

SASVic submission

Second Action Plan (National Plan to End Violence against Women and Children 2022–2032)

August 2026



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Introduction

Sexual Assault Services Victoria (SASVic) welcomes the opportunity to inform the direction of the Second Action Plan under the National Plan to End Violence against Women and Children 2022–2032.

Alongside our members¹ SASVic works to promote rights, recovery and respect for survivors and other people impacted by sexual violence and harm. Collectively, SASVic's member services provide a free, 24/7 specialist response to survivors and other people impacted by sexual violence. This includes 24/7 crisis support for people who have experienced a recent sexual assault, counselling and advocacy for survivors and others impacted by sexual assault, and support and services for children and young people exhibiting harmful sexual behaviour. Members' response work is complemented by community and school-based education and other prevention activities, systems advocacy, and training and support for other professionals.

As the peak body for specialist sexual assault and harmful sexual behaviour services in Victoria, preventing and responding to sexual and gendered harm is our core business, whether it occurs online, in families or in public spaces.

Our members provide services to people of all ages, ethnicities, sexualities and gender identities across Victoria but we recognise that the submission does not comprehensively respond to the needs of all people and communities that experience sexual violence and harm in Australia, including for people in institutions and group homes, people living in very remote areas, Aboriginal and Torres Strait Islander people, people with disability, those experiencing housing instability, migrant and refugee communities including people whose first language is not English, and LGBTIQ+ people.

SASVic's submission aims to build on the gaps and challenges identified in each priority area and draw attention to additional areas for focus that have not been identified in the consultation paper. It does not seek to restate known problems or repeat information provided in the consultation paper.

¹ Our members are the Australian Childhood Foundation, Ballarat Centre Against Sexual Assault (CASA), Bass Coast Health, CASA House, CASA Central Victoria, Centre Against Violence, Eastern CASA, Gatehouse Centre, Gippsland CASA, Goulburn Valley CASA, Kids First, Mallee Sexual Assault Unit, Northern CASA, The Sexual Violence and Family Violence Centre, South-Eastern CASA, South-Western CASA, West CASA and the Sexual Assault Crisis Line.

Summary of recommendations

1. Sustained and increased investment in the specialist sexual assault and harmful sexual behaviours service system is needed to meet the distinct needs of victim survivors of sexual violence.
2. Investment is needed in data collection specific to sexual violence.
3. Enhance governance to ensure progress of activities under the Second Action Plan.
4. Tailored support provision to include incarcerated women, women with experience of the sex industry, women trafficked for the purposes of sexual exploitation and international students.
5. Invest in a national roll out of Justice Navigators across all Australian jurisdictions.
6. The Australian Government strengthen regulation in three areas of harm: pornography, the production and dissemination of child sexual abuse material, and extreme misogynistic content channelled through algorithmic business models.
7. Non-fatal strangulation (NFS) laws should cover family violence, as well as NFS that occurs during any sexual activity (including sexual activity occurring outside of a family violence situation).
8. There is opportunity to realise the prevention potential of affirmative consent laws, including through the delivery of Respectful Relationships Education (RRE), but also across all age groups.
9. Build on the delivery of Respectful Relationships Education (RRE) towards a sexual violence trauma-informed, whole-of-school approach that integrates prevention with early identification, safeguarding and specialist responses.
10. Child sexual abuse occurring outside domestic and family violence contexts to be considered within the scope of the Second Action Plan.
11. Develop disability-specific respectful relationships and consent education resources and include explicit workforce capability requirements around responding to disclosures from people with disability.
12. Implement recommendations to ensure fairer and more respectful treatment of victim survivors of sexual violence from the Australian Law Reform Commission report into Justice Responses to Sexual Violence.
13. Greater action and accountability for the perpetration of sexual violence is required.
14. Investment into what prevents sexual violence is needed.
15. Resource specialist sexual assault support services to build the capacity of educators and parents/caregivers to identify and disrupt grooming practices and respond when harm occurs.
16. Use all levers available at the Commonwealth level to prevent and address systems abuse.

Feedback on the scope of the consultation paper

Recommendation 1: Sustained and increased investment in the specialist sexual assault and harmful sexual behaviours service system is needed to meet the distinct needs of victim survivors of sexual violence.

