

# 2016-2017 ANNUAL REPORT



**Phoenix**  
Support & Advocacy Service Inc

Phoenix Support and Advocacy Service has been operating as an Incorporated Association since 1984 and has a reputation for being a trusted, professional service with well-informed and skilled counsellors.

The service can be described as unique in that it specialises in the area of supporting children and individuals who have experienced childhood sexual abuse through therapeutic counselling and advocating for their rights.

Counselling and support is crucial to an individual's ability to overcome traumatic experiences and Phoenix are able to meet the client's needs by offering both individual and group therapy.

The Trauma Transformation Trial is an indication that Phoenix is focussed on providing well researched and contemporary practice to the community they serve.

In my role as a Social Worker for 25 years I have never hesitated to refer children and families to Phoenix. I have been referring to the service for as long as I can remember and any feedback has been positive. I can always trust that the clients will receive a professional service and that Phoenix will endeavour to meet the needs of each individual.

WA Clinical Practitioner

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# ABOUT PHOENIX SUPPORT AND ADVOCACY SERVICE



## About Us

Phoenix Support & Advocacy Service Inc. (formerly known as ISA – Incest Survivors' Association) supports those impacted by child sexual abuse. Phoenix proudly traces its roots back to 1978 when first established by a team of volunteers. A grant obtained in 1984 allowed the organisation to become formally incorporated as a not-for-profit charity and was the first non-government association to deal specifically with child sexual abuse and the complex trauma that can result as an impact from that abuse. In 1986, Phoenix was offered partial funding by the State Government to provide professional services to the community for a largely hidden community problem.

In 2015 Association members voted to change the name of the organisation to Phoenix Support & Advocacy Service Inc. to represent the broader range of services now offered. Phoenix was formally incorporated under the new name in December 2016. A competition through 99 Designs soon followed this name change to create a new logo and new look for Phoenix and all that it now has to offer beyond its original purpose. The new logo draws on the symbols and mythology of a Phoenix arising from the ashes, with a sunrise that offers the hope of a new day and the first light from the darkness, while the heart represents a service that responds with care and compassion.

Phoenix Support and Advocacy Service remains one of very few organisations in WA specialising specifically in child sexual abuse. Not only does Phoenix support those directly impacted by child sexual abuse, but also family members, significant others and communities impacted by disclosures of child sexual abuse. In addition, Phoenix provides educational groups, and training for allied professionals and the community.

Phoenix provides long term counselling for children, young people, and adults survivors and seeks to leverage its specialised expertise by partnering with other organisations to improve recognition of, and responses to, child sexual abuse.

Currently the youngest clients are 5 years of age and the oldest client to ever access Phoenix was 91 years of age, which in some respects is indicative of no one being too young or too old to receive support. However, this is also indicative of tragically how early in life therapeutic treatments begin, along with how long and lasting can be the devastating effects of child sexual abuse, that even at the end of life memories still haunt, trauma effects can still be triggered, and the road to recovery can remain a life long journey.

Phoenix clients often return to our service months or years after they have taken a break from their recovery journey and when further support is required.

Phoenix is keen to continue delivering this important community service and to advocate for those impacted by child sexual abuse.



Studies and research estimate prevalence as high as 1 in 3 girls and 1 in 6 boys being sexually abused sometime in their childhood or adolescence.

What sets Phoenix apart from many mainstream organisations, particularly those using a medical model, is that Phoenix is responsive to client needs firstly by not being time-limited in terms of the number of sessions provided, or in terms of the length of time a client is accessing the service.

This approach also acknowledges that it can take longer to build a trusting therapeutic alliance when a client has experienced trauma through the violation of trust, along with societal boundaries being disregarded for the purpose of exploiting a child. Phoenix's therapeutic treatment approaches are flexible, and draw on a range of modalities to facilitate appropriate responses to the individual needs of each client, and to build some psychological resilience and develop a resource and support base for the client before embarking on complex trauma and processing work. Phoenix draws on a phased and tiered treatment approach to establish safety and stability first. All clinical work is underpinned by the minimum standards of trauma informed practice principles and guidelines regardless of the therapeutic interventions or modalities applied.

“*For me, it was the knowledge that the right kind of help (Phoenix) was out there after three prior attempts with therapy with other professionals over the years.*”

A Phoenix Client

## Our History

In 1978, Women's Health Care House and Australian Women Against Rape (Perth) organised a publicised 24 hour 'phone-in' designed to give women who had been sexually assaulted an opportunity to speak about their experiences. Of the 150 calls received, more than half related to intra-familial sexual abuse.

This group of women who headed up the phone-in and took calls, subsequently formed self-help and support groups after identifying that most of the women callers had been silenced and not supported by their families and loved ones. Many callers were profoundly depressed and had a mental health diagnosis.

Individual counselling, as well as group counselling, commenced shortly thereafter, initially on a volunteer basis. Incest Survivors' Association Inc. (ISA) now known as 'Phoenix Support and Advocacy Service' was formally incorporated in 1984 after obtaining a grant to provide services. The Incest Survivors' Association Inc. was the first Non-Government Association to deal specifically with child sexual abuse and the associated post-traumatic stress disorders and related psychological, emotional, relationship and wellbeing challenges.

It was common for women in that period of Australian history to establish services for sexual abuse and domestic violence with funds they had raised themselves and to work in those services on a volunteer basis. These were services that were not being provided by the Government of the day however, would be considered now as essential services particularly, for vulnerable women and children escaping abuse and violence. Research studies into child sexual abuse and domestic violence have highlighted that these experiences are at times linked, and do not necessarily exist exclusively in isolation from each other. Women advocates, volunteering and lobbying separately in those two areas of social need, often joined forces to establish services, share scarce resources and collectively advocate for social justice.

In 1986 the Western Australian Government began partial funding of the Association (Phoenix) to provide services to the community, recognising that the thousands of annual phone calls identified a large, hidden, community problem. From this time onwards, this funding allowed services to become increasingly professionalised and with paid staff who were required to have formal tertiary qualifications and were supported and provided with professional clinical supervision.

Quality control measures were also established through mandatory clinical supervision to support the worker's wellbeing and foster further skill development. Clinical Supervision also provided a monitoring process for promoting ethical high-quality service delivery by Phoenix that was immersed in trauma informed practices.

Phoenix now operates as a Non-Government, Not-For-Profit charity. Phoenix currently has a contractual agreement with the WA Department for Communities, previously known as the Department of Child Protection and Family Support (DCPFS). The Department provides a large majority of the funding for Phoenix services.

In 2017 Phoenix secured a funding grant from the WA Primary Health Alliance (WAPHA) to develop a trial 'Trauma Transformation' program. Further details about his program are outlined in this report.

The remainder of Phoenix funds are sourced from client fees, service fees, donations and memberships. Phoenix has expanded its services to include public talks, training and education, while maintaining a resource library and website. Innovative and evidence based effective treatment practices such as trauma sensitive yoga, mindfulness and expressive therapies are being introduced.

Phoenix has provided a very important service in WA for nearly four decades however, a small organisation such as Phoenix faces the ongoing challenge of remaining sustainable and viable, yet the specific client group accessing Phoenix are clear it is a service such as Phoenix that is best placed to meet their needs far more effectively than mainstream services.

This view is also supported by evidence emerging from the Royal Commission into Institutional Responses to Child Sexual Abuse. Phoenix clients reported these mainstream services did not have the specialised knowledge and skills to assist their recovery from complex trauma a direct result of child sexual abuse. Sadly, it is in some of these mainstream, and/or faith based services, in which the abuse occurred.

**“The Royal Commission into Institutional Responses to Child Sexual Abuse found that the average time for a victim to disclose child sexual abuse was 22 years”. Phoenix have actively advocated for amendments to WA Legislation to end the limitation periods for civil action by victims of child sexual abuse.**



## Our Purpose

“ I've seen many therapists since the age of 16. I am now 40 and for the past year I've been receiving regular therapy sessions with Phoenix. They have offered me so much in terms of experiencing safety, acceptance, stability and feeling empowered. Through their understanding and profound knowledge, I've been able to move through the many faces of this trauma. They have nurtured a place in my world that allows me to have hope and to dream of so many wonderful possibilities for the next 40 years of my life. Phoenix continues to help me understand the complexities of what I experienced and integrate it into a healthier manageable manner. The highly skilled, sensitive and well-informed therapists' have offered me a second chance at life.

A Phoenix Client

### THE PURPOSE & EVOLUTION OF PHOENIX

The original purpose of Phoenix when it was known as Incest Survivors' Association Inc. was to respond to Intra-familial child sexual abuse (or incest as it was more commonly referred to when the organisation was first established). Over time, and due to need, and requests for help, Phoenix expanded its service some time back to include anyone who experienced child sexual abuse inside or outside the family, but most often perpetrated by someone in whom they had placed their trust or who had authority over them. Support is also provided by Phoenix to the non-offending family members, friends and significant others of those affected by disclosures of child sexual abuse.

In the 2015 Report for Adults Surviving Child Abuse (ASCA), Pegasus Economics estimates that if the impacts of child abuse (sexual, emotional and physical) on an estimated 3.7 million adults are adequately addressed through active, timely and comprehensive intervention, the combined budget position of Federal, State and Territory Governments could be improved by a minimum of \$6.8 billion annually. This estimate could rise to \$9.1 billion if these figures included up to 5 million adults. The ASCA Report also stated that when survivors of child abuse comprehensively overcome their trauma, they and their children are freed to live productive, healthy and constructive lives. Their children too benefit, because the resolution of trauma in parents can intercept its transmission to the next generation.

### THE TRANSITION TO A NEW NAME

In response to feedback from clients, and our key stakeholders and partners in the community, a process began several years ago to consider a new name for the organisation. The original name of Incest Survivors' Association was no longer considered adequately reflective of the broader range of services now delivered by Phoenix. A rationale also presented to the organisation was the word 'incest' was no longer considered a commonly used or contemporary term given a growing trend toward using child sexual abuse as a broader definition.

In addition, clients had expressed a desire to Phoenix to access a service where the name provides some anonymity for them.



## Our Future

### THE FUTURE DIRECTION OF PHOENIX

Phoenix Support & Advocacy Service is keen to expand, refine and continually improve the services and the support provided to clients, their significant others and the broader community. Phoenix will endeavour to be an advocate and voice at the tables where it matters.

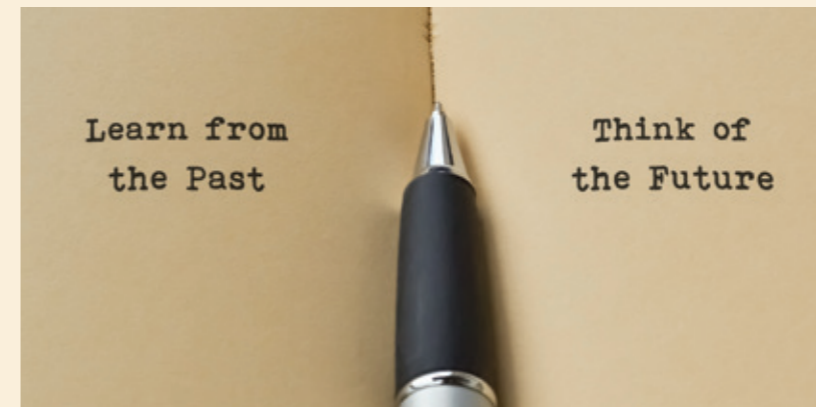
An ongoing challenge for a small service such as Phoenix is building capacity. There is so much potential for a service such as Phoenix however, much of the time and energy of Board members and the Executive Officer (employed part-time) is focused on fundraising and sustainability where this time and effort could be better utilised for continuous improvement in service treatment models, wider community education, and the training of other professionals to build their capacity to respond adequately, appropriately and ethically.

