, but it often doesn’t seem to make a great deal of difference at all. (qtd. in Mullighan, 2008, p. 179)

The factors contributing to a silence around family violence and child sexual assault are complex. The Mullighan inquiry (2008) makes a number of recommendations regarding improved health, child protection, and law enforcement responses to disclosures and mandatory reports.

CHILD SEXUAL ABUSE, PHYSICAL ABUSE AND NEGLECT

Dr Sue Gordon is very clear in articulating the scale of the problem when she writes “the statistics paint a frightening picture of what could only be termed an ‘epidemic’ of family violence and child abuse in Aboriginal communities” (Gordon et al., 2002, p. xxiii). Indigenous scholar Professor Marcia Langton agrees, indicating that the “dreadful plagues” of domestic violence and sexual assault of women and children are constantly reported in the media, but “no action ensues. There is little real understanding of how the violent abuse by Aboriginal men of women and children has reached such stomach-churning ferocity and regularity” (Langton, 2007, p. 11). In an indictment of policy inefficacies Langton says “Aboriginal women have been screaming for police help on this issue for 30 years” (qtd. in Rothwell, 2006, p.17).

Accurate statistics on the prevalence of violence in Indigenous communities, and accurate numbers reflecting the prevalence of child sexual abuse and child neglect are difficult to obtain. Although imperfect, available data demonstrates Gordon’s assessment of the situation as “a crisis of frightening magnitude” (qtd. in Crime and Misconduct Commission, 2004, p. 4). Indigenous children are at much greater risk of child abuse and neglect with child protection data indicating that Indigenous children are nearly five times more likely to be the subject of a substantiation for child abuse or neglect than non-Indigenous children (AIHW 2006, p. 26). Furthermore, the number of Indigenous children in out-of-home-care is over seven times that of non-Indigenous children (AIHW 2006, p. 57).28

28 Under-reporting and failures in recording Indigenous status in some jurisdictions mean that actual numbers are likely to be much higher than this.
One of the known correlates to problem sexual behaviour in children is an unstable home environment. The fact that Indigenous children are over seven times more likely to be placed in out-of-home care is of concern not only because this points to the severity of neglect or abuse in the family home, but also because the out-of-home placement may, in itself, contribute to the instability of the child’s circumstances.

In all states and territories legislation or policy dictates that child protection agencies work in accordance with the Aboriginal Child Placement Principle (ACPP), whereby Indigenous children requiring out-of-home care be placed within their own culture and community where possible. According to the National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children (NISATSIC) “the single most significant change affecting welfare practice since the 1970s has been the acceptance of the Aboriginal Child Placement Principle” (HREOC, 1997, p. 379). Although the legislation and protocols differ for each state and territory, the principle prescribes a preferred order of placement for Indigenous children requiring out-of-home care. In general, the preferred order of placement is that children should reside with members of their own, or extended family, with members of their community, or with Aboriginal carers in the vicinity of the child’s usual home (in descending order of preference). Only where none of these placements are possible should the child be placed in the care of non-Aboriginal people, but in this case the child’s extended family, and/or an accredited Aboriginal organisation must be consulted. Thus, although the ACPP has been implemented in all states and territories there are many instances in which Indigenous children are placed under the guardianship of non-Indigenous carers as a last resort.

In her recent essay on adopting a human rights approach to Indigenous children’s wellbeing Terri Libesman points out that there are several existing impediments to a full implementation of the ACPP. Whilst all jurisdictions have implemented the ACPP in legislation, Libesman writes that, in most jurisdictions, the principle is subject to “the best interests of the child or similar guiding principles” (2008, p. 341). What this means is that effective placement is dependent on the full participation of Indigenous communities in decision making, yet whilst the legislation in most jurisdictions provides for consultation with Indigenous communities there are no uniform guidelines as to the process of consultation, or the influence that this consultation will have on final decisions made (p. 341). Libesman identifies a further complication in the renewed child protection commitment to early placement and stability of placement. For Libesman, this hits on competing child protection agendas regarding the benefits of early and permanent placement on the one hand and, advocacy for family re-unification on the other. SNAICC have expressed concerns that permanency of placement might prevent the possibility of re-unification with family and, in cases where an Indigenous child is placed with a non-Indigenous carer, result in the loss of culture and identity. Above all, Libesman clearly identifies that legislative initiatives such as the ACPP have been conceived in the best interests of Indigenous children, but “they do not develop an Indigenous culture and identity.”

29 Failures in effective consultation are evident in, for example, the Victorian Aboriginal Child Care Agency’s (VACCA) report that they are often consulted very late in the process, despite Victorian ACPP protocol stipulating that an accredited Aboriginal organisation must be consulted if an Indigenous child is to be placed with a non-Indigenous carer. VACCA reported to the NISATSIC that there have been instances where a child has been in substitute care for more than two years before VACCA are consulted (HREOC, NISATSIC p. 385).

20 "Whilst child protection interventions must place child safety as paramount for Aboriginal or Torres Strait Islander children safety must include their cultural safety" Pocock, J. (2008) SNAICC Service Development, Cultural Respect and Service Access Policy. p. 4. Further, the United Nations Convention on the Rights of the Child, 1989, to which Australia is a signatory, refers to the importance of preserving the cultural background of Indigenous children. Article 30 states: “In those States in which ethnic, religious or linguistic minorities or persons of indigenous origin exist, a child belonging to such a minority or who is indigenous shall not be denied the right, in community with other members of his or her group, to enjoy his or her own culture, to profess and practice his or her own religion, or to use his or her own language” (qtd. in Libesman, p. 334-335).
pathway for participating in the care and protection of their children. Rather, they provide an avenue for Indigenous participation in the mainstream departmental process” (p. 343). This point is also made clear in the NISATSIC report *Bringing Them Home*. “Recognition of the ACPP has marked a great shift in child welfare practice. Indigenous people, however, cannot control its implementation. They are not assisted or permitted to determine the destiny of their children” (p. 389).

It is an oft-reported fact that the NISATSIC didn’t receive a single submission from any state or territory indicating satisfaction with child welfare services. At the time of publication, NISATSIC called on governments to implement a number of recommendations designed to facilitate increased Indigenous family and community control over Indigenous children’s welfare. Since the publication of the NISATSIC report in 1997 there have been a number of prominent critiques of the means by which state and territory child protection systems fail Indigenous children.21 Yet during this period all states and territories have also reviewed their child welfare legislation, including a revision of child protection systems pertaining specifically to Indigenous children (Libesman, p. 339). Libesman argues that whilst these legislative reforms are important, insomuch as they foster greater Indigenous involvement in child welfare decisions, she identifies the need for a simultaneous investment in social and economic reforms to redress the context of endemic poverty (p. 343).

The profound context of poverty and dysfunction is also seen by some as undermining Indigenous capacity to respond to the welfare of Indigenous children. Some Indigenous respondents to both the Mullighan (2008) and Gordon (2002) inquiries expressed concerns about the ACPP in that endemic dysfunction means there is a chance that children will be placed in circumstances where they are subjected to repeat victimisation:

*Aboriginal communities expressed concern to the Inquiry during consultations that the Aboriginal Child Placement Principles were not appropriate and cited examples where the application of principles had allegedly resulted in children being placed in situations of risk. (Gordon et al., 2002, p. 152)*

In such circumstances the child would be exposed to compounding risks of engaging in problem sexual behaviour in that their experiences of childhood trauma (abuse and/or neglect) would be exacerbated if their new home environment were unstable, temporary or replete with risks of secondary abuse or neglect. In addition to this Staiger et al., (2005b) indicate that inadequate case management is a contributing factor to problem sexual behaviour in children. Recent media reports have highlighted the devastating consequences when child protection authorities experience difficulty in placing and monitoring Indigenous children in adequate and permanent out-of-home care. In January 2008 *The Australian* (2007) reported that Cairns medical staff attempting to locate a 13-year-old Indigenous girl to administer treatment for sexually transmitted diseases were informed that the Department of Child Safety were “unaware” that the child was under the care of DCS. The “profoundly deaf” child, who is described to be suffering from foetal alcohol syndrome, cerebral palsy and was recently the victim of a multiple rape,

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is recorded as exhibiting abusive and sexualised behaviours. The child had been placed in 43 different foster care homes since coming under the care of the Department of Child Protection in November 2003 (Koch, 2008b).

Prior abuse, poor case management, and poor assessment tools are contributing factors to problem sexual behaviour, as exemplified in the story of an abused child who allegedly raped a child at nine years of age. In January 2008 Tony Koch reported “an Aboriginal boy, who turns 10 today and is under investigation for allegedly raping a six-year-old boy last month, had been left in the Cape York community of Kowanyama despite the Department of Child Safety knowing he was an abuse victim who had gone on to abuse others. In a graphic example of the cycle of sexual abuse in Aboriginal communities, the department was told two years ago the boy was deeply troubled and had sexually penetrated a four-year-old boy” (Koch, 2008c). These examples point to a need for more comprehensive risk assessments of the circumstances faced by some Indigenous children.

