



National Centre of Excellence  
for Complex Trauma



## Welcome to the March edition of Breaking Free

Without a doubt, the year so far has been a real test of our strength and resilience, both as individuals and as a community. The world as we know it has changed, and we are forced to change with it. For some, social isolation is all too familiar, but has now been magnified. This way of life is now being experienced by the broader community, as well. The community is now experiencing first-hand, the feelings and frustrations that isolation can foster.

As we are all now facing this challenge, the importance of self-care is paramount for us all - even for those who aren't living with the backdrop of complex trauma.

Our lead article looks at ways that you can help yourself and others through this really challenging time. How do you balance the need to stay informed, versus overdosing on media which can feed into our anxiety?

We have also developed some fact sheets related to Coronavirus and complex trauma, which contain some really useful information, and can be shared with your friends and family. We are all in this together, and we all need to support each other during this really difficult time

The resilience and strengths we have shown already (even when we can't see them), will help see us through to the other side of this challenge. Caring for one another, caring for ourselves, and not being afraid to reach out for help if we are feeling anxious and overwhelmed, are all important. We are here to support you. Our Helpline counsellors are all working and we will be able to provide you with support if and when the need arises.

**Take care**  
**From the team at Blue Knot**

If you have any comments about what you have read in this issue, contributions for the My Story section, or suggestions for future issues, please contact the editor at [newsletter@blueknot.org.au](mailto:newsletter@blueknot.org.au)



## In uncertain times....

The Coronavirus pandemic means a challenging time for us all as individuals, communities, countries and globally. Such a time of uncertainty and threat can be hard for anyone. It can be particularly hard for people who are already living with the effects of previous traumas and anxiety. That's why it's important for us to do what we can to look after ourselves and our loved ones. And to support one another to stay as calm as possible and to walk alongside one another through this difficult time as much as we can.

We understand that can be easier said than done but we have very recent experiences of us and our fellow Australians doing just that. During the recent bushfires and the flash flooding which followed we saw communities and, in fact, the whole country unite with a common sense of purpose. That purpose was to help and support our fellow Australians. We evidenced the best of the human spirit - despite and during adversity, people showing remarkable courage and compassion to pull together to help rebuild a safe cohesive community. It was a time of resilience and recovery, with the fresh growth we've seen literally sprouting around us and the hope that embodies. Already now we are seeing

some incredible efforts from our health and community services, seeking to guide and support us, as we all try and understand the best ways to stay and be safe and well.

### Media and social media

As always, the media plays a critical role in keeping us informed. However, the flip side of this is that we are subjected 24x7 to a constant barrage of information, some considered and some less so. The reality is that there are simply some things about Coronavirus that no-one knows. Not knowing is really hard but the good news is that the world's scientists are collaborating on an unprecedented

scale... studying the virus and how to contain it and its impacts, working on a vaccine and treatments for the future.

During this time, it is important for us all to stay informed but to try and limit our exposure to social media and media. This particularly applies to media which is opinion rather than fact, or which may not be trustworthy, and which can additionally fuel our existing anxiety and distress.

### Looking after yourself

As always, and even more so during these times, it's important to focus on the activities and daily routines which help support your feelings of wellbeing. Although some of these may need to be varied during this period, such as during times of self-isolation or other imposed restrictions, getting as much restorative sleep as you're able, eating well and exercising to keep healthy and doing things you enjoy is a good place to start. So too is staying connected with friends, family and other support networks.

It is understandable to feel concerned during this time. Current anxiety can also trigger strong feelings and memories of previous traumas. It can be a time when you may need additional support. If you could like to speak to one of our trauma counsellors please call the Blue Knot Helpline on 1300 657 380 between 9-5 Mon to Sunday. For more information about how to care for yourself, please go to our website for more information.

### More information

The Federal government has created an app which allows users to navigate the latest advice and information about Coronavirus in real-time.

The Coronavirus Australia app is available from Apple App Store and on Google Play.

It provides information about

- Symptoms
- What you need to know
- How to protect yourself and others
- Personal hygiene
- Social distancing
- Self isolation
- Public gatherings
- Getting tested

It also provides additional information for particular groups such as health workers and education providers as well as access to reliable news sources. It was launched alongside the Government's new WhatsApp feature. Message +61 400 253 787 or go to [aus.gov.au/whatsapp](https://aus.gov.au/whatsapp) in your web browser to get coronavirus information you can trust from the official Australian Government chatbot.

