



MY DIGNITY

MY BODY IS MINE

**“ Just because I couldn’t stop it
doesn’t mean I let it happen. ”**

A resource for people who have experienced sexualised violence or people who would like to learn more. *Contains examples of violence and abuse.

IN AN EMERGENCY

In Australia, call Triple Zero (000)

In New Zealand, call Triple One (111)

SUPPORTS

Please note *My Dignity* is a resource not a service response. A range of supports and resources are listed in this resource.

About Insight Exchange use of QR Codes

Insight Exchange uses static QR Codes to support quick access to our website and resources.

We always describe what the QR code opens. We use only static QR Codes to eliminate the collection of identifying user data. Every page on the Insight Exchange website has a safe exit button. We do not use QR Codes to other websites.

THE PURPOSE OF THIS RESOURCE:

This resource is for any person who may be experiencing, or has experienced, sexualised violence, and for anyone who may be responding.

Not all cultures, communities or organisations are comfortable to talk about sex.

Not all cultures, communities or organisations are comfortable to talk about violence and abuse.

Both of these 'taboos' can add to the barriers and difficulties in seeking support or talking to anyone at all about sexualised violence and abuse.

Sexualised violence is often perpetrated by the people we know and may love or live with, and sometimes the people we love most. This can be very painful and complex to make sense of and to talk about.

Victims of sexualised violence often feel confusion, disgust, horror, betrayal, self-blame, shame and profound distress when a family member or partner chooses to exploit their close relationship to perpetrate sexualised violence.

Social and cultural expectations can make saying something to anyone even more difficult.

Whether you tell someone now, later or ever, it is your right to have access to information and resources that support your making sense of the violence and abuse used against you.

“

My body is mine. But sometimes it doesn't seem so.

Other people, even people I love or people I live with, use my body for their pleasure or their power.

I don't like to talk about it ... but I would like to talk about it with the right person.

I don't know how to talk about it in a way that will ensure I am treated with respect by the people I tell.

I'm not sure who to trust ... but pretty sure about who not to trust.

I have to figure out what's next ... to avoid, reduce, escape, stop the violence.

So, I want to know more...

”



NATIONAL, STATE AND TERRITORY DEFINITIONS OF DOMESTIC AND FAMILY VIOLENCE AND CRIMINAL CODES VARY, HOWEVER VIOLENCE AND ABUSE IS NEVER ACCEPTABLE IN ANY COMMUNITY, FAMILY, INSTITUTION, PLACE OR CONTEXT



My Dignity My body is mine is for all people. Insight Exchange respects the diversity of all sexualities and gender identities including but not limited to; Lesbian, Gay, Bisexual, Transgender, Intersex, Queer and A-Sexual + identities as well as Heterosexual and Cisgender identities.

LANGUAGE

Throughout this resource we use the word:

- **‘Victim’** to refer to a person who is being or has been deliberately harmed, not as an identity term.
- **‘Perpetrator’** to refer to a person who is deliberately harming or has harmed others, not as an identity term.

Throughout this resource we use these terms for the purposes explained below:

- **‘Violence’** is used to encompass a range of oppressive, abusive, controlling, undermining and overpowering behaviours.
- **‘Sexualised violence’** is used instead of ‘sexual violence’ or ‘sexual assault/abuse’ (unless using a quote) because the behaviours these terms refer to are a form of ‘violence and abuse’ not a form of ‘sex’. Our intention is to draw attention to the violence and abuse without the use of the mutualising term ‘sexual or sex’.
- **‘Resistance to violence’** is used to describe and acknowledge the myriad ways victims of violence try to create safety and uphold their dignity while being oppressed, assaulted, or abused.

DIGNITY

Dignity is central in our day-to-day lives and in every interaction.

People die for dignity. They have for centuries.

Decisions about safety are not always separate from or superior to dignity.

Dignity is always at stake.

“Socially we are protecting one another's **dignity** almost all the time; and we are really good at it. All forms of violence are a humiliation of dignity. The perpetrator of abuse is often not the person who will restore **dignity** to the victim. The victim is not going to get an adequate apology. They are not going to get an adequate acknowledgement. And that is where we all come in. Our job is to uphold the **dignity** of the person. One of the things we don't do is go to 'advice giving'. When we go to 'advice giving', we are saying the person is not already competent enough to have thought of that themselves, and so advice giving is a humiliation of **dignity**.

We need to be careful about our practices. Instead of advice giving, a dignifying practice is to ask – 'Wow, that's a hard situation, how did you respond? What did you do?' Then we begin to learn about their pre-existing competency, their pre-existing skill and awareness, their pre-existing efforts to be safe. We tap into their pre-existing **dignity**, spirituality, capacity. That's what we are looking for. That is the flame of **dignity**. That's what we want to uphold.”

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CONTENT

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These chapters can be read in any order.

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**What is
sexualised
violence?**

**Sexualised violence is a
form of 'violence' not a
form of 'sex'.**

Sexualised violence is a form of **‘violence’** not a form of **‘sex’**.

Sexualised violence always involves the use and abuse of power. The perpetrator ignores the need for consent and suppresses the resistance of the victim. The perpetrator uses a range of tactics such as direct and indirect, subtle and psychological, forceful and physical behaviours.

Why not call it ‘sexual violence’?

Sexualised violence has nothing to do with affectionate, erotic or romantic *sexual* relations between actively consenting adults (Coates & Wade, 2004).

On the contrary, active consent has been described as a *mutual and voluntary “whole-of-body” (verbal, physical and emotional) expression which communicates an enthusiastic, honest, conscious, voluntary, sober and ongoing agreement to participate in sexual activities between adults over the age of 16 years* (Project Respect, 2020).

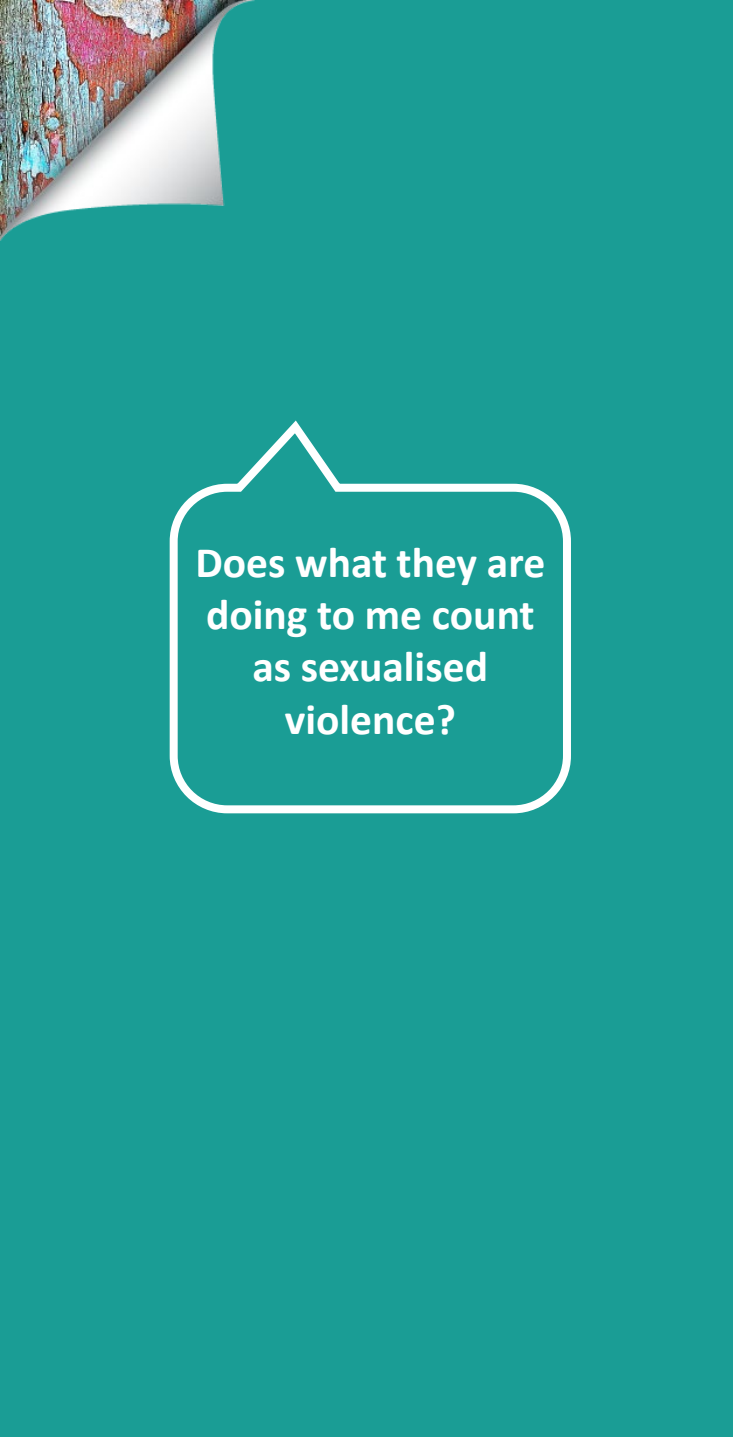
Silence or the absence of verbal or physical resistance to sexual activities does not indicate active consent (Project Respect, 2020).