FAMILY AND COMMUNITY VIOLENCE

Witnessing family violence is cited as a risk factor to children engaging in problem sexual behaviour. Judy Atkinson’s work draws an explicit link between children witnessing various forms of violence and then enacting forms of violence themselves:

> Our women repeatedly ask that we find ways of helping heal children who have witnessed or experienced violence in the home. Grandmothers, in particular, are despairing for their grandchildren, who are being expelled from schools at increasing levels for violent behaviours. In fact the child’s violence is an expression of traumatisation, a cry of distress at what they have seen and experienced in the context of intergenerational trauma. (Atkinson, 1996, p. 7)

Although there are no precise figures indicating the prevalence of violence in Indigenous communities the available data indicates the severity of the situation. Data on deaths from homicide and hospitalisations from assault point to the excessive levels of family and community violence in Indigenous communities. The Steering Committee for the Review of Government Service Provision reported that in 2004-2005 in the four jurisdictions for which data are available, Indigenous people were hospitalised for assault at 17.3 times the rate of non-Indigenous people. The rates are much higher for Indigenous women who, for the same period, were 44.3 times more likely to be hospitalised for assault than non-Indigenous females. Indigenous people are over-represented in the data for both homicide victims and offenders. In 2004-2005 Indigenous people accounted for 15.3 per cent of homicide victims nationally, and 16.3 per cent of the national data for homicide offenders. Most Indigenous homicides tend to involve family members and, in comparison with non-Indigenous homicides, it is much more likely that both the victim and offender had consumed alcohol at the time of the homicide incident (SCRGSP, 2007).

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32 For a fuller discussion of the cyclical dynamism of witnessing violence refer to pages 21-23 of this review.
Several scholars have indicated the prolific forms of violence in some Indigenous communities. Memmott et al (1999, 2001) list the following as possible forms of violence in Indigenous communities; spouse assault, homicide, rape and sexual assault, child violence, suicide, self-injury, one-on-one adult fighting (same gender), inter group violence, psychological violence, and economic abuse. The empirical work conducted by Cripps also points to the need for a broader conceptualisation of the term “family violence” to encapsulate incidents of “jealousy, hate, name calling, alcohol violence, putting people down, money spent on grog, incest, no food in house, swearing, stabbing, parents shouting at children, accusations of having another man/woman, emotional blackmail (threatening to kill themselves), gambling” (2004, p. 119). The terms family violence and community violence are inadequate in representing not only the myriad forms of violence in Indigenous communities, but also the inter-generational legacy of exposure to violence.

FAMILIAL DISRUPTION – LOSS OF ROLE MODELS – ADULT RESPONSIBILITY AT A YOUNG AGE

Another of the commonly cited correlatives to problem sexual behaviour in children is an unstable home environment characterised by loss or familial disruption. Profound lack of parental supervision and circumstances where young children are required to assume parental or caregiver responsibilities for younger siblings are also risk factors to problem sexual behaviour in children. These factors are identified by Indigenous health and welfare agencies as characteristic of life for many Indigenous children.

In 2004 Curtin University and The Australian Research Alliance for Children and Youth (ARACY) commissioned Secretariat National Aboriginal and Islander Child Care (SNAICC) to produce a report detailing research priorities for children and young people in Indigenous communities. SNAICC surveyed stakeholders from Indigenous organisations specialising in child, youth or family welfare. Although the response rate was alarmingly low (8 per cent) the findings point to concerns about familial dysfunction and the normalisation of aggression that results from children being repeatedly exposed to violence (SNAICC, 2004). Respondents cite the need for research into the inter-generational impact of trauma and violence particularly given fears about the “acculturation and desensitisation to violence” and “lack of supervision” for children between of 0 and 5 years (p. 18). The “acculturation” to violence results in children “acting out” with “inappropriate expression[s] of sexuality,”33 early pregnancies, aggressive behaviours, “engagement in at risk behaviours” and “a lack of knowledge about sexually transmitted diseases” (p. 18). Elders repeatedly told the NT Inquiry that the anarchy and sexual activity that characterises the “younger generations” is a “major contributing factor to children being vulnerable to sexual abuse and also perpetrating sexual abuse” (p. 72).

33 This is exemplified by Indigenous PhD researcher Gary Lee’s report that whilst visiting a remote island community he encountered an eight-year-old boy “whose behaviour was totally sexualised. He was behaving more like a teenager or a young adult. He didn’t know how else to relate to an adult” (qtd. in Overington, 2006b).
Concerns about these behaviours are compounded by the fact that some respondents to the 2004 SNAICC survey reported “[m]any Indigenous young people are given adult responsibilities at this age [from 13 years] that could include caring for younger siblings” (p. 16). Respondents have indicated that these issues combine to create a situation whereby young people find themselves responsible for ensuring their own survival by whatever means necessary. This research demonstrates the intersection of circumstances that subject Indigenous children to an increased risk of becoming victims of sexual exploitation:

In the 13 year plus age group, young people are presenting as homeless and seeking support from services due to reasons such a family violence, sexual abuse and other forms of abuse, family and relationship breakdown and poverty. Responses indicate there are very little options for young people who usually end up going back to the situation from which they escaped, or “couch surfing”, staying with friends or extended family members leading to ongoing transience and homelessness, criminal activity and other anti-social behaviours for the sake of survival. (SNAICC, 2004, p. 23)

These SNAICC findings are supported by Blagg’s comparative studies of adolescents in regional and remote areas in Western Australian Indigenous communities. Blagg concludes that Indigenous children are at greater risk of “early initiation into violence, alcohol use, sexual activity, sexual violence and crime” (Blagg, 1999, p. 9). Moreover, in the Indigenous context “adolescence brings virtual autonomy to experiment. Tragically, for many Indigenous children, childhood and adolescence are not a period in which they are safely protected from the dangers of the adult world” (Blagg, 1999, p. 9). Queensland Department of Communities reported similar concerns to the Crime and Misconduct Commission in 2004 suggesting that children as young as 13 months old were walking the streets at all hours of the night (p. 7). The CMC concluded that this lack of supervision “places the children in vulnerable and easily exploited situations” (p. 7).

Data from Kids Help Line confirms that Indigenous children are much more likely to experience familial disruption and loss of family role models than non-Indigenous children. Kids Help Line report that requests for assistance in dealing with grief and loss are also much more common from Indigenous children than Anglo-Australian children (Kids Help Line, 2005). Indigenous callers are three times as likely to have one parent who is deceased or absent (26 per cent) and five times more likely to have two deceased or absent parents (8 per cent) than their Anglo-Australian counterparts. “This level of disconnection from parents may explain why young Indigenous callers are much less likely to live with their parents (64% live with parents) compared with Anglo-Australian callers (84% live with parents)” (Kids Help Line, 2005, p. 1).

The responsibilities attributed Aboriginal children at this young age are in keeping with what the NT Board of Inquiry identified as part of Aboriginal culture; “despite legal definitions of childhood . . . in Aboriginal culture, post-pubescent children (from as young as 11 to 14 years) are often considered to be adults” (p. 43). It is possible that this creates cultural tensions in terms of the application of Australian law regarding child sexual abuse and child protection. Moreover, Hatch cites research that draws links between such early guardianship responsibilities and increased risks of sibling sexual abuse. “The delegation of care-taking responsibilities to older siblings has been cited as a precipitant for sibling abuse in some circumstances (Wiehe, 1997, qtd. in Hatch, p. 28). In particular, where the older sibling exhibits poor self-regulation of impulsive, antisocial behaviours, self-control theory would suggest that their capacity to moderate aggression and abuse toward a younger, more vulnerable sibling may be compromised, and they may be prone to reabuse (that sibling) time and time again” (Waite, et al., 2005, qtd. in Hatch, p. 28).
The risks associated with this lack of supervision and absence of role models during formative years are exacerbated by the poverty and homelessness described above, and by instances in which young people need to become entirely self-sufficient after escaping abusive or neglectful circumstances. It is in this context that the “criminal activity and other anti-social behaviours for the sake of survival” (SNAICC, 2004, p. 23) may encompass the provision of sexual favours in exchange for food, money, drugs, clothing, shelter, protection, affection or companionship.

HOUSEHOLD AND INDIVIDUAL INCOME

Adverse socio-economic conditions constitute yet another risk factor, with Australian research indicating that children with problem sexual behaviour are more likely to come from very low income households (Staiger et al., 2005b; Allan, 2005). The median individual income for Indigenous people is nearly half that of non-Indigenous Australians, and the complex effects of low incomes include compromised health and life expectancy, poor educational outcomes, increased substance abuse and participation in crime and violence (SCRGSP, 2007). “Increasingly, it is also being suggested that less favourable social and economic circumstances can cause anxiety, low self-esteem and social isolation, which in turn can influence health-related behaviours and health itself” (AIHW 2004 qtd. in SSCRGSP, 2007, p. 3.54). Altman and Hunter (1998) provide statistics highlighting the extent of poverty in Indigenous communities when compared with the broader Australian population (Altman and Hunter 1998, p. 244). Further, research suggests that a significant proportion of the Indigenous population lives in conditions that meet the United Nations definition of absolute poverty: “severe deprivation of basic human needs, including food, safe drinking water, sanitation facilities, health, shelter, education and information” (Harris et al., qtd. in Walter and Sagers 2007, p. 96).

