CHILDREN AND COMMUNITY SERVICES AMENDMENT (REPORTING SEXUAL ABUSE OF CHILDREN) BILL 2007

Second Reading

Resumed from 8 April.

HON ROBYN McSWEENEY (South West) [8.11 pm]: The state budget allocated some $68 million to the Department for Child Protection to implement mandatory reporting of child sexual abuse. The opposition supports this bill, but it believes that it should encompass the reporting of physical, emotional and psychological abuse and neglect, as well as sexual abuse. If the government is willing to spend that amount of money to fund the reporting of sexual abuse, then reporting should be mandatory for all forms of abuse.

In my own policy, written in 2006, I foreshadowed that there should be a separate unit within the Department for Child Protection to handle mandatory reporting of abuse. This unit would be for professionals, and professionals only—professionals reporting to professionals—to report all forms of abuse with their concerns documented and reported to one central unit. This was my idea, and it was published on the front page of *The West Australian*, and I have spoken about it many times in Parliament. This central unit was to be instigated when the department split into two sections, and only then, because I realised the enormous strain that the department was under at the time. Mandatory reporting for all types of abuse was to be implemented only when the department could resource the extra burden and have child protection workers ready and trained to handle the workload that would follow. The department has been split for 16 months now, and the government's mandatory reporting of sexual abuse will not start until January—some two years later.

I would have used the same strategy as the minister, in that I would have prepared the system to be rolled out without any glitches. If that meant waiting until the training had been done for professionals so that the unit would function properly, so be it. However, I would have set up the systems for all types of abuse. If I say this once during the passage of this bill, I will say it 100 times: I hope that the training that doctors, midwives, teachers and police get will teach them about all forms of abuse, not just sexual abuse. It seems to me rather stupid to train professionals to detect just one type of abuse, the subtleties of which I do understand. Sexual abuse is the hardest form of abuse to detect. I will return to that issue later. I know from my experience that a child who is the victim of sexual abuse is more than likely also to be suffering from physical, psychological and emotional abuse. In this respect, I understand what the government is trying to do. However, that does not let it off the hook.

I also noted in the budget that a policy on neglect has finally been written. When I went to New South Wales, I noted that it had a very comprehensive policy on neglect. Some 12 to 18 months ago I noted this government's policy on neglect. As I said before, it was eight lines long, and that is being generous. However, I am pleased to have brought it to the department's attention. The government now has a policy, but I was not afforded the courtesy of being offered a copy. Perhaps that can be rectified. Neglect is on the increase. Somehow, children who are neglected continue to slip through the safety net. They come from poverty, their parents have a history of transience and homelessness, alcohol and drug problems, mental issues and a raft of other socially dysfunctional traits. It is to our society's shame that welfare agencies and the department know these parents. However, they do not always know the children. These children escape the department's notice. As I said before, baby Sturt was a classic example of a neglected child who was known to the authorities. She died with scabies and an assortment of other illnesses in filth and squalor. She was known to the authorities through her parents seeking financial aid, which meant that she was not seen by a social worker, only a resource worker. Even though the department was told about her by relatives, she still slipped through the net. My point is that if mandatory reporting had been set up and in place for sexual, physical, psychological and emotional neglect, these babies would not have slipped through the net. Why? It is because a professional such as a doctor, nurse, midwife, policeman or teacher would have to write a report and send it on to the mandated unit. In baby Sturt's case, it may well have been a doctor, nurse or midwife, and because they are professionals, she may have had a chance.

Imagine three written reports coming in for the social worker in a fully equipped unit to look at. At the moment, anyone can phone the department and make a complaint. People can do so anonymously or give their names. My point is that there is no written record of these complaints. Complaints are not made by professional people, just by concerned people. Someone at the end of the line or the duty-intake child protection officer will make a complaint. Sometimes the reports given are rather sketchy and the seriousness is not fully grasped, through no fault of the officer who complains or reports. Under the system that the government is bringing in today with this bill, baby Sturt would still not have had a chance. Many more babies will die from neglect because of this government's negligence. There will be no written reports of the neglect, just hearsay. If this government will not mandate reporting for all forms of abuse, it needs to mandate reporting of neglect as well as for sexual abuse so that most forms of abuse are picked up by the authorities. Many of us who have worked with children who

have been abused understand this. Many neglected children suffer physical, psychological and emotional harm, just as children who have been sexually abused suffer physical, psychological and emotional abuse, so both forms of abuse would be picked up.

This government needs to take a strong stand. I certainly would not have set up mandatory reporting before now, firstly, because of my credibility and, secondly, because of the overload it would have created. Funding of $68 million for funding the investigation of only sexual abuse is not good enough. People who are untrained in child protection believe that mandatory reporting is the cure for all children who are being abused. I could stand in this place and dispute that theory very easily because, clearly, in some states it has placed such a burden on the system that child protection workers are wondering which child they will help today instead of helping the children who desperately need help. They chase their tails looking at all the reports that deal with family support problems, not child protection problems. Under this government's system, doctors, nurses, midwives, police officers and teachers will have to report sexual abuse. They will face a rather large fine if they do not report sexual abuse. Perhaps, therefore, abused children will have more of a chance of not slipping through the net.

I come back to the only abuse that will be reported; that is, sexual abuse, which is one of the hardest forms of abuse to detect. Unless a child has been penetrated and torn, many doctors do not know whether the child has been abused. Perpetrators are slimy individuals who choose their prey very carefully. They are nearly always known to the child and are trusted by the parents. The older I become, the more I realise that social standing is no barrier to sexual abuse and offers no safety net. A report that was published this year examined the number and proportion of substantiated reports made by mandated reporters. A 2006 report of the United States Department of Health and Human Services stated that professionals who are mandated reporters contribute the large majority of substantiated referrals, accounting for 67.3 per cent of substantiated cases in the United States in 2004 and 75 per cent of all substantiated cases in Canada in 2003. In Australia an analysis of cases in a 2006 report of the Australian Institute of Health and Welfare yielded an estimate of 58 per cent. We can see from these reports that mandated reporting by professionals picks up a significant amount of substantiated abuse. Training is extremely important; I cannot stress that enough. However, people must be trained to detect neglect for the reasons I have outlined previously.

What are the signs of sexual abuse? If a person read the definition of sexual abuse in a textbook and tried to define it in reality, that person would soon become confused and would soon be laughed at. This is where teachers are such important people and will have to play a huge role. They know children best. However, what evidence of sexual abuse do they look for? If sexual abuse of a child is so very obvious, why does one in three girls suffer from it? I say "girls" because in the statistics they far outweigh boys—six girls for every one boy. Why are the jails not full of perpetrators? It is because the family concerned is blind to what happens; they cannot see that their child is trying to tell them something and they cannot see the perpetrator for what he really is. I speak the truth; the absolute truth.

