

NSW Sexual Violence Plan 2022-2027.

Full Stop Australia Submission, August 2022.



Full Stop Australia acknowledges the Traditional Custodians of Country throughout Australia, and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to Elders both past and present.

Introduction

Full Stop Australia is an accredited, nationally focused, not-for-profit organisation which has been working in the field of sexual, domestic and family violence since 1971. We offer expert and confidential telephone, online and face-to-face counselling to people of all genders who have experienced sexual, domestic or family violence, and specialist help for their supporters and those experiencing vicarious trauma. We also provide best practice training and professional services to support frontline workers, government, the corporate and not-for-profit sector and advocate with governments, the media and the community to prevent and put a full stop to sexual, domestic and family violence.

Full Stop Australia, as a national service, draws upon the experiences of our counsellors supporting people impacted by sexual, domestic and family violence in different jurisdictions, as well as our clients and other survivor advocates who are part of our [National Survivor Advocate Program](#), to advocate for consistent approaches to family, domestic and sexual violence nationally.

We welcome the opportunity to make comment on the draft NSW Sexual Violence Plan 2022-2027 (**SV Plan**) and the draft NSW Domestic and Family Violence Plan 2022-2027 (**DFV Plan**). Consultations on both plans have been opened simultaneously and we note that we are also preparing a submission on the DFV Plan separately though this submission does discuss both plans.

This submission was prepared by Taran Buckby, Laura Henschke, John Youssef & Ruby Hartley. We would be very happy to provide any further feedback on any aspect of this submission. You can contact us at any time if you have any further questions at info@fullstop.org.au

Consultation

In preparing this submission we consulted with Full Stop Australia's clinical and client services team, clients and survivor advocates and colleagues in the sexual, domestic and family violence sector. We were also guided in the preparation of this submission by the contributions of our colleagues at the NSW Office of the Department of Public Prosecutions Sexual Assault Review Committees.

On 9 August 2022, Full Stop Australia, the Shadow Minister for Prevention of Domestic Violence and Sexual Assault Jodie Harrison MP, and Greens NSW Spokesperson for Women's Rights Jenny Leong MP, hosted the *Voices of Survivors* event in NSW Parliament House. *Voices of Survivors* was organised to provide a roundtable discussion in which survivor advocates could discuss

matters relating to sexual violence in NSW with elected Members of the NSW Parliament (MPs). A representative of the NSW Government, Felicity Wilson MP also attended and spoke on behalf of the Minister for Women’s Safety and the Prevention of Domestic and Sexual Violence.

The discussions stemming from the *Voices of Survivors* roundtable have informed Full Stop Australia’s submission and reinforce the NSW Government’s urgent need to meaningfully engage in further consultation in the preparation for the next Sexual Violence Plan. Survivor advocates were invited to share their views, experiences, and recommendations across matters relating to prevention and early intervention, response, and recovery in a series of panel discussions. The following work summarises the discussions and findings from these discussions in the hope of providing the NSW Government with the lived expertise of those who have been impacted by sexual violence and have navigated the very services, strategies and response pathways which are currently being reviewed.

Full Stop Australia sincerely thanks the survivor advocates who generously shared their insight and experiences. We have heard your voices and have attempted to shine a light on your own individual experiences and expertise to drive the change needed for those impacted by sexual violence.

Summary and Recommendations

This Plan is being finalised at a time when there is a strong national push for improvement in sexual violence prevention and response. On a national scale, [the Australian Government is strengthening criminal justice responses to sexual assault through the Meeting of Attorneys-General \(MAG\)](#). There have also been comprehensive and wide-ranging reviews and/or taskforces into sexual violence in the ACT, QLD and Victoria (with Western Australia to follow shortly). All of these States acknowledge that they are failing victim-survivors of sexual violence and have committed to make broad, sweeping and transformational system changes. Whilst we have seen an increased focus and commitment to addressing domestic and family violence in NSW (which is much needed and warmly welcomed) there has been a substantial corresponding lack of focus and commitment to preventing and responding to sexual violence in all settings. We strongly encourage the NSW Government to enact a SV Plan that is bold, has vision, and most importantly is accompanied by concrete targets. We also strongly encourage the NSW Government to adopt all a number of reforms in the draft DFV Plan that are not otherwise replicated in the draft SV Plan (to be discussed further below). The SV Plan is an opportunity to replicate the leadership the NSW Government showed in the enactment of consent reforms which have subsequently been replicated across many states of Australia.

As a preliminary matter, it should be noted that the public consultation period for this strategy was open for a period of 19 days. This is not an adequate period of time to consult on a strategy

of this significance - a strategy which serves to guide the actions of the NSW Government on sexual violence for the next 5 years. The National Plan to End Violence Against Women and their Children has been subject to extensive and detailed consultation over a period of over 18 months. Given the extremely short timeframe for consultation on the draft SV Plan, we have tried our best to provide as much guidance as possible. However we strongly urge the NSW Government to consider taking further time beyond the closing of the public consultation period to consider feedback from stakeholders - particularly those with lived experience and representatives from marginalised groups.

The NSW Government's response to sexual violence is at crisis point. Recent data from the Australian Bureau of Statistics (ABS) reported that New South Wales (NSW) recorded the highest number of victims of sexual assault since the beginning of collating victims data twenty-nine years ago.¹ Despite the rise in sexual assault reporting, there has been a lack of leadership, investment or consideration of sexual violence survivors and the services providing support. The entire system requires fundamental, systemic and transformational change.

The time has come for real and meaningful change. We cannot wait another 5 years.

We have a number of general comments about the draft SV Plan which we will discuss first. We will then address each pillar of the plan separately (Prevention, Early Intervention, Response, Recovery and Systems Enablers).

General comments

A survivor-centric approach

The draft SV Plan makes reference to acknowledging the voices of victim-survivors but does not articulate how. The voices of victim-survivors must be heard and reflected across all pillars of the plan - prevention, intervention, response and recovery. In Full Stop Australia's consultation many victim-survivors stated that the incorporation of survivor's voices in the draft SV Strategy was **"patchy"** with one survivor highlighting **"[the draft SV Strategy] talks about involving lived experience, but there's many areas where survivors are not included at all."** The SV Strategy must articulate a consistent and practical approach to ensuring that survivors voices' are central to not only the development but also the implementation of the SV Strategy.

Moreover, both the draft SV and DFV Plans must have their own mechanisms for consulting with a diverse range of victim-survivors over the 5 year plan period.

¹ Australian Bureau of Statistics, *Recorded Crimes - Victims 2021*, (28 July 2022).

A state-wide, coordinated, and integrated approach

The SV plan does not articulate a service system framework that is integrated across the range of government, non-government and private services that interface and respond to people at risk of or impacted by sexual violence. The SV Plan needs a “whole of government” and “whole of community” approach across each of its pillars. In parts, there is a singular focus on a particular agency or population group, but it is essential that we don’t set up the framework to work in a piecemeal and siloed manner. Otherwise, we’ll end up with geographical and priority population group gaps and system inefficiencies.

Intersectionality

An important fundamental consideration when recognising and responding to sexual violence is the understanding that each victim-survivor is unique, has differing needs and wants, and that many are subject to compounding forms of disadvantage and structural inequality. The draft SV Plan could better explore such barriers, especially those impacting First Nation peoples, CALD communities and people with disability. FSA strongly supports an intersectional framework which acknowledges the complex, intersecting needs and experiences of victim-survivors and urges the SV Plan to recognise and prioritise the needs of victim-survivors who are:

- Under 18 years of age;
- Identify as Aboriginal and/or Torres Strait Islander;
- Identify as living with a disability or chronic illness;
- Identify within the LGBTIQ+ community;
- Elderly or living in aged care;
- Are from a Culturally or Linguistically Diverse (CALD) background;
- Living on a student, migrant or refugee visa; and/or
- Currently experiencing homelessness.

All these factors significantly influence the experience and needs of victim-survivors navigating both the criminal justice system and recovery pathways. Given this, the SV Plan could better explore the barriers such marginalised communities experience when accessing support. In the consultation with survivor advocates as part of the development of this submission, one victim-survivor highlighted the necessity of an intersectional approach as follows: **“an intersectional approach was mentioned in the draft Strategy but wasn’t integrated throughout... people from different communities have different experiences [of sexual violence and accessing services].”** Whilst the draft SV Plan makes reference to the implementation of roundtables and some engagement of vulnerable communities, it is not consistent throughout. Furthermore, another victim-survivor emphasised the necessity of an intersectional approach, warning that a failure to do so **“perpetuates harmful stereotypes,”** stating **“I want to stop**

the harmful language in the first instance and encourage a conversation on better wording to convey actual intention.”

Additionally the draft SV Plan lacks a necessary focus on protecting and supporting children and young people, which causes concern for FSA as sexual assault prevalence rates are higher for young people, with 63% of reported sexual assault victims under the age of 18.² Moreover, in its current draft form the SV Plan fails to address institutional settings where sexual abuse occurs, such as universities, residential aged care, and homes for people with disability.

As such, FSA urges the NSW Government to recognise the specific needs and priorities of victim-survivors experiencing intersecting barriers, and to ensure the SV Plan carefully and consistently considers and caters for such marginalised communities when establishing the upcoming strategy.

Intersection with priorities strategies and plans

The draft DFV and SV Plans do refer to some intersecting plans and strategies, including the National Plan to end Violence against Women and Children (**National Plan**) and other NSW Plans and Strategies, including the NSW Women’s Strategy 2023-2026. We support the SV and DFV Plan’s emphasis on alignment with the National Plan and in particular the four pillars.

