



Institute of Child Protection Studies

Australian Catholic University

TAKING US SERIOUSLY:

CHILDREN AND YOUNG PEOPLE TALK ABOUT SAFETY AND
INSTITUTIONAL RESPONSES TO THEIR SAFETY CONCERNS

A Report for the Royal Commission into Institutional Responses to Child Sexual Abuse

Tim Moore

Morag McArthur

Debbie Noble-Carr

Deborah Harcourt

August 2015

Project team

The Royal Commission into Institutional Responses to Child Sexual Abuse commissioned and funded this research project. It was carried out by Dr Tim Moore, Professor Morag McArthur, Ms Debbie Noble-Carr, Dr Jodi Death, Professor Deborah Harcourt and Ms Carol Vale with assistance from: Mr Steven Roche, Ms Erin Barry, Professor Bob Lonnie, Professor Patrick O’Leary and Ms Jane Lawson.

Disclaimer

The views and findings expressed in this report are those of the author(s) and do not necessarily reflect those of the Royal Commission.

Published date

August 2015

Copyright information

Moore, T., McArthur, M., Noble-Carr, D., & Harcourt, D., 2015, Taking us seriously: children and young people talk about safety and institutional responses to their safety concerns, Institute of Child Protection Studies, Australian Catholic University, Melbourne.

ISBN 978-1-925289-22-0

© Commonwealth of Australia 2015

All material presented in this publication is provided under a Creative Commons Attribution 3.0 Australia licence (www.creativecommons.org/licenses). For the avoidance of doubt, this means this licence only applies to material as set out in this document.



The details of the relevant licence conditions are available on the Creative Commons website as is the full legal code for the CC BY 3.0 AU licence (www.creativecommons.org/licenses).



Royal Commission
into Institutional Responses
to Child Sexual Abuse

Preface

On Friday 11 January 2013, the Governor-General appointed a six-member Royal Commission to inquire into how institutions with a responsibility for children have managed and responded to allegations and instances of child sexual abuse.

The Royal Commission is tasked with investigating where systems have failed to protect children, and making recommendations on how to improve laws, policies and practices to prevent and better respond to child sexual abuse in institutions.

The Royal Commission has developed a comprehensive research program to support its work and to inform its findings and recommendations. The program focuses on eight themes:

- Why does child sexual abuse occur in institutions?
- How can child sexual abuse in institutions be prevented?
- How can child sexual abuse be better identified?
- How should institutions respond where child sexual abuse has occurred?
- How should government and statutory authorities respond?
- What are the treatment and support needs of victims/survivors and their families?
- What is the history of particular institutions of interest?
- How do we ensure the Royal Commission has a positive impact?

This research report falls within theme one.

The research program means the Royal Commission can:

- Obtain relevant background information
- Fill key evidence gaps
- Explore what is known and what works
- Develop recommendations that are informed by evidence, can be implemented and respond to contemporary issues

For more on this program, please visit the Royal Commission's Research page at:

www.childabuseroyalcommission.gov.au/research.

Table of Contents

Executive Summary	6
Talking to children and young people about safety and responses to their safety needs	6
How do children conceptualise safety and a lack of it?	7
What gives rise to perceptions of safety?	9
Perceptions of safety in institutions	9
Key messages from children and young people for the Royal Commission	11
 PART ONE: INTRODUCTION AND BACKGROUND	13
1. Introduction.....	13
1.1 The scope and nature of this report	15
2. Background.....	16
2.1 Why hear from children?	16
2.2 Placing this study in context: research about children’s perceptions of safety.....	17
3. Methodology	20
3.1 Our use of reference groups	21
3.2 Ethics.....	22
3.3 Focus groups with children and young people	22
3.4 Participants and recruitment	25
3.5 Analysis	26
3.6 Limitations	27
 PART TWO: FINDINGS.....	29
4. How do children and young people conceptualise safety?	29
4.1 Being safe and unsafe	30
4.2 Safety as relational.....	31
4.3 Safety and familiarity	32
4.4 Safety and power	34
4.5 Safety within environments	35
4.6 Safe things.....	38
5. What gives rise to these perceptions?	39
5.1 Their own ‘gut feeling’	39
5.2 Previous experience.....	40
5.3 The way that others behave	41
5.4 Stories they’ve heard	42
5.5 The media	42
5.6 Things they have been taught.....	43
5.7 Difference in perception	43
6. What makes an institution safe and feel safe?.....	46
6.1 The institution has a focus on helping children and young people	47
6.2 The institution values children and young people and their participation	48
6.3 The institution provides a safe environment for children and young people.....	50
6.4 The institution proactively protects children and young people from unsafe people and experiences ...	50
6.5 The institution employs safe and trusted adults	52
6.6 The institution is open to monitoring by an external agency	57

7. Children and young people's advice to adults and institutions on what constitutes a good response to safety issues	59
7.1 Listen.....	59
7.2 Acknowledge children's concerns rather than downplay them or try to fix them	60
7.3 Help the child or young person determine whether there is a problem or not	60
7.4 Take the child or young person's side.....	61
7.5 Help children and young people build their skills to respond to a situation	61
7.6 Offer solutions that are realistic and respond to children and young people's concerns	62
7.7 Understand and overcome barriers to children and young people getting the support they need	64
8. Important messages from children and young people for the Royal Commission	65
8.1 Most adults are doing well.....	65
8.2 Things aren't as bad as many adults believe.....	65
8.3 The news might become more child-friendly	66
8.4 Some adults need to develop their skills and institutions need to better deal with safety concerns	66
8.5 Processes for responding to young people's safety concerns need to involve children and young people and respond to their perceived needs.....	67
8.6 Children and young people's needs and wishes should be seen as a priority	68
8.7 It was good that the Royal Commission had a children's research project and children and young people might like more interaction with the Commission.....	68
9. Concluding comments	70
9.1 The need for adults to understand how children conceptualise, experience and deal with safety issues	70
9.2 The need for adults to understand the dynamics of sexual abuse and other safety concerns	71
9.3 The need for adults to help children and young people better understand the dynamics of sexual abuse and other safety concerns and how adults and institutions are managing risks.....	71
9.4 The need for adults to develop trustworthy relationships to enable children and young people to raise their concerns	71
9.5 The need for adults to take children and young people's concerns seriously.....	72
9.6 The need for institutions to engage children and young people in participatory processes.....	72
References	74
Attachment 1: Messages from the children and young people's reference groups	79
Attachment 2: Conducting the study ethically: our approach.....	81
Attachment 3: Responding to safety concerns.....	85
Attachment 4: Methods used in focus groups	87
Attachment 5: Summary tables	92

Executive Summary

'Lots of adults don't care enough about kids and this stuff is going to keep happening. Until they see us as having good ideas and believe us [when things go wrong] nothing will change.'
(MX-2)

History tells us that children and young people are at risk of sexual abuse within institutional contexts. This is partly due to their relative powerlessness and inherent vulnerability, but equally to a lack of, or inadequate, systems and structures to protect children from unsafe people and respond when safety concerns are raised. Although studies have identified better practice approaches to protecting children in institutions, many have failed to consider children and young people's views on what they need to be safe and how they would like institutions and the wider community to respond when safety concerns emerge.

In 2014, the Royal Commission into Institutional Responses to Child Sexual Abuse commissioned the Institute of Child Protection Studies (ICPS) at the Australian Catholic University, with colleagues from the Queensland University of Technology and Griffith University, to develop an understanding of how children perceive safety and consider it within institutional contexts. Specifically, this study explores:

- a) how children and young people conceptualise and perceive safety;
- b) children and young people's views on what gives rise to these perceptions;
- c) children and young people's perceptions of safety within institutions;
- d) what children and young people consider is already being done to respond to safety issues and risks in institutions;
- e) what children and young people consider should be done to respond to safety issues in institutions.

This study is being conducted in three stages:

- 1. Planning;
- 2. Conceptualising safety;
- 3. Considering children's experiences of safety and institutional responses.

This report provides an overview of the major themes emerging from Stage 2 of the project, which conducted 10 focus groups with pre-schoolers, children and young people in the ACT, Victoria, New South Wales and Queensland. One hundred and twenty-one children and young people, ranging in age from 4 to 18 years, participated in focus group discussions in a variety of institutional and jurisdictional contexts. Participants interacted with early learning centres, schools, sporting groups, holiday camps, church groups, out-of-home care agencies and hospitals. Three reference groups provided advice on the methodology and methods, and trialled proposed tools.

Findings from these focus groups will help inform the development of an online survey that will gauge children and young people's experiences of safety in a variety of institutional contexts, and determine how well they believe institutions are responding to their needs.

Talking to children and young people about safety and responses to their safety needs

This study is premised on the view that children and young people understand and experience safety in different ways to adults and that without an appreciation of what children and young people need to be and feel safe, responses may fail to adequately respond to their concerns.

To enable the study to be carried out in an ethical and appropriate way, ICPS spent some time considering the sensitivities related to issues such as safety and child sexual abuse and, in partnership with the Royal Commission and Adults' Advisory Group, developed a methodology that afforded participants a high degree of choice and control, physical and emotional safety, and checks to ensure they did not experience any distress through their participation. The development of the methodology benefited greatly from the active participation of three reference groups of children and young people who were involved in every stage of the project from the clarification of its scope through to its analysis and dissemination. The Australian Catholic University's Human Research Ethics Committee granted the study ethical approval.

How do children conceptualise safety and a lack of it?

Participants differentiated between feeling safe and being safe, and defined safety in relation to how they felt and how they behaved, as well as the things that surrounded them. For example, they described safety as the absence of unsafe people, behaviours, activities, things, dangerous items and other threats. They often used synonyms such as 'protection', 'security' and 'looked after'; feelings such as 'comfortable' and 'relaxed'; and personal characteristics such as 'confident' and 'resilient'. As such, they defined safety in relation to how they felt and how they behaved in response to a person, place or experience, as well as the things that surrounded them.

Participants defined 'unsafe' in relation to danger, risks and a lack of safe people and strategies to keep them safe. Like safety, they often talked about being unsafe in relation to feelings: of being frightened, worried, anxious and angry about their circumstances.

Children and young people identified risks such as being hurt, being abducted, being bullied, being lost, being forced to do unsafe things that they didn't want to do, encountering creepy adults or experiencing racism.

Children and young people generally saw the world outside of the spaces, people and activities that they were familiar with and trusted as being unsafe or, at least, as being potentially unsafe. They had some faith in caring professionals (teachers, doctors, the police and others) but did not automatically assume that any adult was safe until they got to know them. Adults who didn't take responsibility for children and young people's safety, particularly when they assumed a supervisory or support role, were seen as unsafe.

Participants often characterised safety in relation to others: they felt most safe when they had adults and peers around them whom they trusted and who would protect them from danger; that they had faith in these people because they knew that they cared about children; that they knew them well enough to identify when they were unsafe; that they took time to be with children and took their worries and concerns seriously, acting on them when appropriate.

Adults, on the other hand, who were unpredictable or who did not demonstrate adult-like behaviours were also seen as unsafe. This included those who were under the influence of alcohol or other drugs, people with mental health issues, people who were angry, people like magicians and clowns, adults with poor boundaries (who got too close or acted inappropriately) and people who acted erratically. Adults who were different to adults that children knew were also seen as potentially dangerous – people from foreign countries, homeless people, people with different religions and people who were doing things which adults wouldn't usually do.

Adults were also unsafe when they used their power or influence against children and young people. This included adults who bullied children, those who displayed favouritism, those who threatened children and made them feel powerless.

Participants, particularly in the older groups, increasingly felt that it was their own responsibility to keep safe and to deal with their safety concerns. Most identified strategies for 'blocking out' their concerns (by hiding in their rooms, playing loud music and distracting themselves), for escaping unsafe situations and for managing unsafe people.

Familiarity and predictability were key characteristics of safe people, places, activities, times and things. Children and young people felt most safe when they knew what was happening, why it was happening and how to navigate any emerging safety issues. Choice and control were also seen as enabling children to feel safe or less unsafe in unsafe circumstances and environments.

Power was an issue highlighted in most groups. Often it was adults (such as teachers but also coaches, older young people and police) who were identified as people who use their physical presence and their power as adults to intimidate children and young people, particularly those who were challenging their authority. Children and young people felt that to be safe they needed to feel a level of power and control. They felt that when children were being hurt they would feel powerless and that as well as responding to a situation, adults needed to give children some power so that they wouldn't remain in a powerless position.

Children and young people were quick to identify things that were unsafe: be they things that could hurt them (weapons, wild animals, fire and explosives, broken things, cars); things that scared them (scary movies, news reports, violent games); things that could lure them to unsafe places or people (white vans, lollies); and media through which unsafe people could contact them (the internet, mobile phones).

Spaces and places that were mainly for adults (such as pubs, businesses, nightclubs and shops) were seen as unsafe for kids in that children and young people were often unwanted there, because adults acted differently there than in more child-friendly spaces, because children's needs and wishes weren't a priority and because (in the case of pubs and nightclubs etc.) adults would act unpredictably. Public spaces were often seen by children and young people (particularly those who were younger) as not being child-friendly – particularly bus interchanges, near government housing, at large sporting matches and when there were big groups of adults.

Young people talked about the fact that sometimes they sought out unsafe situations, environments or activities due to the thrill, challenge or affirmation they received from others. They did highlight the fact that it was reasonable for young people to place themselves at risk but that it was unreasonable for adults (or their peers) to do this when there were potentially negative outcomes.

Children and young people reported that they thought they often understood safety in similar ways to adults. However, they felt that there were also differences. Children and young people stressed the fact that although being safe and feeling safe were related and interlinked; they needed to be understood differently. They believed that adults were often more focused on the observable threats surrounding children, rather than how children feel and what they need to feel safe. They believed that adults sometimes did not recognise or value children's concerns and that this was problematic. Without an appreciation of children's perceived safety needs, participants believed that institutions' responses were limited.

Participants reported that there were times when they were safe but felt unsafe, because:

- they held fears that were under-appreciated by adults and left unresolved;
- they were aware of risks but not of the ways that adults were managing those risks and protecting them from harm;
- they felt as though there was no one around them to protect them;
- people, places and things around them were strange or unfamiliar.

Similarly, there were times when they realised that they were unsafe but did not experience it this way. This occurred when:

- they were ill-informed about risks;
- adults informed them of safety issues but not how they were managing them;
- they misjudged people and places;
- they successfully used strategies to 'switch off' their feelings;
- they failed to see the consequences of their risky behaviours.

Without allowing children to better understand what real risks exist, and to allow children to raise their concerns, participants felt that adults enabled children to be in vulnerable positions, and ultimately, to be and feel unsafe.

They also believed that sometimes adults failed to appreciate children's feelings of safety, and in not appreciating them, tried to quell rather than explore children's fears and the ways they would like them to be managed. Participants felt that adults based their assessments on their own past experiences, or their judgments of people, places and activities, and were not as good at picking up on their own feelings or children's reactions.

What gives rise to perceptions of safety?

Participants were asked to consider how they and children and young people of different ages assessed safety and how this differed to adults. Children and young people suggested that they often based their assessment on: their gut feelings (towards a person, a place or an interaction); previous experience; the way that others seemed to be behaving in a space; things they'd heard from other children and young people, their parents and trusted adults; what they'd seen in the media (be it on TV or in the movies); and things that they had been taught at school.

Older participants believed that younger children generally assessed risk based on what was immediately in front of them, whereas they placed the risk in context and related it to past experience. They were concerned that adults didn't appreciate the extent to which kids worried and believed that adults failed to acknowledge children's worries and fears. Older children felt that teenagers were more likely to put themselves at risk because they enjoyed the thrill while children their age were more cautious.

Children and young people believed that adults primarily assessed risk based on their experiences as a child. This, they believed, meant that adults would minimise children's concerns rather than recognise that what children experience now is different to what it was in the past. Some participants thought that adults were more anxious (and over-protective) of children because they were more aware of the risks than in previous generations. They felt that this led to children and young people having less freedom than before.

Perceptions of safety in institutions

Children and young people were mostly engaged with schools and sporting groups. However, some had involvement with school holiday programs, church and youth groups, hospitals, residential care and after school care.

In these environments, children and young people most often raised concerns related to bullying (by peers or by adults), of coming across 'creepy adults' who could hurt them or make them uncomfortable, being pressured into doing things they didn't want to do (that had negative consequences), of being hurt because adults weren't doing their job, or of the institution failing to protect them from external threats (such as kidnapping, road accidents or violent strangers).

Most participants reported feeling safe in their schools but talked about experiences in previous or other schools that were unsafe. Children and young people generally believed that institutions were not effective in dealing with issues such as bullying or harassment but could identify things that were in place to support them.

A small number of participants voiced a general lack of faith in institutions, and felt that they prioritised the needs of the institution before children and young people. Children and young people generally believed that the institution should side with children and young people in the first instance, take their concerns more seriously, and act on children and young people's wishes until the investigation process was complete.

Characteristics of a safe institution

Participants generally agreed that institutions were safe when a number of conditions were met. Being able to see how these institutions were demonstrating these conditions was seen as crucial, in helping children not only be safe but also feel safe.

- **The institution has a focus on helping children and young people:** This is demonstrated by the way that adults interact with children. There are things that children and young people can do there. There are signs that children are welcome (such as child-friendly posters, pictures, and play areas) and other children and young people feel safe in that environment. (This is demonstrated by other children's behaviour.) Children in these institutions feel valued and respected.
- **The institution values children and young people and their participation:** This is demonstrated in the way that adults and children and young people interact; in the value the institution places on understanding children's fears and concerns, their needs and wishes; in the mechanisms they have in place for children and young people to complain, to shape strategies and to provide feedback. The institution makes demonstrable changes on children and young people's advice.
- **The institution provides a safe environment for children and young people:** Children and young people felt most safe in ordered and child-friendly environments where things like broken glass or equipment and mess were absent. Physical signs such as fences, security cameras and locks (when they are about locking unsafe people out rather than monitoring or controlling children) were seen as valuable. Participants felt that the best way of determining whether an environment is safe is to observe how children behave there.
- **The institution proactively protects children and young people from unsafe people and experiences by:** identifying issues early, being informed of potential threats and hazards (including things that scare or make children and young people feel unsafe), actively communicating with children and young people and their safety concerns, employing safe and trusted adults, and being open to monitoring by an external agency.
- **The institution employs safe and trusted adults who:** care about children and young people, act in appropriate ways, are available when children and young people need them, are able to talk about sensitive issues, prioritise children's needs and concerns over the needs of other adults and institutions, and who do what they say they will do. These adults aren't 'creepy', they don't play favourites but instead treat children equally, they don't bully children or use their power to intimidate or belittle children, they monitor their peers and have been assessed as being appropriate people to work with children and young people.

Effort is taken for children and young people to participate in deciding who is safe and unsafe and reviewing their assessment.

- **The institution is open to monitoring by an external agency:** that reviews the policies and practices that are in place, which engages children and young people about how things are going and monitors the institution to ensure that issues for children and young people are being addressed.

Advice to adults on how to best support children and young people

Participants gave examples of times when adults helped them to manage their safety concerns and when they stepped in to protect them from harm. They reflected, however, that there were a number of things that adults did not always do well and believed that even when an adult's natural reaction was to intervene and to take control of a situation it is important for them to:

- actively listen – to ensure that they fully appreciate children and young people's thoughts, feelings, needs and ideas on how things might be dealt with;
- help the child or young person to determine the nature and seriousness of the situation, so they can build their skills and respond in future situations when adults aren't around;
- help the child or young person to develop their skills to manage unsafe situations;
- offer solutions that are realistic and respond to the child or young person's concerns.

Participants recognised that there were a number of things that kept children and young people from seeking and receiving support for their problems. These included feelings of shame and embarrassment, a lack of confidence in adults and their ability to help, fears of retribution, fears of things getting worse due to an adult's intervention or negative past experiences.

They felt that unhelpful adults were those who aren't accessible to children or young people, don't have the knowledge to assess a situation, aren't comfortable in dealing with painful experiences, don't believe it is their job to help kids or believe that someone else is responding to the situation. Participants felt that these adults made seeking support a significant challenge for children and young people.

Key messages from children and young people for the Royal Commission

Children and young people were asked to think about all the things they had discussed within the focus groups and summarise them into a set of key messages for the Royal Commission. Key messages included:

- Most adults are doing well. Children and young people appreciated adults' efforts to keep them safe.
- Things aren't as bad as many adults believe. Children and young people are safer than many imagine and have developed skills and strategies to manage unsafe people, places and situations.
- It is important for the media to promote the ways that children and young people are being kept safe rather than just focusing on dangers and problems. Children and young people need to know about safety issues, but without an appreciation of how likely and how dangerous something is, and how it's being managed, children experience unnecessary stress and anxiety.
- Some adults need to develop their skills and institutions need to better deal with some safety concerns.

- Children and young people's safety needs and wishes need to be seen as a priority. They should be prioritised over those of adults and institutions to ensure that children and young people are protected from harm.
- Children and young people want to be involved in identifying and dealing with safety issues and believe that, in partnership with adults and institutions, issues such as child sexual abuse can be better dealt with.
- Children and young people would like to have more engagement with the Royal Commission.

PART ONE: INTRODUCTION AND BACKGROUND

1. Introduction

In 2014, the Institute of Child Protection Studies (ICPS) at the Australian Catholic University, in partnership with colleagues from Griffith University and the Queensland University of Technology, was commissioned by the Royal Commission into Institutional Responses to Child Sexual Abuse (the Royal Commission) to carry out a research project aiming to explore children and young people's views about safety, including from sexual abuse.

This research project will make an important contribution to informing the deliberations of the Royal Commission, including how best to prevent institutional child sexual abuse. This research will also increase adults' knowledge about what children and young people experience and think about safety in institutional contexts.

Specifically, the research project explores:

- a) how children and young people conceptualise and perceive safety;
- b) children and young people's views on what gives rise to these perceptions;
- c) children and young people's perceptions of safety within institutions;
- d) what children and young people consider is already being done to respond to safety issues and risks in institutions;
- e) what children and young people consider should be done to respond to safety issues in institutions.

The study is being conducted in three stages:

- 1. Planning;
- 2. Conceptualising safety;
- 3. Considering children's experiences of safety and institutional responses.

The key tasks in each stage are summarised in Figure 1: Project stages.

This report provides an overview of the major themes emerging from Stage 2 of the project, which included focus groups conducted between May and November 2014. These focus groups attempted to answer the research questions and to develop a set of characteristics of a child- and youth-safe institution and institutional responses to safety concerns. In Stage 3, an online survey has been developed, in partnership with children and young people, to answer questions (c), (d) and (e) and to confirm findings from Stage 2.

For the purposes of this report we refer to participants in the group with pre-school-aged children as pre-schoolers (IN), those in the primary-school-aged groups as children (CH), those in the secondary-school-aged groups as young people (YP) and those in mixed groups as both children and young people (MX). Where a theme emerged more strongly in a particular group, these three groups are distinguished from each other.

Figure 1: Project stages

Stage 1: Planning

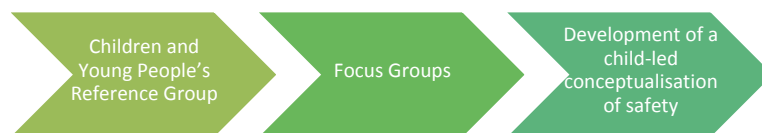


Targeted review of the literature to identify what is known about children's safety and methods

Guidance given to project by adult experts

Approval for study sought from ACU Human Research Ethics Committee

Stage 2: Conceptualising



Children and young people work with researchers to develop research plan and shape methods

Children and young people help develop a definition of safety, identify what children need to be and feel safe and consider what is currently being done to make them be and feel safe

Researchers analyse focus group data and propose a set of key themes and characteristics related to children's safety

Stage 3: Considering children's experiences of safety and institutional responses



Researchers' analysis is tested with children and young people who help explore implications. Survey is developed in consultation with children and young people

Children and young people reflect on the extent to which they believe institutions demonstrate child-safe characteristics and respond to the safety needs identified in Stage 2

Quantitative data is analysed and emerging themes identified

Children and young people work with researchers to identify the key findings and implications for practice

1.1 The scope and nature of this report

This report provides an overview of the methodology and methods used in Stage 2 of the research project, and the key findings from the focus groups. The Introduction, Background and Methodology (Sections 1–3) placed the study in context and provided a rationale and overview of the way that the study was conducted.

Sections 4–9 provide an analysis of how children and young people in our study conceptualised, understood and assessed safety issues (including but not limited to child sexual abuse) within institutional contexts (Sections 4 and 5). Section 6 reports on the key characteristics of safe institutions, as conveyed by research participants, including the need to respect children and young people and their opinions, to provide a safe and inviting environment, in employing trusted adults and in responding proactively and effectively when safety issues emerge. Section 7 outlines participants' views on what constitutes a good response to safety issues, and Section 8 provides a list of messages that participants wanted the Royal Commission and the broader community to hear in relation to keeping children safe in institutions. Finally, Section 9 provides some concluding remarks.

2. Background

Previous research and inquiries tell us that children and young people are at risk of sexual and other forms of abuse in the institutions with which they interact: schools, out-of-home and residential care, sports, children's services and camping and recreational programs (Gallagher, 2000; Hartjen & Priyadarsini, 2012).

