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Teacher Education to Meet the Challenges Posed by Child Sexual Abuse

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Abstract: The phenomenon of child sexual abuse has significant implications for teachers' pre-service training and professional development. Teachers have a pedagogical role in dealing with abused children, and a legal and professional duty to report suspected child sexual abuse. Teachers require support and training to develop the specialised knowledge and confidence needed to deal with this complex context. This article explains the social context of child sexual abuse, its health and educational consequences, and the legal context, showing why teachers require this specialised training. It then reports on findings from an Australian study into the amount of training received by teachers about child sexual abuse, and teachers' satisfaction with that training. Results have implications for teacher training strategies in pre-service and in-service settings.

Introduction

Children who are sexually abused often suffer severe health, behavioural and educational consequences. Due to its prevalence, many and perhaps most teachers are likely to have to deal with sexually abused children. Many teachers will also need to comply with legal and policy-based duties to report suspected cases of child sexual abuse. Teachers' pre-service education and in-service professional development must develop teachers' social and legal literacy to equip them with the necessary specialised knowledge to identify indicators of child sexual abuse, and to enable them to feel confident in fulfilling their role as reporters of child sexual abuse. This article first demonstrates why teachers deserve to have sufficient training, knowledge and confidence in this context, by reviewing evidence about the social context of child sexual abuse, the educational consequences of sexual abuse, and the legal and policy requirements placed on teachers. The article then reports descriptive findings of a recent study in Queensland, New South Wales and Western Australia about the levels of teachers' pre-service and in-service training regarding child sexual abuse, and teachers' satisfaction with the adequacy of the training. These findings are important because they suggest that significant improvements can be made in the breadth and nature of pre-service and in-service teacher education, to better equip teachers with the knowledge and confidence required to respond appropriately to cases of child sexual abuse. Findings have implications for education systems already having approaches to teacher training and reporting of suspected child sexual abuse, and for those which have not yet developed such systems.

Social, Educational, Legal and Professional Contexts of Child Sexual Abuse

Social Context

Incidence and Prevalence

Sexual abuse of a child who is not legally capable of consenting to the acts can take many forms, as is made clear by Australian criminal laws and authoritative humanitarian organisations (New South Wales Crimes Act 1900; Queensland Criminal Code 1899; Western Australia Criminal Code Act Compilation Act 1913; World Health Organisation, 2006). It can be inflicted by an adult, or by an older child where the victim is not developmentally capable of understanding the acts. Sexual abuse includes acts not only of penetrative abuse, but also acts of masturbation, oral sex, fondling, voyeurism, exposure to sexual acts, exposing the child to pornography, involving the child in pornography, and other acts done to sexually gratify the abuser.

The officially recorded incidence of child sexual abuse in Australia has been stable in the past five years, with between 3400 and 3735 Australian children in substantiated cases annually from 2004/05 to 2008/09 (Australian Institute of Health and Welfare, 2006, 2007, 2008, 2009, 2010). However, the real incidence is accepted as being far higher than this for several reasons, the most prominent being that most cases are not reported to, or investigated by, government authorities (Fallon et al., 2010; Kohl, Jonson-Reid, & Drake, 2009; Sedlak & Broadhurst, 2006; Sedlak, Gragg, et al., 2008). Prevalence studies support this view. In Australia, Dunne, Purdie, Cook, Boyle and Najman (2003) found that before the age of 16, 12.2 per cent of women and 4.1 per cent of men experienced penetrative sexual abuse, and 33.6 per cent of women and 15.9 per cent of men experienced other sexual abuse not involving penetration. Fleming (1997) found that 20 per cent of women had experienced sexual abuse involving at least genital contact before the age of 16. Dinwiddie et al. (2000) used an apparently narrower definition of abuse, but still found that 5.9 per cent of women and 2.5 per cent of men had been sexually abused as children under 18. In New Zealand, studies have found prevalence rates in women of 23.5 per cent in a large urban region and 28.2 per cent in a rural region (Fanslow, Robinson, Crengle, & Perese, 2007), 18.5 per cent (Fergusson, Horwood, & Woodward, 2000), and 32 per cent (Anderson, Martin, Mullen, Romans, & Herbison, 1993). In the United Kingdom, a national study found that 10 per cent reported having been sexually abused as a child involving sexual contact, with a further 6 per cent reporting experience of non-contact abuse (May-Chahal & Cawson, 2005). In the USA, a national study found 27 per cent of women and 16 per cent of men were sexually abused as a child (Finkelhor, Hotaling, Lewis, & Smith, 1990).

There are several reasons why the real incidence of sexual abuse far exceeds the number identified by government agencies. Cases are difficult for professionals to identify, since many indicators of abuse are consistent with innocent explanations or other types of victimization. Even professionals able to physically examine a child, such as doctors, may be unsure whether a child has been sexually abused, as many cases (including penetrative abuse) leave no physical evidence (Gilbert, Kemp, et al., 2009; Heger, Ticson, Velasquez, & Bernier, 2002). Apart from pregnancy, most sexually transmitted diseases and direct observation of abuse happening, the clearest indication of abuse occurs when a child discloses it. However, a sexually abused child will often not disclose it at all, or will only disclose it many years later (Paine & Hansen 2002; Smith et al., 2000). Nondisclosure may be influenced by many factors, including: the child being preverbal or very young (Berliner & Conte, 1990); being persuaded the acts are normal, or feelings of guilt, shame, embarrassment and responsibility (Berliner & Conte, 1990; Ney, Moore, McPhee, & Trought, 1986); fear of reprisals to the child (Palmer, Brown, Rae-Grant & Loughlin, 1999) or other family members (Berliner & Conte, 1990); the perpetrator being a parent or family member, or other trusted figure (Arata, 1998; Kogan, 2004); and fear of the perpetrator being punished

(Mian, Wehrspann, Klajner-Diamond, Lebaron, & Winder, 1986). Finally, in some cases where a child does disclose to a parent, the parent may not report the situation to police (Finkelhor & Dziuba-Leatherman, 1994).

Risk Factors

Risk factors for child sexual abuse differ from those for other types of maltreatment. Physical abuse, emotional abuse and neglect are often characterised by substance abuse, domestic violence, the parent being abused as a child, criminal activity, mental illness, low socioeconomic status, single parenthood, low parental age, poor parental skills, and the child's difficult temperament (Ronan, Canoy, & Burke, 2009). In contrast, sexual abuse is more likely where the child is female, and where there is marital conflict, low parental attachment, overprotective parenting, parental alcohol abuse, absence of a parent, and presence of a stepfather (Putnam, 2003; Ronan et al., 2009). Where the perpetrator is an adult or a person in a clearly defined position of power, most sexual abuse occurs when the child is under 13. A national study in the USA found that of 416 women and 169 men reporting child sexual abuse, 78% and 69% respectively were aged 12 or under at onset of abuse, and the median ages were 9.6 and 9.9 respectively (Finkelhor et al., 1990). Australian studies found mean ages at first episode of 10 years (Fleming, 1997) and 10.8 years (Dinwiddie et al., 2000).