I come back to schools and the training on detection that I hope the government will give teachers. In 2000 a former student successfully sued the state of Victoria for the failure by a government school principal and a deputy principal to report a case that it was found should have amounted to a reasonable suspicion that the student had been and continued to be sexually abused. The student was awarded $494 000 in damages as the school's contribution for its failure to report the abuse and for the student's subsequent suffering and consequential injury from the abuse by her stepfather.

This legislation is not to be taken lightly. The government has demanded that professionals report these cases and I hope the government teaches them to identify child maltreatment and child sexual abuse. If the government does not do that, there will be cases in Western Australia for which this government will be sued. I would have thought that the government could be sued if a school failed to report an obvious case of child neglect—although schools are not mandated to do so—and the child concerned subsequently died.

Why should this government set up a unit for $68 million and still neglect the neglected? The government must think about what I have just said. Babies continue to die because they are neglected, Aboriginal babies in particular. I showed through the answer to my question without notice this evening that a one-year-old baby has been placed in 16 different homes. That baby has been neglected by this state.

Will the state be sued because a doctor, midwife or nurse allows a 13-year-old Aboriginal mother to leave hospital with her baby and the baby dies because no professional is required to report? This happens now. Aboriginal babies continue to be brought back to hospital with pneumonia or bronchitis, are discharged and then die. Is that negligence; and, if so, on whose part? Will this system capture enough abused Aboriginal children? No. If the system were to cater for all types of abuse, not just sexual abuse and neglect, would all Aboriginal children be captured? No. Would it place an added burden on Aboriginal families? That is something that the minister has to think about very carefully.

I went to a conference in Queensland recently that looked at improving child protection systems around the state. Training for teachers is going to be so important. Six out of eight Australian jurisdictions now legally compel Australian teachers to report knowledge and reasonable suspicion of child sexual abuse. Fundamental tension in mandatory reporting remains and debate continues about the justification of imposing mandatory reporting obligations on teachers.

Every year it is possible that significant economic resources are wasted on unsubstantiated reports made by teachers. Every year it is possible that significant numbers of sexually abused children attend school with their suffering undetected, or perhaps detected but unreported. Quite probably, teachers are placed under stress and may not be adequately trained and supported to be able to properly meet their obligations. That is what may happen.

Child abuse and neglect, also known as child maltreatment, is a broad term for the acts or behaviour of parents, caregivers and others that endanger a child or young person's physical or emotional health or development. Child maltreatment can be a single incident but it is usually a pattern of behaviour that takes place over time. Child maltreatment is commonly classified into four main types: physical abuse, sexual abuse, emotional abuse and neglect. It is important to note that children often do not experience just one form of maltreatment; they often experience different forms of maltreatment in combination.

One in three girls and one in six boys are abused. Twenty-three per cent of all Australian children will be the victim of child sexual assault before the age of 18 years. One child in Australia is assaulted every 14 minutes. Eighty-five per cent of sexual abuse occurs in the home. Eighty to 85 per cent of women in Australian prisons have been victims of incest or other types of abuse. The odds of future delinquency, overall adult criminality and arrests for violent crimes specifically increase by around 40 per cent for people who have been abused or neglected as children. Homeless youth who have been physically or sexually abused are more at risk of attempting suicide than non-abused adolescents.

The definition of what constitutes "child abuse" varies across the different states and territories. Similarly, child protection legislation, including mandatory reporting requirements and child protection practice, differs between the states; thus it is difficult to obtain consistent and comparable national statistics.

The groups of people mandated to notify their concerns, suspicions or reasonable grounds to the statutory child protection authorities is limited to a number of specified persons in the specified context. Western Australia and Queensland mandates reporting by every adult; the Northern Territory, Tasmania, the Australian Capital Territory, New South Wales, South Australia and Victoria have a list of particular occupation groups that come into contact with children. Some states, such as Queensland, have a limited number of occupations listed: doctors, departmental officers and employees of licensed residential care services. Victoria has listed police, doctors, nurses and teachers. Other jurisdictions, such as the ACT and South Australia, have more extensive lists or use generic descriptions such as "professionals working with children". The rate of Indigenous children being placed in state and foster care is more than six times that of other children. As we heard earlier today, some 1 100 children under the age of six are in foster care here in WA.

In 1996 there were 13 979 children in care. By 2005 that had risen to 23 695, and it has increased since then by 20 per cent every year. The number of children on orders, usually issued by the Children's Court, also rose dramatically—up to 60 per cent from 1997. The most common type of abuse reported in Western Australia, South Australia, Tasmania and the Northern Territory was neglect. That is another reason I keep saying that the minister should think about including neglect in this legislation. If the minister is unwilling to include other types of abuse, then neglect and sexual abuse will pick up physical, emotional and psychological abuse. A high proportion of children taken from their parents were living in single-parent families. Children are entering care for increasingly complex reasons associated with parental substance abuse, mental health and family violence. The number of substantiations in most jurisdictions also increased over the past six years, the most notable being Tasmania and the Australian Capital Territory. This increase is affected by changes in policies and practices in various jurisdictions. Rates of children aged zero to 16 years who are the subject of child protection substantiations in 2004-05 range from 2.3 per 1 000 in Western Australia to 14.1 per 1 000 in Queensland. Across Australia, the rates of Indigenous children subject to care and protection orders were higher than those for non-Indigenous children. Nationally, the number of children in out-of-home care rose each year, and the increase amounted to some 70 per cent. The number of Indigenous children in out-of-home care is six times that of other children.

Who will be required to make reports under the legislation now before the house? Doctors, nurses, midwives, police and teachers will be required to report. The definition of "teacher" includes teachers registered with the Western Australian College of Teaching, and teaching staff at community kindergartens. There is capacity to extend this definition by regulation to include persons providing instruction to year 11 and 12 students undertaking vocational education and training. I presume that is technical and further education.

All instances of child sexual abuse must be reported. An exhaustive definition has been drafted. At a minimum, child sexual abuse will include sexual behaviour in circumstances in which the child is the subject of bribery, coercion, threat, exploitation or violence; if the child is in a position of lesser power than another person involved in the sexual behaviour; and if there is significant disparity in the developmental functioning or maturity of the child and another person involved in the sexual behaviour. It is not intended to capture all sexual activity involving children; for example, teenage boyfriend and girlfriend activities. The activity must equate to sexual abuse. This will be a matter of professional judgement, with further information on this to be provided in training and guidelines about mandatory reporting. I will ask the minister to further explain that when we get into the detail of the legislation.