However, we also have the following comments:

- The draft DFV and SV Plans say that they intersect with other NSW Plans and strategies but this is not fleshed out in the plans themselves. The DFV and SV Plans need to incorporate and intersect with all relevant national and state plans and strategies including (in particular) primary health, mental health, and the health of children and young people.
- The draft DFV and SV Plans do not refer or align with a broader human rights framework (as does the National Plan). We suggest that this be incorporated in both plans.
- The draft DFV Plan does not intersect in any meaningful way with the draft SV Plan though this is the experience of many survivors of gender-based violence.
- We have not seen the draft of the NSW Women’s Strategy 2023-2026. We strongly recommend that stakeholders should have the opportunity to see and comment on this draft prior to a finalisation of the DFV and SV Plans.

There are a number of actions being committed in the draft DFV Plan that aren’t being replicated or otherwise included as commitments in the draft SV Plan, but should be.

² Australian Bureau of Statistics, *Sexual Violence: Victimization* (Report, 2021).

We recommend the following actions in the draft DFV Plan be included in the SV Plan as commitments relating to sexual violence (rather than domestic and family violence) and/or otherwise integrated into existing commitments in SV Plan:

Primary Prevention

- *Map and understand the current infrastructure and gaps in primary prevention work targeting NSW residents.*
- *Explore evidence-based options for the prevention of DFV, particularly for at-risk population groups*
- *Evaluate funded prevention initiatives to understand impact and effectiveness, and to improve the evidence base.*
- *Support primary prevention research projects to improve the evidence base.*
- *Identify opportunities to embed gender equality in all primary prevention work including across government, non-government and private sector and community groups, including through the Women in Sport Strategy- Her Sport Her Way 2019-2023.*
- *Continue to build on what we know works in primary prevention.*

Early Intervention

- *Explore opportunities to strengthen frontline workers' capacity to identify, record and respond to DFV in all its forms, including coercive control.*
- *Review the effectiveness and impact of training in the child protection system and identify ongoing training and support needs, including increased Aboriginal and Torres Strait Islander cultural competency training, to better respond to children, young people, and families affected by DFV.*
- *Continue to deliver resources to support religious and multicultural community leaders supporting families at risk of or experiencing DFV.*
- *Progress implementation of Phase 2 of the NSW Health VAN Redesign Program, which strengthens integration between NSW Health Violence, Abuse and Neglect services and the broader health system with a particularly focus on Emergency departments and services responding to alcohol and other drug, mental health, child and family health, priority populations and with interagency partners such as Primary Health Networks.*
- *Progress the goals and objectives of identification and screening in line with the NSW Health First 2000 Days Framework and NSW Health First 2000 Days Implementation Strategy 2020-25.*
- *Work with complementary providers such as financial counsellors and gambling support services to improve identification of and responses to DFV including cross referrals.*
- *Build on what we know works in early intervention, such as therapeutic responses for children and families, including those who have experienced sexual and other forms of violence and abuse, as well as holistic family-centred risk assessment and therapies.*

- *Partner with stakeholders to determine effective early intervention initiatives for men, including young men, displaying coercive behaviour or violence.*
- *Deliver the NSW Health Aboriginal Family Wellbeing and Violence Prevention Program including early intervention activities for Aboriginal and Torres Strait Islander communities that incorporates cultural resilience and promotes healing. Provide coordinated support for young people interacting with the youth justice system who are using or experiencing, or at risk of using or experiencing DFV.*

Response

- *Expand access to specialist DFV case management across the service sector for those who need it most.*
- *Review and map the availability and accessibility of specialist DFV case management services across NSW.*
- *Improve the effectiveness of integrated, cross-agency responses.*
- *Review Part 13A of the Crimes (Domestic and Personal Violence) Act 2007, which enables information to be shared between service providers to ensure victim-survivors receive coordinated supports that meet their specific safety and welfare needs.*
- *Map and understand existing services and gaps for diverse victim-survivors in metropolitan, rural and remote regions across NSW.*
- *Partner with relevant stakeholders to ensure that resources and services for victim survivors with a disability are accessible.*
- *Strengthen support for Aboriginal women in custody who have experienced DFV.*
- *Develop and deliver supports to address DFV against people of diverse sexualities and genders.*
- *Partner with relevant stakeholders to ensure that resources and services for victim survivors with a disability are accessible. Strengthen support for Aboriginal women in custody who have experienced DFV.*
- *Develop and deliver supports to address DFV against people of diverse sexualities and genders.*
- *Trial specialist supports for accompanied children and young people in homelessness services focussing on those who are experiencing or at risk of family violence.*
- *Trial WDVCS hearing support for victim-survivors in DFV related court hearings at all Local Courts.*
- *Expand Audio-Visual Link facilities to additional courts and tribunals, to enable court participants to appear remotely, including sexual offence and domestic violence complainants and other vulnerable witnesses.*
- *Co-design and implement a culturally and linguistically diverse DFV framework for the criminal justice system around best practice principles and how to work with multicultural communities.*

- *Map and analyse existing services for DFV perpetrators in NSW to identify gaps and opportunities.*
- *Develop tools and resources that support the delivery of DFV related perpetrator programs and services that meet the specific needs of perpetrators from diverse backgrounds, including Aboriginal men, CALD communities, people of diverse sexualities and genders, and people with cognitive impairment.*
- *Support the development of Men's Behaviour Change Programs (MBCP) and other community-based interventions for perpetrators that meet the specific needs of perpetrators from diverse backgrounds, including Aboriginal men, CALD communities, people of diverse sexualities and genders, and people with cognitive impairment.*
- *Explore and implement measures to increase uptake and engagement with perpetrator interventions prior to court finalisation or within the first three months of an offence, particularly for young and first-time offenders.*
- *Explore options for perpetrator interventions that reduce reoffending while also prioritising victim-survivor safety.*
- *Develop, deliver, and evaluate targeted responses to young people who use violence.*
- *Support programs that facilitate educational healing and referral to support services in correctional facilities.*

Recovery

- *Improve health responses to DFV to support healing and long-term recovery, including in regional locations.*
- *Support the implementation of the NSW Health Aboriginal Family Wellbeing and Violence Prevention Strategy.*
- *Support the implementation of the NSW Health Integrated Trauma Informed Care Framework.*
- *Partner with organisations to develop and implement support for children and young people experiencing ongoing trauma from DFV.*
- *Explore the establishment of a specialist Aboriginal DFV Court that includes a culturally based residential healing / Men's Behaviour Change Program.*

System Enablers

- *Continue to strengthen information sharing arrangements between government agencies, courts and other providers, including between the DFV, child protection and family law systems.*
- *Implement integrated commissioning models across government, including in regional areas, to enable better integration of responses across the child protection, health, police, education, housing and youth justice systems to minimise re-traumatisation of victim-survivors, reduce duplication and realise efficiencies.*

- *Conduct a workforce census to better understand the DFV sector as well as adjacent sectors that identify and respond to DFV.*
- *Develop a 10-year Industry Plan that provides a sector wide strategy for DFV workforce and industry development.*
- *Work with Aboriginal and Torres Strait Islander experts to develop culturally specific approaches to attract, retain, and support First Nations workers in the DFV service system.*
- *Build the capacity of the community-based sector, particularly Aboriginal service providers and smaller organisations to deliver victim support and perpetrator programs.*
- *Develop a men's behaviour change program Workforce Strategy.*
- *Build the capacity and cultural capability of specialist DFV and mainstream services to:*
 - *Identify, record and respond to coercive control*
 - *Recognise and address the gendered drivers of violence experienced by people of diverse sexualities and gender identities*
 - *Recognise and address the overrepresentation of transgender and gender diverse people as victim-survivors of DFV*
 - *Respond to and support recovery and healing of priority cohorts, including young people, Aboriginal people, and people with a disability*
 - *Prioritise enhancement and capacity building for the following organisations to deliver specialist DFV services:*
 - *Aboriginal Community Controlled organisations*
 - *Aboriginal Community Controlled Health organisations*
 - *Cultural and/or faith-based organisations*
 - *LGBTIQ+ organisations*
 - *Youth-based organisations*
- *Develop a 10-year NSW cross agency DFV Data Strategy to guide the data collection, performance monitoring and reporting of NSW DFV programs; set the direction for the collaborative and safe approach to using and sharing data and insights.*

It is disturbing to Full Stop Australia and to victim-survivors of sexual violence in all settings that there are such disparate commitments between preventing and responding to domestic and family violence and preventing and responding to sexual violence. These plans set the framework and expectations for action over the next 5 years. It is not acceptable that this relative discrimination against sexual violence victim-survivors be continued any further.

Vision

Whilst we appreciate that the draft DFV and SV Plans have a vision, we believe this vision is too broad and not supported by concrete actions and targets. We agree that a community free from violence is the ultimate goal. However, it is not realistic to expect this to occur in 5 years. In the

consultation with survivor advocates as part of the development of this submission, multiple victim-survivors agreed that the five-year vision was not realistic with one survivor stating **“the outcomes have to be achievable and measurable. It is very, very unlikely that in five years NSW will be free from sexual, domestic and family violence.”**

FSA would much prefer an ambitious but realistic and achievable vision that links to concrete targets and actions. For example, for the five-year period, the SV Strategy could aim for "safer communities in NSW represented by a substantial reduction in the prevalence of sexual, domestic and family violence." An associated target could be "a 15% reduction in the self-reported prevalence of sexual violence in all settings" - measured through a NSW sample population survey at the beginning and end of the SV Strategy period.