Consequences

Children who experience sexual abuse often suffer numerous adverse consequences, although the nature, severity and extent of these vary for each individual (Chen et al., 2010; Nelson et al., 2002; Paolucci, Genuis, & Violato, 2001; Putnam, 2003; Tyler, 2002). These consequences, which often continue through adulthood (Chen et al., 2010; Gilbert, Widom, et al., 2009; Horwitz, Spatz Widom, McLaughlin, & White, 2001; Spataro, Mullen, Burgess, Wells, & Moss, 2004; Widom, Marmorstein & White, 2006), extend beyond physical injury to psychological injury and effects on behaviour and socialisation. Immediate and initial consequences commonly include post-traumatic stress disorder (Boney-McCoy & Finkelhor, 1995; Dubner & Motta 1999; Trowell et al., 1999); depression and low self-esteem (Spataro et al., 2004; Swanston et al., 2003); and may include inappropriate sexualised behaviour (McClellan et al., 1996), and difficulty with peer relationships (Mannarino, Cohen, & Berman, 1994). Adolescents, generally better able to understand the nature of the acts, are more likely to experience depression and anxiety than younger children (Gidycz & Koss, 1989), and to engage in self-harming behaviour (Martin, Bergen, Richardson, Roeger, & Allison, 2004; Romans, Martin, Anderson, Herbison, & Mullen, 1995), suicidal ideation and behaviour (Dinwiddie et al., 2000; Martin et al., 2004; Molnar, Berkman, & Buka, 2001), criminal offending (Stewart, Livingston, & Dennison, 2008), alcohol abuse, substance abuse and running away from home (Dube et al., 2006; Simpson & Miller, 2002), and teenage pregnancy (Roberts, O'Connor, Dunn, Golding, & ALSPAC, 2004). Increased instability in out-of-home and adoptive placements is also a frequent consequence (Nalavany, Ryan, Howard, & Smith, 2008). Emotional abuse usually accompanies sexual abuse, and also has severe consequences (Egeland, 2009; Shaffer, Yates, & Egeland, 2009). Children who suffer four or more different types of victimization in any given year are likely to experience exacerbated psychological effects (Finkelhor, Ormrod, & Turner, 2007; Finkelhor, 2008). Low self-esteem often continues throughout adolescence, with associated effects on

intellectual, academic and personal achievement (Perez & Widom, 1994; Wozencraft, Wagner, & Pellegrin, 1991), and adult economic well-being (Currie & Widom, 2010).

Educational Context

Sexual abuse often causes consequences affecting the child at school. This produces pedagogical challenges for teachers and schools in dealing with affected children's academic, behavioural and social needs (Daignault & Hebert, 2009). Reviews have shown significant adverse effects on academic performance, behaviour, social skills, cognition and attendance (Daignault & Hebert, 2004; Veltman & Browne, 2001), and learning disabilities such as auditory, perceptual and processing problems may eventuate (Jonson-Reid, Drake, Kim, Porterfield, & Han, 2004). Teachers may have to deal with externalising behaviour (including aggression, anger, difficulty concentrating on schoolwork, and sexualised behaviour), and internalising behaviour (such as anxiety, depression, withdrawal, and post-traumatic stress disorder). Where a teacher knows a child has been sexually abused, the relevant behaviour needs to be dealt with sensitively and appropriately (Downey, 2007; Laskey, 2008; Walsh, 2009; Watts, 1997). Where a teacher is developing or has developed a suspicion of sexual abuse, it is important for the teacher not to investigate the child's situation, as other authorities such as police and child welfare agencies have this role. Yet, the teacher who suspects sexual abuse may have duties additional to pedagogical and pastoral care roles which flow from legal and professional ethical responsibilities.

Legal and Policy Contexts

Teachers in many jurisdictions have been given a significant role in protecting children by being required to report suspected sexual abuse. To be best able to comply with these reporting obligations, it is necessary for teachers to have positive attitudes towards the reporting duty, knowledge about the social and educational context of sexual abuse (Mathews, Walsh, Rassafiani, Butler, & Farrell, 2009), and 'legal literacy' (Schimmel & Militello, 2007) about the legal and policy-based obligations to report (Mathews, Walsh, Rassafiani, Butler, & Farrell, 2009). This professional development of teachers must occur in both pre-service and in-service settings (Arnold & Maio-Taddeo, 2007; Mathews, Walsh, Rassafiani, Butler, & Farrell, 2009; Watts & Laskey, 1997).

Teachers' Duties in Law and Educational Policy to Report Suspected Child Sexual Abuse

Up to three separate sources of authority may create duties under which teachers are required to report suspected or known child sexual abuse. First, Parliament may have enacted legislation requiring the teacher to report known and suspected child sexual abuse (Mathews & Kenny, 2008). The legislation will protect the teacher from liability if the report turns out not to be substantiated (provided it was made in good faith), and the teacher's identity will be protected. Every jurisdiction in Australia, Canada and the USA has a legislative duty for teachers to report suspected child sexual abuse, but other nations such as New Zealand do not (Mathews, Goddard, Lonne, Short, & Briggs, 2009; Mathews & Kenny, 2008).

Second, a teacher may have a common law duty to report suspected or known child sexual abuse. This obligation, derived from the law of torts, is a duty to make sure that a person to whom one owes a duty of care is not harmed by one's act or omission. If a teacher owes a student a duty of care, and if the duty's scope includes a duty to report known or

suspected child sexual abuse, then a teacher's failure to report known or suspected abuse may breach that duty of care (Butler & Mathews, 2007). It will render the teacher (and more usually the employing educational authority) liable if the teacher's omission causes damage to the child. This can happen if a teacher knows or suspects a child is being abused, does not report it, and the child continues to suffer abuse and subsequent harm from the further abuse. The failure to report may be seen to have caused the damage to the child from the subsequent abuse, which could have been avoided had the teacher reported the suspicion. A recent case exemplifies this (McKenna, 2010a, 2010b; Stjernqvist, 2009).

Third, a teacher's school authority will usually have a policy about reporting of child sexual abuse. A teacher's failure to comply with a policy-based reporting duty may result in exposure to institutional disciplinary proceedings (Butler & Mathews, 2007). Many but not all Australian educational authorities have such policies (Mathews, Walsh, Rassafiani, Butler, & Farrell, 2009).

These different reporting duties, together with the key features of the context of child sexual abuse, are not matters which can be learnt intuitively. The social context is complex, sexual abuse is often difficult to detect, and the duties may contain difficult concepts. Despite the challenges inherent to this context, teachers play a vital role in child protection and have legal, ethical and moral responsibilities to fulfil this role. Teachers are best placed to meet these responsibilities when knowing their reporting duties, understanding the indicators of child sexual abuse, and having positive attitudes towards the reporting duty (Mathews, Walsh, Rassafiani, Butler, & Farrell, 2009). All these attributes are components of the legal, policy and social literacy that teachers require as professionals.

Existing Research into Teacher Training

There has been little empirical research into Australian teachers' training about this context, their views about the efficacy of their training, their confidence identifying sexual abuse and knowledge of its indicators. Research into universities' curricula has found low levels of pre-service training in child protection (Watts & Laskey, 1997), and a recent national study found 76.6 per cent of tertiary teacher education programs did not include any child protection content (Arnold & Maio-Taddeo, 2007). Only a few published State-based surveys have been conducted into teachers' training, knowledge and confidence. For the purpose of this article, the most notable of these, due to its inclusion of questions about child sexual abuse, was conducted in South Australia (Hawkins & McCallum, 2001). More recent research was limited to physical abuse and neglect (Walsh, Bridgstock, Farrell, Rassafiani, & Schweitzer, 2008).