Phoenix has a diverse Board with a broad skill set along with a team of professional, appropriately experienced and well-qualified staff. These professionals are all dedicated to providing the high quality, client centred, compassionate and long-term support needed by child sexual abuse survivors.

Phoenix has a vision of becoming a Centre of Excellence and a strong and highly-sought after advocacy voice. Phoenix would envisage providing training and clinical supervision support for those professionals interested in working competently and safely in this complex area of work. Phoenix would show leadership in promoting good practice, and the sharing of practice wisdom and the learning gained from four decades in this specialised field in Western Australia.

This work for the better part of nearly half a century has been provided with limited funding and with little support or recognition. In many respects, the organisation has remained relatively invisible and somewhat unsupported by the WA community, similarly to the forgotten and invisible survivors that society frequently ignored or found hard to acknowledge existed due to collective denial and shame.

As well informed and committed advocates, Phoenix hopes to contribute significantly to raising awareness and promoting prevention strategies and early intervention, along with promoting the benefits an essential service such as Phoenix can contribute to the ongoing wellbeing of the community and future generations.



“ My family feels, coming to Phoenix, we find the staff very warm and trusting. We feel, we are able to talk freely, say what we want and don't hold back. We had no one to turn to, in private, people would not understand or care. We were so desperate and in despair, family in shock. Without Phoenix and the wonderful staff, my family would have fallen apart, and I (Father) would have looked for revenge. Phoenix to us is a Godsend. They are very genuine people. Thank you.

A Phoenix Client



# Our Board



**Jonathan Smith**  
CHAIR

Chair of Phoenix Support & Advocacy Service Inc and the WA Committee of the Social Impact Measurement Network Australia (SIMNA), Vice-Chair of the WA Committee for White Ribbon, Board Member of the Pat Giles Centre, and CEO of ECHO Community Services. Jonathan brings to these roles wide ranging consulting and management experience in commercial, community and government sectors.



**Julie Woodhouse**  
DEPUTY CHAIR

Julie is recognized as a leader in the field of education and currently is Principal of an Independent Public Primary School (Department of Education WA). Julie has completed a Masters in Educational Management at the University of Western Australia. She also has training and accreditation in coaching and personal assessment profiling. Her commitment to and skill in building the capacity of others has resulted in her being invited to present to many forums including the Senior Women's Leadership Program. In 2009-2010 she conceptualised and implemented a highly successful district wide 'Women in Leadership' program.

**Farewell to the following Board Members:**

- Angela Loxton 2010-2017
- Andre de Barr 2014-2016
- Frieda Orr 2015 -2016
- Hoosein Ismail 2015-2017

Phoenix appreciates and values their contribution to the organisation

**Welcome to new Board Members:**

- Colette Wrynn, NFP Executive Manager
- George Cherian, NFP Regional Manager
- Jasdev Singh, Lawyer private practice



**Leanne Sultan**  
BOARD SECRETARY

Leanne has worked for the Department of Health of Western Australia for the past 45 years specialising in all aspects of Mental Health. Leanne holds a current Australian Health Practitioner's Regulation Agency (AHPRA) – Nurses and Midwifery Board Registration. Leanne has completed several advanced leadership and management training programs. Over this time Leanne has worked extensively in senior roles of differing capacities where she provided leadership to ensure the delivery of high quality clinical services to maintain outcomes as specified by state and national standards.

**Minji Kim**  
TREASURER

Minji Kim, currently Manager Business Services of WA Blue Sky Inc, has over a decade of experience in audit services and finance management. She has held key management positions in a leading university and reputable government organisations. Minji is a qualified member of CPA Australia, Institute of Company Directors and Women on Boards. Upon completion of her senior leadership program at Curtin University, Minji has continued to volunteer her time in giving back to the community.



**Rob Wilton**  
BOARD MEMBER

Rob has had a long association with the Board of Phoenix stretching back several years and brings with him a unique blend of expertise from his military and commercial background. He had a wide and varied military career in the Navy and as an Army Officer within the Special Forces having deployed several times to Afghanistan, Iraq, and Bosnia. Rob currently serves on several boards in the not for profit sector, and since leaving the military has held numerous positions within the corporate environment. Rob has a Master of Sciences in Strategic Management and Accounting, is a Fellow of CPA Australia, a Fellow of the Chartered Institute of Management Accountants, Diploma in Governance from Chartered Secretaries Australia, is a member of the Australian Institute of Company Directors and is a founder member and Fellow of the UK Institute of Leadership and Management.



# Our Staff



**Louise Lamont**  
EXECUTIVE OFFICER

Louise currently leads Phoenix Support & Advocacy Service. Louise has held senior positions in the Not-for-Profit sector and with State and Federal Government and has worked in human services and health for four decades. Earlier in her career Louise worked as a counsellor supporting those who had experienced domestic violence and sexual abuse. In the last two decades, her roles have included work as a clinical supervisor, consultant, senior manager, leader and trainer in various programs, and as a member of numerous high-level State and National committees addressing a range of social issues. Louise has been key advisor for a WA Statewide media campaign, Founder and Convenor of a State Peak body, and author of numerous publications including a Best Practice Guide for Victim Services.



**Anna Antoine-Cooper**  
SENIOR COUNSELLOR &  
REGISTERED PSYCHOLOGIST

Anna has worked in various roles as a psychologist, senior counsellor, caseworker, team leader and clinical supervisor over the past 15 years and has extensive experience working with both individuals and families presenting with multiple complex issues and trauma presentations. Anna has vast experience in working with Aboriginal and Torres Strait Islander People and has also worked with culturally and linguistically diverse clients, in a variety of settings.



**Carley Morrell**  
SENIOR COUNSELLOR & PLAY THERAPIST

Carley works from a person centred perspective and holds a deep respect for the uniqueness of each person she works with. Carley is a qualified and experienced play therapy practitioner, and as a qualified Counsellor has nearly 10 years of clinical experience working with children, adolescents and adults from diverse backgrounds who have experienced significant trauma. A former primary school teacher, Carley has spent over 20 years working in the human services sector across metropolitan, regional and remote communities in WA.

“  
Since attending Phoenix, I have felt supported and encouraged to share my experiences in a safe and secure environment. My journey has felt painful and traumatic. However, Phoenix has given me the support needed to cope with the journey to healing.  
My Counsellor is professional, non-judgemental and gives me the freedom to explore my feelings and emotions in a safe and protected environment. I am grateful to be able to access such a great service.”

A Phoenix Client



**Coby Greer**  
COUNSELLOR &  
YOGA INSTRUCTOR

Coby has worked in diverse roles within the human services sector over the last 21 years including management, program management, counselling, clinical supervision, casework and group facilitation. These roles have provided extensive experience working with individuals and families presenting with complex issues including mental health, addiction, family and domestic violence and homelessness. Coby has experience in working with Aboriginal and Torres Strait Islander People and Culturally and Linguistically Diverse clients in an agency setting, hospital setting and within the client's home. Coby is a qualified Counsellor and qualified and well-practiced yoga teacher.



**Kaye Doolan**  
FINANCE OFFICER

Kaye has over 25 years' experience in book-keeping, and she also worked in Local Government for 10 years, as a Records Officer and Revenue Officer. Kaye's customer service skills were developed from previous work roles such as; a medical receptionist, Chiropractic Assistant and varying other retail roles within her working career, she also has experience as an Office Manager, and has enjoyed volunteering in numerous community committees over the last twenty years.



**Lois Lloyd**  
OFFICE MANAGER

Lois commenced work for Phoenix (formerly known as the Incest Survivors' Association Inc.) in September 1986 and celebrated 30 years of service in 2016. Lois's position requires a comprehensive understanding of day-to-day operations. Lois is usually the first point of contact for most new clients and provides a familiar voice and a sense of continuity for re-engaging clients. Prior to joining Phoenix, Lois was employed by the "Daily News" and "Weekend News" newspapers for 16 years.



# PHOENIX CHAIRPERSON & EXECUTIVE OFFICER 2016-2017 REPORT

**It is important to understand that many people affected by experiences of CSA (Child Sexual Abuse) go on to live happy, healthy and productive lives. The impact of harm is determined by the circumstances of the abuse, the support of family and communities when victims disclose abuse, access to early intervention and trauma informed support and services, as well as immediate removal of the victim from any contact with the perpetrator.**





# Welcome to this Inaugural Annual Report

Phoenix Support & Advocacy Service Inc. officially began trading under our organisation's new name in January of this year following many years operating in Western Australia as Incest Survivors' Association Inc. (ISA). Therefore, this is our first Annual Report as Phoenix.

The concept for our organisation was first conceived in 1978 and as we move in to 2018 Phoenix will take the opportunity to mark 40 years of assisting thousands of West Australians impacted by child sexual abuse.

The Phoenix Board and staff were pleased to have found a name to reflect the work we do, and one that is contemporary and more representative of the broader range of services that Phoenix now offers to both clients and the community.

The new logo for our organisation draws on the symbol of the mythological bird known as the Phoenix that arises from the ashes, and it also symbolises a sunrise that offers the first light and hope of a new day following the dark night of the soul. The heart in the logo represents a service that responds with care and compassion.

The next 12 months will be particularly challenging for both staff and the Board with the uncertainty of funding and therefore the ongoing future of Phoenix. Phoenix is resilient and has survived through many funding cycles and changes of Government and it is our intention to continue to do so.

Although the size and capacity of Phoenix has remained static for many years, our approach has not. Phoenix remains vibrant and innovative as we continue to introduce new therapeutic approaches while also developing ways to further educate the community and other professionals in terms of understanding and adequately responding to child sexual abuse.

Phoenix are not surprised by the reports that have emerged from the Royal Commission into Institutional Responses to Child Sexual Abuse as these are the narratives conveyed to Phoenix for many years. However, in some respects Institutions are the tip of the iceberg with limited discourse about incest and child sexual abuse perpetrated in families and by those a child has learned to trust.

With nearly 40 years of community service, Phoenix is well placed to become a Centre of Excellence continuing to inform and educate the community and show leadership in terms of responding appropriately and effectively to those impacted by child sexual abuse. Phoenix need the community behind us and ongoing Government funding to continue this valued work.

The 2016-2017 period has been an extremely busy one for Phoenix, and has seen lots of change along with the introduction of a new program. We are pleased, in this inaugural Annual Report, to provide an overview of all the work undertaken and the innovation introduced, while also taking the opportunity to acknowledge and thank those that have supported and contributed to this work. We hope you enjoy reading about our activities and our achievements.

♥ JONATHAN SMITH — CHAIRPERSON

♥ LOUISE LAMONT — EXECUTIVE OFFICER

“ I have been using the service for nearly three years. I have found everybody I've been in contact with are very professional and compassionate. I have come a long way since attending Phoenix and I know there is a long way to go. This counselling thing is extremely hard and I have been supported all the way. Well done to clerical staff who are always pleasant and make you feel welcome and at ease. ”

A Phoenix Client



# THE YEAR IN REVIEW

**Research indicates that children, young people and adult survivors of child sexual abuse can experience what is known as complex traumatic stress or complex trauma.**

(Blue Knot Foundation: Fact Sheet, 2017, Herman, 1997)

## Executive Officer's Perspective

I am pleased to take this opportunity to review all that has happened at Phoenix in this last financial year whilst also acknowledging all those that have contributed to this work.

