Sexual Violence Consultation Summary

**Fourth Action Plan of the *National Plan to Reduce Violence against Women and their Children 2010-2022***

# **Summary of Consultation – 27 August 2018**

Community engagement workshops facilitated by ThinkPlace, and report written in collaboration between ThinkPlace and DSS.

*The Department of Social Services acknowledges the traditional owners of country throughout Australia, and their continuing connection to land, water and community. We pay our respects to them and their cultures, and to Elders past, present and emerging.*

# About this document

This material was commissioned by the Commonwealth of Australia to assist in the collection of information from consultation sessions workshops around Australia. The purpose of this material is to summarise consultations held by the Department of Social Services as part of the development of the Fourth Action Plan. This session was facilitated by ThinkPlace.

The Department of Social Services thanks all participants of this discussion for their contributions as part of the development of the Fourth Action Plan. The views expressed in this material do not necessarily reflect those of the Commonwealth, or indicate a particular course of action.

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# Participants

* AIDS Council of New South Wales (ACON)
* Australian Human Rights Commission
* Australia’s National Research Organisation for Women’s Safety (ANROWS)
* Brisbane Rape and Incest Survivors Support Centre (BRISCC)
* Centres Against Sexual Assault (CASA)
* Canberra Rape and Crisis Centre (CRCC)
* Department of Health (WA)
* Department of Justice (NSW)
* Domestic Violence New South Wales
* Domestic Violence Resource Centre Victoria (DVRCV)
* Education Centre Against Violence
* Good Shepherd
* Harmony Alliance
* Healing Foundation
* Immigrant Women's Support Service
* InTouch Multicultural Centre
* Jannawi
* Lifeline
* Ministry of Health (NSW)
* Northern Territory Police
* Rape and Domestic Violence Services Australia (RDVSA)
* Royal Melbourne Institute of Technology (RMIT)
* South Australian Government
* Sexual Assault Support Service
* Scarlet Alliance
* Victoria Police
* White Ribbon
* Women with Intellectual Disability (WWILD)
* Women’s Legal Services (Queensland)
* Women’s Legal Tasmania
* Victim Survivor representative

# Key themes

## Sexual assault within marriage

* Participants highlighted that many people within the judicial system and community do not see sexual assault within marriage as a major issue.
* Sexual assault that occurs within a relationship is often reported much later than domestic violence. The stigma surrounding sexual assault is often seen as a barrier to reporting.
* Although this occurs across the broader community, participants considered the levels of sexual assault in marriage were higher in some communities that are culturally and linguistically diverse.

## Language needs to be relatable

* Most people do not relate to the term 'sexual violence' - victims of sexual assault do not identify with it. Although it is definitional, the terms needs to be relatable for victim survivors.
* The differences in terminology between services and jurisdictions can cause complications.
* In a policy and programmatic sense, there is often a feeling that sexual violence is seen as an ‘after thought’ to domestic violence.

## Children are disproportionately affected

* The system does not adequately focus on children, and young people, who have experienced sexual violence.
* It is problematic that children and young people are considered under the same heading - there is a significant difference between the response for children and young people (i.e. “big differences between the response for a 4 year old vs. a 14 year old).

## Support for students and young people

* The rates of sexual violence for young people are the highest. This has been highlighted through a number of recent reports, including the Personal Safety Survey, the Red Zone report and the Australian Human Right’s Commission Report on Sexual Assault and Sexual Harassment at Australian Universities.
* The supports and programs that are available for students in secondary school are not continued into tertiary education. The absence is even more problematic for international students.

## Any increase in demand cannot be met

* Concerns were raised regarding meeting any additional demand for sexual assault services.
* Current services are already over-extended. Even a 5 per cent increase is not considered feasible by participants.