For the latest advice, information and resources, you can go to [www.health.gov.au](https://www.health.gov.au)

Call the National Coronavirus Health Information Line on 1800 020 080. It operates 24 hours a day, seven days a week. The phone number of your state or territory public health agency is available here. If you have concerns about your health, please speak to your doctor.

As an alternative to the helplines, answers to many questions are available on the [healthdirect](https://healthdirect.gov.au/coronavirus) website coronavirus hub. This is a first point of reference for reliable information about COVID-19. The Healthdirect Symptom Checker provides self-guided triage to find out what to do next.

If you are supporting children and young people, this podcast directly fields kids' questions over the Coronavirus, and responds to them with information and reassurance.



## Survivor Workshops - Update

As we know things are changing each day and we are trying to make considered decisions throughout these uncertain times.

Because of the Coronavirus situation have decided to reschedule all future events up until the end of May. This will be reviewed as needed and may need to be postponed again. We will continue to update you over the coming months.

Please see the Blue Knot website for any further information and our Helpline will still be active if you need to call and gain further support on the numbers below:

**Blue Knot Helpline 1300 657 380**  
(7 Days - 9am-5pm AEDT)

**National Counselling and Referral Service 1800 431 468**  
(Mon-Fri 9am-6pm AEDT, Sat-Sun 9am-5pm AEDT)



# Announcing New Fact Sheet

## What is Childhood Trauma

Childhood trauma is trauma which is experienced under the age of 18. The impacts of childhood trauma are often more extreme and diverse than adult trauma. This is because a child's brain is still developing. Children are also physically and psychologically dependent on adults, and they are in different stages of development to adults. This means that they process information about the world, other people, and themselves in a different way. Blue Knot has developed a fact sheet which explains Childhood Trauma.

[Fact Sheet on following pages](#)

# BLUE KNOT FOUNDATION

## FACT SHEET: *WHAT IS CHILDHOOD TRAUMA?*



A potentially traumatic event/s is an event/s in which a threat or the perception of threat overwhelms a person's capacity to cope. This causes a biological stress response, known as the fight, flight and freeze response. This human stress response is very attuned. That means that our brain and our body are biologically wired to respond to many situations as if they are life-threatening.

Such threats can include tripping in the street, something falling near us, or seeing a garden hose that we mistake for a snake! Because humans are social creatures who rely on other humans to survive, we can also respond to stressful social events as if they are life-threatening. For example – when we receive news that a loved one is sick, when we are speaking in public and voicing our ideas in front of others, or when someone is yelling at us.

When a child experiences everyday childhood events the child recovers from the threat of that event. However when a child experiences traumatic events, and often repeatedly in an ongoing way, they do not. This means that potentially traumatic events may remain traumatic when there is no opportunity to recover from them i.e. they are not “resolved.” In this case resolution does not mean that there is a reasonable outcome (the “snake” is really a garden hose, the speech goes well, the person yelling at us apologises). Resolution means that our body and brain do not store the trauma, or that we are no longer distressed (either consciously or subconsciously) by it.

**Childhood trauma** is trauma which is experienced under the age of 18. The impacts of childhood trauma are often more extreme and diverse than adult trauma. This is because a child's brain is still developing. Children are also physically and psychologically dependent on adults, and they are in different stages of development to adults. This means that they process information about the world, other people, and themselves in a different way.

Some factors such as having secure attachment to caregivers and having emotional and social supports can help build resilience to traumatic events. However other factors such as being socially isolated, homeless, ostracised or having few economic resources can make negative impacts more likely.

Childhood trauma can impact lots of different areas. These can include child's memory, their identity, their sense of belonging. It can also affect how children understand the world, other people, and themselves, as well as their mental and physical health into adulthood.

The main thing to recall is that, with the right support, people can and do recover from even early childhood trauma.