At the same time, studies have shown that children often feel unsafe (even when adults consider them safe) and that adults are often unaware of these real and perceived risks to children (Turner, Hill, Stafford, & Walker, 2006). As such, adults are often unable to respond to these risks or to children's concerns and worries. Instead, strategies to mitigate risks to children and young people are often based on the concerns that adults have about children, and measures to help children *feel* safe may respond to the things that adults think children are worried about, rather than what children feel themselves (Kelley, Mayall, & Hood, 1997). This is problematic in that while attempting to alleviate children and young people's fears, and reduce or mitigate the risks of child abuse, adults may unwittingly render children more vulnerable and raise their levels of concern unnecessarily.

It is vital, then, to develop our understanding of what children need from adults and institutions to be and to feel safe. This requires a discussion with children about what safety means to them, about how they perceive levels of risk and what they need from adults to be and to feel safe (Bown, 2010). Understanding how children respond to and mitigate risks may also open up opportunities for adults and institutions to better respond to abuse, and to create and implement strategies that are more effective for children and young people (Turner et al., 2006).

2.1 Why hear from children?

There is an established body of evidence that promotes children as able and competent research participants (Moore, McArthur, & Noble-Carr, 2008). This recognition has been partly attributed to the influence of the 'new sociology of childhood' and 'childhood studies', which stem from an approach that conceptualises children as social actors who have the ability to shape their own lives and influence others (Mayall, 2002). This approach argues that children have distinct capacities to understand and explain their worlds, and questions the appropriateness of adults representing children's voices (Mason & Steadman, 1997). Such an approach is supported by the *UN Convention on the Rights of the Child*, which accords children 'the right to express their views freely in all matters affecting them' (UNICEF, 1989).

In recent years, researchers have increasingly identified and advocated for the legitimacy of children's participation in the research process (Harcourt, Perry, & Waller, 2011). Involving children as active research participants improves both the quality and integrity of the research, and provides a more complete account of the issue under consideration (Einarsdóttir, 2007). Children can identify issues that 'adult' participants may not be aware of, as well as responses to their real and perceived needs (Harcourt & Einarsdóttir, 2011).

Children have different concerns and different ways of exploring and understanding experiences, and consequently, researchers are able to develop a fuller understanding of the issue under consideration. In being able to conceptualise issues the way a child or young person would, policy makers are better able to develop and implement effective policies and services aimed at children, and respond to their real and perceived needs. Without hearing and incorporating children's voices, policy and practice frameworks are at risk of being adult-centric and of misinterpreting or ignoring key considerations and contextually based perspectives (Mason, & Fattore, 2005).

In the area of child sexual abuse, there is now a strong view that in order to develop appropriate preventative strategies against child abuse, children's testimonies and descriptions are required and children need to be given opportunities to influence and shape policy and practice to respond to the needs of those affected (Jernbro, Eriksson, & Janson, 2010).

2.2 Placing this study in context: research about children's perceptions of safety

Although there has been a growing concern about risks for children (Scott, Jackson, & Backett-Milburn, 1998), the literature on children's perceptions of risk, particularly in the institutional context, is still underdeveloped. Studies have generally focused on children's views about risk in public spaces, neighbourhoods and communities (Farver, Ghosh, & Garcia, 2000; Milne, 2009; Nayak, 2003; Negreiros, 2010), particularly where there are high rates of crime, gang behaviour and violence (Bromley & Stacey, 2011; Bromley & Stacey, 2012; Conolly & Parkes, 2012; Farver et al., 2000; Johansson, Laflamme, & Eliasson, 2012; Kelly, 2010; Neary, 2013; Olvera, 2012; Rogers, 2012). Other studies have looked at home (Kelley, Mayall, and Hood, 1997), families, schools (Leonard, 2006; Miller, 2011; Wiebe, 2013) and residential care programs but have generally focused on external rather than internal threats (Harden, 2000; Scott et al., 1998; Turner et al., 2006).

One such study, conducted by Collins (2001), used qualitative and quantitative tools to examine the association of children's perspectives of safety and levels of community exposure to violence. Importantly, she found that safety is often conceptualised as: the absence of danger or harm in the lives of the children, children's capacity to minimise or negotiate unsafe circumstances and encounters, children's connection to safe adults they can rely on and who align themselves with children in unsafe circumstances, and having confidence in strategies to minimise risk. Children identified that 'being alone, bullies, seeing violence, people who threaten, unfamiliar places and/or unfamiliar people, and hearing about violence jeopardize their safety' (p. 40).

Social geographers have also had a keen interest in children's perceptions of risk and safety in the built environment, in rural settings (Carter, 2012; Powell, Taylor, and Smith, 2013) and on the roads (Pfeffer, 2005). Risks related to the internet and new technologies have also been explored, although researchers have been criticised for not enabling children and young people to help explain their behaviours or the nature of the risks that are presented (Lee, 2013; Pain, 2004; Valentine & Holloway, 2001), a limitation currently being redressed by a collective of European researchers (Barbovschi, Green, & Vandoninck, 2013).

One example was Osofsky's 1997 study (cited in Collins, 2001), which assessed children's (and parents') perceptions of safety, asking participants to indicate how safe they thought children were at school, at home, while walking to school and when playing in their neighbourhoods. Children generally indicated that they were safe at home and school but were not safe walking to school or playing in their neighbourhoods. In comparing and contrasting children's and parents' perceptions, parents were more likely to have safety concerns for their children than the children, highlighting the differences in perception. However, as Collins (2001) notes, this and many subsequent studies have not unpacked what safety means to children or what makes them feel safe. Instead they have generally asked whether they are safe or not. As Negreiros (2010, p. 67) notes in her study on children's perceptions of safety in neighbourhoods:

'Among the few studies that directly explored children's perspectives of safety ... the term "safety" was found to be already pre-defined by the researchers.'

In the studies where children have helped to tease out notions of safety, they generally relate safety to relationships (with trusted adults or peers), to having some control over their environments, and

to having a say in decisions that affect them, in being provided accurate information about what risks and safety concerns exist around them and how adults (sometimes including police and others employed to ensure safety) are helping to reduce the level of risk in their environments (Blanchet-Cohen, 2013; Chan, Lam, & Shae, 2011; Collins, 2001; Eriksson, Hochwälder, & Sellström, 2011; Harris & Manatakis, 2013; Jobe & Gorin, 2012; Meltzer, Vostanis, Goodman, & Ford, 2007; Negreiros, 2010; Roy & McKinnon, 2014; Spilsbury, 2002; Taber-Thomas, 2013).

In the last 10 years, a number of researchers have started exploring how children and young people negotiate and mitigate interpersonal, environmental and physical risks (Christensen & Mikkelsen, 2007; Pain, 2004). One of the arguments underpinning these studies is that risk is a necessary and appropriate part of childhood and that in a risk-averse society, children may be at greater risk when overly protective adults restrict their movements, limit their relationships with positive adults and develop harm-minimisation strategies that keep them isolated, rather than keeping them safe (Brownlie, 2001).

Some studies have attempted to understand what help-seeking behaviours children develop, particularly within their neighbourhoods. The way that children interact with adults has been explored in a number of studies, which stress the importance of relationship, particularly as many children consider adults in many situations to be a threat (Milne, 2009; Negreiros, 2010). Public-private and adult-child dichotomies have been explored, as have the implications for children's perceptions of safety (Jamieson & Milne, 2012; Spilsbury, 2002).

This study attempts to further explore issues of safety, particularly within institutional contexts. In trying to understand how children and young people conceptualise safety and determine their safety needs, this study builds on previous research and fills a significant gap.

2.2.1 Perceptions of risk of child sexual abuse

Internationally, there have been few qualitative studies that have examined children and young people's self-described feelings and exposure to child sexual abuse and institutional responses to them (Jernbro et al., 2010). However, a number of studies have explored when and how children disclose experiences of sexual assault (Jackson, Newall, & Backett-Milburn, 2013; Schaeffer, Leventhal, & Asnes, 2011; Schönbucher, Maier, Mohler-Kuo, Schnyder, & Landolt, 2012; Ungar, Tutty, McConnell, Barter, & Fairholm, 2009), and the responses to them from the service system (Jernbro et al., 2010) and courts (Malloy, Brubacher, & Lamb, 2013).

Studies conducted have generally been quantitative and have attempted to determine the prevalence of child sexual abuse across populations. In addition to highlighting the criticisms made of the scope of these studies, children's own views and understandings have been missing (Negreiros, 2010). One notable exception conducted by Jacobs, Hashima and Kenning (1995), asked children to assess the likelihood that children in given scenarios might experience some form of child sexual abuse. Children then participated in a protective behaviours program, before completing a similar task. Jacobs et al (1995) found that children already had unrealistically high assessments of risk related to child sexual abuse (before and after the program), overstated the risk of being abused by a stranger and understated the risk of being abused by a family member.

In their concluding remarks, Jacobs et al (1995, p. 1454) stress the importance of better understanding how children comprehend child sexual abuse and the potential risks, particularly in relation to the development of prevention programs. They write:

'As researchers are writing about the "improbability" of prevention programs being successful (Melton, 1992), it is important to begin to examine children's existing perceptions of what is risky and what is abusive (see Cruise et al., 1994; Wurtele & Miller-Perrin, 1987). Without this knowledge, programs aimed at awareness could fall on deaf ears or raise

already high perceptions, resulting in undesirable levels of anxiety. Armed with some baseline information about children's perceptions, it will be equally important to determine what perceptions lead to particular actions and in which situations. Without that information, it seems unlikely that prevention programs can do more than raise children's awareness of risk without giving them the necessary tools to act. Whether there is an optimum level of risk perception remains to be seen; however, refocusing our research and prevention efforts may allow us to help children exercise an optimum level of vigilance' (1995, p 1454).

Overall, there is a general lack of understanding about how children, including those who have not been sexually abused, perceive the risk of child sexual abuse in institutions and their views on how institutions are protecting them from harm. This research project is the first large-scale Australian study across multiple jurisdictions to consider what children and young people think about safety in institutions, and institutional responses to keep them safe and respond to their safety needs.

In this regard, this research project will make a significant contribution to the work of the Royal Commission and the findings will be critical to informing the Royal Commission's recommendations for how to prevent and better respond to child sexual abuse. Moreover, the Australian public will be better informed about how institutional safety issues are constructed by children, and how these perspectives shape the behaviours and actions of those directly affected and in harm's way.

3. Methodology

'It's important that young people have an opportunity to talk about this stuff but it has to be done safely so, you know, it doesn't make life worse for them ... But I think that even though adults are scared to talk about this stuff because it is uncomfortable, it has to be done if things are going to change.' (YP-2)

There are a number of key assumptions that underpin and drive this project. These include:

1. Children and young people understand and experience the world in different ways than adults do:
 - a) There are differences in the way children and young people understand safety and being unsafe, the way that they ascertain whether they are safe and unsafe, and the way that they evaluate how useful existing strategies are in responding to safety issues.
 - b) Children and young people have different standpoints and can reflect not only on what it is to be a child or young person, but also on what it is to not be an adult, what they believe adults think and feel about and experience differently in their worlds and how these differences influence what children and adults do.
 - c) This should influence the way that research is conducted with children and requires ongoing dialogue between adult researchers and children and young people about what language is used, what tools are adopted, what meanings are being communicated and what emerging issues are important.
2. Children and young people are able to articulate their needs, views and wishes when adults adopt appropriate methodologies and methods, particularly when children and young people themselves guide these.
3. Children and young people are consumers of services and are the targets of many strategies that can be improved if their perceived needs and concerns are responded to.
4. Children and young people can benefit from their participation when it:
 - a) validates them as individuals and places value on their views and experiences;
 - b) provides openings for them to raise their needs and issues;
 - c) provides opportunities for them to reflect on their experiences and to hear the views of other children and young people;
 - d) allows them to influence change for the benefit of other children and young people, and when they feel this is occurring.
5. Research can be practised in such a way that children and young people are protected from harm. Practices can be developed to deal with any concerns and issues that might emerge through the research process.
6. Participation in research is not inherently problematic. The impacts of talking about sensitive issues are not significant, are short-lived and when they do exist they can be mitigated in dialogue between researchers and children.

These principles provide the foundation for this research project, and they shaped the way we interacted with children and young people in Stage 2 of the study, including the methodology and methods that were chosen and the way the findings are presented in this report.

This study conceptualises children and young people as co-constructors of knowledge and attempts to create a child-informed theory of safety within institutional contexts. It draws from standpoint theory, an approach that argues that women, and more recently children (Fattore, Mason, & Watson, 2007; Unrau, 2007), have a radically different view of knowledge development than men (or adults) and posits that they can add a 'different kind of knowing than what is generated by professionals, academics or others that have not lived the experience'.

It builds on a methodology developed by the Children's Research Centre at Trinity College, Dublin, which worked with children to measure their perceptions and experiences of deprivation (see: Swords, Greene, Boyd, & Kerrins, 2011). Similar to the Children's Research Centre, we adopted a constructionist epistemological framework that allowed children to draw on what Alanen (2005) refers to as their 'standpoint' and to reflect not only on how they understand and experience safety but also how they believe others (particularly adults) understand and respond to safety issues within an institutional context.

Our epistemological framework recognises that children and young people interact within, observe and are able to articulate the way they understand and experience safety within institutional contexts. Our framework assumes that they are able to help researchers to create a fuller and more nuanced understanding of what children want and need in situations when they are unsafe. Rather than adopting traditional notions of childhood that cast children as passive recipients of adult knowledge (Mason, 2008), we see them as active agents who are able to meaningfully contribute to research (Beazley, Bessell, Ennew, & Waterson, 2009). This research project also recognises that children and young people have developed their own strategies to identify, avoid and manage risks, some of which do not involve adult intervention (Backett-Milburn & Harden, 2004), and argue that these need to be understood alongside institutional and adult-led responses to institutional abuse.

As this study attempts to understand and privilege children's conceptualisations of safety over those of adults, we needed to consider the way we interacted with children and young people, to enable them to assert their views and opinions. We also needed to consider the role we played as adult researchers, and how we made meaning of the data and themes that emerged. As James (2007, p. 269) notes:

'By acknowledging rather than ignoring to mask the different standpoints of the adult researcher and child informant, good conversations with children can be had, and where children are actively engaged in the process of data production, a similar participatory dialogue can develop.'

3.1 Our use of reference groups

Children and young people's active participation is central to this project and reflects the view that research projects conducted in collaboration with children and young people yield better outcomes and enable the development of more child-centred theory (Moore et al., 2008). One key mechanism for enabling children and young people's active involvement is the use of reference groups (Moore, McArthur, & Noble-Carr, 2015).

Three reference groups were established for this project: one with children aged 9 to 11, one with young people aged 14 and 15 and another with young people aged 15 to 17. These groups met on two occasions and provided the research team with advice on the methodology and methods, and trialled a number of the proposed tools. Some of the important messages that emerged are included in *Attachment 1: Messages from the children and young people's reference groups*.

Children and young people in our reference groups participated in a trial focus group and were asked to provide feedback about the way that we interacted with them to check whether the processes were appropriate and child-friendly. Children said they were surprised by the approach we took in working with them as we appeared to value highly their participation, thoughts and opinions – something they rarely experienced in their interactions with other adults who sometimes appeared more sceptical about their capacity to reflect on important issues.

An Adults' Advisory Group was also established by the Royal Commission and included academics with an interest and expertise in qualitative and quantitative research methods, research with

children, and approaches for studying child sexual abuse. This group met twice to inform the development of the project and to provide valuable guidance to the research team on the most appropriate and ethical ways to conduct the study.

3.2 Ethics

A growing focus in the safety and child sexual abuse literature has been on how to best engage children in research. Barns (2011, p. 154) identifies a number of important factors that influence children's participation in this type of research. These factors include 'the increasing influence of the consumer; the children's rights agenda; and new paradigms in social science that conceptualise children as a competent social actor'. She and others (Barns, 2011; Morris, Hegarty, & Humphreys, 2012) note that ethical dilemmas remain, particularly when research involves children who have or may have experienced abuse or been exposed to other traumatic life experiences.

There is a strong argument that children who have or may have experienced child sexual abuse should be considered vulnerable (Hutchfield & Coren, 2011) and that researchers should have strategies in place at every stage of the research, to ensure that children are not further harmed through the research process or put at risk of further harm (e.g. when perpetrating adults punish them for their participation).

Researchers drew upon previous research experience in conceptualising and implementing this study (Moore, Saunders, & McArthur, 2011), and from the growing literature on ethical research with children and young people (Alderson & Morrow, 2005; Danby & Farrell, 2004; Dockett & Perry, 2007; Lambert & Glacken, 2011). The key messages from the literature and the ways that we responded to potential ethical issues are articulated in *Attachment 2: Conducting the study ethically: our approach*.

Although this study did not specifically target children and young people who had experienced abuse (in or outside of an institution), we were aware that some participants may have been hurt in the past. Prior to commencing the project, guidelines were developed that articulated the way researchers would respond to safety concerns (Attachment 3). In three focus groups, individual young people disclosed safety issues without prompting. The process articulated in the guidelines was followed.

This study was conducted with the approval of the Australian Catholic University's Human Research Ethics Committee (HREC), which monitored its development and implementation. Additional approval was sought and granted by the NSW Department of Education and Communities, the ACT Department of Education and Training, the Queensland Department of Communities, Child Safety and Disability, and the Catholic Education Office, Archdiocese of Canberra and Goulburn.

3.3 Focus groups with children and young people

Phase 2 of the research project, discussed in this report, included 10 focus groups conducted in the ACT, Victoria, New South Wales and Queensland. One hundred and twenty-one children and young people, aged between 4 and 18 years, participated in the focus groups. Three reference groups provided the research team with advice on the methodology and methods, and trialled proposed tools.

The research project's methodology purposefully sought to gain the views of children and young people in relation to safety, and safety in institutions broadly, but also provided opportunities for children and young people to specifically discuss safety from child sexual abuse, where appropriate.

When introducing the study we informed the children and young people about the Royal Commission and its work. In the pre-school and primary school-aged focus groups we informed children that “in the past some children have been hurt by adults or been hurt because adults haven’t kept children safe” (or words to that effect). In the older groups we explained that the Royal Commission had a focus on child sexual abuse but that the focus groups aimed to explore safety issues more broadly. We informed all participants that we wanted to start with a child-informed notion of safety and to then explore how adults and institutions helped to keep them safe. Children and young people demonstrated their ability to distinguish between safety in the context of institutional sexual abuse and more broadly, as discussed below.

As the study included participants of varying ages and developmental stages, a variety of focus group methods were adopted.

3.3.1 Infants

To elicit the views of pre-school-aged children, a group of 25 four- and five-year-old pre-schoolers from an early learning centre in western Brisbane were invited to participate in small group conversations about ‘What does it mean to be safe?’ and attempted to answer the first research question. These pre-schoolers were invited to use their everyday communication strategies, such as paintings and drawings, narratives (the pre-schoolers’ stories that accompany paintings and drawings), and conversations with a purpose (i.e. discussions that focus on a particular topic). During the initial visits, researchers had observed each of these ‘methods’ being used by the pre-schoolers and their teachers in daily interactions through teaching and learning exchanges, and they were therefore considered to be examples of communication and reporting tools that were aligned to pre-schoolers’ demonstrated current capacities.

The conversations with the four- and five-year-olds centred mainly on the question, ‘What does it mean to be safe?’ but also asked children to identify ways adults (including their parents, teachers and others) were keeping them safe.

3.3.2 Children and young people aged 9 to 18

Older children and young people, in nine groups, participated in two activity-based focus groups, each being 90 to 120 minutes in length, facilitated by two researchers. Some of the groups chose for their two focus groups to be held on the same day, while others participated in two sessions held on consecutive days. As the workshops were lengthy and the issues being explored were often sensitive, the focus groups were highly interactive; used a variety of forms (games, discussion groups, individual and group-based activities); and used scaffolding where concepts built on each other over time. As the groups varied in age and setting and as different participants favoured particular research methods, focus groups were sometimes conducted differently to meet the participants’ needs and wishes. However, each group was asked to answer the research questions to ensure that common themes could be identified across the groups.

The first workshop aimed to understand and place ‘safety’ and ‘being unsafe’ in context, to allow children and young people to build rapport with the researchers and to become more comfortable with the research process itself. It attempted to answer the first three of the project’s research questions, namely:

- a) How do children and young people conceptualise and perceive safety?
- b) What gives rise to these perceptions?
- c) What are children and young people’s perceptions of safety in institutions?

The second session of the focus group focused more specifically on children's safety concerns, to identify ways that adults and institutions were responding to issues and suggestions for how responses might be improved.

Our working definition of an institution, which was developed in consultation with our reference groups, was 'places where adults, other than parents, have a responsibility for children and young people'. Examples included schools, childcare centres, youth centres, camps, youth activities (including Scouts and Guides), public pools and hospitals.

At the beginning of the second session of each focus group, researchers reintroduced participants to the role of the Royal Commission and its nature and focus. Children and young people were told that the aim of this study was to provide the Royal Commission with an understanding of how children and young people conceptualised safety, and how institutions were responding to children's safety needs. A definition of an institution was provided and there was some discussion about the areas or issues the Royal Commission was interested in investigating.

Researchers then worked with participants to differentiate between 'in-scope' and 'out-of-scope' areas based on the Royal Commission's areas of interest. In-scope areas included topics related to institutional safety, relationships with adults and peers in institutions and environmental safety (in the context of the institutions with which they interact). The second session focused on the final research questions:

- d) What do children and young people consider is already being done to respond to safety issues and risks in institutions?
- e) What do children and young people consider should be done to respond to safety issues in institutions?

Research activities used in the focus groups included:

- Safety maps (where participants explored safety and identified safe places, people, times and things and reflected on what made something or someone safe)
- Unsafe maps (where participants repeated the process and looked at what made something or someone unsafe)
- Worry graphs (where participants identified safety concerns that they, younger and older people and parents were concerned about and the ways that children and young people assessed these concerns)
- Response matrixes (where participants identified a key safety concern and looked at what children in these circumstances need, how adults currently respond, the barriers to having their needs met and how adults might better keep children and young people safe)
- Values lines (where participants considered the extent to which institutions were responding to their safety needs and ways in which institutions might better identify, protect and respond to situations where children were unsafe)
- Key messages (where participants identified the things that they believed needed to be communicated to the Royal Commissioners).

Energising and focusing games and activities were dispersed throughout the program to help children engage in the process. More detail about these focus groups can be found in *Attachment 4: Methods used in focus groups*.

The conversations and focus groups were highly scaffolded (Crivello, Camfield, & Woodhead, 2009). Later discussions drew and built upon earlier ones and enabled a more in-depth understanding of the issues under investigation. This approach allowed the researchers the opportunity to build trust and rapport while developing an appreciation of the things that worried participants. Participants were also empowered to set the agenda for subsequent discussions, which focused on the ways they

wanted adults to respond to their identified safety concerns. Topics such as child abuse and sexual assault were only explored if participants explicitly identified these issues as a group. Eight of the 10 groups discussed issues related to child abuse – namely, sexual abuse (n=7), stranger danger (n=8), sexual harassment by peers (n=4) and child abduction (n=8). Sexual abuse was not discussed in one group with infants and one group of high-school-aged young people.

By scaffolding the focus groups, researchers were also able to use their professional judgment to identify any ethical issues that might emerge and respond to them alongside the needs of individual children. If, for example, researchers observed that only a small number of children and young people in the group had identified a particular concern or that others might not be willing or able to explore them, other related topics would be explored instead. Researchers regularly ‘checked in’ with participants and identified children and young people who were experiencing concern or distress, and either supported them in the moment or, on three occasions, referred them to a suitable support in the hosting organisation.

3.4 Participants and recruitment

One hundred and twenty-one children and young people participated in Phase 2 of the study. Participants were recruited through organisations that are the typical types of institutions children and young people interact with: early learning centres; primary, secondary and boarding schools; disability support services; Aboriginal organisations; out-of-home care agencies; and camping and youth development programs.

Recruitment was purposive and did not attempt to represent the broad child and youth populations. Instead, researchers worked with the Royal Commission and the Adult’s Advisory Group to identify groups that reflected the diversity of children and young people, services and institutional types that were identified in the Commission’s Terms of Reference.

Table 1 summarises the nature of the focus groups and participants’ ages.

Table 1: Nature of focus groups and participants

	Target	State	Number of participants	Ages
Infants (IN)	Children in early learning centres	Qld	25	Aged 4–5 years
Children (CH)	Primary-school-aged children	ACT	12	Aged 9–12 years
	Primary-school-aged children	NSW	12	Aged 9–12 years
Young People (YP)	Secondary-school-aged students	ACT	12	Aged 12–16 years
	Secondary-school-aged students	NSW	10	Aged 14–17 years
	Secondary-school-aged students at a boarding school	Vic	8	Aged 15–17 years
	Secondary-school-aged students at a school for Aboriginal and Torres Strait Islander young people	Qld	11	Aged 14–18 years
	Children and young people in out-of-home care	Qld	11	Aged 14–18 years
	Secondary-school-aged students with a disability ¹	ACT	10	Aged 13–16 years
Mixed group of children and young people (MX)	Children and young people engaged in holiday camps and youth development activities	ACT	10	Aged 9–16 years
	TOTAL		121	

3.5 Analysis

Large amounts of data were captured through the focus groups. This included written material (children’s safety maps and response matrixes), visual representations (worry graphs), transcripts from the small- and large-group activities and researchers’ notes and impressions.

Because there has been limited attention to understanding how children and young people conceptualise and define safety, we took an inductive approach to answer the research questions. We used the coding techniques of grounded theory to analyse the data. These processes allowed for categories and concepts to develop to answer the research questions². The coding and the generation (and interpretation) of broader patterns in the data was an appropriate approach that enabled a substantive description of children’s constructions of safety to emerge inductively rather

¹ Note: most of the young people in this focus group did not identify as having a disability. As such, researchers asked the group to identify the safety needs of young people with a disability broadly rather than asking for specific examples.