Because of the way a perpetrator uses forms of power over, and violence against, a victim, the absence of overt or obvious defiance does not equal consent. Resistance to violence and abuse is often quiet and completely concealed.

**The age of consent to sexual activities in NSW is 16 however the age of consent can vary in state and territories, and internationally. For example the age of consent is 17 years in South Australia and Tasmania.*

You can read more about the age of consent laws on the Australian Institute for Family Studies website
<https://aifs.gov.au/cfca/publications/age-consent-laws>





**Does what they are
doing to me count
as sexualised
violence?**

Sexualised violence encompasses all behaviours used by a perpetrator to threaten, coerce, violate, or force the targeted person (victim) into sexualised activity.

A perpetrator's tactics can include other forms of coercive control, violence and abuse.

Sexualised violence encompasses all behaviours used by a perpetrator to threaten, coerce, violate, or force the targeted person (victim) into sexualised activity.

These behaviours include, but are not limited to:

- Forcing genital contact.
- Forcing contact with the perpetrator's mouth.
- Vaginal, anal or oral penetration by a penis, finger or any other object.
- Groping the victim's breasts, genitals or buttocks.
- Voyeurism – for example, the perpetrator watches the victim in intimate locations such as their bedroom or bathroom through hidden video-cameras, or through a window/door.
- Exhibitionism – for example, the perpetrator exposes their genitals to the victim.
- Forcing the victim to watch or involve the victim in pornography.
- Forced use of intoxicants to minimise the victim's resistance to sexualised violence or exploiting the victim's use of alcohol and other drugs to commit sexualised violence.
- Sexualised harassment including intrusive verbal comments or sexualised body language. (Royal Commission into Institutional Responses to Child Sexual Abuse, 2017).
- Reproductive coercion or abuse is when a person is prevented from making their own choices about reproduction. Most commonly,

it's when a woman is stopped from making choices about her reproductive system. (The reproductive system includes the parts and functions of the body involved in the menstrual cycle, sex and sexual pleasure, pregnancy and birth.) *More about Reproductive abuse on 1800 Respect*
<https://www.1800respect.org.au/violence-and-abuse/reproductive-abuse/>

Perpetrators of sexualised violence often use physical force to constrain the resistance of victims. This often includes the use of:


- objects and restraints
- non-fatal strangulation*
- suffocation
- physical assaults to the victim's head, neck and face

These physical assaults can (in one assault or a combination of assaults) develop into acquired brain injuries, other serious life-changing injuries and death.

** Note: A person may use words other than 'strangulation' or 'suffocation' to describe these assaults. For example: gagging, choking/choking during sex, 'breath-play' (erotic asphyxiation), 'rough sex'. Some of these terms can be mutualising and conceal the violent and abusive nature of the behaviour). To read more about non-fatal strangulation, see [p 22](#) in this resource.*



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**What about all
the ways I tried
to say no and to
make it stop?**

**Perpetrators anticipate,
suppress and overpower
resistance.**

**Whenever people are
subjected to violence,
they resist.**

(Coates & Wade, 2007;
Wade, 2000; Wade 1997).

Resistance to violence is:

- Any action (verbal, mental, emotional, spiritual, physical) that opposes the violence, attempts to limit its affects, and attempts to maximise safety.
- Rarely successful in stopping the perpetrator of violence, but important in creating safety and upholding dignity.
- Usually covert and prudent.

(Coates & Wade, 2007; Wade, 2000; Wade 1997).

People resist violence and abuse **overtly and covertly in creative, resourceful and clever ways; sometimes in seemingly illogical and harmful ways; sometimes in careful and cautious ways, but **always to uphold or reclaim their dignity** and often to **stay safe and protect the people they love**.**

Examples of victims' **RESISTANCE** to violence and abuse



Every time he visits to see the kids, he sexually assaults me. I can't stop the violence, but now I am **refusing to take my bra off in each and every assault.**



I have been **self-harming so that the perpetrator would reduce the degree of sexualised violence** as he didn't like the look of my self harm marks.

Night after night I cried after 'sex'. During 'sex' there was a painting of us both displayed in our bedroom. I would look at the painting at the time and, **looking at my eyes in the painting and mentally reminding myself I have eyes and I can see you abusing me.**

My partner has repeatedly raped me, so I resist by **refusing to take care of my personal hygiene to make myself as unclean as possible to protect myself.**

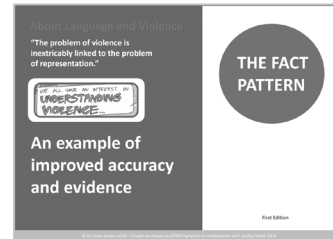


Whenever people are subjected to violence, they resist. It can be in a range of ways and the examples in this chapter are different and not conclusive.

Perpetrators anticipate, overpower and suppress resistance.

Sometimes the acts of resistance by a victim of violence are hidden or only in the privacy of the victim's mind because that is the only safe response at the time.

The victim of violence knows the context they are in and they are also mindful of consequences of further danger, violence and abuse that may occur in response to how they resist and respond.



On the following pages you can read three different accounts of an incident of sexualised violence which highlights the importance of resistance and responses to violence as part of the fact pattern.

The account is an excerpt (Account 03, page 8) from [The Fact Pattern](#) resource, a summary of the work of Dr Linda Coates and Dr Allan Wade from the Masterclass on Language and Violence hosted in the [Language Lab](#) on: www.insightexchange.net

A common account

They were arguing. Something was said and Mr. Smith lost control. He grabbed her and they struggled. The struggle got into the bedroom. He swooped her up and put her on the bed. He kissed her. They had sex.

A more detailed account

Mrs. Smith reminded him to take out the garbage. **He** began **yelling at her**. **He called** her denigrating names. **Mr. Smith** lost control. **He grabbed** her. **He tightened** his grip and **yanked** her toward him. **He grabbed** her around the waste and **forced** her off the ground. **He dragged** her into the bedroom and **threw** her onto the bed. **He grabbed** her by the hair and arm and **wrenched** her over. **He jerked** her down the bed toward him. **He pinned** her on the bed with the weight of his body. **He grabbed** her face. **He forced** his tongue into her mouth. **He yanked** her skirt up. **He raped** her.

This account misrepresents violence by obscuring responsibility (they struggled), mutualising unilateral actions (arguing, kissed, sex), and ignoring resistance to violence.

This account begins to clarify who did what to whom.

Analysis of this account

- His unilateral violent actions are recorded.
- Resistance to violence is missing in the account

Note the false representation of Mr. Smith's violence - "Lost control" - as if no intent. This representation conceals the violence and/or obscures the responsibility through the false representation of intention.

A more accurate account

Mrs. Smith reminded him to take out the garbage. He **began yelling at her**. She **went quiet and started to walk out of the room**. He **called her denigrating names**. She **told him not to talk to her that way**. Mr. Smith lost control. **He grabbed her**. She **pulled back**. He **tightened his grip and yanked her toward him**. She **twisted to try to get away**. He **grabbed her around the waist and forced her off the ground**. She **kicked her legs and threw her weight backwards**. He **dragged her into the bedroom and threw her onto the bed**.

As soon as she landed, she **rolled over and moved to the head of the bed to try to get off the bed**. He **grabbed her by the hair and arm and wrenched her over**. She **grabbed the edge of the bed**. He **jerked her down the bed toward him**. He **pinned her on the bed with the weight of his body**. She **tried to breathe**. He **grabbed her face**. She **tried to turn away**. He **forced his tongue into her mouth**. She **concentrated on not gagging because she knew he would hurt her worse**. He **yanked her skirt up**. She **went quiet**. He **raped her**. She **went elsewhere in her mind**.

This account clearly shows that the victim resisted the violence including the sexualised violence, and the perpetrator of violence anticipated, suppressed and overpowered the victim's resistance to violence.