# BLUE KNOT FOUNDATION

## FACT SHEET: *WHAT IS CHILDHOOD TRAUMA?*

**Child abuse and neglect** are particular kinds of childhood trauma. This is because their childhood trauma is intentionally or unintentionally inflicted by someone else. This is called interpersonal trauma. It can happen actively with abuse or passively with neglect. The people who inflict this abuse and neglect are often adults, who are often responsible for the care of that child. Sometimes they are older children. A feature of child abuse and neglect is that it often happens repeatedly, can be extreme and can occur in an ongoing way.

Child abuse can be physical, psychological, emotional, spiritual, or sexual. Many children experience more than one type of abuse, neglect and victimisation. All sorts of adverse experiences in childhood can have a cumulative effect on many aspects of health and well-being in childhood into adulthood.

**Childhood trauma can also occur when a child witnesses or experiences overwhelming negative experiences in early life. Many adverse experiences in childhood can be overwhelming.**

Children can experience trauma as a result of something that is done to them by a person, persons or events. Examples include:

- Sexual, physical or emotional abuse
- Witnessing or experiencing domestic and family violence
- Community trauma such as civil unrest or war refugee or asylum seeker trauma

Children can also experience serious trauma because of what does not happen (e.g. lack of nurture via physical and emotional neglect by a caregiver).

Childhood trauma can also occur without abuse or neglect, in situations in which a caregiver has their own trauma. This can limit their capacity to meet their child's emotional needs. Examples include:

- Parental ill-health
- A parent who is incarcerated
- Parental separation or divorce

Parents/caregivers who have unresolved trauma can unintentionally transmit trauma to their children through their impaired styles of relating. This is called disrupted attachment. When a parent has not come to terms with their own life trauma it can disrupt the child's secure attachment.

The Adverse Childhood Experiences Study (ACE), a large population study conducted over 15 years of 10 types of adverse experiences has documented the many physical, mental health and other impacts of childhood trauma.



# Coronavirus (COVID-19) Fact Sheets for the Community and Health Practitioners

In response to the outbreak of COVID-19 (Coronavirus), Blue Knot have prepared some fact sheets to help members of the community, as well as health professionals take care of themselves and others during this challenging time.

Here at Blue Knot Foundation, we will continue to provide as many of our usual services as we can. As the health and wellbeing of our staff is our absolute priority we are rapidly transitioning our teams to working from home. We will still deliver all of our counselling services – Blue Knot Helpline and redress application support as well as the National Counselling and Referral Service supporting people affected by or engaging with the Disability Royal Commission. Our counselling services will maintain the high degree of professionalism, privacy and confidentiality currently provided. Should there be any disruptions to our services during this transitions, we anticipate that they will be minor and temporary. Our focus is for our trauma specialist counsellors to continue to provide the counselling, support and information currently provided through all the usual numbers and channels.

Blue Knot will be additionally releasing new publications and fact sheets in the coming months, including resources related to caring for ourselves during the Coronavirus outbreak

**Fact Sheets on following pages**



# BLUE KNOT FOUNDATION

## FACT SHEET: Everyone in the Community

### COVID -19 – Taking care of yourself and others

#### Looking after yourself and those you care about in uncertain times...

Grappling with Coronavirus is undoubtedly a challenging time for us all. This is as individuals, communities, countries, and globally. While the sense of uncertainty and threat can be hard for anyone, it can be particularly hard for people who are already living with the effects of previous traumas and anxiety. That's why it's important for us to do what we can to look after ourselves, those we care about, and our communities. We also need to support one another to stay as regulated and emotionally grounded as possible, and to walk alongside one another through this difficult time as much as we can.

We understand that this is easier said than done. But we also have very recent experiences of ourselves and our fellow Australians doing just that. During the recent bushfires and the flash flooding which followed, we saw communities, and indeed the whole country, unite with a common sense of purpose. That purpose was to help and support our fellow Australians. We saw the best of the human spirit - despite and during adversity, people showing remarkable courage and compassion to pull together to help rebuild a safe cohesive community. It was a time of resilience and recovery, with the fresh growth we've seen literally sprouting around us and the hope this embodies.

Already now we are seeing some incredible efforts from our health and community services. This is as they seek to guide and support us, and as we all try to understand and practise the best ways to stay and be safe and well.