² There are many similarities between using a thematic analysis and a grounded theory approach (which Braun and Clarke call grounded theory lite). Both are very similar, both involve coding and the generation (and interpretation) of broader patterns in data. Differences in terminology – e.g. categories vs. themes – can mask the underlying similarities (Braun and Clarke, 2006).

than being informed by previous research (Glaser & Strauss, 2009; Strauss & Corbin, 1998). Patton (2005) defines inductive analysis as one where the patterns, themes and categories of analysis come from the data rather than categories or previous understanding being imposed on the analysis. To be able to develop a substantive description of how children conceptualise and experience safety is very useful to policy and practice where such understanding does not exist.

Data analysis was assisted by the use of NVIVO, a qualitative data analysis program. Each focus group's data were examined in depth and then compared to other focus groups. The focus group content was coded based on what children said in relation to the key research questions. Through coding, common themes across focus groups were identified, based on the meanings and interpretations found in the transcripts (Punch, 2013; Silverman, 2011).

Major codes included:

- Conceptualisations of safety: feelings/feeling safe; relation to others; times, places, contexts (safe and unsafe); people (safe and unsafe); demonstrating safety; 'real' vs. 'imaginary' threats; unsafe but positive experiences
- Perceiving safety and a lack of safety: physical responses; personal experiences; influence of peers; influence of trusted adults; influence of media; perceived differences by age, sex, generation; educational programs
- Safety needs: being safe vs. feeling safe; interpersonal issues; protection; participation
- Existing responses to safety concerns: response needs; human responses; practices; policies; programs; current strengths, weaknesses and gaps; improved responses to safety concerns
- Barriers: to seeking support; for adults and institutions to identify safety; for adults and institutions to respond.

Ongoing discussion with the wider research team ensured clarity and consistency of emerging themes and concepts. The robustness of this process was strengthened by input from the reference groups, which met once after the first four groups' data were analysed, and once at the end of the analysis.

3.6 Limitations

There were a number of limitations in this study – mostly due to the nature of the methodology and the researchers' capacity to work with large groups of children and young people across rural, regional and metropolitan Australia within short timeframes.

3.6.1 Sample

The research team recognises that children and young people interact with a host of other institutions (including sporting organisations, youth detention centres, hospitals, youth refuges and after school programs, for example) but it was not possible to include participants from all of these institutions due to a lack of time and resources. Similarly, it was agreed that focus groups would be conducted in metropolitan Queensland, New South Wales, Victoria and the Australian Capital Territory (although two groups were conducted in rural areas). Notwithstanding these decisions, the focus groups were able to elicit broad and universal themes, needs and concerns that relate to a range of institutional settings. A nested study has been developed to directly engage children and young people with a disability, and one focusing on young people in out-of-home care is also in development.

3.6.2 Recording and transcription of group sessions affecting analysis

To enable participants to take the lead in conversations, focus group facilitators often introduced a topic, posed broad questions and then allowed the children and young people to talk amongst themselves, debating the issues at hand. As a result, children and young people often spoke over each other, completed each other's sentences and added observations to those of their peers. This process produced richer data but was a challenge to transcribe and analyse. Some of the quotes used in this report capture this dialogue, and this report distinguishes one speaker from another by using a variety of punctuation marks.

As children and young people were not asked to identify their age or gender when speaking within focus groups, we were unable to easily distinguish differences between boys and girls or between participants of different ages in mixed groups. This is a limitation, as previous studies have shown that children and young people of different genders consider threats differently, and have different safety needs (Valentine, 1997). Comparisons are made, however, between different groups, and at various times we report the self-described differences children and young people perceive amongst themselves and those of different ages, genders and localities. Quotes from pre-school-aged children are identified as IN (infants), primary-school-aged children as CH, and high-school-aged young people as YP. Quotes from two mixed groups of children and young people are identified as MX. Where a particular theme emerged more strongly in a particular group, these three groups are distinguished from each other.

To protect the confidentiality of participants, each focus group is numbered not named.

PART TWO: FINDINGS

Part Two of this report provides an overview of the research findings as they pertain to institutions and institutional responses to child sexual abuse. It should be noted that children and young people spent considerable time discussing their broader fears, concerns and worries (such as fear of ghosts, wild animals, terrorism, death, family issues and failing at school) – issues that were out of the scope of this research report, which will be reported on elsewhere.

4. How do children and young people conceptualise safety?

'I think that adults think they know what kids need to be safe but I don't think that they do. They base it on what they remember from when they were kids and the world is different now. So they need to talk to kids and find out what it means to them.' (YP-1)

As discussed in *Section 2: Background*, one of the key criticisms of the existing literature is that researchers have predetermined ideas about what safety is and what children understand it to be (Collins, 2001). As such, this study began by considering how children and young people conceptualise and perceive safety and what gives rise to these perceptions. The key findings are highlighted in the summary box below.

KEY FINDINGS: Children and young people's conceptualisation of safety and feeling safe and unsafe

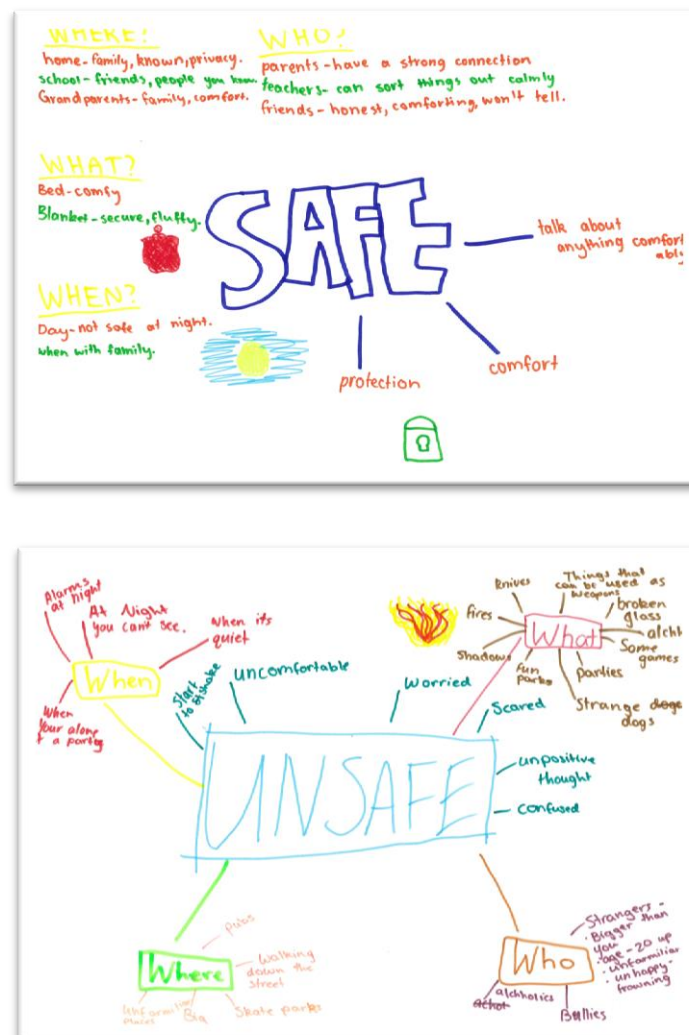
- Children and young people differentiate between 'being safe' and 'feeling safe', and feel that it is possible to experience one without the other or both at once.
- Children and young people are often more concerned about feeling safe than being safe, and believe that adults often dismiss children's need to feel safe – sometimes in an attempt to keep them safe.
- Children and young people often demonstrate how safe they are and how safe they feel through their behaviour, and assess their safety in relation to how their bodies respond to people, places and experiences.
- Children feel most safe when they are with trusted adults or when they are alone in a place where they feel they are in control. They often determine their level of safety based on the reactions of others – particularly people they trust and other children and young people who are similar to themselves.
- People, places and experiences that are familiar to children and young people seem safer than those that aren't. People (particularly adults) who are different to children and young people (and their parents or trusted adult allies) in their look, background and behaviour, and those who act in unpredictable, unusual or erratic ways are considered unsafe.
- Places are considered safe when their purpose relates to helping children, when they are ordered and orderly, and when others in that place demonstrate their sense of safety through their behaviours.
- Children and young people believe that they assess safety differently to the way that adults do – often relying more on their initial, immediate reactions to a person, place or experience than on their past experience. They feel that adults are less inclined to take children's reactions or views into account than that of their adult peers, and that adults base their assessment on their own past experience.
- Children and young people often hear about threats and other safety issues but are not often informed about what is being done to protect them. They feel that often children and young people experience fear unnecessarily and need adults to provide them enough information to reduce their fears.

4.1 Being safe and unsafe

In an attempt to better understand how children conceptualise safety, focus groups began by asking children about what safety meant to them, and when, with whom, where and with what they were safe. This initial discussion did not explicitly explore issues of child sexual abuse, although six of the nine focus groups noted abuse in their reflections.

After children and young people participated in a series of games and activities that explained the nature and purpose of the study and their involvement within it, participants were invited to complete a mind map that aimed to explore the ways they understood 'being safe' and 'being unsafe'. Mind maps are often used with children and young people to explore concepts in a semi-structured way that enables them to report their initial reactions to ideas without significant direction (Pearson & Somekh, 2003).

Examples of two of these maps are included here:



Participants most often defined safety as the absence of unsafe people, things and experiences. Safety was also seen as things, people, strategies or behaviours that acted to protect children from danger or risks, or to respond to them if they arose. In explaining safety, children and young people often used: synonyms such as 'protection', 'security' and 'looked after'; feelings or emotions such as 'comfortable', 'relaxed' and 'carefree'; and personal characteristics such as 'confident' and

‘resilient’. As such, they defined safety in relation to how they felt and how they behaved, as well as the things that surrounded them. In reporting back what initial words and ideas came to mind when they heard the word safe, one group of children called out all the words and ideas they had listed on their mind maps (without any particular explanation or discussion at this point):

‘No tension’, ‘feeling comfortable’, ‘friends’, ‘silk: because it’s soft’, ‘and clothes – you feel safe when you’re wearing clothes’, ‘the people you hang around, your friends’, ‘laughing, because it’s fun and it doesn’t make me feel unsafe’, ‘being at home’, ‘warm hugs’, ‘people looking out for you’, ‘those [safe] houses [where] you can go if you need [to]’. (CH-2)

Being unsafe was often defined in relation to risks, dangers and people, places and things that could cause harm. When explaining what being unsafe meant, children and young people most commonly used: synonyms such as ‘danger’, ‘risk’, ‘strife’ and ‘problem’; situations such as ‘unfamiliar’, ‘life-threatening’, ‘violent’ and ‘abusive’; feelings such as ‘scared’, ‘afraid’ and ‘unsure’; and behaviours like ‘self-protection’, ‘fight for your life’ and ‘run and hide’. The level of control that young people have over a situation or risk also seemed to determine their level of safety.

‘I had fear, bosses, joker, [another child’s name], Halloween, scared, sister, bogeyman, the news, 60 Minutes, Twitter, violence, persecution, Facebook, police, the FBI, Crimestoppers, video games that give you the heebie-jeebies, Halloween...walruses: walruses actually scare me.’ (YP-1)

Children and young people realised that these strategies were not always very helpful in resolving their worries but thought these activities gave them respite from their worrying. However, they were of the view that both were equally important for children and young people, and felt that adults did not always appreciate this difference. They believed that adults were sometimes too focused on making things safe rather than ensuring that children and young people felt safe at the same time. For example, in the case of stranger danger, they believed that in an attempt to keep children safe, adults made them feel unsafe, which they felt might lead to children being in dangerous situations unwittingly.

‘Kids are all worried about adults these days – that every adult is going to be a paedophile or is going to throw them in the back of a white van...like stranger danger ... That means that kids don’t trust adults anymore and they won’t have anyone to go and get help from if something’s wrong or if they’ve been abused or something. How does that make them safer? I think they feel less safe because adults have tried to make them safer. Do you know what I mean?’ (MX-1)

‘Like having bars up on windows helps [keep] robbers and junkies and paedophiles out of the school or hall or whatever but it makes us feel anxious too. It reminds us that we’re not really safe and it also makes you feel like all boxed in: like you can’t escape.’ (YP-4)

4.2 Safety as relational

Children and young people in each focus group reported that they felt most safe when they were with people they trusted, such as: parents, family members, friends, other children or adults that they knew and who they believed would protect them.

‘Little kids are safe because they’ve always got someone around them.’ ‘We’re alone so it’s more likely that we’ll go somewhere unsafe or someone might take us.’ (MX-1)

Trusted adults were often people in their families, people they knew, people who showed a genuine interest in them, people who they could tell were ‘watching out’ for them and people who their families and friends vouched for. What makes a ‘safe and trusted adult’ in an institutional context is further discussed below.

Participants in each group reported having some faith in caring professionals (e.g. teachers, doctors, police and others); however, children reported that they did not automatically assume that any adult was safe until they got to know them and young people reported that they would observe an adult’s behaviours before determining whether they were safe or not. Children reported that they had faith in these people because they assumed that they cared for them (or about children more generally); that they knew them well enough to identify when they were unsafe; that they took time to be with children and took their worries and concerns seriously, acting on them when appropriate.

Older participants did put some caveats around their faith in caring professionals, noting that some adults who were ‘on a power trip’, including those in caring professions, were unsafe. They suggested that police were sometimes considered unsafe as most of the interactions that young people have with them were not about protection but about what they considered to be police surveillance, control and threats. Similarly, they felt that unlike primary school teachers, high school teachers’ main focus was no longer on pastoral care but on getting students through the curriculum. Young people believed that teachers were less likely to think about students’ personal and safety needs in the way that primary school teachers did.

In addition to this growing scepticism about particular groups of adults, a small number of young people who reported that they had negative experiences with adults in the past seemed less inclined to have blind faith in adults than those who did not report these experiences.

Young people reported that they were more likely to rely on peers and said that they were just as safe when with friends as they were when they were with adults. A number also reported that they did not need to have peers or adults around them to be safe – that they could look after themselves and manage any emerging risks. As will be discussed in the section on responding to safety concerns (see Section 7), young people noted that as their reliance on adults diminished so did their comfort in seeking support, for fear of being seen as childish or unable to deal with their issues themselves.

4.3 Safety and familiarity

Familiarity was a key feature of children and young people’s conceptualisation of safety. Not surprisingly, children and young people in each group identified ‘home’ as being the place where they felt the safest. They said this was because they were in a familiar space, with people who they knew cared for them and where life was predictable. In their houses, children and young people most often identified their bedrooms and the bathroom as being safe: because it was their space, because there were no dangers there and because they believed that when they closed their doors the potential threats outside were shut out.

‘I feel safe in the shower – you’re there by yourself and nothing can hurt you.’ (YP-2)

‘I feel safe in my bedroom when I’m by myself. You can escape from everything under the covers and you know that nothing will happen.’ (YP-1)

Pre-schoolers, for example, identified the familiar people who made them feel safe as being their parents, siblings, other family members and friends.

Family members (parents, siblings and relatives) featured in almost all of the pre-schoolers' narratives. In some cases, one parent protected a child from another parent, but in general the children saw family as the safest people for them to be with.

'My dad puts his arms around me and I feel safe.' (IN-1)

'Safest people is my mummy and daddy and my little brother.' (IN-1)

'You stay safe with your mum and dad and with my baby sister.' (IN-1)

'My dad keeps me safe. My mum punched me in the face and then the police come and took her away and now I stay with Dad, and Pops, and [my brothers]. Mum's gone to jail now so I am with Nans and Pops.' (IN-1)

Friends and being at friends' houses were also cited as safe havens by a number of children. It should be noted here that the children had recently had a visit by an organisation that spoke about personal safety, where the focus was on 'your body is yours'.

'I am safe at my friend's house. She can give me hugs ... but that's all.' (IN-1)

'I feel safe at my friend's house 'cause she gives me hugs. Just hugs ... We are cooking and she lets me cook real food ... She is my friend.' (IN-1)

Children and young people believed that familiarity helped them feel safe. For example, they felt safe on a bus with a bus driver that they knew, but unsafe on a bus route that was unfamiliar to them or with a driver they did not know, or in the following example, on the wrong bus:

'Sometimes you might be on a bus and you feel safe because you know where it's going and what's going to happen. Adults probably think that you're unsafe but you're OK. But then you might be on the wrong bus and you totally freak out 'cause you aren't where you're supposed to be.' (YP-1)

Similarly, they reported feeling unsafe at a new school, in a new program or a new environment or with new teachers, carers, workers or adult supervisors until they could predict how things operated and how people interacted. They often said they felt scared and anxious with unknown people and in unfamiliar places and needed time to develop confidence. Participants felt that sometimes adults dismissed their feelings of discomfort and that they needed adults to better appreciate their sense of being unsafe in unfamiliar environments and with unfamiliar people.

When asked to think about younger children aged 5 to 7, children and young people in four of the groups suggested that children considered everything outside their familiar places, social networks and comfort zones as potentially unsafe rather than being neutral or potentially safe. Children and young people believed that this changed as they developed and could see they were less frightened of 'unknown things', and more concerned about things they had seen or experienced that they knew were unsafe. They recognised that although many of the risks and dangers they perceived might exist did not actually exist, they still felt they had to be vigilant of things that might harm them.

Familiarity was equally important when it came to considering who safe and unsafe people were. Children and young people in four groups, for example, reported that all adults and peers were unsafe until they got to know them and trusted them. In some cases children and young people felt that if trusted others (such as parents, friends or older siblings) vouched for a particular person, they were likely to feel safer.

'I think that if your parents trust them, they're probably OK. I mean you'll still check them out but you don't have to be as worried if someone you trust trusts them.' (YP-3)

Children and young people in each group identified adults who were different to them as being unsafe. People of different races, religions and living in different areas were often considered to be less safe than adults who shared these characteristics with children and young people. Participants often talked about people from other communities (i.e. white children identified Aboriginal or foreign people, Aboriginal children identified white adults, country dwellers identified city dwellers and seasonal itinerants like cherry pickers, and Catholic students felt that students from public schools were unsafe).

Young people believed that they were less concrete in their thinking on this. In a number of the groups, young people raised concerns about the way that younger children assessed risk based on people's appearances (such as having tattoos, earrings and wearing ripped clothing). They felt that sometimes children judged adults unfairly because the children had been told that particular types of people were unsafe, even though they weren't necessarily a risk.

'It's not that black and white so you can't tell little kids not to trust people who look a certain way because they'll take it literally', 'like not everyone who has tats is unsafe', 'and they'll think that because you didn't tell them about a certain type of person that they'll think that that person is safe.' (YP-1)

Similarly, they reported that sometimes children might wrongly assess someone as being safe because they look familiar or because they didn't fit the profile of the 'dangerous person' that they had conceived based on looks.

4.4 Safety and power

Children and young people often talked about safety in relation to the power that they did or didn't have at different times. They identified bullies, older teens who used their physical power to intimidate or hurt them and adults who used their power to belittle them as being significant threats.

'Adults might use their power against kids, make them feel small or stupid or whatever.' (YP-3)

'Adults can do whatever they like and you can't challenge it.' 'Yeah, some adults can be on a power trip.' (MX-2)

In addition to bullies, young people in three of the groups identified peers who intimidated them or others as threats. They suggested that girls, in particular, were at risk of sexual and relationship-based violence. This was most apparent in the groups with older young women, young people in out-of-home care and young Aboriginal students, and it appeared to be based on their exposure to harassment. In four of the groups, physical or sexual harassment (in addition to bullying) were identified as being serious and likely to occur; however, only one of the groups chose to specifically explore the issues in detail.

Children and young people's discussions about power generally related to their relative powerlessness compared to adults. They felt that children and young people were vulnerable without having choices, physical strength, respect and processes that allowed them to regain some power within relationships. In each of the groups of older children and young people, participants reported experiences when adults had been on a 'power trip' and had physically or emotionally

threatened them. Many appeared to see this intimidation as inevitable when they spent time with groups of adults and something that they believed other adults would rarely challenge.

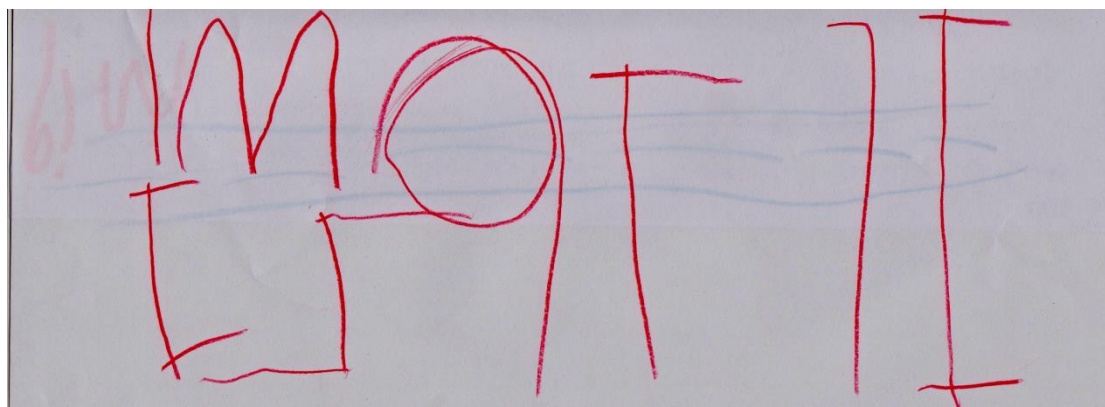
'Adults won't usually stand up against an adult bully. Maybe it's because they don't see it as a problem or maybe because they don't want to get caught in the middle of it. I think people think it's OK to intimidate a kid, particularly if it's so they do something that people think is good for the kid. But that doesn't mean that it's OK.' (MX-1)

When asked to identify what it felt like to be hurt or to be in an unsafe situation, many of the groups identified powerlessness. In some situations this related to a lack of control: when the child or young person couldn't leave an unsafe environment, when they felt that they couldn't change the situation, and when adults or older young people used their power to intimidate them. In other situations, it related to them feeling weak and vulnerable. These feelings of powerlessness were exacerbated when, after telling adults about their problems, their confidants either tried to downplay the issue (making them feel stupid or unappreciated) or by taking control without giving children a say or a chance to resolve the situation themselves. This will be further discussed in Section 7.5.

4.5 Safety within environments

Children and young people spent some time considering what made particular places and spaces safe and unsafe for children. Pre-schoolers focused primarily on three key themes related to safety: staying physically safe, road safety and personal safety.

The pre-schoolers discussed physical safety at length, drew pictures and discussed staying away from 'dangerous' situations, including sharks, fire, monsters, lions and crocodiles. These were some of the initial notions of being safe – in fact the consensus was 'Stay away from everything dangerous.'



This writing says, 'Stay away from everything dangerous.' (IN-1)

Road safety also featured in many conversations and, again, conversations and drawings indicated that the children knew quite a bit about how to cross roads and walk safely to kindergarten (the year prior to school). This is not surprising as road safety was a regular discussion at the centre, and could be attributed to the many posters and resources in the rooms that spoke to road safety.

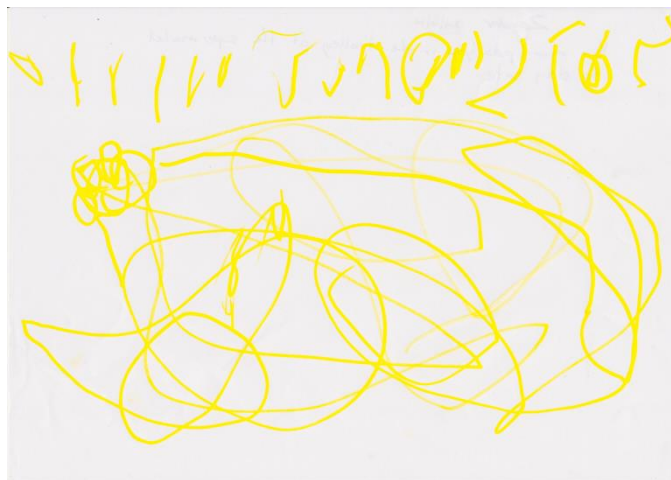
'Any kids stepping outside near the road could get really, really hurt.' (IN-1)



'It's dangerous for kids to go near the road.' (IN-1)

Being safe at home, or with parents, was of particular interest to several children. Many spoke of making sure the doors and windows were locked, of being tucked up in bed as a safe place or under the couch (hiding from monsters). One child in particular returned to this topic each time the researchers spoke to her:

'For kids to stay safe they need to stay inside with their mum and dad.' *'You must listen to your mum and dad.'* *'Your mum can put you in the trolley at the supermarket to keep you safe.'* (IN-1)



'These are my words at the top and this is me in the trolley [see above] ... Can you see the wheels go around?' (IN-1)

When asked what things determined whether a place was unsafe, children and young people most often talked about the purpose of the place, who was in it, what people were doing, what unsafe things were in it and whether it was child-friendly. The key elements are summarised in Table 2: What makes an unsafe environment?

Table 2: What makes an unsafe environment?

