

Framework for Advancing Accessible Child Sexual Abuse Prevention in Australia

Child sexual abuse is a complex and multifaceted issue requiring a comprehensive suite of prevention activities. Equitable access to these opportunities is essential for promoting the safety of all children in Australia. Access to child sexual abuse prevention is understood as the combined conditions that determine whether children and families can meaningfully engage with prevention opportunities, including availability, awareness, practical reach, safety and suitability.

The framework sets out a two-pillar approach, and associated strategies, to strengthen access to child sexual abuse prevention, ensuring all children can benefit from effective safeguarding measures. It is intended for decision-makers and leaders responsible for child sexual abuse prevention, across policy, funding and service systems. It provides a clear pathway for action at a critical moment, translating evidence into practical directions for system-level change.

Vision

A national agenda for the prevention of child sexual abuse that ensures just and equitable access to child sexual abuse prevention opportunities for ALL children and families in Australia.

Underlying Principles

Four key principles underpin this framework. These principles are aligned with, and informed by, established international and national policy guidelines on the prevention of child sexual abuse including:

1. [United Nations Convention on the Rights of the Child](#)
2. [United Nations Sustainable Development Goals \(Targets 5.2, 10.3, 16.2\)](#)
3. [National Framework for Protecting Australia's Children 2021-2031](#)
4. [National Strategy to Prevent and Respond to Child Sexual Abuse 2021-2030](#)

Principle 1: Children have a right to be safe from violence and abuse ^{1,2,3,4}

Every child in Australia has the right to be safe from violence and abuse, regardless of where they live or their circumstances.

Principle 2: Child sexual abuse is a public health priority, preventable, and everybody's responsibility ^{3,4}

Child sexual abuse is a preventable public health concern, that demands a comprehensive multi-level prevention agenda. This includes diverse prevention activities, spanning primary, secondary, and tertiary levels of prevention. Preventing child sexual abuse is also a shared responsibility, requiring action from individuals, families, community members, organisations, and governments, to effectively safeguard children.

Principle 3: Investment in universal prevention and early intervention is vital ^{3,4}

Investment in universal (primary) prevention and early intervention (secondary prevention) seeks to prevent child sexual abuse before it might otherwise occur. This includes whole-of-community strategies to build safeguarding awareness and education, and early intervention with people and settings at higher risk of perpetration or victimisation. Alongside effective responses once abuse occurs, this supports a comprehensive approach to child sexual abuse prevention.

Principle 4: Equitable access to child sexual abuse prevention opportunities for all children and families is fundamental to achieving goals for the protection of children from sexual abuse ^{2,3}

Access to prevention opportunities is associated with reduced risk of child maltreatment; in turn, lack of availability or accessibility increases risk. A prevention agenda that prioritises equitable access to prevention opportunities is thus needed to strengthen safeguarding efforts and protect all children from child sexual abuse.

Key Findings from the National Accessibility Study

Across 2025/26, 985 young people, adult community members, and professionals across Australia were surveyed about the accessibility of child sexual abuse prevention activities. The key findings from this survey (see Table 1) informed the development of this Framework.

Seven Key Findings

Finding 1: Availability and awareness gap in child sexual abuse prevention

About half of adult community members could not identify a prevention activity available in their local area. This suggests either child sexual abuse prevention activities are not available to people in some areas in Australia or are not well known, with both limiting access to prevention opportunities.

Finding 2: Investment in prevention matters

Prevention activities that have received the most investment (promotion and funding support) to date were the most reported by participants, like helplines, school safety programs and counselling and support. Contextual prevention activities aimed at making places safer for children and young people, like safe design initiatives, bystander intervention and parent education programs were among the least known.

Finding 3: Where people live impacts access to prevention opportunities

Reported availability of prevention activities differed between states and territories. Availability of prevention activities also reduced outside of metropolitan settings, with lower availability in regional and remote settings and the lowest reported availability in rural areas.

Finding 4: Age influences facilitators and barriers to access

Young people and adults reported different barriers to accessing prevention activities. This suggests young people may face unique accessibility challenges and needs. For example, more young people endorsed a need for online access to prevention activities, and raised multiple barriers related to safety, trustworthiness and inclusivity.

Finding 5: Accessibility challenges are often underestimated by professionals

Adults who identified as First Nations or from multicultural communities, or who identified themselves or their child/ren as LGBTIQ+, or living with a disability or neurodiversity rated prevention activities as generally difficult to access. Professionals also perceived access to be difficult for these priority groups but underestimated the challenges in accessibility for many.

