



**Sexual Assault
Services Victoria**

YourSAY

Discussion Paper

**What needs
to change?**

**Understanding
sexual violence
in Victoria.**



Welcome to SASVic's YourSay initiative for 2025

Sexual Assault Services Victoria (SASVic) is the peak body for specialist sexual assault and harmful sexual behaviour services in Victoria. We work to promote rights, recovery and respect for victim survivors and other people impacted by sexual violence.

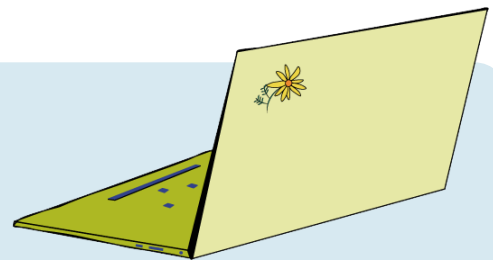
SASVic needs your help to ensure the voices of victim survivors of sexual violence and the broader community are heard loud and clear by our political leaders. SASVic is inviting the community to put forward ideas for policy change, whether on victim survivor rights or how to prevent sexual violence in the first place.

The ideas submitted via our YourSay platform will be reviewed by a panel of victim survivors, who will together select one idea to bring to SASVic. SASVic commits in advance to advocate on the chosen idea in the lead up to the 2026 Victorian state election.

SASVic is launching YourSay because we know that victim survivor perspectives are key to effective action on preventing, responding to and ending sexual violence in Victoria. We believe victim survivors should have the right to inform the systems that impact them and YourSay represents one way in which SASVic is seeking to promote this right.

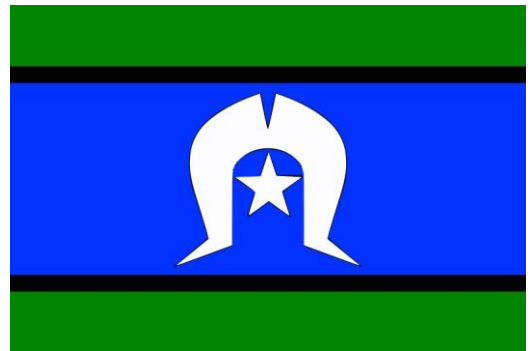
This document aims to provide you with background information that we hope will help in formulating your new idea for preventing, responding to, or ending sexual violence in Victoria.

We invite you to submit an idea via our YourSay platform:
<http://yoursay.sasvic.org.au>



Acknowledgement of Country

SASVic acknowledges Aboriginal and Torres Strait Islander peoples as the Traditional and ongoing Custodians of the lands on which we live and work. We pay respects to Elders past and present. We acknowledge that sovereignty has never been ceded and recognise First Nations peoples' right to self-determination and continuing connection to land, waters, community and culture.



Acknowledgement of victim survivors of sexual violence

SASVic acknowledges victim survivors of sexual violence who we work for every day. We acknowledge the pervasive nature of sexual violence, and the impact that it has on survivors and their communities. We celebrate the powerful advocacy of survivors that is changing systems and policy.



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01

Content of this paper

This paper provides background information regarding sexual violence, including by defining sexual violence and discussing its impact on survivors and society.

Please take care in reading this content if you feel that it will impact you. SASVic represents services that provide counselling support to victim survivors, but SASVic staff are not qualified to offer therapeutic support.

We encourage people reading this document and who wish to submit an idea, who feel they need to, to pre-prepare your own support, including through family and friends.

You can locate your local specialist sexual assault service online here:
peak.sasvic.org.au/servicemap



02

Sexual violence

Sexual violence is a broad term that captures any sexual act or attempt to engage in a sexual act where consent is not obtained or freely and voluntarily given.

It can include any behaviour of a sexual nature that makes someone feel uncomfortable, frightened, intimidated, or threatened. It is sexual behaviour that someone has not agreed to, including where another person uses force, coercion, or manipulation.

Sexual violence does not always involve physical harm or touching. For example, forcing someone to watch pornography or the non-consensual sharing of intimate images or videos are also forms of sexual violence.

Sexual violence is an abuse of power.
Sexual violence is never the fault or responsibility of the victim survivor.

Sexual violence occurs across all age groups. While anyone can experience sexual violence, it is largely a gendered crime – most victim survivors are women and children and most perpetrators are men.