Outcomes/Actions/Funding

We support the draft DFV and SV Plans seeking to align with the National Outcomes and Evaluation Framework of the National Plan. However, we are concerned that the draft DFV and SV Plans are being released for consultation prior to the National Outcomes and Evaluation Framework being finalised. This makes it difficult for stakeholders to provide any meaningful feedback on outcomes. We note that both plans do seek to incorporate some outcomes, but these outcomes are vague and with no concrete targets or actions attached.

It is important that any commitments to outcomes be subject to consultation. We thus recommend that the DFV and SV Plans be released for a second round of consultation once these commitments have been finalised.

Most importantly, the draft SV Plan is missing any references to funding commitments. This makes it difficult to comment specifically on the SV Plan and understand the extent of each commitment.

Victims Services

We are concerned that despite the recent review of the *Victims Rights and Support Act 2013*, Victims Services is not mentioned in the draft SV Plan. Given this lack of integration, we will briefly address some of the recommendations of our [submission](#) on *Victims Rights and Support* where relevant to the SV Plan.

As a general proposition, we consider the current VSS scheme as needing improvement to be significantly strengthened so that it properly promotes the rights of victims and provides them with adequate practical and psychological support. Many victim-survivors find the VSS system inaccessible and re-traumatising, with specific concerns over the immediate needs support payments (INSPs) and attempts to audit victim-survivors who have access.

Increased focus on aspects of sexual violence

The following aspects of sexual violence are missing from the draft SV Plan:

- Technology facilitated abuse;
- Reproductive coercion;
- Modern slavery;
- Intimate partner sexual violence particularly in the context of coercive control;
- Grooming in the context of sexual abuse of children and persons of 16/adults (for example with persons in special positions of authority); and
- Sexual violence across a range of settings such as schools, universities, workplaces, residential aged care and homes for people with disability.

Primary Prevention

Shift Community Attitudes across all Settings

Creating structural, behavioural and cultural change is essential when working towards preventing sexual violence. Reinforcing the importance of community attitudes, survivor advocates consulted in the *Voices of Survivors* roundtable, raised concern about the prevalence and impacts of negative and sexist community attitudes surrounding sexual violence. The participants discussed how rape myths and sexist gender stereotypes fuel victim-blaming attitudes in the community and deter victim-survivors from reporting. One survivor-advocate explained that misconceptions such as, **"you cannot be raped by your partner"** and that **"the clothes you wear subject you to a greater risk of sexual assault"** are still prevalent in the community and impacted their ability to label their experience as sexual assault. Additionally, gender binaries, and patriarchal understandings of sexual violence still severely impact victim-survivors, and these influences were discussed extensively by the survivor advocates during the roundtable.

A Note on Primary Prevention Approach

It is absolutely essential that the SV and DFV Plans commits developing and implementing a comprehensive state-wide strategy to address the principle drivers of sexual, domestic and family violence throughout out communities. We need to commit to widespread action in all high influence settings, adapted to priority populations, in line with the Our Watch Change the Story Framework - schools and workplaces just two of these settings.

Respectful Relationships Education

There was consensus amongst frontline FSA sexual assault counsellors and the survivor advocates participating in the roundtable discussions that ensuring comprehensive, early and consistent Respectful Relationship Education (RRE) is a crucial step in combating victim-blaming attitudes and encouraging victim-survivors to come forward. However, concern was expressed that if delivered by educators without the specialist expertise, consent education can reinforce victim-blaming attitudes. In the words of one survivor: **“when we discuss consent education - it can be victim blaming even if it is well intentioned. The focus is often on the victim-survivor rather than the perpetrators.”**

Some survivor advocates also raised concerns over the witnessed community pushback to implementing respectful relationship and consent education. In particular, the public resistance against introducing LGBTIQ+ inclusive sex education in schools. It was unanimous that educational programs regarding sexual consent and respectful relationships must effectively and appropriately address the specific experiences of diverse communities. The diverse lived experience of LGBTIQ+, First Nations people, CALD communities, older women, people residing in regional, remote and rural areas, and people living with disability must be centred and incorporated within all RRE and sexual consent programs.

Additionally, survivor advocates spoke to the need to have a clear understanding of the impacts of this education across school communities, highlighting the need to provide evidence of generational change over time to support and evaluate the effect of the whole-of-school approach. Moreover, it became evident that the updated school curriculum which incorporates the key concepts of RRE needs to be approached effectively and safely, whilst building the capacity of all schools and early childhood staff to understand these key concepts.

Outside of specific respectful relationship programs, survivor advocates also discussed the importance of supporting grassroots organisations to facilitate training events and forums aimed at shifting community attitudes regarding sexual violence. By focusing on whole-of-community education and behaviour change strategies, one survivor-advocate stated, **“there is a stronger chance of changing damaging attitudes and behaviours which impact victims”.**

Survivor advocates also reinforced the need for primary prevention to be delivered across the lifespan, noting the influence adults have over young people’s values and attitudes in different settings. As one survivor said: **“We need to expand primary prevention to include adults, not just children... If adults aren’t modelling what children are learning then it won’t promote change.”**

Reinforcing survivor advocates’ concern regarding the prevalence and impacts of community attitudes surrounding sexual violence, recent data from the Australian Bureau of Statistics (ABS) showed that New South Wales (NSW) recorded the highest number of victims of sexual assault

since the beginning of collating victims data twenty-nine years ago.³ The latest data again shows sexual violence victimisation is gendered, with 6 times more female victim-survivors of sexual assault than male victim-survivors.⁴ Of even greater significance, in the period between 2018-19 nearly 97% of sexual assault offenders reported to police are male.⁵ Social narratives of sexual violence, consent and rape myths reflect the broader social and cultural issues of gender inequality in Australian communities.⁶ The 2017 National Community Attitudes Survey showed that a concerning number of Australians still believe that gender inequality is exaggerated and/or no longer a problem.⁷ And whilst legal reform, such as the NSW affirmative sexual consent laws, play a role in addressing these issues by providing clear guidance and offering definitions of consent which reflect respectful relationships, more needs to be done to ensure the community understands consent and to counter misconceptions about rape myths.

RRE is a crucial piece of the puzzle in preventing gender-based violence before it starts,⁸ with schools being key settings to promote respectful relationships, non-violence, and gender equality.⁹ Moreover, whilst the work and advocacy from activists such as Chanel Contos and Teach Us Consent change conversations regarding consent, further commitments from the NSW Government are needed to ensure consent education programs are effective in reshaping the sex education system across NSW schools. A lack of information, education and negative community attitudes impact on victim-survivors' sense of self, interpersonal relationships and their recovery journey.

FSA warmly welcomes the commitment to a NSW Primary Prevention Strategy to prevent sexual violence - we strongly encourage the Government to give the sector and the community sufficient time to consult on this strategy and that the strategy include robust commitments and actions which can be measured to assess effectiveness (in addition to significant investment in primary prevention initiatives).

Finally, we would like to reinforce the importance of all proposed primary prevention actions under the primary prevention pillar - and especially the NSW Primary Prevention Strategy - being aligned with the national frameworks:

³ Australian Bureau of Statistics, *Recorded Crimes - Victims 2021*, (28 July 2022).

⁴ Ibid.

⁵ Australian Institute of Health and Welfare, *Sexual Assault in Australia*, (Report, 28 August 2020).

⁶ Rachael Burgin and Jonathan Crowe, 'New South Wales Law Reform Commission draft proposals on consent in sexual offences: a missed opportunity?' (2020) 32(3) *Current Issues in Criminal Justice*, 346.

⁷ ANROWS, *The National Community Attitudes Survey* (Findings Report, 2017).

⁸ Department of Violence and Injury Prevention and Disability, *Preventing intimate partner and sexual violence against women: Taking action and generating evidence* (World Health Organisation, 2010) <https://www.who.int/violence_injury_prevention/publications/violence/9789241564007_eng.pdf>.

⁹ OurWatch, *Respectful relationships education in schools: Evidence Paper* (2021).

- *Change the Story*: A shared framework for the primary prevention of violence against women and their children in Australia.¹⁰
- *Changing the Picture*: A national resource to support the prevention of violence against Aboriginal and Torres Strait Islander women and their children.¹¹
- *Changing the Landscape*: A national resource to prevent violence against women and girls with disabilities.¹²

FSA welcomes the strengthened commitments to RRE in the SV Plan. In particular, we support the SV Plan’s commitments to addressing RRE in early childhood education and resourcing parents and caregivers to have conversations about sexual consent. However, we recommend that this focus area be strengthened even further by:

- Creating specific RRE roles that are embedded into the Department of Education and Training to support school-based implementation.
- Committing to a strong and embedded RRE program across the education system in NSW, including in early childhood.¹³
- Building the capacity of all school/early childhood staff via training and professional learning, to be able to understand the key concepts related to RRE, curriculum delivery and how to implement a whole-of-school approach effectively and safely, including through responding in a trauma-informed way. Again, it is crucial that these initiatives are informed by an intersectional approach.
- Committing to the evaluation of the impacts of RRE across school communities, to provide evidence of change over time and to support sustainability of the whole school approach.
- Ensuring the NSW Curriculum Reform project looks at the entire syllabus in the context of RRE, not just the PDHPE syllabus. In particular how other parts of the NSW Curriculum might reinforce rigid and harmful gender stereotypes and norms.
- Extends RRE to acknowledge and address children’s access to pornography and counter harmful messages that may be learned when children access this material as recommended in the *Hear Her Voice Report*.¹⁴ Additionally, RRE must include information about the impacts and outcomes of non-consensual sharing of intimate images.

