

# Service Mapping Report

## Child Sexual Abuse Preventative Education, Support, Intervention and Recovery Services in the NSW Bega Valley

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### **Acknowledgements**

This Service Mapping Report was produced with funding from the National Centre for Action on Child Sexual Abuse. The National Centre gratefully acknowledges funding from the Australian Government and other support it has received, without which this work would not have been possible. The findings and views reported in this Service Mapping Report are those of the authors.

The National Centre for Action on Child Sexual Abuse is an independent organisation established to increase community understanding of child sexual abuse, promote effective ways for protecting children, guide best practice responses and reduce the harm child sexual abuse causes.

The National Centre respectfully acknowledges and celebrates the many Traditional Owners of the lands throughout Australia and pay our respects to ancestors of this country and Elders past and present. We recognise that Aboriginal and Torres Strait Islander communities, culture and lore have existed within Australia continuously for 65,000 years.

We acknowledge the ongoing leadership of Aboriginal and Torres Strait Islander communities across Australia and those who have and continue to work tirelessly to address inequalities and improve Aboriginal and Torres Strait Islander justice outcomes for children and young people. The National Centre is committed to ensuring that the voices of those whose lives are affected by the decisions governments make should fundamentally inform those decisions. First Nations voices must be heard, raised and amplified through a Voice to Parliament. It is time for genuine and significant reform to progress healing through the Uluru Statement from the Heart.

We seek to honour the lived expertise of all survivors of child sexual abuse, harnessing all ages, cultures, abilities and backgrounds, and commit to substantially addressing the harm of child sexual abuse, now and well into the future. We recognise that there are children and young people today who are experiencing sexual abuse and dedicate ourselves to doing all we can to promote their effective protection and care.

### **Commitment of National Centre for Action on Child Sexual Abuse**

The establishment of a National Centre to raise awareness and understanding of the impacts of child sexual abuse, support help-seeking and guide best practice advocacy and support and therapeutic treatment was a key recommendation (9.9) of the 2019 Royal Commission into Institutional Responses to Child Sexual Abuse. The Royal Commission identified that ongoing national leadership is necessary to improve outcomes for victims and survivors of past child sexual abuse and prevent future child sexual abuse.

Established in late 2021, the National Centre is a partnership between three respected organisations with strong histories of leadership in responding to the child sexual abuse - Australian Childhood Foundation, Blue Knot Foundation and the Healing Foundation (each a Founding Member). The

National Centre has an integrated governance structure that embeds the expertise of adults with lived and living experience of child sexual abuse, the rich strength of knowledge of First Nations Peoples and the voices of children and young people, as well as the expertise of researchers, practitioners, justice organisations, corporate entities, government and policy leaders.

At its core, the National Centre is a symbol of hope and an essential vehicle for action for many victims and survivors of child sexual abuse. Its vision is for a community where children are safe and victims and survivors are supported to heal and recover, free of stigma and shame – a future without child sexual abuse.

To achieve its vision, the National Centre:

- ensures the knowledge and voice of victim survivors of child sexual abuse is at the core of all of its activities
- commissions critical research
- builds the workforce capability of organisations working with victims and survivors of child sexual abuse
- strives to raise community awareness of the nature of child sexual abuse and how to prevent it.

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### **Safety Note**

Child sexual abuse can be difficult for many people to read about. If you feel distressed by the contents of this report, please consider reaching out to a friend, family member or professional for help. Below are several telephone support services you may wish to contact:

- Blue Knot Foundation: **1300 657 380** or [www.BlueKnot.org.au](http://www.BlueKnot.org.au)
- 1800Respect: **1800 737 732** or [www.1800Respect.org.au](http://www.1800Respect.org.au)
- Lifeline: **13 11 14** or [www.LifeLine.org.au](http://www.LifeLine.org.au)
- Kids Helpline: **1800 55 1800** or [www.KidsHelpline.com.au](http://www.KidsHelpline.com.au)

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# Definitions and Concepts

**Child sexual abuse:** The umbrella term ‘child sexual abuse’ in this Service Mapping Report is designed to be inclusive of the following concepts:

- Child sexual abuse<sup>1</sup>: Any act which exposes a child or young person to, or involves a child in, sexual processes beyond their understanding or contrary to accepted community standards. Sexually abusive behaviours can include the fondling of genitals, masturbation, oral sex, vaginal or anal penetration by a penis, finger, or any other object, fondling of breasts, voyeurism, exhibitionism, and exposing the child or young person to or involving them in pornography.
- Grooming<sup>2</sup>: Building a relationship, emotional connection or trust with a child, young person or their family and friends online or offline with the intention of committing a sexual offence.
- Child sexual exploitation<sup>3</sup>: A form of sexual abuse targeting children and young people under 18 who are manipulated or coerced to undertake sexual acts in exchange for any actual or promised benefit, for example food, accommodation, affection, money and/or gifts.
- Online child sexual abuse and exploitation<sup>4</sup>: All child sexual abuse and exploitation that at any point has a connection to the online environment.