Family conflict and violence regarding the spending of wages and incidents of humbugging are widely documented in Indigenous reports (Gordon et al., 2002; Robertson, 1999). In some communities there is a risk that a significant proportion of household wages are likely to be spent on drinking, gambling and cannabis, leaving little financial means to provide for food and other essential needs. In such circumstances children are at increased risk of neglect, lack of supervision, social isolation and homelessness; all documented correlates to problem sexual behaviour.

HOUSING CONDITIONS AND INFRASTRUCTURE

A number of reports maintain a link between “poor” or “overcrowded” housing conditions, and poor health outcomes for Indigenous Australians in remote areas (ABS, AIHW 2008; Gordon et al., 2002; HREOC, 2007; Wild and Anderson, 2007; ABS NATSISS, 2002; RCIADC, 1991). The adverse health and sanitary conditions that accompany poor housing conditions are well documented:

Robertson’s Queensland Task Force report contains many personal stories of this kind and the circumstances giving rise to this are seen as endemic, not particular. One young male informant is paraphrased as saying “[s]ome young people who have experienced trauma in childhood may be at risk of becoming more rebellious and more willing to take part in antisocial acts. Young people who have matured early may look for love and move into precocious sexual activity at an early age. They may then become young parents, sometimes falling into unstable relationships that founder, and the children of the next generation may become the next victims and potential victims.” (Robertson 1999)

Noel Pearson writes that passive welfare has resulted in a culture whereby some Indigenous people expect something for nothing. He writes that this culture of expectation, the grip of addiction and exploitation all result in “humbugging”; the process of badgering kin for money or goods. “Our culture of reciprocity had been a source of strength during the mean and lean times of discrimination but in . . . communities where social order has broken down receiving no longer involves reciprocity” (Pearson, 2007).
Overcrowding, poor dwelling condition and inadequate basic utilities such as facilities for washing clothes, sewerage systems or safe drinking water have all been associated with higher rates of infectious and parasitic diseases. These include skin infections and infestations, respiratory infections, eye and ear infections diarrhoeal diseases and rheumatic fever. (Menzies School of Health Research 2000 qtd. in ABS NATSISS, 2002)

The Royal Commission Into Aboriginal Deaths In Custody (RCIADC) (1991) maintained that “all sedentary communities have basic infrastructural requirements, including housing, water, waste disposal and the supply of goods and services which the community cannot supply for itself” (section 18.3). Over and above these standard requirements there are, however, culturally specific understandings as to what constitutes an adequate, or ideal dwelling. The RCIADIC points out that “housing policies in Australia have been largely shaped by non-Aboriginal assumptions about the role of living spaces, in particular, the assumption that it is a nuclear family which is the basic unit to be accommodated in a single dwelling. The design of most housing for Aboriginal people has inadequately accommodated differing cultural values including the strength of kin relationships, and different social uses of housing” (section 18.3). In this context the imposition of non-Aboriginal measures for “crowding” or “overcrowding” may well be problematic.

The internationally accepted measure for housing utilisation is the Canadian Occupancy Standard; a measure of the size and composition of the household for the purposes of determining housing assistance37 (ABS, AIHW 2008, p. 40). Utilising this standard, the 2006 census data reveals that 14 per cent of Indigenous households are overcrowded, with 27 per cent of Indigenous people living in overcrowded conditions. These rates of overcrowding vary according to the dwelling tenure type; overcrowding is more prevalent in households that are rented rather than owned or mortgaged. Yet rates also vary across jurisdictions; the Northern Territory has the highest rate of overcrowding of any state or territory, with 38 per cent of Indigenous households experiencing overcrowding.

Overcrowding is just one measure of the housing stress experienced by some Indigenous people. Poor housing and a lack of housing also point to compromised levels of health, safety, and wellbeing. The 2006 ABS Community Housing and Infrastructure Needs Survey (CHINS) revealed that 31 per cent of the homes in discrete Indigenous communities required either major repair or replacement (ABS, AIHW 2008, p. 43). The condition of housing was found to be poorer in remote and very remote communities, with 9 per cent of homes requiring replacement in comparison to 4 per cent of dwellings in non-remote areas (ABS, AIHW 2008, p. 43). The lack of housing in some Indigenous communities is evident in the rates of demand, and unmet demand, to the Supported Accommodation Assistance Scheme (SAAP). In general, Indigenous people are over-represented in the SAAP client profile. In 2005-06 Indigenous clients comprised 17 per cent of all SAAP clients (ABS, AIHW 2008, p. 47). SAAP report data on unmet requests for accommodation assistance for two separate weeks during the year. In December 2005 and May 2006 there were an average 78 Indigenous people per day whose validated requests for assistance could not

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37 This is based on variations on the nuclear family (couple or single parent with or without children) and as such appears to make little provision for the extended kinship systems of Indigenous peoples.
be met. The majority of these requests were from Indigenous women, and scale of this unmet demand points to likely safety risks for women and children requiring accommodation to escape violent, overcrowded, or untenable living situations.

An unstable home environment and/or homelessness are noted risk factors to problem sexual behaviour in children but the concept of an “unstable” home requires careful interpretation in the context of complex Indigenous kinship systems, and circumstances where family and kin are quite transient. To assume that anything other than a nuclear family residing under the one mortgaged roof is “unstable” would be highly problematic. To avoid the imposition of non-Aboriginal assumptions about either family or housing the self-reported stress experienced by Indigenous people offers a more reliable indication as to the extent of housing need. 2006 data from Kids Help Line indicates that Indigenous children and young people are proportionally more likely to seek help with issues of homelessness when compared with non-Indigenous young people. The National Aboriginal and Torres Strait Islander Social Survey (NATSISS) conducted by the ABS revealed that the after the death of a family member or close friend, the most significant stressor for Indigenous people living in remote areas is “overcrowding in the home”, followed by “alcohol and drug related problems” (ABS, NATSISS 2002, p. 7). The survey found that the number of people residing in each dwelling varied according to tenure type and remoteness. More than half the Indigenous families in community housing had four people or more, and Indigenous households in remote areas had 4.6 people (ABS NATSISS, 2002, qtd in ABS, AIHW 2005, p. 34). Overcrowding was also reported as just one of a number of stressors by Indigenous respondents to the Western Australian Aboriginal Child Health Survey (WAACHS) (Zubrick et al., 2005).

Overcrowded housing is cited as a contributing factor to the overt sexualisation of children in Indigenous communities (Wild and Anderson, 2007, p. 65), with the suggestion that shared sleeping areas increase the risk that children will be exposed to pornography as well as sexual activity by adults or other children. Practitioner data on children with problem sexual behaviour reveal that childhood trauma and childhood exposure to sexuality are significant risk factors to problematic behaviour. Nonetheless, any interpretation of the impacts of the housing conditions in Indigenous requires broad and extensive inquiry and consultation with Indigenous peoples. The apparent disjuncture between the application of non-Aboriginal housing standards and the reported stress Indigenous people feel in regards to housing conditions could be cited, unequivocally, as contributing to either child sexual abuse, or problem sexual behaviour.

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38 The AIHW report that these figures may not fully reflect the numbers of Indigenous people making valid unmet requests for accommodation, as Indigenous status is not recorded for approximately 31 per cent of unmet requests. The AIHW also suggest that whilst this data on unmet requests is indicative, it is not possible to extrapolate to annual figures due to seasonal factors and the fact that several unmet requests may be lodged by the same person within any given year (AIHW 2007, qtd in ABS, AIHW 2008, p. 53).

39 ABS measures of homelessness utilise the Chamberlain and MacKenzie (2003) definition, a three-tiered model in which people are defined as homeless if “their accommodation falls below the minimum community standard of a small rental flat with a bedroom, living room, bathroom and some security of tenure” (ABS, AIHW 2008, p. 45). The 2006 ABS, AIHW report acknowledges that definitions of homelessness differ for Indigenous Australians, and that the work of Keys Young (1998) usefully emphasises that the concept of “home” can have different meanings for Indigenous Australians (ABS, AIHW 2008, p. 45). To date, these differing concepts of “home” and “homelessness” are not reflected in collected data (ABS, AIHW 2008, p. 46). According to the Chamberlain and MacKenzie definition, the 2001 census data and the data from the Supported Accommodation Assistance Program (SAAP), reveal a rate of Indigenous homelessness of 176 per 10,000 people, compared with a non-Indigenous homelessness rate of 50 per 10,000 people (ABS, AIHW, 2005, qtd in ABS, AIHW 2008, p. 46). A similar count from the 2006 Census and SAAP data is not yet available.

40 This finding may also be influenced by the data from Kids Help Line (cited earlier in this report) that Indigenous children are more likely to seek advice from support agencies in general.
SCHOOL ENGAGEMENT AND PERFORMANCE

“The young generation is illiterate” (Pearson, 2000).