¹⁰ *Change the Story*, Our Watch (Report, 2021), <<https://media-cdn.ourwatch.org.au/wp-content/uploads/sites/2/2021/11/18101814/Change-the-story-Our-Watch-AA.pdf>>.

¹¹ *Changing the Picture*, Our Watch (Report, 2020), <<https://media-cdn.ourwatch.org.au/wp-content/uploads/sites/2/2020/09/20231759/Changing-the-picture-Part-2-AA.pdf>>.

¹² *Changing the Landscape*, Our Watch (Report, 2022), <<https://media-cdn.ourwatch.org.au/wp-content/uploads/sites/2/2022/08/01135647/Changing-the-landscape-AA.pdf>>.

¹³ NSW Women's Alliance, *Action to End Gendered Violence: A Safe State for New South Wales* (Report, August 2022), <https://uploads-ssl.webflow.com/62df981bc453640022be6a2d/63032785a71b1d93e901981d_Full%20Platform%20-%20Action%20to%20End%20Gendered%20Violence.pdf> 16.

¹⁴ Women’s Safety and Justice Taskforce, *Hear her Voice: Report Two, Volume Two* (Report, July 2022).

We further welcome the commitments in the draft SV Plan to:

- *Expand the MakeNoDoubt campaign.*
- *Convene a coalition of sporting organisations and peak bodies focused on sexual violence.*
- *Support co-designed community based prevention projects - non-government and grassroots organisations like FSA are already filling the gap and undertaking their own primary prevention projects which are working. These should be supported and recognised by the Government and specifically referenced in the SV Plan.*

However, we believe that these commitments could be strengthened to include:

- Explicit information about incorporating the voices of the victim-survivors in the development and implementation of primary prevention messages and programs.
- A specific focus on primary prevention in institutional contexts (including aged care) in relation to sexual violence against people with disability and older people. In addition, the primary prevention commitments need to include a focus on sexual violence in religious and faith-based contexts.
- Prevention projects targeted at all educational settings including early childhood centres, VET agencies and universities.
- The convening of a coalition of sporting organisations and peak bodies focused on sexual violence. The coalition commitment could be strengthened and expanded to include representatives from organisations in all settings including cultural and faith based settings, care settings, online environments and media and entertainment.
- An expansion of the MakeNoDoubt campaign tailored to priority populations and high-influence settings. It is imperative that awareness of consent extends beyond young people and is heard across all settings including business, sports, the arts, media, online and in the home. There should also be an awareness campaign about the NSW Sexual Violence Helpline and the [Sexual Assault Reporting Option](#) (SARO).
- Specific references and commitments to supporting evidence-based primary prevention programs and initiatives that have already been developed by organisations working in the sector. See FSA's programs below.
- A commitment to supporting grassroot organisations and communities to facilitate events aimed at shifting community attitudes towards sexual violence. Some examples of this would be student led events being held at universities or events held in sporting clubs.

Due to a previous lack of coordinated investment, organisations like Full Stop Australia have been filling the void and pioneering their own primary prevention initiatives. These primary prevention initiatives sit across government and all non-government, business and community based settings including education, aged care, sport, the arts and media. We develop our own primary

prevention initiatives based on our evidence and expertise gained clinical practice working with survivors of sexual, domestic and family violence and our decades working in the sector.

Full Stop Australia does not receive any government funding for our primary prevention initiatives.

Full Stop Australia delivers a number of primary prevention initiatives including:

- Respectful Workplaces Training – equipping workplaces to better prevent and respond gender-based discrimination, bullying, harassment, and violence.
- Workplace Responses to Domestic and Family Violence – equipping workplaces to better support their employees impacted by domestic and family violence.
- Ethical Leadership in Action – applying a gendered lens to workplace leadership.
- Policy development and review – supporting organisational excellence in preventing and responding to sexual assault, sexual harassment and domestic violence.
- Bystander Intervention – supporting organisations and communities to create safe cultures, free from discrimination, harassment and violence through safe and effective interventions.
- Preventing and Responding to Violence, Abuse and Neglect in Aged-Care and Disability Settings – equipping aged-care and disability services and frontline staff to better prevent and respond to gender-based violence.
- Sex & Ethics for Young People Training – a sexual violence prevention program for young people aged 16-25 navigating consent, helping young people to develop skills they can use to be ethical in their sexual practices.
- Sex, Safety & Respect Training – consent education for university students for decision making in intimate relationships.
- Ethical Pedagogical Practices Training – promoting ethical supervisory relationships between higher degree research supervisors and students.
- Good Night Out - accreditation and training to staff in licensed venues to support them in preventing, and responding to, sexual harassment and assault.

We note that the DFV Plan contains some good commitments in the focus area “*Ensure prevention activities are grounded in evidence*”. We do not see why this could not be done in relation to sexual, domestic and family violence as a whole. We recommend that **all** of these commitments sit across both plans.

Finally, we note that there is a commitment in the SV Plan to progress gender equality under the NSW Women’s Strategy 2023-2026 to address both the drivers and impacts of sexual violence. We have not seen a draft of this strategy and would strongly recommend that stakeholders be given an opportunity to see and comment on this before finalisation of the DFV and SV Plans, especially given the importance of addressing gender equality as a primary driver of gender-based violence.

Sexual Harassment in the Workplace & in Other Settings

As addressed by Respect@Work, gender inequality is the key disparity that drives sexual harassment in the workplace.¹⁵ The Australian Human Rights Commission's National Survey into Sexual Harassment (2018) found that in the last five years, almost two in five women (39%) and just over one in four men (26%) had experienced sexual harassment in the workplace in the past five years. Aboriginal and Torres Strait Islander people were more likely to have experienced workplace sexual harassment than people who are non-Indigenous (53% and 32% respectively), as well as those in the LGBTIQ+ community. Sexual harassment is particularly prevalent in NSW with the Jenkins Review (2020) finding that between 2017-18, Anti-Discrimination NSW received the highest number of sexual harassment complaints of all the state-based agencies.

Survivor advocates reiterated the challenges of reporting sexual harassment within the workplace. There was consensus amongst the participants that disclosures are not safe, with victim-survivors fearing potential repercussions for speaking up. One survivor-advocate spoke to their struggles in speaking up in their organisation which **"normalises sexist behaviour through silencing"**. Critically, many survivor advocates suggested that workplaces are more concerned with mitigating reputational damage than supporting victim-survivors and taking meaningful action to prevent sexual harassment from occurring. One survivor-advocate articulated this lack of support, stating that **"survivors are just a problem that needs to be solved"** with one survivor stating that **"the harm of hearing my manager say it wasn't their problem meant I never said another word about it - ever again."**

There was also discussion around the role of bystanders in the workplace amongst the survivor advocates, specifically speaking to the emotional impacts of bystanders not reporting witnessed incidents of sexual harassment. To navigate this challenge, survivor advocates suggested that workplace-wide education regarding sexual harassment would be ensure bystanders approaches are helpful rather than re-traumatising for the victim-survivor. Furthermore, participants agreed that employers must be equipped to respond to disclosures in a trauma-informed manner and that all employers have a positive duty to prevent sexual harassment within the workplace.

In the draft SV Plan, sexual harassment is addressed only in the early intervention pillar, but note that it cuts across all pillars. The National Plan contains Respect@Work commitments in the primary prevention pillar and as such, for ease of reference, we have discussed our recommendations here.

¹⁵ Respect@Work, *Community Guide 2020*, 19.

We warmly welcome commitments to Respect@Work in the draft SV Plan and all other commitments in the focus area to implement strategies to reduce sexual harassment, but these must be strengthened. We recommend the commitment to Respect@Work in the SV Plan include the following:

- A commitment to expand trauma-specialist sexual violence services to support people impacted by sexual harassment in the workplace in line with Recommendations 53 and 55 of the Respect@Work Report. **These services should also support people impacted by sexual harassment in other settings, such as in educational settings, in sport, entertainment, the arts, and residential service settings.**
- A commitment of positive duty on all employers to prevent sexual harassment within the workplace.
- A commitment to ensure that unions and other representative groups have standing to bring representative sexual harassment claims to court.
- A commitment to ensure all Safe Work NSW staff, workers' compensation bodies, and judicial officers and tribunal members undertake training and education on the nature, drivers and impacts of sexual harassment to inform their work.
- A commitment to develop appropriate Enterprise Bargaining Agreements (EBA) clauses to give effect to Respect@Work. The NSW Fair Work Ombudsman should be required to see these clauses prior to approving a new EBA as recommended in the Listen. Take Action to Prevent, Believe and Heal Report.¹⁶

We note that the Respect@Work taskforce has already been announced so isn't technically a new commitment in the Plan. We strongly recommend that the taskforce include sexual violence services and representatives from NGOs and those with lived experience.

We are unsure why the draft SV Plan references implementation of the *NSW Mentally Healthy Workplaces Strategy* (2017 - updated in 2021 for bushfires and COVID) and the *Code of Practice: Managing Psychosocial Hazards at Work* as an action when the workplaces strategy is a number of years old and therefore, there should already be a plan for implementation. We consider this action to be something that should already be occurring through Safework NSW - rather, we would prefer that the SV Plan look to strengthen and enhance what is already in place with revised strategies that specifically address sexual harassment and support employers in the implementation of these strengthened strategies.

Full Stop Australia recommends that the SV Strategy also commit to:

¹⁶ Sexual Assault Prevention and Response Steering Committee, *Listen. Take Action to Prevent, Believe and Heal* (Report, December 2021).