The general lack of research into teachers' training, knowledge and confidence in the domain of child sexual abuse is concerning. Teachers deserve to be adequately prepared to fulfil their professional role as reporters of child sexual abuse, and their social and pedagogical role when dealing with children suspected or known to have been abused. In addition, it is known that a number of factors influence the effectiveness of teachers' actual reporting practice. In light of these factors, it is necessary to know the current state of teacher training, knowledge and confidence about child sexual abuse, so that school authorities can determine whether training needs to be developed or enhanced to improve teachers' professional development and better equip them to fulfil their roles in this context.

Some of the known factors influencing effective teacher reporting child abuse arise out of the characteristics of the child's case, such as the frequency and severity of the child's injuries and behaviour (Walsh, Bridgstock, Farrell, Rassafiani, & Schweitzer, 2008). Others relate to institutional factors, such as a supportive work environment (Abrahams, Casey, &

Daro, 1992). However, some factors relate to the teacher, including the teacher's awareness of the existence of a legal duty to report suspected child sexual abuse (Crenshaw, Crenshaw, & Lichtenberg, 1995), their knowledge of the content of that duty (Kenny, 2004) and their attitude towards the duty (Hawkins & McCallum, 2001; Goebbels, Nicholson, Walsh, & De Vries, 2008).

Most significantly for this article, some research suggests teachers' reporting practice is influenced by the extent and nature of teachers' training in recognising abuse (Hawkins & McCallum, 2001), and teachers' confidence in their ability to recognise abuse (Crenshaw, Crenshaw, & Lichtenberg, 1995; Goebbels, Nicholson, Walsh, & De Vries, 2008). As well, the presence of training, and its recency, appears to influence higher levels of teacher knowledge, more positive teacher attitudes towards reporting, and effective reporting behaviour. In South Australia, Hawkins and McCallum (2001) found that teachers with recent training had more confidence recognising indicators of abuse, were more knowledgeable about their reporting responsibilities, and were better prepared to follow reporting procedures. Teachers without training, or without recent training, were likely to have significant gaps in knowledge about their reporting duty, and were less likely to understand the nature and seriousness of child abuse. Studies in the United States have found inadequate levels of teacher training about indicators of abuse and reporting processes. A national study of 568 elementary and middle school teachers found that two thirds experienced insufficient training and lacked sufficient knowledge about how to detect and report suspected cases (Abrahams, Casey, & Daro, 1992). Another study found widespread views that teachers had not received adequate training about child abuse and reporting requirements (Kenny, 2001). Significant knowledge gaps were also found in a study of 200 teachers, including lack of knowledge about how to make reports (Kenny, 2004). A study of 664 teachers, school counsellors and principals found 40 per cent considered themselves insufficiently prepared to deal with recognising and reporting child abuse, with teachers more likely to be in this group (Crenshaw, Crenshaw, & Lichtenberg, 1995). Especially since reporting duties have existed for a much longer time in the USA than in Australia (Mathews & Kenny, 2008), it is therefore plausible that there may be areas in which teacher education in Australia in this context is similarly in need of renewed efforts.

Findings of an Empirical Study of Teachers' Training About Child Sexual Abuse

This study occurred as part of a larger study into the law, policy and practice of teacher reporting of child sexual abuse in New South Wales, Queensland and Western Australia. The component of the study reported in this article aimed to find descriptive evidence about teachers' experience of pre-service and in-service training about child sexual abuse, their self-rated estimation of the adequacy of the training to both identify indicators of sexual abuse and to follow reporting procedures, their self-rated confidence in identifying indicators of child sexual abuse, and their self-rated knowledge of indicators of sexual abuse. The *Teacher Reporting Questionnaire (TRQ)* developed for the overall study contained eight sections (Mathews, Walsh, Rassafiani, Butler, & Farrell, 2009), one of which included questions about education and training.

The self-report survey was conducted from February to November 2008, with the host States purposively selected because of their different legislative reporting obligations. Teachers in primary schools for children aged 5-12 years were targeted, as most sexual abuse is perpetrated against children in this age group (Finkelhor, Hotaling, Lewis, & Smith, 1990; Anderson et al., 1993). To ensure representativeness, a proportionate random sample of government and non-government schools across rural and urban areas was generated from

master lists of schools obtained from school authorities. Ethical approval was obtained from the Queensland University of Technology Human Research Ethics Committee. Approval to conduct the research was also sought from 20 government and non-government school authorities in the three States, with all granting approval except the New South Wales Department of Education and Training. Nevertheless, the experience of teachers in New South Wales was represented by the participation of teachers from non-government schools. Therefore, teachers from five sector groups participated in the study: New South Wales non-government schools (NSWNGS); Queensland government schools (QGS); Queensland non-government schools (QNGS); Western Australian government schools (WAGS); and Western Australian non-government schools (WANGS). Data were entered into a Microsoft Access database and imported into the Statistical Program for the Social Sciences (SPSS) 16.0 (SPSS Inc, 2007) for analysis. Further details regarding the methodology, including development of the *TRQ* and pilot testing, are discussed elsewhere (Mathews, Walsh, Rassafiani, Butler, & Farrell, 2009; Mathews, Walsh, Butler, & Farrell, 2010). The analyses presented here are descriptive statistics, providing data that are practically useful in understanding training exposure and needs within these five sectors.

Results

Teachers returned 470 completed questionnaires, a return rate ranging from 50.0 per cent to 66.3 per cent across the 5 sectors and an overall return rate of 55.3 per cent. Most respondents were female, ranging from 79.3 per cent (QGS) to 91.6 per cent (WAGS), and the mean age varied from 40.35 (QNGS) to 44.54 years (WAGS). This sample was representative, since these features closely reflect the workforce profile of primary teachers (Australian Bureau of Statistics, 2008; Queensland Department of Education and Training and the Arts, 2008).

Presence of pre-service and in-service training

Teachers were asked if they had received pre-service and in-service training about child sexual abuse. Results are shown in Table 1.

Pre-service training	NSWNGS	QGS	QNGS	WAGS	WANGS
Yes	36 (42.9%)	17 (14%)	46 (37.4%)	24 (28.9%)	13 (22%)
No	45 (53.6%)	103 (85.1%)	77 (62.6%)	59 (71.1%)	46 (78%)
Missing	3 (3.6%)	1 (0.8%)	0 (0%)	0 (0%)	0 (0%)
Total	84 (100.0%)	121 (100.0%)	123 (100.0%)	83 (100.0%)	59 (100%)
In-service training					
Yes	54 (64.3%)	79 (65.3%)	79 (64.2%)	72 (86.7%)	14 (23.7%)
No	27 (32.1%)	41 (33.9%)	44 (35.8%)	11 (13.3%)	45 (76.3%)
Missing	3 (3.6%)	1 (0.8%)	0 (0%)	0 (0%)	0 (0.0%)
Total	84 (100.0%)	121 (100.0%)	123 (100.0%)	83 (100.0%)	59 (100.0%)

Table 1: Presence of Pre-Service and In-service Training About Child Sexual Abuse, By Sector

Adequacy of Pre-service Education Related to Child Sexual Abuse

If the teacher indicated she or he had received pre-service education about child sexual abuse, she/he was then asked two questions about its adequacy. The first question was ‘How adequately did your in-service training prepare you to identify indicators of child sexual abuse?’ The second question was ‘How adequately did your in-service training prepare you to follow reporting processes for child sexual abuse?’ Responses were made on a 5-point Likert-type scale (1=‘Inadequately’ to 5=‘Most adequately’). Results are shown in Tables 2-6, by sector.