When do people have to make a report? Reporting is required when a doctor, nurse, midwife, police officer or teacher has formed a reasonable belief in the course of that person's work in that capacity that a child has been the subject of sexual abuse that occurred after the legislation takes effect, or the abuse has been ongoing. The person must report that belief to the chief executive officer of the Department for Child Protection as soon as practicable. Failure to make a report can result in a fine of up to $6 000. That is why I think the government should include neglect in the legislation. It is likely that more children who have been neglected will be picked up than who have been victims of straight-out sexual abuse. Even with the training that will be provided, it will be pretty hard to detect sexual abuse. A person can be prosecuted within three years after failing to make a report. If the period has been longer than three years, the Attorney General must give permission for the prosecution to occur. Again I ask: can the state be sued, as was the case in Victoria in the example that I gave? A person charged with failing to make a report may defend the charge. How will people make a report? People can make an oral report; however, it must be followed by a written report as soon as is practicable. Failure to lodge written confirmation of an oral report can result in a fine of up to $3 000. I am particularly pleased that the government has included this provision, because people really need to think about what they are doing if they lodge a written report, even if they are professionals.

Hon Sue Ellery: And they have to think about what they do not do, as well.

Hon ROBYN McSWEENEY: Yes; I agree with that provision.

What happens after someone makes a report? The Department for Child Protection must advise the reporter of the receipt of the written report, and the DCP must provide the police with a copy of every written report as soon as is practicable after the DCP receives the report. I am really pleased that this provision also has been included in the bill, because the police are not told about many reports. It has been noted that the agency does not cooperate very well with police in certain towns in the state.

The bill makes it clear that making a mandatory report of suspected child sexual abuse is an additional obligation on doctors, teachers, nurses, midwives and police and does not relieve the reporter of any other functions that the person may have to perform in respect of the child in the course of his or her duties. What legal protection will be offered to people involved in making a report? People who make a report, and those who provide the information that forms the basis of the report or who cause a report to be made, will be protected from being held liable for breaching a duty of confidentiality—for example, doctor-patient confidentiality—or breaching professional ethics or standards or engaging in unprofessional conduct, and will not incur any civil or criminal liability. Generally speaking, both the reporter's and informant's identity must not be disclosed to others, and penalties of up to two years' imprisonment and a $24 000 fine could be imposed for doing so. That is the provision in the Children and Community Services Act 2004. There are some exceptions to the rule of revealing the identity of a reporter. These are generally cases in which it is required in the best interests of a child or to allow for the prosecution of offences. For example, information may be disclosed to a person who is performing functions under the Children and Community Services Act; to or by the police so that they can investigate or prosecute a suspected offence related to the child; for the prosecution of offences associated with the mandatory reporting provisions; by a DCP officer for the purpose of legal proceedings relating to the child who is the subject of the report; for protection proceedings; for an application for the review of a case planning decision; or for family law or adoption proceedings. There is capacity to add other types of proceedings through regulation if required. A court may also give permission for the reporter's identity to be disclosed, but only when it is satisfied that revealing the reporter's identity is necessary to safeguard and promote the wellbeing of the child, which is of critical importance in the proceedings, or there is a compelling reason in the public interest to make the disclosure. Disclosure of identity can also be obtained with the person's written consent.

Amendments to the Freedom of Information Act are also planned to restrict the release of information that would reveal the identity of persons making mandatory reports, childcare mandatory reports and voluntary reports. The aim is to ensure that people making mandatory reports or voluntary reports about a child, whether about sexual abuse or other abuse, are provided with the same level of protection. This is important from a policy perspective, as mandatory reporters may report other matters to the DCP and would not expect different levels of protection to apply. If I were in the minister's position, I would propose to do what she is proposing in this bill; however, I

would include all forms of abuse. I would never have brought in mandatory reporting until all systems were up and running. The government is not doing that until January.

I have already said, and I will say it a hundred times in the course of this debate, that this government would be negligent if it did not include in this bill the mandatory reporting of neglect of children. As I said previously, the mandatory reporting of neglect would pick up the emotional and physical abuse of children and the mandatory reporting of sexual abuse would pick up physical and emotional abuse. I ask the minister to advise what sort of training the government will provide and whether that training will encompass all forms of abuse. The government would be rather stupid if the training did not do that.

If my amendments do not get accepted in the committee stage, I will ask the government whether it intends to bring in mandatory reporting of all forms of abuse of children next year; and, if not, what would be the earliest possible date that it would be brought in.

All children deserve a Rolls Royce system of mandatory reporting of all abuse. If the mandatory reporting of all abuse of children is implemented properly in Western Australia, this state will be in a position to show the rest of Australia how it can be done. If we have a separate unit offering professional assistance, we might have a chance of successfully implementing mandatory reporting of all abuse of children, without overloading the system.

Having said that, today I was extremely saddened—I do not have the words to express how I really feel—to hear about the children in care who are being placed in multiple homes. In one instance a one-year-old has already been in 16 placements. If this sort of thing can happen under the department's nose, it does not leave me much hope for a Rolls Royce system to be rolled out.

I have faith in Hon Sue Ellery as the minister and I sincerely hope that she will follow through with this legislation and that Western Australia will become the first state in Australia to show how mandatory reporting of sexual abuse of children can be implemented properly. However, to achieve that aim, all forms of child abuse must be included in this bill.

HON BARBARA SCOTT (South Metropolitan) [8.43 pm]: The Children and Community Services Amendment (Reporting Sexual Abuse of Children) Bill 2007 will amend the Children and Community Services Act 2004 to provide for the mandatory reporting of sexual abuse of children. Nothing is more important to Western Australians than their children. Our children are not only our future, but also the best part of our present. No interest or political consideration can be permitted to compromise their wellbeing. Every government and opposition must be judged on its commitment to its children. A government that does not put children first does not deserve to govern. This opposition puts children first. Members know that no matter how much we love and care for our state's children, they are being abused. This is not an interesting subject for study by academics or discussion by bureaucrats; it is both a tragedy and a scandal. It is the absolute duty of governments to protect the weak in their communities. There is no weaker individual than an abused child. The opposition accepts its duty as a solemn trust. Governments that are soft on child abuse betray their communities. Too often child abuse is treated as a social phenomenon to be talked and conferenced away. We have witnessed that over the past six years. Child abuse is not just about substandard parenting or bad parenting. When a boy is beaten or a girl is assaulted, a serious crime is committed. Families must be counselled and supported. However, when a crime is committed against children, it must be reported and dealt with. For the opposition this is non-negotiable.