- Engaging and partnering with trauma-specialist agencies in the sector who are already delivering training like FSA, in addition to the Australian Human Rights Commission, to develop and deliver training for all industries and settings (not just high-risk industries and workplaces) in preventing and responding to sexual harassment.
- Funding organisations like FSA who deliver active bystander training to ensure people are able to prevent and respond to sexual harassment in all settings across NSW.
- Strengthening the regulation of non-disclosure agreements to ensure the public interest benefits of them are maximised, whilst also ensuring the risks and adverse consequences to victims are minimised.
- Ensuring NSW's gender equality strategy addresses sexual harassment and recognises sexual harassment is driven by gender inequality and is a form of gender-based violence.
- Collaborating with local Aboriginal-Community-Controlled-Organisations (ACCO) and other culturally specific organisations to design and implement this strategy.
- Investing in specialist sexual violence services to work with community based agencies and priority population groups.

Early Intervention

We note with great concern that this section of the draft SV Plan contains no focus area or strong commitment to many of the priority focus areas of the National Plan including (but not limited to):

- Reducing the long-term impact of exposure to violence and preventing further abuse - in particular in relation to recovery and healing for children and young people.
- Addressing intergenerational trauma.
- Supporting culturally-safe early intervention family support services.
- Addressing harmful behaviours by children and young people.
- Enhancing perpetrator accountability.

We note that some of the above points are tangentially dealt with in some of the commitments, for example:

- Delivering the NSW Health Aboriginal Family Wellbeing and Prevention Program.
- Implementing strategies to prevent and respond to problematic and harmful sexual behaviours by children.

However, many of these commitments lack focus and concrete actions. The term "implement strategies" is vague and is unclear what strategies these are, where they are coming from or what actions will eventuate from these strategies.

In addition we note the commitment to “convene roundtables to identify priorities and approaches for strengthening sexual violence prevention and response” is not, in our view, an action in and of itself that should be included in a 5-year SV Plan. In our respectful submission, this should have occurred before the finalisation of the SV Plan to determine what actions were to be incorporated and priorities made in the SV Plan. In addition, we would warmly welcome some more specific commitments in relation to the action about “supporting co-designed community based early intervention projects”. The SV Plan should be more specific about how many projects it is supporting. In particular, we would like to see these kinds of commitments be accompanied by specific funding amounts. Furthermore, this should include a clear articulation as to how victim-survivor voices will be included.

We suggest that each of the above mentioned areas comprise their own focus area with specific actions attached. The action items in the National Plan are a good starting point in this regard. We note as well that there are a couple of commitments in the response pillar that might better be placed in the early intervention pillar (The Safe Wayz Program and New Street commitment). Both of those commitments comprise NSW Government commitments under the Fourth Action Plan of the previous National Plan. As such, we would suggest that they may not necessarily be categorised as new commitments under this SV Plan. We also strongly recommend that culturally-specific NGOs and ACCOs be resourced in this pillar to conduct or continue early intervention work.

Therefore, we recommend that the SV Plan commit to the following:

- Build the capacity of services in contact with women and children at risk of experiencing violence, including all frontline workers and other domestic and family violence services, and in particular services to marginalised groups, to better identify and respond to sexual violence.
- Build the capability of those who work with men and boys on addressing and changing their behaviours including through the development of consistent standards.
- Expand the availability of support services for children and young people who use harmful sexual behaviours, beyond the out of home care system to all systems where children and young people might be identified (such as in the education system). This must include NGOs and ACCOs.
- Significant further investments in counselling, therapeutic services and wrap-around services for children and young people who are sexually abused or otherwise exposed to sexual violence. These services would sit as a form of secondary prevention in the form of ongoing or future victimisation.
- Significant further investment in research regarding therapeutic and treatment approaches for children and young people who use harmful sexualised behaviours and/or young offenders.

- Significant further investment in early-intervention family support services for families who have experienced sexual violence.
- Specific commitments in relation to early intervention initiatives to address sexual violence in all institutions (beyond young people in residential aged care) such as people with a disability and older people.

Response

Access to Trauma Specialist Counselling, Care Coordination, Case Management and Court Support

The draft SV Strategy lacks a clear articulation of the service systems which provide support to victim-survivors at the different points along the continuum from crisis through to recovery. The notion of “No Wrong Door” should extend across the range of government, non-government and primary health services which might be an entry point for seeking information and access to services. Further to the articulation of the service system, is a clear commitment to fund services in a sustainable way to ensure a “smooth path” after entering the “no wrong door”.

Survivor advocates at the roundtable discussion reiterated that most people impacted by sexual violence in NSW do not know where to go to for help and cannot access a specialist sexual violence service. They agreed what is needed is a ***“one stop shop that makes it easy to navigate all the services and processes”***.

Indeed, we need to make it simpler and more streamlined for victim-survivors to access critical supports, including through integrated service models which involve proactive referral to trauma specialist sexual violence services. We recommend the NSW government implement a state-wide triage approach through the NSW Sexual Violence Helpline for anyone impacted by sexual violence to access 24/7 for immediate trauma specialist support and connection to localised trauma specialist services operating during business hours. In this way, sexual violence victim-survivors could be assured of a trauma informed response to their disclosure, not having to re-tell their story, and being supported whilst they’re linked in with ongoing wraparound services at the local level.

Victim-survivors stated that being able to find or access services was problematic and re-traumatising, one survivor stated ***“coming from a disabled experience... the survivor is the one who has to pull together a network of support. It is completely on the survivor”*** and another survivor agreeing, stating ***“I was reaching out constantly... but it was downplayed.”*** Other survivors echoed the difficulty in being able to access services with multiple survivors stating the stressful, draining, lonely and traumatising experience it was to

attempt to navigate which services were available to provide support. One survivor, who experienced domestic violence and sexual violence said ***"I was extremely supported in DV. I could not believe there was next to no support for sexual assault."*** Access to services is a critical priority and must be adequately addressed in the SV Strategy to ensure that all survivors of sexual violence can access the support they need to be safe and recover from the impacts of their experiences. Furthermore, survivors expressed their desire for a case management system, similar to WDVCSs/LSSs and the Safer Pathway program.

This extended to support and advocacy in reporting to police and attending court.

"I think having a service to attend the station with victims is vital. At WWYW we used to go to the station with survivors and be there with them. We received good feedback saying it was good to have someone who understood the laws and also wasn't in a uniform or linked to police. However a lack of funding stopped us as we were doing this volunteer."

Not only is access to services a critical priority but also a public awareness campaign of what services are available for support. Many survivors stated that they were unaware of the services available to them, with many survivors never accessing the services (such as Victim Services) available to them.

One survivor in particular noted that she didn't even learn about Victims Services for many years after being sexually assaulted: ***"I was an advocate for 5 years before I learned victims services exists. I'd engaged with so many doctors, psychologists and lawyers before I was finally told about VS."***

Moreover, even those victim-survivors who were made aware of specialist sexual assault services relayed they were told they would need to wait 6-months-to-a-year to access them.

In the words of one survivor, ***"Victims Services offers 20 free sessions but I know survivors who have called 30+ counsellors on that list and none of them have had availability. Victims Services needs to create an availability/booking service so survivors don't need to ring 30+ people before they can book a session."*** Another victim-survivor added: ***"Yes... I've heard similar things about victims compensation, people waiting years just for their application to be processed."*** Still another victim-survivor shared her personal experience as follows: ***"100% agree... There needs to be a better system set up. I personally spent 6 weeks calling over 30 people and eventually I gave up."***

Consequently, many victim-survivors resorted to pursuing counselling through private psychology practices, however, the expense of private therapy continues to be a significant barrier for victim-survivors. Even with a Medicare subsidy under a Mental Health Treatment Plan, victim-survivors are left to foot significant out-of-pocket expenses. One survivor-advocate estimates that **they spent over \$15,000 on counselling in the past 3 years, in a period when they were unable to sustain stable employment because of their trauma**. Victim-survivors should not be forced to choose between affording basic living costs and accessing essential health care.

Addressing this accessibility issue is urgent as sexual assault is the fastest growing crime being reported in NSW. It was the only major offence to show a significant upward trend in the 24 months to June 2021. Specifically, recorded incidents of sexual assault rose 21% year-on-year to June 2021, with children and young people significantly overrepresented when it comes to sexual abuse and assault.¹⁷ Sexual assaults involving victims aged 13 to 20 years accounted for two-thirds of a recent sharp increase in sexual assault rates in NSW.¹⁸ However, despite this upward trend, the NSW Government core funding for the NSW Sexual Violence Helpline has not been increased to cover operational costs beyond counsellor wages, resulting in an increased client demand for a service that cannot answer every call.

Consequentially, survivor advocates at the roundtable spoke to their experience in calling the NSW Sexual Violence Helpline and being left on hold for long periods of time. This is particularly dangerous as several victim-survivors described being in a suicidal state when they reached out for support, with one survivor-advocate sharing, **"when you're sitting in the car and you're unsure whether you will even make it home safe, it is crushing when no one picks up on the other end of the line."** Another survivor-advocate shared this sentiment, suggesting that she would have benefitted from in-patient care due to suicide ideation triggered by her experience of sexual violence. For this survivor-advocate, generational trauma in the home meant she was unable to access adequate support from family, and as a result she was left to live in an unsafe environment without the appropriate trauma-informed support. Addressing this gap is particularly important. As previously mentioned, the largest growing age bracket of victims of sexual assaults are aged between 13 to 20 years, many of whom still live in the family home.

In addition to immediate increases in core funding to the NSW Sexual Violence Helpline to continue providing services, survivor advocates also discussed the critical need for further trauma specialist counselling outreach to regional and remote areas. There are limited specialist sexual violence counselling services that are non-government and based in community settings such as women's health, Aboriginal community controlled organisations or via the primary health setting.

