

27 July 2026

The Department of Social Services
GPO Box 9820
Canberra ACT 2601

Dear Sir/Madam,

RE: SUBMISSION ON THE 2ND ACTION PLAN TO END VIOLENCE AGAINST WOMEN AND CHILDREN 2022-32

We refer to the consultation paper on this issue and thank-you for the opportunity to respond.

About QSAN

The Queensland Sexual Assault Network (QSAN) is the sexual violence peak body for specialist sexual violence prevention and support organisations in Queensland. We have 21 member services that provide services to women and children and specialist services for Aboriginal and Torres Strait Islander victim-survivors, culturally and linguistically diverse women, people with intellectual disability, young women and men. Our services are inclusive of trans and gender diverse people, and our membership are located throughout Queensland, including in rural and regional locations. Our services generally provide responses to children 12 and over but some services provide counselling responses to 12 years and under and harmful sexualised behaviour programs.

Our network of non-Government services is funded to provide specialist sexual assault counselling, support, and prevention programs in Queensland. QSAN is committed to working towards ensuring all Queenslanders who experience sexual violence recently or historically, regardless of age, gender, sexual orientation, cultural background receive a high-quality response in line with best practice, client-centred principles. Our work and analysis of sexual violence is from an intersectional feminist perspective and addressed within a specialist trauma framework.

We are committed to engaging with government and other bodies to raise systemic issues of concern, and to ensure the voices and experiences of victims-survivors of sexual violence are considered in the formulation of policy and legislation that impacts on sexual violence victims in Queensland.

Introductory comments:

Domestic, Family and Sexual Violence (DFSV)

QSAN prefers that the term sexual violence be separated from DFV to provide more focus on the issue of sexual violence. Otherwise, the acronym (DFSV) hides the issue of sexual violence and/or promotes the idea that sexual violence only occurs in intimate partner relationships where there is DFV

Rates of sexual violence - Consultation Paper

The experience of the specialist sexual violence sector is that prevalence rates of sexual violence are on the increase due to a number of factors including technology facilitated sexual violence, increased predation, access to pornography among younger cohorts, though pornography influences violence rates across the lifespan, a lack of access to age-appropriate sexuality education and a persistent lack of accountability within the criminal justice system and more broadly the legal system as a whole.

The national statistics tell us:

- More than one in five women (2.2 million or 22%) have experienced sexual violence since the age of 15. **Source:** [Personal Safety Survey, 2021-22](#)
- One in sixteen men (582,400 or 6.1%) have experienced sexual violence since the age of 15. **Source:** [Personal Safety Survey 2021-22, Australian Bureau of Statistics](#)
- More than one in four Australians (28.5%) aged 16+ years have experienced sexual abuse. **Source:** [Australian Child Maltreatment Study, 2023](#)
- More than one in three girls (37.3%) and around one in five boys (18.8%) have experienced sexual abuse. **Source:** [Australian Child Maltreatment Study, 2023](#)
- One in two (53% or five million) women and one in four (25% or 2.2 million) men have experienced sexual harassment since the age of 15. **Source:** [Personal Safety Survey, 2016](#)
- Three in four online dating app users report they have experienced sexual violence online, and one in three report they experienced sexual violence, including sexual assault, after they'd met in the 'real world'. **Source:** [Australian Institute of Criminology, 2022](#)
- In 2023, there were 36,318 victims of sexual assault recorded in Australia, increasing by 11% (3,547 victims) from the previous year. 84% of victims were female. Around two in five victims (41%) were aged between 10 and 17 years at the date of incident. Around two in five (39%) sexual assaults were family and domestic violence related (14,059 victims). **Source:** [Record crime - Victims, ABS, 2023](#)
- In 2022–23, most alleged sexual offenders were male (93%) and two in three (65%) were known to the victim. **Source:** [Australian Sexual Offence Statistical \(ASOS\) collection](#)
- A 2024 study found that more than one in five respondents (22.1%) had perpetrated one or more of the forms of sexual violence examined since turning 18 years of age. One in 10 (9.9%) had done so in the past 12 months. **Source:** [Australian Institute of Criminology, 2024](#)
- Men were significantly more likely than women to have perpetrated any and each form of sexual violence examined, and to have perpetrated multiple forms of sexual violence.
- Around one in 10 (9.4%) of Australian men have sexually offended against children (including technologically facilitated and offline abuse). Approximately half (4.9%) of this group reporting sexual feelings towards children. **Source:** [University of New South Wales and Jesuit Social Services](#)

Reported Crime in QLD

In 2024-25, Queensland experienced a significant 52.6% increase in all recorded sexual offences over the past decade, with a notable 15.5% rise in rape and attempted rape within just one year, and a staggering 130.9% increase over ten years.