SASVic supports the differentiation of family and domestic violence from sexual violence, noting the significant difference in prevalence, prevention and early intervention, and service responses related to these forms of harm. However, the consultation paper is silent on the need to resource and invest in the specialist sexual assault and harmful sexual behaviour service system. Without investment, the capacity of the specialist sexual assault and harmful sexual behaviours service system to adequately respond to current demand will remain limited.

The Second Action Plan must also recognise the unique expertise of the sexual violence sector, including in integrated approaches that work across primary prevention, early intervention, response and recovery, distinct from approaches within the domestic and family violence sector. For example, in a forthcoming paper, SASVic presents the evidence for six promising approaches to prevent sexual violence, including the efficacy of supporting parents, caregivers and other influential adults to play a protective role in children's lives.² SASVic's members have identified this as a gap that remains unfunded across the sector.

In addition, the Second Action Plan, and any subsequent investment, must recognise that because sexual violence is a specific kind of harm, recovery interventions will require a specialised approach. Practitioners need skills and adequate time to build a therapeutic relationship based on trust and collaboration with a survivor, meaning that investment needs to account for flexible, longer-term models of therapeutic support designed around the priorities of individual survivors.³

Recommendation 2: Investment is needed in data collection specific to sexual violence.

SASVic is concerned by the reliance on data collected through the Personal Safety Survey used to indicate progress in relation to the prevention of sexual violence. Specifically, the consultation paper notes that Victoria has seen a decline in sexual violence against women since 2016. This directly contradicts data provided by the Crime Statistics Agency on the number of victim reports made by females related to sexual offences that revealed a 50% increase between 2017 (6416 reports) and 2026 (9646 reports).⁴

We note that the Australian Institute of Health and Welfare is developing a DFSV integrated data system, however sexual violence data from the sexual assault and harmful sexual behaviour service system will not be captured within the scope of this project.

² Dr Amy Webster (2026). Innovative Prevention Approaches to Sexual Violence (Forthcoming paper)

³ McLindon, E., McKenzie, M., Webster, A., Hargrave, J., Turner-Myatt, P., Maltzahn, K. & Tarzia, L. (2024). 'Reclaiming power over my story, my body and myself': Recovery and healing for adult victim-survivors of sexual violence. Melbourne: University of Melbourne, Sexual, Assault Services Victoria & Women with Disabilities Victoria.

⁴ Crime Statistics Agency, Victim Reports, <https://www.crimestatistics.vic.gov.au/crime-statistics/latest-victorian-crime-data/victim-reports-2>, accessed 23 July 2026.

Recommendation 3: Enhance governance to ensure delivery of activities under the Second Action Plan.

SASVic also wishes to draw attention to outstanding commitments within the First Action Plan that relate to sexual violence that have not progressed, specifically:

- Developing a Victorian strategy to prevent and address sexual violence, abuse, and harm in response to the Victorian Law Reform Commission's report on Improving Justice Responses to Sexual Offences.
- Designing an online reporting pathway model for victim-survivors of sexual violence in Victoria.

The Victorian Government commenced work on both initiatives, including extensive consultation with the specialist sexual assault sector in 2022. Progress on these initiatives has since been abandoned.

Feedback on identified priority areas

Priority Area 1: Victim survivors

Recommendation 4: Tailored support provision to include incarcerated women, women with experience of the sex industry, women trafficked for the purposes of sexual exploitation and international students.

We note references to population groups includes LGBTIQ+ people, recent migrant arrivals and those unable to participate in the available survey languages, people living in institutions or insecure housing, and people living with a range of disabilities. SASVic draws attention to other at-risk populations that are not referenced within the scope of the consultation paper, including incarcerated women, women with experience of the sex industry, women trafficked for the purposes of sexual exploitation and international students.

SASVic also supports the recommendations made by the Human Rights Law Centre, Flat Out and Formerly Incarcerated Girls Justice Advocates Melbourne in their report into the practice of strip-searching in prisons. This includes recognising that people in prison experience strip searches as acts of sexual assault and coercive control, and that strip searching is re-traumatising, particularly for women and children who are often victim-survivors of family and sexual violence.⁵

We also recommend that any federally funded program that provides support to victim survivors of family violence for women from migrant backgrounds be expanded for victim survivors of sexual violence across all Australian jurisdictions.⁶

Recommendation 5: Invest in a national roll out of Justice Navigators across all Australian jurisdictions.