As members know, Western Australia is the only state in Australia in which it is not mandatory by law for professionals who have responsibility for children to report child abuse. Only in Western Australia can professionals who are responsible for the care of children observe the unmistakable signs of child abuse and be under no legal compulsion to report them. This is not the choice of the people of Western Australia, who revile child abuse, but of a government that is more concerned with bureaucratic turf wars, academic opinion and finding money for grandiose projects rather than preventing violence towards children. The opposition rejects this approach as un-Australian. The arguments usually made against mandatory reporting are the sorts of arguments that appeal to governments that are soft on crime and even softer on crime against children; that is, there will be too many reports, civil liberties will be compromised, there will be administrative confusion and the whole system will be far too expensive. They are the arguments we have heard in this state for the past six years. These are the problems that arise when mandatory reporting systems are adopted as a mere token. This government bill is nothing more than the epitome of a mere token. It requires only that sexual abuse be reported and only then by doctors, nurses, midwives, teachers and police officers.

In contrast, the opposition has, over the years, proposed mandatory reporting as a key part of its commitment to children for the simple reason that there is no better investment than in the safety of our children. The amendments on the supplementary notice paper will reflect partly the private member's bill that we introduced into the lower House in 2006 and for which I was responsible. They will mandate the reporting of all child abuse. This will apply whenever there is a reasonable belief that a child either is suffering or is at risk of

suffering significant harm from any form of abuse. Quite apart from its legal effect, if the opposition's amendments are successful, this bill will become the first unequivocal statement by the Parliament of Western Australia that child abuse is to be detected and eliminated whenever it occurs. Alas, in its current form, the bill is most certainly equivocal, saying as it does that we are not sure whether we should take a stand against child abuse but perhaps we should do only a little about child sexual abuse by getting a few people to report it. Those people, by and large, already take action when they suspect a child is being abused.

Government members must put aside their desire to hoodwink the public of Western Australia over this bill. They must be honest and do the job properly. They must put their money where their mouths are. It is not enough to just pass this bill, even with our amendments; the government must also generously resource the Department for Child Protection. It should be responsible for not only receiving and dealing with reports of child abuse, but also the critical functions of advising and training mandated professionals on their responsibilities and monitoring the functions of the system generally. Some may say that the cost will be high, and so it will be; however, we must get our priorities right. It is estimated that at least 1 000 children a year would be rescued from abusive environments if full and mandatory reporting were to be adopted in Western Australia and the department were to be properly resourced. Governments use phrases such as "abusive environments" to cover up horrific crimes and to prevent their inaction from pricking their conscience too much. When we say "abuse", we mean torture; when we say "abusive environments", we mean homes that have become prisons and torture chambers in which little children suffer and continue to suffer. I asked the Premier just how much money was too much to save 1 000 of those children every year—$100 million, $200 million, $500 million? Estimates suggest that the extra money needed to top up the budget to properly resource the Department for Child Protection would not even be as much as the first figure—$100 million. I hope every member is thinking we should double that amount to hopefully save more children. As a result of the mandatory reporting provisions in this bill, Western Australia will at last join the rest of Australia in squarely facing one of the great evils of our society. There is no room for a bet each way. Either we uncover, utterly reject and eliminate child abuse, or we wink at its existence. To a degree, I commend the government's first step towards mandatory reporting, but I cannot agree that it has gone far enough.

The opposition introduced a private member's bill into the Legislative Assembly in August 2006 to provide for mandatory reporting of child abuse whenever a reasonable belief was held that a child was suffering, or at risk of suffering, significant harm from physical or sexual abuse. Quite apart from its legal effect, the bill would have been the first unequivocal statement by the Parliament of Western Australia that child abuse is to be detected and eliminated wherever it occurs. I stand in this chamber proud of the fact that as a member of the Western Australian legislature, I persuaded the opposition to introduce that private member's bill. The opposition made a commitment before the election in 2005 to bring in such a private member's bill if the government did not bring in mandatory reporting. I did the work and canvassed all the mandatory reporting legislation across Australia. The opposition introduced a private member's bill to the lower house in August 2006. The government continually refused to debate the bill and denied the need for Western Australia to have mandatory reporting of child abuse. Government members should hang their heads in shame after coming to Parliament with a bill that provides only for the reporting of child sexual abuse. How dare they allow little children to be abused in other ways, including physically or through neglect? There is evidence of abuse from around the state. As part of her responsibilities, Hon Robyn McSweeney has been vigilant in time and again raising the issue of gross neglect of children. Today in question time she highlighted the fact that a number of children had had as many as 12, 16 or 17 care placements. If that is not child neglect or abuse, I ask the government to tell me what it is. The department cannot find a home for a baby or a little child, so the child is moved around 15, 16 or 17 times. Surely that is harming the child.

Every other state in this nation requires harm to the child to be reported, yet here we have a bill that is looking at only child sexual abuse. Child sexual abuse, as I have said before time and again in this chamber and in other places, is a little like corruption—it is done in secret; the child is usually taken into confidence and threatened not to disclose the secrets of abuse. It is appalling and it is unacceptable. Since 2002 I have implored this government to introduce a form of mandatory reporting in this state, for it became more and more evident that it was required as we uncovered more and more evidence of child abuse and neglect. Here we had a state in which there was no legislation that mandated professionals working with children to report their suspicions of harm or neglect. The government has continually argued that it would not and did not need to introduce mandating legislation. Finally, last year, having sacked three ministers and after a whole raft of embarrassing publicity, there was a backflip by the government. I have here a couple of media statements that refer to this backflip, which took place in March 2007. I have in my hand a copy of the *Weekend Courier*, which is a newspaper in my electorate, with the headline "Backflip queried". Why did the state government suddenly do a backflip? Another headline of the *Weekend Courier* is "New child sexual abuse law overdue". The article reads —

> The State Government's decision to reverse its opposition to mandatory reporting of child sexual abuse is the silver lining to a dark cloud. That cloud was the damning report into the Department for Community Development released by Premier Carpenter last week.
>
> The report was commissioned by the Carpenter Government in response to revelations surrounding the death of toddler Wade Scale who died while in the care of a convicted child basher, despite repeated calls to the department that he was at risk.

That little boy lived in my electorate, and his grandparents contacted my electorate office with their concerns. He then died. During all that time from 2002 right through to 2007, I pleaded in this place and in the public arena for legislation to make it mandatory for professionals and doctors to report child abuse.

We are in the Parliament this evening to debate a bill that I consider is half-baked. As I said, the Liberal Party went to the 2005 election with a costed commitment to introduce mandatory reporting. It was costed at that stage on what it cost in Queensland, so it was only an estimated cost, but we estimated that the cost would be at least $65 million over four years because of the high cost of training people to detect abuse in children.