Finding 6: No single factor determines accessibility

Not one single factor determines accessibility; it is a combination of factors. For example, accessibility of child sexual abuse prevention activities is impacted by several practical factors (such as location, cost, and timing), as well as safe and inclusive experiences (participants raised fear, stigma, shame and [lack of] confidentiality among key barriers). Accessibility is also impacted by systems and individual level factors for example funding constraints or people not recognising the benefits of engaging with prevention activities or a tendency to view the issue as not personally relevant.

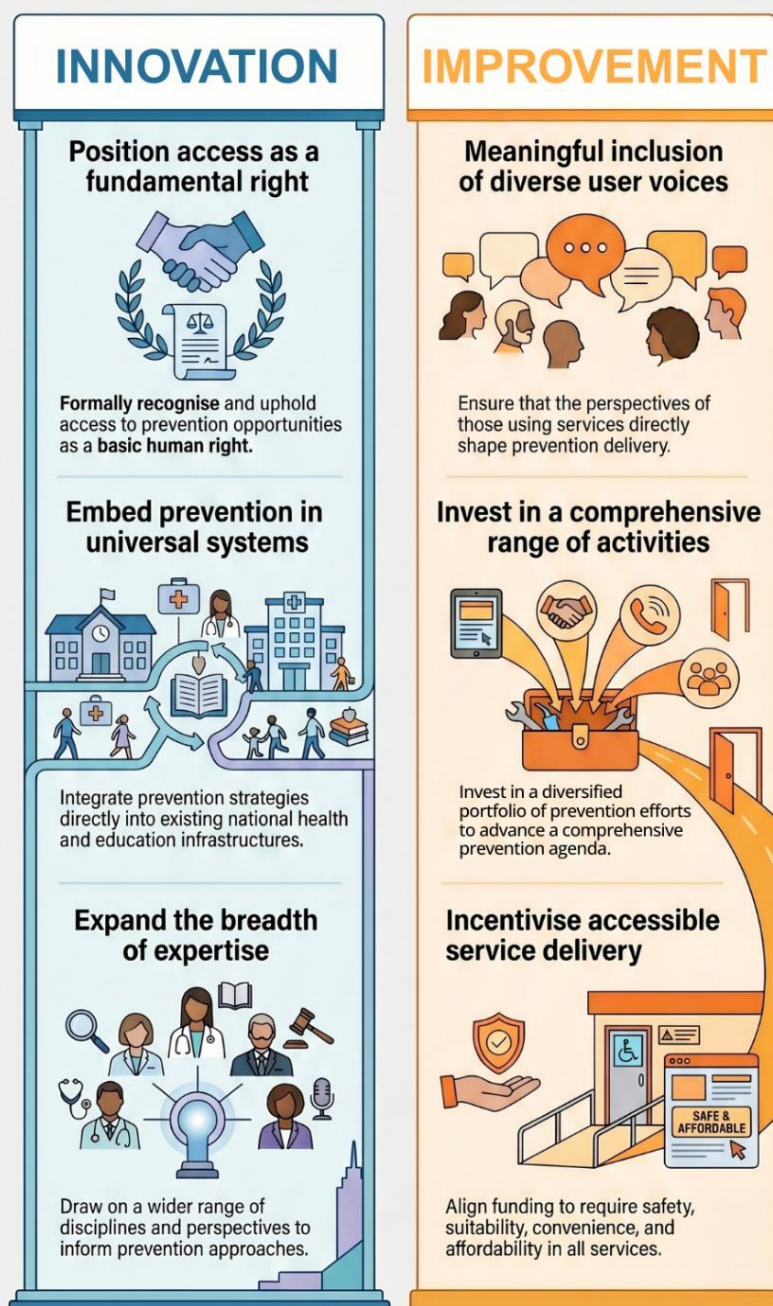
Finding 7: Access to prevention is not equal

Access to prevention opportunities is constrained at multiple points. Some children and families miss out because prevention activities are not available locally. Others are unaware of these opportunities. Even for those who are aware, uptake may be impacted because these opportunities aren't convenient, affordable, safe or suitable. For others, the benefits of accessing prevention opportunities may not be recognised. Together, these factors reduce access to child sexual abuse prevention, meaning some children in Australia continue to miss out.