Length of In-service Education Related to Child Abuse and Neglect in General, and Adequacy of In-service Education Related to Child Sexual Abuse

Teachers who indicated they had received in-service education about child abuse and neglect in general were asked about its duration (in number of hours), and two questions about its adequacy. The first question was ‘How adequately did your in-service training prepare you to identify indicators of child sexual abuse?’ The second question was ‘How adequately did your in-service training prepare you to follow reporting processes for child sexual abuse?’ Responses were made on a 5-point Likert-type scale (1=‘Inadequately’ to 5=‘Most adequately’). Results are shown in Tables 2-6, by sector.

Self-rated Confidence in Ability to Identify Indicators of Child Sexual Abuse

Teachers were asked to self-rate their confidence in identifying indicators of child sexual abuse. The question was ‘How much confidence do you have in your ability to identify indicators of child sexual abuse?’ Responses were made on a 5-point Likert-type scale (1=‘No confidence’ to 5=‘A great deal of confidence’). Results are shown in Tables 2-6, by sector.

Self-rated Knowledge of Indicators of Child Sexual Abuse

Teachers were asked to self-rate their knowledge of indicators of child sexual abuse. The question was ‘How much knowledge do you have about the indicators of child sexual abuse?’ Responses were made on a 5-point Likert-type scale (1=‘No knowledge’ to 5=‘A great deal of knowledge’). Results are shown in Tables 2-6, by sector

Pre-service training	N	Min	Max	Mean	SD
How adequately did your pre-service education prepare you to identify indicators of child sexual abuse?	36	1	5	3.0	1.0
How adequately did your pre-service education prepare you to follow reporting processes for child sexual abuse?	36	1	4	3.0	1.0
In-service training					
How many hours of in-service training have you received regarding child abuse and neglect in general?	54	1	60	7.4	10.0
How adequately did your in-service training prepare you to identify indicators of child sexual abuse?	54	1	5	3.1	1.0
How adequately did your in-service training prepare you to follow reporting processes for child sexual abuse?	54	1	5	3.3	1.0
Self-rated confidence and knowledge regarding indicators of child sexual abuse					
How much confidence do you have in your ability to identify indicators of child sexual abuse?	84	1	5	2.8	0.7
How much knowledge do you have about the indicators of child sexual abuse?	84	1	5	2.8	0.9

Table 2: New South Wales Non-government Schools (NSWNGS) Results

Pre-service training	N	Min	Max	Mean	SD
How adequately did your pre-service education prepare you to identify indicators of child sexual abuse?	17	1	5	3.0	0.9
How adequately did your pre-service education prepare you to follow reporting processes for child sexual abuse?	17	1	3	2.4	0.7
In-service training					
How many hours of in-service training have you received regarding child abuse and neglect in general?	79	0	16	4.4	3.4
How adequately did your in-service training prepare you to identify indicators of child sexual abuse?	79	1	4	2.8	0.9
How adequately did your in-service training prepare you to follow reporting processes for child sexual abuse?	79	1	5	3.2	1.0
Self-rated confidence and knowledge regarding indicators of child sexual abuse					
How much confidence do you have in your ability to identify indicators of child sexual abuse?	121	1	5	2.8	0.8
How much knowledge do you have about the indicators of child sexual abuse?	121	1	4	2.8	0.8

Table 3: Queensland Government Schools (QGS) Results

How adequately did your pre-service education prepare you to identify indicators of child sexual abuse?	46	1	5	3.2	1.1
How adequately did your pre-service education prepare you to follow reporting processes for child sexual abuse?	46	1	5	2.9	1.2
In-service training					
How many hours of in-service training have you received regarding child abuse and neglect in general?	79	0	32	6.4	6.0
How adequately did your in-service training prepare you to identify indicators of child sexual abuse?	79	1	5	3.2	1.0
How adequately did your in-service training prepare you to follow reporting processes for child sexual abuse?	79	1	5	3.2	1.2
Self-rated confidence and knowledge regarding indicators of child sexual abuse					
How much confidence do you have in your ability to identify indicators of child sexual abuse?	123	1	5	2.9	0.8
How much knowledge do you have about the indicators of child sexual abuse?	123	1	5	2.9	0.8

Table 4: Queensland Non-government Schools (QNGS) Results

Pre-service training	N	Min	Max	Mean	SD
How adequately did your pre-service education prepare you to identify indicators of child sexual abuse?	24	1	5	3.3	0.8
How adequately did your pre-service education prepare you to follow reporting processes for child sexual abuse?	24	1	5	3.1	1.1
In-service training					
How many hours of in-service training have you received regarding child abuse and neglect in general?	72	1	48	5.8	6.4
How adequately did your in-service training prepare you to identify indicators of child sexual abuse?	72	1	5	3.2	0.9
How adequately did your in-service training prepare you to follow reporting processes for child sexual abuse?	72	1	5	3.3	1.0
Self-rated confidence and knowledge regarding indicators of child sexual abuse					
How much confidence do you have in your ability to identify indicators of child sexual abuse?	83	1	5	3.0	0.9
How much knowledge do you have about the indicators of child sexual abuse?	83	1	5	3.1	0.9

Table 5: Western Australian Government Schools (WAGS) Results

Pre-service training	N	Min	Max	Mean	SD
How adequately did your pre-service education prepare you to identify indicators of child sexual abuse?	13	2	5	3.4	0.9
How adequately did your pre-service education prepare you to follow reporting processes for child sexual abuse?	13	1	5	3.0	1.5
In-service training					
How many hours of in-service training have you received regarding child abuse and neglect in general?	14	2	80	14.1	21.1
How adequately did your in-service training prepare you to identify indicators of child sexual abuse?	14	1	4	3.3	0.9
How adequately did your in-service training prepare you to follow reporting processes for child sexual abuse?	14	1	5	3.3	1.1
Self-rated confidence and knowledge regarding indicators of child sexual abuse					
How much confidence do you have in your ability to identify indicators of child sexual abuse?	59	1	4	2.5	0.8
How much knowledge do you have about the indicators of child sexual abuse?	59	1	5	2.6	0.8

Table 6: Western Australian Non-government Schools (WANGS) Results

Discussion

Presence of Pre-service Training and Presence of In-service Training

A significant finding of this study is that in all five sectors, low proportions of teachers had received pre-service training about child sexual abuse. The lowest proportion was 14.0% in QGS, followed by 22.0% (WANGS), 28.9 % (WAGS), 37.4% (QNGS) and 42.9% (NSWNGS). These results reinforce the findings of Arnold and Maio-Taddeo (2007) about low levels of child protection content in tertiary teacher education programs, and confirm that this requires urgent attention. While it may be perceived as somewhat encouraging that over two in five teachers in NSWNGS received some pre-service education, the extremely low levels in QGS and WANGS are particularly concerning.