### THE PROCESS OF THE NAME CHANGE

It proved to be quite a complex administrative process changing the name of the organisation, particularly with limited capacity and a small team of 5 employees. Therefore, although the rebranding process has been somewhat resource intensive and challenging, it has also been very much a creative, exciting and rewarding process.

The staff and I are especially pleased with the new look we have created with our new suite of promotional materials. We are very grateful for the Funding Grant we received from LotteryWest for the purpose of service development and rebranding. Without this Funding Grant, Phoenix would not have been able to produce the new resources required, or achieve the professional look and finish we hoped for and desired.

### WHAT PHOENIX HAS BEEN INVOLVED IN

During the 2016-2017 reporting period Phoenix has been focused on the activities of the Royal Commission into Institutional Responses to Child Sexual Abuse. I along with some members of the Phoenix Board attended a Royal Commission Forum held in Perth, and later I had the opportunity to attend a Royal Commission Symposium in Melbourne that presented findings from various research projects that had been commissioned.

The grant received from Lotterywest also provided for Phoenix to undertake a review of our clinical policies, procedures and practice to measure these against Trauma Informed Practice Principles and Guidelines to ensure these met minimum standards. For this exercise, Phoenix contracted Alison Day an experienced practitioner and clinical supervisor in the field of child sexual abuse and trauma. I am pleased to report Phoenix is meeting those standards both in our policies and in our practice. Alison was also contracted to undertake with consent live observations of clinical work and conduct case note audits to ensure Phoenix is delivering high quality services with sound records management processes in place. Phoenix appreciates the rigor Alison applied to this task and the benefits this provided to Phoenix more broadly, while also supporting the ongoing professional development of the staff.

In December 2016, the Phoenix Board and I met to begin the next phase of the Strategic Planning process for 2017-2020. This initial meeting was facilitated by Jennifer Chaplyn from Same Page Consulting who led a very productive day and provided us with a framework to continue to build on moving forward.

In the latter-half of 2016, invitations were received to present on the work of Phoenix and the services we provide at a dinner meeting of the Northern Suburbs Zonta Club, and later at a breakfast meeting of the Herrison Rotary Club.



In March 2017, I had the privilege of representing Phoenix at a WA National Conference with internationally recognised guest speakers and 950 delegates. At this conference there was the opportunity to present on the topic of Self-Regulation and Reframing Behaviours and promote the services of Phoenix. I have received ongoing training in Self-Regulation from Canadian neuroscientist Dr Stuart Shanker and his team at The Mehrit Centre (TMC) in Canada. This training informs our approach.

One of the international speakers at this National Conference was renowned Trauma Specialist, Neuroscientist and prolific author in the field of complex trauma Dr Dan Siegel. I along with all our clinical staff had the good fortune of attending a Master Class he delivered whilst in Perth. We all left this class with new evidence based knowledge to inform the therapeutic practice at Phoenix.

Training with Professor Stephen Smallbone, a long-term researcher of sex offend, revealed that child sexual abuse is more often an opportunistic crime, which in some respects means vulnerable children are at greater risk, as there does not necessarily need to be a history of, or emerging pathology, for offending to occur. Phoenix was aware anecdotally through our clients this was the case however, it was helpful to have this understanding confirmed through empirical research undertaken over many years.

### GOOD NEWS FOR PHOENIX

April 2017 brought the good news that Phoenix was successful in securing a Grant from the WA Primary Health Alliance (WAPHA) to trial a range of programs. Phoenix proposed we design a program titled 'Trauma Transformation' that would allow Phoenix to develop a variety of programs tailored for those impacted by child sexual abuse.

The intention of the trial is to bring different groups of clients together to provide a psychoeducational program. The trial includes opportunities for clients to explore a broader range of therapeutic modalities such as art and music therapies, mindfulness, and trauma sensitive yoga techniques while interacting with others going through similar experiences. The program is underpinned by trauma informed practice principles, and the Shanker method of self-regulation. Further information about this program is provided later in this report.

In addition, the WAPHA Grant provided the resources for staff to access leading edge training to support the development of the program. The Grant has also resourced the development of a Specialised Training Package aimed to raise awareness for General Practitioners and Allied Health Professionals about the indicators of child sexual abuse, the impact of trauma on brain development along with information about appropriate responses to disclosures and the relevant referral pathways. Phoenix is appreciative of the assistance from Tori Cooke with the development of the package.

With all staff at Phoenix employed part-time it has been a chal-

lenge developing the Trauma Transformation Trial Program however, we have taken up that challenge with great enthusiasm and created an innovative and well thought out approach that is underpinned with good practice and with client safety and well-being paramount. We have greatly appreciated the support and encouragement we received from WAPHA staff namely Rachel O'Connell, Meera Byatt and Kaylie Toll.

May 2017 was a time of uncertainty for Phoenix. Our organisation's ongoing and core funding has been provided from the same Department (operating under many names) since 1984 however, this funding potentially was to expire on 30 September 2017. We were waiting to hear whether the Department would grant us a one-year extension of that funding, but with the change of Government at the beginning of 2017 this created delays with the decision. It was with much relief in mid-June when Phoenix was informed we had been granted another year of funding. Phoenix thanks the Department for Communities and Contract Manager Liz Brown for their ongoing support of Phoenix. Thanks also go to Elizabeth Gee for her ongoing labour of love transforming our database.

### PHOENIX ADVOCACY

Phoenix continues to be represented on the WA Council of Social Services (WACOSS) Children's Policy Advisory Council and is an active member of the Mirrabooka Family Support Network (MFSN). Phoenix is pleased to be able to contribute in these important forums and networks and be a voice at the table working towards influencing policy and service delivery. Thanks to Sue Nye (WACOSS) and Vanna Williams (MFSN) for their support.

In December 2016, Phoenix wrote a submission for the WA Government's Parliamentary Subcommittee reviewing the Statute of Limitations for Civil Litigation for Child Sexual Abuse. This paper is published later in this report. The purpose of this submission was to advocate on behalf of Phoenix clients. To also raise awareness about the injustices they face, to highlight the specialised services Phoenix provides for the WA community and to share insights we have gained from contact with the experiences and narratives of those who have been harmed and exploited as children.

### STAFF STORIES

The end of 2016 saw the departure of two of our clinical staff Andrea Halse and Debra Bycroft. Andrea had been with Phoenix for two years and in addition to counselling adults Andrea provided Play Therapy for children accessing the service. Andrea was keen to have a break from this demanding work, and her contribution to Phoenix and especially for vulnerable children was much appreciated. Debra was keen to continue with Phoenix however, her PhD studies in Forensic Psychology required practicum hours with Corrective Services. Debra's forensic training brought another lens to the work at Phoenix and an area we hope to develop further in the future.

These departures resulted in the employment in early 2017 of Senior Counsellor and Play Therapist Carley Morrell and Counsellor and Yoga Instructor Coby Greer. Carley and Coby have

brought a unique blend of qualifications and experience to their role and were provided with a comprehensive orientation but, particularly from the remaining clinical team member Senior Counsellor Anna Antoine-Cooper who proved to be an excellent resource and support while they settled in. The diversity of the team has brought a richness to practice, and to the development of the Trauma Transformation program.

I would also like to thank our dedicated Finance Officer Kaye Doolan, along with long-term Office Manager Lois Lloyd for all they contribute to the successful operation of Phoenix. Given we are such a small team, a great deal of flexibility is required, and I am fortunate to have staff that are willing to undertake all those additional tasks that in a larger organisation would not be an aspect of their role. It is this 'can do' attitude that has kept Phoenix going under what at times has been very challenging and demanding circumstances. Everyone in the team has also contributed ideas to improve processes, and ensure we provide the best service possible for clients while maximizing our efficiency. Thanks go to Consulting Accountant Marc Spradbury for his support and mentoring.


In September 2016, a celebration was held with staff and Board members for Lois Lloyd to acknowledge 30 years of service to Phoenix. Lois joined Phoenix in 1986 and has been a consistent and familiar face, particularly for clients who often return to our service many years later to seek support again because a life event has re-triggered trauma impacts. It is comforting for these clients to find Lois still there to greet them and put them at ease. Lois also provides an important historical context for Phoenix, and has contributed a summary of some of this history of the organisation further on in the report.

### BOARD BUSINESS

The last year has been a time of transition with the departure of several Board members namely Andre De Barre; Frieda Orr; Hoosein Ismail and Angela Loxton. Angela was a member of the Board for seven years and a farewell for Angela, along with Peter Curry, Pro-Bono Legal Advisor was held.

Angela made a significant contribution to Phoenix during her time on the Board and has written about some of those experiences. Peter Curry is thanked for his generous pro-bono legal advice provided since 2015 until recently. Peter's assistance with subpoenas and court orders proved to be invaluable, and spared us from potentially what could have been a hefty fine and a 12 month prison sentence for protecting the privacy of client information!

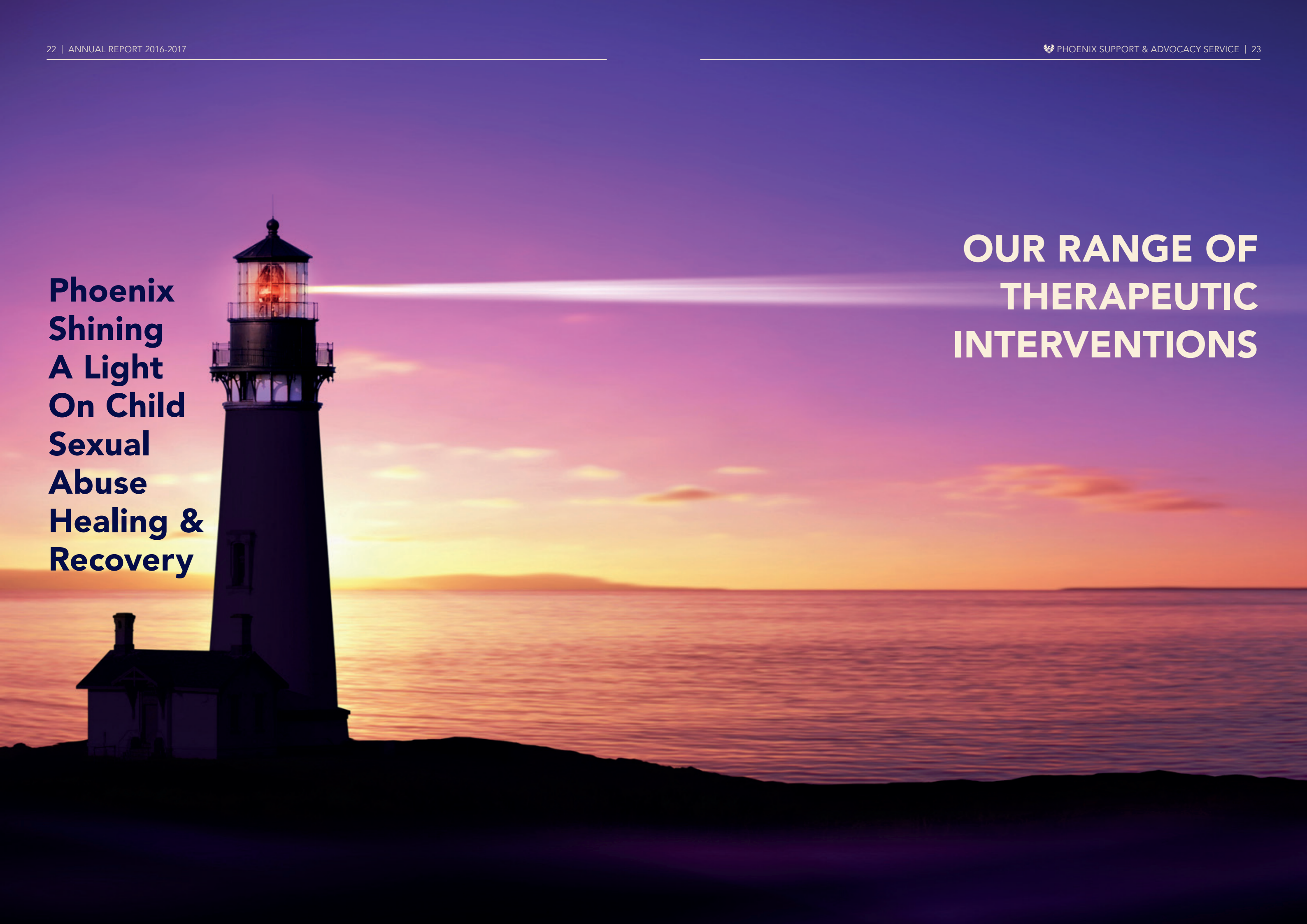
Lastly but not least, I would like to thank the Phoenix Board who generously volunteer their time and expertise to support the work of Phoenix and oversee the Strategic direction. The very existence and survival of Phoenix is on the line, with all current funding coming to an end in mid-2018. Phoenix staff in partnership with the Board are doing all we can to continue to develop and diversify our services to ensure the future, and in readiness to arise from the ashes if necessary!