As we have continually said, child abuse is a crime; it should be reported and punished and the perpetrators removed. So often we see only the children removed and moved and moved and moved, time and again, rather than the perpetrators.

It was only when Premier Carpenter was faced with a number of embarrassing reports and ministers being sacked that the government decided to latch on to this notion that mandatory reporting of child abuse was something that the Western Australian public had called for and would indeed support. However, this bill, as has already been said, covers only child sexual abuse. What about the children who suffer from physical violence and neglect? During the time I was promoting the private member's bill a number of people contacted me. One of those people—I have previously mentioned him in Parliament—was Dr John Boulton, who is a paediatrician in the Kimberley. In his document he states —

> Child protection is a human rights issue: Indigenous children in the tropical north of WA suffer neglect leading to endemic malnutrition; gross lack of basic hygiene so that skin infections result in endemic nephritis and rheumatic fever; fetal alcohol spectrum disorder so common that it has an impact on the civic function of certain communities; and endemic child sexual abuse.
>
> I propose that mandatory reporting of child abuse and neglect should be adopted by every state legislature. The reason for this is that the identification of child abuse and neglect is a human rights issue, and that the notification of such abuse to the relevant statutory authority is the first essential step in the formal identification and intervention of abuse and neglect.
>
> I submit that child protection is not a party political issue and that medical professionals have a moral responsibility to advocate for legislative changes which will contribute to the improvement of children's safety.
>
> The background to . . . this request is that I find myself in an anomalous position in working in WA where the reporting of child abuse and neglect is discretionary, and in the Kimberley Region in the far north west, which has probably the nation's highest incidence of gross failure from malnutrition as a consequence of neglect, and also of child sexual abuse.
>
> My letters recently published by The Australian (11 Nov) and the West Australian (11 Dec) newspapers, and the newspaper article published on Friday 15th Dec concerning my advocacy of mandatory reporting, came from my position as a paediatrician for the Kimberley Health Region being an advocate of children's human rights.

I am reading this into *Hansard* because I am very fearful that government members think that they are doing the children of Western Australia a favour by introducing only mandatory reporting of child sexual abuse. That is not the case. Dr Boulton continues —

> In my letters I made three points:
>
> 1. That WA is unique in being the only jurisdiction in the nation without mandatory reporting of child abuse.
>
> 2. That the absence of mandatory reporting leads to health workers having to make a decision whether or not to report abuse. This decision should be outside their boundary of professional responsibility because they are inevitably placed in the position of being a moral gatekeeper, which they are not trained for. The result is that a high proportion of cases of abuse on remote communities are not reported because of misplaced concerns by the health worker.

> The discretionary nature of reporting results in medical and nursing staff in regional centres, remote townships such as Fitzroy Crossing and Halls Creek, and in the most remote indigenous communities in Australia, being put in the position in which they have to make a decision as to the likely benefit of informing the Department of Community Development (DCD).
>
> . . .
>
> These barriers include the decision not to report because of the fear of intimidatory violence being perpetrated on a relative of the victim, or on themselves e.g nurses being told that they will be assaulted if they report to DCD; or because of a misguided belief that Aboriginal people have suffered enough intrusion from "Welfare" so that they should not be exposed to more.
>
> . . .
>
> 3. That the evidence for lack of an adequate response by the welfare agency which has authority for child protection is no reason not to report child abuse. This argument is based on the false premise that health workers can by their own actions (in being selective in which cases to report), in some way increase the likelihood of DCD in WA responding in a more efficacious way.
>
> My point is that the inadequacies of the response of DCD is a different issue, and one which needs a separate response.

Those are the words of Dr John Boulton written in 2007. He wrote a number of letters to the papers and I made contact with him. In a letter to me dated 15 February 2007 he says —

> Dear Ms Scott
>
> Thanks you for your letter of 13 Dec concerning my effort to get public discussion over the problem of the lack of mandatory reporting of child abuse and neglect in WA. I appreciated you sending me the copies of the bill and the notes.

He is referring to the copies of my private member's bill. He continues —

> I apologize for this late response. I had hoped to have got some national support for this through our Special Interest Group in Child Protection of the Chapter of Community Child Health of the Division of Paediatrics of the Royal Australasian College of Physician. However, that discussion hasn't happened yet, so I thought I'd send you a slightly edited version of the discussion memo that I am proposing to send out to my colleagues.
>
> I would be pleased to assist you in your effort to bring WA legislation in line with the rest of Australia, and although I consider this should not be used as a party political issue, I do wonder why the current WA government is so obstinate in its refusal to consider it.

He refers also to a discussion paper on child obesity that I wrote. I do not need to read that into *Hansard*, but he says that he is in whole-hearted agreement with the ideas I put forward.

Over the years that I have been supportive of and proposing a move towards a mandatory reporting regime in this state, there has been a huge increase in the rate of child abuse. I have copies here of media statements on the issue that I released in 2002, 2005 and 2007. I have also a copy of a report from *The West Australian* of Friday, 6 July 2007, which states —

> Leading child health expert Fiona Stanley wants the State Government to introduce tough welfare laws that would give child protection officers the power to monitor babies in the womb in a bid to prevent neglect and abuse.

No-one's view on child health care is more highly regarded in this state than Professor Fiona Stanley's view. Professor Stanley is saying—this legislation does not provide for it—that in the case of a young, high-risk, possibly drug addicted, pregnant mum or someone who is not coping at all, arms should be wrapped around the family or the mother to ensure that the baby is safe on arrival, and I support that concept. It should be in the legislation. Others will disagree with me, but it is my turn to speak. As Fiona Stanley says, such monitoring could save babies' lives. It could have saved baby Wade Scale's life. Welfare workers in Rockingham knew the high-risk family that baby was going to be born into, yet the baby drowned. The article states further —

> At least 100 unborn babies are being monitored in NSW and Victoria,

The purpose of doing so is not to take babies from mothers. It is to protect babies who are born into high-risk situations and give support to the parents. Fiona Stanley is further reported in that article as saying —

> The earlier we can intervene, the better it is for the mother and the better it is for the child. We have a window of opportunity to reduce the mother's exposure to drugs or alcohol, increase her parenting skills and reduce the risk of her getting pregnant too quickly again.
>
> "Most mothers, even drug addicts, want to be good mothers."

I can attest to that from my limited experience of meeting young women who are pregnant or drug addicted. They desperately want to be good mothers to their children. The article further states —

> There has been a surge of child abuse notifications in Victoria since laws governing unborn children were introduced in April.

That is, April 2007 —

> NSW has had similar laws for almost seven years.
>
> While the WA Government has not agreed to the approach, it is examining the idea through a working party set up to look at the impact of parents' drug and alcohol use on infants.

