

23rd October 2023

Gerry Banks & Jacinta Spinks
Understanding Sexual Behaviours and Improving Evidence Section
National Office for Child Safety
NationalOfficeforChildSafety@ag.gov.au

Dear Gerry and Jacinta

RE: DRAFT UNDERSTANDING SEXUAL BEHAVIOURS DISPLAYED BY CHILDREN AND YOUNG PEOPLE: NATIONAL PRINCIPLES AND KEY TERMINOLOGY

Family Planning Alliance Australia (FPAA) is a long-standing alliance of [the key sexual and reproductive health organisations](#) from Australian states and territories and is their national policy and advocacy voice. We are the Australian [International Planned Parenthood Federation](#) (IPPF) member organisation.

Since the 1970's our primary members have collectively and individually shaped the reproductive and sexual health landscape through advocacy, health promotion campaigns, policy development, workforce development, community education, clinical service delivery, and capacity building.

Our Primary Member organisations are:

- True Relationships and Reproductive Health (Qld)
- Sexual Health and Family Planning ACT (SHFPACT)
- Family Planning Tasmania
- Sexual Health Victoria
- SHINE SA
- Sexual Health Quarters (WA)
- Family Planning NT.

The principles and key terminology have been reviewed by the FPAA Comprehensive Relationships and Sexuality Education Working Group, with Victoria and Queensland offering specific feedback (see attachments).

We congratulate you on this important work and fully support the government's intent and direction with these documents as well as all the other initiatives being implemented by your office at the moment, across Australia.

Thank you for the opportunity to be involved and we look forward to working with you more in the future.

Warm regards



Tracey Hutt
Chief Executive Officer

Attachment – Sexual Health Victoria Feedback NOCS NPKT

Attachment – True Relationships and Reproductive Health Feedback NOCS NPKT



Care
Education
Advocacy

901 Whitehorse Rd, Box Hill VIC 3128
PO Box 1377, Box Hill VIC 3128

W: shvic.org.au
P: (03) 9257 0100

Understanding Sexual Behaviours Displayed by Children and Young People – National Principles and Key Terminology (draft)

Sexual Health Victoria feedback

- Under *Definitions of key terms*, should populations or groups of people that behaviours can be displayed or acted on with be named, or is that utilising an adult-lens or construct of sexual behaviours?
- Overall, the *Definitions of key terms* is very vague and not very comprehensive. It is understandable that the goal of this document is to be broad enough to be applicable in various contexts. However, it would be beneficial to direct to other more comprehensible definitions or examples of behaviours ([Sexual behaviour in children and young people procedure, guideline and resources \(education.sa.gov.au\)](http://Sexual%20behaviour%20in%20children%20and%20young%20people%20procedure,%20guideline%20and%20resources%20(education.sa.gov.au)) and [Traffic Lights® for professionals | True](http://Traffic%20Lights%20for%20professionals%20|%20True)) in this document.
- Under Principle #1 *Human Rights*, include 'sex' to acknowledge and include young people and children with intersex variations.
- Principle #3 *Prevention and early intervention focused* would be more comprehensive, meaningful and applicable if it named education, specifically CRSE, as a primary prevention method.
Suggested edit of sub-description:
 - Prevention of concerning or harmful sexual behaviours will take a holistic approach to support children and young people to develop expected sexual behaviours and respectful relationships **through comprehensive relationships and sexuality education (CRSE)**, while also considering individual history of trauma and other adverse experiences and addressing the drivers of gender-based violence within the community.
- Under Principle #7 *Trauma-informed*, the following statement would benefit from cited research so as not to appear subjective or judgmental, which could lead to further biases and stigma if not addressed or reframed: "Children and young people who have displayed concerning or harmful sexual behaviours have often experienced victimisation, such as exposure to and experience of family violence, experience of physical, emotional or sexual abuse, and experience of neglect and or trauma. Concerning or harmful sexual behaviours may be a symptom of these experiences." (p. 19)
- Typo at top of page 20.
- Principle #10 *Multi-agency approaches* and Principle #11 *Skilled and well supported workforce* clearly support the need for a nationally recognised accreditation standard for CRSE providers. FPAA is well-suited to lead the development and implementation of such accreditation standard, with the appropriate government support and resources.
- While 'strengths-based' is used to describe different trauma-informed practices (under Principle #5 *First Nations-led* and Principle #7 *Trauma-informed*), it may be most beneficial to define 'strengths-based' as one of the overarching 12 principles. Principle #4 *Approaches are knowledge-based* could be edited to include *Approaches are knowledge-based and strengths-based*. This supports all stages of response (primary, secondary and tertiary) and aids a more comprehensive and supportive understanding of sexual behaviours displayed by children and young people in a destigmatising way. Overall, this also aligns with the National Strategy to Prevent and Respond to CSA.