Education is one of the areas in which there have been marginal improvements in outcomes for Indigenous people, but levels of educational attainment for Indigenous people are still well below those of non-Indigenous Australians. Retention rates for Indigenous students to year ten have steadily increased over the last decade, and between 2001 and 2006 Year 12 completion rates increased from 20 per cent to 23 per cent (ABS, AIHW 2008, p. xxi). This improvement is positive, but the figures need to be contextualised in comparison with the completion rate of 49 per cent for non-Indigenous Australians for the same period. This 2006 data indicates that Indigenous people aged 15 years and over are still half as likely to have completed high school as their non-Indigenous contemporaries.

Educational attainment is not uniform across the country. As with housing conditions and health outcomes, educational success is likely to be further compromised for Indigenous children living in remote areas. Indigenous people in rural or remote areas of Australia are less likely to have completed high school than Indigenous people living in urban areas. For 2006, 14 per cent of Indigenous people in remote areas had completed year 12, in comparison to 22 per cent in regional areas, and 31 per cent in metropolitan Australia. From 2001 to 2006 there was a slight decrease in Indigenous attendance at university (from 5 per cent to 4 percent). This decrease contributes to the already profound disparity in Tertiary educational attainment. Non-Indigenous people are more that four times more likely than Indigenous people to hold a Bachelor degree or above, with a figure of 21 percent compared to 5 per cent (ABS, AIHW 2008, p. 19).

Major reports indicate that the reasons for these compromised educational outcomes in Indigenous communities are multiple and complex. The Gordon Inquiry (2002) attributes poor educational performance to the context of poverty and family dysfunction, overlaid by issues of “substance abuse, early pregnancy, shame (falling behind due to absence, lack of appropriate clothing and equipment), homelessness, cultural factors such as greater independence and responsibilities at home, low familial experience of education, family violence and interfamily feuding” (p. 274). The NT Inquiry places a particular emphasis on the importance of redressing truancy and retention rates11 as a means of stemming myriad forms of dysfunction: “there is a correlation between school non-attendance and criminal activity, poverty, unemployment, homelessness, violence and sexual abuse” (p. 155). The cyclical dynamic is clear. Both the Gordon Inquiry and the NT Inquiry found that Indigenous children from non-English speaking backgrounds are at a particular disadvantage, and educational outcomes are likely to be compromised for this group.

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11 Indigenous retention to Year 10 and beyond is steadily improving and “this trend is particularly evident at the Year 11 level, where the apparent retention rate from Year 7/8 rose from 52% in 1998 to 70% in 2007” (ABS, AIHW 2008, p. 15). Indigenous retention rates are still considerably lower than those for non-Indigenous children. The 70% retention rate above for Indigenous children remains well below the 90% retention rate for non-Indigenous children in the same dataset.
The poor health indicators in Indigenous children are also thought to play a major role in preventing effective engagement at school. “The [Gordon] Inquiry notes that the inability of a child to hear properly could have a significant impact on his or her language, literacy and emotional development”, with an estimated 80 per cent of Aboriginal children likely to be experiencing conductive hearing loss (2002, p. 275). As indicated, the consequences of hearing loss are more than solely physical. The vulnerability and social isolation that this may effect is of great concern, given that poor social skills and social isolation are cited as contributing factors to problem sexual behaviour. School and family life are the two primary sites in which children might reasonably be afforded the opportunity to develop social skills and networks with peers. For complex and intersecting health, social, and socio-economic reasons these opportunities are seriously compromised for many Indigenous children. There is also the possibility that children in Indigenous communities lack the services and infrastructure necessary for extra-curricular social and sporting activities amongst peers. These opportunities for socialisation and skills development are crucial in preventing and mitigating the substantial reports of child delinquency, apathy, anger, substance abuse, and child sexual activity. The complex challenges to improving educational outcomes for Indigenous children are crucial, given that oft-cited correlatives to problem sexual behaviour include truancy, poor performance at school, and learning difficulties.

**SUBSTANCE USE AND MISUSE**

A study by the ACF indicates that twenty per cent of children referred for problem sexual behaviour came from homes where parental substance abuse was evident (Staiger et al., 2005b). Substance abuse is a chronic problem in many Indigenous communities and this contributes profoundly to other aspects of disadvantage: risks of family disruption, neglect and physical and sexual abuse are all compounded in this context. As the SCRGSP suggest, substance use and misuse have the potential to “intensify the factors that first led to their use” thus impacting adversely on all headline indicators of Indigenous disadvantage (2007).

Substance abuse by children with problem sexual behaviour receives less attention than that of their parents. Some of the literature touches briefly on the fact that alcohol (or other illicit substances) might be disinhibiting factors to the sexual behaviour. In this it is important to note that although some of the Australian data may include Indigenous children with problem sexual behaviour the analysis of correlatives are based on a broader Australian sample of children with such behaviours. The fact that childhood consumption of alcohol does not feature largely in this cohort of children does not mean that it can be overlooked as an issue of major concern for Indigenous children. To date there are no empirical studies on the risk factors to problem sexual behaviour in Indigenous children, therefore these broader empirical studies of the Australian cohort offer the best starting point for theorising possible risk factors and possible strategies to mitigate risk. It is crucial though that the findings of these broader studies are not imposed onto an Indigenous demographic in any simple way. The circumstances are different, as are the needs, and it is vital that research be undertaken to provide a greater understanding of risk factors specific to particular Indigenous communities. The differential rates of alcohol consumption in childhood point to one such instance where conflation of the broader Australian sample with Indigenous children would be particularly problematic.
Reports indicate that some children in Indigenous communities consume alcohol on a regular basis from a much younger age than their non-Indigenous counterparts. According to AIHW data collected from 635 alcohol and drug treatment agencies across Australia Indigenous clients were more likely than non-Indigenous clients to appear in the youngest treatment group (10-19 years) (SCRGSP, 2007). Childhood onset of regular alcohol consumption is confirmed by Robertson’s disclosure that in Queensland Indigenous children as young as nine and ten are drinking alcohol or sniffing petrol. Adult complicity in childhood substance use is also reported to be of particular concern with Pearson (2000) writing of crying babies being silenced with handkerchiefs doused in petrol. Petrol is not the only substance used to pacify children. Tony Koch, veteran reporter on Indigenous affairs, writes of a young mother “baby at breast, smoking dope and blowing the smoke into the baby’s face to make the child sleep” (Koch, 2007).

The longer terms consequences of substance abuse are also crucial insomuch as the cognitive impairments that result from substance abuse compromise either the eligibility or the efficacy of rehabilitation programs. Children with major developmental delays or intellectual disabilities are excluded from ACF therapeutic treatment for children with problem sexual behaviour (Staiger, 2005a). Both the Western Australian DOJ juvenile justice sex offender rehabilitation program and the NSW Non-Government program, New Street, report that treatment outcomes are seriously compromised for Indigenous children who have cognitive impairments resulting from sustained alcohol or drug misuse (Gordon et al., 2002; NSW Task Force, 2006).

HEALTH AND WELLBEING

It is well documented that provision of healthy childhood experiences in the first three years of life can have a positive impact on adult health and educational outcomes. The poor health indicators of many Indigenous people are attributed to a wide range of social, cultural, physical and economic factors. Infant mortality, low birthweight, high numbers of preventable infectious and parasitic diseases, poor nutritional intake: there are a host of indicators of the compromised health of Indigenous people. Two that are of particular relevance as contributing factors to problem sexual behaviour are severe hearing impairments and foetal alcohol syndrome.

Children with severe hearing impairments such as Otitis media are likely to have learning difficulties and compromised social skills; both contributing factors to problem sexual behaviour. These children are said to become withdrawn and, if treatment is not administered in the early stages, the condition “may affect children’s attendance at school and their capacity to learn and socialise” (SCRGSP, 2007). The prevalence of largely preventable and treatable hearing conditions for Indigenous children is three times higher than for non-Indigenous children, and these figures have not decreased since 2001 (SCRGSP, 2007).

Foetal alcohol syndrome is more prevalent in Indigenous infants than in non-Indigenous infants. Linked to the consumption of alcohol during pregnancy, foetal alcohol syndrome comprises a series of foetal growth restrictions resulting in facial anomalies, central nervous system impairment, and intellectual disability.

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These data are not age standardised. The larger proportion of young people in the Indigenous population may account for some of this demand on rehabilitation services in the younger age groups. The youthful Indigenous population also indicates a greater number of the population at risk of childhood problem behaviours.
PROBLEM SEXUAL BEHAVIOUR IN CHILDREN: A REVIEW OF THE LITERATURE

(SCRGSP, 2007). The effects are devastating and irreversible. Children with foetal alcohol syndrome suffer from impaired social judgement and have a diminished understanding of cause and effect. Such children have an intellectual age far below than their actual age and this seriously compromises their capacity for academic performance, their ability to socialise and their opportunities for social connectedness. These important protective factors are thus eroded by intellectual impairment as a major contributing factor to problem sexual behaviour.