The data reveals that victims are predominantly female, comprising 85.5% of recorded victims. Alarming, almost half (43.8%) of all female victims of sexual offences were aged 19 years or under. Furthermore, females are 2.1 and 7.9 times more likely to be victims of sexual offences across various age groups.

According to the latest Personal Safety Survey in 2021-22 the prevalence rate of sexual violence for women in 2021-22 was (1.9%) which was similar to the rate in 2016 (1.8%). However, the difference in the prevalence rate between 2012 and 2021-22 is statistically significant as there was an increase from 1.2% to 1.9%.

[Personal Safety, Australia, 2021-22 financial year | Australian Bureau of Statistics](#)

The most recent PSS data reveals in the most recent incident of sexual assault by a male, the perpetrator was more likely to be someone the woman knew (85%) than a stranger (16%). The perpetrator was most commonly an intimate partner (53%), including a cohabiting partner (28%), and boyfriend or date (25%).

For women who experienced sexual assault by a male, sources of advice or support included:

- friend or family member (45% or 331,300)
- counsellor or support worker (15% or 110,100)
- other (non-GP) health professional (14% or 100,200)

An overall drop in reporting + increased reports to the police

An estimated 8.3% of women (61,100) who experienced sexual assault by a male said the police were contacted about the most recent incident.

This was a significant drop in reporting from the PSS data in 2016 when 13% women contacted the police.

[Personal Safety, Australia, 2016 | Australian Bureau of Statistics](#)

This change in reporting rates points to an increase in prevalence of sexual violence in the community.

This is because the number of reports to police across Australia are increasing, however these are representing a smaller percentage of overall victim-survivors of sexual violence in Australia who are reporting to the police.

In Queensland, two in five victims of reported sexual offences are 19 years or younger, regardless of sex, highlighting the concerning prevalence of sexual violence in younger demographics.

The increase in victim-survivors engaging with formal processes increases the likelihood of them being referred to specialist support services.

The increase in formal reports by victim-survivors are therefore indicative that the work of the specialist sector is also increasing.

We note the National Plan to End Violence Against Women 2022-32 states that sexual violence has increased.

The prevalence of intimate partner violence has remained consistent since the 2010–2022 National Plan was launched, and so there is still work to do to end violence in intimate relationships. But we have also seen an increase in sexual violence in all settings, including online, and perpetrators using new mechanisms, including violence facilitated by technology. (p.22).

Additionally, the National Plan states:

Lifetime prevalence data indicates that 51% of women in their twenties have experienced sexual violence.

This is quoting ANROWS funded research which found overall 51% of women in their 20s, 34 per cent of women in their 40s, and 26% of women aged 68 to 73 years have experienced sexual violence. **Source:** [ANROWS, Australian Longitudinal Study on Women's Health, 2022](#)

We note however, the consultation paper advises the rates of sexual violence have remained stable since 2005.

We question this finding and seek clarification about what has changed between the drafting of the National Plan, where it is stated sexual violence was increasing across all cohorts and this consultation paper, where the rates are stable.

Children – consultation paper

As stated, all QSAN services respond to children, at least from 12 years and up and some respond to children from 12 years (both genders) and below. A number of services also work with children and youth in harmful sexual behaviour programs.

We therefore also dispute the statement in the paper:

When children and young people are considered in relation to violence against women and children and other forms of gender-based violence, it is almost always in one of two limiting roles: as secondary

victims attached to a protective parent (usually their mother); or as potential future perpetrators in need of preventative education.

Children in specialist sexual violence services are regarded as victim-survivors in their own rights and historically always have been and are not as characterised as above. It would be helpful for such statements to clarify that they only relate to the DFV sector, if this is the case. Though it probably important to also recognise it was the DFV sector over decades who has advocated for the impacts of violence on children to be recognised and fought to put this issue on the national policy agenda.

The Impacts

The impacts of sexual violence extend far beyond the immediate harm caused. Victim-survivors can experience lifelong effects on their physical and mental health, housing stability, education, employment, financial security and ability to participate fully in community life.