Analysis of this account

- His deliberateness is evident in how he overpowers her resistance
- Resistance to violence is present in the account





**How complicated
is consent?
Is consent one
decision or
many?**

Consent is something
we are always
negotiating, and so
often without words.

An example: **A KISS**

**CONSENT IS
SOMETHING WE ARE
ALWAYS NEGOTIATING,
AND SO OFTEN
WITHOUT WORDS.**

When we think about the act of kissing, how do we coordinate that? ...eye contact, holding eye contact, but in a particular way, not a 'death stare' or a look of indignation... then maybe moving a little closer physically, then checking, noticing if the other person remains comfortable... more eye contact, a leaning toward the other and if it's reciprocated a leaning toward each other, then perhaps a tilting of heads, coordinating speed and movement to avoid crashing of heads and the chipping of teeth, perhaps some ongoing realignment of faces and bodies, a continuous loop of awareness, assessment and action in interaction to ensure balance and posture as we move closer and then perhaps lips coming together... **often without words ...and at each moment in this interaction there is a mutual and coordinated effort.**

Then once lips meet both people have to decide is this just a friendly kiss or a more romantic kiss ... and if one opens their mouth just a little how does the other respond? If by tightening their mouth and tensing their shoulders, well that is **a clear form of saying no to a romantic kiss... often without words...**but if the person who wanted the more romantic kiss' ignores this communication, and forcefully holds their mouth to the other person's and forces their tongue in, this is no longer a 'kiss' (of any kind) but an assault.

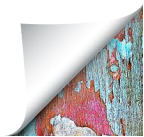
Instead of moving the kiss back to where the person is signalling consent, the initiator has overpowered the **mutual act** of 'kissing' and hijacked the kiss, changing it into a **unilateral act** of assault.


There are **many micro moments of active consent** happening with just a kiss. Now think about something like sexual intercourse and all the moment by moment coordination that takes, and that people do that all the time. We can each start with a mutual feeling and 'we can agree to have sex', 'we can want to have sex', we can be 'hoping to have sex', **but the moment that open and active consent stops that's not sex.**

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**Does it count as
sexualised violence
if the person
violating me is my
partner or family?**

Sexualised violence is frequently perpetrated by current and former partners and family members in the context of domestic and family violence.

Sexualised violence is frequently perpetrated by current and former partners and family members in the context of domestic and family violence. [AIHW, 2019]

What is Domestic and Family Violence (DFV)?

Domestic and family violence includes any behaviour, in an intimate or family relationship, which is violent, threatening, coercive or controlling, causing a person to live in fear and to be made to do things against their will. DFV can happen to anyone and can take many forms. It is often part of a pattern of controlling or coercive behaviour.

An intimate relationship refers to people who are (or have been) in an intimate partnership whether or not the relationship involves or has involved a sexual relationship, i.e. married or engaged to be married, separated, divorced, de facto partners (whether of the same or different sex), couples promised to each other under cultural or religious tradition, or who are dating.

A family relationship has a broader definition and includes people who are related to one another through blood, marriage or de facto partnerships, adoption and fostering relationships, sibling and extended family relationships. It includes Kinship connections in Aboriginal and Torres Strait Islander communities (see – Family Violence), extended family relationships, and family of choice within Lesbian, Gay, Bisexual, Transgender, Intersex, Queer and Asexual + (LGBTIQ+) families and communities.

People living in the same house, people living in the same residential or institutional facility and people reliant on care may also be considered to be experiencing DFV when one or both people in the relationship try to create an imbalance of power to establish coercive control and commit violence.

Women and children are overwhelmingly the victims of DFV and those who use violence are overwhelmingly male.

DFV can be perpetrated by a partner, family member, carer, house mate, boyfriend or girlfriend. Women also commit DFV against men, as do same-sex partners (DVNSW, 2018). DFV is also committed by and committed against people who identify as transgender, non-binary, intersex and gender-diverse.

What is Family Violence?

The term Family Violence describes physical, emotional, sexual, social, spiritual, cultural, psychological and economic abuses that may be perpetrated within a family and community. The term also recognises the broader impacts of colonial violence and racism; on First Nations families, intergenerationally, through extended families and Kinship connections and community relationships. It has also been used in the past decade to include Lateral Violence, self-harm and suicide, and has become widely adopted as part of the shift towards addressing familial violence in all its forms. (Gordon, 2002).

Examples of the behaviours that may represent domestic and family violence are included on [page 21](#) in this resource.

A perpetrator's tactics can also include, although are not limited to:

- emotionally abusive tactics (humiliation, degradation and dehumanisation)
- economic abuse
- isolating the victim from their supports including from health and human service
- making threats to harm a victim or someone close to the victim/survivor
- threatening to 'out' the gender identity, sexual orientation or HIV status of victim without their consent.
- Deliberately misgendering a victim and/or using homophobia, intersexphobia, biphobia and transphobia as a means to threaten, humiliate, assert power and control over the victim.
- perpetration of physical assaults, including non-fatal strangulation, suffocation and head injuries.* (For more on non-fatal strangulation, see next page.)
- verbal abuse, undermining the victim's sense of reality (gaslighting)
- online-harassment, stalking, surveillance and control of victim's movements
- kidnapping or deprivation of liberty
- damage to property, and
- the manipulative use of children to control partner/family members (NSW Government, 2014).



** Note: A person may use more plain language descriptions for words like 'strangulation' or 'suffocation' to describe assaults. For example: "choked me"; "pressed me up against..."; "held me by the neck"; "squeezed my neck"; "hands around my neck"; "had me in a choke hold"; "throttled me"; "sat/ lay on top of me/on my chest"; "pinned me down"; "smothered me"; "gagged me"; "tried to drown me". (DVSM DFV/ABI Project Report, 2018)*

Non-fatal strangulation

Perpetrators of sexualised violence often choose to use non-fatal strangulation to reduce the physical and emotional capacity for victims to resist the assault.

Most sexualised assaults involving the use of non-fatal strangulation and suffocation are perpetrated by a current or former partner or a person known to the victim (Mcquown, Frey, Steer, Fletcher, Kinkopf, Fakler & Prulhiere, 2016). Victims of sexualised violence and non-fatal strangulation and suffocation more frequently report being assaulted in their own homes in comparison with other locations (Midttun, 2021).

Many victims of sexualised violence, non-fatal strangulation and suffocation delay seeking a medical assessment and attention and are more likely attend a domestic violence or sexual assault service than an Emergency Department (Midttun, 2021).

Non-fatal strangulation deprives the brain of oxygenated blood which can cause death, brain injury, blood clots, heart attack, stroke and long-term disabilities in the victim (Domestic Violence Service Management, 2018).

Approximately half of all survivors of non-fatal strangulation and suffocation have no visible injuries (Midttun, 2021). As non-fatal strangulation and suffocation can cause amnesia, some survivors may not remember the strangulation or suffocation the time of the assault (Midttun, 2021).

Resources for Responders:

- Explore the DVSM Responder Guide on [DFV/ABI Resource 03: Domestic and Family Violence & Strangulation](#)
- Refer to [Page 55](#) to read more about the 'Symptoms of Strangulation (SOS) cards' developed by the Western NSW Local Health District PARAVAN team.

What about “consensual choking” or “breath play”

So called ‘Consensual choking’ or ‘breath play’ – also known as erotic asphyxiation between partners or autoerotic asphyxiation with oneself is dangerous.

The current medical advice is that there are no safe ways to engage in erotic asphyxiation. This form of sexual practice can result in the same medical risks as non-fatal strangulation including acquired brain injuries, heart attack, stroke and death (Sendler, 2018).

If consenting partners choose to use erotic or autoerotic asphyxiation during sex then it is recommended that all partners are sober to maximise choice and active consent and to respond to any medical concerns experienced by the receiving partner such as loss of consciousness (Sendler, 2018).





IS PORNOGRAPHY A TROJAN HORSE?

Exploring how violence and abuse is introduced through language and socialisation of pornography.

“

“Pornography has an inescapable influence on how we view ‘sex’. Pornography is so prevalent - people talk about it like it is a healthy expression of sexuality in general culture.

Heterosexual, cis-gendered men are the primary consumers of pornography. Pornography is playing an increasingly significant role in boys’ and young men’s peer cultures and sociosexual relations (Flood, 2010). The increasing violence in pornography is concerning. Over 88% of videos have some act of male violence or aggression and this is contributing to sexual radicalisation where they think this is normal (Bridges, Wosnitzer, Scharrer, Sun & Liberman, 2010).