Sexual violence can have serious and long-term negative impacts for people who are subjected to it. It can cause distress, fear and anxiety. It can affect people's relationships and how much they trust others. It can impact people's ability to engage in education and work.¹



03

Examples of sexual violence



Unwanted touching

Pinching, patting, embracing, rubbing, groping, flicking, kissing, fondling, being touched on the breasts, bum or legs, etc.

Sexual harassment

Sexualised comments or behaviour that makes a person feel uncomfortable, intimidated or humiliated.

Rape

A person intentionally sexually penetrates another person without that person's consent. Sexual penetration includes oral, anal and vaginal penetration.

Image-based sexual abuse

Sharing or threatening to share an intimate photo or video of a person without their permission. This can happen in person and online.

'Stealthling'

Intentional non-use, tampering or removal of a condom without permission or knowledge of the other person or people involved.

Grooming

The process of preparing a child or young person for sexual abuse or exploitation. This behaviour can involve the perpetrator manipulating a child to gain their trust, exert power over them to establish secrecy and avoid disclosures.

Obscene gestures

Simulating masturbation in front of a person.

Voyeurism

Being watched doing intimate things without permission.

Unwanted sexual comments or jokes

Comments about a person's body or relationships.

Pressuring for dates or demanding sex

Invitations that turn into threats or not taking no for an answer.

Indecent exposure:

Someone showing private parts of their body or 'flashing' their genitals.

Being forced to watch or participate in pornography

Taking a photo without permission, forcing someone to be on video, or making someone watch a pornographic video.

Offensive written material

Sexualised notes, letters, phone messages, emails, SMS, pictures.

Stalking

Repeatedly being followed or watched by someone.

04

How common is sexual violence?



Sexual violence is common in Australia. Different studies provide us with a sense of how widespread sexual violence is in Australia. Examples of data include that:

14%

of **adult Australians** have experienced sexual violence since the age of 15.¹

20%

of **women** have experienced sexual assault since the age of 15.¹

5.1%

of **men** have experienced sexual assault since the age of 15.¹

We know that women make up to 88 percent of victim survivors of sexual violence² and that one in three girls in Australia have experienced child sexual abuse.³ Almost one in seven boys experience child sexual abuse.⁴ As is the case with adults, girls experience sexual violence more often than boys, although boys do experience sexual violence at high rates in certain contexts, like institutional settings.⁵

Sexual violence is highly under-reported and we also know rates of harm are significantly higher in populations experiencing multiple forms of discrimination or oppression such as Aboriginal and Torres Strait Islander communities, people with disability, and the LGBTQIA+ communities.

For more information, see:

 [ANROWS \(2022\)](#)

A life course approach to determine the prevalence and impact of sexual violence in Australia: Findings from the Australian Longitudinal Study on Women's Health.

 [Australian Bureau of Statistics \(2023\)](#)

Personal safety, Australia: Rates of physical and sexual assault, family and domestic violence economic and emotional abuse, stalking, sexual harassment and childhood abuse.

 [Australian Institute of Health and Welfare \(2024\)](#)

Sexual Violence.

 [Australian Childhood Maltreatment Study](#)

 [Crime Statistics Agency of Victoria \(2024\)](#)

Victim Reports by Principal Offence.

05

Key challenges



There are a wide-range of challenges in preventing and addressing sexual violence. Below are examples of some of the key challenges.

A. Justice system responses – police, prosecutions and courts

The vast majority of victim survivors of sexual violence do not report what has happened to them, to police.⁶ Only about half will seek support from someone (like a friend or family).⁷

Many victim survivors of sexual assault will not report to police because they understand it will be a highly traumatic experience that will have negative personal consequences.⁸ It is widely recognised that victim survivors are essentially “discouraged from reporting sexual abuse because of the secrecy and shame that continues to surround sexual abuse, the gruelling nature of the criminal justice system in sexual assault matters, and knowledge that control over the proceedings resides with the police authorities”.⁹

Victoria Police has specialist sexual assault units, known as ‘SOCITs’ (Sexual Offences and Child Abuse Investigation Teams). These teams are staffed by detectives who are trained to respond to and investigate sexual offences and child abuse. Despite this specialisation, victim survivors of sexual violence who do report to police, have varying experiences with how police respond to and treat them.

“

I, myself, have made a report over a year ago and had a fantastic response.”

I spent so long trying to forget that this thing ever happened, and the fact that the police have taken it so seriously just kind of reiterated to me that not only did it happen, but there’s enough evidence of it happening to cause an arrest.”¹⁰

I had an appointment with a policewoman, to talk about my options as a victim of sexual assault. I turned up at the station for the appointment and was told that the policewoman was out on a job so I had to wait to see a young male constable who I found was belittling, condescending and not at all helpful with providing me with information on how to get a PSIO and the process.”