**Child or young person:** A person under the age of 18 years old.

**Children with harmful sexual behaviours<sup>5</sup>:** A child or young person who may exhibit a broad range of sexual behaviours that affects their own development, as well as behaviours that are coercive, sexually aggressive or predatory to others.

**Local:** Relating to the NSW Bega Valley Shire.

**Perpetrator<sup>6</sup>:** An adult who has sexually abused a child or young person, but who may or may not have been convicted of this crime.

**Person who has experienced child sexual abuse<sup>7</sup>:** A person of any age who has experienced child sexual abuse (as defined by the concepts above) when they were under 18, including persons who identify as a ‘victim’ or ‘survivor’ of child sexual abuse.

**Stakeholders:** Any or all of the groups below:

- Adults in the Bega Valley who experienced child sexual abuse when they were under 18.
- Supporters of people (of any age) in the Bega Valley who have experienced child sexual abuse.
- Members of the *Community as Experts* Research Team.
- Members of the *Community as Experts* Advisory Committee.
- Community members who live, work or study in the Bega Valley.
- Service partners and supporting groups/agencies who have contributed to this research.
- Any services or individuals with an interest in the outcomes of the research findings.

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<sup>1</sup> Royal Commission into Institutional Responses to Child sexual abuse, Nature and Cause, <https://www.childabuseroyalcommission.gov.au/nature-and-cause>

<sup>2</sup> National Centre for Action on Child Sexual Abuse (2023). Language Guide.

<sup>3</sup> *ibid.*

<sup>4</sup> *ibid.*

<sup>5</sup> Commonwealth of Australia, Department of the Prime Minister and Cabinet, *National Strategy to Prevent and Respond to Child Sexual Abuse 2021–2030* (2021), pp13.

<sup>6</sup> *ibid.*

<sup>7</sup> Whilst efforts have been made to adhere to the National Centre for Action on Child Sexual Abuse (2023) Language Guide, the Advisory Committee for this particular research has indicated a preference for removing victimhood and survivorship from this definition, instead emphasising human experience rather than the personal identity of someone who has gone through child sexual abuse.

**Supporters/support person<sup>8</sup>:** Any trusted person within the formal or informal support network of a victim and/or survivor of child sexual abuse, such as:

- Carers, relatives or family members of any kind who have supported a victim and survivor such as parents, siblings, extended family, stepfamilies, adoptive or foster families, or individuals identified as kin.
- Professionals who have supported a victim and survivor, regardless of the age of the victim or survivor at the time they received professional support.
- Any person who a victim or survivor has disclosed an experience of child sexual abuse to, regardless of the age of the victim or survivor at the time that they disclosed.
- Any other person who has supported a victim or survivors' recovery from child sexual abuse in a specialist, non-specialist or personal capacity, and regardless of the age of the victim or survivor when they were supported (including but not limited to teachers, youth workers, neighbours, close friends, community leaders and confidantes)

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<sup>8</sup> We acknowledge that people can be supporters at any age, including children or young people who are or were childhood siblings, friends or classmates of a person who has experienced child sexual abuse.

# Executive Summary

This service mapping report examines the landscape of child sexual abuse prevention, support, intervention, and recovery services in the NSW Bega Valley region. The research was conducted as part of the broader "Community as Experts" project, funded by the National Centre for Action on Child Sexual Abuse.

## Key Findings

### Service Landscape Overview:

- 30 organizations participated in the survey, representing government agencies (11%), non-government organizations (47%), private practitioners (21%), and other community groups (21%)
- Services span multiple sectors including mental health (15%), education (10%), domestic violence (10%), and youth services (10%)
- Only 79% of respondents provide services to target populations, highlighting limited specialised support

### Critical Service Gaps:

1. **Insufficient specialised services** - 30% of respondents identified inadequate services for child sexual abuse survivors, supporters, and perpetrators as the primary challenge
2. **Workforce shortages** - 20% noted limited skilled practitioners and specialist expertise
3. **Inadequate institutional responses** - 17% cited poor communication and slow responses from government agencies (such as Department of Communities and Justice, Police)
4. **Access barriers** - Long waitlists, lack of affordable counselling and travel distances

### Geographic and Funding Challenges:

- Services are concentrated in Bega with limited rural coverage
- 50% rely on government funding, while 29% depend on precarious project-based funding
- Distance and poor mobile/internet connectivity limit service access in more remote locations in the Bega Valley