Studies show that the more porn boys watch, the more they expect it to be reflected in real life, and then they drive that themselves by reflecting it in real life, by violating boundaries (Flood, 2010; Hald, Malamuth & Lange, 2013; Malamuth, Hald & Koss, 2012).

“Perpetrators may use the term ‘kink’ to disguise their violence - sexual coercive behaviour, forced anal sex, strangulation during sex. These acts are used by perpetrators as a trojan horse to introduce violence into the relationship. Porn is teaching young boys and men to introduce violence into relationships and its working (Vandenbosch & Van Oosten, 2017)”

*Georgia Archbold-Digby - Family Safety Practitioner
Relationships Australia Victoria*

”

“ DID YOU HAVE ‘SEX’ WITH ME WHILE I WAS ASLEEP? ”

“Rape myths are still incredibly pervasive. It’s commonly believed that if it’s your boyfriend or your spouse, if you’re sharing a bed, if you’re naked, if you consented earlier, then it can’t be rape. There is a really big difference between gently waking your partner and initiating sexual activity and actually doing something sexual or penetrating someone while they’re still asleep.

“The 2003 Sexual Offences Act is crystal clear,” she continues. **“Consent can only be agreed when you have the capacity to make that choice –and if you’re asleep or unconscious, you don’t.** We’re talking about rape – one hundred per cent.”

Katie Russell, national spokesperson for Rape Crisis
Rape Crisis England & Wales (2021)

See: Moore, A. (2021, June 15). The sexual assault of sleeping women: the hidden, horrifying rape crisis in our bedrooms. The Guardian. Retrieved via: [https://amp-theguardian-com.cdn.ampproject.org/c/s/amp.theguardian.com/society/2021/jun/15/the-sexual-assault-of-sleeping-women-the-hidden-horrifying-crisis-in-britains-bedrooms](https://amp.theguardian.com/cdn.ampproject.org/c/s/amp.theguardian.com/society/2021/jun/15/the-sexual-assault-of-sleeping-women-the-hidden-horrifying-crisis-in-britains-bedrooms)



Lived experience insights of sexualised, domestic and family violence reveal the multiple intersecting dimensions of abuse and violence and how experiences that have so much in common are also each unique. There are many published insights for people who want to learn more.

MANY VOICES - MANY INSIGHTS

Voices of Aboriginal and Torres Strait and Pacific Islander Women

Through the **Breaking Silent Codes Movement**, Aboriginal, Torres Strait and Pacific Islander women share stories of cultural and spiritual responses to sexual assault and family violence in communities across Australia and Pacific.

www.breakingsilentcodes.com.au

Voices of Trans women of colour living in Australia

Trans women of colour are at high risk of sexual violence. However, they are often overlooked in national statistics or research on sexual violence against women. The 'Crossing the Line' exhibition draws on the findings of a research study which explores the lived experiences of sexual violence against trans women of colour living in Australia.

The photographs and stories in this exhibition represent women's accounts of sexual violence, their resilience and their need for acknowledgement and support.

www.crossingtheline.online

Voices of Insight

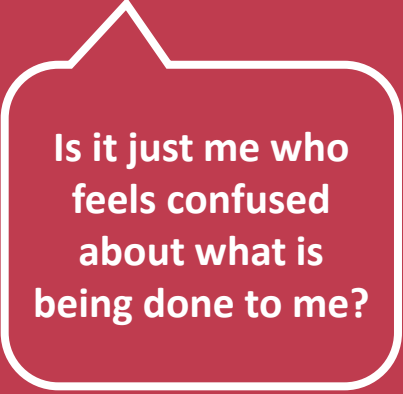
The *Voices of Insight* narratives collated through Insight Exchange share the context in which the person experienced and resisted and responded to the abuse they experienced.

[Voices of Insight](#) are de-identified narratives of people's lived experience of domestic and family violence and other adversities. Sexualised violence is a common feature in these narratives, which have been developed through the Insight Exchange interview process designed to affirm agency, uphold dignity and support safety.

These narratives aim to provide a more accurate account of what has occurred through highlighting the ways in which a person has resisted and responded to the violence used against them. They explore the context in which the violence has occurred, and how people, services and systems responded to victims of violence and how these responses were helpful, unhelpful or harmful.



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**Is it just me who
feels confused
about what is
being done to me?**

Victims of sexualised violence often feel confusion, disgust, horror, betrayal, self-blame, shame and profound distress when a family member or partner has chosen to exploit their close relationship to perpetrate sexualised violence.

DOMESTIC AND FAMILY VIOLENCE AND SEXUALISED VIOLENCE

Rather than conceptualising sexualised violence and domestic and family violence (DFV) as two separate forms of violence, a more nuanced understanding is needed. Sexualised violence in the context of DFV perpetration is one aspect of a repeated and pervasive pattern of coercive control. (Hill, 2019; Laing & Humphreys, 2013).

National Risk Assessment Principles for Domestic and Family Violence

“Intimate partner sexual violence (IPSV) is a uniquely dangerous form of exerting power and control due to its invasive attack on victims’ bodies and the severity of mental health, physical injury and gynaecological consequences.

One study found women who were physically abused and who also experience forced sexual activity or rape, were seven times more likely than other abused women to be killed. IPSV was the strongest indicator of escalating frequency and severity of violence, more so than stalking, strangulation and abuse during pregnancy (Campbell et al. 2003). Another report found that Australian domestic violence workers believe that 90-100 percent of their female clients have experienced IPSV (Heenan, 2004).

More than other factors, IPSV is under-reported by victims. Shame and stigma caused by commonly held assumptions that discussing sex or sexual assault within relationships is “taboo”, are significant barriers to seeking help for IPSV.”

By Toivonen and Backhouse (2018)

Sexualised violence is often perpetrated by family members (most commonly fathers, step-fathers, brothers, cousins) and current and former partners (husbands, boyfriends, girlfriends) against the very people (children, young people and women) they claim to love.

Victims of sexualised violence often feel confusion, disgust, horror, betrayal, self-blame, shame and profound distress when a family member or partner has chosen to exploit their close relationship to perpetrate sexualised violence.

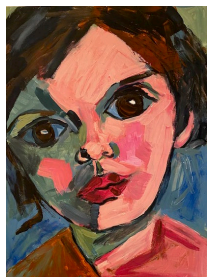


See examples (from [page 28-30](#)) of how coercion can be used to create confusion for the victim of violence.



EXAMPLES

Violence and abuse can be perpetrated anywhere by any person, including people we love or live with, however it is never acceptable in any place or context.



© 2020 Anon. Image created and donated by adult survivor, and protective mother.

“She is slightly pissed off saying ‘I’m here. Don’t underestimate me.’”

”

“I just felt like I had no choice”

“We’d been married seven years when I contracted an STD (sexually transmitted disease). And that’s when I knew there were some extramarital stuff happening. There was even parts of our sexual relationship that were not normal. I felt sometimes like - am I a human or am I an animal? That’s how I felt. He was always wanting to watch porn and I felt degraded as a woman. It was just I felt like I had no choice; I have to do this.”

Excerpt from Sophie (Voices of Insight Interview)

“He purposely got me pregnant ”

“He decided to book a holiday to Bali... Then, I swear, he purposely got me pregnant on that holiday. It’s not the best method but we usually just ‘pull out’. It had been working for a long time. But he didn’t, and I was like, “oh my god, why did you do that?” He said, “I don’t know, get the morning-after pill.” And I thought “in Bali? Do you want me to die?!” Seriously, as if you would take the morning-after pill in Bali. His flippancy! The whole, “get the morning after pill if you want”. We had discussed it and I had always said, I never wanted children. My reason for never wanting children was because parents hurt children. I did not want something that I loved that much to be hurt by me. I do not want that responsibility. That’s too much. That was a big thing for me. When I found out I was pregnant, I was really, really concerned.”

Excerpt from Rose (Voices of Insight Interview)

”

“

“He felt me up while driving down the freeway”

“....He would start ‘feeling me up’ while we are driving down the freeway. I didn’t want to be involved but I was under pressure at 100km p/hour he was in control of the car and what was happening. I was 13. He was 16. He did that kind of stuff all the time where I was stuck, or where saying something in the moment would draw on the attention of people around us, so I was silent. Both our families thought it was good we were together. I had no one to tell and no where to turn, there was so much violence in my own family I had to work this out on my own. I kept finding ways to avoid his advances. At the same time, because he was older than me he did things as if he were ‘more experienced than me’ or ‘taking care of me’ like it was love. It was all too intense. When I broke up with him he tried to kill himself. He blamed his attempted suicide on me from the break up, saying he couldn’t live without me. I was 14. It was so much pressure, and nowhere to talk about it, so we resumed dating, married and had children. It wasn’t until years later I had the certainty and confidence that I wasn’t ‘responsible’ for his behaviour.”