The Uniformed police and my local police station. I find them to be very dismissive, condescending, unsupportive....”¹¹

The decision to report to police can be profound for a victim survivor. Yet some police provide only a single line explanation sometime later, that charges will not be laid because the evidence is not strong enough. This short explanation can be harmful because to hear that there is not enough evidence, suggests to a victim survivor that they will not or cannot be believed.

Other poor responses experienced by some victim survivors from police include dismissiveness; impatience; insensitive statements that there is "no point" reporting because too much time had passed; and bald statements that, due to limited resources, the case could take years to progress. Rather than offering reassurance and guidance, these sorts of statements reinforce feelings of hopelessness, guilt and shame.

Where police investigations do progress and charges are laid, victim survivors often experience a sense of powerlessness, and are not provided with appropriate updates or the provision of important information. Once the matter progresses to court, victim survivors often need to wait years for the trial to start, and during this time can experience significant stress at the anticipation of the trial and the prospect of being subjected to cross-examination. Victim survivors often report that it is impossible for them to start to move forward in their healing journey during the often years' long wait for the trial to start.

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During that time my life was effectively on pause ... it affected every part of my existence; my relationship, my work ... there was no focus on healing. Just a lot of waiting."¹²

It was really crushing because ... One of the hardest things is looking into the future and knowing that this is still going to be going on for a while."¹³

During a criminal trial a sexual assault complainant is subjected to cross examination, which can be a gruelling process where a defence barrister's role is to cast doubt on the accusations made by the complainant. Barristers differ in their approaches but common tactics – whether permitted by law or not – include intimidation, belittling, discrediting and harassing.

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The original act of violence was essentially replicated, just in a courtroom in front of the prosecution, defence, judge and a jury of 12 people".¹⁴

During the trial, Amira barely slept, and describes being so nauseous that she struggled to keep water down, let alone food. "It was tortuous," she says. "No-one deserves to be put through what I went through".¹⁵

They tried to paint me as unstable and unreliable. I felt de-humanised, silenced and discredited."¹⁶

Then, it's the defence barrister's turn. He says the incident never happened, and that Meagan is not credible.¹⁷



Most people on trial for rape in Victoria are found not guilty. Only 10 per cent of rape incidents that are reported to police are proven in court.¹⁸ A not-guilty finding can leave sexual assault victim survivors devastated and retraumatised, given they have gone through such a long and difficult process.

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When I heard the words not guilty ... my heart just sank instantly and I felt sick," she says.

"It was completely unexpected when I started to watch the video link... I was shaking so hard, hyperventilating. I don't think I'd ever been in as strong a panic."¹⁹

There are a number of complex contributing factors to our low conviction rates, including that sexual violence often occurs in private with no witnesses. Long-held rape myths still persist, including victim blaming (for example, 'look at what she was wearing'; 'she was flirting') and expectations around how a person should react in the aftermath of sexual assault (for example, 'she must have been ok because she spoke to him at work on Monday').

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The circumstances of sexual offending are usually two people on their own, word against word ... and it's often just impossible for a jury to disentangle that."²⁰

In summary, it is well recognised that our system of criminal justice can cause further harm to victim survivors of sexual violence.



What important change could better uphold victim survivor rights during justice processes?

For more information, see:



[VLRC \(2021\)](#)

Improving the justice response system to sexual offences.



[ANROWS \(2020\)](#)

Women's imprisonment and domestic, family, and sexual violence: Research synthesis. Sydney, NSW.



[Hudson, N., Moody, R., McKay, H., & Kaspiew, R. \(2024\)](#)

Understanding adult sexual assault matters: Insights from research and practice: An educational resource for the justice sector. Melbourne: Australian Institute of Family Studies.



[Bolitho, Jane and Freeman, Karen \(2016\)](#)

The Use and Effectiveness of Restorative Justice in Criminal Justice Systems Following Child Sexual Abuse or Comparable Harms. Royal Commission into Institutional Responses to Child Sexual Abuse, Sydney. Available at SSRN: <https://ssrn.com/abstract=2877603>

B. Forensic medical examinations

Some victim survivors of a recent sexual assault choose to undergo a forensic medical examination to collect forensic evidence as part of a police investigation, or before deciding whether to report to police (as a 'just in case' procedure). Evidence from forensic medical examinations can be important for a variety of purposes in the context of a recent sexual assault, including that it can help identify, cross identify or rule out potential suspects; establish if force was used or if someone physically resisted; and provide evidence that sexual penetration likely took place.²¹

In Victoria, forensic medical examinations for adults are undertaken by the clinical forensic medical or forensic nursing team within the Victorian Institute of Forensic Medicine (VIFM) and the Victorian Forensic Paediatric Medical Service (VFPMS) for children.