Framework Outline

The Framework for Advancing Accessible Child Sexual Abuse Prevention sets out a two-pillar model, and associated strategies, to enhance the availability and accessibility of prevention opportunities for children and families across Australia. The pillars address both transformational, long-term reform and pragmatic actions to enhance the effectiveness of existing prevention activities in the short to medium term.

Framework to Enhance the Accessibility of Child Sexual Abuse Prevention



NotebookLM

Pillar One: Innovation

Pillar One leverages innovation to drive long-term, systemic and transformational change in child sexual abuse prevention. It supports the development and implementation of new approaches, recognising that ongoing accessibility challenges in the Australian context require a shift beyond conventional models. This pillar comprises three core strategies.

Formally position access to child sexual abuse prevention opportunities as a fundamental right

The [Australian Charter of Healthcare Rights](#) explicitly establishes access to safe, appropriate healthcare as a fundamental right, not merely a principle of good practice. While this Charter was developed within the broader health discipline, it offers relevant insights that can inform efforts to advance accessibility to child sexual abuse prevention. Indeed, although children's rights to protection from violence and abuse are articulated in key international and national guidelines and are supported by principles of access to quality services, this right to access could be more explicitly embedded within Australia's child sexual abuse prevention policy guidelines. In parallel with the Australian Charter of Healthcare Rights, the development of an Australian Charter of Children's Safety Rights could formally recognise access to prevention opportunities as a fundamental right for all children and families, strengthening accountability at all levels for advancing an accessible prevention agenda. Given the National Accessibility Study indicates that access to prevention in Australia is not currently equitable, framing access as a fundamental right would elevate and solidify accessibility as a key policy priority.

Embed prevention in universal health and education systems

Embedding primary and secondary prevention of child sexual abuse within universal health and education services represents a strategic opportunity to provide a holistic and safe pathway for delivering prevention messaging, education and early intervention to children and families across Australia, addressing many of the barriers identified in the National Accessibility Study. Leveraging existing engagement within these universal systems reduces

barriers to participation in prevention, while their widespread geographic footprint enhances reach and supports more equitable and efficient access and availability across regional, rural and remote communities. Although specialist services are critical in responding to incidents of child sexual abuse, locating prevention primarily within specialised settings may unintentionally reinforce stigma and limit engagement. Integrating child sexual abuse prevention within universal health and education services also provides opportunities to expand delivery mechanisms for primary prevention (for example embedding exploration of child sexual development into infant parenting programs, or having paediatric nurses introduce prevention messages early in children's development) and supports a more coordinated and less fragmented system nationwide.

Expand the breadth of expertise informing child sexual abuse prevention to include a wider range of disciplines and perspectives

Multidisciplinary collaboration is well established in child sexual abuse prevention, traditionally encompassing child protection, justice and law enforcement, and health sectors, and increasingly technology disciplines in response to the proliferation of online child sexual abuse material offences. However, opportunities remain to expand this approach beyond current capabilities, engaging additional disciplines not routinely involved in prevention, to help address critical barriers to accessibility. For instance, marketing professionals could support efforts to reduce stigma and promote the value of prevention activities to community members. Social media, AI and other digital technology specialists could extend the reach of prevention activities, including among young people. Urban planners and architects could also contribute by routinely embedding safety-by-design principles within built environments, enabling risk reduction in ways that do not depend on direct community participation. Collectively these new disciplines could contribute to addressing multiple barriers raised in the National Accessibility Study.

Pillar Two: Improvement

Pillar Two strengthens existing prevention approaches by improving their safety, suitability, convenience, and affordability, while supporting a more comprehensive prevention agenda. It prioritises actions that deliver measurable improvements in access to prevention opportunities in the short to medium term. This pillar also comprises three core strategies.

Ensure meaningful inclusion of diverse user voices

To strengthen accessibility, prevention systems should embed the perspectives of those directly impacted. Evidence from the National Accessibility Study suggests that professionals may underestimate barriers faced by priority populations, and that young people experience different challenges and preferences for accessing prevention activities than adults. Co-design approaches and incorporating user group representation in prevention activity and service oversight are critical to reducing barriers and aligning service delivery with diverse user needs.