Measures that create fairer justice systems are important to recovery and healing, as well as to the prevention of sexual violence. One of the most impactful investments that can help achieve

⁵ Human Rights Law Centre, Flat Out and FIGJAM (2026). Ending Strip Searching in Australian Prisons, <https://www.hrlc.org.au/reports/end-strip-searching/>

⁶ See programs delivered by the Australian Muslim Women's Centre for Human Rights: <https://amwchr.org.au/support-services/>

this is a national roll out of Justice Navigators across all Australian jurisdictions. A small number of federally funded Justice Navigators are being rolled out and piloted across the country. In Victoria, our state and federal-funded Justice Navigator Pilot is seeing 4 Justice Navigators and 2 additional support staff positioned in 2 specialist sexual assault services. However, much more investment is needed to roll out Justice Navigators to meet demand across Victoria and Australia.

Additionally, given low rates of reporting of sexual violence, more work needs to be done to determine where, in each state and territory, they are best placed, so they are readily reached by survivors of sexual violence.

Priority Area 2: Prevention and early intervention

Recommendation 6: The Australian Government strengthen regulation in three areas of harm: pornography, the production and dissemination of child sexual abuse material, and extreme misogynistic content channelled through algorithmic business models.

Current regulatory approaches are not enough to tackle the prolific and insidious nature of harm caused, or the volume of unregulated content produced and shared.⁷ This is also relevant given the establishment of The Office of Artificial Intelligence within the Department of Premier and Cabinet. The federal government announced that the Office would work closely with other departments, including Climate Change and Energy, Education, Treasury, Defence and National Security, Employment⁸, but did not reference the Minister for Social Services, under which this plan sits.

Additionally, the consultation paper positions 'exposure to violent pornography' under Priority Area 3: Children and young people in their own right. SASVic recommends that a focus on pornography is considered across all priority areas within the Second Action Plan given research shows regular pornography viewing can contribute to greater acceptance of rape myths and attitudes supportive of violence against women and the normalisation of "choking" or sexual strangulation (for adults as well as children). SASVic members are reporting an increase to the complexity of cases, with the influence of technology-facilitated abuse and exploitation and impacts of violent pornography, such as non-fatal strangulation.

Recommendation 7: Non-fatal strangulation (NFS) laws should cover family violence, as well as NFS that occurs during any sexual activity (including sexual activity occurring outside of a family violence situation).

Currently, laws across the country differ in this regard: Four jurisdictions have no "relationship" limit to their non-fatal strangulation laws (the ACT, NSW, Tasmania, and WA) meaning that NFS laws apply in circumstances outside of family violence. This would include, for example, strangulation committed against a sex worker or during a casual sexual activity. The other jurisdictions (Vic, Qld, NT and SA) limit their NFS laws to NFS occurring in the context of family violence. National consistency of legal coverage could help support public health messaging so

⁷ For more information on regulatory approaches see: Dr Monica Campo & Dr Amy Webster (2025). Turning back the tide: Exploring regulatory approaches to addressing sexual violence and harm online, <https://workdrive.zohopublic.com.au/external/5083f64f8259f26ce3a7cea3ba175b416d5d3487108108bd3eed3576192d0eed>

⁸ The Hon Anthony Albanese MP (15 July 2026). 'AI in Australia's interests', <https://www.pm.gov.au/media/ai-australias-interests-0>

that (a) all victims of this practice know that it is against the law and (b) to communicate to potential perpetrators that it is unsafe and against the law.

Recommendation 8: There is opportunity to realise the prevention potential of affirmative consent laws, including through the delivery of Respectful Relationships Education (RRE), but also across all age groups.

There is evidence that affirmative consent legislation can be utilised within the scope of sexual violence prevention practice, through community education and engagement, particularly with men and boys. Affirmative consent legislation presents an opportunity to use the law as a starting point to build out conversations about sexual development, pornography, sex within and outside intimate relationships and 'Man Box' beliefs around sexual entitlement and rejection during a key transition point in young people's lives.⁹

Recommendation 9: Build on the delivery of Respectful Relationships Education (RRE) towards a sexual violence trauma-informed, whole-of-school approach that integrates prevention with early identification, safeguarding and specialist responses.