A further health and wellbeing concern for Indigenous communities is the lack of dedicated mental health services (Robertson, 1999). The NT Board of Inquiry identified the need for the “provision of increased services for young people with a mental illness whose behaviour is indicative of significant trauma and distress resulting from their abuse” (Wild and Anderson, 2007, p. 24). The prevalence of childhood trauma and foetal alcohol syndrome point clearly to need for the provision of culturally appropriate and locally based mental health services.

Much of the literature points to the need for increased understanding of the mental health needs of Indigenous people so as to prevent the imposition of services modelled on the needs of Anglo-Australians. The Gordon Inquiry reported that there is “very little information . . . available about the mental health of Indigenous people” (McLennon and Madden 1999, qtd. in Gordon et al., 2002, p. 62). This point is also made clear in the 1993 Human Rights and Equal Opportunities Commission Report into the Human Rights of People with Mental Illness:

> the recognised definitions of mental health do not fully apply to Indigenous people because of the way they incorporate physical, mental and spiritual wellbeing. Thus, environmental and social factors (perhaps more than in white Australian culture) can have a lasting impact on Aboriginal psychological wellbeing and are linked to the development of anti-social and self-destructive behaviour (HREOC, 1993: 695 qtd. in Stanley et al., 2003, p. 23)

The interconnected social, cultural, economic and physical factors contributing to the chronic health needs in Indigenous communities extend far beyond those of hearing impairments, foetal alcohol syndrome and the requirement for culturally appropriate mental health services. Although a holistic approach to health is required, attention to these three factors would assist with bolstering the protective pathways mitigating risk to childhood involvement in problem sexual behaviour.

**IMPRISONMENT AND JUVENILE DETENTION RATES**

Parental criminal activity is a risk factor to children engaging in problem sexual behaviour. The overrepresentation of Indigenous people in custody is relevant in not only in terms of this but also in that it compounds yet another risk factor as familial disruption results from the incarceration of parents, caregivers or familial role-models. Recent data indicate a steady and significant increase in the number of both Indigenous men and women imprisoned. Indigenous imprisonment rates increased by 31.9 per cent between 2000 and 2006 (SCRGSP, 2007). Data also indicate that increasing numbers of Indigenous juveniles are coming into contact with the criminal justice system and they are 23 times more likely to be detained than non-Indigenous juveniles (SCRGSP, 2007) This is of particular concern given the indications
that childhood delinquency and generalist offending is a strong risk pathway to engagement in problem sexual behaviour. The overrepresentation of Indigenous people at every level of the criminal justice system points to several intersecting risk factors for Indigenous children.

**PORNOGRAPHY AND OTHER FACTORS OF SOCIALISATION**

For several decades international scholars have fiercely debated whether or not there is a causal relationship between viewing pornography and the incitement to sexual violence. In the early 1980s the anti-pornography movement was mobilised by American feminist scholar Robin Morgan’s rallying cry “pornography is the theory, rape is the practice” (1980). Despite the popularity of this view amongst feminist scholars at the time, and despite the tempting tidiness of this causative logic, there are still very few empirical studies that can prove that watching pornography, even violent pornography, incites viewers to enacting sexual violence. Civil libertarians mount equally vehement arguments that pornography is unjustly maligned as the repository for all social ills and they claim censorious responses to pornography are prurient knee-jerk reactions that compromise consumer's rights. Claims that pornography is either universally innocuous or universally harmful are equally difficult to defend.

These long-standing and polarised debates indicate the powerful and complex role that sexually explicit imagery plays in contributing to our understandings of what constitutes appropriate and inappropriate sexual behaviour. Indeed, Indigenous advocates are equally divided as to whether pornography can be blamed for the sexual violence in Indigenous communities. Judy Atkinson contends that Indigenous communities are “saturated” with pornography, and that she has personally witnessed three and four-year-old children being exposed to violent, hard-core pornography (Overington, 2006a). Atkinson's experience is echoed by Indigenous Researcher Gary Lee who reports that in remote communities he has seen “giant screens up, with everybody; two, three and four-year-old boys invited to sit around watching pornography” (Overington, 2006b). Yet Boni Robertson disagrees with the suggestion that pornography is one of the major problems in Indigenous communities. “I'm gob-smacked because it's such nonsense,” she says. “It's the grog that's our problem, the grog. The statement that our communities are saturated with porn and that we just can't control ourselves, it just takes us back to that image of the black savage and it takes our focus off the real problem” (Overington, 2006a).

Ascertaining, with any certainty, whether pornography causes harm is made difficult by the paucity of empirical research on the dynamic between viewing pornography and the commission of coercive sexual acts. In a 2003 paper for The Australia Institute, Michael Flood and Clive Hamilton survey a range of International studies on both adults and children and the relationship between their consumption of pornography and their attitudinal and behavioural responses. Methodological differences mean that the studies are non-comparable, and there is very little empirical work with those under 18 years of age. One Canadian study of boys with the average age of 14 years identified a correlation between “boys’ frequent consumption of pornography and their agreement with the idea that it is acceptable to hold a girl down and force her to have intercourse” (Flood and Hamilton, 2003, p. ix).
This is one of very few studies on the possible effects that pornography may have on juveniles, and as such it would be risky to extrapolate from this one study to suggest that boys across cultures would also reflect this co-existence of pornographic consumption and the acceptance of coercive sexual practices. Moreover, Flood and Hamilton advise against the temptation to use the findings of adult and young adult surveys to draw conclusions about the effects of pornography on children. Some studies with adults do reveal an association between high frequency consumption of violent pornography and sexually aggressive attitudes. This relationship is correlative rather than causal, and these findings cannot be mapped directly onto children and young people, yet the evidence is sufficient that Flood and Hamilton do suggest that the frequent consumption of such material by boys could be a cause for some concern in that, in a circular sense, this might reinforce pre-existent or culturally dominant norms of masculinity. In this it appears that whilst it is difficult to suggest that pornography causes sexually aggressive behaviour, we can say that studies point more clearly to the co-occurrence of frequent consumption of violent pornography and the intensification of attitudes supportive of rape, or erosive of empathy to sexual victimisation (Flood and Hamilton, 2003, p. 47).

In the case of Indigenous communities reports on pornography are diverse, yet number of sources report that pornography, and children's increasing exposure to sex is of significant concern to Indigenous people in several parts of Australia. Such is the level of concern about pornography on the APY lands that the Mullighan inquiry (2008) recommends a community education campaign to highlight the dangers of children being exposed to pornography (p. xxvi). The NT Inquiry reported “children in Aboriginal communities are widely exposed to inappropriate sexual activity such as pornography, adult films and adults having sex within the child’s view” (p. 65). This supports the findings of the NSW Task Force (2006) which states “[s]ome participants described communities as sexualised and they believed that the prevalence of pornography was contributing to that. They said that many people talked openly about sex and sexual acts in front of children and observed some men talking to young boys and girls in a very sexual way. . . . It was also reported that access to the Internet was making this problem worse” (p. 60).

The Gordon Inquiry (2002) reported that a proportion of the Indigenous people consulted shared first hand experiences that the viewing of offensive material in Aboriginal communities is a fact contributing to sexual violence. Atkinson attributes an increase in sexual violence to the introduction of pornography as “offensive videos . . . are [sometimes] the only understanding Aboriginal young men have of mainstream culture (1990, qtd in Gordon et al., 2002, p. 64). The Queensland Task Force also reported that informants identified a clear link between the accessibility of pornographic videos and the commission of violent crimes. “One Community with a history of pornographic video usage coincidentally has the highest rates of men imprisoned for sexual offences in Queensland” (Robertson, 1999, p. 101).

Findings from the Gordon report suggest that effects of these images may be exacerbated in contexts where strong community and family values are undermined. An Aboriginal worker cited in the Gordon Inquiry describes the process whereby children are acculturated to sexualised violence by virtue of their exposure to pornography:

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44 This line of argument has some resonance with Memmott’s suggestion that “belonging to, or participating in, a subculture that approves of, or condones, violence” operates as just one of a number of situational factors contributing to violence (1999, p. 20).
The influx of ‘blue’ movies into communities has not meant that there are measures that ensure underage children are not being exposed to the movies. In fact, the ‘blue’ movies are left around and all children are getting access to the movies. This in turn is introducing unprotected children to wrong relationship messages, wrong love messages, and unhealthy sexual relationship messages. These practices are engaging and entrenching children in anti-community and family values and norms. The guardians for Indigenous community and family values and norms are disappearing or have completely vanished. (Gordon et al., 2002, p. 64)

The influence of media is evident in a number of reports suggesting that Indigenous children are of the opinion that the broader Australian society is “lawless”. The NT Inquiry found that this view of “lawlessness” is “reinforced by TV, movies, pornography and drugs brought into our community from wider Australia (Rev. Djiniyini Gondarra press release, 19 May 2006, qtd in Wild and Anderson, 2007, p. 51). The effects of this relentless exposure to media stimuli are likely to be exacerbated by the fact that according to the findings of the NT Inquiry the cultural gap and the language barrier between Indigenous children and the wider Australian community is more profound than it was for the previous generation.45 If this is the case then Indigenous children are, ironically, now inundated with stimulus from this “broader culture” but they have less socialisation, less English language skills, and less critical literacy skills to effectively engage with, or understand, that culture. It is not unreasonable to assume that if the effects of media stimulus cause concern in the broader community then they might also cause concern in remote circumstances where a broad range of stable frameworks and cultural value systems are reported to be less likely to prevail. As Judy Atkinson stresses, we know little of the effects of viewing pornography, but even less is known about the impact of viewing this material by young males living in isolated and depressed circumstances in remote Australia (qtd. in Gordon et al., 2002, p. 63).