Invest in a comprehensive range of prevention activities

Evidence from the National Accessibility Study indicates that prevention activities with higher levels of investment in promotion and funding support demonstrate greater community awareness, suggesting this investment has been effective. Knowing this, increasing and broadening investment to promote a varied suite of prevention initiatives will increase the range of available options for children and families, strengthening access and advancing a more comprehensive prevention framework.

Align funding mechanisms to require and incentivise accessible service delivery, with a focus on safety, suitability, convenience, and affordability

The National Accessibility Study demonstrates that access to prevention activities is shaped by practical factors (such as location, cost, and timing) and the delivery of safe, inclusive experiences. Funding mechanisms should embed accessibility as a core requirement, mandating that providers deliver prevention activities that are responsive to and reflective of

community needs. This should include staff development to build capacity for accessible service delivery for all children and families, including priority populations, as highlighted by survey respondents.

Next Steps

Development of this Framework was directly informed by findings from the National Accessibility Study, which identified a need for both ‘big picture’ transformational reforms and opportunities to strengthen existing approaches. Recommended ‘next steps’ are outlined below.

Policy and Practice

A commitment to a ‘just’ prevention agenda (Rayment-McHugh & McKillop, 2025) – one that ensures equitable access to prevention opportunities for all children and families – is fundamental to implementing this framework. Both pillars warrant prioritisation; however, they are designed to enable incremental implementation, with Pillar Two progressed in the short term while longer-term planning and strategy development lay the foundation for transformational change under Pillar One. Effective delivery of each strategy will depend on strategic leadership, context-specific implementation, and engagement with community voices, alongside commitment at both government and organisational/provider levels. In some jurisdictions, Pillar Two improvements are already being implemented and now require national scale-up.

Evaluation

Comprehensive monitoring and evaluation mechanisms should be embedded within implementation of all strategies under the two pillars, to support effectiveness, accountability, and continuous improvement. Evaluation should occur at both policy and practice levels, capturing national outcomes alongside impacts for individual children and families.

Rayment-McHugh, S., McKillop, M., Price, S., & Adams, D. (2026). *Framework for Advancing Accessible Child Sexual Abuse Prevention in Australia*. Sexual Violence Research & Prevention Unit, University of the Sunshine Coast.

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From Survey Findings to Framework Strategies

Table 1: Survey findings informing strategies to advance an accessible child sexual abuse prevention agenda

| Key Findings | Recommendations | Pillar One Innovation | Pillar Two Improvement |
|--|--|--|--|
| 1. Availability and awareness gap in child sexual abuse prevention | Closing this gap will require new and innovative approaches to increase the availability of prevention activities and improve awareness of prevention opportunities. | <ul style="list-style-type: none"> • Embed prevention in universal health and education systems • Expand the breadth of expertise informing child sexual abuse prevention to include a wider range of disciplines and perspectives | |
| 2. Investment in prevention matters | Investment is needed in a broader range of prevention initiatives to support a more comprehensive approach to prevention | | <ul style="list-style-type: none"> • Invest in a comprehensive range of prevention activities |
| 3. Where people live impacts access to prevention opportunities | Strengthen access and accessibility in regional, rural, and remote communities as a priority to ensure equitable access to prevention nationwide. | <ul style="list-style-type: none"> • Embed prevention in universal health and education systems | |
| 4. Age influences facilitators and barriers to access | Prioritise the active engagement of young people to inform the design and implementation of prevention activities and services | | <ul style="list-style-type: none"> • Ensure meaningful inclusion of diverse user voices |
| 5. Accessibility challenges are underestimated by professionals | Recognise and embed the voices of priority populations as central to the design and implementation of prevention activities and services. | | <ul style="list-style-type: none"> • Ensure meaningful inclusion of diverse user voices |
| 6. No single factor determines accessibility | Prioritise accessibility in the design and delivery of prevention activities and services | <ul style="list-style-type: none"> • Embed prevention in universal health and education systems | <ul style="list-style-type: none"> • Align funding mechanisms to require and incentivise accessible service delivery, with a focus on safety, suitability, convenience, and affordability |
| 7. Access to prevention is not equal | Promote a 'just' prevention agenda that delivers equitable and accessible prevention by expanding availability, enhancing awareness, ensuring safety and convenience, and fostering community recognition and uptake | <ul style="list-style-type: none"> • Formally position access to child sexual abuse prevention opportunities as a fundamental right • Embed prevention in universal health and education systems • Expand the breadth of expertise informing child sexual abuse prevention to include a wider range of disciplines and perspectives | |