What is its purpose?	What's in the space?	Who is in the space?	What are people doing?	How does it look?	How does it feel?	Is it child-friendly?
Not for kids (i.e. pubs) For 'other' people: housing estates etc.	Dangerous objects: glass, needles, dangerous animals etc.	No trusted adults	Everyone looks scared	Messy	Scary	Nothing bright or welcoming
		Unpredictable adults	People are loud and violent	Disorganised	Uncomfortable	No sign of other kids having been there
	Adult things: alcohol, poker machines, smoking	Unsafe adults	Adults are acting weird	Broken things	You don't know how to get out	Nothing for kids to do
		Unsafe teens	Adults are acting weird	Lots of shadows	You're not supposed to be there	Other kids tell you not to go
	Things that could hurt kids (cars etc. on road)	Too many people: easy to get lost	People are fighting	Hard to get out	Exciting/thrilling	Nothing to show that kids feel safe there (paintings, smiley photos etc.)
		No one to protect you	You don't know what people are doing or why		You don't want to be there	
	Scary things: dogs, ghosts	Hardly any or no children	You're going to get hurt (i.e. hospital) You've got no choice/control Potential for bad things to happen (like being abused in public toilets)			

NOTE: Children also were afraid of 'other' places: foreign countries, different cities, different schools etc.

4.6 Safe things

Children and young people were asked to identify things that were safe or helped kids feel safe. Their responses often fell into one of two categories: things that acted to protect them from harm and things that provided them comfort when they were unsafe.

Protective ‘things’ were those things that children and young people looked for when entering a new space or situation, which could reduce their concerns. These included locks on doors, gates around schools, security cameras and instructions on what to do in unsafe situations. Sometimes these ‘protective things’ were items that they could take with them to a situation – including knives and weapons (which they reported they rarely had on them), but more likely included mobile phones or change to use a payphone to contact someone who could come to their aid.

Children and young people also identified things that helped ease their discomfort, fears or concerns. Many talked about stuffed animals, items that reminded them of people who loved them (like photographs, gifts or mementos) and safety blankets.

‘[It might be] like a little icon from a family member, like a photo or something that’s special?’ ‘Is it because a part of that person is in that icon, that you’re reminded of them and that makes you feel safe?’ (YP-3)

Further detail can be found in Attachment 5, which summarises children and young people’s thoughts about what ‘safe things’ are.

5. What gives rise to these perceptions?

'Adults and youth think about different things when they're trying to work out what's going on. I think adults make a quick judgment while we watch, look out for things more. Adults probably have more experience so they can decide quicker but that doesn't mean they don't make mistakes. Maybe because we're watching we see things they don't see.' (YP-4)

Children and young people were asked to reflect on how they determined what was safe and what wasn't, and to consider how this changed over time. Participants believed that they often based their assessment on their gut feelings, on what they had heard from others, what was reported in the media and things they had learned in educational programs.

5.1 Their own 'gut feeling'

In each of the focus groups, children and young people talked about having a 'gut feeling'. They were often aware that they were reacting to a particular person, place or thing. They were aware that sometimes they 'got it wrong' but said they often relied on their physical sensations.

'You've got this gut feeling; you can tell when someone's not right.' (YP-3)

'You can tell by your body. Like when you're nervous and that.' 'You get all sweaty', 'you start to eat a lot', 'you start to do things quickly, you can't think straight', 'you start trembling, you act all nervous', 'you respond badly to something or someone.' (CH-2)

'You kind of just know.' 'Yeah it might be in your gut; you might feel it and you don't know why because your brain isn't saying that you're unsafe but your body is.' (MX-1)

In some groups, participants noted that you could judge whether something was harmful based on how you felt after you had experienced it, rather than during the encounter. They noted that sometimes it was OK to be unsafe but they would judge this after the fact.

'There's a certain point when your life is in danger, when your adrenalin is pumping, when there's no restrictions and when you could die or be hurt real bad. There's a point before that when you might be excited but when things won't be that bad, when you won't really be hurt.' (CH-2)

Participants had a variety of theories about how they developed their 'gut feeling' and that it was informed by a number of things.

'You see things on TV', 'you understand things as a whole', 'you become more educated as a person', 'you might be part of a situation or see a situation and so you can put it in perspective. You probably see things that are more risky that kids don't see but don't get worried about things that might scare kids because you can put it in perspective [based on your experience and knowledge].' (YP-1)

Participants in five of the groups discussed how it was hard to explain their feelings to adults or to convince them that they were unsafe based on their body's response to a situation, person or place. Some participants felt that because adults relied less on their gut feelings and more on their thoughts, adults were unable to appreciate children and young people's concerns. There was a view among participants in five groups that adults should take children and young people's physical feelings seriously because they believed that 'your body's reaction is almost always right'.

When talking about coming across a ‘creepy teacher’, one group of young people commented that they had raised their concerns with another teacher who dismissed them, because they could not identify concrete examples of things the teacher had done to make them feel that way. This ‘creepy teacher’ was later dismissed because of inappropriate behaviour and they voiced their frustration that their complaints were not acted upon.

‘They need to trust our gut feelings because it’s real’, ‘and even if it’s not, if a kid feels unsafe adults have to take notice because it’s real to them.’ ‘Yeah adults shouldn’t ignore it or say “don’t worry, settle down” just because it’s a kid.’ (YP-2)

In a number of situations, participants felt that children and young people were better at picking up on their feelings than adults. They conceded that children and young people were often more scared than adults and that they were more likely to be afraid unnecessarily, but at the same time, they felt that adults were more likely to feel safe and may be less likely to pick up on things that children would pick up on.

‘Maybe kids get scared easier. When you’re an adult things don’t seem as bad ... So maybe you don’t look out for things as much. Kids are always on the lookout ... Adults often miss things ... If [an unsafe adult] comes out of the shed with a chainsaw, maybe they’ll notice [but otherwise they wouldn’t].’ (CH-2)

5.2 Previous experience

Children and young people who had experienced unsafe situations or people often drew on these experiences when determining whether someone or something was safe or not. Young people believed that because they had more life experience than younger children, they were more likely to judge a situation based on the threats they had previously encountered, the impact that the threat had had on them and how they had managed them in the past. Without this experience, they believed that children were more likely to base their assessments on what they felt.

Children, however, reported that if they had negative experiences in the past they were more likely to be worried that similar things would happen again. Two groups said that ‘ignorance is bliss’ and that children might feel safer in both safe and unsafe situations.

‘When they were little there might have been a dog that looked at them or barked at them or whatever and they remember that.’ (CH-2)

‘We are more likely to have experienced it ourselves rather than just heard about it.’ ‘We’ve been through it so don’t worry cause we know we can get out of it.’ (YP-4)

‘If you’re brought up surrounded by strange people then that’s a normal day to you. You wouldn’t worry about the things that others who haven’t would.’ (MX-2)

A number of young people felt that children assessed risk based on what they thought was ‘normal’: that children felt uncomfortable when things were worse than usual and would be motivated to seek support during these times. However, they remarked that children who were surrounded by risks all the time would be less likely to experience similar discomfort and would therefore be less likely to seek support.

One participant said that children and young people were like frogs that were placed in cold water on a stove. They believed that the frogs wouldn’t realise the water was getting hotter if it was heated slowly and gently and that they would stay in the pot until they boiled to death because they thought things were ‘normal’ and not dangerous. If they’d been thrown straight into the hot water,

however, they would have jumped out immediately because it was so different to them and they could perceive that things were unsafe. Participants in that group suggested that if children and young people were surrounded by danger or lived in unsafe situations for extended periods of time they would normalise the danger and not 'jump out' (or seek help) because they didn't register the risk the way that children would otherwise.

They also suggested that if they raised minor concerns with adults who failed to appreciate them or respond to them, then children would be less inclined to see future problems as issues or seek resolution to their problems as things got worse.

Children and young people in the young carer, Aboriginal and out-of-home care focus groups reported specific needs and issues related to their experiences within systems. Young carers, for example, reported that they had less confidence in medical staff and within hospital settings than other children and young people, an assessment that was based on times when they had been let down by people and institutions in the past. They reported assessing people and places on the way that children and young people (and their families) were treated and reported a heightened vigilance about signs of disrespect or neglect.

Similarly Aboriginal participants reported a heightened sensitivity to issues of race. Although a number of other groups mentioned racism as a key issue, children and young people in the Indigenous focus group felt that it was an issue of high priority and one that wasn't being dealt with effectively within institutions or the broader Australian community. Participants in that group felt that Aboriginal children and young people were more likely to experience unsafe situations because they were more likely to be targeted by racist people and were more likely to be untrusting of adults based on the experiences and things that they had heard from their families and peers. They reported that, generally, they had less confidence in non-Aboriginal people and their attempts to keep children safe. This perception is based on their experiences of racism and a distrust that they had gleaned from trusted others.

Finally, young people in out-of-home care reported that children and young people who had been involved in the care and protection system were more likely to have been hurt by adults and to have been let down by adults and systems than other children. They believed that this led them to a point where they had little faith in adults and assessed people and organisations more critically than their peers.

Interestingly, children and young people from these groups who had been in unsafe situations in the past and had been protected or who had successfully navigated the threat reported that they felt more at ease. They felt that this was because they were more likely to feel as though they could manage the situation or because they had faith that successful interventions could be put in place – as they had been in the past.

5.3 The way that others behave

As noted elsewhere, children and young people often talked about taking cues from others to determine whether something was safe or not. They watched to see if their peers, in particular, looked uncomfortable or were hesitant in the way that they related to others. Although they often trusted others' accounts (particularly parents, teachers and trusted adults), they did reflect that they only felt safe when they had assessed the risk themselves.

5.4 Stories they've heard

Participants reported that they often drew on what they had heard from their parents, siblings and peers about particular people, places and activities when assessing risk. They contended that this sometimes led them to the wrong conclusions, particularly if they had misunderstood or misheard stories, if they were folklore, gossip or rumours, or if others (particularly older siblings or other young people) had told them the story to scare them. Conversely, some did recount times when they had been told that someone, somewhere or something was safe, when it turned out to be unsafe.

'You hear things: from your siblings, from your friends, from adults when they think you can't hear.' 'Siblings tell you stuff to freak you out and sometimes you haven't heard things right but you know about stuff.' 'Most kids know when things aren't right. They've heard something.' (YP-4)

5.5 The media

5.5.1 Movies and TV shows

Children and young people often felt that movies and the media presented them with images, stories and ideas that made them feel unsafe or uncomfortable. Although they were increasingly aware that these threats were imaginary, they did give examples of when they 'freaked themselves out' by relating a safe person or situation to something they'd seen on television.

'Kids, they see things [on TV] that make them scared. They don't know if they're real.' (YP-4)

'A seven-year-old sitting in the car or watching TV shouldn't be exposed to that. You just asked about when we should talk about that stuff but it shouldn't be that young, not at that age ... Parents should put locks on the TV on stations their kids shouldn't be watching.' (YP-3)

5.5.2 News and current affairs programs

In a number of the focus groups, participants reported that much of what they knew about risks and danger was gleaned from things that had been seen on the news or on current affairs programs. The issue that many had with the reporting of such risks was that they did not report the extent of the issue (how likely it is for everyday kids to experience kidnapping, child abuse, cyberbullying or bashings) or the ways that adults in their local community were managing the risk.

As such, children and young people were made aware of the issues and problems but not about how they were being kept safe or how they might deal with an encounter in the unlikely event that it occurred. They felt that this was dangerous and made children and young people unnecessarily scared.

'I think that shows like Today Tonight raise people's fears without the evidence and everyone, including kids, get scared.' (YP-1)

'[Children] base [their assessment of risk] on what they see on the news and it's only bad things on the news. Bad things or the royals.' (YP-1)

5.6 Things they have been taught

Children and young people shared examples of threats that had been discussed with them by parents, teachers or other trusted adults. In each of the groups, participants reported both examples of times when they had encountered unsafe adults (particularly those who had come on to school grounds or who had followed children home) or when adults had warned them about unsafe people in the vicinity (like adults who had abducted children or who posed a possible threat). In these instances, adults had raised children's awareness of these risky individuals and given them advice on how to avoid them. Young people reported that these discussions were most often targeted at children and that it would be helpful for them to have similar discussions based on new threats, such as harassment by peers or adults taking advantage of them.

'It covers a big range of things, trust; you have to have a lot of trust in someone to ensure that they don't take advantage of you in any way.' 'For younger ones we don't know as much about it, what you should expect or how you can protect yourself. We worry about that because it's all unknown.' (YP-3)

Children and young people also acknowledged that they had participated in Protective Behaviour classes at school, particularly in the younger years, and cyber safety lessons in high school. Young people felt that these sessions were helpful in early years but needed to be repeated and made more appropriate to students as they got older.

5.7 Difference in perception

Children and young people were asked to identify ways in which individuals of different ages, genders and backgrounds might determine what is safe and what is not, and to provide examples.

Young people believed that younger children generally assessed risk based on what was immediately in front of them, whereas they placed the risk in context and related it to past experience. They felt that younger children were more likely to base their fears on what was imagined or how they felt in the moment but were more likely to take adults' guidance in relation to what was and was not safe. They were concerned that adults often didn't appreciate the extent to which kids worried, and saying things like 'don't be silly' or 'that's just imaginary' didn't acknowledge children's fears. They also felt that younger children were more at risk in that they were more likely to trust unsafe adults and, due to their smallness, feel pressured to do what adults told them to. Young people provided this view:

'Not everything they fear is imaginary. That's what parents get wrong. They think that 'cause they're little they're not telling the truth or they've imagined it but most of the time they're telling the truth but people don't believe them because they're little. And anyway it's real to them so adults should listen.' 'They need to understand their child and accept what they're saying', 'instead of just hitting them because they think they're lying', 'trust their kids, try and help them through it.' (YP-4)

Older children felt that teenagers were more likely to put themselves at risk because they enjoyed the thrill, while children their age were more cautious.

Young people agreed, observing that people their age often sought out thrilling experiences and noted that being unsafe was a key aspect of this. They recounted situations where they were dared to do things, such as entering 'haunted houses' or construction sites, or to play on railway tracks, and recognised that the 'rush' that they experienced, as well as the validation of their peers, played a part in this risk-taking.

'Sometimes it can be thrilling to do something that is unsafe', 'like when you're trying to impress people', 'when you're trying to go your own way and be more independent from adults', 'when you're with the wrong crowd.' (YP-2)

Young people felt that they were less likely to seek out adults to get help than children, and were expected (and had expectations) to deal with issues themselves. In most instances they believed that they had the skills to do so but that it was still important for adults to be accessible to them when necessary.

They argued that there were some 'big' issues that they felt they should be able to talk to adults about but would not do so for fear of the consequences.

'There's lots of things that young adults will never talk to adults about – like being pressured into sex, or being homosexual, or their worries – because they know they're going to get judged or because it will be too uncomfortable or because they don't know that anything good is going to come out of it.' (YP-3)

Young people, mostly young women, in four of the focus groups believed that young men were more likely to take risks but less likely to worry about safety issues. Young women were seen as being more at risk of being pressured into doing something they didn't feel comfortable doing, and due to their relatively smaller frames were less able to protect themselves and more likely to feel unsafe.

'They're more reckless', 'boys are bigger and stronger', 'they don't really care as much', 'they don't think as much, they just do it while girls will stop and think about it.' 'Boys are able to stand up for themselves while girls think "if I got stuck I don't know if I could protect myself".' *'Boys don't think about what could happen after they've done it; they just think about what's going on right now.'* *'If they're unsafe at home it's not usually their fault', 'but if they are around it they probably know how to deal with it better than girls, can stand up for themselves better.'* (YP-3)

Young people felt that young women were more likely to be unsafe and that young men were more likely to place themselves in unsafe situations. They did note that boys were more likely to be 'picked' by other boys for fights and may be more likely to be attacked by angry adults but also felt that they were more likely to be able to deal with these encounters.

Children and young people often believed that adults primarily assessed risk based on their own experiences as children. This, they believed, meant that adults would minimise children's concerns rather than recognising that what children experience now might be different from what it was in the past. They stressed that adults needed to be better informed about what was going on for children these days rather than relating everything to their own past experience.

Participants also believed that adults were often over-protective or over-cautious, particularly on issues related to things they may not understand, such as the internet and social media. Children and young people contended that these media carried some risks but believed that they weren't as risky as adults perceived them to be. They also believed that young people had skills (which were better than adults' skills) in managing these risks if they were to occur.

'Sometimes adults say that the internet isn't safe but it really [is]. People can't really reach you on the internet – well not really – even though adults think they can. We've got control over it and we're better at [looking after ourselves] than adults think ... We don't see it as much of a threat.' (YP-2)

'We're safer than their generation. They might click on something on the iPad and go somewhere they shouldn't go but we're used to using it and know what we're doing. We know what will happen if we do something when they mightn't just because they haven't used it as much.' (YP-2)

'Your parents always ask you, "What's this?" because they haven't come across it before. I know that I'm safer on the internet than they are and safer than what they think I am because I know what I'm doing.' (YP-3)

Some participants thought that adults (and some older young people) were more anxious (and over-protective) of children because they were more aware of the risks than in previous generations. They felt that this led to children and young people having less freedom than before. This was a problem for many of the older young people who felt that younger children were spending too much time inside watching television and playing computer games because adults didn't trust that they would be safe outside the home. At the same time though, they had the idea that adults spent less time with children these days than adults had in the past and that children were less safe and felt less cared for than before.

'I think they overthink too much. They always think about the bad stuff and when they think about when they were young they only think about the bad stuff not how they were always safe... And they see stuff on the news, and it's all about the bad stuff and they get over-protective.' (YP-1)

When asked whether they thought they would be more or less protective than their parents when they had children of their own, young people suggested that they would most likely be more concerned about their children's safety but give children more of a say in how things might be dealt with.

6. What makes an institution safe and feel safe?

'The world is unsafe for most kids, well that's how they feel anyway. So if you're going to make it safe you've got to make them feel OK... You have to ask them what worries them and fix that.' (MX-2)

In the second focus group, participants were encouraged to consider their experiences of safety within institutions. Children and young people most often chose to consider these experiences in the context of school but also talked about hospitals, church and youth groups, holiday camps, sporting teams and other places where children and young people spent time.

When asked, children and young people reported that they were mostly engaged with schools and sporting groups. However, some had involvement with school holiday programs, hospitals, after school care and, for a small number, residential and out-of-home care.

In these environments, children and young people most often raised concerns related to bullying (by peers or by adults), of coming across 'creepy adults' who could hurt them or make them uncomfortable, being pressured into doing things they didn't want to do (that had negative consequences), of being hurt because adults weren't doing their job or of the institution failing to protect them from external threats (such as kidnapping, road accidents or violent strangers).

Most participants reported feeling safe in their schools but talked about experiences they had at their current, previous or other schools that were unsafe. Children and young people voiced a general lack of faith in adults' and institutional responses to bullying – an issue that is of major concern for participants in each group. Participants appeared to base their assessment of how they thought adults and institutions would respond to their safety concerns (including child sexual abuse) on their observations about the way that adults and institutions responded to bullying. To feel safe from child sexual abuse and confident in their protection, it appeared to be the case that children need to have confidence in adults' ability and willingness to deal with other equally important issues which were more likely to occur. As discussed previously, children and young people said that they could often determine whether a place, person or activity was safe based on how they felt and how other children and young people were behaving, which they saw as a reflection of their feelings. They reported that they could tell if a school was safe, for example, if children in that school looked relaxed and happy and were not acting erratically, displaying signs of discomfort or fear, or acting in unsafe ways.

'The kids would be like all calm, the teachers are like nice and if you need help and stuff there's someone to help you.' *'Kids are excited to come to school every day and they don't feel down and they feel happy and they always say they're happy chappies.'* *'If they are grateful for being at a good school ... they are even happy to walk a long way to get to the school.'* (CH-1)

Similarly, they often relied on their 'gut feelings' to determine whether an adult was safe and watched to see how other children and young people responded to that adult.

Participants generally agreed that institutions were safe when a number of conditions were met. Being able to see how these institutions were demonstrating these conditions was seen as crucial in helping children to not only be safe but also to feel safe. This was because children and young people felt that they had to feel safe to be safe in institutions.

These characteristics most often referred to the organisation's purpose, the environment, to the people and to the practices that were in place. These are listed in the following box.

KEY FINDINGS: What makes an institution safe for children and young people?

- Institutions that have a focus on helping children and young people (and actually do) are considered safer for kids than those that don't.
- Safe institutions value children and young people, their views, perceived needs and ideas about how to respond when they are unsafe. This requires adults to believe in children and young people's competence and recognition that often the best solutions are generated together.
- Safe institutions provide environments that are safe for children and young people and help them feel safe. They protect children and young people from external threats while fostering a culture of safety.
- Children and young people often identify safety issues before adults do and might help to resolve them earlier, if appropriately engaged. To enable this to happen, institutions need to value children and young people and their observations, trust them and respond in a timely manner.
- Safe institutions are aware of the things that are unsafe for children and young people (including child sexual abuse) – often by speaking with children and young people. They actively prevent children and young people from being exposed to people, experiences and encounters that place them at risk of being hurt or sexually abused.
- Safe institutions employ staff who: take responsibility for keeping children safe and respond to their safety concerns, are considered trustworthy by children and young people, know what to do if a child is unsafe and act on children's concerns, and are accessible to children and young people when they need them. There may be some value in inviting children and young people to select staff and provide feedback on their conduct.
- Safe institutions are open to external scrutiny and allow ongoing monitoring.

6.1 The institution has a focus on helping children and young people

Children and young people often had faith in institutions, particularly those whose purpose was to care for children. When asked, children and young people identified schools, early learning centres, youth services, churches and family programs as those that specifically helped children. This was often because children believed that safe adults who monitored their peers and stood up for children when they had concerns would soon discover unsafe adults.

'If they're like teachers or youth workers or whatever they're more likely to be focused on the kids and will be able to pick up when something's not right.' (MX-2)

A few, however, realised that some adults pretended to be safe in an attempt to manipulate or hurt children. These children and young people seemed more sceptical about adults and their intentions.

'Some adults act like they're your friend or they're good but all they want to do is hurt you. That's why I don't trust adults.' (MX-2)

Most participants recognised that institutions that cater for children and young people, such as public libraries and pools, were not always child-friendly, and children did not always feel safe there.

'Public libraries are safe for kids because they are set up for kids and kids are familiar with libraries ... They would probably go there if they were getting hassled on the street or scared they were going to get taken or something.' 'Yeah but not all libraries are like that. The ones where kids aren't allowed to talk or lie around or whatever and where the librarians are just telling them "shhh, be quiet or get out", they don't feel the same, you know. Kids wouldn't go there, feel safe there and anything could happen.'

 (YP-2)

'Yeah pools are supposed to be for families and kids but youth always get hassled out there.' 'We're seen as being bad ... No one gives a shit about us and would probably prefer that we left ... If we weren't paying to be there [they wouldn't want us there at all] ... If something goes down the pool will always take the adults' side because they automatically think that we're doing the wrong thing. So if we were like bashed or something I doubt that they'd do anything and as if someone's going to go and ask for help if the lifeguards have just been hassling you out. Nah, pools aren't there for us even though that's where we go.' (YP-4)

Participants recognised that although an institution's purpose might appear to be about helping children, this was not always the case. For example, participants in four groups (including three groups of young people and one mixed) identified hospitals as an unsafe place for children – because they associated it with pain, a lack of control and felt that the sterile environment was not child-friendly.

'From a child's perspective a hospital is not a safe place. It's not somewhere they feel good or that's kid friendly', 'plus they watch TV that always has hospitals as a bad place; they're made out to be bad.' 'Kids don't understand what's happening and they think the worst, get worried about things that won't happen because they just don't know what to expect', 'plus it's cold and smells weird and they don't let kids play or laugh or make any noise so kids don't like it.' (YP-3)

'Doctors don't talk to kids because they think we won't understand so you spend all your time freaking out and feeling dumb because the doctors treat you like you're dumb. Hospitals aren't places for kids because even if it's the kid that's sick the doctors are there to fix you not to treat you like a human being. I wouldn't say that hospitals are safe for kids at all – like you're not going to get abused or anything there so it's not unsafe but still it's not a place where kids feel safe.' (MX-1)

Conversely, they observed that some adult-focused institutions could easily be transformed into child-safe organisations if their staff interacted with children and if there were things in the environment (such as games and play equipment) that were child-focused.

'Hospitals could learn from Maccas. Kids love going down to Maccas 'cause they can get a Happy Meal but more because they can like play in the playground and stuff. If hospitals had those, kids would feel better there, like they belonged.' 'That's it, hey; kids don't feel like they belong in those places and adults don't treat them like they belong.' (MX-1)

Further detail can be found in Attachment 5, which summarises the ways in which institutions demonstrate their commitment to helping children.

6.2 The institution values children and young people and their participation

In four of the focus groups, children and young people made the point that they believed that children would continue to be bullied, abused and remain in unsafe situations unless the broader community and the institutions with which children interacted valued children more and took their needs and views more seriously.

Participants believed that safe institutions not only valued children but also their views and wishes. They felt that these organisations had mechanisms through which groups of children and young people could identify issues, raise their concerns and have a say in how the organisation dealt with their safety concerns. In the school context, participants in two groups thought that Student Representative Councils (SRCs) might provide leadership teams with ideas about the things that

concerned children and young people. Participants in both of these groups identified themselves as members of their school's SRC and believed that these councils had some influence on issues related to the way that schools functioned. However, members of these groups agreed with participants in three other groups that these mechanisms could be better used by schools that, they believed, did not talk to children and young people about issues related to safety and sexual abuse or engage them in discussions about how approaches could be improved.

Young people strongly believed that schools, and other organisations, needed to explicitly ask children and young people about any concerns they might have, rather than wait for children and young people to initiate conversations themselves. In some instances this was because young people often believed that adults were aware of issues already and were surprised when this was not the case.