 LOUISE LAMONT — EXECUTIVE OFFICER



**Phoenix  
Shining  
A Light  
On Child  
Sexual  
Abuse  
Healing &  
Recovery**

**OUR RANGE OF  
THERAPEUTIC  
INTERVENTIONS**



## Trauma Transformation Program

Phoenix will be implementing a Trauma Transformation Program for 12 months until the end of June 2018. This will include a series of trial psycho-educational workshops commencing from October 2017 with various cohorts. These workshops will be continuously adapted throughout the trial period in response to the feedback provided by the inaugural participants. The WA Primary Health Alliance (WAPHA) has funded and supported the development of this trial.

This program will involve a variety of approaches, and will include raising awareness about child sexual abuse and the impacts of trauma, along with prevention and education strategies for survivors, parents and allied health professionals. The Shanker method of Self-Regulation will underpin the work and will overlay and inform the content and activities. An Outcomes Map and Evaluation Plan has been created.

An essential aspect of the trial is to introduce a range of therapeutic strategies that are evidence-based and embedded in trauma-informed practice. This part of the program will also provide participants the opportunity to experience different therapeutic modalities that include being introduced to mindfulness and relaxation techniques, and expressive therapies such as art, music and yoga known to assist self-regulation, healing and recovery.

Initially the program will commence with two groups. The first will be a series of group workshops for Adult Survivors of childhood sexual abuse, and the second will be group workshops for the non-offending parents/caregivers/grandparents of children who have experienced childhood sexual abuse. These group workshops will be conducted in a safe environment, and will provide an occasion for people with experiences that are both unique and shared, to come together to feel supported and not alone in those experiences.



The workshops for adult survivors is aimed to enhance the outcomes of individual counselling by providing information that will inform and increase understanding of how the experience of trauma may impact an individual. In addition, these workshops will provide activities intended to facilitate a reduction in trauma impacts through trialing approaches that can reduce stress and anxiety and are known to aid recovery. The context of the workshops also supports the opportunity for peer support.

The group workshops for parents will take an educational approach to help participants understand how traumatic experiences may impact a child. The program will also aim to assist parents to gain greater confidence about how they can contribute to their children's recovery and healing process in order to achieve the best outcome. The notion of co-regulation as understood in the context of self-regulation helps parents understand that by dealing with the anxiety and stress created by a disclosure, this in turn assists their child. Once the parents have a greater understanding of

how they can support their child through their own self-regulation, as well as that of the child, then workshops that bring the parents and their children together to experiment with self-regulation activities will also be introduced.

Months of research and preparation went in to developing these unique series of workshops and we are confident they will enhance the individual counselling support provided and will facilitate recovery.

♥ LOUISE AND THE CLINICAL TEAM

## EMDR Therapy

One alternative to the traditional talk therapy, that Phoenix is able to offer, is EMDR (Eye Movement Desensitization and Reprocessing). EMDR is a psychotherapy that enables people to heal from the symptoms and emotional distress that are often the result of disturbing life experiences. It is a natural technique that can assist a client to unblock traumatic experiences that have not been adequately processed and stored in the memory network in the brain. Using the detailed protocols and procedures learned in EMDR therapy training sessions, clinicians help clients activate their natural healing processes.

During treatment, the therapist/counsellor asks the client to revisit the traumatic moment/s, in the safety of the therapy setting, and recall the feelings and thoughts that accompanied them. EMDR assists in the release of these experiences that are trapped in the nervous system and memory networks, by repeatedly activating opposite sides of the brain using bilateral stimulation, tactile stimulation, or right/left eye movement. The aim of EMDR is to process negative memories, by the client, while they track the movement of the therapist's fingers. These memories gradually lose their intensity as negative images,

the block is removed, and healing resumes.

Studies have shown that clients who have undertaken EMDR therapy can experience the benefits of psychotherapy that once took years to make a difference. It is widely assumed that severe emotional pain requires a long time to heal. EMDR therapy shows that the mind can in fact heal from psychological trauma much as the body recovers from physical trauma. These studies show that EMDR has been highly effective in treating clients who suffer/suffered from post-traumatic stress disorder (PTSD) or have undergone extremely traumatic event/s. These include crime victims those who have witnessed or been victims, of disaster, natural ones such as floods, hurricanes, and earthquakes as well as those inflicted by humans such as childhood sexual abuse, sexual assault, murder, and physical assault. There have also been studies that have seen improvement in those who suffer from phobias, anxiety attacks, depression, constant worry, low self-esteem, illness, injury, and panic disorders to name a few.

♥ ANNA ANTOINE-COOPER  
SENIOR COUNSELLOR PSYCHOLOGIST



“ I am so grateful that there are facilities like Phoenix available, to provide such an excellent service. I have found a safe environment in which to confront my problems. My first encounter with my Counsellor, was positive and in the months of weekly sessions, she has continued to guide me in a manner that has given me understanding, new tools and a feeling of greater stability, confidence and hope for my future. Thank you, Phoenix, and thank you to my Counsellor. ”

A Phoenix Client



## Yoga Recovery



“  
**Movement is a medicine  
 for creating change  
 in a person’s physical,  
 emotional, and mental  
 states.**”

Carol Welch

“  
**The ultimate value  
 of life depends upon  
 awareness, and the  
 power of contemplation  
 rather than upon mere  
 survival.**”

Aristotle

Yoga for Recovery (YR) draws from the principles of Trauma-Sensitive Yoga (TSY), breathing practices, self-regulation and mindfulness. The aim of YR is for clients to cultivate awareness of the mind-body connection and to build self-regulation skills to address the ways in which trauma is held in the body. According to Emerson (2015) women who have survived complex trauma experience long lasting damage to their sense of self, such as feelings of shame, hopelessness, and worthlessness, and interpersonal functioning, such as isolation, lack of trust and unhealthy boundaries, resulting from their pain.

Like most forms of yoga, YR borrows from all the components overarching the practice which is essentially synonymous with purposeful attention. However the difference between regular forms of yoga and YR is that the focus is not on the external expression of the posture itself in YR, rather on the internal and felt experience of the client. Interoception is defined as ‘our awareness of what is going on within the boundaries of our skin; intra-organismic awareness’, and gives a cortical representation of our embodied self (Emerson, 2015, p. 44). This shift in orientation from the external to the internal makes YR a therapy for complex trauma (Emerson, 2015). To be traumatised is to live in a body with which you have an unreliable and unpredictable relationship. Valuing the internal perspective sends a clear message that power resides within each client, and not externalised in the posture or the facilitator. In saying this YR has the potential for clients to reclaim their physical bodies and instill a sense of ownership which many had been lost through their traumatic experiences.

A randomised controlled trial conducted by Bessel van der Kolk and colleagues in 2014, examined the effects of TSY on women with complex trauma who were unresponsive to traditional psychotherapy. Women in the 10 week TSY course were more likely than women in the con-

trol group to no longer meet the criteria for PTSD post-treatment. The TSY group also showed significant decreases to depressive symptoms, negative tension-reduction behaviours (for example, self-injury), and reported improved quality of life and personal empowerment. Furthermore, a long-term follow up conducted by Alison Rhodes (2014) found that the frequency of continuing yoga practice was a significant predictor of long term outcomes. At one to three years post-treatment, women who practiced yoga following the study were more likely to show a loss of PTSD diagnosis and greater reductions in PTSD and depressive symptoms (Rhodes, 2014). These studies suggest that the addition of TSY to treatment may lead to long-term improvement in symptoms that have previously been considered unresponsive to other interventions.

In addition, another relevant neuroscience research from Bessel van der Kolk (2006) where trauma clients were exposed to traumatic reminders, found a relative deactivation in the left anterior prefrontal cortex, specifically in Broca’s area, the expressive speech centre necessary to communicate thoughts and feelings. This neuroscience research suggests that traumatised people may not only be alienated from their bodies but also indicates that they may be unable to communicate their experience due to the impact to Broca’s area. This information demonstrates that a broader range of treatments for traumatised people other than those that are talk based and cognitive are essential.

The language used in YR is critically important. In most regular yoga classes it is common to hear instructions and commands like ‘raise your left leg’. In YR invitational language is used where clients are invited to participate throughout their yoga practice, for example, using phrases such as, ‘If you like you could explore lifting your right arm’ or ‘When you are ready you may wish to take a deep breath’. This practice helps a cli-



ent to learn that they are in charge and can choose what they do with their body and when they want to do it, ultimately taking control of their bodies through the support of the facilitator.

### INTENDED OUTCOMES

- To increase the mind-body connection and sense of embodiment particularly for those survivors that have coped through dissociation.
- To increase self-awareness through a gentle introduction to practices

such as mindfulness, self-enquiry and intra-connectedness.

- To promote a sense of trust and a growing confidence of regaining control which in turn is aimed to enhance self-regulation, resiliency, decision-making and improved relaxation.
- To improve quality of life and to facilitate a process that assists clients to gain a sense of personal empowerment.

COBY GREER  
 COUNSELLOR & YOGA INSTRUCTOR

“  
**One thing was clear: the  
 rational, executive brain, the  
 mind, the part that needs  
 to be functional in order to  
 engage in the process of  
 psychotherapy, has very  
 limited capacity to squelch  
 sensations, control emotional  
 arousal, or change fixed  
 action patterns.**”

Bessel van der Kolk, 2006



## Play Therapy

“  
**Play and exploration are crucial activities for young children. They help the child's brain develop in optimal ways... Play and exploration grow the brain – healthy play and exploration grows healthy brains.**  
 ”

Perry, Hogan & Marlin, 2000

“  
 It has been a pleasure to work with the staff of Phoenix for the benefit of our mutual clients. My impression is that they are providing quality trauma informed psychotherapy, delivered within a framework that is respectful, compassionate and sensitive to client's needs.  
 ”

WA Mental Health Professional

Phoenix has made play therapy available to children and families impacted by child sexual abuse for a number of years. Play therapy is a form of counselling that is appropriate for very young children and may also be an effective intervention for older children. We have a well-appointed play therapy space, with carefully selected play and expressive materials, to support each child that we see in their journey towards healing and recovery.