Across all sectors there were higher levels of participation in in-service training than pre-service training, although the levels were almost identical in WANGS. Levels of participation in in-service training related to child abuse and neglect were highest for WAGS (86.7%). Lower, but similar levels were evident for NSWNGS (64.3%), QGS (65.3%) and QNGS (64.2%). The lowest level was in WANGS (23.7%). In three of the five sectors, then, two thirds of the respondents had received education in child abuse and neglect generally, while in one sector almost nine in ten teachers had received this exposure. These findings are more encouraging about the presence of some exposure at tertiary level to issues surrounding the broader domain of child maltreatment, which is likely to include physical abuse, psychological abuse, and neglect.

Adequacy of Pre-service Training in Preparing Teachers to Identify Indicators of Child Sexual Abuse, and to Follow Reporting Processes

Across all five sectors, among those who had received pre-service training about child sexual abuse, there were similar results regarding the self-reported adequacy of pre-service training to identify indicators of sexual abuse, and to follow reporting processes. Regarding identification of indicators, the mean scores for all five sectors ranged between 3.0 and 3.4. While these might appear at first to be low scores, it is reasonable to expect that scores will not be extremely high because sexual abuse is an inherently difficult phenomenon to identify. This may indicate that those who have received pre-service training about the indicators of child sexual abuse are reasonably well-equipped to identify it. If so, this is encouraging and suggests that it is a worthwhile endeavour to promote pre-service training about the features of sexual abuse.

Similarly, there were comparable results concerning the adequacy of pre-service training to follow reporting procedures, with means ranging from 2.4 (QGS) to 3.1 (WAGS), with the other three sectors being almost identical (2.9: QNGS; 3.0: NSWNGS; 3.0: WANGS). However, unlike the more acceptable outcome of the preparedness to identify indicators item, this outcome is not as commendable. This is because there is less complexity in reporting processes than there is in identifying sexual abuse. Once a suspicion has crystallised, the actual process of reporting is relatively straightforward, requiring only the completion of the correct form, and appropriate communication with the Principal. On the other hand, it may be understandable that pre-service education not include attention to the mechanics of reporting, assuming that workplaces would be responsible for informing employees of the practices to be followed. As well, there may be complexities in reporting processes in the sense that teachers may sometimes need to communicate with the child about their intention to report their suspicion, especially if the child has made a disclosure. It would be valuable if qualitative research identified what aspects of reporting processes teachers believed were not adequately covered in pre-service education.

Length of In-service Training in Child Abuse and Neglect, and Adequacy of In-service Training in Preparing Teachers to Identify Indicators of Child Sexual Abuse and Follow Reporting Processes

An important finding of this study is that even for those teachers who had received in-service training related to child abuse and neglect (recalling that in three sectors, one third of teachers had not received any such training, and in another sector, less than one in five had), its average duration is low. Across sectors, the number of hours of this training ranged from a mean of 4.4 hours (QGS) to 14.1 hours (WANGS), with other sectors having means of 5.8 (WAGS), 6.4 (QNGS) and 7.4 (NSWNGS). Considering the average age of respondents, with the mean ranging from 40.35 (QNGS) to 44.54 (WAGS), the mean number of hours might be expected to be much higher due to the desirability of such training being not a one-off induction package, but a systematic and repeated method of professional development involving multidisciplinary education about the nature and context of child sexual abuse, and the teacher's duties in relation to it. Overall, the results for the presence of in-service training and its duration show that the level of in-service training in all five sectors is very low. The high standard deviations for the number of hours of training are likely due to some respondents, especially those with roles in student administration or support, having received more intensive training. As well, very experienced teachers may have received many iterations of training.

The mean scores for the two questions about the adequacy of the in-service training were not high, ranging from 2.8 (QGS) to 3.3 (WANGS) for the question about indicators,

and being nearly identical for the reporting processes question, ranging from 3.2 (QGS and QNGS) to 3.3 (NSWNGS, WAGS and WANGS). In QGS, where the duration of in-service training was lowest (mean 4.4 hours), there was also the lowest mean score for adequacy of training in preparing the teacher to identify indicators of abuse. This may indicate that training about this item is less effective if sufficient time is not devoted to it. However, the precise nature of the training was not explored by this study, and it may be that other features of the training package and its delivery are associated with this outcome.

The results about the adequacy of in-service training in preparing teachers to identify indicators of child sexual abuse were not significantly superior to those from the pre-service training, with findings from several sectors showing comparable results. In WAGS and WANGS, for example, the ratings were similar across in-service and pre-service (3.2 and 3.3 respectively in WAGS; 3.3 and 3.4 respectively in WANGS). In QGS, responses showed that teachers rated the in-service training as being less effective at preparing them to identify indicators than did those who received pre-service training. These results may again reflect the inherent difficulties for any professional in identifying indicators of child sexual abuse; it may be equally troubling to find very high mean scores for this item which could reflect an unwarranted feeling of being perfectly prepared to identify sexual abuse, as it would be to find very low scores which could reflect a feeling of being completely inadequately prepared.

For the question about the adequacy of in-service training to follow reporting processes, in all sectors there was a difference suggesting more effective training at in-service compared with pre-service: in NSWNGS (3.3 compared with 3.0); QGS (3.2 compared with 2.4); QNGS (3.2 compared with 2.9); WAGS (3.3 compared with 3.1); and WANGS (3.3 compared with 3.0). This supports the previously mentioned possibility that pre-service training may leave coverage of the practical mechanics of reporting to in-service education. However, recalling that a significant proportion of respondents had not received any in-service education, and that the mean scores for this question were still not particularly high, this finding indicates that in-service training still needs to pay more attention to clearly explaining how a teacher makes a report after having developed a reasonable suspicion of sexual abuse.

Overall Self-rated Confidence in Ability to Identify Indicators of Child Sexual Abuse, and Self-rated Knowledge of Indicators of Child Sexual Abuse

Whereas small numbers of teachers had received pre-service training and answered questions about it, and higher numbers had received in-service training and answered questions about it, all teachers answered the two questions about self-rated confidence and knowledge regarding indicators of child sexual abuse. Because of this, it was likely but not inevitable that results for these two questions would have lower mean scores than for those who had received training. The results generally indicate that teachers with training (at either or both pre-service and in-service levels) have higher confidence in their ability to identify indicators of child sexual abuse, and higher self-rated knowledge of the indicators of child sexual abuse, than those without training. The mean scores for self-rated confidence identifying indicators ranged from 2.5 (WANGS) to 3.0 (WAGS) with the other three sectors being similar (NSWNGS: 2.8; QGS: 2.8; QNGS: 2.9). The mean scores for self-rated knowledge about the indicators ranged from 2.6 (WANGS) to 3.1 (WAGS), with the other three sectors being similar (NSWNGS: 2.8; QGS: 2.8; QNGS: 2.9).