Understanding sexual behaviours displayed by children & young people - feedback.

True Relationships & Reproductive Health supports the development of a national strategy to encourage consistency across the sector to support child safe practices.

“Understanding sexual behaviours displayed by children & young people” is an excellent document which goes some way to addressing the misunderstandings around sexual behaviours in young people. True uses the Traffic lights Framework which has been developed and updated over many years to address this problem. This framework is used by several state education departments and many National early childcare providers.

True makes the following recommendations for this document-

We would suggest that the language of expected behaviours is not comprehensive enough. Not all expected behaviours occur in all children, to say that these behaviours are expected is inaccurate. Instead, we suggest **typically expected** should be used. This means that we would usually expect to see these behaviours but should not be alarmed if we don't.

The national principles suggest using a “strengths-based, developmentally focussed frame to drive a focus on primary prevention and education”. But there is too much emphasis in the document on responding to concerning or harmful behaviours “ensuring there is a focus on prevention and promoting early responses and intervention when concerning or harmful behaviours have been identified” P 4. The document doesn't follow the principle.

To use primary prevention strategies the document should put more emphasis on understanding and responding to typically expected healthy behaviours. Typically expected sexual behaviours are the most important behaviours for professionals to understand. It is often these behaviours that are seen in concerning or harmful categories, but it's the contexts that is different. Encouraging adults to be aware of typically expected behaviours promotes healthy respectful relationships to develop in young people in a sex positive way. Without promoting healthy and expected sexual

behaviours as part of healthy child development and milestones, it is easy for adults to get it wrong when they consider what is concerning or harmful.

We need to educate professionals and members of the community on what should be happening and how to support this. This will help remove taboos and encourage adults to have conversations with young people around sexuality. Too many adults don't know how to do this and are fearful of crossing a line. Developing a document that encourages understanding of healthy developmental milestones will support healthy development and understanding, thus making it easier for adults to know when something is of concern.

Responding to sexual behaviours is a main theme of the document. Before you can respond you first need to **Identify** what the sexual behaviour is. This step is not really mentioned. Due to societal taboos around sexuality, bodies and language many professionals struggle to **Identify** the sexual behaviour. They use evasive language to avoid the topic. It's very important that **Identify** is an included step so that sexual behaviours in young people are normalised. Due to the taboos many healthy sexual behaviours are over reported to child safety. Professionals need to first understand and feel comfortable with this step before moving onto understanding.

When adults can't identify accurately the behaviour it makes it difficult to understand what the behaviour is communicating. All behaviours communicate. Typically expected behaviours can communicate curiosity and the need for information.

Concerning sexual behaviours (problematic)- The paper states that these behaviours "fall outside the range of expected / typical or developmentally appropriate activity". This is not accurate as these behaviours are often typically expected sexual behaviours, but it is the context where the problem lies. It's the who, how, where & when that can often move a typically expected sexual behaviour into that on one of concern. For example, masturbation – If a young person masturbates in a private place occasionally then it would be considered typically expected. If they were to masturbate persistently then the behaviour may become concerning or even harmful.

Concerning behaviours can often be corrected with education and support, reverting the behaviour back to a healthy & typically expected behaviour. Using the word problematic makes professionals view it as a problem that is complicated. We need

to remove the shame and negativity with the language that we use. Using concerning is fine but problematic should be removed. As soon as you use this word children are labelled as a problem. The paper mentions that problematic is a commonly used term, this document provides the opportunity to change the narrative and remove shaming language.

Inappropriate behaviour (included in concerning behaviour P 14) is also incorrect as the behaviour may be typical and expected for age and stage but out of context as previously stated. The context can be inappropriate, but we need to stop labelling the behaviour as inappropriate. We need to encourage professionals to look at the bigger picture to be holistic.

This document has 3 pages written on non-stigmatising language, but it uses stigmatising terms as recommendations e.g. problematic & inappropriate behaviours.

Traffic Lights refers to these behaviours in a colour coded system to remove the shame that surrounds sexual behaviours. Rather than looking at sexual behaviours as a problem with shameful and negative connotations it categorises them to a system that has solutions.