At the same time, specialist sexual violence services across Queensland are reporting unprecedented demand, increasing complexity of client presentations, and growing numbers of people seeking support for issues including complex trauma, housing insecurity and financial hardship. Some of our services have wait list of 9 months for access to rape counselling.

Despite the growing prevalence and profound social and economic costs of sexual violence, specialist sexual violence services remain historically underfunded and under-resourced, limiting the sector's capacity to provide timely, trauma-informed support and respond effectively to community need.

Why Invest in Specialist Sexual Violence Services?

Sexual violence requires a specialist response. Specialist sexual violence services provide expert, trauma-informed support for victim-survivors of all ages and genders, whether they engage with the criminal justice system. Services include urgent responses for recent rape, counselling, advocacy, court support, prevention initiatives, victim compensation support, community education, system navigation and long-term recovery support. They also provide important linkages for victim-survivor support from legal, financial counselling, housing and other community supports.

These services play a critical role in supporting healing, improving safety, preventing re-traumatisation and reducing long-term demand across health, mental health, child protection, housing and justice systems. They also contribute significantly to prevention through community education, workforce development and early intervention initiatives.

Federal investment in specialist sexual violence services is essential to achieving the objectives of the National Plan to End Violence Against Women and Children.

QSAN Federal Priorities for Action:

1. Firstly, invest in and strengthen the specialist sexual violence sector

Commit to a whole-of-government approach to sustainably funding specialist sexual violence services to address historical underinvestment, build sector capacity, and support long-term growth. A strong specialist sector not only improves outcomes for victim-survivors but also strengthens broader community responses through workforce development, community education, and capacity-building across health, justice, education and community service systems. Investment in the specialist sector will, in turn, uplift responses to sexual violence by other non-specialist community responses to sexual violence, through training and capacity building support.

There has been a tendency, especially at the federal level to fund non-specialist services to respond to sexual violence work e.g. PHN funding. Such an approach can increase disclosures of sexual violence in the

community but also increase referrals and workload over to the specialist sector (without the associated funding), as the non-specialist sector is unable to respond to the complexity of the presentations.

Strengthening the specialist sexual violence sector will, improve overall responses over time

An approach that funds the specialist sexual violence sector will:

- build capacity to provide secondary consultations and allow earlier interventions from other non-specialist services
- will help build the specialist workforce as the specialist sector is supported to train new workers.

1A Provide funding certainty

Queensland specialist sexual violence services face a looming funding cliff of federal funding by 30 June 2027. This creates uncertainty and anxiety in the workforce and diverts limited funding towards ensuring maintenance of current funding levels and away from service delivery.

2. Expand specialist responses for children and young people

Increase investment in specialist child sexual abuse responses by expanding access to skilled, developmentally appropriate counselling and therapeutic support for children under 12 years of age. This includes increased investment in evidence-based harmful sexual behaviour programs for children and young people to support early intervention, accountability and prevention.

3. Invest in prevention through specialist expertise

Fund dedicated prevention workers within specialist sexual violence services to deliver place-based and community-led prevention initiatives. This includes community education, workforce capability development, school-based programs where appropriate, and activities that promote affirmative consent, challenge harmful attitudes, and disrupt the social norms and victim-blaming narratives that enable sexual violence.

4. Strengthen service integration and coordinated responses

Fund specialist coordination and integration roles within the sexual violence sector to strengthen multi-agency collaboration, community engagement and cross-sector partnerships. These roles would support service integration, system navigation and referral pathways across health, housing, justice, education and community services, ensuring victim-survivors can access coordinated support while maintaining access to specialist expertise.

5. Improve access to justice and survivor-centred accountability options

Increase investment in innovative and evidence-informed justice responses that enhance safety, accountability and choice for victim-survivors. This includes support for alternative justice pathways such as restorative justice approaches and the development of accessible civil justice options for sexual violence, recognising that many victim-survivors seek justice outside traditional criminal legal processes. Eg. QSAN's accessible civil justice option could be explored.

6. Invest in the development of evidence-based programs to prevent sexual violence perpetration

Invest in evidence-based early intervention and prevention programs with perpetrators to stop or reduce the risk of future perpetration. Once developed these programs would support behavioural change and improve community safety. The only programs that currently exist for sexual offenders are in prisons. Any community programs developed would require attendance to be mandated. This priority is therefore strongly linked to increasing accountability and justice options (above).