'You think that adults must surely have heard something if you have and that they're dealing with it.' 'You know we're used to not being told about things so you just assume that they're dealing with it but haven't told us ... [but] it turns out that sometimes they have no idea ... They're clueless', 'so maybe we need to tell them more and not assume so much and they have to ask more, even when they think things are going OK.' (YP-1)

Participants also suggested school surveys, class discussions and workshops. They felt that these should be conducted not only when safety issues were raised but at other times as well. One group argued that as well as providing the institution with a sense of what safety concerns existed, children and young people would see that adults were keen to talk to them and may be more likely to raise their concerns as a result.

'Every school should do what we just did [in the focus group]. Talk about what risks there are and if it's a big risk and what's been done and what we think should be done. How else can they find out what young adults think and how can we hear what's been done?' (YP-3)

'Kids will see that adults want to hear from them and if something was wrong they might come forward because they know that adults want to know and are taking it seriously.' (YP-2)

When asked to identify the elements of effective participation, participants identified the following:

- Children and young people are regularly asked about their fears and concerns.
- Both formal and informal mechanisms are used to allow children and young people to talk about their safety needs.
- Adults work with children and young people to identify solutions as well as problems.
- Adults inform children and young people of how they have used their ideas and wishes in responding to safety concerns.

Participants sometimes felt that their involvement in existing structures was tokenistic and did not lead to demonstrable change. They voiced their frustration and believed that adults needed to take their views seriously.

In two of the groups, participants called for organisations to have processes in place for children and young people to complain about their treatment, and to inform them what responsibilities institutions had in responding to their concerns.

6.3 The institution provides a safe environment for children and young people

As discussed previously, in conceptualising safety participants talked about the importance of the physical and social environment within and around institutions. They felt that safe places were organised, clean and tidy, and children and young people could see the things that suggested they were safe there. For example, gates, locked doors and security cameras all suggested to children and young people that adults were aware of safety issues and had things in place to reduce risks.

One group of young people did remark that such things could also be used to make young people uncomfortable: if they were about locking young people out, putting them under surveillance or generally communicating that they weren't welcome there. These young people reported that if they felt they weren't trusted, they didn't feel safe.

Children in the younger and mixed groups felt that institutions that were child-centred were most often characterised by things that made children feel 'at home', and in doing so, more safe. Examples included having toys, games, play equipment and other things for children and young people to do. Children identified that having photos of smiling children on the walls made them feel comfortable because they could see that other children were safe there.

'If you can see that kids like being there, they're happy, they're not out of control, they're respectful then you know it's probably safe... You can tell by how kids act there.' (CH-1)

Children and young people in each of the groups identified safe places within institutions where they would go to seek respite from the worries and concerns that they encountered. In two of the groups, participants called for a place within the institution (like a sick bay or a 'time-out room') where children and young people could go to escape bullying and other unsafe peers or adults. They believed that if the child or young person felt comfortable in seeking support, this place would provide shelter and respite from their concerns.

6.4 The institution proactively protects children and young people from unsafe people and experiences

Children and young people felt strongly that it was important for adults to be vigilant about safety issues and to take responsibility for responding early. Participants felt that institutions were safest when they had a good understanding of the risks for children and young people and had developed strategies, both for keeping kids safe and responding when they weren't.

6.4.1 The institution identifies issues early

Children and young people in seven of the groups thought that adults would most likely be unaware of children's safety concerns unless children were to raise them with the adult. They thought that this needed to be rectified, recognising that adults were often in a better position to see whether a perceived risk was real and to respond to the issues quickly.

'Adults have to watch kids more. Not be so caught up in their own little world. If a kid changes then they should ask, ask the kid's friends, find out what's going on. That's their job. They shouldn't wait until the kid says something because that's going to be too late.' (YP-1)

In the small number of groups where participants felt that adults were good at identifying issues, children and young people believed that adults knew them well enough to know when their

behaviours had changed and when things were not right. They felt that all children should have adults in their lives like these people.

'I reckon the teachers are mad here. It's like we're all family. They know about you, how we react. They don't have an attitude.' 'If our attitude changes they know about it. They keep an eye on you.' 'All kids need that, hey!' (YP-4)

Participants in a number of groups believed that adults were sometimes unaware of issues because they too easily trusted their peers and weren't vigilant about safety concerns.

'Sometimes adults don't know that you're being harassed because it's like a trusted adult and no one believes you or like they don't watch out for it because they would never think that they would do that to you, they don't want to think that it's possible. So they don't watch out for it and if you tell them that something's not right then they'll think you're making it up or stirring up shit even though it's real.' (YP-4)

Children and young people talked about the need for institutions to not only respond to their safety concerns but also to identify, prevent and ameliorate safety risks before they become an issue. Participants felt that the way institutions deal with small issues would determine how much confidence children and young people would have in the institution responding to more significant concerns.

6.4.2 The institution is informed

Participants felt that it was important for institutions to be attuned to the safety issues that children and young people might encounter. This required them to 'do some research' about some of the things that worry children and investigate whether there were real threats in the institution and the environment around it. In particular, participants felt that it was important for institutions to talk to police, to local services and to young people themselves about things that have been reported in the area.

Children and young people also thought that although adults often had ideas about how they might best respond if they encountered an unsafe situation (like 'creepy' people being on the grounds, adults acting inappropriately or children disclosing that they had been abused), they felt it was important for adults to be up to date on the best ways to protect children in these circumstances. This would be through training, reading research and having conversations with experts about how to best deal with situations.

'They need to know what procedures that they have to follow to do the right thing.' 'They probably don't know what to do. They probably just freak out so much and don't know what to do so do the wrong thing.' 'They need to research so that they know what to do if that situation happens.' 'They need to know that some things don't work. Like saying some things or doing some things are wrong.' (YP-3)

'Some things make it worse. They need to know that.' 'It's about knowing what to do and feeling confident in that.' 'It's about knowing what not to do: like blaming the kid or asking questions like: "Did you do something for them to act in this way?", "Is it something that you said, something that you did?"' 'If you do the wrong thing you can really affect the kid. Make it worse. Like they don't trust anyone anymore ... It changes the kid.' (YP-3)

6.4.3 The institution tells children and young people how adults are dealing with risks

Children and young people reported that even when they encountered unsafe situations, if they knew how adults were going to respond and had faith in these responses, they were more likely to feel safe. In four of the groups, for example, children and young people reported that they felt less anxious about the threat of being kidnapped or attacked at their school because their school had a system in place (which they had practised) where an alarm would sound, they would go to their classrooms and the school leadership (and police) would respond.

As such, they reported that it was important not only for strategies to be in place for keeping children and young people safe and for responding to threats, but also for children to know about these strategies and to see them in place.

‘Knowledge – knowing what is being done if something dangerous has happened. Like if there are strangers in the area knowing what your teachers and adults are doing makes you feel more safe rather than just knowing something bad is happening and worrying that you’re in danger.’ ‘But adults don’t always understand this.’ ‘They think they should hide that stuff from kids to keep them safe but you feel more scared if you don’t know what’s happening.’ (YP-2)

6.4.4 The institution actively communicates with children and young people about risks and their safety concerns

To be safe, participants felt that children and young people needed to know more about risks, the ways that adults were attempting to keep them safe, and the ways that organisations were responding when they were harmed. Participants in each of the groups believed that in an attempt to shelter children and young people from knowledge that might worry them, adults often ‘shut kids out’ of important discussions and failed to provide them with the information they needed.

When these conversations were not had, children and young people were more likely to believe that adults were not aware of issues, or did not appreciate the gravity that children and young people placed on them.

‘If they’re old enough to understand it they should be talked to about it.’ (YP-4)

They were wary of approaches that attempted to scare children and young people rather than give them enough information to be able to assess risk themselves.

‘It’s good that kids are aware rather than being scared ... I think we scare kids about these things too much ... Raising awareness is good, just not traumatising them because that’s not.’ (YP-3)

In a number of groups, participants believed that adults needed to be appropriate in what they provided to children and young people, and thoughtful about how it was presented, but felt that it was important for adults to be more frank about current situations. Young people, in particular, felt it would be beneficial for adults to talk to young people about what they need to know and how best to raise topics with them to ensure that they felt safe.

6.5 The institution employs safe and trusted adults

Children and young people said they felt that safe institutions were filled with safe adults. As noted in the last section, participants often described safe adults as those who were caring, predictable,

respectful, trustworthy, appropriate and fun. Adults who were fair, even-tempered, had boundaries, acted in adult-like ways (weren't erratic, too familiar or inappropriate), didn't use their power to belittle or control kids but were relaxed and fun, were often identified as being safe. Those who didn't demonstrate these attributes were considered unsafe.

Safe adults were those who made children and young people feel safe, were approachable and took their concerns seriously, responded appropriately and 'took their side', and advocated for children when their safety concerns related to adults or institutions.

This emerged because some children felt that adults often stuck together, and processes (such as institution-based investigations) aimed to protect the accused from wrongful allegations rather than responding to children's concerns. They felt that it was crucial for adults to hear, and take seriously, all sides of the story so that they could fully appreciate the situation and what needed to be done. They agreed that adults needed to be fair but that children's worries should be privileged, at least while these processes were being enacted.

6.5.1 Safe and trusted adults see it as their responsibility to keep children safe and demonstrate this through their actions

A common view among children and young people was that they felt that adults in institutions often did not regard children's safety as their main responsibility or did not consider it a top priority. Teaching children, supervising children, coaching children and controlling children were all seen as tasks that adults in institutions assumed – but were ones that sometimes 'got in the way' of really listening to children and young people and responding to their safety needs. This was a stronger theme in the focus groups with young people than with children.

'There's too many pressures on them to do other things than just listen to us or to care about things that happen outside of their job ... If they have to choose between writing a report or asking us how we're going and what we need they'll always have to choose doing office work – because there'll be consequences for them if they don't ... Like their boss will get angry ... They're not accountable to us so it doesn't matter if they don't do what we ask them to do, what we need.' (MX-2)

Children and young people identified characteristics of trustworthy and untrustworthy adults, which are listed below.

a) Trusted adults care about children and young people

Participants observed that not all adults truly care about children or feel compelled to protect them. Caring adults were those who were kind to children, who spoke respectfully and treated them well.

b) Trusted adults act like adults

Children and young people were most concerned about adults who acted in inappropriate or unusual ways. This included those who tried to be children's 'best friends', those with poor boundaries, those who acted erratically or those who manipulated them.

c) Trusted adults are available

Availability was seen as a vital attribute of a safe adult. Children and young people felt that even if an adult demonstrated safe behaviours, if they weren't easily accessed and if they didn't make themselves available to children they weren't much help. In some instances, children and young

people identified adults that they thought would respond to their safety concerns, but reported that in practice, it was difficult to approach them because they were too busy or were not around.

d) Trusted adults are able to talk about sensitive issues

Children and young people who experienced abuse or who had come across unsafe adults reported that it was difficult to talk to workers because the adults were demonstrably uncomfortable in talking about such issues. Participants felt that these adults didn't like talking to children who were distressed or upset; that they worried they might say the wrong thing; that they thought it was inappropriate for them to be talking about things like abuse, sex and sexuality; and that they shouldn't talk about abuse because it might compromise any criminal investigations. These participants felt that adults (particularly those in caring professions) need to be equipped to have appropriate conversations with young people, because when they were not able to do so, young people felt unheard, disempowered and emotionally alone.

Other young people talked about how discussions about sensitive issues such as sexual abuse made adults feel uncomfortable, and this made it less likely for children and young people to know about real risks and the ways that adults were keeping them safe. They recognised that adults often did not share information with them about sensitive issues in an attempt to protect them, but felt that sometimes this was counter-productive. In two groups, young people reported that hearing rumours about 'dodgy teachers' only led to more gossiping rather than to positive outcomes.

e) Trusted adults prioritise children's needs and concerns

Children and young people often remarked that adults were only safe when they demonstrated their commitment to keeping children safe. They felt that adults would say things like: 'I'll protect you if you come to me,' but argued that this was not always the case. In particular, children felt that adults didn't take their concerns about bullying (in all its forms) seriously and that they had been verbally and physically assaulted as a result. In fact, some argued that by not intervening, adults sent the message to perpetrators that their behaviour was condoned, or at least tolerated, allowing children to be hurt and for their bullying or harassment to be accelerated.

f) Trusted adults do what they say they will do

Children and young people felt that adults often lost their trust because they failed to do what they had said they would do. Participants argued that adults who had taken responsibility for their safety and failed to meet this responsibility should be considered unsafe. They thought that inaction was an issue because: other adults would think that children in their care were safe because that adult was present; children would interpret this inaction as a lack of care or believe that all adults would fail to protect them; and because in some situations, they thought that perpetrating adults would take it as a sign that their behaviour was tolerable.

Those who had been let down by adults in the past expressed an apathy towards seeking support from adults again. They stressed that they would only go to an adult if they had seen that adult intervene in another situation.

'Adults should do what they're supposed to do. If they don't they're not safe for us. If they don't care about kids, if they act all crazy ... [or use their power] against kids instead of for them they're not safe and we'll never trust them.' (YP-4)

g) Trusted adults aren't creepy

Children and young people in each group identified 'creepy adults' as being unsafe to children and young people. Often groups found it difficult to definitively describe a 'creepy adult' but each had encountered one in their lives. Generally, creepy adults were those who made children and young people feel uncomfortable – a discomfort that did not always require the individual to do anything in particular:

'If someone is too close or if they're just creepy you know it.' 'It's hard to explain but it's hardly ever wrong.' (MX-1)

'Weird', 'they get really close', 'they touch you', 'just scary, weird and creepy', 'passing comment on things that don't need a comment passed on. Like how nice you look', 'saying that you are welcome to come by yourself to do things with me.' (YP-3)

'They have strange social cues – like they just have a weird look, they come across as creepy. It might not be that you see it the first time but you start to realise that they're strange ... They begin to stare, to look at you too long, it's like: "Stop looking at me like that." It becomes awkward and unpleasant.' (YP-1)

'Normally there's a discomfort and there has to be lots of people before anyone says anything.' (YP-4)

In most children and young people's accounts there seemed to be sexual undertones: that a 'creepy adult' looked at them in an unsavoury way or crossed personal boundaries (particularly in relation to touch, proximity or in their interactions) or gave them unwanted attention. In differentiating the behaviours of 'creepy adults' and safe adults, most related it to the feelings that arose for them.

In a number of groups, young people also identified adults who followed them home from school or the park. In each of the groups, children identified 'abduction' as being a key concern and cited their own experiences and something that they had seen on television to assert that it was a common experience.

h) Trusted adults don't play favourites

In each of the groups, children and young people identified 'favouritism' as an issue that concerned them. They felt that adults often treated particular children differently and believed this was unfair and may lead these 'chosen' children to participate in unsafe behaviours as a result. This was often in the classroom but also in sporting teams and, in two groups, within families. In three groups participants recognised that favouritism was a problem because it might lead to grooming, 'where a kid feels pressured to do something so that the adult will still like them ... or treat them special'.

'It might be bad for that kid [the favourite] too. I mean they might get pressured to do something and they'll go along with it because they still want to be the favourite. I've heard about that – adults taking advantage [Q: Like grooming?] Yeah, where they set it up so the kid feels pressure.' (MX-2)

Other participants generally felt that unequal treatment was discriminatory and shouldn't be allowed:

'In every class the teacher has a favourite. It's good for the kid they like but not for me. I wish for once I was the favourite but it's never happened.' (MX-1)

Children who were not ‘the favourite’ suggested that it would be harder for them to seek support from an adult than those who had a special relationship. They believed that adults may be less inclined to believe their side of the story (particularly if a favoured child was involved) but more generally also.

j) Trusted adults don’t bully children or young people

Children and young people in six of the nine groups felt that adults often bullied children and young people and that this had significant impacts for those affected.

They believed there were particular children who were ‘picked on’ by individual adults. They felt that this was also unfair, particularly when the child was defenceless to do anything about it. They expressed concerns about their powerlessness in this situation and could not identify successful strategies for raising their concerns. They felt that picked-on children often felt alienated, and if they didn’t have another adult to look out for them, their emotional wellbeing could suffer.

‘That’s pretty common. Adults can do whatever they like and you can’t challenge it.’ ‘Some adults can be on a power trip.’ (YP-4)

‘[My teacher] called me fat last year for no reason.’ ‘She gives me the evil eye for nothing.’ ‘She made me sit in her classroom so I’d miss my bus.’ ‘It’s really harsh if you get bullied by a teacher because if you tell an adult they won’t believe you because they’ll always take the adult’s side.’ (YP-4)

j) Trusted adults monitor their peers

Children and young people felt that it was important for adults to watch their peers to make sure that they were safe people for children and were acting appropriately. For some, this was because children thought that adults were more likely to believe each other than concerns raised by children, because adults might have a better understanding of what was appropriate and what was not, and because children felt that it was primarily an adult responsibility rather than a child’s. When asked what things adults should monitor, children and young people made a number of suggestions:

‘You should watch out for teachers who were getting too close to students’, ‘but they’d only do it when other teachers weren’t around.’ ‘You could watch out and see if there were teachers who were always around, always talking to the same group of students all the time, and if they were the opposite sex.’ (YP-3)

‘Checking up on their classes, having just a few chats with students in that class. If you see a teacher hanging around with the same group all the time, having a talk to those students about the teacher and how they feel about it’, ‘sort of investigate and if you find out something do something about it.’ (YP-3)

Students felt that adults should talk to their colleagues to see whether they shared concerns and work on a strategy for responding collectively.

‘You could ask other teachers if they’ve noticed things but maybe it shouldn’t cos it could get back to that teacher too.’ ‘If you had a trusted friend at the school you could ask them to do some research to see if they pick up on it too so that it’s not just you against them. So it doesn’t look like I’m being a douche about it.’ (YP-3)

k) Trusted adults have Working with Children Checks

Young people in three of the groups were aware of Working with Children Checks and generally trusted the screening process. These groups were made up of participants who had some involvement with formal services (child protection, child welfare or other youth support services). They thought that adults should show children these checks, or that institutional leaders (such as principals or team leaders) should report that all staff had complied.

'Those checks should be for us too. So that we know that an adult is safe. Because we're the ones who have to trust them.' 'But why would they show them to us? It's because they think we don't care or that we don't need to know.' 'We're the ones who need to know.' (MX-2)

Although they had some confidence in Working with Children Checks, they felt that these may not be enough to keep children safe. As discussed in the previous section, participants often talked about a negative 'gut reaction' to unsafe adults and felt that safe adults did not elicit this response. They believed that in addition to asking employees to complete a check, they should ask children and young people about how they felt when they were around them.

'They could have actually listened to us when we told them. Because those tests can be totally biased ... They can know how to cheat the tests.' (YP-3)

6.5.2 Children and young people are given opportunities to determine which adults are safe or make them feel safe

Participants reported that when deciding whether an adult was safe or not they would watch to see how other children and young people interacted with them. Realising this, children and young people in a number of the focus groups felt that it would be good for children and young people to have some input into the types of workers who were employed, with a number asking that children and young people be involved in selecting staff. Having both formal and informal opportunities to talk to trusted adults, such as principals and welfare workers, about the conduct of staff was recommended by some children and young people as a strategy for keeping kids safe. This was often because they believed children and young people picked up on things that adults might not, and because they were more likely to hear from peers about concerns than adults might be.

Children and young people argued that all safety strategies (including the recruitment of appropriate staff, supervision and monitoring, and dealing with issues) should be shared with children and young people. They noted that this communication loop was important because being safe and feeling safe were often two different things for children and young people, and that sometimes children and young people were not confident that adults were doing what they could to keep them safe.

6.6 The institution is open to monitoring by an external agency

When asked how the community might best ensure that institutions were protecting children and responding in appropriate ways, three of the groups argued for more monitoring. They believed that organisations needed to be encouraged to consider children's safety issues and to be vigilant about whether children were safe. They felt that this might best be done by people external to the organisation who could come in and 'check to see if they've got it right', 'to see if what they're doing is...up with the latest research', and to 'hear from kids about whether they think things are going OK'. In these groups, participants felt that monitoring should include external adults observing behaviours and assessing the processes that institutions have in place to protect and respond to children's safety needs, as well as establishing mechanisms through which children and young people could raise their concerns to outsiders when they were unhappy with what was being done.

In two groups, young people felt that there should be consequences for organisations that were failing to identify and respond to children's safety needs, but most children and young people felt that it was more about helping organisations to be mindful about their approaches and to be given ideas on how to best respond to issues.

'Have a look at what schools say they do and whether they actually do it.' 'Look at how people really respond like whether they freak out about things and make kids more nervous or worried. Whether they're casual and relaxed and can actually listen.' 'Look at whether they give them options about what they can do.' (YP-3)

7. Children and young people's advice to adults and institutions on what constitutes a good response to safety issues

Groups were asked to think about a safety issue that was important to the group. (Issues identified included bullying, 'creepy adults', being pressured by an adult into doing something they didn't want to do, child abduction, child sexual abuse, peer-to-peer violence and sexual assault.) Groups were then asked to brainstorm what children and young people needed in those situations, what adults currently did well and poorly, and any advice that they would give to adults in those circumstances.

Children and young people identified a number of actions that they believed adults should take when a child raised concerns with them. These actions often included a focus on participation – where children and young people were given the opportunity to talk about their needs and feelings and the ways that they hoped adults might respond. The following sections go into greater detail about these strategies, based on the suggestions of children and young people.

KEY FINDINGS: What makes a good response to safety issues?

- Adults and institutions take the time to listen to children and young people and to acknowledge their concerns when they arise. Children's views are taken seriously and adults ensure that they take time to fully understand what is going on for the child or young person before assessing the situation, solving the problem, taking control or attempting to fix the problem.
- Adults and institutions sometimes intervene when a child or young person is unsafe and is unable or unwilling to deal it with themselves – but with the child's knowledge, permission and guidance.
- Children and young people are given opportunities to build their knowledge and skills and are supported to deal with problems when this is possible.
- Adults and institutions recognise some of the barriers to children and young people raising their concerns and having them met. These include things that children and young people think and feel as well as things that adults do and don't do that make raising and dealing with issues difficult.

7.1 Listen

Overwhelmingly, participants felt it was important for adults to take time to really listen to them. They felt that even caring adults often unwittingly stopped them from talking, focusing more on what they would do rather than taking the time to understanding children's feelings, validating them and finding out what they needed in the moment.

'Say they might be hurt by their friends, by bullies, by teachers – they don't need a teacher to say, "You need to do better in this." 'Because they already know – what they need is to hear that they can get help or that things will get better.' 'They talk to you, pull you aside out of class, ask you what has happened.' 'If it's something serious they'll do something more – they'll take you to talk to the year advisor.' 'Our year advisor just assigns us to a counsellor – they don't even really talk to us, they just hand us over if they think that something might be going on. That's OK but most of the time we don't want to talk to a counsellor, we just want them to listen.' 'They just pick up that we're unhappy.' 'They need to not be invasive; they shouldn't be in your face and they shouldn't push you because then you'd be less likely to want to talk about it.' 'They're not very involved.' (YP-3)

Children and young people were quick to identify things that adults did and said that kept them from talking about their issues and concerns.

[Q: What gets in the way of adults really listening?] 'Probably pointing out what they did wrong all the time.' 'Tell you that everything's going to be OK – that's so annoying.' 'When they say it's not a big deal', 'when they compare', 'when they say, "Oh, I went through something like that," and then they tell you ... it's got nothing to do with what you're talking about', 'when they pressure you', 'when they want you to think rationally and you don't want to think rationally', 'when you want them to take your side but they don't', 'but in doing that they're trying to make you see how your actions affected the other person, by not just taking your side.' 'My mum always took my side.' 'That's because you're a middle child.' (YP-3)

7.2 Acknowledge children's concerns rather than downplay them or try to fix them

Participants said that adults often tried to downplay their concerns, saying things like: 'it can't be that bad', 'you must have misunderstood' or 'don't worry, I'm sure things will get better'. They reported that this was belittling and unhelpful, and that children and young people wouldn't trust adults who interacted with them in this way. Instead, they felt that they most trusted adults who listened to them and recognised that they were unhappy and wanted something to be done.

'[Young people need an] acknowledgement that it's a problem and that it's not [a little thing]... Don't brush it off ... [They need] help in how to fix it, deal with it.' (YP-1)

They conceded, however, that sometimes they had misunderstood or misjudged a situation and felt that it was important for adults to help them realise this. They argued that in such cases adults needed to help them work through the situation rather than to just expect them to 'forget about it just because they've [the adults] said it's OK.'

'The adult needs to be able to get you to see the other person's perspective.' 'It's good to hear that maybe what you're doing is hurting someone else.' 'Adults can be the rational person in that situation, help you understand what's going on', 'but that shouldn't be the first thing they say. They need to comfort you first, to listen and to make sure what they think is happening is actually happening.' 'They shouldn't just [go] straight into fix-it mode.' (YP-4)

As discussed in the quotes above, young people in a number of groups said that they would most like to talk to an adult who had similar experiences to themselves (having experienced abuse, bullying or harassment), but there was some conjecture as to whether adults needed to have personal experience to be able to empathise with children or to respond to their needs.

'[My advice would be] don't compare it to their own personal situation.' 'In saying not to compare it, sometimes it makes it easier because you know that they've experienced that and got through it and they're fine now.' (YP-3)

7.3 Help the child or young person determine whether there is a problem or not

Children and young people in five of the groups felt that it was important for adults to help them make sense of particular encounters that they had experienced and to help them understand whether they were at risk or not. This reflected the fact that participants sometimes had an emotional or other bodily response to a person or situation that they didn't understand or properly comprehend. Young people felt that this was particularly important to younger children who might not have the experience or knowledge to build on.