Abuse related trauma that occurs in childhood often happens within the context of a relationship. Because children depend on safe and secure adult relationships for survival and development, abuse related trauma that occurs during critical periods of a child's development is also known as developmental trauma. Developmental trauma changes children's physiology, brain architecture and the responses of their nervous system when under stress (Australian Childhood Foundation, 2017).

Play therapy is a form of early intervention for children with developmental trauma that “enhances every domain of a child's development” (Perry, 2001, p. 24). Research has shown that children who participated in long term play therapy demonstrated significant improvement in cognitive, social and emotional domains as well as an increase in self-regulation and self-esteem (Muro, Ray, Schottelkorb, Smith, & Blanco, 2006).

This article considers the ASCA practice guidelines for working with complex trauma, prepared by Kezelman & Stavropoulis (2012), with a focus on how play therapy speaks to these guidelines. At Phoenix, how do our child centred counselling practices match up with the ASCA practice guidelines?

### 1. Facilitate client safety

The starting point for play therapy with children at Phoenix is to build a therapeutic partnership with parents + carers (more about this in guideline # 6) and to establish a therapeutic relationship of

safety and trust with each child. Play therapy is a relationship-based intervention.

### 2. Recognise the centrality of affect-regulation (emotional management; ability to self-soothe) as foundational to all treatment objectives and consistently foster this ability in the client

Within a safe play therapy space, children are able to express themselves in ways that they may not be able in other contexts, such as school and home. They are able to express or ‘play out’ big emotions and big behaviours with safety and acceptance. The experience of developing an understanding of emotions within the context of a secure (therapeutic) relationship helps children to learn to regulate their emotions independently (self-regulation) and to seek out support when they need assistance in times of distress (co-regulation) (Australian Childhood Foundation, 2017).

### 3. Recognise the breadth of functioning impacted by complex trauma and that acquisition, not just restoration, of some modes of functioning may be necessary.

Play therapy allows children to make meaning from their experiences through play, rather than through words. In doing so, they build up their suite of coping strategies in ways that are self-directed and meaningful to them.

### 4. Regard symptoms as adaptive and work from a strengths-based approach which is empowering of the client's existing resources

‘Symptoms’ of trauma, such as expressing ‘big’ emotions and ‘big’ behaviours, can often be misunderstood as ‘misbehaviour’, ‘hyperactivity’ or being ‘easily distracted’. Through a developmental trauma lens, we understand that some of these symptoms are adaptive and have helped children to tolerate and survive their trauma experiences. Play therapy provides opportunities for children to enhance their coping skills.



### 5. Understand how experience shapes the brain, the impacts of trauma on the brain (particularly the developing brain) and the physiology of trauma and its extensive effects

Through play therapy, children build new understandings of themselves within the context of the therapeutic relationship. They learn that their ‘big’ behaviours and emotions are tolerable to others, thereby making these ‘big’ emotions more tolerable for children and normalising these trauma impacts. Through play, children experiment with new ways to manage ‘big’ emotions and develop their problem-solving capacity. Because this occurs in a child-led manner, it has profound developmental impacts such as the creation of new neural pathways, expanding capacity for self-regulation

and strengthening overall sense of competence, mastery and self-integrity.

### 6. Encourage establishment/ strengthening of support networks

Throughout each child's engagement in play therapy at Phoenix, the child's counsellor fosters a ‘therapeutic partnership’ with parents and carers. This strengthens a child's support networks in multiple ways, such as through supporting parents to build healthy parent-child attachment and through opening up referral pathways for families. Parents or carers attend Caregiver Consultations with their child's counsellor at regular intervals throughout their child's play therapy journey.

### 7. Attune to attachment issues at all times and from the first contact point

Within the context of a safe and trusting therapeutic relationship, children are able to experience themselves in new ways: ‘I am valued’, ‘I am seen’, ‘I am listened to and respected’, ‘my choices are important’, ‘my voice is valued’.

### 8. Understand and attune to the prevalence and varied forms of dissociative responses, the differences between hyper and hypoarousal, and the need to stay within ‘the window of tolerance’

Children have increased capacity to cope with every day stressors when they build their capacity to regulate strong emotions. Over time their body's stress response system can become more calm and receptive (see also guideline # 5).



**9. Expect and be prepared to work with a variety of client responses, including a sense of shame which may not be readily apparent but which is frequently present and intense**

When children become dysregulated, outwardly expressing 'big' behaviours and 'big' emotions, this can be overwhelming for them and for the adults in their world. When they are unable to draw upon safe adult relationships to co-regulate and regain a sense of safety, this can trigger shame. When children feel shame, they feel that they are 'bad'. Play therapy supports children and their carers to understand these big emotions and behaviours, increasing capacity for tolerating distress, co-regulating, restoring and strengthening relationships. Children learn that they are valued and valuable.

**10. Embed and apply understanding of complex trauma in all interventions**

As with all of the interventions we use at Phoenix, play therapy is underpinned by an understanding of the impacts of developmental trauma and complex trauma.

**11 Ensure the therapeutic model/ approach promotes integration of functioning, and contains the 'core elements' consistent with research findings in the neurobiology of attachment**

Play therapy supports cognitive, emotional and sensorimotor processing as children work through and make meaning from their experiences. Each child sets their own pace and is supported within the safe space of the therapeutic relationship.

**12. Recognise the extent to which he above requires adaptation of, and supplements to, 'traditional' psychotherapeutic approaches (ie insight-based and cognitive behavioural)**

Play therapy provides children with the space to choose how they want to ventilate strong emotions and make mean-

ing from their experiences. They may use words, roleplay, image making, singing, games (whereby they set the rules), even solitary play.

**13. Phased treatment is the 'gold standard' for therapeutic addressing of complex trauma, where Phase I is safety/stabilisation, Phase II processing and Phase III integration.**

During their play therapy, children move through distinct therapeutic stages: Phase 1 is relationship building, establishing safety and trust; Phase 2 includes the expressive and nurturing stages, where children increase their tolerance and regulation of strong emotions and build a sense of self-identity; Phase 3 is where we see mastery, integration of these new skills in broader life contexts and self-integrity.

**14. Therapy should be tailored and individualised; 'one size does not fit all'**

As play therapy is child-led and child-directed, it is a completely unique therapeutic process for each individual child.

**15. Therapists should be culturally competent and sensitive to gender, sexual orientation, ethnicity, age, and dimensions of 'difference'**

Counsellors at Phoenix undertake reflective practice, developing their awareness that counselling (including play therapy) needs to be culturally responsive and sensitive to the diversity of our shared humanity.

**16. Engage in regular professional supervision**

All clinicians at Phoenix participate in both individual and group supervision for their clinical practice, reflection and growth. Supervision and clinical consultation with an accredited play therapy supervisor is also completed on a monthly basis.

**17. Attend to duration and frequency of sessions**

Fortunately, our sessions are not time-limited at Phoenix. That said, there are distinct phases that children move

through in play therapy including a clear 'ending' phase. Child complete their play therapy at differing rates.

**18. Recognise the importance of implementation of boundaries**

Limit setting is an integral therapeutic component of play therapy. It provides safety and structure to the play session, teaching children that there are some things they cannot do and that we will protect them from: hurting themselves, hurting the counsellor, damaging the materials/room. When children understand these limits and boundaries, they build a sense of being able to rely on the safety of themselves, the counsellor and the play therapy space. During Caregiver Consultations, parents and caregivers are also taught how to set clear limits with their children in a relational and empathic manner.

**19. Engage in collaborative care as appropriate**

Working collaboratively with families is central to supporting children at Phoenix.

**20. Facilitate continuity of care as appropriate**

Endings are managed sensitively in play therapy. Children know in advance that the end of play therapy is approaching. For example, they will know that they have 5 sessions to go and they participate in the count down towards the final session. This allows children a sense of control and ownership over their therapeutic ending. Where this is not possible, appropriate referral pathways may be explored with families.

**21. Diversity of clients means that recovery, too, is diverse**

Every child's journey toward healing and recovery is exquisitely individual and play therapy is a form of counselling that privileges each child's voice and honours their individual process. Play therapy is grounded in the practice of 'noticing' children and letting them know they are seen, heard and understood. It is non-evaluative and lets children know we



see their efforts and notice their curiosities, we hear their words and behaviours and want to understand what they are communicating to us. 'Noticing' children respects the whole person of the child. Children "need to be simply noticed... appreciated for who they are right now. No would's, 'Wouldn't it be nice if you just...' No could's. 'I'd be really proud if you could...' No should's, 'You know you should try harder to...' There will always be a million things that would, could or should be, but only one unique and precious miracle of a life right there in front of you this very moment" (Ferguson, 2002, p. 15).

**CARLEY MORRELL**  
SENIOR COUNSELLOR & PLAY THERAPIST

**For more information about Play Therapy:**

- [apta.asn.au/about-play-therapy](http://apta.asn.au/about-play-therapy) What Is Play Therapy? - Australian Play Therapists Association
- [www.psychology.org.au/inpsych/2015/june/short](http://www.psychology.org.au/inpsych/2015/june/short) Play Therapy: Working Creatively With Children - Australian Psychological Society (InPsych article)
- [evidencebasedchildtherapy.com](http://evidencebasedchildtherapy.com) Evidence Based Child Therapy Resources – Evidence Based Child Therapy website

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## Art Therapy



### WHAT IS A MANDALA?

Sanskrit for 'sacred circle', 'magic circle' or 'centre'. Sacred Circles are found throughout human history in nature and in all cultures.

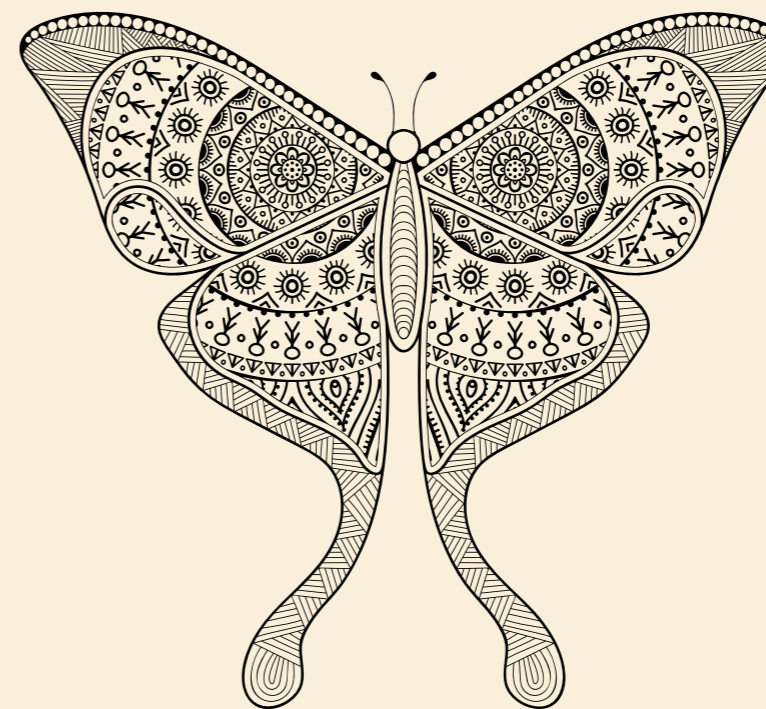
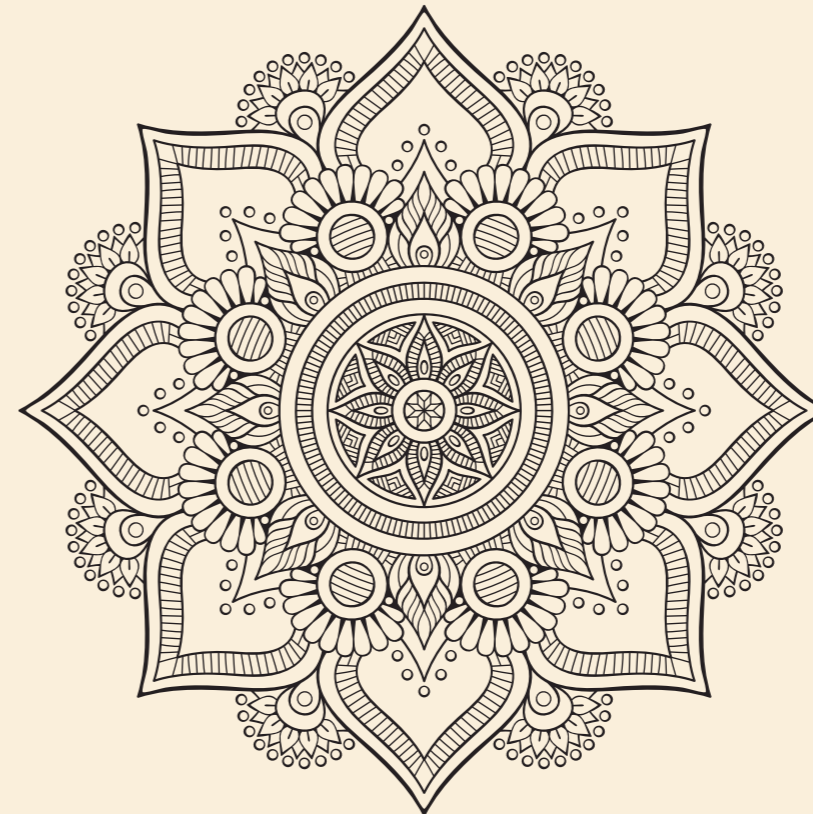
### USING MANDALAS