VIFM aims to make forensic medical examinations available within two hours of request, within metropolitan Melbourne; and within four hours of request, within regional Victoria. In regional Victoria however, significant staff shortages mean that timeframes can be protracted.²²



Victorian victims of sexual assault are being forced to wait in bloodied and soiled clothes, sometimes for more than a day, to see specialist forensic doctors.”²³

Many victim survivors in regional areas end up having to travel significant distances, via hours-long drives, to attend a hospital, where they can end up waiting for hours. Delays in accessing a forensic medical examination contribute to and compound the significant harm experienced by many survivors of sexual violence.

“Just in case” forensic medical examinations are only offered at Monash Medical Centre,²⁴ which means that victim survivors who do not yet know whether they would like to report what happened to them to police, may need to travel a long distance to Monash in order to undergo a forensic medical examination.



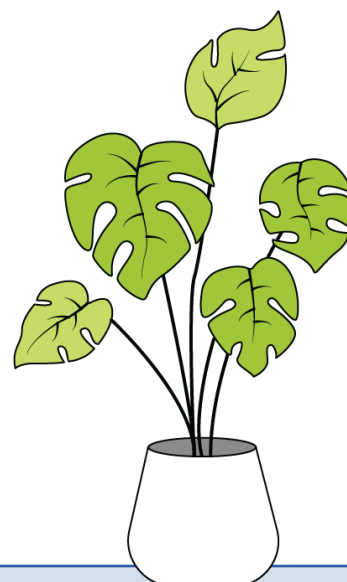
If you have undertaken a Forensic Medical Examination, what should have been done differently?

For more information, see:



[Victorian Law Reform Commission](#)

Improving the Justice System Response to Sexual Offences, Report: September 2021, Chapter 16.



C. Effective funding models for supporting recovery after sexual violence

Specialist sexual assault services provide free counselling and crisis support in the aftermath of historical or recent sexual assault, as well as work with young people under 18 using harmful sexual behaviour. The demand for specialist sexual violence services in Victoria continues to remain at unprecedented levels yet the sector is subject to a funding model which is rigid, inadequate, and provides mostly short-term funding. Our sector delivers support above and beyond the extent to which we are funded. The current funding model is not meeting the scale of the problem of sexual violence in Victoria, nor does it allow specialist services to provide the flexible supports to victim survivors which they have told us they need. The funding model also impacts the workforce, as short-term funding cycles can prevent services from retaining staff on a long-term basis.

A report published in 2024, developed by SASVic, the University of Melbourne, and Women with Disabilities Victoria, focused on better understanding what helps people to recover and heal after sexual violence ('the REACH project', funded by Family Safety Victoria). The REACH project found that survivors want both traditional and non-traditional therapies that address a variety of impacts, and that these are vital to recovery. The interventions survivors valued included mind-and-body or arts-based therapies, and nature-based approaches, because they offer unique mental, physical and social benefits. These services can be particularly helpful for victim survivors who do not find traditional talk therapies useful. The REACH project highlighted that recovery from sexual violence is different for everyone, and there is no single best approach, yet the existing funding model provides support in a one size fits all manner.²⁵

Current funding models and a lack of opportunities for service providers to be trained in different types of services are key barriers that limit the capacity of specialist and non-specialist services to offer alternative approaches.²⁶

Along with funding for training for practitioners to deliver a range of interventions, including trauma-focused interventions and non-traditional therapies, participants suggested providing expanded brokerage funds so that survivors can choose private therapies that fit their needs, and online information for survivors about available services, support groups and other programs.²⁷



What assistance wasn't there for you that would have most helped in your recovery journey?

For more information, see:



[McLindon E., McKenzie M., Webster A., Hargrave J., Turner-Myatt, P., Maltzahn K. & Tarzia L. \(2024\).](#)

'Reclaiming power over my story, my body and myself': Recovery and healing for adult victim survivors of sexual violence. Melbourne: University of Melbourne, Sexual Assault Services Victoria and Women with Disabilities Victoria.