‘Sometimes we freak out when we don’t need to. We might have heard something and now we think that it’s a huge risk but it could turn out that we’ve heard the wrong thing or that it’s not really a problem.’ ‘But sometimes we feel weird but don’t know why and having an adult ask you questions, it doesn’t even have to be an adult but maybe it’s good to talk to an adult, and yeah for them to say, “What were they doing and why do you think they said that?” helps you clarify it and then you go, “Oh yeah, that was bad and that’s why I felt that way.”’ (YP-2)

‘Get them to draw pictures like what you’re getting us to do about the things that they’re scared about and see if they know the things they really should be scared about and then make them draw those things and come up with ways to deal with it when it happens. No one really talks to kids about what really could happen or tell them not to worry when the thing they’re scared about ain’t gonna happen. So kids are all stressing about the wrong things and they don’t know what to do if something real bad happens, because no one talked to them about it.’ (YP-4)

Young people felt that this conversation needed to provide children and young people with an opportunity to talk through their thoughts and feelings, and for adults to give an explanation of their assessment so that they could learn from the experience, rather than rely on adults to make assessments for them each time. They also recognised that children and young people need adults to make a good assessment – realising that if a trusted adult told them ‘not to worry’ or that they were ‘being paranoid’ when they had been in an unsafe situation, they would be worse off than before. They felt that adults should reassure children and young people, but also give them some things to watch out for.

‘They’ve gotta get it right or we’re fucked, you know. It’s better to feel scared and to watch out for things than to feel comfortable because someone has told you not to worry and then you end up in a bad situation because you got the wrong advice.’ (MX-2)

7.4 Take the child or young person’s side

A small number of participants voiced a general lack of faith in institutions (namely schools, but also other institutions), believing that they placed the needs of the institution and of adults within that institution before the children and young people. A larger number expressed concern that adults often ‘stuck together’ and protected each other when children and young people made complaints or allegations. In some instances, participants felt that in an attempt to achieve natural justice (the researchers’ words), adults were considered innocent until the child or young person could prove that they had done the wrong thing. These participants believed that the institution should side with children and young people in the first instance, take their concerns more seriously, and act on children and young people’s wishes until the investigation process was complete.

‘We were all in year 8 and we all felt uncomfortable and we told the school. We all knew. We said he’s a weirdo. He was ewww ... But they said we were exaggerating and that he was fine. But then it turned out he was [unsafe]. If only they had listened and believed us instead of saying, “You’re young what would you know?”’ (YP-3)

7.5 Help children and young people build their skills to respond to a situation

Participants in six of the groups believed that adults could not always be around to help protect them from unsafe people or things and that it was important, then, for children and young people to be skilled up to deal with issues themselves. This was seen as particularly important for older young

people who were more likely to be alone and who would more likely want to deal with issues themselves rather than seek support.

‘They don’t do that well at keeping kids safe. They don’t teach us what to do.’ (YP-4)

Children and young people identified that they had developed a series of strategies to keep themselves safe, particularly when they encountered unsafe people and places. There was some difference amongst the groups. Younger children tended to seek out adults, to try to ‘block out’ their fears or concerns and not think about them but wait for them to resolve themselves or for adults to intervene. Young people reported that there was more pressure on them to deal with their issues alone (rather than seeking adult involvement) and were more likely to turn to peers for advice if they believed that they would not be judged for doing so. In the moment, young people would also attempt to flee the scene or ‘stand up for ourselves’ (which might include responding violently).

Children and young people generally felt that these strategies had limitations; their impact was often short-lived and they weren’t useful when they encountered significant threats (including sexual abuse). They believed that they needed more skills to be able to prevent these threats but also, and more importantly, protect themselves from real danger. Without this confidence, young people felt that you could never feel fully safe.

‘You need that to feel safe, to feel comfortable’, ‘just being able to know that even if something goes wrong or anything that you can ... get out of it, support yourself financially or emotionally, that you don’t have to rely on others.’ (YP-2)

Although most participants in the older groups valued lessons that they had had in primary school, they believed that it would also be advantageous for adults to have frank conversations about what risks existed and how to best deal with them. Young people asserted that these discussions shouldn’t just include adults telling young people what not to do (i.e. not sexting, not getting in cars with strangers, not taking risks) but also how to manage issues if they emerged. They felt that this was important because many young people took smaller risks and may not foresee unanticipated situations that might arise.

Young people often stressed the value of having ‘experts’ talk to them openly and frankly about dangers. This was because although they trusted their parents and their teachers, having someone with lived experience of an issue (i.e. survivors of sexual assault) or who knew a lot about the issue (i.e. a sexual health nurse) would be more likely to grab their attention and explain the reasons why they were making the claims that they were.

7.6 Offer solutions that are realistic and respond to children and young people’s concerns

Children and young people were ambivalent about a number of the strategies that adults had implemented, because they had seen them fail. For example, children and young people in each focus group raised concerns about bullying, and reported that most strategies weren’t helpful – either because adults didn’t use them or because positive outcomes (mostly related to preventing further bullying) were not achieved. Without confidence in strategies, children reported reluctance in telling adults about their concerns – particularly when they believed that the strategies made things worse for them.

‘The worst thing they can do is say they’re going to do something and then not do it. Because we watch them and if they let us down we’re not going to go and ask them again.’ [Q: Do

you not ask them or do you not ask any adult again?] ‘We won’t ask any adult if we think that they’ll just do the same thing.’ (MX-2)

‘With bullying, kids can’t rely on adults to do anything. That makes [kids] feel less safe because they know firsthand that they have to deal with it themselves ... They’ve probably seen adults who don’t care or who don’t do anything about it and they lose faith that they can help you... You start thinking you have to deal with it on your own.’ (YP-1)

Young people were particularly scathing of one-off programs that promoted simplistic, sloganistic solutions to issues (particularly bullying, but also stranger danger and sexual harassment). They believed that these issues were more complex and complicated and needed more sophisticated responses. For example, participants in a number of groups felt that the ‘Stop it, I don’t like it’ approach was ineffective – particularly when the victim was already in a powerless situation.

Similarly, they were critical of some of the presenters of protective behaviour programs. For example, one group discussed a program in which high-profile sports people visited to tell them what to do when they encountered a person, or a group of people, who were going to hurt them (physically or otherwise). They reported that these sports people used their own experiences like, ‘Act confident and you’ll never be in danger; that’s always worked for me’, without appreciating the vulnerabilities of their audience.

As a caveat, children and young people did note that sometimes adults’ strategies for dealing with their concerns made them feel worse when they were unsuccessful. Telling children that they needed to stand up for themselves or to act confidently were seen as unhelpful when they didn’t take into account that children might be smaller or less confident than their attacker. Participants reported that instead, such strategies made them feel weaker and the issues less resolvable because of their limitations.

‘They had [some rugby players] come in and they told us that you just have to show you’re tough and won’t take anything from anyone; that’s how they dealt with it. But they’re big and muscly and I’m small and weak. That wasn’t going to work but they just kept saying it over and over so I stopped listening because it was kind of like it was my fault.’ (YP-2)

‘They say act confident but I’m a tiny girl without any muscles. If someone is going to attack me or rape me or something I can’t just act all tough and they’ll go away. It didn’t help ...’ ‘Yeah, they say violence never solves anything but if you’re pinned up against a wall and someone is threatening you, you can’t say, “Stop I don’t like it,” or talk your way out of it. You have to just start swinging and hope you don’t come out pulverised.’ ‘It didn’t help us at all, it just said that it was your fault if you got bashed or abused or whatever because you weren’t tough enough or confident enough to get out.’ ‘That’s the wrong message and I don’t think kids should hear that.’ ‘It might work for guys who have no necks but it won’t work for us. And that was the class on protecting yourself – the only class we had on it for three years.’ (YP-2)

Children and young people felt that adults needed to have more realistic knowledge and skills on how to respond to a child who discloses that they are unsafe.

‘They need to know what procedures that they have to follow to do the right thing.’ ‘They probably don’t know what to do. They probably just freak out so much and don’t know what to do so do the wrong thing.’ ‘They need to research so that they know what to do if that situation happens.’ ‘They need to know that some things don’t work. Like saying some things or doing some things are wrong.’ ‘Some things make it worse. They need to know that.’ ‘It’s about knowing what to do and feeling confident in that’, ‘it’s about knowing what not to do

– like blaming the kid or asking questions like: “Did you do something for them to act in this way?” “Is it something that you said, something that you did?”” ‘If you do the wrong thing you can really affect the kid. Make it worse. Like they don’t trust anyone anymore ... It changes the kid.’ (FG-4)

7.7 Understand and overcome barriers to children and young people getting the support they need

Participants recognised that children did or thought things that could act as a barrier to them seeking support and for having their concerns dealt with. They believed that adults and institutions needed to appreciate these barriers and work with children and young people to overcome them together. Barriers included:

- the child or young person doesn’t realise how big an issue they are facing;
- they feel embarrassed or ashamed about asking for help;
- they don’t have confidence that adults can help;
- they don’t know who to talk to;
- they think that raising their concerns will make things worse;
- they think that there will be retribution if they raise a concern about an adult or institution;
- they have had bad experiences in the past – when they weren’t listened to, when adults’ reactions weren’t helpful, when there were consequences for them or others.

Children and young people also felt that adults did and thought things that prevented children and young people engaging with them, and prevented adults responding in a helpful way. Participants felt that unhelpful adults:

- don’t spend enough time with children or young people;
- don’t care enough about children and young people or their concerns;
- don’t appreciate the extent to which children and young people feel concerned;
- are not available or accessible;
- have other things they need to do and can’t resolve every issue;
- don’t appear to have the interest, skills or authority to resolve the issue;
- don’t like coming across children and young people who are uncomfortable, at risk or in pain;
- believe that the issue or concern relates to something outside of their workplace/environment and think it’s not their place to respond;
- think someone else is dealing with the issue;
- don’t think that it’s their role to respond.

8. Important messages from children and young people for the Royal Commission

At the end of their sessions, children and young people were asked to identify key things that had been discussed that they thought the Royal Commission needed to hear from children and young people. Although many of the themes have been discussed in previous sections, they are presented here as a discrete set of messages that children and young people wanted to convey.

8.1 Most adults are doing well

Most participants felt that adults were doing reasonably well in keeping children and young people safe. They wanted these adults to know that they appreciated their efforts and thanked them for their concern. They believed that the Royal Commission should be made aware that children generally have faith in adults.

'Tell them that adults are doing a pretty good job and that most of the time we're safe.' (YP-3)

'Thank the good teachers – it means a lot to us when they listen to us and do stuff when we tell them things are bad.' (YP-2)

'I think they've done everything they can ... After that it's in the young person's hands.' (YP-4)

Children and young people wanted adults (particularly parents) to know that they enjoyed the time they spent together, and felt most safe when they were around. They felt that other things often kept adults from spending time with children and young people, and asked that adults make them a priority.

'They need to make time for kids – to be there for their kids. Like that's how my mum found out – that she needed to spend time checking in with each of us every day. She might be tired as anything but we all get that time sitting next to them, even if you're just on the phone sitting with them. That's what kids want and if you've got two parents they can do it. It's a lot easier. Because that's what we want: time with you. Time to be with you and talk to you and that has to be a priority, to accommodate them.' (YP-3)

'They [adults] need to be there more and tell them [children] from day dot that "I'm here for you and you can tell me anything". That's always worked for me. I've only ever had my mum and sister, 'til recently, but that's how it's been.' (YP-3)

They felt that if children and young people didn't have this time to spend with adults they wouldn't trust them and couldn't talk to them when they were unsafe.

'A lot of kids these days don't know how to relate to adults, because they don't spend much time around them because adults aren't there for kids and kids spend so much time on social media and stuff like that. They find it so difficult to communicate with adults.' (YP-3)

8.2 Things aren't as bad as many adults believe

Although participants did recognise that many children and young people had been abused or were unsafe they wanted adults to know that most of the time they were OK. Young people often felt as though adults were overly protective and restricted their lives unnecessarily. They were particularly concerned about the fact that because adults were scared about their safety outside of the home, children and young people weren't able to be alone, play unsupervised and use the internet. They felt

that the Royal Commission should help adults to be aware of the real risks, but to not make it harder for children and young people as a result.

'Tell them that it's not as bad as they think. Tell them that we can look after ourselves ...most of the time.' (MX-1)

8.3 The news might become more child-friendly

In the majority of focus groups, children and young people voiced their concerns about the way the media reported on issues of safety and risk. They felt that media presented issues in ways that caused children unnecessary fear (about child abductions, abuse and violence), particularly when they failed to report on how adults, organisations and the community were responding to risks and keeping children safe.

'I think these days they advertise it a lot, how bad things, all the bad things that can happen and get it into people's heads and because of that we think that things are worse than it really is.' (YP-1)

They were also unhappy with the way that stories about young people always focused on a small group who were doing the wrong thing or who were particularly at risk and instilled panic amongst their parents and other adults. They believed that this panic led to over-protective behaviour (in relation to internet use, spending time with friends and time spent without adults around them).

They thought that the Royal Commission should think about how it presented its findings to ensure that better outcomes were achieved, rather than a greater anxiety about children, which led to them being overly protected and restricted.

'These issues are real but they should talk about it in a way that makes things better not worse. If adults get all freaked out and stop us from doing things that's not going to help ...' (YP-4)

'When adults freak out, kids stop wanting to talk about things that are worrying them. [Adults] have to get the risk but do things that will make things better.' (MX-2)

8.4 Some adults need to develop their skills and institutions need to better deal with safety concerns

Some children and young people, particularly those who had suffered at the hands of adults or as a result of adults not protecting them properly, felt that adults needed to improve. They believed that adults needed to be more willing to listen to children and young people and to act on their concerns. They asked that the Royal Commission stress the importance of improvement and require organisations to show how they had changed.

'They need to care a little more. Put kids first a little more.' (YP-1)

'Believe us when we say that we're being hurt because why would we make that [stuff] up?' (YP-4)

'There should be someone like the Royal Commission who comes in and does a check to make sure the organisation is doing what they say they're doing. It should be a surprise and there should be real consequences if they're not protecting kids properly.' (MX-2)

A number of participants reported that the processes that were in place had failed them and they would probably not use them again.

'Nothing's gonna help. I've done everything, every complaint form but nothing ever changes. I'm not going to bother doing anything anymore because nothing ever changes.' (MX-2)

8.5 Processes for responding to young people's safety concerns need to involve children and young people and respond to their perceived needs

Some participants were ambivalent about adults' capacity to keep children safe. These included those who were older and felt that adults did not always have the knowledge, skills or confidence to prevent safety issues from emerging or dealing with them when they arose; those who had sought help from adults in the past and were not happy with the adults' responses; and those who felt that it was not adults' responsibility to protect children from harm.

Participants felt that adults often did not have a good understanding of the issues affecting children and young people and recommended solutions that kids didn't believe could work. This was particularly the case when adults didn't appreciate the consequences for children and young people – when they didn't recognise the discomfort, pain and suffering that children were experiencing and either dismissed their concerns and experiences, or minimised their effect. Children and young people often mentioned bullying and harassment when asked to give examples of when adults did not fully appreciate or understand their issues. Strategies like 'stay away from places where you are unsafe', 'stand up for yourself' and 'act confidently' were things that they believed were unhelpful and showed them that adults did not comprehend the context, nature or impact of the experiences.

Some reported that they felt disempowered by adults' responses – particularly when they took things out of their hands and put strategies in place that the children and young people had no input into and didn't believe would work. When asked to give an example, a group of young women noted that when they told a teacher at their school that they were being harassed by a group of boys, she confronted the male students without consulting them. They believed that this did nothing to improve their circumstances, led to embarrassment and shame and made them feel even more powerless because they had no opportunity to have a say in how things were dealt with. They argued that what they needed was for the teacher to listen to their concerns, help them find solutions (which may have been confronting the boys together) and be supported to manage the situation themselves. They conceded that, in some circumstances, young people need adult intervention but that this should only occur if: the young people ask for it, things are too serious for young people to deal with themselves, or if it was clear that their own strategies were not working. In such circumstances, adults should intervene, but in negotiation and with the agreement of young people.

As such, they believed that adults should, wherever possible, work in partnership with children and young people and involve them in appropriate ways.

'If someone is being hurt they need to do something straight away but it should be with the young person, not like going behind their back.' (YP-3)

Children and young people wanted adults to know that it was important for them to respond appropriately, because if they didn't children might not raise their concerns again. They thought the Royal Commission might play a part in educating adults, particularly those with the responsibility for caring for kids.

'If you do the wrong thing you can really affect the kid. Make it worse. Like they don't trust anyone anymore ... Get the Commission to tell adults that.' (MX-2)

Most children and young people saw value in adults working with children and young people in identifying safety concerns and ways that they might be prevented and responded to. However, they could not identify times when adults had worked with them individually or as a group to identify safety issues or develop strategies to respond to them. They strongly believed that the Royal Commission should advocate for more opportunities for children and young people to be involved in determining how issues were dealt with.

'The Royal Commission should make it compulsory that young adults get a say in how this stuff is dealt with. We know what's happening and like what should happen and they should talk to us about it when it's happening.' (YP-2)

'Every school should do what we just did. Talk about what risks there are and if it's a big risk and what's been done and what we think should be done. How else can they find out what young adults think and how can we hear what's been done?' (YP-3)

These participants felt strongly that adults needed to work with children and young people to help them keep them safe. They argued for more programs for children and young people, as well as opportunities for children and young people to develop strategies with each other as well as with adults. They thought that this could be a key recommendation of the Royal Commission.

'At the end of the day they can't do much so we need to know how to protect ourselves... Tell the Commission that we want more groups. We like talking about this stuff and it really helps.' (YP-2)

8.6 Children and young people's needs and wishes should be seen as a priority

Participants felt that sometimes it was hard for children to raise their concerns about adults because adults would 'stick together'. They wanted the Royal Commission to know that they thought that children and children's safety should be a priority and that sometimes adults' needs and wishes needed to come second.

'Kids should be a priority. They shouldn't be more worried about losing a teacher. Losing one teacher shouldn't matter as much if kids feel uncomfortable.' (YP-1)

In two of the groups, children and young people wanted the Royal Commission to know that institutions sat within broader communities and that until issues such as racism and violence were dealt with at a broader level, issues for children would continue. Similarly some argued that until children and young people were respected more in society, issues such as child abuse would remain a problem.

'Lots of adults don't care enough about kids and this stuff is going to keep happening. Until they see us as having good ideas and believe us [when things go wrong] nothing will change.' (MX-2)

8.7 It was good that the Royal Commission had a children's research project and children and young people might like more interaction with the Commission

Children and young people often fed back (to the research team but also to adults outside of the group) that they had enjoyed participating in the study and were glad that children and young people were given a chance to have their say.

In a number of the groups, participants wanted to know how the Royal Commission had involved children and young people in the inquiry and how they had responded to children's concerns. They thought that it would be useful for the Royal Commission to spend time communicating with children and young people (through schools, media, social media and face to face).

'I don't think that most kids would know about the Royal Commission so they wouldn't know that they could have their say.' (YP-1)

Children and young people also wanted to know how their input was to be used and whether the Royal Commission would take their views seriously. They were very keen to be involved in a change-making process that would lead to positive outcomes for children and young people.

'I'm really excited that they [the Commission] are talking to children and that we can help things to get better ... I hope they do - so this isn't just talk because it's not good when adults ask for our opinions but don't do anything with it – because they know better than kids. That would be bad. So I'm curious about what they'll do.' (CH-2)

'It would be good if they could tell us what they think of what we've said. It's good that you are going to tell us all the things you heard from kids but it would also be good to hear what they are going to do and if it changed anything ... I'm sad that they haven't talked to kids and only adults who were abused when they were kids because it's probably still happening and kids now need a say too.' (YP-2)

9. Concluding comments

'It was good that you talked to us about this stuff and let us have a say ... We had fun and even though it was like serious for bits it was OK because it's something we should talk about and think about and it's good to hear what other people think because we don't talk about this stuff that much.' (YP-3)

One of the tensions that exists within the literature also emerged in this study: how to help children and young people build the knowledge and skills to protect themselves without sending a message to children that they are primarily responsible for keeping themselves safe. As Finkelhor observes, many strategies fail to get this balance right, and it 'is morally misguided and perhaps psychologically harmful to place the responsibility ... on the shoulders of children' (2009, p. 180). We argue that institutions need to find a mid-ground, where adults: (a) actively protect children and young people and responds to their issues, and (b) support children and young people to understand and manage safety issues in the context of a supportive relationship.

To achieve this two-pronged approach, we would argue that there is a need for:

- adults to understand how children conceptualise, experience and deal with safety issues;
- adults to understand the dynamics of sexual abuse and other safety concerns;
- adults to help children and young people better understand the dynamics of sexual abuse and other safety concerns, and how adults and institutions are managing risks;
- adults to develop trustworthy relationships to enable children and young people to raise their concerns;
- adults to take children and young people's concerns seriously;
- institutions to engage children and young people in participatory processes.

9.1 The need for adults to understand how children conceptualise, experience and deal with safety issues

Participants in the study have provided a nuanced and detailed view about how they conceptualise and experience safety in and outside of institutions. They highlighted the value that they placed on the feelings and 'gut reactions' when they encountered new people and places. They recognised the strengths and weaknesses in relying on these responses in assessing their degree of safety. At the same time, they felt that adults devalued their feelings of being safe and unsafe and needed to better understand the importance that children and young people placed on these reactions.

Children and young people placed importance on relationships, particularly those that they deemed familiar and trustworthy, and felt safe when these individuals were around. One of the contradictions that some groups observed was that to feel safe, children needed to have trust in adults, but to be safe children needed to be sceptical so as not to fall for grooming behaviours. They also recognised that by differentiating particular groups of adults (those with particular appearances, ethnicities and behaviours, for example), children may miss out on opportunities to connect with and be protected by safe adults. Helping children and young people to better identify safe and unsafe adults is critical.

An understanding of the strategies that young people, in particular, use to keep themselves safe and deal with unsafe situations is important for prevention of child sexual abuse. However, young people felt that adults did not appreciate the ways that they managed risks (particularly on the internet but also in their interactions with others). They also felt that a greater appreciation of young people's skills might reduce adults' anxiety and over-protectiveness, and allow adults and young people to build more effective strategies based on what they already know and do. Our findings echo those of studies into community, transport and online safety (Carver, Timperio, & Crawford, 2008; Jones, Davis, & Evers,

2000; Leonard, 2007; Spilsbury, 2002; Valentine & Holloway, 2001), which suggest that children and young people have developed strategies, often without the knowledge of adults.

9.2 The need for adults to understand the dynamics of sexual abuse and other safety concerns

This study reinforces the need to educate not only children and young people but also adults on the dynamics of child sexual abuse in institutions and in identifying and appropriately responding to instances of abuse, so that when children do disclose their concerns adults can respond. Children and young people believed that this was critical, because they were aware that they often misjudged situations as being safe (or indeed unsafe) and needed adults to help them to confirm or dispel their concerns. Previous studies have suggested, however, that even after participating in workshops on child abuse, many professionals still do not feel comfortable in identifying or assessing safety risks (Goldman, 2007) and may hold false assumptions about the nature and incidence of abuse and how to respond (Potter, Briggs, & Lushington, 2002).

When asked, the majority of children and young people in groups argued that adults would only know that a child was unsafe if that child told them. They believed that this was a problem and needed to be addressed.

9.3 The need for adults to help children and young people better understand the dynamics of sexual abuse and other safety concerns and how adults and institutions are managing risks

Although this project did not attempt to assess children's knowledge about child sexual abuse, participants did highlight the fact that they often felt ill-informed about people, places and things that could cause them harm. Many recognised that because they had not encountered unsafe situations in the past they were unable to 'watch out' for them in the future or manage them if they arose. They felt that they would feel more comfortable if they knew what to look out for and how to best deal with situations if they emerged. This was a particular need for young people, who believed that they were less likely to be with adults when unsafe situations occurred and more likely to rely on themselves or their peers to find solutions to their problems independently.

At the same time, children and young people reported a level of anxiety about child abductions, 'creepy adults' and other threats that they perceived as being highly likely. They reported feeling afraid because they were aware that these dangers existed in their communities and rarely knew how adults and institutions were acting to keep them safe. They felt that children, in particular, worried unnecessarily and that more information would be helpful.

9.4 The need for adults to develop trustworthy relationships to enable children and young people to raise their concerns

Participants in this study felt that being able to respond appropriately to children's concerns requires skills and knowledge, and also that adults develop relationships with children and young people based on trust and openness. Writers such as Staller and Nelson-Gardell (2005, p1429) argue that 'It is incumbent on the [adult] ... not the child, to create the relationship necessary for the child to proceed', and that institutions, such as schools, need to proactively talk with children and young people, particularly those most vulnerable to sexual abuse.

In a number of groups, children and young people believed that adults often do not respond well to safety concerns because they do not feel comfortable discussing sensitive or distressing things with

children and young people. Green (2005) argues that this discomfort is often founded on the belief that children are too immature to talk about issues such as sex, sexuality and abuse, and that such discussions may corrupt them or lead them to be corrupt. Our study suggests that children and young people do have some degree of awareness relating to safety issues, including child sexual abuse, and that if broached appropriately, productive conversations could support children and young people to feel better enabled to respond to unsafe situations.