Excerpt (anonymous) person with lived experience of DFV.

“Waking me up in the middle of the night”

“....He would be very controlling about when he wanted to have sex, the positions, where it took place. If we had sex, it would be with pornography on or he would wake me up in the middle of the night to have sex. It wasn't that I didn't consent to it. I woke up and I joined in. It wasn't like I was saying no. It was about the lack of loving. He wasn't like, I'm waking you up and I want to make love to you. It was like, he's woken up, he wants to have sex, and this is when we're going to do it. Completely on his terms....”

Excerpt from Ruby (Voices of Insight Interview)

”

“

“Forced to give hand job in a hospital bed”

“He had everyone working for him around ‘his needs’. His mum would mind the other kids so he and I could have ‘time together’, because she said ‘he was having a hard time to look after the children’. Our children.

He would visit me in hospital while I was on bed rest to save our third baby but he would come in angry with me for the inconvenience I had caused him and that he was missing out on sex.

....He was controlling about everything. Who could visit me in hospital and for how long. He directed his parents, my family and even the nurses. When he would visit me in hospital, he would make me give him my hospital bed and tell me to sit on the visitor chair while he got in the bed and insisted I give him a hand job. He had no fear of others or the humiliation of it all... if someone walked in, the other patients, the sheets... I wanted it over and it was so stressful and it was his child. Our child.

He stayed afterward watching his favourite TV show from my hospital bed while I was left feeling so awful but not able to show it. He left angry at me even when I had given him what he wanted, and I had to wait for his TV show to finish before I could get back in my bed for ‘bed rest’.”

Excerpt (anonymous) person with lived experience of DFV.

”



“...I was afraid of even speaking about it and having to tell anybody, and it being out there. If I could hold it in, somehow it would be like it didn’t happen...”



It was several more years before I told anyone. I was in my early 20s when I first told a group of girlfriends. We were playing cards, it was a rainy day, and we were all sitting around in our flat in Auckland, playing cards and drinking... having glasses of wine and lots of girly banter. I can't remember the context but just started out, "twiss gang raped?" And then went, "oh my God, I can't believe I've said that." I was a nurse by then, and they were health students, and they went, "do you want to talk about that?" And I was like, "no. Okay, let's keep playing cards".

Zoe

© Insight Exchange | Arts Lab | Voices of Insight Collection | Artist Louise Whelan

‘Zoe’ - ‘The sexualised violence I experienced as a teen does not define me – I refuse it that.’

© Insight Exchange | Louise Whelan
Voices of Insight Collection

What if my body has physiological and pleasurable responses to sexualised violence?

The body can have physiological and pleasurable responses to sexualised violence. This can be confusing to make sense of for the victim and can be used by the perpetrator of violence and abuse against the victim of violence to further manipulate, threaten or confuse responsibility and consent.

“...in my own experience as a child, I know there were times when I wanted this pleasure response even if the situation was abusive and that confuses many victims into thinking they played a bigger role in 'deserving' or seeking it than they did.

The body is used against you for the purposes of more sexualised violence and you can feel complicit in it as it doesn't feel forced, forceful or violent - based on disclosures made to me by other survivors of child sexualised assault when I discuss this, I think this is a big barrier to people identifying their own abuse and feeling shame about it.”

Anon. Child survivor of child sexualised abuse.

Sexualised violence can elicit a pleasure response in the body but this does not mean it was not abuse or violence.

The victim's sexual arousal never implies consent.

Many victims of sexualised violence can become sexually aroused during the assault as this is a physiological response to stimulation:

<https://saawareness.com/blog/arousal-does-not-equal-consent>.


Victims who experience arousal, pleasure or orgasm whilst being assaulted have been misrepresented in the media, in Law Courts, in pornography and by the pervasive rape culture attitude that “no means yes”.

Many victims, particularly children, may feel confusion and shame and believe that they were complicit in the sexualised violence perpetrated against them.



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What about
sexualised
violence against
children and
young people?

A child cannot legally, developmentally or emotionally provide consent to sexual activity. As such adult sexualised behaviour which targets children is understood as criminal and as inherently violent.

SEXUALISED ASSAULT TARGETING CHILDREN

Any act which forces, coerces or threatens a child into sexualised violence.

A child cannot legally, developmentally or emotionally provide consent to sexual activity. As such adult sexualised behaviour which targets children is understood as criminal and as inherently violent.

Sexualised violence also includes child predatory entrapment* (commonly described through the use of the term 'grooming'), which refers to actions deliberately undertaken by the perpetrator with the aim of committing a sexualised assault (or sexualised violence) on a child.

Child predatory entrapment includes befriending and establishing an emotional connection with a child and taking actions designed to isolate the child from safe adults. Perpetrators also deliberately use a range of strategies to gain the trust of the child's parents and care givers and to minimise their suspicion with the aim of gaining unsupervised access to the child. (Royal Commission into Institutional Responses to Child Sexual Abuse, 2017).

* CHILD PREDATORY ENTRAPMENT

We acknowledge that the concept of 'grooming' is something that is only now becoming more widely understood in the community and remains the terminology used. This resource uses the term 'child predatory entrapment' instead of 'grooming' because the activity of grooming is **predatory**, and the intent of grooming is **entrapment**.

STAGES OF CHILD PREDATORY ENTRAPMENT

While there is no single method, nor validated model of child predatory entrapment, there are some stages commonly used by child molesters. These include:

Selection: identifying a victim based on ease of access, attractiveness or vulnerability.

Gaining access: with the goal of isolating a victim physically and emotionally from others.

Building trust: showering the victim with attention and/or treats and possibly building trust with the family, also.

Sexualising: increasing physical contact to prepare the child for the impending sexualized contact.

Georgia M. Winters & Elizabeth L. Jeglic (2017).



SEXUALLY HARMFUL BEHAVIOURS BY CHILDREN AND YOUNG PEOPLE AGAINST PEERS

Sexualised violence including sexual harassment, coercion and sexual assault is also used by children and young people against their peers from preschool to high school (Bendixen, Bendixen, Daveronis, Daveronis, Kennair & Kennair, 2018; Fineran & Bolen, 2006).

Sexually harmful behaviours by children and young people against their peers occurs on school premises, in classrooms and school grounds, residential school dormitories and also in social and extra-curricular contexts such as in sporting facilities, during parties and while attending school camps (Espelage, Hong, Rinehart & Doshi, 2016).

The Chanel Contos online survey recorded over 6,000 testimonies from victims who experienced sexualised violence by peers whilst attending school.

(Teach Us Consent - June, 2021)

- According to Australian Bureau of Statistics Recorded Crime – Victims’ data, in 2018, police recorded more sexual assaults for those aged 15–19 (455.0 per 100,000) than any other age group.
- This was true for both females (840.1 per 100,000) and males (86.7 per 100,000).
- Children and young people with a disability are more likely than able-bodied peers to be targeted by children and young people with problematic sexually harmful behaviours.

RightsED – Human Rights Commission resources for tackling sexual harassment:

<https://humanrights.gov.au/our-work/education/publications/rightsed-tackling-sexual-harassment-index>



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**How does
marginalisation
and oppression
intersect with
sexualised
violence?**

People who experience multiple forms of social oppression are also more likely to be targeted by perpetrators of sexualised violence.

SOCIAL OPPRESSION

“One form of violence tends to enable others. For example, the strategies an offender uses to isolate and control their partner also enables sexualized violence. The violence of colonial genocide, land theft, ethnocide, racism, displacement, and incarceration of Aboriginal people in so-called ‘mission schools’ also enabled colonial officials within those institutions to commit sexualized violence against the children.

In the same kind of way, the violence of state-enforced poverty promotes homelessness which leaves more people unprotected and more easily subjected to sexualized violence by serial predators.

The injustice of state confusion and collusion, when government criminal codes confuse violence against children with sex with children, minimize and conceal the violence, recast offenders as sexually misguided but not as profoundly violent, position children as objects of sexual desire and participants in wrongful sex, and compromise the quality of state responses at all levels.”

Centre for Response-Based Practice

“One form of violence tends to enable others.”