#### 1. Media and social media

As always, the media plays a critical role in keeping us informed. However, the flip side of this is that we are subjected 24 x7 to a constant barrage of information. Some of this information is considered and some less so. It is also the case that there are simply some things about Coronavirus that *no-one* knows. Not knowing is hard and can fuel further anxiety. But the good news is that the world's scientists are collaborating on an unprecedented scale. This means extraordinary ongoing efforts to study the virus, how to contain it and its impacts, and 'round the clock' work towards a vaccine and treatments for the future.

During this time, it is important for us all to stay informed. But limiting our exposure to social media and some media platforms may be advisable. This particularly applies to media which is opinion rather than fact, which may not be trustworthy, and which can additionally fuel our existing anxiety, distress, and the risk of overwhelm.

#### 2. Looking after yourself

As always, and even more so during these times, it's important to focus on the activities and daily routines which help support feelings of wellbeing. Although some familiar practices may need to be varied during this period, as well as self-isolation or other imposed restrictions the following will be helpful:

- getting as much restorative sleep as possible
- eating well
- exercising to keep healthy
- doing things that are enjoyable – being creative and always safe as circumstances change

# BLUE KNOT FOUNDATION

## FACT SHEET: Everyone in the Community

### COVID -19 – Taking care of yourself and others

- keeping informed from credible sources (resist being bombarded with anxiety-provoking misinformation)
- making a plan e.g. if quarantine is necessary for how to stay healthy and connected
- regularly practising strategies to self-soothe
- which minimise extra use of medication, alcohol and drugs as much as possible
- staying connected in safe ways with friends, family and other support networks
- reaching out in safe ways for help and support as public health advice changes

It is understandable to feel concerned during this time. Current anxiety can also trigger strong feelings and memories of previous traumas. It can be a time when additional support may be needed. If you or someone you care about would like to speak to one of our specialist trauma counsellors please call the Blue Knot Helpline on 1300 657 380 between 9-5 Mon to Sunday AEDT. For more information about how to care for yourself see <https://www.blueknot.org.au/For-Survivors/Survivor-self-care>

#### Here is some general advice to help prevent the spread of coronavirus

Practising good hand and sneeze/cough hygiene is the best defence against most viruses:

- wash your hands frequently with soap and water, before and after eating, and after going to the toilet
- cover your cough and sneeze, dispose of tissues, and use alcohol-based hand sanitiser
- if unwell, avoid contact with others (stay more than 1.5 metres from people)

#### More Information

For the latest advice, information and resources, go to [www.health.gov.au](http://www.health.gov.au)

Call the National Coronavirus Health Information Line on 1800 020 080. It operates 24 hours a day, seven days a week. The phone number of your state or territory public health agency is available at [www.health.gov.au/state-territory-contacts](http://www.health.gov.au/state-territory-contacts) If you have concerns about your health, speak to your doctor.

As an alternative to the helplines, answers to many questions are available on the [healthdirect website coronavirus hub](https://www.healthdirect.gov.au/coronavirus). This is a first point of reference for reliable information about COVID-19. The [healthdirect Symptom Checker](https://www.healthdirect.gov.au/symptom-checker) provides self-guided triage to find out what to do next. This is a first point of reference for reliable information about COVID-19. The [healthdirect Symptom Checker](https://www.healthdirect.gov.au/symptom-checker) provides self-guided triage to find out what to do next.

# BLUE KNOT FOUNDATION

## FACT SHEET: Everyone in the Community

### COVID -19 – Taking care of yourself and others

#### Coronavirus (COVID-19)

healthdirect

How to  
avoid  
infection  
or spreading  
the virus



Wash your hands regularly  
with soap and water for  
at least 20 seconds



Avoid touching your eyes,  
nose or mouth



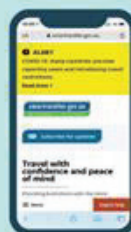
Cover your mouth or nose  
when coughing or sneezing



Use only disposable  
tissues, and dispose of  
them immediately after use



Avoid close contact  
with anyone showing  
respiratory symptoms



Monitor travel advice on  
Smartraveller  
[smartraveller.gov.au](https://smartraveller.gov.au)



Stay at home when you  
are sick

# BLUE KNOT FOUNDATION

## FACT SHEET:

### COVID -19 – For practitioners and health and welfare workers – calming the storm



The COVID-19 pandemic has heightened real anxieties around the world. The situation we face changes daily. These are uncertain times for us all. COVID-19 does not discriminate by geography, race, religion, gender, sexual preference. Whoever we are, whatever we do, wherever we live – we are being affected and arguably will be for months, perhaps years, into the future.