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45 The NT Inquiry reported: “It became clear to the Inquiry during its consultations that in many of the communities visited the “language barrier” and the “cultural gap” was greater in the younger generation. The Inquiry was told that this problem is increasing, when intuitively it might have been assumed that the gap was decreasing” (p. 51).
CONSEQUENCES OF CONTEXT: PROBLEM SEXUAL BEHAVIOUR AND CHILD SEXUAL EXPLOITATION

Against this context of structural disadvantage many Indigenous children face serious and compounding challenges in negotiating pathways to success in the life course. Compromised educational outcomes, poor health indicators, adverse socio-economic circumstances: the multiple contextual factors that cause obstacles for these children have also been obstacles for their parents. As such, reports indicate that disadvantage has become trans-generational as there are fewer strong adult role models for children to emulate. For children living in communities with high levels of violence the chances of experiencing childhood trauma are exponentially increased. Childhood trauma is a major risk factor to a host of adverse outcomes in childhood, including problem sexual behaviour and child sexual exploitation. As though not risk enough, it is likely that in some Indigenous communities children who experience the risk factor of childhood trauma will also find this overlayed by the additional risk factors of poor educational outcomes, compromised socio-economic circumstances, poor health indicators, alcohol or drug misuse, intellectual impairment, and so on.

Recent reports and media attention highlight the most startling of the consequences faced by children. This national media attention is recent; the issues contributing to sexual violence in Indigenous communities are not. The following section exemplifies the devastating consequences for children whose behaviours reflect this ongoing context of risk.

CHILDREN WITH PROBLEM SEXUAL BEHAVIOURS – INDICATIONS FROM INDIGENOUS COMMUNITIES.

Reports of problem sexual behaviour amongst Indigenous children have been filtering through since the 1990s, but these are still yet to have created the necessary public awareness to facilitate the provision of the culturally appropriate and locally delivered programs so urgently required. Memmott et al., (1999, 2001) identify that as early as 1990 Judy Atkinson expressed concerns regarding sexualised behaviours amongst Indigenous children:

> Atkinson (1990a, 1990b: 10) reports that in some Indigenous communities, rapes have been carried out on drunken women by groups of young boys aged as young as 10 and typically between 10 and 15 years of age. Even more alarming is that young boys have been reported as trading their younger sisters to older boys to pay gambling debts or to purchase alcohol. Young girls as young as eight and often older have been sexually misused by adult Indigenous and non-Indigenous men in exchange for beer (Atkinson, qtd. in Memmott et al., 1999, 2001, p. 40).
In 1994 Hazelhurst reported that pornography was inciting young boys, sometimes in gangs, to assault young children, infants, and animals (qtd. in Gordon et al., 2002, p.105). Further, in 2001 Memmott et al., reported that in some Indigenous communities pack rape was being committed by boys as young as ten years old (p. 51).

Still relevant today, these early reports of problem sexual behaviour amongst Indigenous children are not isolated cases. Each major jurisdictional Task Force or Inquiry report into violence in Indigenous communities indicates some level of concern about this issue. The recent NSW Aboriginal Child Sexual Assault Task Force reported that sibling sexual assault is rife in NSW. “Communities expressed consistent concern about the high incidence of sibling abuse. One participant suggested that this type of abuse sometimes started when the children lived with family violence and the children would get into bed together for comfort” (p. 51). Much more deliberate strategies for long term sexual assault of siblings were also reported by community members:

“It’s not just men against women and men perpetrating against children, it’s sibling groups as well. We have, you know, siblings who actually sexually abuse their siblings and I’m finding that those kids they have… that they quite cleverly, through a process of grooming, can be the perpetrator for a very, very long time with nobody actually discovering until some sort of you know disclosure, innocent disclosure of the victim. Transcript 2 (51)

The NT Board of Inquiry also identified the existence of sibling sexual abuse as well as “sex between children” generally and “children’s exposure to sexual activity” (p. 60). This Inquiry reported that “many sexual offenders were, in fact, children themselves, and some of these offenders were female children” (p. 63). The lines between consent and abuse are not clear in all reports to the NT Inquiry, but in general, sex between children and underage pregnancies were “a cause of great concern to many of the Aboriginal people consulted by the Inquiry”(p. 65). The Inquiry indicated that an Indigenous woman who had been abused more than 37 years ago reported that in her community “Aboriginal law had started breaking down at the time she was abused and had now deteriorated to such an extent that young children in the community were abusing one another” (p. 61).

The Inquiry was told of a range of juvenile offending, including a 12-year-old boy allegedly interfering with a three-year-old, a 13-year-old boy allegedly interfering with a five-year-old, a 15-year-old boy who had interfered with a three-year-old and an eight-year-old, a 15-year-old girl who

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46 The NT Inquiry reported that in some cases the baby bonus is seen as an incentive to early pregnancy. Further, the Inquiry reported that some families encourage young girls to become pregnant so that the family can receive the baby bonus. For some young girls having a baby is a protective strategy as it gives them “an important role to play in the community and enabled them to avoid other risker behaviours” (Wild and Anderson, p. 66). This is supported by the earlier anthropological work of Hunter, who writes that “The high rates of pregnancy for young Aboriginal females . . . may be protective, both in terms of providing an avenue to the economic resources of maternal benefits denied to males, and access to motherhood, an ego-ideal valued by the majority of culture (Hunter 1990b, qtd in Memmott et al., p. 29).

47 The NT Inquiry highlights the fact that response to child sexual activity is difficult in the NT because “although it is illegal for persons under 16 years to have sexual intercourse, there is no legal requirement under any NT Act to report the evidence of sexual intercourse in a person of this age, unless there is reason to believe that it constitutes maltreatment as defined in the Community Welfare Act” (p. 107). Therefore, children presenting with STIs and pregnancies would be unlikely to reported (and thus counselled) unless there was reason to believe they had been subjected to sexual abuse.
allegedly interfered with a group of younger boys, and a 14-year-old-girl who allegedly interfered with girls and boys . . . . The Inquiry was also told a story of a 17-year-old boy who would regularly show pornographic DVDs at a certain house and then get young children to act out the scenes from the films (p. 63).

An increase in teenage violence, sexual activity and anarchy was reported as a major concern for both men and women in all communities that the Inquiry visited (p. 66). The Inquiry cites “inter-generational trauma, the breakdown of cultural restraints” and prior sexual abuse or exposure to inappropriate sexual activity as providing the situational context for this child sexual behaviour (p. 63). This explanation is supported by Professor Paul Memmott, Director of University of Queensland Aboriginal Environments Research Centre, who attributes rapes by children to the breakdown in social systems (Chilcot, 2008).

The extensive community consultations conducted in Queensland in 1999 by the Aboriginal and Torres Strait Islander Women’s Taskforce also contained reports of children engaging in problematic sexual behaviours. Teenage males were repeatedly cited as engaging in sexual assault of children, and the sexual anarchy identified by the NT Inquiry is evident in this Queensland report as well. Consultations in Brisbane revealed an incident in which a four-year-old boy was raped by two ten-year-old boys and when this was reported to police they advised that the two could not be charged (Robertson, 1999, p. 11). A submission from Central Queensland revealed a similar case whereby a three year-old child was raped by two juvenile males and one adult male (p. 16).

Media reports increasingly feature incidents of Indigenous children engaging in acts of problem sexual behaviour. In 2007 these issues reached national attention when, in an address to The Sydney Institute, John Howard indicated that part of the impetus for the Northern Territory Intervention were reports that “six-year-olds acted out sexual behaviour in groups” (Madigan, 2007). Other recent media reports include:

- In early 2008 the Cape York community of Kowanyama was the subject of much media attention, with a six-year-old boy allegedly raped by a group of teenage and pre-teen boys (Murphy, 2008). Police in that community interviewed a group of eight pre-teen and teenage boys who were allegedly serially raping very young boys in the community (Koch, 2008a). Koch writes that the situation in Kowanyama of juveniles abusing even younger children was first reported in 2003 when Royal Flying Doctors medico Dr Lara Wieland outlined the extent of abuse in a ten-page letter to John Howard and Peter Beattie.