### Major Recommendations

1. **Implement coordinated primary prevention strategies** to empower parents, children, young people, community members and perpetrators to know that child sexual abuse can be stopped and to work to change the sociomaterial conditions that perpetuate secrecy, excuse or justify child sexual abuse. In Bega, if secrecy can be challenged across the community child sexual abuse can be prevented and stopped.
2. **Establish dedicated support services** for non-offending family members and friends supporting victims and survivors of child sexual abuse.
3. **Establish help seeking services** for members of the community concerned that someone they know may be at risk of perpetrating child sexual abuse or may be experiencing sexual abuse.
4. **Create peer support services** in the Bega Valley, so that victims and survivors of child sexual abuse can access support from local people with lived experienced of child sexual abuse.
5. **Extend the capabilities of practitioners** from a range of organisations in the Bega Valley including Aboriginal and Torres Strait Islander practitioners to respond to victims and survivors of child sexual abuse and their supporters.
6. **Expand workforce capability** through training and clinical supervision to specialist practitioners ( social workers, psychologists, counsellors) to respond to victims and survivors of child sexual abuse and their supporters with cultural humility and in culturally safe ways.
7. **Improve funding stability** by transitioning from project-based to sustainable, ongoing funding models.

The report emphasises the need for a holistic, comprehensive, coordinated approach that integrates prevention, early intervention, and response services across the Bega Valley communities, with particular attention to the challenges of rural service delivery.

# 1. Background

## 1.1 Child sexual abuse in the NSW Bega Valley

Child sexual abuse is a significant issue in the Bega Valley Shire, with the reported prevalence of child sexual abuse in this region being amongst the 40 highest local government areas in New South Wales (BOCSAR, 2021). The actual prevalence of child sexual abuse in the Bega Valley is likely to be significantly higher due to the many instances of child sexual abuse that do not come to the attention of the justice system for a wide range of reasons including fear of stigma, gossip, judgment, perpetrator repercussions, community perceptions, unhelpful institutional and/or community responses and differences in peoples' understanding of what constitutes child sexual abuse.

Opportunities for victims and survivors of child sexual abuse and their supporters to receive appropriate assistance in the Bega Valley are impeded by multiple systemic and geographic barriers including:

- Limited availability of specialist child sexual abuse practitioners in the region, serving a Shire-wide population of 35,942 residents (ABS, 2021).
- Absence of specialist services providing targeted supports to the supporters of victims and survivors of child sexual abuse.
- Waiting lists or 'closed books' (not accepting new clients) for many General Practitioners and Psychologist services in the region due to demand, with the majority of these practices also requiring patient co-payments.
- Many free local mental health services and non-government community services can have waiting lists of up to six months or cannot accept new clients due to demand.
- Living in a small regional community magnifies risks of stigmatisation or judgment for victims and survivors of child sexual abuse and their supporters (Owen and Carrington, 2014).
- Fear of community repercussions from disclosure are heightened when the perpetrator lives locally, especially if the victim or survivor is not believed (George and Harris, 2015).
- No publicly available data exists about the experiences and needs of victims and survivors of child sexual abuse and their supporters in the Bega Valley.

As a result of these challenges, barriers and disadvantages, local victims and survivors of child sexual abuse and their supporters often experience significant challenges in being willing or able to access, afford and utilise services that are appropriate for their needs.

## 1.2 The Bega Valley *Community as Experts* Research Project

The NSW Bega Valley *Community as Experts* research project is a locally-initiated partnership project between Sapphire Neighbourhood Services, the Peregrine Centre and the University of Canberra, conducted with funding from The National Centre for Action on Child Sexual Abuse.

The aim of the research is to investigate the context, needs and help-seeking pathways of adult victims and survivors of child sexual abuse and their supporters in the NSW Bega Valley with the intent to yield practical findings that could assist local residents, professionals, community members and diverse stakeholders to better respond to and support victims and survivors of child sexual abuse as well as their supporters.

This Bega Valley Service Mapping Report forms one component of the broader, mixed methods *Community as Experts* research project.