Finally, these results appear to indicate that teachers who have not received in-service training have less self-rated confidence in identifying indicators of sexual abuse and less self-rated knowledge of these indicators. It seems reasonable to expect that those with in-service

training would have similar scores for the in-service adequacy questions and the two final questions about self-rated confidence and knowledge. Since there were significantly higher numbers of teachers with in-service training than with pre-service training, and with one third of respondents in NSWNGS, QGS and QNGS not having received in-service training, it also seems reasonable to suggest that the responses from teachers without in-service training are largely responsible for reducing the overall mean scores for these sectors. This would indicate that among those without in-service training, the mean scores for the two questions about self-rated confidence and knowledge regarding indicators of child sexual abuse are substantially lower than for those with in-service training. In WAGS, where 86.7 per cent of teachers received in-service training, the nearly identical mean scores for the questions about adequacy of in-service training and self-rated confidence and knowledge, support this conclusion. If this is correct, then this finding may be significant because a teacher's actual decisions about reporting may be affected by low self-confidence in their knowledge of indicators of sexual abuse and in their ability to identify those indicators. Together with the findings about generally low levels of training, these findings about teachers' self-rated confidence and knowledge indicate that more thorough and sustained efforts need to be made to ensure that all teachers receive comprehensive, multidisciplinary training about the indicators of child sexual abuse, the context of abuse, and related issues including reporting processes.

Limitations

Several limitations were present in this study. First, the sample is not nationally representative, being limited to three States, and one sector did not participate; there were also low numbers of respondents from one sector (WANGS). However, the study nevertheless provides contextually significant descriptive data about the training experiences of respondents in the five participating sectors, and participants in each sector were demographically representative. Results may have been positively skewed if, as is likely, participation in the study was more common among schools and teachers more familiar with the context. Second, the study was limited to primary school teachers, so results cannot be generalised to secondary school teachers. Third, for methodological reasons including the fact that teachers would have received different iterations of training, at different times, in different places and by different providers, it was not possible to access and independently evaluate the adequacy of the teachers' training. Valuable future studies would, to the extent possible, access training packages and evaluate their content and delivery. Fourth, again for methodological reasons, one question explored the teachers' self-rated knowledge about the indicators of child sexual abuse, rather than testing their actual knowledge. Future work exploring teachers' actual knowledge would be valuable, especially if conducted alongside evaluations of teacher training systems.

Conclusion

Teachers need appropriate pre-service and professional development to be able to understand the complex social context of child sexual abuse and comply with legal and ethical duties to report suspected cases. This development should focus on building teachers' knowledge of the social context of child sexual abuse and its indicators, developing teachers' understanding of the reporting duties, helping to instil positive attitudes towards reporting obligations, and ensuring that teachers are familiar with the practical mechanisms through

which reporting duties are discharged. Such development will also enable teachers to perform their traditional pedagogical and pastoral care roles in this special context. The findings of this study indicate that relatively few teachers receive any pre-service training about child sexual abuse, that in-service training is more frequent but still far from universal, that teachers' self-ratings of the adequacy of these training efforts indicate areas where training needs to pay particular attention, and that teachers' self-rated capacities in knowing and identifying indicators of child sexual abuse can be substantially improved. More systematic and widespread efforts need to be developed to provide teachers with pre-service and in-service training, which must include education of teachers in the identification of indicators of child sexual abuse and reporting processes. Follow-up measures should be implemented to ascertain whether teachers both possess knowledge of indicators and reporting processes, and feel confident about their knowledge and their ability to identify indicators. Professional development of teachers in this domain is an essential investment which benefits children who have been abused, helps teachers cope with this part of their role, helps protect schools from legal liability, and develops the capacity of communities to respond to child sexual abuse.

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References

- Abrahams, N., Casey, K. & Daro, D. (1992). Teachers' knowledge, attitudes and beliefs about child abuse and its prevention. *Child Abuse & Neglect*, 16, 229-238.
- Anderson, J., Martin, J., Mullen, P., Romans, S. & Herbison, P. (1993). Prevalence of childhood sexual abuse experiences in a community sample of women. *Journal of the American Academy of Child and Adolescent Psychiatry*, 32, 911-919.
- Arata, C. (1998). To Tell or Not to Tell: Current Functioning of Child Sexual Abuse Survivors Who Disclosed their Victimization. *Child Maltreatment*, 3, 63-71.
- Arnold, L. & Maio-Taddeo, C. (2007). *Professionals Protecting Children: Child Protection and Teacher Education in Australia*. Australian Centre for Child Protection: Adelaide.
- Australian Bureau of Statistics. (2008). More students and more teachers in Australian Schools over the last decade: ABS. Press Release, 28 February 2008. Retrieved September 2, 2010, from <http://www.abs.gov.au/ausstats/abs@.nsf/mediareleasesbytitle/84829036269D0245CA2573FD00112545?OpenDocument>.
- Australian Institute of Health and Welfare. (2006). *Child protection Australia 2004-05*. Australian Institute of Health and Welfare: Canberra.
- Australian Institute of Health and Welfare. (2007). *Child protection Australia 2005-06*. Australian Institute of Health and Welfare: Canberra.
- Australian Institute of Health and Welfare. (2008). *Child protection Australia 2006-07*. Australian Institute of Health and Welfare: Canberra.
- Australian Institute of Health and Welfare. (2009). *Child protection Australia 2007-08*. Australian Institute of Health and Welfare: Canberra.

- Australian Institute of Health and Welfare. (2010). *Child protection Australia 2008-09*. Australian Institute of Health and Welfare: Canberra.
- Berliner, L. & Conte, J. (1990). The Process of Victimization: The Victims' Perspective. *Child Abuse & Neglect, 14*, 29-40.
- Boden, J., Horwood., L. & Fergusson, D. (2007). Exposure to childhood sexual and physical abuse and subsequent educational achievement outcomes. *Child Abuse & Neglect, 31*, 1101-1114.
- Boney-McCoy, S. & Finkelhor, D. (1995). Prior Victimization: A Risk Factor for Child Sexual Abuse and for PTSD-Related Symptomatology Among Sexually Abused Youth. *Child Abuse & Neglect, 19*, 1401-1421.
- Butler, D. & Mathews, B. (2007). *Schools and the Law*. Federation Press: Sydney.
- Chen, L., Murad, H., Paras, M., Colbenson, K., Sattler, A., Goranson, A, et al. (2010). Sexual Abuse and Lifetime Diagnosis of Psychiatric Disorders: Systematic Review and Meta-Analysis. *Mayo Clinic Proceedings, 85*(7), 618-629.
- Crenshaw, W., Crenshaw, L. & Lichtenberg, J. (1995). When educators confront child abuse: An analysis of the decision to report. *Child Abuse & Neglect, 19*, 1095-1113.
- Currie, J. & Widom, C. (2010). Long-term Consequences of Child Abuse and Neglect on Adult Economic Well-Being. *Child Maltreatment, 15*(2), 111-120.
- Daignaut, I. & Hebert, M. (2009). Profiles of school adaptation: Social, behavioural and academic functioning in sexually abused girls. *Child Abuse & Neglect, 33*(2), 102-115.
- Dinwiddie, S., Heath, M., Dunne, M., Bucholz, K., Madden, P., Slutske, W, et al. (2000). Early Sexual Abuse and Lifetime Psychopathology: a Co-twin Control Study. *Psychological Medicine, 30*, 41-52.
- Downey, L. (2007). *Calmer classrooms: A guide to working with traumatised children*. Commissioner for Child Safety: Melbourne.
- Dube, S., Miller, J., Brown, D., Giles, W., Felitti, V., Dong, M, et al. (2006). Adverse childhood experiences and the association with ever using alcohol and initiating alcohol use during adolescence. *Journal of Adolescent Health, 38*, 444.e1– 444.e10.
- Dubner, A., & Motta, R. (1999). Sexually and Physically Abused Foster Care Children and Posttraumatic Stress Disorder. *Journal of Consulting and Clinical Psychology, 67*, 367-373.
- Dunne, M., Purdie, D., Cook, M., Boyle, F. & Najman, J. (2003). Is child sexual abuse declining? Evidence from a population-based survey of men and women in Australia. *Child Abuse & Neglect, 27*, 141-152.
- Egeland, B. (2009). Taking stock: Childhood emotional maltreatment and developmental psychopathology. *Child Abuse & Neglect, 33*, 22-26.
- Fallon, B., Trocme, N., Fluke, J., MacLaurin, B., Tonmyr, L. & Yuan, Y. (2010). Methodological challenges in measuring child maltreatment. *Child Abuse & Neglect, 34*, 70-79.
- Fanslow, J., Robinson, E., Crengle, S. & Perese, L. (2007). Prevalence of child sexual abuse reported by a cross-sectional sample of New Zealand women. *Child Abuse & Neglect, 31*(9), 935-945.
- Fergusson, D., Horwood, L. & Woodward, L. (2000). The stability of child abuse reports: A longitudinal study of the reporting behaviour of young adults. *Psychological Medicine, 30*, 529-544.
- Finkelhor, D. (2008). *Childhood Victimization*. Oxford University Press: Oxford.
- Finkelhor, D. & Dzuiba-Leatherman, J. (1994). Children as Victims of Violence: A National Survey. *Pediatrics, 94*(4), 413-420.