¹⁷ BOCSAR 2021

¹⁸ Ibid.

Concerningly, there are a lack of referral and triage systems for victim-survivors of sexual violence and limited service integration.

The critical role trauma-specialist counselling and support plays for a victim-survivor cannot be overstated. Given the shared views of survivor advocates at the roundtable, the participants felt it was essential that the NSW Government increase the funding to ensure that every person impacted by sexual violence has trauma-specialist support available to them. This includes care-coordination, case management and court support. As one survivor-advocate emphasised, *"we ask victim-survivors to speak out and ask for help, and then when they do no one is there to listen"*. We must ensure that no-one impacted by sexual violence is left waiting for essential trauma-informed support. Additionally, survivor advocates spoke to the expansion of Community Based Counselling Service (CBCS) in women's health, Aboriginal health, and community and neighbourhood centres across the state to ensure universal access. Survivor advocates reiterated that ongoing and consistent support from a trusted practitioner was instrumental to their healing.

Informed by the voices of victim-survivors, Full Stop Australia is calling for survivors of sexual violence to be afforded access to care coordination through Primary Health Networks, and case management and court support through local specialist sexual violence services in NGO settings, similar to Women's Domestic Violence Court Advocacy Services (WDVCAS) and Local Support Services (LSS). We submit that both the Primary Health Networks and Safer Pathway Program infrastructure could be leveraged and extended to include support for people impacted by sexual violence beyond that which occurs in a domestic setting (as discussed further below).

Full Stop Australia also recommends the NSW Government invests in workforce development to ensure frontline staff can identify and respond to sexual violence and complex trauma, manage their own vicarious trauma, and link up with other professionals as part of a community of practice. This should include funding for training and developing a trauma-specialist sexual violence counselling workforce in line with the [NASASV National Standards of Practice Manual for Services Against Sexual Violence](#). Full Stop Australia seeks to be resourced to clinically train, support and mentor trauma specialist counsellors in a range of community settings across the state.

It is noted that Full Stop Australia has already developed and implemented training and resources to support frontline responses to sexual, domestic and family violence, including the following:

- Respectful Workplaces Training – equipping workplaces to better prevent and respond gender-based discrimination, bullying, harassment, and violence.

- Workplace Responses to Domestic and Family Violence – equipping workplaces to better support their employees impacted by domestic and family violence.
- Responding with Compassion – equipping individuals and organisations to respond to disclosures using a trauma informed approach.
- Ethical Leadership in Action – applying a gendered lens to workplace leadership.
- Policy development and review – supporting organisational excellence in preventing and responding to sexual assault, sexual harassment and domestic violence.
- Preventing and Responding to Violence, Abuse and Neglect in Aged-Care and Disability Settings – equipping aged-care and disability services and frontline staff to better prevent and respond to gender-based violence.
- Professional services – help with self care for professionals working in the field of trauma.
- Professional services for psychologists and counsellors – providing professionals with knowledge and skills to respond to vicarious trauma through supervision and debriefing services.
- Understanding and Responding to Complex Trauma – designed and developed for counsellors working alongside clients with complex trauma as a result of sexual, domestic or family violence.
- Vicarious Trauma Training – for psychologists, counsellors and frontline workers, providing them with knowledge and skills to respond to vicarious trauma.
- Vicarious Trauma Management – Comprehensive vicarious trauma management solutions for employers.

FSA thus recommends the SV Plan include:

- The development and promotion of a state-wide triage system of sexual violence services through the NSW Sexual Violence Helpline so that no-one impacted by sexual violence is left waiting for essential trauma support.
- The development and promotion of a state-wide online resource hub and information gateway for anyone impacted by sexual violence to be able to access a wide range of supports and services, including peer support services and practical assistance, with navigation support through the 24/7 sexual violence telephone and webchat helpline.
- An injection of core funding to the NSW Sexual Violence Helpline to ensure the statewide service can meet current and projected increased demand and to meet the needs of priority populations through the delivery of trauma-informed and culturally appropriate services (including though the employment of identified/ priority population counsellors), the development of targeted resources, and the establishment of warm referral pathways.
- A 'no wrong door' commitment that extends beyond NSW Sexual Assault Services to include primary health and NGO services, including specialist sexual violence services and culturally specific services, and which emphasise choice for people impacted by sexual

violence to access the service and support in an environment in which they feel comfortable.

- Expansion of Community Based Counselling Service (CBCS) options for people impacted by sexual violence to access trauma specialist counselling in women's health, Aboriginal health, and community and neighbourhood centres across the state to ensure universal access to affordable trauma-specialist care at the local level.
- A commitment to resource the development and delivery of introductory training in sexual violence identification and response for all frontline workers who assist survivors of sexual violence to work in tandem with DFV training like ECAV training and [DV-Alert training](#) to increase the knowledge, skills and confidence of front-line workers. This must include all key frontline service agencies, including DFV specialist services, health, housing, child and family, youth, disability, aged care, and culturally-specific services for priority population groups.
- A commitment to resource workforce development in the sexual violence sector, including through specialised training for sexual violence professionals on how to respond to complex trauma and manage vicarious trauma, and to establish a community of practice for sexual violence professionals.
- A commitment to resource specialist care coordination teams within the Primary Health Networks, and case management and court support teams operating akin to, or as an extension of WDVCSs and LSSs under the Safer Pathway program.
- A commitment to resource all services who work with victim-survivors of sexual violence to meet the NASASV National Standards of Practice Manual for Services Against Sexual Violence.
- The Plan also needs to include other settings and institutions in the response pillar. All institutions need to be better equipped to identify, respond and refer. This includes workplaces, educational institutions, community organisations and care service settings. It also includes online platforms.

Legal Systems Reform

The justice system is not working for survivors of sexual violence. Despite decades of legislative reform, sexual offences remain under-reported, under-prosecuted and under-convicted.¹⁹ Many victim-survivors find the criminal justice process to be extremely challenging and re-traumatising. Recent evidence and procedural reforms (such as the recent enactment of affirmative consent laws and the introduction of jury directions) will go some way to ensuring the court process is safer and more inclusive for victim-survivors of sexual violence, but much more needs to be done.

¹⁹ NSW Law Reform Commission, 2020

Survivor advocates reiterated the barriers to reporting sexual violence and the failure of the justice system as a whole to deliver safe processes and just outcomes. One survivor-advocate spoke to the continued failures they experienced from the police in reporting and investigating their incident, stating they **"found the police failures and processes extremely retraumatising,"** with another survivor stating **"the justice system responses were rectivimising and retraumatising. They create additional harms if you participate in them."** There was a consensus that if victim-survivors are being encouraged to come forward and disclose their experience of sexual violence, police and judicial responders need to be equipped to respond adequately. One survivor described their devastating experience of reporting sexual violence to the police **"the police didn't even get back to me. They straight up dismissed me."** This was a common theme across the roundtable with many survivor advocates detailing the myriad of challenges they experienced when navigating the justice system, specifically the lack of trauma-informed practice from first-responders, bias from police and a lack of understanding around diverse situations. One survivor concluded by stating **"for me the 'justice' process was worse than the experience itself."**

Survivor advocates spoke extensively to the impacts of the lack of trauma-informed practice across the justice system. There is no sexual violence equivalent to Domestic Violence Liaison Officers. And there is no sexual violence equivalent of WDVCSs or Local Support Services LSSs. Survivor advocates recounted instances where no female police officers were available when reporting sexual violence, and the distressing impact it had on them to retell their experiences to a male officer. One survivor-advocate spoke to the urgent need for law enforcement to collaborate with frontline workers such as social workers and counsellors to better ensure a trauma-informed environment for victim-survivors. Another survivor-advocate spoke to the importance of police and judicial training to be driven by people with lived-experience and specialist sexual violence services and administered through a trauma-informed lens. Survivor advocates also shed light on the additional barriers victim-survivors from marginalised groups face in navigating the justice system. For example, a survivor-advocate discussed the unique experience of sex workers, explaining that **"there is a genuine fear of reporting if you are a sex worker"**. The survivor-advocate recounted several instances where sex workers were charged for other offences when attempting to report sexual violence to police. Additional barriers exist for victim-survivors from migrant and refugee backgrounds who may be reluctant to report due to their visa status, fears of government or police officials, or a lack of knowing what support avenues are accessible for them. Overall, the overwhelming message from survivor advocates at the roundtable was that reporting to police had a traumatising and distressing impact on them as victim-survivors, resulting in many regretting having reported or deciding not to report further instances at all. Victim-survivors should not have to choose between ensuring mental and psychological safety and stability and reporting the incident and pursuing justice.

To further reinforce this message, one survivor-advocate shared an experience where they were discouraged from reporting by a police officer because **“the police could not ensure they could provide sufficient protection for me”** if the perpetrator retaliated. There was a particular concern among survivors around defamation laws with one survivor stating **“many young people don’t really understand it so are scared of being caught up in [defamation laws].”**

Survivor advocates agreed that victim-survivors should be able to report sexual violence without fears of being misidentified as the perpetrator, being refused support, or being charged for separate offences. Police need to start believing victim-survivors as a basic proposition. Crucially, survivor advocates also discussed the challenges of navigating the justice system as a First Nations person. One survivor-advocate discussed the lack of culturally safe reporting mechanisms, explaining that there is an insufficient number of Aboriginal Community Liaison Officers, and they are not provided with adequate support and training. Moreover, access to essential services such as forensics is particularly dire in rural areas where victim-survivors have to travel up to 2-3 hours for an examination. However, even when these services are accessed, survivor advocates spoke to how often these services are not necessarily culturally sensitive, with currently only three Aboriginal forensic officers working across NSW.