## Links to other services

* Victims of sexual assault will generally struggle to fully engage with therapeutic support if there are a number of other outstanding issues (i.e. safe housing, food, etc).
* Case management that links with other systems, within trauma based responses, is needed to link with other services to ensure people who have experienced sexual assault have the space to address their trauma.
* There is still a significant disconnection between family violence and sexual violence services.
* Victoria has a state-wide network of funded services to address sexual violence, which go part of the way in linking with other services.
* It was noted that police attending family violence incidents have a number of forensic tools available. However, more tools are needed for police officers to sensitively assist and enquire about sexual assault.
* The Family Court system was considered to provide ongoing access to perpetration and harm for victims of sexual violence within intimate partner violence.

## Women from culturally and linguistically diverse backgrounds

* There is particular difficulty for international students to understand their rights as a victim if they have experienced sexual assault. Information around consent and local laws should be provided to international students.
* There are significant challenges across systems for CALD women to report sexual violence, ranging from the stigma and cultural reasons, through to the inaccessibility of supports due to language or other reasons.
* It was highlighted that some migrant women in employment are particularly vulnerable to sexual assault as they often have limited knowledge of their rights. This is further compounded by their high representation in ‘cash in hand’ jobs.

## Workforce and training

* A range of workforces receive disclosures of sexual assault. However, many are not adequately trained around responding to these disclosures.
* Not everyone who has experienced sexual assault will approach a sexual assault service, so training other workforces is important.
* Other service systems need to be comfortable to talk about domestic and sexual violence.
* A national network and standards and frameworks should be considered for inclusion in the National Plan.

## Women with Disability

* People with disability are much more likely to have experienced sexual assault by multiple people across multiple life stages.
* Although women with disability are frequently identified as people experiencing higher levels of sexual violence; they are often not included in service responses beyond physical accessibility (i.e. tenders for services need to be more specific around addressing violence against women with disability).
* Technology is frequently used for grooming, particularly with younger people with disability.
* There is generally little attention given to adapting or creating information and education for young people with disability.
* Respectful relationships programs need to be created that are accessible to people with cognitive disabilities.
* Services need to fully understand the complexities of sexual assault in women with disability. At the moment, they are seldom helpful or specific in their approaches, and disability compliance is often in name only.

## Sex workers

* Sex workers are very rarely engaged in conversations around sexual violence. However, sexual assault against sex workers is serious and does happen.
* Sex workers often do not feel comfortable reporting to police, even when supported by organisations that help them.

## Research and data

* Strangulation is a major factor in sexual assault. Around 7 per cent of sexual assault involve sexual violence. This is over 20 per cent when assaulted by intimate partner. Western Australia is changing the way questions are asked to factor this in to screening and intake.
* Consideration should be given to having a question around strangulation in the Personal Safety Survey, particularly as it is a major risk factor in both sexual and domestic violence.
* A greater understanding is required around the risks of re-offending of sexual violence. There is research out there and is needs to be better disseminated.
* There is limited research around the advantages of undertaking one on one counselling versus group counselling sessions for offenders.
* There is also more research and data needed around prevalence and impacts of sexual violence for a number of high risk communities, including people who groom people with a disability, women of culturally and linguistically diverse backgrounds, etc.

## Offenders

* Participants highlighted the importance of distinguishing between men and young people with problematic sexual behaviour. With young people it can often be a behavioural issue. A participant indicated that research suggested that 94 per cent of young people with harmful sexual behaviours have experienced family violence.
* It was highlighted that there are a number of research projects underway around perpetrators of domestic, family and sexual violence through Australia’s National Research Organisation for Women’s Safety (ANROWS).
* It was noted that there is a common perception that there is nothing you can do to address perpetrator behaviour (i.e. once a perpetrator always a perpetrator).
* The notion that ‘once a perpetrator always a perpetrator’ is particularly incorrect for young people that have used sexual violence. Research has shown most young people desist post-intervention with the criminal justice system.
* Participants highlighted that it is critical to balance the response for offenders of family violence (ie. be justice or rehabilitation) with risk of re-offending. It was believed that the police spend as much time working with people of low risk, as people who are at a medium and high risk of re-offending (when other approaches such as counselling may be more appropriate for low risk offenders).
* There is an absence for perpetrator programs for sexual violence. However, they should not mix up domestic violence and sexual violence behaviour change programs.