- Finkelhor, D., Hotaling, G., Lewis, I. & Smith, C. (1990). Sexual Abuse in a National Survey of Adult Men and Women: Prevalence, Characteristics, and Risk Factors. *Child Abuse & Neglect, 14*, 19-28.
- Finkelhor, D., Ormrod, R. & Turner, H. (2007). Poly-victimization: A neglected component in child victimization. *Child Abuse & Neglect, 31*, 7-26.
- Fleming, J. (1997). Prevalence of childhood sexual abuse in a community sample of Australian women. *Medical Journal of Australia, 166*, 65-68.
- Gidycz, C. and Koss, M. (1989). The Impact of Adolescent Sexual Victimization: Standardized Measures of Anxiety, Depression and Behavioural Deviancy. *Violence and Victims, 4*, 139-149.
- Gilbert, R., Kemp, A., Thoburn, J., Sidebotham, P., Radford, L., Glaser, D. & MacMillan, H. (2009). Recognising and responding to child maltreatment. *Lancet, 373*(9658) 167-180.
- Gilbert, R., Widom, C., Browne, K., Fergusson, D., Webb, E. & Janson, S. (2009). Burden and consequences of child maltreatment in high-income countries. *Lancet, 373*(9657), 68-81.
- Goebbels, A., Nicholson, J., Walsh, K. & De Vries, H. (2008). Teachers' reporting of suspected child abuse and neglect: behaviour and determinants. *Health Education Research, 23*(6), 941-951.
- Hawkins, R. & McCallum, C. (2001). Mandatory notification training for suspected child abuse and neglect in South Australian schools. *Child Abuse & Neglect, 25*, 1603-1625.
- Heger, A., Ticson, L., Velasquez, O. & Bernier, R. (2002). Children referred for possible sexual abuse: medical findings in 2384 children. *Child Abuse & Neglect, 26*, 645-659.
- Horwitz, A., Spatz Widom, C., McLaughlin, J. & White, H. (2001). The Impact of Childhood Abuse and Neglect on Adult Mental Health: A prospective study. *Journal of Health and Social Behaviour, 42*, 184-201.
- Jonson-Reid, M., Drake, B., Kim, J., Porterfield, S. & Han, L. (2004). A Prospective Analysis of the Relationship Between Reported Child Maltreatment and Special Education Eligibility Among Poor Children. *Child Maltreatment, 9*(4), 382-394.
- Kenny, M. (2001). Child abuse reporting: teachers' perceived deterrents. *Child Abuse & Neglect, 25*, 81-92.
- Kenny, M. (2004). Teachers' attitudes toward and knowledge of child maltreatment. *Child Abuse & Neglect, 28*, 1311-1319.
- Kogan, S. (2004). Disclosing Unwanted Sexual Experiences: Results from a National Sample of Adolescent Women. *Child Abuse & Neglect, 28*, 147-165.
- Kohl, P., Jonson-Reid, M. & Drake, B. (2009). Time to Leave Substantiation Behind: Findings From A National Probability Study. *Child Maltreatment, 14*(1), 17-26.
- Laskey, L. (2008). Training to Safeguard: Lessons from the Australian experience. In M. Baginsky (Ed.), *Safeguarding Children in Schools*, (pp. 166-178). Jessica Kingsley: London.
- Mannarino, A., Cohen, J. & Berman, S. (1994). The Children's Attributions and Perceptions Scale: A New Measure of Sexual Abuse-Related Factors. *Journal of Clinical Child Psychology, 23*, 204-211.
- Martin, G., Bergen, H., Richardson, A., Roeger, L. & Allison, S. (2004). Sexual Abuse and Suicidality: Gender Differences in a Large Community Sample of Adolescents. *Child Abuse & Neglect, 28*, 491-503.
- Mathews, B., & Kenny, M. (2008). Mandatory reporting legislation in the USA, Canada and Australia: a cross-jurisdictional review of key features, differences and issues. *Child Maltreatment, 13*(1), 50-63.