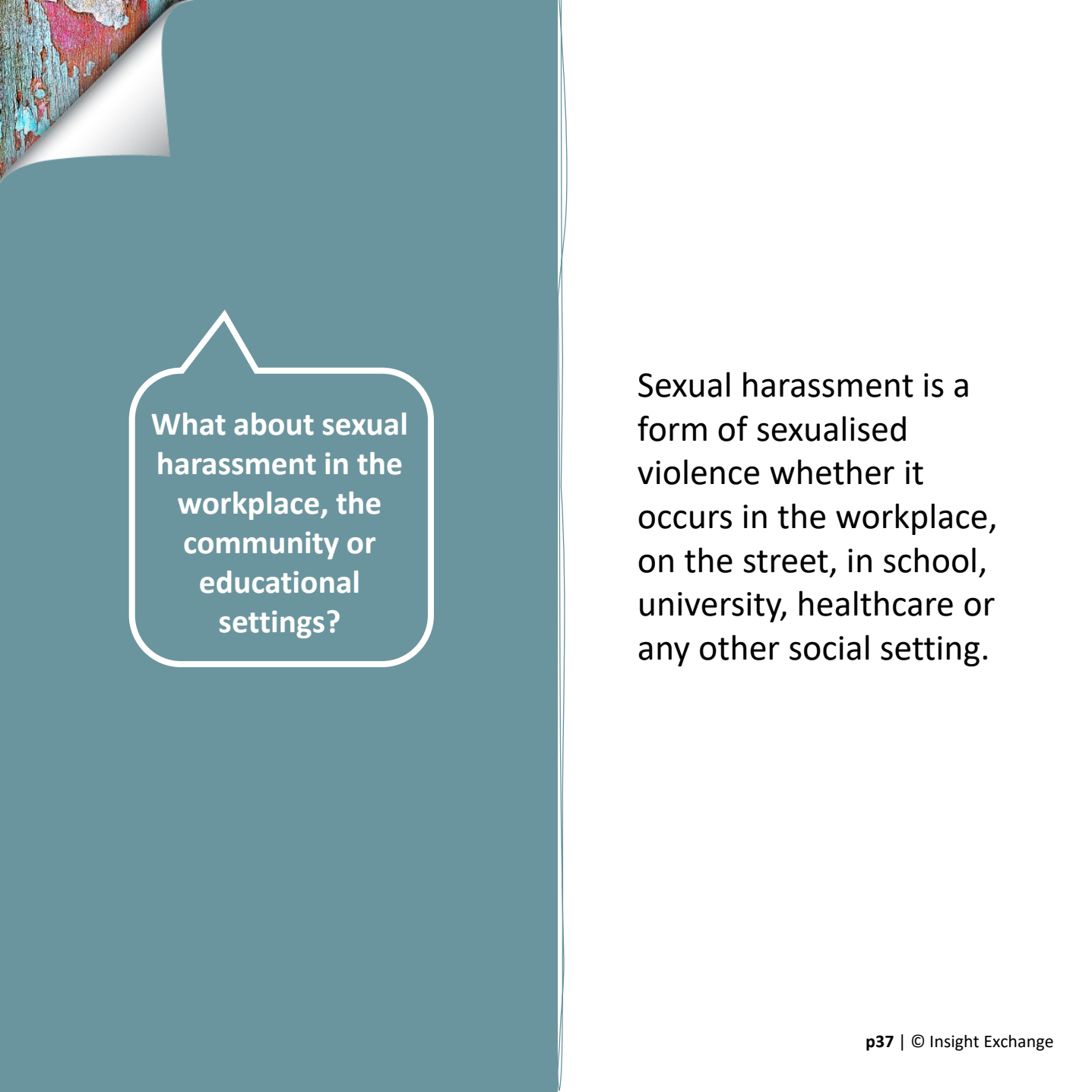
People who experience multiple forms of social oppression are also more likely to be targeted by perpetrators of sexualised violence. First Nations people, refugee and new migrant people, people living with a disability, people living with a mental illness, Lesbian, Gay, Bisexual, Transgender, Intersex, Queer and Asexual + (LGBTIQA+) people, incarcerated people, and people experiencing housing injustice and poverty are significantly over-represented in sexualised violence victims’ statistics.

Sexualised violence is disproportionately perpetrated by men who primarily target children (both boys and girls) and women (including transgender women), non-binary and gender diverse people. The threat of sexualised violence against children, women and gender diverse people is pervasive (Stringer, 2014). Children, women and gender diverse people are constantly anticipating, assessing, responding to and resisting the threat of sexualised violence.



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What about sexual harassment in the workplace, the community or educational settings?

Sexual harassment is a form of sexualised violence whether it occurs in the workplace, on the street, in school, university, healthcare or any other social setting.

The Sex Discrimination Act 1984 (Cth) defines the nature and circumstances in which sexual harassment is unlawful. It is also unlawful for a person to be victimised for making, or proposing to make, a complaint of sexual harassment to the Human Rights and Equal Opportunity Commission.

Sexual harassment is any unwanted sexualised behaviour.

It is often experienced as degrading, shaming, humiliating, uncomfortable, disgusting, horrifying and/or intimidating. Like other forms of sexualised violence, perpetrators of sexual harassment choose to ignore the verbal and non-verbal consent and boundaries of the victim.

Sexual harassment can be perpetrated once, or it may be repeated.

Sexual harassment may be part of an ongoing pattern of coercive control. The perpetrator may choose to increase the frequency and severity of the sexual harassment and perpetrate other forms of sexualised violence and assault.

Sexual harassment is a form of gendered violence that reinforces sexism and homophobia and transphobia and promotes patriarchal power (Espelage, Hong, Rinehart & Doshi, 2016).

See the legal definition of sexual harassment here: <https://humanrights.gov.au/quick-guide/12096>

Perpetrators of sexual harassment commonly use the following behaviours, practices and threats:

- Sexualised comments, insults or “jokes” aimed at the victim. This may include commenting or asking invasive questions about the victims’ body parts, sex life, gender identity and sexuality.
- Sexualised staring, watching and leering.
- Unwanted invitations or coercion to meet up on dates.
- Threatening to commit sexualised violence against the victim.
- Contacting the victim by phone, email or social media post and intentionally exposing the victim to sexualised comments or media.
- Sexualised touching which may include groping, grabbing, and forced mouth to mouth contact.
- Showing sexualised media (pictures, videos, music, recorded content) to the victim.
- Distributing sexualised media involving the victim to a public audience without the victim’s consent.
- Exposing genitals or making sexualised gestures.
- Taking photographs of the victim without the victims’ knowledge or consent.

SEXUAL HARASSMENT IN THE WORKPLACE

Sexual harassment in the workplace is a form of sexualised violence which involves all the dynamics of sexual harassment with the additional power imbalances associated with workplace contexts.

Workplace sexual harassment has been defined by the United Nations as a form of gender-based violence which most commonly is perpetrated by men against women and LGBTIQ+ identifying people.

Perpetrators of workplace sexual harassment use behaviours, practices and threats that aim for, or result in, physical, psychological, sexual or economic harm (Cobb, 2020).

In Australia:

- 1 in 3 people are sexually harassed at work. (AIHW, 2019)
- More than 2 in 5 (44%) people with a disability have been sexually harassed in their workplace in the previous 5 years.
- 39% of women and 26% of men have been sexually harassed at work in the past five years.
- Formal reporting of workplace sexual harassment is low, with only 17% of people making a report or complaint (Australian Human Rights Commission, 2018).

Workplace sexual harassment is often categorised in two ways:

- 1) When a worker is forced, coerced or threatened by an employer/person in position of power or a co-worker to engage in sexualised acts to maintain their employment or to receive a promotion. This often carries the threat that the worker will lose their employment, position or professional reputation if they resist the sexualised demands made by the perpetrator.
- 2) A hostile working environment where sexualised harassment and violence is pervasively and routinely perpetrated within the workplace. A hostile workplace environment may aim to and/or result in adversely affecting the victim's work performance, their safety and dignity (Cobb, 2020).

Sexual harassment is prohibited in the workplace under the UN General Assembly Resolution 48/104 on the Declaration on the Elimination of Violence Against Women



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UNDER THE SPOTLIGHT

IS A NON-DISCLOSURE AGREEMENT (NDA) AN ETHICAL RESPONSE TO SEXUAL HARASSMENT?



“ NDAs can allow sexual harassers to move from workplace to workplace with impunity, and prevent useful reference checks. ”

Kate Jenkins, Sex Discrimination Commissioner (2020)

See: Patty, A. (2020 February 24). Calls for national register of confidential settlements of underpayment and sexual harassment cases. Sydney Morning Herald.