Similar to previous studies (Foster & Hagedorn, 2014; Sable, Danis, Mauzy, & Gallagher, 2006; Ullman, 2002; Ungar et al., 2009), this project found that children and young people felt that shame, guilt, embarrassment and a fear that they would be disbelieved keep many from approaching adults when they were or felt unsafe. To counter this, institutions need to consider implementing strategies to encourage children and young people to come forward, appreciate and reduce the level of discomfort that individuals might experience and, where possible, create an environment where conversations about safety are encouraged and supported.

9.5 The need for adults to take children and young people's concerns seriously

Children and young people felt that adults needed to better appreciate their feelings and 'gut reactions' to particular people and places. Previous studies suggest that when children believe that adults do not appreciate their concerns or accept the possibility that they might be in unsafe situations, they will not disclose (Paine & Hansen, 2002). Participants recognised that without concrete evidence of inappropriate behaviour, adults may not be in a position to act on their concerns but felt their disclosure might at least trigger increased supervision and inquiry.

9.6 The need for institutions to engage children and young people in participatory processes

Children and young people argued that participation was a central feature of a child-friendly response to institutional sexual abuse. Participants felt that (a) their sense of safety, and (b) their faith in responses to their safety concerns was increased if children and young people had some level of input in developing preventative strategies and some control in determining how adults and institutions might respond when safety issues emerged. Key elements included the provision of adequate information that detailed the nature and extent of safety issues and the ways that adults were responding, mechanisms for children and young people to raise safety concerns, opportunities for children and young people to inform processes and practices to prevent and respond, and some level of choice and control about how adults would respond when children and young people were in unsafe situations.

As noted in our Introduction, this study draws on standpoint theory and recognises that children and young people see and experience the world differently to adults and differently to the way that adults believe children and young people experience the world.

It does not necessarily attempt to privilege children's knowledge over adults' knowledge because it recognises that all views are partial and biased. However, it does recognise the space between what children think and what adults think that children think, and challenges adults to consider how this divide might influence what is known about children's safety and how safety issues are dealt with.

This study was interested in understanding what children thought safety was, what they believed adults and institutions were doing to keep children safe, and to assess how child- and youth-friendly responses were. Although children's views have traditionally been dismissed, arguing that they do not have the knowledge, competence or experience to make judgments on things such as safety, standpoint theory provided the opportunity to cast aside these views, explore children's unique standpoints, and consider what these standpoints can offer to discussions.

This research project reinforces the critical importance of engaging children and young people in discussions about sensitive issues. Children and young people were able to participate in discussions about their safety (including their safety from child sexual abuse) and were also eager to do so.

By asking children and young people how they believed adults would respond when they were unsafe, we were able to consider some of the barriers that influence their help-seeking.

In one of only a few instances where children reported that they found a topic uncomfortable, a young boy told the researchers that he still wanted to participate because he thought it was important for kids his age to be asked about sexual abuse and how institutions should respond. They said that kids want to participate and engage with important issues that affect them, and they want adults to take notice of what they experience and what they think would help improve the situation.

We would like to close by thanking the 121 children and young people who participated in focus groups and the three children and young people's reference groups that helped us create, implement and understand the meaning emerging from the research project.

References

- Alanen, L. (2005). Towards a relational theory of childhood'. *Childhood: Critical Concepts in Sociology*, 3, 286.
- Alderson, P., & Morrow, V. (2005). *Ethics, Social Research and Consulting with Children and Young People*, Essex: Barnardos.
- Aldridge, J. (2012). Working with vulnerable groups in social research: dilemmas by default and design. *Qualitative Research*, 14(1), 112-130
- Backett-Milburn, K., & Harden, J. (2004). How children and their families construct and negotiate risk, safety and danger. *Childhood*, 11(4), 429-447.
- Barbovschi, M., Green, L., & Vandoninck, S. (2013). Innovative Approaches for Investigating How Children Understand Risk in New media: Dealing with Methodological and Ethical Challenges. London: EUKids Online, London School of Economics and Political Science.
- Barns, R. (2011). Researching sexual abuse: methodological issues. *Child Abuse Review*, 20, 153-157.
- Beazley, H., Bessell, S., Ennew, J., & Waterson, R. (2009). The right to be properly researched: research with children in a messy, real world. *Children's Geographies*, 7(4), 365-378.
- Blanchet-Cohen, N. (2013). Researching violence with conflict-affected young people: context and process. *Child Indicators Research*, 1-19.
- Braun, V., & Clarke, V., (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, 3(2), 77-101.
- Bourke, R. & Loveridge, J. (2013). Exploring informed consent and dissent through children's participation in educational research. *International Journal of Research & Method in Education*, 37(2), 1-15.
- Bown, K. (2010). *The Safety and Wellbeing of Looked After Young People: an Analysis of Looked After Young People's Experiences and Perceptions with Implications for Contemporary Safeguarding Policy and Practice*. University of Portsmouth.
- Bromley, RD., & Stacey, RJ. (2011). Identifying children's perspectives on anti-social behaviour: variations by home area and the implications. *Geoforum*, 42(6), 650-659.
- Bromley, RD., & Stacey, R. J. (2012). Feeling unsafe in urban areas: exploring older children's geographies of fear. *Environment and Planning-Part A*, 44(2), 428.
- Brownlie, J. (2001). The 'being-risky' Child: governing childhood and sexual risk. *Sociology*, 35(2), 519-537.
- Campbell, A. (2008). For their own good: recruiting children for research. *Childhood*, 15(1), 30-49.
- Carter, B., Jackson, D., Hayter, M., & Nyamathi, A. (2012). Children out of place: vulnerability and risk in the countryside? *Contemporary Nurse*, 42(2), 298-300.
- Carver, A., Timperio, A., & Crawford, D. (2008). Perceptions of neighborhood safety and physical activity among youth: the CLAN study. *Journal of Physical Activity & Health*, 5(3), 430.
- Cater, Å., & Øverlien, C. (2013). Children exposed to domestic violence: a discussion about research ethics and researchers' responsibilities. *Nordic Social Work Research*(ahead-of-print), 1-13.
- Chan, YC., Lam, GL., & Shae, W.C. (2011). Children's views on child abuse and neglect: findings from an exploratory study with Chinese children in Hong Kong. *Child Abuse & Neglect*, 35(3), 162-172.
- Christensen, P., & Mikkelsen, R. (2007). Jumping off and being careful: children's strategies of risk management in everyday life. *Sociology of Health & Illness*, 30(1).
- Collins, K. S. (2001). Children's perceptions of safety and exposure to violence. *International Journal of Adolescence and Youth*, 10(1-2), 31-49.
- Conolly, A., & Parkes, J. (2012). "You're like a prisoner in your house. She's not allowed to go nowhere": autonomy in young people's familial relationships in areas affected by high youth crime. *Families, Relationships and Societies*, 1(2), 155-172.
- Crivello, G., Camfield, L., & Woodhead, M. (2009). How can children tell us about their wellbeing? Exploring the potential of participatory research approaches within young lives. *Social Indicators Research*, 90(1), 51-72.

- Danby, S., & Farrell, A. (2004). Accounting for young children's competence in educational research: new perspectives on research ethics. *The Australian Educational Researcher*, 31(3), 35-49.
- Dockett, S., & Perry, B. (2007). Trusting children's accounts in research. *Journal of Early Childhood Research*, 5(1).
- Dockett, S., & Perry, B. (2011). Researching with young children: seeking assent. *Child Indicators Research*, 4(2), 231-247.
- Einarsdóttir, J. (2007). Research with children: methodological and ethical challenges. *European Early Childhood Education Research Journal*, 15(2), 197-211.
- Eriksson, U., Hochwälder, J., & Sellström, E. (2011). Perceptions of community trust and safety—consequences for children's well-being in rural and urban contexts. *Acta Paediatrica*, 100(10), 1373-1378.
- Farver, J., Ghosh, C., & Garcia, C. (2000). Children's perceptions of their neighborhoods. *Journal of Applied Developmental Psychology*, 21(2), 139-163.
- Fattore, T., Mason, J., & Watson, E. (2007). Children's conceptualisation (s) of their well-being. *Social Indicators Research*, 80(1), 5-29.
- Finkelhor, D. (2009). The prevention of childhood sexual abuse. *The Future of Children*, 19(2), 169-194.
- Finkelhor, D., Vanderminden, J., Turner, H., Hamby, S., & Shattuck, A. (2013). Upset among youth in response to questions about exposure to violence, sexual assault and family maltreatment. *Child Abuse & Neglect*, 38(2), 217-223.
- Finkelhor, D., Hamby, S., Turner, H., & Walsh, W. (2012). Ethical issues in surveys about children's exposure to violence and sexual abuse: Cuevas, CA, & Rennison, C.(in press), *Wiley Handbook on the Psychology of Violence*, Wiley-Blackwell Publishers.
- Foster, J. M., & Hagedorn, W. B. (2014). Through the eyes of the wounded: a narrative analysis of children's sexual abuse experiences and recovery process. *Journal of Child Sexual Abuse*, 23(5), 538-557.
- Gallagher, B. (2000). The extent and nature of known cases of institutional child sexual abuse. *British Journal of Social Work*, 30(6), 795-817.
- Gallagher, M., Haywood, S. L., Jones, M. W., & Milne, S. (2010). Negotiating informed consent with children in school-based research: a critical review. *Children & Society*, 24(6), 471-482.
- Glaser, BG., and Strauss, AL., (2009). *The discovery of grounded theory: Strategies for qualitative research*. Transaction Publishers.
- Goldman, J. D. G. (2007). Primary school student-teachers' knowledge and understandings of child sexual abuse and its mandatory reporting. *International Journal of Educational Research*, 46(6), 368-381.
- Green, L. (2005). Theorizing sexuality, sexual abuse and residential children's homes: Adding gender to the equation. *British Journal of Social Work*, 35(4), 453-481.
- Harcourt, D., & Einarsdóttir, J. (2011). Introducing children's perspectives and participation in research. *European Early Childhood Education Research Journal*, 19(3), 301-307.
- Harcourt, D., Perry, B., & Waller, T. (2011). *Researching Young Children's Perspectives: Debating the Ethics and Dilemmas of Educational Research with Children*: Taylor & Francis.
- Harden, J. (2000). There's no place like home: the public/private distinction. *Childhood*, 7, 43-59.
- Harris, P., & Manatakis, H. (2013). Young children's voices about their local communities. *Australasian Journal of Early Childhood*, 38(3), 68.
- Hartjen, C. A., & Priyadarsini, S. (2012). Institutional Victimization. *The Global Victimization of Children* (pp. 233-270): Springer.
- Hutchfield, J., & Coren, E. (2011). The child's voice in service evaluation: Ethical and methodological issues. *Child Abuse Review*, 20(3), 173-186.
- Jackson, S., Newall, E., & Backett-Milburn, K. (2013). Children's narratives of sexual abuse. *Child & Family Social Work*.
- Jacobs, J. E., Hashima, P.Y. & Kenning., M. (1995). Children's perceptions of the risk of sexual abuse. *Child Abuse & Neglect*, 19(12), 1443-1456.
- James, A. (2007). Giving voice to children's voices: Practices and problems, pitfalls and potentials. *American Anthropologist*, 109(2), 261-272.

- Jamieson, L., & Milne, S. (2012). Children and young people's relationships, relational processes and social change: reading across worlds. *Children's Geographies*, 10(3), 265-278.
- Jernbro, C. A., Eriksson, U.B., & Janson, S. (2010). Young adults' personal views on child abuse. *Nordic Journal of Social Research*, 1.
- Jobe, A., & Gorin, S. (2012). 'If kids don't feel safe they don't do anything': young people's views on seeking and receiving help from Children's Social Care Services in England. *Child & Family Social Work*. 24(6), 471-482.
- Johansson, K., L. , Laflamme, L., & Eliasson, M. (2012). Adolescents' Perceived Safety and Security in Public Space-A Swedish Focus Group Study with a Gender Perspective. *Young*, 20(1), 69-88.
- Jones, L., Davis, A., & Evers, T. (2000). Young people, transport and risk: comparing access and independent mobility in urban, suburban and rural environments. *Health Education Journal*, 59(4), 315-328.
- Kelley, P., Mayall, B., & Hood, S. (1997). Children's accounts of risk. *Childhood*, 4(3), 305-324.
- Kelly, S. (2010). The psychological consequences to adolescents of exposure to gang violence in the community: an integrated review of the literature. *Journal of Child and Adolescent Psychiatric Nursing*, 23(2), 61-73.
- Lambert, V., & Glacken, M. (2011). Engaging with children in research: Theoretical and practical implications of negotiating informed consent/assent. *Nursing Ethics*.
- Lee, M., Crofts, T., Salter, M., Milivojevic, S., & McGovern, A. (2013). "Let's Get Sexting": Risk, Power, Sex and Criminalisation in the Moral Domain'. *International Journal for Crime, Justice and Social Democracy*, 2(1), 35-49.
- Leonard, M. (2006). Segregated Schools in Segregated Societies Issues of safety and risk. *Childhood*, 13(4), 441-458.
- Leonard, M. (2007). Trapped in space? Children's accounts of risky environments. *Children & Society*, 21(6), 432-445.
- Malloy, L. C., Brubacher, S. P., & Lamb, M. E. (2013). "Because she's one who Listens": Children discuss disclosure recipients in forensic interviews. *Child Maltreatment*, 18(4), 245-251
- Mason, J. (2008). A children's standpoint: needs in out-of-home care. *Children & Society*, 22(5), 358-369.
- Mason, J., & Fattore, T. (2005). *Children taken seriously: In theory, policy and practice*: Jessica Kingsley Publishers.
- Mason, J., & Steadman, B. (1997). The significance of the conceptualisation of childhood for child protection policy. *Family Matters*, 46 (Autumn 1997), 208.
- Mayall, B. (2002). *Towards a Sociology for Childhood: Thinking from Children's Lives*: Open University Press.
- Meltzer, H., Vostanis, P., Goodman, R., & Ford, T. (2007). Children's perceptions of neighbourhood trustworthiness and safety and their mental health. *Journal of Child Psychology and Psychiatry*, 48(12), 1208-1213.
- Miller, K. N. (2011). The Relation of School and Campus Violence to Students' Perceptions of Safety and Precautionary Behaviors. Auburn University.
- Milne, S. (2009). Moving into and through the public world: Children's perspectives on their encounters with adults. *Mobilities*, 4(1), 103-118.
- Moore, T., McArthur, M., & Noble-Carr, D. (2008). Little voices and big ideas: lessons learned from children about research. *International Journal of Qualitative Methods*, 7(2), 77-91.
- Moore, T., McArthur, M., & Noble-Carr, D. (2015). Changing things for the better: the use of children's reference groups in social research. *International Journal of Social Research Methodology*. 1-16.
- Moore, T., Saunders, V., & McArthur, M. (2011). Championing choice- lessons learned from children and young people about research and their involvement. *Child Indicators Research*, 4(2), 249-267.
- Morris, A., Hegarty, K., & Humphreys, C. (2012). Ethical and safe: research with children about domestic violence. *Research Ethics*, 8(2), 125-139.
- Morrison, K. (2013). Interviewing children in uncomfortable settings: 10 lessons for effective practice. *Educational Studies*(ahead-of-print), 1-18.

- Mudaly, N. (2009). The ethics of involving children who have been abused in child abuse research. *International Journal of Children's Rights*, 17, 261-281.
- Mudaly, N., & Goddard, C. (2009). The ethics of involving children who have been abused in child abuse research. *The International Journal of Children's Rights*, 17(2), 261-281.
- Nayak, A. (2003). Through children's eyes': childhood, place and the fear of crime. *Geoforum*, 34(3), 303-315.
- Neary, J., Neary, J., Egan, M., Keenan, P. J., Lawson, L., & Bond, L. (2013). Damned if they do, damned if they don't: negotiating the tricky context of anti-social behaviour and keeping safe in disadvantaged urban neighbourhoods. *Journal of Youth Studies*, 16(1), 118-134.
- Negreiros, J. (2010). *Children's perspectives of safety in their neighbourhood*. University of British Columbia, Vancouver.
- Olvera, N., Smith, D. W., Lee, C., Liu, J., Lee, J., Kellam, S., & Kim, J. H. (2012). Hispanic maternal and children's perceptions of neighborhood safety related to walking and cycling. *Health & Place*, 18(1), 71-75.
- Pain, R. (2004). Introduction: children at risk? *Children's Geographies*, 2(1).
- Paine, M. L., & Hansen, D. J. (2002). Factors influencing children to self-disclose sexual abuse. *Clinical Psychology Review*, 22(2), 271-295.
- Patton, MQ (2001). *Qualitative research and Evaluation Methods*. Sage Publications, Thousand Oaks.
- Pearson, M., and Somekh, B. (2003). Concept-mapping as a research tool: A study of primary children's representations of information and communication technologies (ICT). *Education and Information Technologies*, 8(1), 5-22.
- Pfeffer, K. (2005). Rural and urban children's understanding of safety and danger on the road. *Traffic and Transport Psychology: Theory and Application*, 27.
- Potter, G., Briggs, F., & Lushington, K. (2002). What Singaporean teachers and social workers say about child abuse: facts versus myths. *Teaching and Learning*, 23(1), 13-25.
- Powell, MA, Fitzgerald, RM, Taylor, N & Graham, A. (2012). *International literature review: ethical issues in Undertaking research with children and young people*. For the Childwatch International Research Network, Southern Cross University, Centre for Children and Young People, Lismore NSW and University of Otago, Centre for Research on Children and Families, Dunedin, NZ.
- Powell, MA., Taylor, N and Smith, AB. (2013). Constructions of rural childhood: challenging dominant perspectives. *Children's Geographies*, 11(1), 117-131.
- Punch, K. F. (2013). *Introduction to social research: Quantitative and qualitative approaches*: Sage.
- Rogers, M. (2012). 'They are there for you': the importance of neighbourhood friends to children's well-being. *Child Indicators Research*, 5(3), 483-502.
- Roy, A., & McKinnon, G. (2014). *Talking with children & young people about child safe/child friendly organisations*. ACT Children & Young People's Commissioner. Canberra, Australia.
- Sable, M. R., Danis, F., Mauzy, D. L., & Gallagher, S. K. (2006). Barriers to reporting sexual assault for women and men: perspectives of college students. *Journal of American College Health*, 55(3), 157-162.
- Schaeffer, P., Leventhal, J. M., & Asnes, A. G. (2011). Children's disclosures of sexual abuse: learning from direct inquiry. *Child Abuse & Neglect*, 35(5), 343-352.
- Schenk, K., & Williamson, J. (2009). *Ethical Approaches to Gathering Information from Children and Adolescents in International Settings*: Family Health International.
- Schönbucher, V., Maier, T., Mohler-Kuo, M., Schnyder, U., & Landolt, M. A. (2012). Disclosure of child sexual abuse by adolescents: a qualitative in-depth study. *Journal of Interpersonal Violence*, 27(17), 3486-3513.
- Scott, S., Jackson, S., & Backett-Milburn, K. (1998). Swings and roundabouts: Risk anxiety and the everyday worlds of children. *Sociology*, 32, 689-705.
- Silverman, D. (2011). *Interpreting qualitative data: A guide to the principles of qualitative research*. Los Angeles, CA: Sage.
- Spilsbury, J. (2002). 'If I Don't Know Them, I'll Get Killed Probably': How Children's Concerns About Safety Shape Help-seeking Behavior. *Childhood*, 9(1), 101-117.

- Spriggs, M. (2010). Understanding consent in research involving children: The ethical issues. *A Handbook for Human Research Ethics Committees and Researchers*. Melbourne: Children's Bioethics Centre, The Royal Children's Hospital, Melbourne.
- Staller, K. M., & Nelson-Gardell, D. (2005). 'A burden in your heart': lessons of disclosure from female preadolescent and adolescent survivors of sexual abuse. *Child Abuse & Neglect*, 29(12), 1415-1432.
- Swords, L., Greene, S., Boyd, E., & Kerrins, L. (2011). All You Need Is ...: Measuring Children's Perceptions and Experiences of Deprivation. Children's Research Centre, Trinity College. Dublin, Ireland.
- Taber-Thomas, SM., (2013). *Children's reports of deficient parenting and the prediction of concurrent and disruptive behavior problems*. PhD (Doctor of Philosophy) thesis, University of Iowa.
- Turner, K. M., Hill, M., Stafford, A., & Walker, M. (2006). How children from disadvantaged areas keep safe. *Health Education*, 106(6), 450-463.
- Ullman, S. E. (2002). Social reactions to child sexual abuse disclosures: a critical review. *Journal of Child Sexual Abuse*, 12(1), 89-121.
- Ungar, M., Tutty, L. M., McConnell, S., Barter, K., & Fairholm, J. (2009). What Canadian youth tell us about disclosing abuse. *Child Abuse & Neglect*, 33(10), 699-708.
- UNICEF. (1989). *Convention on the Rights of the Child* (Vol. 2015).
- Unrau, Y. A. (2007). Research on placement moves: Seeking the perspective of foster children. *Children and Youth Services Review*, 29(1), 122-137.
- Valentine, G. (1997). "Oh yes I can." "Oh no you can't": children and parents' understandings of kids' competence to negotiate public space safely. *Antipode*, 29(1), 65-89.
- Valentine, G., & Holloway, S. (2001). On-line dangers?: geographies of parents' fears for children's safety in cyberspace. *The Professional Geographer*, 53(1), 71-83.
- Wiebe, D. J., Guo, W., Allison, P. D., Anderson, E., Richmond, T. S., & Branas, C. C. (2013). Fears of violence during morning travel to school. *Journal of Adolescent Health*, 53(1), 54-61.
- Ybarra, M. L., Langhinrichsen-Rohling, J., Friend, J., & Diener-West, M. (2009). Impact of asking sensitive questions about violence to children and adolescents. *Journal of Adolescent Health*, 45(5), 499-507.

Attachment 1: Messages from the children and young people's reference groups

Some of the important messages to emerge from the reference group meetings included:

- *Children and young people's views are unique and valuable.* Participants stressed the fact that although children and young people often felt as though their views were not seen as being as valuable as those of adults, they had something unique to contribute, and being the ones most likely to be affected by safety concerns they should be given opportunities to talk about problems and solutions.
- *Children and young people believed that they should be asked about safety issues.* A number of participants felt that it was important for researchers to talk to children and young people about safety concerns even when they were anxious that this might cause children some discomfort. They believed that the issues were too important for them not to discuss.
- *Children could easily identify things that were safe and unsafe but found it more difficult to define the terms.* Children often used terms like 'protection' and 'secure' and the absence of threats while young people were more likely to talk about the existence of strategies for keeping children and young people safe (i.e. having firm rules).
- *Children could identify feelings that they experienced when safe and unsafe but this varied.* As well as feeling scared and worried, children also identified hopefulness (that things would be done), anger (that they were in that situation) and sadness (that children were sometimes hurt).
- *Young people felt that being unsafe was almost inevitable* when there were other young people or adults around them. Threats included bullying, violence and exposure to erratic behaviour (by people with mental health issues, etc.). Even when it appeared as though their home life was somewhat chaotic, young people differentiated home as being safe and outside of home as being unsafe.
- *Relationships seem vital in ensuring feelings of safety.* Children and young people identified parents and loved ones as being important for helping them to feel safe. Having someone who loves you, looks out for you and protects you was seen as essential across the two groups.
- *Having information about threats was safe and unsafe.* Children and young people identified some things, such as knowing that there were gates around their schools, locks on their doors and ways that adults were protecting them, made them feel more secure but that hearing about dangers in the media made them feel unsafe. It may be that children need to know what threats exist but more importantly what adults are then doing to fix them.
- *Older young people were less optimistic about adults' abilities to protect them.* They were more reliant on being with their peers or others and for being able to protect themselves.
- *Children and young people found it difficult to identify strategies that could be put in place to help them be and feel safe.* Although it may have been that children and young people were tired by the time we spoke with them about strategies for making unsafe institutions (i.e. school) more safe for children and young people, ideas were not forthcoming.
- *Children did not always want their peers to know about what scared them* or what made them feel safe (i.e. their teddy bears) and asked that this not be shared with people outside of the group.
- *Having a mixed-method approach that allowed flexibility helped engage and sustain participants' involvement.* It became quite apparent that some children and young people preferred one-on-one or small-group discussions over large-group discussions and that most were more engaged when

participating in an activity (art, games or drawing). Our proposed methodology allowed children and young people to choose a variety of tools to answer questions.

- *Children and young people stressed the importance of choice* in whether they participate, how they participate and how discussed issues might be shared outside of the group (particularly with parents and teachers). By adopting an ethics-in-practice approach, consent is negotiated throughout the process.

Attachment 2: Conducting the study ethically: Our approach

Inclusion of children and young people in research

There is a strong view that rather than excluding vulnerable children from research, methods should be adopted that respond to and minimise potential harm. The majority of writers believe that excluding vulnerable children from research may render them more vulnerable and place significant limitations on the research as a whole (Aldridge, 2012; Barns, 2011; Finkelhor et al., 2012; Morris et al., 2012; Morrison, 2013). This study did not actively recruit children and young people who had experienced institutional sexual abuse but, instead, recruited children and young people in a variety of locations, with a breadth of experience. Recognising that particular groups of children and young people are more vulnerable, we purposefully recruited groups of young people who were Indigenous, were in out-of-home care or had a disability and provided them opportunities to shape the format of their focus groups.

Understanding potential harms

Within the literature two potential harms are examined at length. Firstly, there is concern that children may experience psychological distress as a result of their participation in the research – either because it might remind them of an upsetting or traumatic life event or because it might introduce to the child subject matter that may be troubling or that the child is not developmentally prepared for.