## 1.3 About this Service Mapping Report

The *Community as Experts* Service Mapping Report includes a respondent-nominated inventory of Bega Valley services and programs that either:

- Formally support people whose presenting issue is child sexual abuse; and/or,
- Formally or informally support people who may disclose child sexual abuse later during their service participation, regardless of whether the support service is formal or professional; and/or,
- Wish to share observations, service gaps or ideas relating to how services, programs and groups could better address the issue of child sexual abuse in the NSW Bega Valley

The purpose of the Service Mapping Report is to:

1. Document the structured/organised external support options available to victims and survivors of child sexual abuse and their supporters in the Bega Valley (including therapeutic, specialist, professional, clinical and non-specialist supports)
2. Highlight situational barriers and service gaps impacting the needs or healing of victims and survivors of child sexual abuse and their supporters in the Bega Valley
3. Offer suggestions for how to improve local interventions, services and supports for victims and survivors of child sexual abuse and their supporters in the Bega Valley, as well as communities impacted by child sexual abuse more generally

The Service Mapping Report documents findings in these areas from the perspective of the local service providers (respondents) who deliver professional groups, programs, therapeutic and non-therapeutic services to child sexual abuse victims and survivors and their supporters. Responses have also been incorporated from volunteer or non-professional groups and services that do not specifically support child sexual abuse victims or survivors, but who wish to share their observations and opinions relating to local responses to child sexual abuse.

## 2. Methodology

### 2.1 Purpose

To identify the services and programs available in the Bega Valley to people of any age who have been directly or indirectly impacted by child sexual abuse (including victims, survivors and supporters) and identify the challenges and gaps in services in the Bega Valley.

### 2.2 Method

A 14-question online survey was created using Qualtrics software, with an email invitation/link sent to 112 government agencies, service providers, clubs, groups and other community programs in the NSW Bega Valley, Australia. The recipients of this link were primarily identified through local interagency email lists (e.g. Bega Interagency, Eden Interagency) as well as those listed on the Bega Valley Shire Council's Community Directory<sup>9</sup>, a public listing of local community services and groups including email addresses.

Additionally, some respondents were specifically targeted and followed up after a desktop review of child sexual abuse related agencies, where non-respondents from services supporting the target groups (e.g. NSW Health, DCJ) were directly invited to participate.

### 2.3 Scope

In line with the *National Strategy to Prevent and Respond to Child Sexual Abuse 2021–2030* (2021)<sup>10</sup>, the Service Mapping activity used a public health approach that examined primary, secondary and tertiary approaches to child sexual abuse, which in turn were linked to different target groups in the service mapping process as outlined in Table 1 below.

**Table 1: Intervention Level Definitions and Relationship to Service Mapping Target Groups**

Intervention	Definition	Target Group/s during Service Mapping
Primary	Whole-of community responses or preventive approaches to child sexual abuse	<ul style="list-style-type: none"><li>• Preventative education programs for adults on recognising the signs of child sexual abuse, keeping children safe from sexual abuse or other topics related to child sexual abuse</li><li>• Protective behaviours programs for children or young people relating to inappropriate sexual contact, grooming or other topics related to child sexual abuse</li><li>• Preventative programs for perpetrators relating to inappropriate sexual contact, grooming or other topics related to child sexual abuse</li><li>• Non-professional groups and programs (e.g. recreational groups) who may incidentally support victims or survivors of child sexual abuse</li></ul>
Secondary	Early intervention responses to child sexual abuse, including reducing risk for those	<ul style="list-style-type: none"><li>• Services, groups or programs for people seeking general information, advice or help relating to child sexual abuse</li><li>• Specialist services for children or young people who display signs of early sexualised behaviours</li></ul>

<sup>9</sup> <https://begavalley.nsw.gov.au/community/community-directory>

<sup>10</sup> Commonwealth of Australia, Department of the Prime Minister and Cabinet, *National Strategy to Prevent and Respond to Child Sexual Abuse 2021–2030* (2021).

	vulnerable to child sexual abuse	<ul style="list-style-type: none"> <li>• Specialist services for children or young people who display harmful sexual behaviours</li> <li>• Non-specialist services that may support victims or survivors of child sexual abuse during their usual work (e.g. teachers)</li> </ul>
Tertiary	Professional or organised responses following child sexual abuse, including prevention of recurrence	<ul style="list-style-type: none"> <li>• Specialist therapeutic services supporting victims or survivors of child sexual abuse at any age (e.g. counselling)</li> <li>• Specialist non-therapeutic services supporting victims or survivors of child sexual abuse at any age (e.g. legal)</li> <li>• Specialist therapeutic services supporting the support persons of victims/survivors (e.g. counselling)</li> <li>• Specialist non-therapeutic services supporting the support persons of victims/survivors (e.g. legal)</li> </ul>
Quaternary	Including evaluations of responses following such sexual abuse	<ul style="list-style-type: none"> <li>• NA (this Service Mapping Report represents a quaternary activity)</li> </ul>

Prior to completion, respondents were informed of the survey’s aim to investigate the services available in the Bega Valley for people seeking support relating to child sexual abuse, as well as feedback from survey participants about local challenges, gaps, barriers and issues in the service landscape relating to supports for people impacted by child sexual abuse.