“Mr Fazzino said when a harassment allegation arose, it should not be a company's lawyers or human resources staff who investigated, but rather people who had a strong understanding of what constituted sexual harassment. There are nuances — you need to bring someone skilled to investigate,” he said. “And while that investigation is going on, you need confidentiality. The investigation should take place swiftly,” he said, “and once a complaint was substantiated the victim should not be forced to sign a non-disclosure agreement. These, sadly, are all too common,” he said.

There's no place for non-disclosure agreements. They are an insult.”

James Fazzino Chairman of Manufacturing (2020)
See: Khadem, N. (2020 September 11). Corporate leaders call for end to non-disclosure agreements silencing victims of workplace sexual harassment. ABC News

“The use of legal devices, such as non-disclosure agreements (NDAs), have been highlighted as one of the means institutions and powerful individuals deploy to keep secrets.

They are gag orders and are used to further intimidate and control victims of sexual assault and abuse.”

See: Nagy, T. (2020). Legal Advice Enabling Sexual Abuse. Broad Agenda, 50/50 by 2030 Foundation, University of Canberra.



IN AUSTRALIA

“Sexual harassment is not a women’s issue: it is a societal issue, which every Australian, and every Australian workplace, can contribute to addressing.

Workplace sexual harassment is not inevitable. It is not acceptable. It is preventable.”

Australian Human Rights Commission (2020). *Respect@Work: National Inquiry into Sexual Harassment in Australian Workplaces*, Sydney: Australian Human Rights Commission. Retrieved via: <https://humanrights.gov.au/our-work/sex-discrimination/publications/respectwork-sexual-harassment-national-inquiry-report-2020>

One example of an Australian based initiative is: [Not in My Workplace](#) ‘a collective of concerned leaders committed to creating safer workplaces for everyone.’

INTERNATIONAL ACTIVISM TO PREVENT THE PROBLEMATIC USE OF NON-DISCLOSURE AGREEMENTS:

AN EXAMPLE IN FOCUS

The public launch of Senator Lynn Ruane’s Bill to ban NDAs in Ireland:

On June 3rd, the launch of the Employment Equality (Amendments) (Non-Disclosure Agreement) Bill 2021 took place.

This legislative proposal will restrict the use of Non-Disclosure Agreements after cases of sexual harassment and discrimination in the workplace. It will tackle the culture of impunity that exists for perpetrators, no longer silencing victims of sexual harassment and discrimination through confidentiality clauses and misuse of NDAs.

Four experts who have long advocated against NDA abuse: Dr. Julie MacFarlane; Zelda Perkins; Ifeoma Ozoma and Georgina Calvert-Lee spoke about their experiences at the launch of the Bill.

Watch the recording of the launch https://us02web.zoom.us/rec/play/kdRvmRDSYm-Pbjyc3aCUf7J1YZM1Ub0roVgQdhxhpEAOWgOaXqokptwWhE7LcZBwVaPl6vUT7FF_26jC.04borosUUH8TwyjW?continueMode=true&_x_zm_rtaid=-kgKALCjT-WGpaagd-RerA.1623165134685.945e997746978f78e0bafdc46a079d79&_x_zm_rhtaid=153

KEY CONCEPTS

National, state and territory definitions of domestic and family violence and criminal codes vary, however violence and abuse is never acceptable in any community, family, institution, place or context.

What is sexualised violence?	Sexualised violence is a form of 'violence' not a form of 'sex'.	Is it just me who feels confused about what is being done to me?	Victims of sexualised violence often feel confusion, disgust, horror, betrayal, self-blame, shame and profound distress when a family member or partner has chosen to exploit their close relationship to perpetrate sexualised violence.
Does what they are doing to me count as sexualised violence?	Sexualised violence encompasses all behaviours used by a perpetrator to threaten, coerce, violate, or force the targeted person (victim) into sexualised activity.	What about sexualised violence against children and young people?	A child cannot legally, developmentally or emotionally provide consent to sexual activity. As such adult sexualised behaviour which targets children is understood as criminal and as inherently violent.
What about all the ways I tried to say no and to make it stop?	Perpetrators anticipate, suppress and overpower resistance. Whenever people are subjected to violence, they resist. (Wade)	How does marginalisation and oppression intersect with sexualised violence?	People who experience multiple forms of social oppression are also more likely to be targeted by perpetrators of sexualised violence.
How complicated is consent? Is consent one decision or many?	Consent is something we are always negotiating, and so often without words. (Coates)	What about sexual harassment in the workplace, the community or educational settings?	Sexual harassment is a form of sexualised violence whether it occurs in the workplace, on the street, in school, university, healthcare or any other social setting.
Does it count as sexualised violence if it's my partner or family?	Sexualised violence is frequently perpetrated by current and former partners and family members in the context of domestic and family violence.		

“ Just because I couldn't stop it doesn't mean I let it happen. ”

CONTACTS | SUPPORTS

**What supports are
available to me?
Who can I talk to?**

IN AN EMERGENCY

In Australia, call Triple
Zero (000)

In New Zealand, call Triple
One (111)



NATIONAL CONTACTS

COVID-19: National helplines and domestic and family violence services continue to operate no matter what COVID-19 restrictions are in place.

1800RESPECT (24hrs)

1800 737 732

1800RESPECT is a national telephone counselling and referral service for women and men, open 24 hours to support people impacted by sexual assault, domestic or family violence and abuse.

If you are seeking support contact www.1800respect.org.au for confidential information, counselling and support service.

Quick Exit: 1800 Respect website has a quick exit button

Rape and Domestic Violence Services Australia (RDVSA) (24hrs)

RDVSA supports people affected by sexual, domestic or family violence.

They offer telephone, online and face to face counselling to people of all genders who have experienced sexual, domestic or family violence, and their supporters.

<https://www.rape-dvservices.org.au/>

NSW Rape Crisis
1800 424 017

Sexual Assault Counselling Australia
1800 211 028

Quick Exit: RDVS website has a quick exit button

Kids Helpline

1800 55 1800

Anytime. Any Reason.

<https://kidshelpline.com.au/>

Australia's free, private and confidential 24/7 phone and online counselling service for young people aged 5 to 25.

OTHER USEFUL CONTACTS

Domestic Violence Line (24 hours)

1800 65 64 63

The Domestic Violence Line is a NSW state-wide telephone crisis counselling and referral service for women and persons who identify as female.

<https://www.facs.nsw.gov.au/domestic-violence/helpline>

Counsellors on the Domestic Violence Line can help you:

- talk to the police and get legal help
- get hospital care and family support services
- obtain an Apprehended Violence Order (AVO)
- develop a safety plan for you and your children
- find emergency accommodation for you and your children.

Quick Exit: The DV Line page on the Department of Communities and Justice website has a quick exit button

Centre Against Sexual Assault Forum

The Victorian CASA Forum is the peak body of the 15 Centres Against Sexual Assault, and the Victorian Sexual Assault Crisis Line (after hours). Together they work to ensure that women, children and men who are victim/survivors of sexual assault have access to comprehensive and timely support and intervention to address their needs.

<https://www.casa.org.au/>

Centre Against Sexual Assault – Central Victoria

The Centre Against Sexual Assault Central Victoria (CASA CV) is one of 15 CASAs throughout Victoria.

Read more about the CASA CV services on the website <https://casacv.org.au/>

Quick Exit: The CSACV website has a quick exit button



If you are a man experiencing domestic and family violence you can contact:

MensLine

MensLine provides 24/7 telephone and online support and information for men with family and relationship concerns across Australia: 1300 789 978 (24 hours)

<https://mensline.org.au/>

Quick Exit: MensLine has a quick exit button

1800RESPECT (see previous page)

<https://www.1800respect.org.au/>

Support for men who use violence and abuse

No to Violence Men's Referral Service

The Men's Referral Service (MRS) is operated by No to Violence (NTV) and takes calls from men and women who are looking for help to improve their wellbeing and safety, who want to improve the wellbeing and safety of their children, or who are looking for help for their partner or another male family member.

1300 766 491

<https://ntv.org.au/>

Quick Exit: NTV website has a quick exit button

If you are a man who has suffered from the effects of child sexual assault you can contact:

SAMSN - Survivors and Mates Support Network

Any man who has suffered from the effects of child sexual assault should know it was not his fault and that healing and recovery is possible.

Regardless of his ethnicity, sexual orientation, age, or religion, any man can contact SAMSN for support.