As I said in my introductory remarks, child abuse, child neglect and harming little children are not things to be conferenced away and talked about. Why does the government not take this opportunity—it has an opportunity while it is introducing the mandatory reporting of child abuse, and it will probably not have this opportunity again for many years—to ensure that we bring in a regime of mandatory reporting that protects all children who are likely to be abused, neglected or physically harmed? The article goes on to state —

> In the latest edition of Family Matters, the journal of the Australian Institute of Family Studies, Professor Stanley argues that Australians should consider child welfare as a similar priority to combating climate change. Also, rather than debating whether governments should reduce taxes in such a booming economic climate, she suggested that they should be considering increasing taxes to provide better public services for children and young people.

The article goes on.

There are issues within this bill that I find quite offensive. In my view, this is just a token contribution to mandatory reporting of child abuse because it excludes physical abuse and neglect. There is a clause in the bill that says that mandatory reporting will not be introduced before December this year—the government would dare not introduce it before then. It is now May. Why would the government put into a bill that mandatory reporting must not be introduced until after December this year? Maybe that is something that the minister can explain. Is that to let the government off the hook until after an election is held? The government is going to put the legislation through Parliament now. It may as well get every member in this house to talk and talk, because it is not going to introduce mandatory reporting until after December this year. There may be a rational reason for that. It may be that training needs to take place. I agree that very good training of these professionals needs to be put in place. However, if only sexual abuse is to be reported, that will limit the amount of training that is needed. Certainly, when I was at university, I, along with others, studied psychology, and we were made very aware of the outward signs that children display if they are being sexually abused. I am sure that most doctors or nurses would be aware of the outward signs, apart from the physical signs, that children display if they are being sexually abused. Therefore, if the reason for putting off the introduction of mandatory reporting of child abuse until after December this year is that training must take place, I say that the government has had some time to think about that. In the meantime, little children are suffering.

Three or four weeks ago when the world heard about the Austrian family being kept in a cell underground, people were appalled that a young woman could have been trapped inside the dungeon of a house and given birth to four or five children, two or three of whom had never seen daylight.

Most ordinary people, when they hear about abuse such as that, would lie awake at night and think it could not be true. However, there has been case after case of that type of behaviour. Many little children in Western Australia are also suffering from abuse. At least 1 000 little children in Western Australia do not have anywhere safe to sleep at night. These children are being sexually abused and physically abused, and they are absolutely terrified. These children will have no hope of developing any competencies or capabilities in the future if we cannot prevent the trauma and abuse that they are having to face on a day-to-day basis.

I support the introduction of the mandatory reporting of child sexual abuse. However, this government should hang its head in shame for having the audacity to bring into this Parliament a bill that deals only with the mandatory reporting of child sexual abuse. This bill should deal also with the mandatory reporting of child neglect and physical harm. How dare the government go into the public arena and say that it believes in the protection of children and is doing great things for the protection of children! This government is not doing great things for the protection of children, because by not also introducing the mandatory reporting of child neglect and physical harm, little children in this state will continue to suffer. As Dr John Boulton and other medical

professionals keep telling us, child sexual abuse is only one form of child abuse. I ask all members of this chamber to look closely at the clauses of this bill, and to have the courage of their convictions to debate them in the Parliament tonight, or whenever they are debated, and to pull this government into line and call it to account for the harm, hurt and neglect that hundreds of little Western Australian children will continue to suffer because of this government's lack of action on this matter.

HON SHELLEY ARCHER (Mining and Pastoral) [9.17 pm]: The Children and Community Services Amendment (Reporting Sexual Abuse of Children) Bill will make it mandatory for doctors, nurses, midwives, police officers and teachers to report child sexual abuse. Although I support the bill in principle, I have a number of concerns about how this legislation will work, particularly in my electorate. As I understand it, reports of child sexual abuse can be made orally by any of the abovementioned professionals. However, a person who has made an oral report must follow up that report with a written report as soon as is practicable. These oral reports will be received via a call centre facility such as the one at Crisis Care. I have some questions about this bill, and I hope the minister will be able to provide me with some answers. Will these call centre facilities be staffed 24/7? What professional qualifications will the staff of these call centres be required to have? Will the staff be appropriately trained to take such reports? Will appropriate Indigenous training be provided to enable the call centre staff to deal with any reports that may come out of Indigenous communities?

These reports must include the name and contact details of the reporter, the name of the child, the grounds for the reporter's belief that the child has been the subject of sexual abuse, and any other information as prescribed in the regulations. Failure to lodge a written confirmation of an oral report may result in a fine of up to $3 000. Once the Department for Child Protection has received the report, the department must advise the reporter of the receipt of that report.

Clause 124D of the bill requires the chief executive officer to provide the police with a copy of the report as soon as possible. The explanatory memorandum states —

> This provision will facilitate the investigation and prosecution by the Western Australia Police of offences of a sexual nature against a child which might not otherwise have been brought to their attention.

At the same time, the Department for Child Protection may undertake measures according to its statutory duties under the Children and Community Services Act 2004, which also includes inquiries, assessments and taking action.

It is my view that in the first instance the DCP should undertake an inquiry, and if, after it has finished its inquiry, there is some concern that there may be some basis for the report of sexual abuse, the matter should be referred to the police to be investigated. The reasons for this are that I appreciate that section 23 of the act allows an exchange of information between public authorities; however, it is unclear to me which authority—the DCP or the police—would have the lead role in any investigation of alleged child sexual abuse. This then leads to other concerns I have with the requirement for the DCP to report all possible cases of child sexual abuse to police before it makes its own inquiries. In my view, there is a possibility that there will be dual investigations undertaken for each and every case. Given the limited resources of both the DCP and the police, that will result in unnecessary work stresses and possible duplication that could be avoided if the responsibilities were outlined properly in the legislation.

Dual investigations may also result in substantial distress to the child, family members and the accused, by having several officers from different departments asking the same or similar questions over a period of time. This questioning could then lead to additional grief for all parties if the allegations made are found to be unsubstantiated or made in error. Will the minister please advise how investigations of child sexual abuse will be handled by the police and the DCP to ensure, firstly, that the minimum of distress is caused to all parties involved; secondly, that there is no duplication of resources; thirdly, that there is no unnecessary workload stresses on either of the departments; and, fourthly, that investigations are undertaken in a timely fashion?

The explanatory memorandum also states —

> Clause 124F of the Bill contains provisions to protect the identity of a reporter by making it an offence for identifying information to be disclosed to another person except in limited circumstances.