Colour mandalas; Draw mandalas; Photograph mandalas; Create mandalas; Find mandalas.

### SOME BENEFITS...

- Engages multiple senses (sight, sound, smell, touch, taste).
- Invites and permits non-verbal self expression.
- Supports right-brain growth (promotes relational connection).
- Promotes co-regulation and self-regulation.
- Encourages development of new neural pathways.

Let's make a mandala!



“ Art therapy is a form of expressive therapy that uses art materials, such as paints, drawing, clay, collage and even digital media such as photography and tablet technology... As a part of integrative health care, art therapy and expressive arts therapy (art, music, drama, movement, and writing) complement and support traditional and complementary health practices and interventions. ”

Cathy Malchiodi  
www.cathymalchiodi.com

Looking for a Perth based art therapist?  
Search the Professional Association for Arts Therapy in Australia and New Zealand:

[www.anzata.org](http://www.anzata.org)



## REFLECTIONS FROM THE PAST

**Where interventions are not provided at the earliest possible time, the impact of harm can be more serious and include, depression, anxiety, panic attacks, substance use, eating disorders and suicidal ideation.**

(Adult Childhood Foundation, 2017)

## 30 years of service at Phoenix



I commenced employment with the Incest Survivors' Association (I.S.A.) in September 1986 following an interview by Association President Nancy Rehfeldt at the May Holman Centre in the W.I.R.E. (Women's Information and Referral Exchange) building. I then worked for a few years alongside Nancy, a delightful, Welsh lady.

At the May Holman Centre, the State Government had provided free office space to our agency,

which consisted of one counselling room and a reception area, as we grew and our services were in high demand, we very quickly required more space, after one year the decision was made to find larger premises. Nancy Rehfeldt applied for a funding grant from United Way and we were successful in receiving three years rental assistance for our next location.

We moved to 185 Stirling Street, Perth (opposite Telstra). The staff were able to access the Cafeteria at Telstra, with lots of delicious food. These premises consisted of 2 counselling rooms, a reception area and a small kitchen. This location was very convenient to clients using public transport into Perth, as it was a short walk over the Barrack Street Bridge and along Stirling Street. We were expanding with more clients requiring our services and more counselling rooms required, we occupied this 1930's building for three years.

Our next move was to 88 Edward Street, East Perth, a charming 1920's semi-detached terrace home, close to Lord Street, which enabled clients using the train, to get off at Claisebrook Station and walk straight up Edward Street. As we were now running Therapy Groups, we required a designated room for this purpose. After three years at these premises, the search commenced for more suitable accommodation to meet our needs.

We didn't move too far and found an excellent location at 21 Lacey Street, East Perth, which consisted of three counselling rooms, reception area and very large room to run groups and hold Board Meetings. What was most welcome was air-conditioning throughout the home, which we did not have in the last two premises. ISA occupied Lacey Street for 19 years. While at Lacey Street, Leonie Shiels our CEO, was successful in gaining a Lotterywest grant for I.S.A. to purchase our own building.

Anne Pekaar, who was our Chairperson, Leone Shiels as CEO and Alison Day (Counsellor) first viewed 404 Walcott Street, Coolbinia on the 15th September 2011 and it was decided this home, suited the requirements of I.S.A. clients and staff.

It took approximately 6 months of renovation and provision of disability access, before we finally moved in. I became site manager during this period, meeting with different trades people on site for many months. I.S.A. finally had our own premises, and we were pleased there was to be no more renting. The building is a beautiful place and many clients comment about the counselling rooms and the building itself having a warm and inviting atmosphere. In addition, we can now provide free parking for clients and staff along with the surroundings of a delightful well-established back garden and a row of rose bushes in the front that keep our waiting room well supplied with the fragrance and beauty of fresh roses for most of the year.

During my 30 years of service at I.S.A. now known as Phoenix I have worked with many CEO's and Counsellors and it has been an honour to work beside the staff members, who have chosen to work with women, men and children who have suffered the traumatic impact of child sexual abuse for many years.

Seeing clients commence their counselling journey has been a privilege, to observe them grow and blossom throughout the course of therapy through the support of the skilled work provided by their caring, dedicated and professionally trained Counsellors, that assists them to heal and recover from the pain and abuse they suffered in the past, no longer as a victim but as a survivor!

The hundreds of clients that have accessed our services are so courageous, coming forward to seek help and being able to move on in a positive way in their future lives. When I first joined the I.S.A. team as a staff member I was surprised that the West Australian community required an agency like Incest Survivors' Association, how wrong I was, as there are so many people effected and scarred by child sexual abuse that needed support.

My 30 years of service have passed so quickly. I have so many wonderful memories from time spent working with the numerous staff employed here during these last 30 years. This has been a journey for myself and for the many clients who have touched my life.

LOIS LLOYD — OFFICE MANAGER

## Retired Board Member's Report

I am honoured to respond to a request to add to this year's annual report as a retiring Board member of over 7 years. In my capacity as not only a Board Member but as Deputy Chair (2 years) and Chair (Acting 1 year and nominated Chair 3 years) I am compelled to reflect on how this organisation has evolved to become a highly professional and influential organisation.

It has been a privilege to serve on the ISA/Phoenix Board with many highly professional individuals who offered their expertise and personal time to support and influence the organisation. Engaging with such a broad spectrum of individuals provided rigorous and robust discussion from many perspectives to enhance the organisation's status within and for the community to grow exponentially. The staff's professional contribution complemented.

I clearly recall my first Board meeting for the then ISA wondering what I was doing with such a haphazardly run organisation. A sense of possibilities made me hang in there and make every attempt to encourage a more professional focus. With time and many hours of agonising work later by Board members and employees alike, the organisation took on a solid, efficient, and capable focus with all its systems neatly in place for the clients to experience its professional focus. In addition, the Board members ensured that the strategic plan provided consistency, capacity and vision for the future. The passage of time has a variety of glitches, episodes of uncertainty and moments of exhilaration which made attending Board meetings both a delight and a challenge.

It was with a sense of great achievement when Phoenix purchased its current charming space and with pride knowing that clients attend in an environment of open inclusion and safety. It was wonderful to work with ISA's longest serving chair, Anne Pekaar, who single-handedly held the organisation together to explore various possibilities that this site offers the organisation well into the future. A special moment at the official opening was actually meeting with and talking to Founder Nancy Rehfeldt. Rebranding from ISA to Phoenix only enhanced the tireless work Nancy commenced over 30 years ago.

Since my inclusion on the Board there have also been significant staff changes which in and of itself offered variability, capacity to change and the opportunity to hone the services to the high quality they are today. Throughout these challenges, there has been a consistent vision from the Board and staff alike that the services offered to the community were not only essential, but highly sought after.

I retired from the Board knowing that Phoenix's future was bright and despite the sadness of 'not belonging', I remain confident in the Board and staff's ability to sustain high standards, effective interventions and services and remain organically active for many years to come. I wish all involved with Phoenix sincerest wishes for a healthy, robust future.

ANGELA LOXTON — FORMER BOARD MEMBER

“Phoenix provides a safe haven for survivors. I have found my experience with Counsellors here to be light years ahead of what I have encountered elsewhere. I am so grateful to have the benefit of ongoing support in a caring, validating, non-judgemental environment and of their vast experience. The whole set up of the centre and all people in it reflect this also.”

A Phoenix Client



## OUR FINANCES

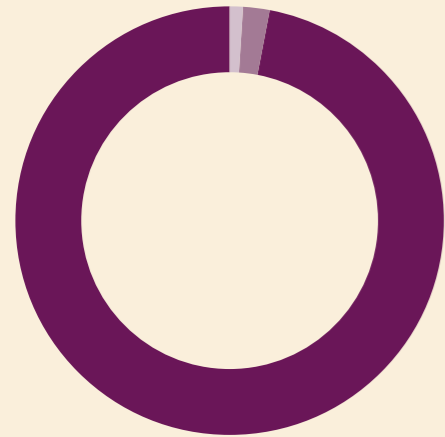
**The relationship between Child Sexual Abuse (CSA) and presentations at allied health or mental health services in adulthood has been well established. What may be concerning is the lack of awareness about the physical and psychological effects of CSA in light of the prevalence of CSA presentations in mental health and allied health environments.**

(Mansfield et al, 2017)

# Financial Report Overview

## INCOME

Fee for service	\$ 10,785	1%
Funding	\$412,807	97%
Other income	\$ 3,794	2%



## STATEMENT OF FINANCIAL POSITION

	2017 (in \$)	2016 (in \$)
<b>CURRENT ASSETS</b>		
<b>CURRENT ASSETS</b>		
Cash and cash equivalents	153,028	124,479
Trade and other receivables	28,076	2,629
<b>TOTAL CURRENT ASSETS</b>	<b>181,104</b>	<b>127,108</b>
<b>NON-CURRENT ASSETS</b>		
Property, plant and equipment	773,373	790,765
<b>TOTAL NON-CURRENT ASSETS</b>	<b>773,373</b>	<b>790,765</b>
<b>TOTAL ASSETS</b>	<b>954,477</b>	<b>917,873</b>
<b>LIABILITIES</b>		
<b>CURRENT LIABILITIES</b>		
Trade and other payables	109,040	41,618
Employee Benefits	24,266	24,188
Unexpended Funds	9,267	-
<b>TOTAL CURRENT LIABILITIES</b>	<b>142,573</b>	<b>65,806</b>
<b>NON-CURRENT LIABILITIES</b>		
Employee Benefits	5,517	8,939
<b>TOTAL NON-CURRENT LIABILITIES</b>	<b>5,517</b>	<b>8,939</b>
<b>TOTAL LIABILITIES</b>	<b>148,090</b>	<b>74,745</b>
<b>NET ASSETS</b>	<b>806,387</b>	<b>843,128</b>
<b>EQUITY</b>		
Reserves	843,128	849,295
Retained earnings	(36,741)	(6,167)
<b>TOTAL EQUITY</b>	<b>806,387</b>	<b>843,128</b>