Emerging research suggests that schools need to more explicitly consider the needs and experiences of victim survivors, recognising that many participants may already have experienced child sexual abuse, family violence, harmful sexual behaviours or other forms of sexual harm. As a first step, RRE in schools should be expanded as both a referral pathway into early intervention programs for children, young people and their families, and to update content to include education around online risks and safety in RRE and sexuality education, as part of both primary prevention and early intervention approaches.¹⁰

Effective school-based early intervention would also include strong partnerships with specialist sexual assault services to better support victim survivors and prevent future violence. At present, specialist services such are frequently relied upon to fill critical gaps in expertise, though are constrained by limited funding and capacity.

Priority Area 3: Children and young people

Recommendation 10: Child sexual abuse occurring outside domestic and family violence contexts to be considered within the scope of the Second Action Plan.

Although we recognise this as a critical and distinct area of policy, practice and reform, SASVic's members have overwhelmingly called for child sexual abuse to be considered within the scope of the Second Action Plan. SASVic notes that these distinctions are unhelpful in that they do not adequately reflect the experience of victim survivors given experiences of child sexual abuse and other maltreatment often co-occur with domestic and family violence and are associated with future victimisation, including intimate partner violence and sexual violence in adulthood.¹¹

⁹ Forthcoming paper (2026). Innovative Prevention Approaches to Sexual Violence

¹⁰ Dr Monica Campo (2026). Early intervention approaches with children and young people aged 10-14 to reduce and prevent sexual violence and harm. A scoping review (Forthcoming paper)

¹¹ Dr Monica Campo (2026). Early intervention approaches with children and young people aged 10-14 to reduce and prevent sexual violence and harm. A scoping review, p. 7 (Forthcoming paper)

This is also true in that the occurrence of ‘mass perpetration events’ involving more than one perpetrator and hundreds of victims increases demand on the specialist sexual assault and harmful sexual behaviour service system. SASVic members are reporting daily calls from concerned teachers and parents seeking support and must be funded to respond to this demand.

Recommendation 11: Develop disability-specific respectful relationships and consent education resources and include explicit workforce capability requirements around responding to disclosures from people with disability.

People with cognitive disabilities are often excluded from school-based RRE programs and consequently may not have had access to information on their rights, what sexual violence is or consent law and the current suite of resources available do not meet the needs of children with a disability.

Resources do not exist for complex communication needs, including non-verbal students who communicate via AAC (Augmentative and Alternative Communication) devices. Standard consent education does not account for the reality that many students with disability require hands-on support for personal care from support workers daily. This creates genuine confusion and can inadvertently undermine safety messaging. The grey areas of relationships are particularly challenging as autistic individuals (and other people with a disability), often find the implicit, non-verbal dimensions of consent and relationships, reading body language and interpreting ambiguity, extremely difficult.

Priority Area 4: People who use violence

Recommendation 12: Implement recommendations to ensure fairer and more respectful treatment of victim survivors of sexual violence from the Australian Law Reform Commission report into Justice Responses to Sexual Violence.

SASVic notes that recommendations contained in the Victorian Law Reform Commission's 2021 report (Improving the Justice System Response to Sexual Offending¹²) and the Australian Law Reform Commission's 2025 report (Justice Responses to Sexual Violence¹³) address many areas where justice processes could be improved to ensure fairer and more respectful treatment of victim survivors of sexual violence.

Example improvements include (without being limited to):

- Giving all complainants in sexual offence matters the right to choose to pre-record the whole of their evidence in a criminal trial
- Making counselling records subject to absolute privilege so they can only be released during a trial with the consent of the complainant
- Every jurisdiction enacting and reviewing the operation of the model tendency and coincidence laws
- Every jurisdiction strengthening and monitoring the effectiveness of improper questioning laws
- Ensuring safe and timely access to Forensic Medical Examinations
- Allowing for independent review of certain police and prosecution decisions

¹² <https://www.lawreform.vic.gov.au/publication/improving-the-justice-system-response-to-sexual-offences-report/>

¹³ <https://www.alrc.gov.au/publication/jrsv-report-143/>

- The creation of online citizen portals for police investigation updates
- Universal availability of intermediaries
- Training and funding of interpreters in sexual and gender-based violence
- Sexual violence training for the judiciary, police and lawyers
- Funding of free, independent legal advice for complainants in sexual offence matters where required during a criminal process.

Recommendation 13: Greater action and accountability for the perpetration of sexual violence is required.

Although people who use violence is a priority area, the consultation paper is silent on the perpetration of sexual violence and the role of the criminal justice system in holding people who use sexual violence to account. One of the ways that we can send clear messages about community standards on sexual violence is through the criminal justice system. However, at present, we know that most perpetrators of sexual violence will not face any legal consequences.