Literature that quantifies such impacts is limited but generally suggests that psychological distress is unusual and short-lived (Chu, DePrince, & Weinzierl, 2008; Kuyper, de Wit, Adam, & Woertman, 2010; Widom & Czaja, 2006 as cited in Finkelhor et al., 2012). A number of studies have shown that children exposed to traumatic life events experience the research process in ways not dissimilar to children without such exposure and rarely reported feeling upset as a result of their participation (Ybarra, 2009). Finkelhor and his colleagues reported in their 2011 paper that only three per cent of those who expressed feeling distressed as a result of participating in a survey on exposure to violence said that they would not participate again had they known the content (Finkelhor, et al., 2013). They note in another paper that such post-participation testing has not been conducted with younger children, often because surveys and interviews targeting these age groups do not specifically ask children about their trauma experiences (Finkelhor, et al., 2013).

Even still, we approached study cautiously and constantly ‘checked in’ with participants to ensure that they felt safe within the research context. We also worked with referring organisations to ensure that ongoing support was available if children became distressed.

In relation to children being exposed to developmentally inappropriate content, the literature generally suggests that children are often aware of the issues under examination even when adults might think that they are not. Writers suggest that researchers should raise issues in a very broad sense at the beginning of research activities to ascertain whether children might have been exposed to traumatic events or have an opinion on them, and only further explore those topics with which children engage (Finkelhor et al., 2012; Mudaly, 2009). This was a technique that we adopted in this study, also providing children and young people opportunities to ‘opt out’ of conversations.

In the small number of studies that have asked children and young people about topics they have not personally experienced and then asked them to reflect on answering these questions, respondents have generally been more concerned about others than themselves. Some young people in a study focused on children and young people’s exposure to violence reported, for example, feeling uncomfortable about the tone of questions asked (believing them to be accusatory), and expressed concern that their peers may have been exposed to such life events (Ybarra, 2009). Writers in such areas seem to support Finkelhor et al’s (2012, p. 5) observation:

'It may be better, in fact, to formulate the concern as one about how the topics are addressed with younger children, rather than a presumption that the subject material is somehow intrinsically harm inducing.'

Consent

There is a significant body of literature that considers the issues of consent in sensitive research with children and young people (Cater & Øverlien, 2013; Morris et al., 2012; Spriggs, 2010). Consent has been constructed in the safeguarding and abuse literatures as both the initial formal step when children (and often parents) are asked to agree to participate in a study and also the ongoing opportunities for children to opt in and out of the research along the way (Cater & Øverlien, 2013; Dockett & Perry, 2011; Morris et al., 2012; Spriggs, 2010).

Similar to the broader children's research literature, many advocate that parental consent is required due to the fact that children may not be in a position to act in their own best interests, determine the risks associated with participation or feel empowered enough to dissent. However, there is a growing view that in determining who consents, children's researchers must consider the potential implications of seeking parental consent. This would include when children may have been or may continue to be exposed to abuse, violence or other negative life experiences and when parents may feel threatened by the fact that their child is talking to people outside their homes about such situations (Morris et al., 2012). Mudaly and Goddard (2009) and others (M. Gallagher et al., 2010) argue that when parental permission in research with children who have been abused is sought, steps need to be in place to ensure that only the non-offending parent is contacted.

In their review of the domestic violence literature, Morris et al (2012) point to a number of examples where researchers have adopted a passive consent approach: where children are given the choice to participate in studies unless their parent responds to an information letter and says they are unhappy for their child to participate, and others where children have responded to widely advertised invitations to participate in anonymous online questionnaires (Campbell, 2008). These approaches have been used in a range of projects with children, particularly when working in education settings (Bourke, 2013; Gallagher, et al. , 2010).

They observe that there is a growing argument that unless children's decision-making capacities are limited (in the case of children with significant intellectual disabilities etc.), then children's consent may suffice when ethically sound research is being conducted (Alderson & Morrow, 2005). This has had varying degrees of support in countries across the globe (Powell, 2011).

Regardless of whether parents' consent is sought, researchers argue that it is imperative that children are given equal rights in choosing to participate or not – that children should not feel pressured to participate because their parents have agreed. A number of studies have looked at creative ways to seek children's initial consent (Dockett & Perry, 2011; Moore et al., 2011; Spriggs, 2010).

Gaining consent: an ongoing negotiation

One of the key processes when engaging the children and young people in this research project was designed to ensure that they were fully informed about the project and that they gave their consent to participation as willing and empowered co-researchers. The children were offered an initial introduction to the researchers, their role at (or on behalf of) a university and why the project was of importance to them.

Groups with pre-school children

Over several sessions, the children were encouraged to ask questions about the research topic. Some children had an immediate perspective – 'It means you have to be careful' – but others needed more

time – ‘I’m going to have a think about that... It is a scary word’. They were also invited to offer ideas on how they might be involved and the ways in which they could put forward views and opinions to the group – ‘I guess we could draw something?’ The children and the researchers then spent time talking about what the word ‘safe’, or being safe, might mean; what other people (adults and children) had said or written about being safe; and how they might learn about being safe. One child said, ‘I know what undone means (opens her jacket) but I don’t know what unsafe is’, which indicated to the researcher that more time was required for this child to understand what the topic was about. Others were much more familiar, indeed one child said, ‘Oh, my mum teached [sic] me all about this ‘cause this (unsafe) is trouble.’

As the children became familiar with the project’s intention and the roles and responsibilities of a co-researcher (as the children were positioned), they were invited to construct a written affirmation that signified their willingness to participate as a co-researcher. This was generally done through writing their name in the researchers’ journal, and agreeing to give artefacts (or in some cases only copies) to the researchers. One child also suggested that using their real names was appropriate. ‘You need to make sure you tell your friends [at the university] this drawing is from me [pointing to herself] – XX [naming herself]’.³

Groups with primary- and secondary-school-aged children

The children were invited to give their consent to working with the adult researchers each and every time they worked together as researchers. In this way, affirmation of the children’s willingness to participate was not seen as a one-off exercise, but was viewed as an ongoing democratic dialogue.

Gaining consent from primary- and secondary-school-aged children

‘Stop/Go’ cards were distributed to all children and young people. They were invited to use the ‘Stop’ cards at times when they were not willing, happy or able to participate in activities or discussions. None of the participants used the ‘Stop’ cards except to provide feedback on activities. They were asked to indicate whether they thought we should keep (‘go’) or discard (‘stop’) any activities in future workshops.

The purpose and use of voice recorders was explained to children and young people. Facilitators explained that it was important for them to be able to use the recordings but that participants could stop the tape at any time and could ask that particular discussions not be included in transcriptions. Children and young people were also given permission to physically opt out of activities or discussions. Although there was no specified place for these children and young people to go, a number chose to sit or lie in the corner with textas and paper and quietly draw or write. In each of these instances (n=4), children returned to the group at different points and shared in the closing group discussion at the end of the workshops.

At the end of the first workshop, researchers or someone outside of the research team asked whether children and young people were happy to attend the second workshop. Two children decided not to attend the second session. Other young people did not return to the second session but told the referring organisation that this was because they had other commitments and would have returned if they had the chance.

‘Sharing my story’ agreements were used at the end of each session and provided children and young people the opportunity to decide what, if anything, was reported back to parents, teachers, workers or others outside of the room. These agreements were sought in recognition of the fact that adults are often curious about what children say and often ask researchers to provide them feedback. By giving children and young people a choice as to whether information was shared, and

³ As a similar agreement was not sought from older participants we have not included children’s names here.

what and to whom it was provided, confidentiality was not breached and children felt they had some control over their input.

Attachment 3: Responding to safety concerns

This policy has been developed by ICPS staff and draws from their experience of working with children. In developing the policy, ICPS has drawn from other key documents, including 'Ethical Approaches to Gathering Information from Children and Adolescents in International Settings: Guidelines and Resources' developed by the International Center for Research on Women (Schenk & Williamson, 2009).

Developing child-sensitive methodologies

ICPS have developed some expertise in conducting research with children on sensitive matters. In developing methodologies with children and adult experts (in our reference groups), the research team will identify potential risks and talk with stakeholders about how they might best be managed in practice. With strict ethical requirements, ICPS will ensure that our approaches allow children some control over their participation, provide them with enough information to ensure that they are aware of how and why they are participating and how any sensitive issues that might arise will be addressed (see: T. Moore, M McArthur, & D Noble-Carr, 2008b for more). The focus groups and surveys will be developed in such a way that children are not asked about their direct experience but are asked, instead, to comment on the safety of children and young people generally.

Recruitment of appropriately skilled staff

All research staff in direct contact with children (including interviewers and their supervisors) will have completed training and have experience in working with children and young people of a similar age to those involved in this study. They will understand the particular nuances of talking to children of both genders about their experiences and will have a clear understanding of how to respond to safety concerns, when required.

Creating safe and supportive environments with clearly communicated processes

Focus groups will be conducted in two sessions. The first will include time in which the types of things that will be discussed will be negotiated with children, where they will have the opportunity to ask questions about their participation and decide whether they would like to be involved or not.

Staff will build trust and rapport with the children, will have developed pre-existing relationships with organisations who have recruited them for the study and will have kept their parents informed through letters and, where necessary, information sessions. Both parents and children will consent to the child's participation – a consent that can be withdrawn at any time.

During the process of seeking informed consent, research staff will make sure participants clearly understand that if any form of abuse is discovered, confidentiality will be breached and appropriate actions will be taken to protect the child or young person. Previously used 'Children's Rights in Research' tools will be distributed to children who will be briefed on what rights they have and how they might enact these in practice (see: Moore et al., 2011 for more).

Responding to disclosures

Although the focus groups and surveys are set up in such a way as to not seek children's direct disclosures (using one-step-removed and hypothetical approaches), it is possible that children may directly or indirectly disclose experiences of child sexual abuse through this study.

Staff will be trained on how to use 'protective interrupting' in focus groups to encourage children to raise their concerns in a less public and more supportive environment. Staff will let children know that

they have done the right thing in raising their concerns and that they have taken their disclosure seriously.

After focus groups or survey sessions (if completed face to face), staff will 'check in' with participants and ensure that they are feeling safe and to understand more about the child's past and current situation. If the staff are concerned that the child is at risk of abuse or being otherwise hurt, or that appropriate processes for responding to the situation are not in place, they will remind children that the researchers will need to respond – in the way agreed to at the beginning of the session. They will ensure that the child is aware that staff believes the child and that they will now need to do something as they are concerned about the child and other children.

They will work with the child to complete a short summary of the information disclosed and a partner organisation will be engaged to provide ongoing support to the child. Where there are concerns about the immediate safety of the child, staff will make a direct report to the appropriate statutory body and/or police. The Royal Commission will be informed when such reports are made.

Supervision

Research staff will participate in regular supervision sessions where they will discuss any incidents of disclosure with their supervisor: considering what supports are in place, what action has been taken, whether further action is required and how the disclosure has affected the staff member.

Attachment 4: Methods used in focus groups

Focus group #1

Purpose of the first focus group

The first focus group attempted to answer the first three of the project's research questions, namely:

- How do children and young people conceptualise safety?
- What are children and young people's perceptions of safety in institutions?
- What gives rise to these perceptions?

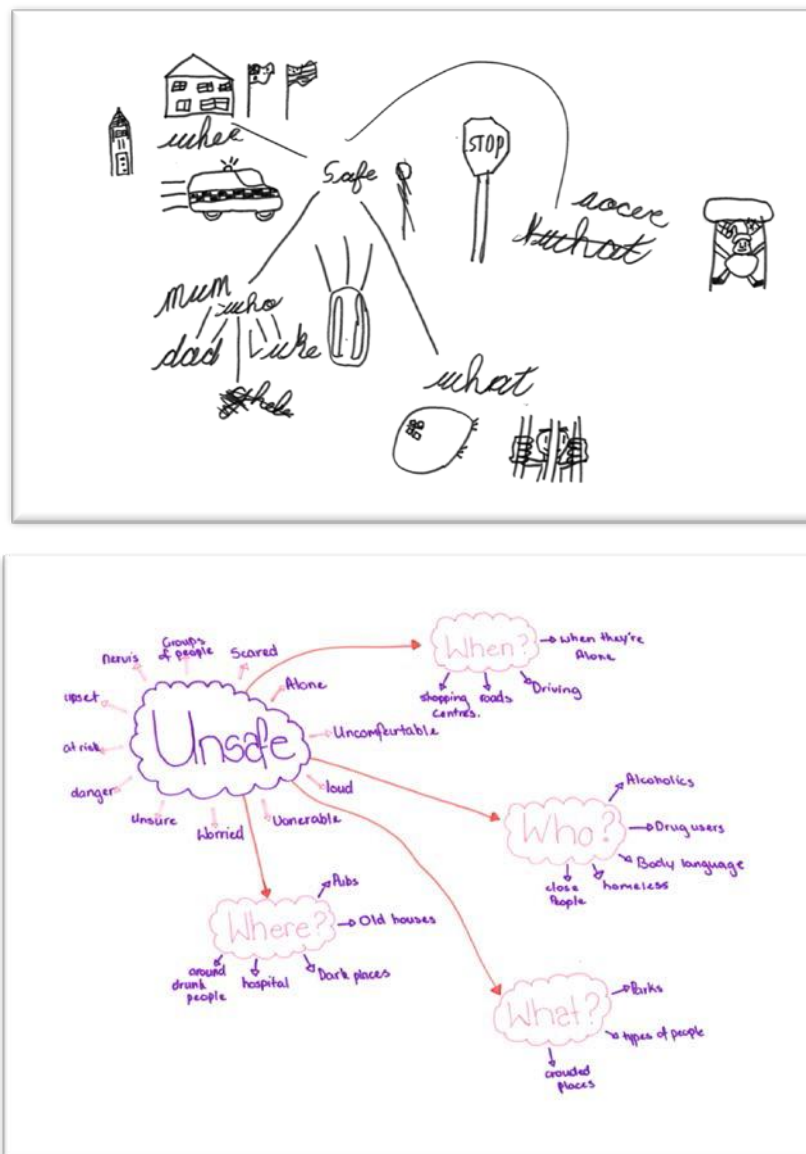
Methods

Tools used in the first focus group included:

1. **Ice-breakers and get to know you activities:** Depending on the age and preference of the groups, activities were chosen to help participants introduce themselves to each other and the researchers. In some groups, children were given 'talking cards', which included incomplete sentences (such as: The best holiday I ever went on was to ...) and were asked to finish the statement. In others, participants were asked to share something that they had on them and to tell the group what the item meant to them (i.e. a mobile phone was important because it helped the participant to stay connected to friends and family). In our group with young people who attended an Aboriginal school, participants drew a shield and were asked to draw images that represented their family, their culture, their talents and something that was special to them. Each of these activities aimed to help the researchers learn more about the group and to set the tone for the overall focus group. Facilitators participated in these activities and shared things about themselves. This helped demonstrate that everyone in the group was welcome to share. As with other activities, children and young people were given permission to share as much or as little as they liked.
2. **Rights cards:** Facilitators began this session by talking to participants about research and the nature of this particular study. As some of the participants had completed their consent forms some time before the group, and because we felt it necessary to remind them of their rights in the research context, we ran a short activity to help children and young people with our ethical approach and to give them examples of what choices they had during their participation. Double-sided cards were printed, with research rights (such as 'privacy', 'choice', 'respect', 'stop participating') on one side and brief summaries of their meanings on the other. The cards were placed on a table with the rights facing up and children were asked to choose a card that they thought they could explain to the group. One by one each of the rights was chosen and children were invited to explain what they thought the right might mean for them in the focus group and to give examples. After each right was explained, facilitators provided additional information, when required, and checked in to make sure that all participants understood what the right meant in practice.
3. **Safe and unsafe maps:** Children and young people were broken into groups of four to six participants (or stayed in the one group if there were less than eight participants) and given A3 sheets of paper and coloured textas. They were asked to draw a cloud in the centre of the page and write 'SAFE' inside. They were then invited to write words or draw pictures that represented the things that came to mind when they thought about safety. They were then asked to draw another cloud in each of the corners and write 'Who?', 'What?', 'Where?' and 'When?' Facilitators took them through a series of questions that ascertained the types of people, places, times and things that were safe and made them feel safe. After each topic

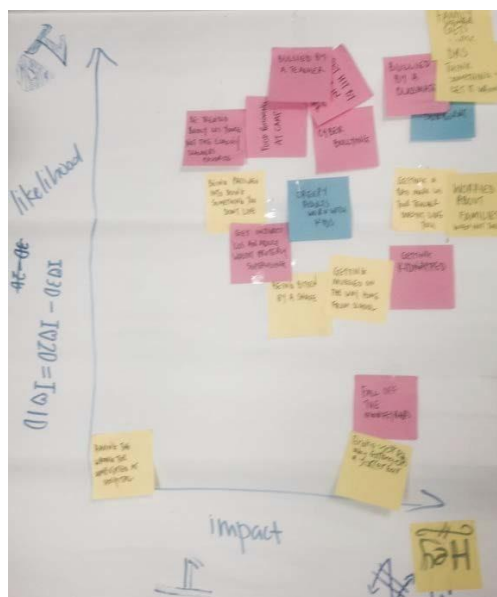
was explored they were invited to share their answers with the group, who discussed the emerging themes. (This was particularly important when children had mostly drawn their responses.) Participants often added ideas to their maps after hearing from each other. Responses were recorded on a digital recorder and on a summary sheet completed by the group facilitator. Small groups were invited to share their answers with the other group in a short plenary session after the activity concluded.

Figure 2: Examples of safe and unsafe maps



4. **Worry graphs:** Children and young people were given a pad of post-it notes and asked (individually or in a group) to write down as many fears, worries and safety concerns that they and others their age might hold – with one idea per page. They were then asked to place each post-it note on a prepared graph, which had 'likelihood' labelled on one axis and 'impact' on the other. Participants were asked to consider how likely it was that the concern would be experienced by children and young people and, if it did happen, how much of an impact it might have on children and young people. For example, facilitators placed 'getting bitten by a snake' halfway up the x-axis and halfway across the y-axis, demonstrating that it was reasonably likely that children might be bitten by a snake and that it could be quite harmful for a child if such a thing happened. Participants placed their post-it notes on

the graph and the group was then given an opportunity to talk about why the note was posted in a particular place and to talk about the issue more broadly. Time permitting, the activity was repeated, with participants being asked to identify safety concerns younger children and parents might have and to again assess the likelihood and impact of that particular fear or threat. Participants were then asked to reflect on how they determined what issues should be noted and whether they were likely and significant or not. This gave us insights not only into how children and young people think about the issues but also how these emerge.



5. **How I'm feeling:** Participants were given a selection of Kimochi toys, each labelled with a different emotion. They were asked to identify what feelings children and young people experience when they are (a) safe and (b) unsafe and then what behaviours they might demonstrate if they were in safe and unsafe circumstances. After lists were generated, participants were then asked to choose a Kimochi toy that described how they were feeling during or after the workshop. Participants who chose negative emotions were discreetly followed up with after the session – either by facilitators or by an adult from the referring organisation.


Figure 4: Kimochi dolls




6. **‘Sharing my story’:** Students were asked to identify the key things that had come out of the workshop and any key messages that they thought the Royal Commission needed to hear in relation to safety and children’s experiences. They were then asked to identify what, if any, things might be discussed out of the focus group setting: by participants, researchers and observers. All participants agreed to only discuss the things that had been identified except if they were feeling uncomfortable – at which time they could talk to a support person if required.

Figure 5: Sharing my story agreement


Who I want to tell




What it is OK to tell them



What I don't want them to know





If you have told the researcher that you or someone else is not safe
or that you've been hurt then the researcher might need to tell someone else.

My signature:

Researcher's signature:

Focus group #2

Purpose of the second focus group

The second activity-based focus group attempted to answer the final two research questions, namely:

- What do children and young people consider is already being done to respond to safety issues and risks in institutions?
- What do children and young people consider should be done to respond to safety issues in institutions?

Methods

Tools used in the second focus group included:

7. **Check in:** Children and young people were invited to reflect on the key things that came out of the first focus group, to reflect on how they were feeling after the session and anything that they would like to add that emerged for them after their participation. Facilitators also used this time to remind participants about their rights.
8. **Energisers:** To re-energise the group (particularly if the second session was held on the same day as the first), a selection of games was conducted with participants. In one group, for example, children sat in a circle and the leader asked everyone who shared a characteristic (i.e. has blue eyes) to swap places. The last person to swap seats stood in the middle and called out another characteristic and the game ensued.
9. **In scope and out of scope:** Facilitators talked about the Royal Commission and its wish to hear from children and young people about what they thought was being done and what could be done to help children be and feel safe in institutions. Facilitators reflected on the 'worry matrixes' and on the key issues that had emerged in the first workshop and, with the group, identified things that were relevant to the Commission. As a group, participants decided on what topics or issues they might consider in this second session.
10. **Action grids:** After deciding on a number of topics or issues, facilitators led the group through a series of questions, including:
 - a. What is the issue?
 - b. What do children and young people in these situations need from adults?
 - c. What do adults currently do that's helpful?
 - d. What do adults currently do that's not helpful?
 - e. What are some of the barriers to them responding well?
 - f. What advice would you give?
11. The discussion was repeated until the chosen topics were exhausted (or the session ran out of time).
12. **Key messages & check in:** Children and young people were asked to identify the key ideas and messages that emerged from the focus group and to propose ideas for the Royal Commissioners. They were then asked (often using the Kimochi dolls) to share how they were feeling.

Attachment 5: Summary tables

Table 3: Unsafe people

Unsafe people are:		Examples
Those who aren't safe	Adults who hurt children (among others)	Paedophiles, child bashers, torturers, serial killers
	Adults who want something from children	Criminals (murderers, thieves), terrorists and paedophiles, kidnappers, child stalkers, and online predators
Those who don't look safe (but who might be)	Adults who look unsafe but might be safe	Adults with tattoos, beards, earrings, who look angry, who look unusual (including clowns, magicians, Santa and those in costumes)
	Adults who don't act in adult-like ways	Adults who were unpredictable or who did not demonstrate adult-like behaviours, including those under the influence of alcohol or other drugs, people with mental health issues, people who were angry, adults with poor boundaries (who got too close or acted inappropriately) and people who acted erratically
	Adults who were 'different'	Adults who were different to adults that children knew were also seen as potentially dangerous – people from foreign countries, homeless people, people with different religions and people who were doing things that adults wouldn't usually do
Those who look safe but aren't	Adults who don't do what they are supposed to	Adults who had a responsibility for children but didn't care about children, didn't listen to them, adults who say they'll do something but don't and adults who were neglectful
	Adults were also unsafe when they used their power or influence against children and young people.	Adults who bullied children, those who displayed favouritism, those who threatened children and made them feel powerless
Other children and young people	Children and young people who were unlike adults	Children and young people who were bullies, teens (for children), older siblings (when they were mean), young people in gangs, young people who were intoxicated, young people who were aggressive, young people who sexually assaulted their peers

Table 4: What makes a place unsafe for children and young people

What is its purpose?	What's in the space?	Who is in the space?	What are people doing?	How does it look?	How does it feel?	Is it child-friendly?
Not for kids (i.e. pubs)	Dangerous objects: glass, needles, dangerous animals etc.	No trusted adults	Everyone looks scared	Messy	Scary	Nothing bright or welcoming
For 'other' people: housing estates etc.	Adult things: alcohol, poker machines, smoking Things that could hurt kids (cars etc. on road) Scary things: dogs, ghosts	Unpredictable adults	People are loud and violent	Disorganised	Uncomfortable	No sign of other kids having been there
		Unsafe adults	Adults are acting weird	Broken things	You don't know how to get out	
		Unsafe teens		Lots of shadows		
		Too many people: easy to get lost	People are fighting	Hard to get out	You're not supposed to be there	Nothing for kids to do
		No one to protect you	You don't know what people are doing or why		Exciting/thrilling	Other kids tell you not to go
		Hardly any or no children	You're going to get hurt (i.e. hospital)		You don't want to be there	Nothing to show that kids feel safe there (paintings, smiley photos etc.)
			You've got no choice/control Potential for bad things to happen (like being abused in public toilets)			

NOTE: Children also were afraid of 'other' places: foreign countries, different cities, different schools etc.

Table 5: Safe things

'Safe things'		Examples
Things that acted to protect them from harm	Things that you look for that suggest you're safe	Locks on doors, gates around schools, security cameras and instructions on what to do in unsafe situations
	Things that protect you	Knives and weapons (which they reported they rarely had on them) but more likely, mobile phones or change to use a payphone to contact someone who could come to their aid Pets
Things that provided them comfort when they were unsafe	Things that you use to take your mind off your worries	Listening to loud music (on iPads), playing computer games or surfing the internet, reading or riding on their bike or skateboard
	Things that helped your discomfort, fears or concerns	Stuffed animals, things that reminded them of people who loved them (like photographs, gifts or mementos) and safety blankets

Table 6: Demonstrating that an institution helps children

Institutions demonstrate their focus on helping children:	Examples
In the way that adults interact with children	Adults are respectful of children; they look and talk to children; they appear comfortable in their interactions.
	Adults tell children about their purpose, what their organisation is doing and why and how children are involved.
	Children are given opportunities to ask questions and to have a say.
When other children and young people act in ways that suggest that they feel safe in that environment	Children appear happy and relaxed and positively engage with adults. They tell each other that they like being there and that there is nothing to worry about.