D. Intersectional discrimination

An intersectional approach recognises that different forms of structural inequality can intersect and exacerbate each other. The impacts of sexual violence can also be compounded by other forms of oppression and inequality.²⁸

These include racism, homophobia, transphobia, ageism, and ableism, in addition to oppression or discrimination based on one's refugee or asylum seeker status, having a mental illness, socioeconomic status, gender identity, religion, employment as a sex worker, or having been incarcerated. This means some groups in society experience higher rates and/or more severe forms of violence, and additional barriers to accessing support and safety.

The REACH report (discussed above) made key findings regarding access and equity to services for people with disability.

A significant concern among participants was that there is not enough equity of access to support for Victorian survivors. Ableist and inaccessible responses to survivors with disabilities were endemic across support services and the legal system. Individual disability advocates have made sustained efforts to realise specialist roles and services to improve service accessibility and a small number of [specialist sexual assault services] deliver initiatives such as sexual assault counselling services tailored for people with cognitive and communication disabilities, but much more is required.²⁹

The REACH report contains a number of recommendations aimed at promoting effective responses to support survivor recovery in Victoria. SASVic recognises that systemic discrimination, and the failure of systems to be responsive to our diverse Victorian community, can significantly compound the harms of sexual violence.



How could services be made more equitable and accessible?

For more information, see:

 [McLindon E., McKenzie M., Webster A., Hargrave J., Turner-Myatt, P., Maltzahn K. & Tarzia L. \(2024\)](#)

'Reclaiming power over my story, my body and myself': Recovery and healing for adult victim survivors of sexual violence. Melbourne: University of Melbourne, Sexual Assault Services Victoria and Women with Disabilities Victoria.

 [Chen, Jasmine \(2017\)](#)

Intersectionality Matters: A guide to engaging immigrant and refugee communities in Australia. Multicultural Centre for Women's Health. Melbourne.

 [Carman, M et al.\(2020\)](#)

Pride in Prevention: A guide to primary prevention of family violence experienced by LGBTIQ communities. Rainbow Health Victoria, and La Trobe University.



E. The influence of pornography and non-fatal strangulation

'Pornography' is sexually explicit media (usually online videos) that is designed to arouse the viewer. Material containing child sexual abuse can feature illegally on pornography platforms. Such material is not "pornography" but rather child sexual abuse material ('CSAM'),³⁰ which we discuss below in [Part G](#).

In 2024 SASVic published a paper that reviewed literature on the impacts of pornography and the experiences of the specialist sexual assault sector. Our review concludes that "[t]he research overwhelming indicates that pornography reinforces and condones violence, contributes to sexist attitudes and stereotypical views of gender and that pornography is a risk factor for men's perpetration of sexual violence".³¹

The body of research regarding the impacts of pornography includes studies specifically focusing on pornography's role in influencing strangulation as a sexual practice. Recent research identified that the use of strangulation is "one of the most common types of physical aggression against women depicted in pornography."³² As summarised by Australian researchers, "[a]n analysis of pornography use among young men found that watching pornography was associated with a higher likelihood of being exposed to depictions of strangulation during sex, which in turn predicted a higher likelihood of strangling sexual partners".³³

Strangulation has a range of serious risks, up to and including death. When somebody is strangled as part of either an assault or consensual sexual practice, this can easily be fatal.³⁴ What is often misunderstood, is that injuries can be sustained with only limited amounts of pressure to the neck, less than what is required to open a can of soft drink.³⁵

Experts advise that "[v]ery little pressure on both sides of the carotid arteries for less than 10 seconds is all that is necessary to cause unconsciousness" and that "[b]rain death will occur in minutes if strangulation persists".³⁶

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I just felt the full force of his whole body weight on me," she says. She tapped him on the shoulder to get him to stop. "He assumed my consent was there because we texted about it two days or so earlier."

They then agreed her "safe gesture" would be tapping him and resumed having sex.

"Then pretty much within five seconds or so he was back to choking me. But this time he had my arm pinned down so I couldn't actually do the tapping," she says. "By this point I couldn't stop him".³⁷

SASVic member services report that they are seeing more women who had engaged in otherwise consensual sex, where they had been strangled and had not consented to that strangulation. The influence of pornography on men's violence against women generally and on non-fatal strangulation specifically, is significant and growing.



Do you have ideas on how to reverse this trend?

For more information, see:



[Our Watch \(2020\) Pornography,](#)

Young people and preventing violence against women background paper Melbourne.