- In 2008 Wieland published her concerns, citing problem sexual behaviour in children as just one of the elements of dysfunction in Kowanyama that requires immediate attention. “Boys raping younger boys becomes just boys ‘playing gay’ – to be ‘told off.’ Yes, young boys do often engage in explorative sexual play but that is completely different to non-consensual acts where pre-pubescent boys sodomise little kids with objects while they scream out ‘no’, or where older teenagers or adults watch as they make younger teenagers rape little kids, who then have nightmares. That is no longer ‘playing’ and often suggests the children involved have been molested themselves” (Wieland, 2008).

48 It is crucial that media reports not be taken as substantiated cases, particularly given the increased interest that the media have shown in Indigenous communities in the last eighteen months.
• Mornington Island is another community where there are investigations into children allegedly raping other children (Chilcot, 2008).

• In July 2007 it was reported that an 11-year-old Balgo (WA) boy forced two pre-school-aged girls to have sex with him, infecting both with sexually transmitted diseases. Police confirmed that they would not lay criminal charges against the boy (Gosch, 2007).

• The gang rape of the 10-year-old girl at Arukun grabbed national attention when District Judge Sarah Bradley suspended sentences for all nine of the confessed rapists. Only weeks later the nation became aware of the repeated sex attacks on an 11-year-old Maningrida boy by two adults and three teenagers. The offenders, who spent their days watching pornography and smoking marijuana, twice anally penetrated the victim in addition to fondling him and forcing him to perform oral sex (The Australian, 2007). The sentencing decision in this case is also contentious, with four of the five males receiving a total sentence of 32 months in custody. The youngest offender (13 at the time of the offence) was granted leave to appeal his sentence. The controversy with this case is that none of the offenders were charged with rape, the most serious charge being sexual intercourse with a child under 16. This decision has been read by Indigenous advocates as sending the message that the rape of an Aboriginal child bears less consequences than the rape of an adult. Exemplifying the difficulties in legal response to problem sexual behaviour in children Supreme Court judge Trevor Riley said the crimes were serious but acknowledged that the offenders were young, had a limited understanding of the outside world, and intelligence well below their years (Wilson, 2007).

• In 2007 five boys aged between 11 and 14 from the remote Kimberley community of Kalumburu were charged with eight counts of sexually penetrating and indecently dealing with two boys aged six and seven. Robert Cock, the Director of Public Prosecutions, subsequently dropped the charges, saying that the testimony from the alleged victims was “sufficiently incoherent” that it would have little chance of standing up in court (Barrass, 2007b).

• In 2005 the Sunday program reported that young Aboriginal children were being sexually abused by children their own age (Davis, 2006).

• In 2001 a seven-year-old girl from Western Australia was subjected to a pack rape so vicious that she now wears a colostomy bag. Police believe that the offenders were all juveniles (Toohey, 2001).

Dr Chris Sarra, Executive Director of the Indigenous Education Leadership Institute confirms that child rapists do exist in remote communities, with some towns “held to ransom” by out-of-control children who are not being disciplined (Chilcot, 2008). Indications are that the communities are experiencing difficulties in prohibiting under-age sexual activity and that this is contributing to the understanding that problem sexual behaviour is without consequences, and so therefore permissible. Griffith University Youth Forensic Service director Associate Professor Stephen Smallbone, says that this kind of behaviour is not unexpected in communities where there is an absence of authority, and therefore no reason for children to resist criminal activity (Chilcot, 2008). The difficulties associated with policing under-age sex are evident in the decision by Investigators not to test or charge the teenage boys allegedly responsible for transmitting STIs to four under aged girls in Papunya. Although the four girls (one of whom is only seven-years-old) have identified the boys
as responsible, the Inquiry has concluded that the infections are the result of the girls playing “mothers and fathers” at the local rubbish tip (Skelton, 2006). This provides a clear example of the ongoing consequences of problem sexual activity being regarded as childhood experimentation. Furthermore, this serves as a reminder of the urgent need for legislative and policy frameworks to facilitate effective response so that children engaging in sex on rubbish tips does not become normalised as “child’s play”.

INDIGENOUS CHILD SEXUAL EXPLOITATION – INFORMAL AND FORMAL PROSTITUTION

Compounding the challenges faced by Indigenous children each of the risk pathways identified for involvement in childhood problem sexual behaviour are also seen as contributing factors to childhood involvement in formal or informal prostitution. The precarious circumstances for many Indigenous children place them at great risk of becoming victim to sexual exploitation. To overlay these circumstances with the conceptualisations or definitions of “prostitution” that we might attribute to adults who consciously choose to enter into a contract exchanging sex for money or goods would be to seriously distort the circumstances whereby at-risk children are forced into exchanging sexual favours to ensure their own survival. As with problem sexual behaviour it is not the actions or culpability of the individual child that warrant attention, rather it is the systemic factors creating the circumstances for child sexual exploitation that need to be addressed.

The NT Inquiry reported that vulnerable children (particularly girls) are being sexually exploited by both Aboriginal and non-Aboriginal men and “in many cases the girls actively sought out the men and consented to sex in exchange for goods or favours” (p. 63). The Inquiry concluded “such children are often targeted by offenders, with the children’s desire for affection used to facilitate sexual assault” (p. 201). A Remote Area Nurse explained that “they are vulnerable and desperate and they crave the things that they do not get at home, such as love, attention and material goods” (Wild and Anderson, 2007, p. 63). The Inquiry reports that girls aged between 12 and 15 years are engaging in a “rampant informal sex trade” with the non-Aboriginal workers of a mining company. Further, taxi drivers in larger Aboriginal communities are alleged to have accepted sex with young girls in lieu of fares and there are reports that these same drivers have been involved in “pimping” teenage Aboriginal girls to other men (p. 64). In instances where police have been informed of this activity police told the Inquiry that little could be done as “the girls themselves would not speak out because they saw themselves gaining from the activity” (p. 64).

More organised prostitution of female children was also reported to the Inquiry, with one man allegedly offering drugs to lure girls to leave their communities to enter the sex trade in Darwin (p. 64). Child pornography was also reported in one town, with cannabis offered in return for young girls being video taped performing sexual acts (pp. 64-65). The NT Inquiry also reported anecdotal evidence of children being “sold” for sexual purposes by adult family members in exchange for money, alcohol or drugs (p. 62). The NSW Taskforce (2006) also found that adolescents are regularly offering their younger siblings in exchange for drugs and money. This parallels findings of the Queensland consultations as well with Indigenous residents of Hervey Bay reporting that “young girls were being forced to give sexual favours and to prostitute themselves to family members” (Robertson, 1999, p.39)
Evidence of children providing sex to ensure their own survival is supported by the findings of the 2004 CMC report on child sexual offences in Queensland Indigenous communities. This report noted that it is “common for young teenagers to perform sexual favours for some adult members of the community to benefit by way of money, shelter, alcohol or food” (p. 7). The Queensland Task Force report also describes prostitution as an act of survival for the children involved. “The sexual abuse of children by men who know that drugs is a way to get to them, this is usually done by men to young boys, especially those who come from broken homes and are roaming the streets to get away from the . . . [domestic violence] that is happening” (Robertson, 1999, p. 183).

SCHOLARSHIP ON CHILD SEXUAL EXPLOITATION

The literature supports the view that childhood involvement in prostitution occurs most often when children and young people are forced into sexually exploitive situations in an effort to escape abuse or the risks associated with homelessness. Much of this literature falls under the general description of “commercial sexual exploitation of children” although there are compelling arguments that the term “commercial” functions to exclude situations in which young people are sexually exploited without money being exchanged. U.S. researcher Liz Kelly asserts that definitions of prostitution need to accommodate instances in which forms of payment are not necessarily monetary. “We know from children and young people themselves that they may initially, or consistently act independently, exchanging sex with adults for goods in kind, such as shelter, food and companionship” (Kelly and Regan, 2000, pp. 72-73). Kelly’s work points to the importance of ensuring that definitions don’t preclude the multifarious means by which children might be sexually exploited, asserting that narrow definitions result in lower prevalence figures. It is crucial that policy, research and legislative reform be informed by a complete picture of the means by which children are subjected to sexual exploitation.

Adverse circumstances of abuse or neglect force young children into acts of “survival sex” or “opportunistic prostitution” according to Tony Proud, Teen Challenge Queensland Manager. Proud, and others contend that most children in these circumstances opt for basic necessities such as food and shelter in exchange for sexual favours (Doneman, 1998; Jackman, 1998; Jenkin, 2005). Similarly, Professor Jake Najman, author of a report on the sex industry in Queensland stresses that “very young sex workers have very high market value” but that when young people engage in prostitution it is rarely a “lifestyle choice” and more usually a question of “absolute desperation”, a survival strategy after they have been forced to live on the streets (qtd. in Jackman, 1998). This is supported by Bernadette McMenamin of the International lobby group End Child Prostitution and Child Trafficking (ECPAT). McMenamin indicates that “these kids are exchanging sex to meet their needs” and a small percentage of children as young as ten are forced into prostitution by their parents (qtd. in Jackman, 1998).