<https://www.samsn.org.au/>

Telephone: [1800 4 SAMSN \(72 676\)](tel:18004SAMSN)

Hours: Monday to Friday 9am – 5pm

Email: support@samsn.org.au





My Safety Kit

This is a reflection resource for people who are (or may be) experiencing domestic and family violence. It includes information about domestic violence and abuse, a decision-making tool, and contact details for services across states and territories that may be able to support you in your next steps.

[My Safety Kit](https://www.insightexchange.net)

www.insightexchange.net



Guide to Selecting a Counsellor

It's important that it is your choice if and when you decide to speak to a counsellor about your experiences of sexualised violence. This resource may help you select a counsellor who is the right fit for you.

You are under no obligation to keep speaking to someone if you don't feel they are a good fit for you.

[Guide to Selecting a Counsellor](https://www.insightexchange.net)

www.insightexchange.net



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**What if I choose
to make a report,
or seek forensic
medical evidence
or a claim?**

Every state and territory in Australia has different criminal codes in part reflecting different definitions of domestic and family violence and sexualised violence.



A DIRECTORY OF SPECIALIST RESPONSE SERVICES



Australia and New Zealand

The '[My Dignity](#)' landing page on www.insightexchange.net hosts information about specialist responses to sexualised violence from police, women's legal services and victim services.

To open the online directory:

Scan the QR code which will take you directly to www.insightexchange.net/my-dignity or follow the hyperlink.

The directory is not exhaustive. Victims of sexualised violence may choose other options for support.





Are you ready
to respond
safely if I share
with you?

For responders: The person disclosing to you may have many concerns about telling you anything at all.

REFLECTIONS FOR RESPONDERS

Many people have had violence perpetrated against them and often the perpetrator of that violence is a person known to them – sometimes a family member or someone whom they know intimately.

When the violence is perpetrated by a family member or by a person whom the victim of the violence knows intimately there often is an increased sense of distress and anguish around the experience of violence/assault.

When violence is sexualised, more often than not the perpetrator will be known to the victim and may even be a family member or someone the person knows well.

Because sexualised violence involves the abuse and violation of what is usually something we think of as mutual and pleasurable, this can further the sense of distress and anguish.

So, both the sexualised nature of the violence and the fact that (often) the violence is from a person known to the victim makes sexualised assault particularly distressing. Children and people who have less ‘social’ or ‘physical’ power, are more likely to have violence and sexualised violence perpetrated against them than people who have more ‘social’ or ‘physical’ power.

Also because there are so many myths about rape and sexualised assault, unnecessary stigma about ‘being a victim’, and taboos about talking about sexualised violence and assault, there is a chance that a person will get a poor social response – they can face misunderstanding, feel blamed, feel shut-down, even be disbelieved or told they ‘asked for it’, or ‘it happens, it’s normal, it’s what men do.’

The person disclosing to you may have many concerns about telling you anything at all. Some of these concerns may be represented on the following page and may inform your reflections.



I worry about some of these things...

If I will be believed.

If I will be blamed (directly or indirectly).

If the way I responded to the assault or assaults makes sense to others or if you will put me in a position where I have to educate, explain or justify myself to you or others.

If I have to talk about the details of the assault / to some extent re-live really adverse experiences.

If the ways that other people respond to me this time will be as bad as my earlier experience of talking about it.

If my decision to not talk about it earlier will be understood.

If violence will escalate.

If you want to impose advice.

Many other things, perhaps how upset I might get, what the legal implications might be of speaking up, how my current partner might respond and so on.

MY DIGNITY.

I will be looking to see...

If I do say something, I'll be looking to see;

- what you think of what I have shared
- that you believe me
- what you think of me and if/how that changes now that you know more about me
- whether you give more weight to what the person abusing me says than what I say
- whether the person abusing me will be able to influence your thinking and make you think differently about me, and
- what this means next.



(Follow My Lead, DVSM 2018)



FOLLOW MY LEAD

This resource speaks from the voice of people with lived experience of domestic and family violence (DFV) who need the professionals and their social networks to be more prepared to respond effectively; more prepared to respond in ways that uphold dignity and build on safety.

[Follow My Lead](#)

(Australia Support Contacts)

[Follow My Lead Aotearoa](#)

(New Zealand Support Contacts)

www.insightexchange.net



SOCIAL RESPONSES

“It is important to remember that many victims of violence have faced a series of negative social responses from their social networks and various professionals. For many people, the systems set up to handle cases of violence are themselves unpredictable and fearsome, the cause of pain and endless complications. Many people will have every reason to think you will blame them, get charmed by the perpetrator, dispense advice, and judge them negatively when they do not do what you suggest.”

Dr Allan Wade

[Interviewing For Social Responses](#)

Actual and Possible Social Responses are a Constant Concern (2019)

www.insightexchange.net

SYMPTOMS OF STRANGULATION

Symptoms of Strangulation (SOS) cards have been developed by the Western NSW Local Health District Prevention and Response to Violence Abuse and Neglect (PARVAN) team.



The Symptoms of Strangulation (SOS) card is available in these languages:

English, Arabic, Bengali, Dari, Farsi, Greek, Hindi, Karen, Khmer, Myanmar, Nepali, Samoan, Serbian, Sim CH, Somali, Spanish, Tamil, Thai, Turkish, Urdu and Vietnamese.

Organisations can order the cards with their own logo on the back, by contacting *Digital Services* directly. For enquiries and requests for quotations please email: digitalservices@customerservice.nsw.gov.au

Signs of Strangulation- S.O.S card

Guide for Workers

Please provide this SOS medical alert card to all people you assist that have experienced a neck injury or pressure to their neck, or you are suspicious that they have sustained this type of injury.

Suggested communication when offering the SOS card:

“I am really worried about you, because this can be life threatening. Have you had any pressure to your neck or has it happened before?”

and

“This is a list of signs and symptoms that are really serious and can happen days, weeks or months after the pressure to your neck.”

and

“You need to see your local doctor or go to the Emergency Department at the hospital if you have any of these signs and symptoms”.

IN AN EMERGENCY

In Australia, call Triple Zero (000)

In New Zealand, call Triple One (111)

If appropriate, consider offering referral to specialist DV services via DV Crisis Line [Insert relevant number for state or territory]



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REFERENCES AND READINGS



In this section you will find references to the publications, websites, resources, media articles and Insight Exchange resources named in My Dignity: My body is mine.

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Breaking Silent Codes
www.breakingsilentcodes.com.au

Crossing the Line
www.crossingtheline.online

Human Rights Quick Guide
<https://humanrights.gov.au/quick-guide/12096>

Not In My Workplace
[Not in My Workplace](#)

Sexual Assault Awareness Blog
<https://saawareness.com/blog/arousal-does-not-equal-consent>.

Tea and Consent video (UK)
<https://www.youtube.com/watch?v=pZwvrXVavnQ>

RightsED – Human Rights Commission
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www.insightexchange.net

Publications:

- [Follow My Lead](#), DVSM Insight Exchange 2018
- [Guide to Selecting a Counsellor](#), DVSM Insight Exchange 2019
- [Language Lab](#)
- [My Safety Kit](#), DVSM Insight Exchange 2019
- [The Fact Pattern](#), DVSM in collaboration with Centre for Response Based Practice, 2018
- [Voices of Insight narratives](#)

Videos:

- [Identifying and Honouring Resistance](#) (5:23 mins)
- [Consent versus Violence](#) (8 mins)



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*The Insight Exchange website
has a safe exit button.*



Looking to read books from authors who shared their lived experience insights?

Some examples:

- Our Greatest Challenge: Aboriginal Children and Human Rights by Hannah McGlade
- Written on the Body: Letters from Trans and Non-Binary Survivors of Sexual Assault and Domestic Violence edited by Lexie Bean.
- Eggshell Skull by Brie Lee
- Fury by Kathryn Hayman
- Going Public by Julie Macfarlane
- Rape and Resistance by Linda Martin Alcoff
- Power and Consent: In the National Interest by Rachel Doyle
- No Matter Our Wreckage: A memoir about grooming, betrayal, trauma and love by Gemma Carey
- Not That Bad: Dispatches from Rape Culture by Roxane Gay

Acknowledgement and thanks

Insight Exchange would like to thank all contributors, critical friends and communities, who have engaged directly or indirectly with this resource.

Insight Exchange would like to thank Dr Linda Coates and Dr Allan Wade and their colleagues at the Centre for Response-Based Practice, Canada for their visionary and pioneering work on social responses, resistance, language, and the upholding of dignity.

Most significantly, our thanks go to all people with lived experience of domestic and family violence who have generously shared their insights for the benefit of others.



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