[Sexual Assault Services Victoria \(2024\)](#)

Responding to the new normal: exploring the impacts of pornography. Review of the literature and experiences of the specialist sexual assault sector. Sexual Assault Services Victoria, Melbourne, Australia.

F. Technology-facilitated abuse

Technology-facilitated abuse refers to a range of behaviours where digital technologies are used to facilitate both virtual and face-to-face sexually based harms. It can include online sexual harassment, online stalking, image-based abuse, sextortion and sexual coercion that is communicated via digital technologies.³⁸ Technologies used include text messaging,³⁹ social media posts, tracking smart phones and the use of AI to generate fake sexualised images and content.⁴⁰ Technology-facilitated abuse is overwhelmingly gendered, as 96 per cent of perpetrators are male and 93 per cent of victims are female.⁴¹

There are many contexts in which technology-facilitated abuse occurs including by abusive partners, by young people exhibiting harmful sexual behaviour by creating fake sexualised content of classmates, and by perpetrators using AI to create child sexual abuse material. Recent research shows that one in seven people are using technology platforms to sexually harass their colleagues.⁴³

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It was gross, it was disgusting to see something like that happen to people in and around our communities..."

The series of explicit fake photographs was created with AI, using real photos of the students taken from social media, then circulated on Instagram and Snapchat.⁴⁴

Technology facilitated abuse is growing among many areas of life and can cause significant harm to victim survivors.



What could the Victorian Government do to better prevent, regulate and respond to technology facilitated abuse?

For more information, see:



[ANROWS. Powell, A., Flynn, A., & Hindes, S. \(2022\)](#)

Technology-facilitated abuse: National survey of Australian adults' experiences.



[eSafety Commissioner \(2023\)](#)

Technology-facilitated abuse: family, domestic and sexual violence literature scan, Canberra: Australian Government.

G. Child sexual exploitation and abuse

Studies show that 28.5 percent of the population have experienced child sexual abuse before the age of 18.⁴⁵ Children and young people experience sexual abuse and violence in homes, family settings, schools, universities and out of home care. Serious allegations of child sexual abuse occurring in early learning centres is currently causing great distress in the Victorian community, at the time of writing this paper.

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I remember being frozen by these actions and being barely able to breathe. Most of all I remember leaving his office and walking back to my seat thinking everyone was staring at me, knowing what had happened, me being bright red. In later years I started calling that walk the 'walk of shame'".⁴⁶

Many people who have been subjected to violence, including childhood sexual abuse, can and do emotionally recover. However, child sexual abuse can have harmful and enduring impacts. People who have been subjected to abuse in childhood are at particularly high risk of mental health issues, and risky behaviours such as problematic alcohol and drug use, attempted suicide and self-harm.⁴⁷

For more information, see:



[Australian Child Maltreatment Study](#)

The prevalence and impact of child maltreatment in Australia findings from the Australian Child Maltreatment Study 2023 a brief report.



[Childlight \(2024\)](#)

Global Child Safety Institute. Into the Light Index on Child Sexual Exploitation and Abuse Globally: 2024 Report. Edinburgh.



We need a big change to end child sexual exploitation and abuse. Do you have a big idea?



H. Sexual abuse in institutional settings

Sexual abuse that occurs in the context of institutions or organisations including religious settings, schools, early learning centres, aged care, scouts, foster care, out of home care, sporting associations, and armed forces, is common. As well as children, elderly women and people with disability experience high rates of institutionalised sexual abuse.

Adult perpetrators are always responsible for their own actions in sexually abusing a victim survivor.⁴⁸ Adult perpetrators of sexual abuse can be strategic in the way they identify, groom and sexually abuse children, as well as grooming others within the institution.⁴⁹

The Royal Commission into Institutional Responses to Child Sexual Abuse stated that:

Some institutions are more likely than others to enable adult perpetrators and children with harmful sexual behaviours to sexually abuse children, and to make it more difficult for the abuse to be detected and addressed.

The level of risk within a particular institutional context is influenced by the types of activities and services provided, the physical environment, the characteristics of the children in the institution, and, to an extent, organisational management.

Some institutions, such as closed institutions, carry more risk of child sexual abuse than others and these institutions need to be alert to their heightened risk.

Children are more likely to be abused in institutional contexts where the community has an unquestioning respect for the authority of an institution.