SASVic is also concerned with how the consultation paper includes reference to the ‘interplay between trauma, harmful substance use, mental health issues, gambling and violence against women and children and other forms of gender-based violence’. Responses that treat boys’ and men’s mental health as a factor in violence against women ignore the evidence,¹⁴ and risks taking attention and resources away from activities focused on changing the gendered attitudes, behaviours, systems and structures that drive violence.

Recommendation 14: Investment into what prevents sexual violence is needed.

The consultation paper acknowledges that the drivers, and responses differ for sexual violence, but remains silent on the need for investment into prevention research and activities.

The lack of evidence for effective prevention of sexual violence initiatives with boys and men reflects the need for greater investment and evaluation of initiatives explicitly engaging men and boys with the drivers of sexual violence.¹⁵

All levels of government should be clearly invested in prevention and response activities, using the different and complementary ‘levers’ available to them. The role of local governments should be clearly recognised and visible in the Plan, including their role in providing maternal and child health services, youth services, supports for older people, etc. all of which can and should be leveraged, with appropriate resourcing. SASVic is particularly interested in the potential application of [contextual safeguarding](#) frameworks at the local level as a strategy for preventing and responding to sexual violence and harm.

Priority Area 5: System integration and workforce

Recommendation 15: Resource specialist sexual assault support services to build the capacity of educators and parents/caregivers to identify and disrupt grooming practices and respond when harm occurs.

¹⁴ <https://theconversation.com/a-new-minister-in-victoria-will-tackle-the-manosphere-heres-what-they-should-do-280733>

¹⁵ Forthcoming paper (2026). Innovative Prevention Approaches to Sexual Violence

There are gaps in teacher confidence and capacity to respond to disclosures and complex sexual harm, emphasising the need for specialist expertise and parent and teacher education. Strengthening schools' capacity to recognise and respond to harmful sexual behaviours may represent an important opportunity to prevent future victimisation and support healthy sexual development, but schools will need the support and resources of the specialist sexual assault sector to do this effectively.

While RRE programs provide an essential foundation, schools increasingly require specialist capability to respond to disclosures, student-to-student sexual harm, harmful sexual behaviours, pornography, image-based abuse and other forms of technology-facilitated sexual violence. Effective school-based early intervention should combine RRE with sexual violence trauma-informed support, digital safety, responses to harmful sexual behaviours and strong partnerships with specialist sexual assault services to better support victim survivors and prevent future violence.¹⁶

Recommendation 16: Use all levers available at the Commonwealth level to prevent and address systems abuse.

There is a need for greater attention to be paid towards the role of the Commonwealth in addressing systems abuse. There is a limited focus on systems abuse overall, and currently, the consultation paper only positions this within Priority Area 1: Victim Survivors. This is despite systems abuse being recognised as a way that perpetrators maintain coercive control, threaten, intimidate and facilitate gendered violence and abuse, including sexual violence. There is also no reference to the

Areas for particular focus include but are not limited to:

- NDIS: e.g., insufficient safeguarding measures that give perpetrators access to children.
- Migrant and refugee women on temporary visas: including limitations of the *Family Violence Protection Act 2008*, that do not apply to victims of sexual violence occurring outside of a domestic relationship.
- Reproductive coercion: including abuse that withholds the reproductive rights of victims of sexual violence, such as and a lack of access to health systems in regional and rural locations.
- Family law systems: including the intersection of sexual violence issues with family violence matters, family law matters and child protection matters (e.g., financial abuse occurring as a result of participating in family law/court proceedings, limited access to legal aid and legal representation, limited legal protections for counselling records to be subpoenaed during family court matters)
- Child and Family Violence Information Sharing Schemes: including lessons from the application of the schemes in Victoria that shift the focus from the perpetrator to scrutiny of the victim survivor (e.g., Aboriginal victim survivors raise concerns with information sharing schemes being abused by the perpetrator to involve Child Protection).

¹⁶ Dr Monica Campo (2026). Early intervention approaches with children and young people aged 10-14 to reduce and prevent sexual violence and harm. A scoping review (Forthcoming paper)

- Protection of survivors' sexual-abuse related compensation from being eroded via retrospective reimbursement claims from Commonwealth systems such as Centrelink.