## Alternate responses could hold offenders to account

* The outcome focus at the moment is justice based, and there may be opportunities to expand the number of pathways to hold offenders to account. .
* Some participants raised that there should be more attention on other approaches, including restorative justice and bystander interventions, to increase accountability for offenders who do not receive justice responses. As many victims do not feel comfortable using the justice pathways, this could be a way of having some level of accountability.
* However, other participants also indicated there is a need to strengthen criminal pathways for adult offenders - many victims can’t imagine restorative pathways with their perpetrators as their effects would be re-traumatising. Other options may provide other avenues to manipulate the system.
* It was noted that, should a victim of sexual assault not choose a justice pathway, the perpetrator will often not be held accountable. Other responses may provide alternate avenues of holding perpetrators to account.
* Many perpetrators that are getting away with sexual assault are having no alternative pathways. For most people, the only programs to address problem sexual behaviour is in prison.

# Priority actions

## Specialised focus on sexual violence

* When approaching Fourth Action Plan, sexual violence should be integrated across all priorities. A standalone focus is important, but more should to be done to integrate with responses across the system.
* Additional funding is needed to respond to victims of sexual assault, including building the capacity and capabilities of the current workforce.
* Governments should develop dedicated sexual assault strategies. There is presently an absence across the country both at a Commonwealth and state and territory level.
* The National Plan should draw upon recommendations from the Royal Commission into Institutional Responses to Child Sexual Abuse (e.g. National Centre for Sexual Assault).
* There is a need to design programs in conjunction with victim-survivors and not just consult them through police development. This need to be reflective of the diversity of victim survivors (disability, culturally and linguistically diverse, Aboriginal and Torres Strait).

## Prevention

* Primary prevention activities should take an intersectional approach to addressing attitudes that lead to violence against women. These should be taken across all setting (i.e. beyond schools to workplaces, etc).
* More investment in evaluations around prevention frameworks for sexual violence. There has been some work on national frameworks, but many programs are not properly evaluated and receive short term funding.
* Increased efforts on bystander programs and alternative justice responses are needed to raise accountability where justice approaches are not taken or are inappropriate.
* Legislation regarding sexual violence should be updated to reflect the complexity and what the sector now agrees is best practise, including around consent.
* There needs to be a community discussion around consent, including through healthy relationships programs and primary prevention programs.

## Young People

* Recognise the differences in the needs of young people and children, and ensure age appropriate responses.
* Participants called for a National Taskforce to address the rates of sexual assault on university campuses.

## Evidence

* Family violence has a much broader evidence base than sexual violence. Investment should be made to improve the sexual violence evidence base.
* Building off the National Outcomes Standards for Perpetrator Interventions, there should be specific standards for sexual violence.
* A commitment is needed for ongoing regular reporting across state and territory governments. This will assist to improve the available data and evidence base.
* The Fourth Action Plan should bring together organisations across the country to share lessons – presently the practice across jurisdictions is not shared.

## Complex Forms of Violence

* Reproductive coercion should be addressed as a key form of domestic and sexual violence. This form of violence has significant implications for women and children in the long term.

## Indigenous capacity building

* Build the capacity of the Aboriginal Community controlled sector to address sexual violence.
* A model to address the emotional impacts of violence is needed with a focus on healing at the centre.

## Sexual violence workforce

* The understanding of sexual violence should be increased across a number of workforces outside the specialist sector, including allied health, medical practitioners, domestic and family violence workers, mental health, drug and alcohol, etc.
* Given the significant overlap with family violence and the apprehension for many to report sexual assault, domestic and family violence services need to have greater awareness and understanding of sexual violence.
* Case management is critical to enable wrap around, holistic support for people who have experienced or are at risk of experiencing sexual violence. There is also a need for information around the availability of services and referral processes at a national level.

## Children

* Age appropriate supports are required to support children.
* The Fourth Action Plan should include recommendation 10.1 of Royal Commission into Institutional Responses to Child Sexual Abuse (around sexually harmful behaviour and state-based frameworks).
* Should acknowledge that children with harmful sexual behaviour have very frequently experienced family violence.