Respondents were not given a precise definition of child sexual abuse, allowing them freedom to interpret this concept however they chose. All respondents were encouraged to complete the survey even if they did not provide specialist services, to offer them the opportunity to discuss any observations or ideas relating to this topic area.

Whilst quaternary (evaluative) public health activities were not included in the Service Mapping process, this report incorporates general evaluative feedback from respondents relating to how the issue of child sexual assault is addressed in the NSW Bega Valley.

This service mapping activity sought information from professional and non-professional programs and groups that delivered a range of services to people impacted by child sexual abuse, including children, young people, adults, and carers or loved ones of people who had experienced child sexual abuse. In addition to targeting agencies where child sexual abuse may be a presenting issue or a primary reason for service provision, the survey was also available to programs and groups that may indirectly support people impacted by child sexual abuse; for example, where this was not the primary reason for service delivery but was an underlying factor that arose later during service delivery.

The service mapping did not include questions or assessments of any confidential aspects of local services or groups, such as funding amounts, business challenges, or staff qualifications or capacity. The activity also did not explicitly seek out information about other types of child protection activities that services may deliver, such interventions for physical abuse, neglect or domestic and family violence.

## 2.4 Service Mapping Questions

The methodology and questions utilised in this Service Mapping Report are based upon a child sexual abuse service mapping report conducted by the Commissioner for Children and Young People (2018)<sup>11</sup>; with additional questions and focus areas included as appropriate to the community of the Bega Valley as well as the overall *Community as Experts* project scope.

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<sup>11</sup> Commissioner for Children and Young People (2018), *Western Australian service mapping – Services for children and young people who have experienced sexual abuse or display harmful sexual behaviours*, Commissioner for Children and Young People WA, Perth.

The 14 questions were:

1. What is the name of the business, service or group that you work for?
2. What is the main contact telephone number for your business or organisation?
3. If relevant, please mention which department or team you work within:
4. Which of these categories BEST describes your business or organisation?
  - Government agency/department
  - Non-government organisation
  - Private practitioner or private company
  - Other (*please specify*)
5. What sector BEST describes your business or organisation?
  - Education
  - Justice
  - Sexual assault services
  - General Medical Practice
  - Emergency Department
  - Community health
  - Legal
  - Child protection
  - Early intervention
  - Domestic and family violence
  - Housing or accommodation service
  - Mental health
  - Youth services
  - Aboriginal community-controlled organisation (ACCO or ACCHO)
  - Disability
  - Drug and alcohol
  - Multicultural services
  - LGBTQI+ services
  - Welfare or social support service
  - Other (*please specify*)
6. Please indicate if your business or organisation delivers any of the following.
  - Services for children (under 12 years) who have experienced child sexual abuse, grooming, child sexual exploitation and online child sexual exploitation and grooming
  - Services for young people (12 – 17 years) who have experienced child sexual abuse, grooming, child sexual exploitation and online child sexual exploitation and grooming
  - Services for adults who have experienced child sexual abuse
  - Services for carers or family members of a child who has experienced child sexual abuse
  - Services for children or young people who display signs of early sexualised behaviours
  - Services for children or young people who display harmful sexual behaviours
  - Preventive education for adults or families on recognising the signs of child sexual abuse, keeping children safe from sexual abuse or other topics related to child sexual abuse
  - Protective behaviours education for children (under 12 years) relating to inappropriate sexual contact, grooming or other topics related to child sexual abuse
  - Protective behaviours education for young people (12 – 17 years) relating to inappropriate sexual contact, grooming, consent or other topics related to child sexual abuse
  - Any other services for individuals or groups who are seeking information, advice or help relating to child sexual abuse (*please specify*)
  - None of the above (*skip to Q14 if this is answered*)

7. What is the name of your specific program/s or service/s that can support people seeking information, advice or help relating to child sexual abuse?

8. What is the funding source for this program or service/s? *(Select all that apply)*

- Government-funded
- Medicare-funded
- Client fees or co-payments
- Project funding (not ongoing funding)
- Other *(please specify)*

9. Which location/s in the Bega Valley does this program or service/s operate in? *(Select all that apply)*

- Bega
- Bermagui
- Candelo
- Cobargo
- Eden
- Merimbula
- Pambula
- Tathra
- Tura Beach
- At the person's home
- Everywhere in the Bega Valley
- Telehealth or videoconferencing options
- Other location/s in the Bega Valley *(please specify)*
- None of the above

10. Does this program or service/s use a triage process to prioritise different people based on their needs and urgency?

- Yes
- No
- Don't know

11. What eligibility criteria do people need to meet to use this program or service/s? *(e.g. age criteria, referral criteria, client/patient characteristics, NDIS plan or Mental Health Care Plan)*