Many risk factors exist in contemporary institutional contexts.⁵⁰



Are you familiar with any positive initiatives that schools, clubs, churches, services, or any other organisation, uses to prevent, identify or respond to sexual abuse in institutional settings?

For more information, see:



[The Royal Commission into Institutional Responses to Child Sexual Abuse](#)



[Royal Commission into Aged Care Quality and Safety \(2021\)](#)

Final report: Care, Dignity, and Respect Volume 1 Summary and recommendations, Canberra: Commonwealth of Australia.



[Fileborn, Bianca & Barrett, Catherine \(2021\)](#)

Older women's right to be safe at home and in care, Melbourne: The Council on the Ageing (COTA) Victoria, Australian Research Centre in Sex, Health and Society at La Trobe University, Victorian Women's Benevolent Trust.



[Commission for Children and Young People \(2021\)](#)

Out of sight: systemic inquiry into children and young people who are absent or missing from residential care (Melbourne: Commission for Children and Young People).

I. Sexual violence in the context of family violence

Family violence is any behaviour that occurs within family or intimate relationships that is physically or sexually abusive; emotionally or psychologically abusive; economically abusive; threatening or coercive; or is in any other way controlling or that causes a person to live in fear for their safety or wellbeing. It includes a wide range of behaviours including sexual, physical, emotional, economic, threats, as well as coercive controlling behaviours.

Intimate-partner sexual violence occurs where there have been sexual acts without consent, or where there has been an abuse of power within the relationship (or ex-relationship). It can include rape, any sexual act obtained through fear, coercion or blackmail, image-based abuse including forcing someone to watch or make pornography or threatening to distribute intimate images.

Many of the clients of Northern CASA have experienced sexual assault within the context of family violence. This might be as a child who experienced sexual abuse committed by a family member or as an adult who has experienced sexual assault by an intimate partner. It also includes many clients with a complex history of childhood sexual abuse and multiple instances of sexual assault within a family violence context, as an adult.

A sexual assault worker noted: If he's verbally, emotionally, physically, and financially abusing her, it's highly unlikely he's going to ask her would she like to have sex or take any notice if she says "no".⁵¹

Sexual violence in the context of family violence is very common. Most sexual assaults are perpetrated by a partner or former partner. We do not have a full picture of intimate partner sexual violence in our community and it is often missed, not recognised or reported. Victim survivors may not recognise their experience as sexual assault due to social/cultural myths and misconceptions such as the idea that sexual assault must involve force or that it cannot occur within relationships.⁵³



What can we do better to support victim survivors?

For more information, see:

 [Australia's National Research Organisation for Women's Safety \(2019\)](#)

Intimate partner sexual violence: Research synthesis (2nd Ed.; ANROWS Insights, 08/2019). Sydney, NSW: ANROWS.

 [McDonald, Jasmine B, Gartoulla, Pragma, Truong, Mandy, Tarzia, Laura, and Melissa Willoughby \(2023\)](#)

 [Practice guide](#). Melbourne: Australian Institute of Family Studies.

 [Powell A., Ridgway, A., Hamilton, G., and Heydon, G. \(2023\)](#)

Family Violence and Sexual Harm: Research Report. RMIT University.

 [SASVic & NTV \(2025\)](#)

Intimate Partner Sexual Violence: Knowledge-building for practitioners working with people who use violence, (forthcoming).

06

Inquiries and reports on sexual violence

Below is a list of recent and significant reports that contain recommendations on addressing sexual violence.

 [Victorian Law Reform Commission](#)

Improving the Justice System Response to Sexual Offences, Report: September 2021.

 [Australian Law Reform Commission](#)

Final Report: Safe, Informed, Supported: Reforming Justice Responses to Sexual Violence, ALRC Report 143 January 2025, recommendation 28.

 [Royal Commission into Institutional Responses to Child Sexual Abuse](#)

Final Report.

 [Report of the Board of Inquiry into historical child sexual abuse in Beaumaris Primary School and certain other government schools \(2024\)](#)



07

Government responses



Below is a summary of important reforms that have been implemented by the Victorian State Government.