The maximum penalty for an offence against this provision is $24 000 and imprisonment for two years. Although I recognise the government's commitment to protecting the identity of a person who reports possible child sexual abuse, I have major concerns for the safety of officers who work in small rural, regional and remote communities. As members are aware and will appreciate, it is almost impossible for the identity of a person who reports a suspected sexual abuse case, or any other type of abuse, to remain confidential in these communities. This is not due to any breaches of confidentiality, but is inherent in the nature of living in a small community where everyone knows everyone else and everyone else's business—or thinks they do. It is highly likely that

when a report has been made due to a mandatory reporting requirement, the finger will be pointed usually at the community nurse or local police, or teachers who have close contact with that child. I would appreciate it if the minister will advise how doctors, nurses, midwives, police and teachers will be supported and protected from possible community backlash if they report incidents of child sexual abuse, especially those who live in smaller and remote communities.

On the subject of small communities, I will raise the issue of how officers who suspect child sexual abuse will differentiate between consensual sex and sexual abuse. In my experience, appropriate sexual behaviour in some remote communities in my electorate is quite different from what is considered normal sexual behaviour in the eyes of government agencies. In the eyes of some government agencies, a sexual relationship between an 18-year-old and a 15-year-old is considered inappropriate; in some remote communities this type of relationship is quite common and often considered quite acceptable. My view is that extensive sex education programs are required to inform communities and the kids of the community what is normal and why that is considered to be normal in the whitefellas' world. In saying this, I want some solid reassurances that this government will implement an extensive education program for kids and young people about what is considered to be normal sexual conduct. I hope that this will occur in the immediate future, at least as soon as the legislation is implemented. I would also like to receive some assurance from the government that the proposed training to be conducted for officers on the sexual abuse of children includes an understanding of the differences that currently exist in regional and remote communities, and cover, in particular, all forms of relationships. Apart from seeking responses to the questions I have asked, I will be supporting the Children and Community Services Amendment (Reporting of Sexual Abuse of Children) Bill 2007. I am not proposing any amendments at this time.

HON GIZ WATSON (North Metropolitan) [9.25 pm]: We are dealing with the Children and Community Services Amendment (Reporting of Sexual Abuse of Children) Bill 2007. The bill amends the Children and Community Services Act 2004 and makes consequential amendments to the Evidence Act 1906 and the Freedom of Information Act 1992. In summary, the bill provides for mandatory reporting to the Department for Child Protection—with a copy of the report to go to the police—by doctors, nurses, midwives, police and teachers who believe, on reasonable grounds, that a child has been sexually abused. The report is to be confidential for many purposes, but exceptions will apply.

By way of background, while people are united on the need to protect children from abuse—I do not think anybody is denying that—the question of whether mandatory reporting of child abuse is a good tool for that purpose is a vexed one and has been for a very long time. Researchers have repeatedly identified that there are many arguments both for and against mandatory reporting and what evidence there is is hard to use because the subject is complex and people's beliefs about it are strong.

In July 2002 the University of Western Australia published a report, for the Western Australian Child Protection Council, entitled "Mandatory Reporting of Child Abuse: Evidence and Options", which contains a useful summary of mandatory reporting, which included the following. The starting point of mandatory reporting was perhaps in 1961 in the United States when Dr Henry Kempe presented a paper about battered babies. This led in 1963 to United States federal legislation providing for mandatory reporting by medical practitioners of child abuse, and in 1974 mandatory reporting was expanded to cover professionals from other disciplines. In 1970 similar legislation was enacted in Canada, New South Wales and South Australia. In the 1990s mandatory reporting was introduced into Victoria after a two-year-old boy was beaten to death by his stepfather. In 2002 Tasmania, Queensland, the Northern Territory and the Australian Capital Territory had mandatory reporting legislation, as did Denmark and Sweden. Mandatory reporting legislation varies across jurisdictions, such as in relation to the professionals mandated and the level of suspicion that triggers the duty to report. It has repeatedly been identified that, when drafted too widely, mandatory reporting can generate too many reports that flood the child protection system, overwhelming the system's capacity to respond appropriately. When flooding happens, mandatory reporting does not make children safe. At worst, it increases trauma for children, families and workers. Resourcing is therefore a crucial issue. The other crucial issue is keeping the scope of the legislation narrow. This helps prevent not only flooding from occurring, but also the sorts of reports being made which can never be substantiated and which can be shattering for the child and the family involved. Alternatives to mandatory reporting that have been used to protect children in other jurisdictions include interagency protocols—for example, in the United Kingdom and New Zealand—and providing help for families—for example, in Belgium and the Netherlands. Other options include education for professionals and the public about the need to protect children and how to identify child abuse. Some of the different options can be used simultaneously.

The Western Australian response currently includes interagency protocols for reciprocal reporting and very limited mandatory reporting in family law and child care situations. Historically, there has been a strong preference in Western Australia for addressing child protection by interagency cooperation rather than by mandatory reporting. This was the approach taken in the 1987 report "Child Sexual Abuse Task Force: a report

to the Government of Western Australia". The author of the 2002 paper I was just referring to also took a similar view. The 2002 Gordon report, however, noted that the lack of legislation either was or was perceived to be a barrier to sharing information, and that in addition to training for professionals and strategies for improving information sharing and cooperation between agencies it might be necessary to also have a legislative framework that could achieve some further things. I will refer to a number of recommendations from the 2002 Gordon report that are pertinent to this debate. Recommendation 132, in part, states —

> The Inquiry finds that legislative and policy changes are necessary for the effective coordination of service provision to Aboriginal communities, particularly in relation to the sharing of confidential information.

Recommendation 136, in part, states —

- Legislative or policy framework is imperative for effective collaboration between departments and the coordination of service delivery

Recommendation 186 states —

> The Inquiry finds that there is a lack of information sharing between agencies in relation to family violence and child abuse, giving rise to considerable impediments in service delivery. The Inquiry recommends that further consideration be given to legislative and administrative changes to ensure information sharing between agencies.

Recommendation 187 states —

> The Inquiry recommends that all medical personnel likely to come into contact (directly or indirectly) with children under 13 years who have a sexually transmitted disease be obliged to report the presence of the disease to DCD.

That is, the former Department for Community Development. Recommendation 189 states —

> The Inquiry recommends that serious consideration be given to the requirement for medical personnel to report suspected abuse in children under 13 years as part of the consideration of the report on mandatory reporting for the Child Protection Council.

Finally, recommendation 190 states —

> The Inquiry recommends that (as a minimum) the protocols for reporting all other forms of abuse be strengthened and further consideration of the matter of mandatory reporting occur upon the release of the report on mandatory reporting for the Child Protection Council.