12. Please list any exclusion criteria for this program or service/s. *(For example, people with offending/violent behaviour, unable to assist relating to historical abuse, age criteria)*

13. What is the referral process if someone wanted to use this program or service/s? *Select all that apply.*

- Self-referral
- Referral via a medical practitioner
- Referral by Department of Communities and Justice
- Referral by another agency
- Other *(please specify)*

14. Please tell us about any issues, challenges, service gaps or barriers that you have noticed in the Bega Valley relating to services for children or adults seeking information, advice or help relating to child sexual abuse *(Comments in this section will be collated with other responses and will NOT be linked to your organisation, service or department)*

## 3. Survey Results and Analysis

This section provides a descriptive statistical analysis of the survey participants' responses to the survey questions.

## 3.1 Overview of respondents

30 respondents participated in the survey, from the following organisational types:

- 11% government agencies/departments
- 47% non-government organisations
- 21% private practitioners or private companies
- 21% other types of groups, programs, social enterprises, clubs or services. Specifically, these respondents encompassed: Fitness, Injury and Rehabilitation; Community Art Classes for Children and Adults; Community and cultural space from which community groups can operate; youth social enterprise; community centre; and social justice advocacy.
- Twenty-one percent (21%) of survey respondents identified that their organisation does not provide specific services to support the target groups and, accordingly, they were referred to question 14 which invited them to provide their views on the issues, challenges, service gaps or barriers that they have noticed in the Bega Valley relating to services for children or adults seeking information, advice or help relating to child sexual abuse

## 3.2 Service Types

Respondents who supported the target groups belonged to the following service sectors:

**Table 2: Service Sectors of Respondents Supporting Target Groups**

Sector	Number of respondents supporting target groups	Percentage of respondents supporting target groups
Education	2	10%
Justice	1	5%
Sexual assault services	1	5%
Community health	1	5%
Legal	1	5%
Domestic and family violence	2	10%
Housing or accommodation service	1	5%
Mental health	3	15%
Youth services	2	10%
Aboriginal community-controlled organisation (ACCO or ACCHO)	1	5%
Welfare or social support service	2	10%
Other	3	15%
<b>Total</b>	<b>20</b>	<b>100%</b>

These results demonstrate respondents worked in a broad range of sectors, illustrating that child sexual abuse is an issue that presents to many different services, suggesting that education in responding to child sexual abuse is needed across the service system.

### 3.2.1 Services and Programs delivered in relation to child sexual abuse

The number of services delivered by respondents across different target group categories included:

**Table 3: Respondent Service Delivery Type by Target Group/s**

Target group category <sup>12</sup>	Number of respondents supporting target groups	Percentage of respondents supporting target groups
Services for children (under 12 years) who have experienced child sexual abuse, grooming, child sexual exploitation and online child sexual exploitation and grooming	4	17%
Services for young people (12 – 17 years) who have experienced child sexual abuse, grooming, child sexual exploitation and online child sexual exploitation and grooming	6	25%
Services for adults who have experienced child sexual abuse	9	37.5%
Services for carers or family members of a child who has experienced child sexual abuse	7	29%
Services for children or young people who display signs of early sexualised behaviours	5	21%
Services for children or young people who display harmful sexual behaviours	5	21%
Preventive education for adults or families on recognising the signs of child sexual abuse, keeping children safe from sexual abuse or other topics related to child sexual abuse	2	8.3%
Protective behaviours education for children (under 12 years) relating to inappropriate sexual contact, grooming or other topics related to child sexual abuse	3	12.5%
Protective behaviours education for young people (12 – 17 years) relating to inappropriate sexual contact, grooming, consent or other topics related to child sexual abuse	2	8.3%
Any other services for individuals or groups who are seeking information, advice or help relating to child sexual abuse ( <i>these included: counselling for students who have experienced Child Sexual Abuse, child development, counselling for mental health issues related to Child Sexual Abuse</i> )	5	21%

### 3.2.2 Funding sources

The funding source for the different services delivered by respondents included:

**Table 4: Funding Source/s for Respondents' Services**

Funding Source <sup>13</sup>	Number of respondents supporting target groups	Percentage of respondents supporting target groups
Government-funded	12	50%
Medicare-funded	1	4.2%
Client fees or co-payments	1	4.2%
Charity-donations	1	4.2%
Project funding (not ongoing funding)	7	29.2%
Other	2	8.3%

<sup>12</sup> Some services delivered groups or programs across multiple target group categories

<sup>13</sup> Some services delivered groups or programs across multiple funding sources

Survey responses demonstrate that half of survey respondents' organisations receive government funding to support child sexual abuse services and responses in the Bega Valley. A third of respondents relied on precarious, project-based funding which makes continuity of service and program provision planning difficult.