# \$371,954

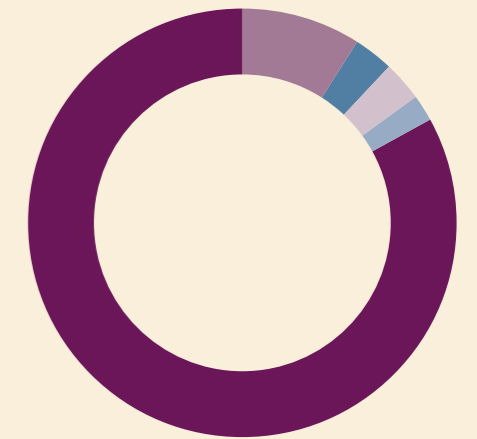


Source: WA Department of Communities, Child Protection & Family Support

For: Service Delivery, Counselling & Support

## EXPENDITURE

Service delivery costs	\$ 385,438	83%
Depreciation	\$ 14,230	3%
Insurances	\$ 11,860	2%
Operational costs	\$ 40,646	9%
Professional Development	\$ 11,953	3%



# \$50,000



Source: WA Primary Health Alliance (WAPHA)

For: Trauma Transformation Trial (Set up costs)

# \$55,595



Source: Lotterywest

For: Service Development Project, Rebranding of organisation



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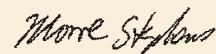
www.moorestephenswa.com.au

### AUDITOR'S INDEPENDENCE DECLARATION UNDER SECTION 307C OF THE CORPORATIONS ACT 2001

#### TO THE BOARD MEMBERS OF PHOENIX SUPPORT & ADVOCACY SERVICE INC

I declare that, to the best of my knowledge and belief during the year ended 30 June 2017 there have been:

- (i) no contraventions of the auditor independence requirements as set out in the Corporations Act 2001 in relation to the audit; and
- (ii) no contraventions of any applicable code of professional conduct in relation to the audit.



Moore Stephens  
Chartered Accountants

Dated this 20<sup>th</sup> day of October 2017 in  
Perth, Western Australia.



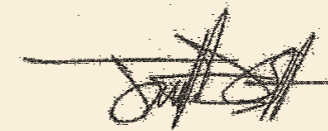
Neil Pace  
Partner

## Phoenix Support & Advocacy Service Inc. Financial Report 2017

### BOARD MEMBER'S DECLARATION

In the opinion of the Board of Management of Phoenix Support and Advocacy Service Inc,

1. The attached financial statements present a true and fair view of the financial position of Phoenix Support & Advocacy Service Inc, as at 30 June 2017 and its performance for the year ended on that date in accordance with the accounting policies described in note 1 to these financial statements;
2. The operations of Phoenix Support and Advocacy Service Inc. have been carried out in accordance with its constitution and conditions of the service agreement with the Department of Child Protection Family Support and West Australian Primary Health Alliance;
3. At the date of this statement there are reasonable grounds to believe that the Association will be able to pay its debts as when they become due and payable, so long as the State Department of Child Protection Family Support and West Australian Primary Health Alliance continues to provide funding to the Association;
4. The financial statements satisfy the requirements of the Australian Charities and Not-For-Profits Commission Act 2012.



Jonathan Smith  
Chairman of Board

Dated this 20<sup>th</sup> day of October 2017



## OUR ADVOCACY

**If Prevalence rates as high as 1 in 3 girls and 1 in 6 boys represented a communicable disease the situation would be considered an epidemic and national disaster. This is the level of child sexual abuse that to some degree we tolerate in our society and communities.**

# Submission to the WA Cabinet Sub-Committee on Civil Litigation for Child Sexual Abuse

## WHAT CAN PHOENIX OFFER TO THIS DEBATE AND CONSIDERATION?

Phoenix Support and Advocacy Service Inc. as a not-for-profit independent secular specialised service in Western Australia, has worked exclusively for four decades with those impacted by child sexual abuse. Phoenix is well placed to make an important contribution to the current debate and proposed changes to the Statute of Limitations. Through this experience Phoenix has developed and acquired specialised knowledge and practice wisdom.

## THE PHOENIX PERSPECTIVE

Phoenix would highly recommend the removal of the Statute of Limitations for many reasons however, the main reason being that recent Royal Commission research revealed it takes a person on average 22 years from the time they were sexually abused as a child to disclose the abuse, or decide to report it to Police if they ever do. This time lapse supports and affirms what Phoenix has learnt anecdotally and from data collected. Therefore, it is obvious the six-year Statute of Limitations is problematic. We also know that babies and toddlers are sexually abused, as evidenced through the presence of sexually transmitted infections or presentations of related injuries, and therefore it is likely those children will not have become adults before their rights expire through the current Statute of Limitations period. Given current knowledge and the evidence highlighted above, Phoenix would advocate that no statute of limitations is applied.

The current age range of clients accessing support from Phoenix is 5 years of age onwards and with the oldest client being 91 years of age. It is becoming more evident through research and first-hand reports, that healing from experiences of child sexual abuse (and other forms of child abuse) is a life long journey of recovery for many. Originally conceived in 1978 Phoenix has been operating in WA ever since and has clients who have



re-engaged with the service even after a 20-year break due to trauma being triggered again by a life event.

On average, clients attend Phoenix over a 1 to 5-year period, and take some therapeutic breaks during that time, but their initial therapy following disclosure, and if they are ready for the emotionally taxing work, is to attend either once a week or once a fortnight for an average of 12 months. Sometimes this is longer for those presenting with complex trauma and comorbidity. Sadly, because Phoenix has been operating for such a long period in WA, from time to time the adult children of former Phoenix clients (i.e. parents or relatives) seek counselling for the trans-generational impacts passed on because of sexual abuse, or because they themselves have also been sexually abused, which is not uncommon because the child's parent who suffered abuse often does not know how to be a protective parent due to their own abuse experiences. Child sexual abuse is an extremely emotive topic (as are other forms of child abuse) that often leads to robust debates, particularly with so many injustices having been perpetrated by the very systems supposedly set up to represent and/or protect victims

of child abuse. Unfortunately, uninformed perspectives fueled by myths are rife.

Phoenix would recommend reviews of recent Royal Commission Papers relevant to the proposed changes including the paper on 'Trauma informed approaches to child sexual abuse'. This report highlights how human service organisations and the legal and welfare systems set up to respond, support or protect, all too frequently re-traumatise victims of child sexual abuse, mostly through lack of knowledge or adequate training, and/or workers representing their own personal views rather than being informed by evidence based research or underpinned by required action, best practice, organisational policy, legislation or legal requirements.

It should never be assumed that those in the helping and legal professions really understand child abuse sufficiently to know how to respond adequately and appropriately, as alarmingly many don't understand. Training in this area is often tokenistic and totally inadequate for preparing these professionals for sound decision making and responses often result in crisis driven reactivity instead. Personal ideology can then prevail over professional policy. Children can be further abused and traumatised by the system, as well as the offender, and the wounds are left to fester rather than heal.

## CONSIDERATION OF UNINTENDED CONSEQUENCES OF REFORM

Phoenix took an active part in assisting with the WA Redress Scheme in support of survivors however, through that experience found the organisation was required to complete an onerous administrative process that ultimately overshadowed the counselling and support role of the organisation, and counselling staff felt somewhat compromised in their role. The requirement for an extensive history of the abuse to be sought from the survivor led to many clients being re-traumatised by this process.

The Royal Commission has been made very much aware of this challenge when implementing Redress schemes, and consideration is being given in how to reduce and minimise these impacts. The Royal Commission papers mentioned above, also review and comment on some of these concerns and challenges.

Current good practice for supporting the recovery of survivors of child abuse does not necessarily require the retelling of historical events or providing detailed descriptions of the abuse, as this can re-traumatise and reinforce neuronal pathways associated with specific memories. Therapeutic processes work



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## Submission to the WA Cabinet Sub-Committee on Civil Litigation for Child Sexual Abuse (ctd)

more with addressing and healing the impacts of the trauma experienced (e.g. anxiety, depression, self-harm, suicidal ideation etc.) rather than working with the memories of abuse.

Seeking historical information is where child abuse impacts become complicated when legal processes require the retelling of events in criminal prosecutions, civil litigation or criminal injuries claims. Phoenix appreciates why this information is sought, and the processes considered necessary however, supports recommendations by the Royal Commission seeking to educate the community and those in the relevant legal and welfare systems and redress schemes.

Phoenix is not so bold or deluded to assume the organisation has all the answers or solutions to offer, however Phoenix does consider the line between counselling, forensic investigations, criminal proceedings, civil litigation, criminal injuries compensation claims etc. has become blurred and problematic, resulting in offenders more likely in some respects to possibly benefit, or avoid justice, while survivors are re-victimised.

### COUNSELLING IS COUNSELLING

This is a complicated topic and conversation however, Phoenix must highlight a few key points. Consideration needs to be given to separating the counselling process from the other processes named above. Citizens, including children, should be able to seek counselling support without ever having to fear their personal and confidential records will become fodder for public display and courtroom debates.

Counselling was never ever intended to be, or to become, a source of evidence. Counselling practitioners recording case notes, are doing so for therapeutic purposes only, and to inform their practice approach and knowledge of their client, and to keep track of the work undertaken. Counselling sessions, and counselling records, were not designed to gather information for forensic purposes, court proceedings, civil litigation, or divorce applications, nor were these records designed to stop violence, settle child access or property disputes, or to inform compensation claims full stop. The line in the sand has disappeared.



To force the handing over of counselling records via subpoena, or other legal means is a violation of a process intended for another purpose. Effectively, this course of action allows offenders, lawyers, magistrates, court workers, police, and the general-public, to become voyeurs in a process. Counselling was considered safe, supportive and confidential (with exception for safety and child protection), and for some almost 'sacred', similarly to the traditional protection afforded the sacrosanct and faith based 'confessional'.

It seems the 'Churches' and their 'Priests' have been protected and permitted to keep their confessional and known secrets to themselves, while the records of confidential conversations, and the intimate information belonging to victims and survivors, can be sought at any time to reveal all, including information that has no relevance to a criminal proceeding.

Phoenix acknowledges counselling records may contain information of some relevance to a legal proceeding however that is not the purpose of the records and never should be. Careful and creative consideration needs to be given to devising other means for collecting information that may or may not need to be used in the future, and that would be considered credible information if it is called upon to validate a victim and their claims, rather than a source from which to discredit and humiliate them.

It is ironic and hypocritical to encourage victims to come forward and seek counselling, or compensation or make reports to Police if their counselling records will not remain confidential. It is like asking someone to step forward and volunteer to be re-traumatised, disbelieved, demeaned and objectified all over again, and to recreate the original nightmare. It's a brave and courageous survivor (and there are many) who still takes that risk despite all the odds stacked against them.

Phoenix suggests a record of attendance to a counselling service should suffice at most, but even then, may not be necessary, if more effective evidence-gathering systems independent of counselling are in place. Counselling records however, should not be viewed as the means, or the source for the prosecution case. Phoenix would recommend staff who are forensically trained would be best placed to record a client's history of child sexual abuse and the impacts, so it is written and recorded for a possible criminal proceeding. This creates an ethical boundary and protects counselling notes and information of no relevance to a trial.