7. Develop a dedicated National Sexual Violence Strategy

Establish a standalone Sexual Violence Strategy within the National Plan to End Violence Against Women and Children to strengthen the visibility of sexual violence and improve targeted prevention and response efforts. A dedicated strategy would better address forms of sexual violence that occur outside intimate partner relationships, including child sexual abuse, familial abuse, institutional abuse, and violence perpetrated by acquaintances, peers and other non-intimate relationships.

As part of this dedicated strategy, developed in consultation with the specialist sector a clear and lived expertise, a national approach to prevent sexual violence and drive down offending could be coordinated.

At the same, workforce issues for the specialist sector could be better addressed in a coordinated way, including with a whole of government approach to funding support for the specialist sector.

8. Address housing and financial barriers to recovery

Invest in crisis accommodation options and targeted financial assistance for victim-survivors of sexual violence who are unable to access domestic and family violence refuge pathways. This includes measures to reduce financial hardship and support recovery, such as improving income support payments, increasing rent assistance to reflect market conditions, and addressing the broader economic impacts of sexual violence.

9. Establish a dedicated sexual violence funding stream

Create a dedicated sexual violence funding stream within federal funding agreements to ensure transparent, accountable and ongoing investment in specialist sexual violence responses through state and territory governments. Dedicated funding would improve visibility of the issue and provide greater certainty for services responding to growing community need.

10. Fund the true cost of specialist service delivery

Ensure federal investment reflects the full cost of delivering specialist sexual violence services, including workforce costs, supervision, training, administration, infrastructure and operational expenses. Funding models must also provide flexibility to meet the unique challenges of regional, rural and remote service delivery and support sustainable workforce development across Australia.

11. Aboriginal and Torres Strait Islander responses

Increase the capacity of current funding levels in the specialist sector, with the only funding of a specialist service, Murrigunyah at Logan being for only 3 people and geographically restricted.

Consideration should be given to quarantining funding that is specific for a specialist Aboriginal and Torres Strait Islander response and would allow opportunity for innovation and for new holistic community-based approaches to apply for this funding.

13. Improve family law and child sexual abuse outcomes for children

Recent research findings by Professor Michael Salter *“On improving legal, policy and practice responses to the intersection of domestic violence perpetration and child sexual abuse offending”* that included a Family Court case review are concerning and are consistent with our member services experience who work with protective parents and child victims of sexual abuse.

Please see the link to the research supported by funding from the National Centre for Action on Child Sexual Abuse here:

<https://nationalcentre.org.au/research/improving-legal-policy-and-practice-responses-to-the-intersection-of-domestic-violence-perpetration-and-child-sexual-abuse-offending/>

The Salter research findings

The Salter research reviewed 65 family court finalised reported cases involving domestic and family violence (DFV) and child sexual abuse (CSA) between 2018 to 30 June 2023 and found:

- In some instances, shared parenting was upheld despite substantiated DFV allegations made by other agencies;
- Mothers who raised allegations of DFV and CSA were less likely to obtain custody than fathers, despite the high number of allegations against fathers. Mothers made 90.7% of the allegations, yet children were ordered to live with the father (45.8%) of cases, compared to 42.4% living with mothers.
- Independent Children's Lawyers (ICLs), appointed to represent children's best interests, overwhelmingly supported the parent accused of abuse.
- In 60.3% of cases reviewed, children were ordered to live with the parent accused of DFV and/or CSA, following support from the ICL.
- Only 27.1% of cases were managed by the specialist Magellan list (specialist court list for serious child abuse and child sexual abuse).
- 40% of parents were self-representing in all or part of the proceedings, despite the complexity of these cases.
- The link between domestic and family violence and child sexual abuse is well established and re-confirmed in the study.

Other research findings

These research findings builds on a broader case review undertaken by Moloney and others in 2021, that reviewed seven years' worth of relevant family court cases — from 2012 to 2019 — and found that in only 14 per cent of contested cases, judicial officers expressed a direct belief that allegations of child abuse were true: only 12% of cases determined a risk of sexual harm to a child; and in just under two-thirds of the cases, the courts increased the accused's time with the child.

<https://onlinelibrary.wiley.com/doi/full/10.1002/ajs4.171>

These findings are particularly concerning when considered alongside the Australian Child Maltreatment Study, which found that 28.5% of Australians experienced child sexual abuse during childhood and when there are such high level of allegations of family violence and child abuse in the family courts.

Low findings of risk are also particularly concerning

The Moloney findings of risk (12% in cases) are very concerning, as it raises the question about whether the court can determine risk, which is their primary responsibility.