### 3.3 Location across the Bega Valley

The geographic locations for the different services delivered by respondents included:

**Table 5: Service Location for Respondents' Services**

Service location <sup>14</sup>	Number of respondents	Percentage of respondents
Bega	5	17%
Bermagui	1	3.3%
Candelo	1	3.3%
Cobargo	2	7%
Eden	3	10%
Merimbula	2	7%
Pambula	1	3.3%
Tathra	1	3.3%
Tura Beach	1	3.3%
At the person's home	4	13.3%
Everywhere in the Bega Valley	7	23.33%
Telehealth or videoconferencing options	4	13.3%
Other location/s in the Bega Valley ( <i>i.e. Wallaga Lake</i> )	1	3.3%
None of the above	2	7%

### 3.4 Eligibility and referral processes.

**Table 6 Use of a triage process to prioritise different people based on their needs and urgency**

Triage process	Number of respondents	Percentage of respondents
Yes	8	27%
No	3	10%
Don't know	1	3.3%
Didn't answer	18	60%

#### 3.4.1 Eligibility Criteria

Respondents detailed the following eligibility criteria in their free text responses to this question.

**Table 7 Eligibility criteria for the program for service/s.**

<sup>14</sup> Some services delivered groups or programs across multiple locations including online or via telehealth

Eligibility criteria	Number of respondents	Percentage of respondents
Aboriginal and/or Torres Strait women and their families	1	3.3%
Any person can seek free initial legal assistance and advise. Ongoing assistance for financial disadvantaged clients.	1	3.3%
Domestic violence program-women have left a violent relationship	1	3.3%
Young people between the ages for 16yrs-25 years who are homeless or at risk of homelessness	1	3.3%
Have experienced sexual abuse in their childhood	1	3.3%
Part of the educational curriculum for all children attending the program	1	3.3%
Families with children under 18 years at risk of entering the child protection system with at least one vulnerability including factors impacting parenting capacity including exposure to domestic violence or mental health	1	3.3%
Farmers and their families	1	3.3%
Students of the University of Wollongong	1	3.3%
Parents and children	1	3.3%
Young person between ages of 12-25 years	1	3.3%

Only one of the respondent's workplaces included specific eligibility criteria focused on experiencing sexual abuse in their childhood. These responses suggest that for most of the respondents' workplaces child sexual abuse is not a key focus of their service provision, pointing to the scarcity of specialist child sexual abuse services across the Bega Valley.

### 3.4.2 Exclusion criteria

Respondents detailed the following exclusion criteria in their free text responses to this question.

**Table 8 Exclusion criteria for the program for service/s.**

Exclusion criteria	Number of respondents	Percentage of respondents
As a legal service we have ethical reasons we may not always be able to assist someone, in that instance we offer them referrals to A suitable alternative service	1	3.3%
Brighter Futures are excluding from working with families where there is a perpetrator of sexual violence who has a conviction or where the risk of harm concern is too high and is unlikely to be addressed with engagement with the service	1	3.3%
Domestic violence program, men are excluded and women under 18 years of age	1	3.3%
Young people under 16 years and over 25 years of age are excluded.	1	3.3%
	1	3.3%

Non-Aboriginal women with non-Aboriginal family members		
Perpetrators of Child sexual abuse	1	3.3%
Substance abuse	1	3.3%
Sexual assault offenders	1	3.3%
Domestic and family violence	1	3.3%
Acute mental health crisis	1	3.3%
Sapphire Neighbourhood Services exclude people who are a danger to staff	1	3.3%

### 3.4.3 Referral processes for potential service participants

**Table 9 Referral process for the program for service/s.**

Referral Process	Number of respondents	Percentage of respondents
Self-referral	10	33.3%
Referral via medical practitioner	8	27%
Referral via Department of Communities and Justice	6	20%
Referral via another agency	9	30%
Other (friend, or when discharged from hospital)	4	13.3%

## 4. Service Challenges

Survey question 14 asked respondents to identify any challenges, gaps or barriers within programs or across the service system in the Bega Valley relating to services for children or adults seeking information, advice or help in relation to child sexual abuse. A summary that categorised participants responses is listed in Table 10 in descending order from the most common response category

**Table 10 Service challenges, gaps and barriers**

Rank	Service challenges, gaps and barriers	Number of respondents	Percentage of respondents
1	Not enough services for child sexual abuse survivors, supporters or perpetrators	9	30%
2	Limited skilled workforce, specialist practitioners	6	20%
3	Poor communication and slow or unhelpful responses when dealing with government bureaucracies such as Department of Communities and Justice (DCJ) and Police (Lack of sufficient staff in some police stations, high staff turnover in DCJ).	5	17%
3	Long waitlists, overburdened staff in support services, leading to periods of closing the books	5	17%
4	Lack of affordable counselling and support	4	13%
5	Not enough services for informal supporters ( non-offending parents, relatives, friends)	3	10%