Removing the Statutes of Limitations needs to be thought through in the broader context, and the implications this may have for people seeking justice and ways to validate their experiences of abuse. It is the experience of Phoenix that victims themselves often have no idea of the implications of consenting



to their records being obtained. They are not informed that they will have no control over how that information is used once released, or who will see this information. Phoenix has supported many clients dealing with the shock of this realisation and reality, and/or the distress of being humiliated and doubted as a witness recalling their experience of abuse. They then live with the fact their information from their own counselling file was used by defense lawyers to assist an offender not to be held to account. For many this is the unbearable last straw.

### PROTECTING COUNSELLING RECORDS

Phoenix would suggest the Cabinet Sub-Committee review sections 19A – 19M of the WA Evidence Act to ensure that by removing the Statute of Limitations client counselling records are not sought and remain protected by the Act. Phoenix, along with similar counselling organisations, currently have obligations under this Act to protect the privacy and confidentiality of clients, and to protect their records. Phoenix have had situations where WA Police have sought to circumvent this Act by serving orders through for example the Criminal Investigations Act. This places organisations in a double bind, as it is an offence not to comply with either of these Acts. Once an order is served through the Criminal Investigations Act there is no right of reply or opportunity to appear in a Court to present a rationale for not handing over a record. Non-compliance with an order served under this specific Act can lead to a \$12,000 fine and/or 12-month prison sentence.

Phoenix have also found Police becoming heavy handed in their approach, by making veiled or in some cases direct threats by stating an intention to raid the premises to obtain counselling records. Phoenix appreciates that often this underlying intent is an attempt to gather evidence, prosecute a case and seek justice without understanding the implications of the action,



## Submission to the WA Cabinet Sub-Committee on Civil Litigation for Child Sexual Abuse (ctd)

or assuming resistance exists. This is as a Police training issue. Human Service personnel seeking to support victims of crime and child abuse, should not be subjected to the concerns identified above, as their work is complex enough, and emotionally taxing, without feeling threatened and intimidated for fulfilling their obligations and duty to protect the privacy of the client.

The position of Phoenix is that client counselling records should be protected, as it is through first-hand experience Phoenix has come to understand it is rare these records assist a prosecution. Representatives for the defense will use information from the records to discredit the victim and attempt to undermine the prosecution case. Often it is claimed in court the counselling records do not marry up with victim accounts or evidence gathered by Police, and of course this is the case, given the records were not written or intended for court proceedings or for forensic purposes, and the counselling notes were not recorded by practitioners trained for that specific undertaking. The notes and detailed records kept are for therapeutic purposes only, and as such have no relevance to, or place in, civil or criminal proceedings.

### THE TIP OF THE ICEBERG

Victims of Institutional sexual abuse are the 'tip of the iceberg' so to speak, as the topic most often avoided and uncomfortable to talk about is 'Incest' and the fact that the majority of child sexual abuse is taking place in families, or by those known to or associated with families.

Phoenix has assumed it unlikely there will be a Royal Commission into the child abuse taking place in families, or a specific



redress scheme set up for those victims and survivors. The overall effect of the removal of the Statute of Limitations would be to strongly encourage litigation against offenders in families, perhaps especially for survivors of intra-familial sexual abuse, and other forms of child abuse, who will not or are unlikely to be given the benefit of any Royal Commission redress schemes.

Abuse that occurs in families is so complex due to the emotional attachments that may be present before the abuse takes place. The ripple effect of the varied impacts that reverberates through a family and beyond to significant others and communities, when a disclosure occurs, are shattering and often leave both visible and not so visible scars for a life time.

Professor Stephen Smallbone from Griffith University who worked for many years in prisons with sexual offenders, concludes in his research that many sexual offences against children are 'opportunistic' crimes and not because of 'pathology' or someone assessed as having 'pedophile' tendencies. Children are more at risk of being abused by someone they know taking advantage of an opportunity that presents, or is purposely and carefully created, than being at risk of sexual abuse from a stranger.

The Child Pornography epidemic is only going to feed this risk, and this is another topic no one talks about much. It is an epidemic that is running rife, ruining lives, and rarely comes under control. There is no effective vaccine or cure in sight at present for addressing this plague and scourge hiding among our citizens.

### ABUSE IS ABUSE

Phoenix would advocate all victims of child sexual abuse, or for that matter any form of child abuse and neglect, should have the opportunity to seek compensation. Society can no longer dismiss child abuse as something someone 'gets over' easily, as the evidence is clear; any form of abuse can have an impact on brain development and long-term wellbeing. This statement is not just an assumption it now a proven fact. The impacts of child abuse are no longer invisible either, which brain scans undertaken can demonstrate. Reports in current research clearly show evidence of these developmental impacts along with changes in brain structure and function.

Few among the public are aware that verbal abuse can be as damaging to well-being and brain function as some forms of child sexual abuse. As stated 'Abuse is Abuse' and more on this can be found among the prolific body of work from researchers and neuroscientists such as Dr Martin Teicher, Harvard University, USA and Dr Jack Shonkoff author of 'From Neurons to Neighborhoods' to name a few.



There is hope though, with emerging research and practices, in the areas of mindfulness, self-regulation and compassion, for the process of prevention, healing and recovery. The work of Dr Dan Siegel, Stanford University USA, and Dr Stuart Shanker, The Mehrit Centre Canada, both authors of various publications and training programs.

It is worth noting, the WA Government ceased to continue funding a media campaign in the '90s for the prevention of domestic violence following advertisements generating too much demand for treatment programs and other support services. There is little logic, common sense, forward thinking, ethics or compassion underpinning these decisions. Political decisions and legislative change should not occur in a vacuum and isolated from the moral and ethical implications, and the demands for support and service delivery these decisions and changes may create. Neither should these implications become the excuse for inaction.

Radical and innovative legislative and social policy change, as

currently proposed, needs to be considered while looking at the broader 'whole' system. It is important to identify potential consequences, unrecognised need, and the likelihood of increased demands on services so these possibilities are well planned for, with the resources there and the services in place in readiness to respond adequately and effectively. These types of social paradigm shifts need bi-partisan support beyond the four-year election cycles, which Phoenix acknowledges has been said a thousand times already, however it is a fact falling on deaf ears.

There is so much evidence based research available to argue the case, and many of these arguments are built from longitudinal studies conducted over as long as 40 years. The economic argument is there too as James Heckman's research concluded for every \$1 invested in early childhood \$17 will be saved long-term. Crime rates, prison incarceration rates, unemployment etc., as we've also heard many times before are significantly reduced, but still we see the same old same old and the recycling of the 3-year pilot program.



## Submission to the WA Cabinet Sub-Committee on Civil Litigation for Child Sexual Abuse (ctd)

### COMMENTS ON COMPENSATION CAPS

Another matter of relevance, is to highlight if a client decides to apply for criminal injuries compensation the amount that can be claimed is limited to whatever the 'cap' was at the time the abuse occurred, so for example in the 1970s the 'cap' was around \$2,000 and so that is all the victim would be entitled to receive if compensation was sought and granted. If we take in to consideration the 22-year average gap between abuse occurring and disclosure, then any claims would be limited to the 'cap' of the 1990s which no doubt is a totally inadequate amount.

In addition to removing the Statute of Limitations, Phoenix would recommend the Cabinet Sub-Committee also consider removing former capped limits on compensation amounts, as well as these caps being applied retrospectively. The compensation amounts set should address meeting the needs of victims in today's market. Phoenix is aware the WA Criminal Injuries Compensation scheme only has 3 Assessors employed,

and that is for all types of claims, so they are not set up to deal adequately with victims of crime in general, let alone victims of child sexual abuse or other forms of child abuse. Consideration of adequate staffing and resources is critical. Support with arduous application processes also needs to be provided.

From a metaphoric perspective, it could be said the current situation for survivors of child sexual abuse is represented by a leaky boat with many holes in the system however, to avoid re-traumatisation and further injustices, the system needs to be looked at holistically rather than responded to reactively by plugging one hole without considering the others that exist.

Addressing one of the 'flaws' in the system by removing the Statute of Limitations is a good place to start, but will not be very effective if the other 'holes' that exist in the leaky boat, or potentially could be created, are not considered and prepared for. If these factors are not taken in to account, it is likely there will be unintended consequences, some of which Phoenix has highlighted above.



### CURRENT CHALLENGES TO CONTRIBUTING KNOWLEDGE

It is important to highlight that Phoenix has remained a very small, but highly effective and much needed and valued service in WA. The current funding situation for Phoenix supports operating a limited service with all staff employed part-time.

These limitations create an ongoing dilemma for Phoenix, in the sense there is so much Phoenix could contribute to current discourse in the community about child sexual abuse however, Phoenix is constantly challenged with decisions about where efforts are best placed that will have the most impact for those in the community without a voice, as well as for those accessing Phoenix for support. The limited time, capacity and resources of Phoenix makes these decisions difficult, and too frequently important opportunities to make meaningful informed contributions are missed, a loss not only for Phoenix, but for the community too.

### GENERAL COMMENTS

Phoenix is grateful for the opportunity to make some contribution to these important legislative changes being proposed and considered by the WA Cabinet Sub-Committee. While this submission extends beyond the information the Committee requested, Phoenix believes it is important to place child abuse in its broader context in which it occurs. As Phoenix does not have many opportunities, or the resources to be a voice at the table, this is the opportunity to speak and hopefully be heard.

This submission is intended to contribute to the ongoing education of those that hold public office, and to emphasise the enormous responsibility they have for protecting WA's children from abuse and neglect while ensuring they do their best to honour their role as the representatives for not only WA electors, but as representatives of the children who can't or couldn't speak for themselves.

### THE LAST WORD

As a final comment, Phoenix notes there seems to be a move in the sector to have small organisations merge with larger organisations as a means to reduce overall contract management responsibilities and costs, and to rationalise the internal infrastructure costs of each individual service. In some respects, there are certainly areas of service duplication and/or synergies that exist where streamlining makes absolute sense, and can in fact make service delivery for the consumer and the community more effective.

Phoenix however, would argue there are some service needs in the community that are highly specialised and lose their effectiveness if absorbed in to mainstream services. In regional areas, where relationships are key, and often built by services with the community over many years, the paternalistic attitude that prevails that 'big is best' and should takeover rather than join, shows lack of foresight and leadership about what really matters. The emphasis is better focused on capacity building what exists, rather than starting over and losing all that has been established and learnt. Co-location and sharing of infrastructure and resources could offer a solution. These smaller entities are not necessarily a thorn in the side, but rather 'gritty' survivors working at turning their organisations into community 'pearls' that add value.

With child sexual abuse prevalence rates stated as high as 1 in 3 girls and 1 in 6 boys, and with all that is emerging from the Royal Commission about the failure of Institutions funded to care for and protect children, not continuing to fund or adequately resource specialised child sexual abuse services is absolutely counter to what should be happening and what is being recommended. It is an agency such as Phoenix, and similar that exist throughout Australia, that could be holding larger organisations to account regarding child safe practices, especially due to their poor record to date in terms of protecting victims and essentially re-traumatising survivors through either a lack of response or through an uniformed and inadequate one.

LOUISE LAMONT — EXECUTIVE OFFICER



**"Phoenix is pleased to report since this Submission was written the WA Government has introduced a Bill into State Parliament which will end limitation periods for civil action by victims of child sexual abuse."**




# Thank you to our Sponsors




Government of **Western Australia**  
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