- Mathews, B., Goddard, C., Lonne, B., Short, S. & Briggs, F. (2009). Developments in Australian laws requiring the reporting of suspected child sexual abuse. *Children Australia*, 34(3), 18-23
- Mathews, B., Walsh, K., Butler, D., & Farrell, A. (2010). *Teachers reporting child sexual abuse: Towards evidence-based reform of law, policy and practice (Report for New South Wales, Queensland and Western Australia)*. Queensland University of Technology: Brisbane.
- Mathews, B., Walsh, K., Rassafiani, M., Butler, D., & Farrell, A. (2009). Teachers reporting suspected child sexual abuse: results of a three-State study. *University of New South Wales Law Journal*, 32(3), 772-813.
- May-Chahal, S. & Cawson, P. (2005). Measuring child maltreatment in the United Kingdom: A study of the prevalence of child abuse and neglect. *Child Abuse & Neglect*, 29, 969-984.
- McClellan, J., McCurry, C., Ronnei, M., Adams, J., Eisner, A. & Storck M. (1996). Age of Onset of Sexual Abuse: Relationship to Sexually Inappropriate Behaviours. *Journal of the American Academy of Child and Adolescent Psychiatry*, 35, 1375-1383.
- McKenna, M. (2010a). Police warn church on new wave of victims. *The Australian*, 15 April 2010. Retrieved September 2, 2010, from <http://www.theaustralian.com.au/news/nation/police-warn-church-on-new-wave-of-victims/story-e6frg6nf-1225853826688>.
- McKenna M. (2010b). Church accepts liability for child rapes in Toowoomba. *The Australian*, 12 July 2010. Retrieved September 2, 2010, from <http://www.theaustralian.com.au/news/nation/church-accepts-liability-for-child-rapes-in-toowoomba/story-e6frg6nf-1225890481821>.
- Mian, M., Wehrspann, W., Klajner-Diamond, H., Lebaron, D. & Winder, C. (1986). Review of 125 Children 6 Years of Age and Under Who Were Sexually Abused. *Child Abuse & Neglect*, 10, 223-229.
- Molnar, B., Berkman, L. & Buka, S. (2001). Psychopathology, Childhood Sexual Abuse and Other Childhood Adversities: Relative Links to Subsequent Suicidal Behaviour in the US. *Psychological Medicine*, 31, 965-977.
- Mullen, P., Martin, J., Anderson, J., Romans, S. & Herbison, G. (1993). Childhood Sexual Abuse and Mental Health in Adult Life. *British Journal of Psychiatry*, 163, 721-732.
- Nalavany, B., Ryan, S., Howard, J. & Smith, S. (2008). Preadoptive child sexual abuse as a predictor of moves in care, adoption disruptions, and inconsistent adoptive parent commitment. *Child Abuse & Neglect*, 32(12), 1084-1088.
- Nelson, E., Heath, A., Madden, P., Cooper, L., Dinwiddie, S., Bucholz, K, et al. (2002). Association Between Self-reported Childhood Sexual Abuse and Adverse Psychosocial Outcomes: Results From a Twin Study. *Archives of General Psychiatry*, 59, 139-145.
- Ney, P., Moore, C., McPhee, J. & Trought, P. (1986). Child Abuse: A Study of the Child's Perspective. *Child Abuse & Neglect*, 10, 511-518.
- Paine, M. & Hansen, D. (2002). Factors Influencing Children to Self-Disclose Sexual Abuse. *Clinical Psychology Review*, 22, 271-295.
- Palmer, S., Brown, R., Rae-Grant, N & Loughlin, M. (1999). Responding to Children's Disclosure of Familial Abuse: What Survivors Tell Us. *Child Welfare*, 78, 259-282.
- Paolucci, E., Genuis, M. & Violato, C. (2001). A meta-analysis of the published research on the effects of child sexual abuse. *The Journal of Psychology*, 135, 17-36.
- Putnam, F. (2003). Ten-year research update review: Child sexual abuse. *Journal of the American Academy of Child & Adolescent Psychiatry*, 42, 269-278.

- Queensland Department of Education and Training and the Arts. (2008). *Annual Report 2007–08*. Retrieved September 2, 2010, from <http://deta.qld.gov.au/reports/annual/07-08/pdf/full-deta-annual-report-08.pdf>.
- Roberts, R., O'Connor, T., Dunn, J., Golding, J. & The ALSPAC Study Team. (2004). The effects of child sexual abuse in later family life; mental health, parenting and adjustment of offspring. *Child Abuse & Neglect*, 28, 525-545.
- Romans, S., Martin, J., Anderson, J., Herbison, P & Mullen, P. (1995). Sexual Abuse in Childhood and Deliberate Self-Harm. *American Journal of Psychiatry*, 152(9), 1336-1342.
- Ronan, K., Canoy, D. & Burke, K. (2009). Child maltreatment: prevalence, risk, solutions, obstacles. *Australian Psychologist*, 44(3), 195-213.
- Schimmel, D., & Militello, M. (2007). Legal Literacy for Teachers: A Neglected Responsibility. *Harvard Educational Review*, 77(3), 257-286.
- Sedlak, A., & Broadhurst, D. (1996). *Third national incidence study of child abuse and neglect*. Westat: Rockville, MD.
- Sedlak, A., Gragg, F., Mettenburg, J., Ciarico, J., Winglee, M., Shapiro, G, et al. (2008). *Fourth National Incidence Study of Child Abuse and Neglect (NIS-4) Design and Methods Summary*. Westat: Rockville, MD.
- Shaffer, A., Yates, T. & Egeland, B. (2009). The relation of emotional maltreatment to early adolescent competence: Developmental processes in a prospective study. *Child Abuse & Neglect*, 33, 36-44.
- Simpson, T. & Miller, R. (2002). Concomitance between childhood sexual and physical abuse and substance abuse problems: A review. *Clinical Psychological Review*, 22, 27-77.
- Smith, D., Letourneau, E., Saunders, B., Kilpatrick, D., Resnick, H. & Best, C. (2000). Delay In Disclosure Of Childhood Rape: Results from a national survey. *Child Abuse & Neglect*, 24(2), 273-287.
- Spataro, J., Mullen, P., Burgess, P., Wells, D. & Moss, S. (2004). Impact of Child Sexual Abuse on Mental Health: Prospective Study in Males and Females. *British Journal of Psychiatry*, 184, 416-421.
- SPSS Inc. (2007). *Statistical Program for the Social Sciences. Rel 16.0.2* (10 April 2008). SPSS Inc: Chicago.
- Stewart, A., Livingston, M. & Dennison, S. (2008). Transitions and turning points: Examining the links between child maltreatment and juvenile offending. *Child Abuse & Neglect*, 32, 51-66.
- Stjernqvist, H. (2009). *R v H*. Brisbane: Magistrates Court of Queensland, 1 December 2009. Copy on file with author.
- Swanston, H., Plunkett, A., O'Toole, B., Shrimpton, S., Parkinson, P. & Oates, R. (2003). Nine Years After Child Sexual Abuse. *Child Abuse & Neglect*, 27, 967-984.
- Trowell, J., Ugarte, B., Kolvin, I., Berelowitz, M., Sadowski H. & Le Couteur, A. (1999). Behavioural Psychopathology of Child Sexual Abuse in Schoolgirls Referred to a Tertiary Centre: A North London Study. *European Journal of Child and Adolescent Psychiatry*, 8, 107-116.
- Tyler, K. (2002). Social and Emotional Outcomes of Childhood Sexual Abuse: A Review of Recent Research. *Aggression and Violent Behavior*, 7, 567-589.
- Veltman, M. & Browne, K. (2001). Three decades of child maltreatment research: implications for the school years. *Trauma, Violence and Abuse*, 2, 215-239.
- Walsh, K., Bridgstock, R., Farrell, A., Rassafiani, M. & Schweitzer, R. (2008). Case, teacher and school characteristics influencing teachers' detection and reporting of child

- physical abuse and neglect: Results from an Australian survey. *Child Abuse & Neglect*, 32(10), 983-993.
- Walsh, K. (2009). Child protection. In J. Millwater & D. Beutel (Eds.), *Stepping Out into the Real World of Education* (pp. 20-40). Pearson: Frenchs Forest.
- Watts, V. (1997). *Responding to Child Abuse: A Handbook for Teachers*. Central Queensland University Press: Rockhampton.
- Watts, V. & Laskey, L. (1997). Where have all the flowers gone? Child protection education for teachers in Australian universities. *South Pacific Journal for Teacher Education*, 25(2), 171-176.
- Widom, C., Marmorstein, N. & White, H. (2006). Childhood Victimization and Illicit Drug Use in Middle Adulthood. *Psychology of Addictive Behaviors*, 20(4), 394-403.
- World Health Organisation. (2006). *Preventing child maltreatment: A guide to taking action and generating evidence*. World Health Organisation and International Society for Prevention of Child Abuse and Neglect: Geneva.
- Wozencraft, T., Wagner, W. & Pellegrin, A. (1991). Depression and Suicidal Ideation in Sexually Abused Children. *Child Abuse & Neglect*, 15, 505-511.