The 1998 AIC report on the commercial sexual exploitation of children in Australia also acknowledges that prostitution includes “the exchange of sex for favours such as food, clothing, accommodation or drugs”. Exploitation of this kind is variously defined as “opportunistic prostitution,” “sex for favours” or “survival sex”, indicating that the children involved can see no alternative other than to exchange sex for their basic needs.
needs" (Tschirren et al., 1996 qtd. in Grant et al., 1999, p. 2). The AIC report concludes that both male and female children participate in street solicitation in every Australian capital city.

To date, Australian research on child prostitution has focused on metropolitan areas. The methodology for the AIC study, for example, consisted of interviews with law enforcement agencies, community welfare agencies and NGOs in each capital city of Australia. It appears that no research or consultation was undertaken in regional or remote Australia and the report does not disaggregate data according to ethnicity. Indigenous children and children from non-English speaking backgrounds are identified as being "vulnerable to commercial sexual exploitation due to the isolation of their communities from "mainstream" Australian society (Grant et al., 1999, p. 6). Although the data do not indicate that Indigenous and culturally and linguistically diverse (CALD) children are at increased risk the authors suggests that this does not accurately reflect the situation and is more likely to be a function of Indigenous young people having less access to mainstream services.50

This lack of service provision needs to be urgently redressed, as indications are that the circumstances of many Indigenous children's lives place them at increased risk of childhood involvement in prostitution. As with the correlatives for problem sexual behaviour in young people the list of risk pathways to child sexual exploitation accurately describes the lives of many young people in Indigenous communities. Family breakdown, prior victimisation, youth homelessness, drug use, youth unemployment, poverty and the isolation of Indigenous and ethnic communities are just some of the factors that contribute to childhood vulnerability to commercial sexual exploitation. Children involved in sexual exploitation are likely to experience an absence of non-exploitive adult role models, and the social, educational, and health priorities for these children are likely to be neglected. Furthermore, Grant (1999) identifies premature sexualization as “a significant risk factor for a child's subsequent commercial sexual exploitation” (p. 5). Grant writes that these are both consequences of exploitation, but that these carry their own debilitating effects in turn:

[young people involved in commercial sexual exploitation] become isolated from peers and mainstream communities. Drug abuse, suicide ideation and attempt as well as violence and sexual offending have also been identified as common amongst this population. (p. 5)

This clearly indicates the cyclical and self-perpetuating dynamism of these risk factors to childhood involvement in prostitution. Given that each of these factors exist in Indigenous communities it is particularly disturbing that Grant asserts that “the more of these factors which are present, the greater a child’s subsequent vulnerability” (p. 6).

The compounding effects of these risk factors in Indigenous communities point to the fact that research on the dynamics of informal prostitution or survival sex in remote areas is long overdue. Recent media reports provide ample evidence that young Indigenous children are at great risk of sexual exploitation. It is crucial that the conventional conceptualisations of prostitution as an urban-based contractual exchange be revised to include the predatory tactics of those who capitalise on young children who are already at serious risk and in serious need. Recent media reports provide an indication of the ways in which children are being exploited in informal prostitution arrangements for which they receive very little in return.

50 It is also possible that the surveyed demographic may not include communities where the largest proportion of Indigenous and/or ethnically diverse children reside.
In 2001 the far North Queensland Indigenous community of Palm Island came to media attention as children as young as 12 were reported to be selling sex in exchange for cigarettes (The Cairns Post, 2001). In September 2007 South Australian Aboriginal Elder Winkie Ingomar, 52, stood trial for five counts of unlawful sexual intercourse with three 13- and 14-year-old girls whom he plied with petrol in exchange for sex (Cardy, 2007). In a similar case two Broome men were charged with child sex offences after being caught luring children into performing sexual favours in exchange for drugs, cigarettes and money (Barrass, 2007a). In December 2007 allegations emerged that parents had traded sex with their 12 and 13 year-old daughters for alcohol in a community west of Alice Springs (Keamey, 2007).

Chair of the NSW Aboriginal and Child sexual Assault Taskforce, Marcia Ella-Duncan reports that she became aware of child prostitution and truck drivers in Moree 15 years ago (Jones, 2008). Despite the long history of childhood prostitution in Indigenous communities there has been very little academic or media attention to this issue. In March 2008 young Indigenous girls from the NSW towns of Moree and Boggabilla took their stories of child prostitution to the media in the hope that national attention might mobilise the response needed to stop the trade of young girls to truck drivers passing through communities adjacent to highways. Lateline reported that girls as young as eight-years-old are reportedly having sex with both Indigenous and non-Indigenous truck drivers in exchange for cash and drugs. Judy Knox, a PhD student and resident of Boggabilla attributes this trade to the financial desperation of the young girls:

> more often than not it’s a survival thing, it’s to put food in the house. It appears that the truckies are cashing in on that dysfunction. Yes, and taking advantage of people, the young girls that have no money. (Stewart, 2008)

Lateline reported that the truckies prefer women under the age of consent, and they will offer money to older girls to procure younger women for sex (Stewart, 2008). Truck drivers procuring Indigenous children for sex is not restricted to these NSW communities and this trade is reported to be common in most Indigenous communities adjacent to highways. This, and what we know of the prevalence of risk factors in Indigenous communities, means that a great number of young Indigenous Australians are likely to be at risk of child sexual exploitation.
CONCLUSION

The phenomenon of children engaging in problem sexual behaviour is an issue that has received very little attention in any sphere, but it is not an issue that has gone completely undocumented. Although data are scarce for both the wider Australian and Indigenous populations, the demand experienced by the very limited number of programs on offer to children with problem sexual behaviour indicates that this behaviour occurs across the country, not only in Indigenous communities. Of the programs that offer counselling for young people who sexually abuse, all report an inability to respond to the ever-increasing demand. Auspiced by the The Children’s Protection Society, the Sexual Abuse Counselling Prevention Program (SACPP) has been operational in Victoria since 1993 but the high demand on this program has meant that eligibility for children with problem sexual behaviours is now restricted to young people who reside in the northern suburbs of metropolitan Melbourne (CPS, 2003). The NSW NGO, New Street, caters to children with problem sexual behaviours who are resident of metropolitan Sydney, yet NSW Health estimate that New Street can cater for only 25 per cent of received referrals (NSW Task Force, 2006). The increasing demand on these services points to both the seriousness of this issue, and the urgent need for programs in both prevention and response. In addition to the chronic shortage of broad clinical programs such as these there is also evidence of the urgent need for culturally appropriate programs for Indigenous and culturally and linguistically diverse (CALD) children. Western Australia Department of Justice reported to the Gordon inquiry that 32 per cent of the convicted juvenile sex offenders in that state are Aboriginal, yet there is not Indigenous specific rehabilitation program for young offenders (2002, p. 243). The urgency in redressing this service provision gap is underscored by the fact that scholars and clinicians agree that the “earliest possible intervention” leads to the best rehabilitative outcomes for the children involved (Flanagan, 2003, p. 147).

Recent media attention has highlighted the adverse conditions in which some Indigenous children live. For this to constitute more than public scrutiny it is crucial that engagement with Indigenous peoples takes place to ensure that this national attention parleys into tangible, practical, culturally appropriate and desired response/s.

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51 The chronic shortage of programs for children with problem sexual behaviour is compounded by a series of complex eligibility requirements that are likely to exclude a great number of children in need of these rehabilitative services. Most of the (already over-subscribed) programs in Australia are open to court mandated clients only. This points to a need for community based programs for children who have not had contact with the criminal justice system. Further, the complex dynamic of sentencing and rehabilitation necessitates urgent review. As identified by the Collaborative Research Unit of the NSW Department of Juvenile Justice: “In the NSW jurisdiction, offenders are not sentenced according to their treatment needs but in accordance with a criminal justice system. . . . Currently, juvenile sex offenders are under-serviced and may be at risk for recidivism.” (Kenny et al., 1999a, p. 12)

52 This review has maintained that there are a host of factors that need to be considered in the design of culturally appropriate services for Aboriginal children. In addition to those considerations already outlined it is important to note recent research that suggests that programs based cognitive-behavioural-therapy appear to have differential outcomes for Indigenous and non-Indigenous children. “In many Aboriginal communities learning and healing occurs in the presence and at the interest of the group or the community, rather than of the individual (Young 2007, Yavu-Kama-Harathunian 2002). This element of Indigenous culture is unlikely to be compatible with contemporary Western methods of treatment.” (McGregor, 2008, p. 6)
The familial breakdown, poverty, educational difficulties, violence, prior victimisation, homelessness, isolation and child sexual abuse suffered by some Indigenous children describes, in complete terms, the risk scenarios and pathways to both child sexual exploitation, and problem sexual behaviour in childhood. The fact that these precursors and correlates are both disproportionately evident and often normalised in Indigenous communities significantly increases the risk that Indigenous children will become involved in childhood problem sexual behaviour and/or sexual exploitation. Scholars cite crucial knowledge gaps in these two areas, and the service provision is clearly lacking. There can be no question that serious attention to these issues, and their devastating effects, is urgently required if the next generation of Indigenous children are to be spared.
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