The Victorian Government is funding a pilot of **"Justice Navigators"**. Justice Navigators will support survivors to understand and exercise their rights, and help them navigate the complex range of support, compensation, recovery and justice options available to them, including by attending court and hearings. They will provide ongoing support to survivors that isn't tied to any one legal pathway or outcome.⁵⁴

The Department of Education has allocated

\$7.4M

over four years to deliver a Safe Socials Program in partnership with SASVic.⁵⁵

Updates to rape and sexual assault laws to incorporate principles of "affirmative consent".⁵⁶

Creation of a specific offence against "stealthing" (removal of or non-use of a condom without consent).⁵⁷

Image-based offences shifted from summary to indictable (more serious) classification.⁵⁸

New jury directions for rape and sexual assault trials that seek to address common rape myths.⁵⁹

Mandatory "ground rules hearings" for serious sexual offence matters, where the communication needs of sexual offence complainants are identified and agreed upon, prior to the main trial.⁶⁰

The right for complainants to appear in and object to applications to admit confidential communications (such as counselling records) in criminal proceedings.⁶¹

Strengthened procedural protections for children and complainants with a cognitive impairment.⁶²

Removing the need for complainants in sexual offence, family violence and stalking matters to be cross-examined for the purpose of a committal hearing.⁶³

08

Recommendations yet to be progressed



The VLRC and ALRC reports contain 91 and 64 recommendations respectively. Only a small number of these recommendations have been progressed to date in Victoria. Below are examples of recommendations that the Victorian Government has yet to progress.

Availability of pre-recording evidence to all complainants in sexual offence proceedings:

Both the VLRC⁶⁴ and ALRC⁶⁵ recommended that all complainants in sexual offence proceedings have the right to pre-record their evidence, if they choose. If adopted, this reform would mean that victim survivors would be able to pre-record their evidence far in advance of the trial, removing the stress associated with waiting years to give evidence and being unable to move forward in their healing journey.

Comprehensive and continual sexual violence training for judiciary, police and lawyers:

Each part of the judicial system currently develops and delivers their own training on sexual violence. This approach is clearly failing, given the poor treatment and experiences of victim survivors. Both the VLRC⁶⁶ and ALRC⁶⁷ have recommended comprehensive training across the justice system, on sexual violence.

The VLRC specifically calls for the training program to be developed in collaboration with sexual violence specialists.

The establishment of independent panels to review police and prosecution decisions not to charge or prosecute:

The VLRC recommended that an independent panel be established that can review all police and prosecution decisions not to proceed with a charge of sexual assault.⁶⁸ The ALRC had a similar recommendation regarding the review of police decisions⁶⁹. This recommendation is aimed at providing the opportunity for an independent assessment of police and prosecution decisions, without removing or limiting the independence and decision making authority of these agencies. Such processes have proven successful in the UK under operation Soteria.⁷⁰

Universal availability of Intermediaries to children and young people and people with communication difficulties:

Intermediaries are communications specialists who assist young people under 18 and people with certain disabilities when they are witnesses in homicide or sexual offence matters. At the moment, they are only available where the proceeding takes place at one of the following court locations: Melbourne, Geelong, Bendigo and Warrnambool and Wodonga. The VLRC recommended expanding the program so that it is available to all witnesses with communication difficulties (not just those with a 'cognitive impairment') and in all court locations.⁷¹ The ALRC also recommendation universal availability of intermediaries.⁷²

Investment in the training of interpreters in sexual and gender-based violence:

Language services enable communication with people who have limited English, are Deaf or hard of hearing and include services where people interpret one language from another, translate written information into a language other than English and from written English into Auslan or audio.⁷³ There is currently a significant shortage of available and appropriately trained interpreters in Victoria (and Australia). The VLRC recommended that the Victorian Government should review arrangements to improve access to safe language services, including training and extending the pool of interpreters.⁷⁴ The ALRC also made recommendations regarding expanding the availability of trained interpreters.⁷⁵



09

SASVic advocacy agenda

SASVic campaigns for Victorian Government action to invest in rights, recovery and respect for survivors of sexual violence.

Our advocacy asks are wide-ranging and can be accessed here:

<https://www.sasvic.org.au/sasvic-campaign>



10

Ideas from you



What would you change? We want to hear from you.

While we hope this document has provided helpful background information, we are hoping that community members will draw on their lived and personal experiences and knowledge to submit new and innovative ideas on preventing, responding to or ending sexual violence in Victoria.

Because the idea ultimately selected by the Victim Survivor Community Priorities Panel will be advocated on during the 2026 state election, your idea needs to be something within the Victorian Government's control. For example, better regulation of pornography and online spaces is, for the most part, within the Federal Government's power and not the State's. Yet State governments can invest in prevention initiatives relevant to the influence of pornography.

Thank you for taking the time to read this paper and we look forward to receiving your idea via YourSay: <http://yoursay.sasvic.org.au>



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