In January 2007 the Ford report in its review of the then Department for Community Development recommended against mandatory reporting. It preferred strengthening interagency collaboration. It saw interagency collaboration as the best way to protect children and to prevent flooding. It appears to have thought then that improved interagency collaboration could be achieved without mandatory reporting legislation. As I have said, the Gordon report foreshadowed in 2002 that legislation making reporting mandatory in certain cases might be needed to support interagency cooperation. I understand from the briefing I received on this bill that this indeed has been the experience. I also see that the Attorney General in the lower house expressed the belief that many sexual abuse cases now being prosecuted in the Kimberley had been known to doctors and nurses but were not reported. I also understand that one of the participants who made strong calls for mandatory reporting at the 2007 ministerial community round table on child protection was from the Kimberley.

This bill is aimed, therefore, at increasing the level of reporting by professionals. However, to avoid counterproductive and dangerous flooding, its scope has been deliberately limited to one form of abuse, a limited number of professionals and a threshold of belief on reasonable grounds, rather than suspicion of abuse. I understand from the briefing that the government will, in addition, continue its focus on strengthening interagency cooperation via reciprocal protocols.

I wanted to address some more specific comments after that overview. The first issue is in relation to the argument about reporting and response, and the question of acknowledging that mandatory reporting is just a reporting system; it neither compels the provision of services to children reported as being at risk nor evaluates those services. At some times and in some places child abuse has been reported, yet the child the subject of the report has suffered further harm, even death. The Northern Territory for example has endemic problems, yet has had mandatory reporting for some time. What matters is the response to the report. As I have already noted, without adequate resourcing, outcomes can be negative for children. Sexual abuse cases can be hard to prove, even when resources are adequate, and not every case reported will have a successful outcome; in fact the success rate is depressingly low. However, it is inevitable that failures will be more likely without adequate

resources. Therefore I ask the minister: what is the expected number of new reports a year and what is the level of new resources that will be provided to make safer children who are the subject of a report pursuant to this legislation? That is the crux of the matter. The improvement that this bill is seeking to achieve will necessarily fail if there is not a degree of increased resourcing.

The second question relates to cultural matters. Mandatory reporting becomes even more complicated when it crosses cultures. Hon Shelley Archer has raised some of the issues that I will also raise. One issue is cultural bias, either positive or negative. All children of all backgrounds must be kept safe, but sometimes professionals or authorities do not have enough insight into cross-cultural situations to accurately identify whether a situation is safe or not. At one extreme, child-rearing methods regarded as appropriate by one group may be regarded as inappropriate by another, resulting in a disproportionate number of reports against members of minority groups. For example, different cultures may have different views on acceptable child discipline methods or acceptable levels of supervision of children by adults. At the other extreme, professionals or authorities may turn a blind eye or fail to see that a particular situation is abusive. It almost goes without saying that some of the situations, particularly in remote communities in Western Australia, are clear examples of this dilemma.

A November 2006 report called "The Effectiveness of Cross-Cultural Training in the Australian Context" prepared by Cultural Diversity Services Pty Ltd for the Department of Immigration and Multicultural Affairs on behalf of the Joint Commonwealth, State and Territory Research Advisory Committee found, after a 15-month national research study involving 105 people from 93 organisations, that cross-cultural training programs deliver measurable returns for organisations. Although most participants had only completed short courses, there were improvements in knowledge and understanding of organisational policies and issues, cross-cultural skills and other cultures. Being short courses only, though, there was less improvement in understanding the effects of one's culture on oneself, the effects of cultural difference on interactions, and confidence in dealing with people from different cultures. The report recommended improvements in cross-cultural training in the workplace. Therefore, I address this question specifically to the Minister for Child Protection: what cross-cultural training will be given and how often will it be available to doctors, nurses, midwives, teachers, police officers and the Department for Child Protection employees in order to make this new legislation effective in a cross-cultural setting?

A further issue that was noted in the Gordon report and by participants at the Ministerial Community Roundtable on Child Protection and elsewhere was that many Aboriginal and Torres Strait Islander people distrust the Department for Child Protection and police as a result of the stolen generation experience. The Gordon report said that culturally appropriate ways need to be used to protect children. Similarly, participants in last year's Ministerial Community Roundtable on Child Protection indicated that to be effective and to avoid further harm to children who have been abused, the government's response to child abuse in Aboriginal communities must include programs that are local and specific and designed by Aboriginal people for Aboriginal people. There must be programs that focus on prevention, not only intervention. My question in regard to this matter is: what resources will be provided to devise and implement local, specific and culturally appropriate ways to protect Aboriginal and Torres Strait Islander children from sexual abuse?

On the issue of non-mandatory reporting of child abuse, a report can be made to the Department for Child Protection or police about a child who has been abused or is at risk of abuse by means other than this bill—by means that exist already. A report can be made by a person, not only doctors, nurses, midwives, police officers or teachers. In part in response to some of the contributions that have been made by Hon Barbara Scott and Hon Robyn McSweeney, a report can be made in respect of matters apart from sexual abuse; for example, neglect, physical abuse, emotional abuse, psychological abuse or abandonment. Processes vary depending on who the reporter is. Specific legislation applies in some situations—for example, in family law proceedings and child care. For some people, protocols between the department and their employer set out when and how to make the report; for others, including members of the public, a report can be made by contacting the department or the police. The bill does not limit anyone's ability to make a report. It needs to be ensured, however, that publicity and education surrounding mandatory reporting does not create this impression. At the same time, it is also necessary to ensure that a flood of reports is not generated that is beyond the resources of the department and the police to investigate and carry out appropriate intervention to protect the children. My question is: what steps will the government take to ensure that people realise they can still make a report in the ordinary way without causing the flooding affect, and what level of resources will be provided for responding to these reports?

My next issue concerns resources for addressing some of the causes of child sex abuse. Research by the Gordon inquiry and many of the participants in the Ministerial Community Roundtable on Child Protection—including Professor Dorothy Scott, Professor Fiona Stanley, Associate Professor Ted Wilkes, Dr Denzil McCotter, Dr Will Patterson, Associate Professor Colleen Hayward and Mr Andrew McCallum—have all made it clear that child abuse is strongly correlated with economic, social and health problems, and that therefore child protection strategies need to address factors such as social inclusion, health care, child care, education, affordable housing

and the reduction of poverty. I note that the Premier has committed to working with organisations, in particular the Western Australian Council of Social Service, to develop a social inclusion policy. I reiterate the call for the government to prioritise housing, health, education and employment as significant ways of addressing the underlying factors that add to the risk of child abuse.

[Leave granted for the member's speech to be continued at the next sitting of the house.]

Debate adjourned, on motion by **Hon Kim Chance (Leader of the House)**.