The survivor advocates spoke extensively to the challenges of the justice system regarding matters of sexual violence – in the reporting of their assault, the giving of evidence, and in accessing the supports they need through the process. As such, **Full Stop Australia urges the NSW Government to train and support all NSW police officers, prosecutors, and judicial officers to identify and respond appropriately and consistently to sexual violence and provide specialised training for those involved in investigating, prosecuting and determining sexual offence matters to ensure they respond in a trauma-informed and culturally appropriate way. This would involve a commitment from each of these agencies to adopt a trauma-informed model of supporting victims through the process of reporting and giving evidence in criminal procedures. It would also require adequate supervision and support for police officers, prosecutors, and judicial officers, including managing secondary or vicarious trauma. Moreover, by establishing a Sexual Violence Liaison Officers in every Local Area Command, the NSW Government could take steps to ensure the NSW Police Force are meeting the needs of individual communities. As survivor advocates highlighted, liaison officers must also be trained in culturally sensitive practice. Finally, all complainants in sexual violence matters should have automatic access to court advocacy and case management workers, operating similarly to WDVCSs and LSSs, so that they have trauma-informed support throughout the process of reporting and giving evidence in court, as well as linking up with health and other services to support their recovery.**

Ultimately survivor advocates stated the need for a “wrap around service” or “case management” to provide support throughout the justice process.

Full Stop Australia recommends the following additional commitments be included in the SV Plan:

Training and supporting all actors in the justice system to respond to sexual violence

Actors in the justice system refers to employees of the NSW Government service system who interact with or otherwise support victim-survivors including NSW Police, defence lawyers, prosecutors, Witness Assistance Officers, court staff and judicial officers.

- Train and support all actors in the justice system to identify and respond appropriately and consistently to sexual violence and specialised training for NSW Police Officers investigating sexual offences to ensure they respond in a trauma-informed and culturally appropriate way. This would involve a commitment from all actors in the justice system to adopting a trauma-informed model of supporting victims through the process of reporting and giving evidence in criminal procedures. It would also require adequate supervision and support for all actors in the justice system, including managing burnout, compassion fatigue, and secondary or vicarious trauma.
- Establish Sexual Violence Liaison Officers in every Local Area Command to meet the needs of individual communities. As survivor advocates highlighted, liaison officers across the NSW Police force must be trained in culturally sensitive practice. As an initial step, existing Domestic Violence Liaison Officers could be trained to work specifically with survivors of sexual violence.
- Establish a state-wide automatic referral process in the NSW Police Force for sexual assault and sexual harassment matters, including those which occur in non-domestic settings. These should be triaged through the state-wide sexual assault service to local sexual assault services.
- Undertake a review of the translation and interpreting services to ensure they provide appropriate assistance to enable police officers and civilian staff working in its communications centre, and on front counters in police stations to communicate meaningfully with all First Nations peoples, including in relation to sexual violence cases. Currently this is not considered by the *NSW Police’s Aboriginal Strategic Direction Report for 2018-2023*. This review of the translation and interpreting services should also be extended to include CALD communities and ensure appropriate and culturally specific assistance is being provided.
- Partner with community leaders, cultural and faith-based leaders in culturally and linguistically diverse communities and Elders in First Nations communities to co-design and implement local plans to enable people who have experienced sexual violence to come

forward and make a complaint without fear of, or actual retaliation or retribution to them or their families, friends, or supporters.

- Implement ongoing competency-based sexual violence and trauma-informed training across the whole of NSW Police Service organisation, including for frontline police, investigators, communications centre staff and staff working on front counters in police stations. This training must be evidence-based and trauma-informed and supported by professional supervision to ensure learnings are applied by individual officers and staff in practice.
- In consultation with people with lived experience including people from culturally and linguistically diverse backgrounds, LGBTIQ+ people and people with disability, First Nations peoples and legal and service system stakeholders, the NSW Police Force should review and update its operational policies and procedures about the investigation of sexual violence cases.
- In consultation with the NSW Police Service and the Office of the Director of Public Prosecutions, the NSW Government must establish a clear, robust, transparent and easily accessible internal 'right to review' process of police and prosecutorial decisions for victim-survivors of sexual violence.

More significant commitments to improving the criminal justice response to sexual violence:

- Commit to specific actions under the [MAG Work Plan](#) to Strengthen Criminal Justice Responses to Sexual Violence including:
 - Reviewing the criminal offences and legal definitions (including consent) relating to sexual offending in the context of the unique characteristics of each jurisdiction's legislative framework and criminal justice system and progressing and implementing appropriate reforms.
 - Implementing reforms which enable greater admissibility of tendency and coincidence evidence in child sexual abuse matters, and apply these changes to sexual offence proceedings involving adult victim-survivors.
 - Enact legislative protections for vulnerable witnesses giving evidence in criminal proceedings as well as victim-survivors of sexual offences.
 - Develop a national approach to education and training to foster a trauma-informed, shared understanding among judicial officers, legal and justice sector professionals of the common myths and misconceptions about sexual assault.
 - Commit to improving victim-survivors' understanding of, and access to, legal assistance and resources, including specialised legal services. Further consider the merits of independent victim-survivor advocates and other existing models of support operating domestically and internationally.

- Review opportunities to provide tailored and accessible support to victim-survivor witnesses who require communication assistance or other non-legal services, including witness intermediary schemes, interpretation and translation services, or assistance animals.
- Commit to improving access to, and the operation of, audio visual link technologies, court support resources, specialist court facilities, and other available capabilities.
- Coordinated and collective annual reporting on relevant actions advanced by jurisdictions, either collectively or individually, to provide MAG and the public with greater visibility of efforts across Australia.
- Strengthen national datasets, share research and learnings (including via the National Working Group on Criminal Justice Responses to Sexual Assault), and commission academic research to build a shared evidence base that informs best practice policy development, implementation, and evaluation.
- Commit to all recommendations arising from the NSW Bureau of Crime Statistics and Research project into experiences of complaints of sexual offences within the criminal justice system.
- Working in tandem with the MAG Work Plan and NSW BOCSAR commitments, the implementation of further evidence and procedural reforms to apply universally to all sexual violence cases including:
 - the right to closed courtrooms;
 - access to legal representation
 - the ability to give evidence remotely
 - audio-visual recording of evidence-in-chief which can be used in any re-hearing or subsequent proceeding,
 - strengthening protections against cross-examination and;
 - access to support persons.
- A commitment to expansion of the current Child Sexual Offence Evidence Program (CSOEP) to be state-wide and with universal access to child sexual abuse complaints throughout NSW, and extend this to adult sexual offence complainants.
- Develop and implement ongoing professional development and vicarious trauma support for experts who may be required to prepare reports and give evidence in criminal proceedings for sexual offences.
- Expand forensic units across the state to ensure universal availability of trauma-informed and culturally appropriate forensic examinations across NSW. This would also involve the employment of culturally appropriate forensic examination staff so that Aboriginal and Torres Strait Islander victim-survivors have greater access to culturally appropriate forensic examinations. High-quality forensic medical services must be available to all victims of sexual violence across NSW. These services must all be trauma-informed and culturally competent.

Significantly strengthen responses to violence in institutional settings

- Commitment to the introduction of mandatory reporting of sexual assault complaints in all institutional care settings
- Develop a trauma-specialist survivor led response to disclosures.

Victims Services

- Commit to implementation of all recommendations arising from the Victims Rights and Support Act 2013 to improve the Victims Support Scheme.
- Commit to implementation of all recommendations to improve the Victims Support Scheme as outlined in our [submission](#) to the review.

Reforms to civil laws

- Reform defamation laws to ensure adequate protection of freedom of speech in cases of serious investigative journalism where the subject of the reporting may not want a matter exposed, and to introduce a standard direction or presumption in favour of confidentiality and suppression or non-publication of witness details in any defamation court proceeding where the defamatory material includes allegations of sexual harassment.
- Reform civil procedure to protect alleged victims of sexual harassment who are witnesses in civil matters, such as having the proceedings conducted in a closed courtroom, giving evidence from a remote room, having their evidence in chief be audio-visually recorded prior to the hearing, having an audio-visual recording of their evidence during the hearing be re-used in any subsequent proceedings, being protected from direct cross-examination by a self-represented party, and having a support person present while giving evidence.

Recovery

The impacts of sexual violence are far-reaching for the individual and the community. Impacts for individuals include relationship breakdown, financial and housing insecurity, mental and physical injuries and ill health, substance abuse issues, complex trauma, and disrupted social and economic engagement.²⁰ More broadly, sexual, domestic and family violence also impacts upon the wider community, placing greater strain on families, workplaces, social, health and justice service systems, with one estimate stating gendered violence costs the Australian economy over 22 billion dollars each year.²¹

As already addressed, there are currently significant funding gaps for long-term trauma specialist counselling and care navigation for people who have suffered from sexual violence in NSW but

²⁰ AIHW, Family, domestic and sexual violence, Australian Institute of Health and Welfare, (16 September 2021).