For decades, systemic concerns have been raised in relation to the family court's ability to appropriately respond to cases involving child sexual abuse, including that gender bias influences decision making when mother's raise allegations of child sexual abuse, a lack of court expertise in relation to child sexual abuse, a lack of knowledge of perpetrator tactics including grooming and the ongoing issue that the court lacks the power to investigate abuse allegations and must rely on child protection agencies and police, which too often fail to investigate at a state level. Also see: <https://www.sciencedirect.com/science/article/abs/pii/S0145213419302224>

The themes identified from the practitioner interviews in the studies mirror QSAN's member service experience:

- Women and children are often not believed.
- Abusers groom mothers, children, professionals and the public.
- Mothers are trapped in a double bind (of both acting to protect or failing to protect)
- Children are put at risk
- Intergenerational trauma and its impacts
- Services are not working together
- Legal systems cause more harm.

In addition, new research funded by the National Centre on Action on Child Sexual Abuse [New research released in conjunction with the National Centre for Action on Child Sexual Abuse](#) found *the Family Court does not have the capabilities to make findings on cases that involved allegations of child sexual abuse.*

[Alleged DV victim labelled 'difficult witness', family court permanently removes children - ABC News](#)

[MACSween Final Report I Wish They Knew What Theyd Stolen From Me June 2026.pdf](#)

"It was never intended to be a specialist family violence court. It was never intended to be a child abuse court, let alone a child sexual abuse court," lead researcher Morag MacSween said.

Dr MacSween's report examined three cases where child abuse was alleged, conducting extensive interviews with the now-adult victims.

"For our three victim-survivors ... their mothers believed them, but the court didn't."

Impacts are broader than court users

Feedback from our member services is that the new legislative changes to the Family Law Act introduced in 2024 have not improved outcomes for matters involving child sexual abuse and that the impacts are much broader than the court system, as mothers are aware of the court outcomes and will stay in abusive relationships as a means to protect their children.

Independent public review into the Family Court's response to child sexual abuse is required

Children's safety must come first, and urgent reform is required to ensure children's best interests are being prioritised and that any reform must include and be led by the voices of children, protective parents and those with sector expertise in child sexual abuse and sexual violence.

Unfortunately, this is not just a training issue. Though training may assist, training can not change beliefs, bias and assumptions that drive decision-making.

An independent public review is required, and this may require the power of a Royal Commission because of the strict confidentiality of family law processes will inhibit some lived experience witnesses from participating.

A central question for this review/ investigation is, "what would a family law system that truly prioritised child safety when responding to child sexual abuse, look like?"

14. Schools and misogyny – support specialist sexual violence services to continue their work

At a national level there has been an increasing focus on "educating" young men to prevent sexual violence. There can, unfortunately be a tendency to look for easy answers.

We support an approach to prevention that centres the lived experience of victim survivors of sexual violence, harassment and abuse and that takes an evidence based and whole of school approach to the issue.

QSAN services have been providing evidence-based curriculum in this area for girls and boys in schools for decades and should be supported to specifically continue this work.

15. Young women, men and gender diverse people – need for specific services

Specific services are required, especially for young women and gender diverse individuals to provide responses to their immediate safety concerns/ issues. We know many young people may not seek assistance from services that do not specifically identify as meeting their needs.

16. Emerging issues:

- Drug Facilitated Rape. This is a trend in presentations to our services with an increasing number of women disclosing their partners or spouses had engaged in this behaviour, often filming the assaults as well. This mirrors international news regarding the case of Gisele Pelicot and the numerous reports of organised groups of men providing advice and guidance on how to perpetrate drug facilitated rape of their partners, wives, girlfriends, children and strangers. Notably this trend spans across age ranges with us supporting older women over 60 years old who have experienced this as well as young women under 25.
- Increasing reports relating to sexual violence, sexual exploitation, and possible sexual servitude affecting some PNG and Pacific women, including women connected to the PALM Scheme and other temporary migration pathways.
- Normalisation of non-fatal strangulation and associated violence during the sexual violence.
- Increasing use of AI generated deep fakes related to sexual violence to threaten and silence women.
- Increased high harm perpetrators that cause harm to large numbers of women and/or children, and this is likely to increase as this type of policing improves.
- Increasing presentation at harmful sexual behaviours programs of much younger people and those impacted by exposure to pornography rather than being sexually abused themselves.

If you require anything further, please do not hesitate to contact me.

Kind Regards,