6	Distance clients have to travel for services	2	7%
6	Barrier to reporting to police is locals knowing each other	2	7%
6	Increasing complexity of presenting issues	2	7%
6	Inadequate service funding	2	7%
6	Lack of reliable mobile and internet access in many areas – makes accessing services, such as helplines, online services, telehealth, phone appointments difficult	2	7%
7	Lack of culturally safe services for Aboriginal community members for Child Sexual Abuse	1	3.3%
7	No prevention services or programs for perpetrators	1	3.3%
7	Lack of support services for children who sexually offend or they are a long distance away	1	3.3%
7	No peer support programs for survivors or supporters	1	3.3%
7	Lack of affordable housing	1	3.3%
7	Lack of adequate records to assist survivors claim for victim support	1	3.3%
7	Lack of access locally to resources, information and training, practitioners often have to pay for professional development themselves	1	3.3%
7	Fire destroyed communities facilities and space for community groups and it has taken 20years to secure funding and rebuild	1	3.3%

## 2. Conclusion

This service mapping gathered basic information about the responses and support services in place for people who have experienced child sexual abuse and their supporters in the Bega Valley. The responses to the survey questions, especially the free text responses relating to challenges, gaps and barriers resonate with previous research undertaken in other regional and rural areas (Saunders & MCAuthor, 2017; Obrien et. al. 2007).

Service providers identified key challenges for the current service system in the Bega Valley including: 1) insufficient service availability for those who have experienced child sexual abuse, supporters of child sexual abuse victims and survivors and perpetrators of child sexual abuse; 2) a shortage of specialist practitioners and overburdened staff in support services; 3) slow and often unhelpful responses from government bureaucracies including the Department of Communities and Justice and the Police 4) a lack of access to affordable counselling and support; 5) inadequate service funding.

Service providers noted:

- A lack of peer support programs for victims and survivors and their informal supporters (e.g. non-offending parents, relatives or friends).
- An absence of preventative programs aimed at working with perpetrators of child sexual abuse
- Primary prevention strategies are restricted to education of children through schools and early childhood education centres. Coordination and evaluation of the effectiveness of these programs is not in place.

- An absence of primary prevention strategies such as educational programs for parents or community members
- A lack of specialist services for children and young people who display early sexualised behaviours or who enact harmful sexual behaviours. These services are provided by general sexual abuse services and other family support and response services.
- In some parts of the Bega Valley limited mobile coverage and internet access makes accessing online and telephone helplines and telehealth difficult.

The findings from the service mapping survey suggests a shift to a holistic and comprehensive approach to preventing and responding to child sexual abuse in the Bega Valley is required. Enhancements are needed to the availability, accessibility and affordability of specialist services for victims and survivors of child sexual abuse, for children that display harmful sexual behaviours and for non-offending parents, family members and friends that support victims and survivors. Initiatives aimed at preventing child sexual abuse need to be integrated and coordinated with early intervention and response-based initiatives across the Bega valley communities.

## 6. Recommendations

6.1 Currently, there are no coordinated responses that provide prevention strategies to empower parents, Children, young people, community members and perpetrators to know that child sexual abuse can be stopped. Primary prevention strategies need to be implemented that work to change the sociomaterial conditions that perpetuate secrecy, excuse or justify child sexual abuse. In rural communities such as Bega, if secrecy can be challenged across the community child sexual abuse can be prevented and stopped.

6.2 Services need to be provided to non-offending parents, family members and friends who are supporting victims and survivors of child sexual abuse and have been impacted by the abuse.

6.3 Establish help seeking services for members of the community concerned that someone they know may be at risk of perpetrating child sexual abuse or may be experiencing sexual abuse.

6.4 Peer support services need to be provided in the Bega Valley, so that victims and survivors of child sexual abuse can access support from local people with lived experienced of child sexual abuse.

6.5 Funding practitioners from a range of organisations in the Bega Valley including Aboriginal and Torres Strait Islander practitioners to extend their capabilities to respond to victims and survivors of child sexual abuse and their supporters.

6.6 Provide training and clinical supervision to specialist practitioners ( social workers, psychologists, counsellors) from a range of organisations to respond to victims and survivors of child sexual abuse and their supporters with cultural humility and in culturally safe ways.

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## 8. Appendix

Contact details of respondents' workplaces that participated in the survey and other child sexual abuse services- to be added.