²¹ KPMG, The cost of violence against women and children in Australia (Report, 2016), 4.

not in the past seven days preceding presentation. Survivor advocates described being turned away from services, with counsellors not taking new clients or placing them on 6-month waiting lists. There was significant consensus among the roundtable discussion that the health system is difficult to navigate, describing the experience of having to retell their story as **“re-traumatising”**. Expressing this frustration, one survivor-advocate stated, **“we are sent from pillar to post trying to find the right service: it’s exhausting”**. Survivor advocates also pointed to the insufficient number of trauma-specialist trained staff who are equipped to facilitate victim-survivor recovery. Generalist mental health services lack the capacity and skills to provide trauma-specialist care to victim-survivors. Articulating the consequence of a lack of ongoing specialist support, one survivor-advocate stated **“many health professionals don’t know how to respond to partial disclosures. This makes you feel unheard”** with another survivor stating the devastating experience of being told by a counsellor **“that there must be something wrong if you’re still not over it.”** Moreover, trauma-informed practice is not integrated in most allied health courses in a meaningful way. One survivor-advocate who is also a psychologist stated that when she undertook her psychology degree, she **“learnt about how trauma affects the nervous system but nothing about how to respond to people who have actually experienced trauma”**. Considering the experiences of the survivor advocates, they agreed there was a significant need to integrate trauma-informed practice in all allied health courses, to ensure GPs and other mental and allied health professionals who support patients impacted by sexual violence understand the trauma impacts of their experiences and can provide referral pathways to specialist trauma care and support.

There is also a need for support to recover socially and economically from the impacts of the trauma of sexual violence. Presently, there are no state-wide or local resources to assist survivors of sexual violence to access practical supports, including peer support groups, training and mentoring programs, pathways to employment and enterprise, and career progression opportunities. In the words of one survivor, **“there’s just nothing; you try to claw something back of your previous existence, but it’s just so hard”** In the words of another survivor, **“I just couldn’t study anymore because the impact of trauma got so bad. I didn’t know what else I could do”**.

The inclusion of recovery as a fourth pillar in the next *Draft National Plan to End Violence Against Women and their Children* recognises the importance of recovery in any holistic response to sexual, domestic and family violence. As such, the NSW Government must commit to a significant investment in recovery services for victim-survivors of sexual violence as part of its Sexual Violence Strategy. An increase in new funding for sexual, domestic and family violence trauma recovery services is needed as an essential component in victim-survivor’s healing, and healing must extend beyond the physical and social to include social and economic recovery as well.

We welcome many of the recommendations included in the SV Plan, however we are concerned that specific references to NGO services who provide trauma specialist counselling, care coordination, case management, and court support are missing. Further that there is limited acknowledgement of the cross-over into health and mental health systems which leave victim-survivors with unaddressed psychological impacts.

We therefore recommend the SV Plan include the following:

- A commitment to fully integrating the health and NGO service system response to sexual violence.
- A commitment to investing in a state-wide hub and information gateway for people impacted by sexual violence to access the information, resources, networks, and pathways needed to support them to recover, rebuild and re-engage socially and economically so that they may once again thrive and live a life free from violence. After extensive input from victim-survivors, Full Stop Australia proposes the establishment of an Integrated Violence and Abuse Trauma Prevention and Recovery Model titled 'Healing Pathways'. Healing Pathways comprises of five core components:
 1. **Collaborative Care:** Integrated care-coordination with trauma-informed health and social service providers.
 2. **Systems and Care Navigation:** A 24/7 entry point for core Healing Pathways services through National Hub and local Primary Health Networks. The program would establish a clear referral pathway from GP's and other health providers.
 3. **Information Gateway:** An easy to navigate on-line resource bank that provides information and referral pathways and access to a range of resources and tools to support people impacted by violence, their families/carers, and the service system.
 4. **Peer Care and Development:** A platform for victim-survivors to deliver peer-led support & advocacy.
 5. **Workforce Capability:** Multi-modal training, professional development and support for clinicians and specialist sexual, domestic and family violence workers.
- All aged and disability care providers must - as an initial and important step - record sexual assaults as a 'high-impact' incident in the Serious Incident Response Scheme.
- Commit to the longer-term therapeutic intervention needs of survivors of sexual violence by ensuring sexual assault services are adequately equipped and resourced to provide therapeutic services to survivors post-crisis.
- Invest in sexual assault services to enable them to respond to the diverse needs of marginalised communities including Aboriginal and Torres Strait Islander people, members of the LBGTQI+ community, people living with a disability, older women and CALD communities, including those in NGO settings at the state-wide and local level.
- Invest in community-based healing initiatives that are designed and led by Aboriginal Torres Strait Islander organisations and communities.

- Develop localised trauma specialist care coordination units within each of the 10 Primary Health Networks across NSW as a primary referral pathway for GPs and other mental and allied health professionals supporting patients or clients impacted by sexual, violence in need of coordinated multidisciplinary supports to heal and recover from the trauma impacts of their experiences.
- Commit to providing education about trauma, complex trauma and trauma-informed practice into all allied health courses. Further, develop workforce training pathways to ensure all healthcare professionals are educated on complex trauma and equipped to respond to the ongoing needs of survivors.
- Incorporate vicarious trauma education and management across the service delivery system.

Victims Services

As noted above, we are very concerned that the draft SV Plan contains no reference to improvements to Victims Services or the upcoming Victims Services Review.

At a minimum, the SV Plan should be committing to urgently re-instating group counselling for survivors of sexual violence. However, we also strongly recommend that the SV Plan contain other improvements to the Victims Services Counselling Scheme in accordance with our submission to the review.

System Enablers

Enhanced knowledge and evidenced-based best practice

We strongly support the draft DFV Plan's commitment to obtaining evidence (ie. data) to inform its work. However, **we are disappointed (and do not see why) these commitments have not carried across to the draft SV Plan** as well. Sexual violence is at national crisis stage and service responses are severely underfunded.

We look forward to the SV Plan incorporating all the DFV Plan's commitment to enhancing knowledge including:

- *collecting data in the points outlined at page 31;*
- *ensuring all new and existing programs and initiatives are evaluated;*
- *supporting service providers to improve the collection of data and reporting; and*
- *the co-design of quality standards for NSW DFV services.*

Service providers (in particular NGO service providers) need to be resourced effectively to collect data and to report. Any commitment to supporting service providers must be accompanied by adequate funding for organisations to carry out this work.

We know that data collection will be a prominent feature of the National Plan and that the National Plan is still being finalised. However, the NSW Government has the ability to start making specific commitments to the collection, analysis and publication of data squarely within its purview now - in particular in portfolios such as health and justice. There are significant amounts of useful data that could be collected and analysed by way of example, data relating to mental health and hospital presentations for incidences of sexual violence. Any new data collected should be collected, analysed and reported on in trauma-informed and culturally appropriate ways and by those with expertise in this area such as ANROWS.

Workforce development

We look forward to the SV Plan incorporating all the DFV Plan's commitment to workforce development including:

- *Conducting a workforce census*
- *Developing a 10 year industry plan*
- *Developing culturally specific approaches for First Nations workers (and not just in the Government service sector, but also the NGO service sector)*
- *Building the capacity of the community-based sector*
- *Building the capacity and cultural capability of specialist mainstream services*
- *Prioritising the enhancement of ACCOs, cultural and faith-based organisations, LGBTQIA+ organisations and youth-based organisations.*

We also recommend the SV Plan include the following:

- Commitment to the development of comparable datasets to support a consistent national approach to service data collection for people impacted by sexual, domestic and family violence.
- Stronger integration with reference to primary health services and the mental health policy. In particular the reference to "no wrong door" and the ability to identify, respond and refer victim-survivors to specialist supports regardless of where they present. The impacts of sexual violence present across the continuum of care from crisis through to recovery. There is strong evidence of the adverse and long-term physical and psychological health impacts including self-harm and suicidality for people who are victim-survivors of sexual violence.

- Whilst the NSW Government has the Domestic Violence Death Review Team as established under the *Coroners Act 2009*, there is a lack of continued examination and reporting of matters specifically focused on sexual violence both in and outside of the context of domestic and family violence. The NSW Government must commit to conducting reviews into sexually violent homicides (in particular homicides of children) and suicide matters in the context of sexual violence in order to build a strong evidence to better prevent and respond to sexual violence in NSW.
- Engage with a focus on the 'front end' of the criminal justice system. There is an urgent need to understand why cases do not progress. There should be accountability in decision-making by police and the prosecution. Therefore, the NSW Government should establish an independent, multi-disciplinary panel to review and make recommendations about police and prosecution decisions.²²
- Establish measures and indicators across all agencies and service providers to ensure accountability.
- Commit to the establishment of a Lived Experience Advisory Group for people impacted by sexual violence in a range of settings- domestic and non-domestic. This must be separate to a Lived Experience Advisory Group for people impacted by domestic and family violence.
- Commit to establishing a Sexual Violence Commissioner/Commission in NSW to provide expert advice to government and strengthen cross-government collaboration. Establishing a Women's Safety Commissioner fails to account for the large number of male and gender-diverse people who experience sexual violence.
- Invest in research to build knowledge around sexual violence and evidence on effective prevention and response strategies. This research should cover emerging forms of sexual violence including technologically facilitated sexual violence, reproductive coercion, grooming and sexual slavery. Research must also address the varying needs of marginalised groups and the role alcohol plays in offences of sexual violence.
- Invest in research to build knowledge around sex workers' experience of sexual violence. Prevention and response strategies should be developed in consultation with sex workers.

Finally, we make the following, additional comments on this pillar:

- We are concerned that the Women's Safety Commission will be included as part of the Executive Director, Women, Family and Community Safety role, as a joint responsibility. We submit that the Women's Safety Commissioner must be independent from the Government for transparency and accountability reasons. The Commissioner must also be adequately funded and supported to conduct their work.

22 From QLD Hear Her Voice Report

- We suggest that the commitment to identifying opportunities to expand the reach of consultation must be implemented now, and that much more consultation needs to be done prior to the finalisation of the SV Plan.