As practitioners and health and community workers, the demands on us will be manifold. Not only will we face the stresses of our own personal situations, for ourselves, our families and communities. We also have a critical role to play in influencing the individual and collective response. We will be asked to support the vulnerable and those experiencing cumulative mental distress on top of pre-existing mental health and psychosocial challenges. And we will be asked to do this in the absence of the usual human connections which help promote relational healing.

Many of us will experience significant financial strain ourselves, as clients cancel, organisations shrink and close, and our loved ones, and indeed ourselves, lose work. We will try to maintain our practices and services using tele-health options, which are established to have significant benefits in many ways but which are also alien to many clients and practitioners. These are uncharted waters, but it is important for us to navigate them together with as much mutual support and reliable information as we can muster.

These are times of substantial threat – to our health and wellbeing, our social fabric and our very lives. There is still a lot of uncertainty about how the outbreak will evolve in Australia and many opinions about how best to try to contain it. This uncertainty, coupled with the very real existential threat it poses, is creating a pervasive sense of anxiety, panic and distress - in the first instance for those infected or in contact with people who are infected but also for the rest of us obsessively reading, watching and waiting.

#### **A number of realities are fuelling this:**

1. The plethora of media and social media flooding us and our clients with information and misinformation 24 x7
2. The practice of self-isolation - a crucial mechanism for slowing the spread of COVI-19 but the recipe for exacerbating feelings of isolation and disconnection in a climate of fear
3. An individual and collective hypervigilance as we seek to ascertain our future
4. A fundamental lack of safety – intrapersonal, interpersonal, environmental and systemic
5. Uncertainty on multiple levels – about what to do, what will happen, our own health and that of loved ones and communities

# BLUE KNOT FOUNDATION

## FACT SHEET:

### COVID -19 – For practitioners and health and welfare workers – calming the storm



**What can we do, as practitioners and workers to assist and support people presenting to us with emotional distress?**

1. Stay informed so you can respond to people's basic questions and concerns

Answers to many questions about Coronavirus are available on the [healthdirect website coronavirus hub](https://www.healthdirect.gov.au/coronavirus).

For people needing to explain more about the Coronavirus to children go to: [www.mindheart.co/descargables](https://www.mindheart.co/descargables). Direct link here: [https://660919d3-b85b-43c3-a3ad-3de6a9d37099.filesusr.com/ugd/64c685\\_319c5acf38d34604b537ac9fae37fc80.pdf](https://660919d3-b85b-43c3-a3ad-3de6a9d37099.filesusr.com/ugd/64c685_319c5acf38d34604b537ac9fae37fc80.pdf)

2. Provide only credible sources of information to those seeking it

For the latest advice, information and resources about COVID-19 see [www.health.gov.au](http://www.health.gov.au)  
The National Coronavirus Health Information Line on 1800 020 080 operates 24 hours a day, seven days a week. The phone number of each state or territory public health agency is available at [www.health.gov.au/state-territory-contacts](http://www.health.gov.au/state-territory-contacts).

3. While the media and social media can provide insights into trends, developments and changes to public health advice, excessive exposure - particularly to opinion and conjecture - can fuel stress further. The advice is to limit your exposure, and to discuss with your clients and service users as needed
4. If you and your client/s are using telehealth technology for the first time through either video-conferencing, chat or phone, it can take time to grow accustomed to the new mediums. The change to technology also changes the *experience* for both you and your client. So it is important to consider, notice, and track how this might be impacting you both, and to respond accordingly. This includes the challenge of assessing whether a client is regulated and grounded when many of the usual cues are missing
5. Social distancing is highly recommended and a proven way to slow the spread of the virus. However, it creates disconnection and isolation. For people who have prior experiences of trauma, and often interpersonal trauma, relationships are critical for healing. *It is important to be aware of the added risks of isolation for people who are already vulnerable and alone*, as well as for us all. We will all need to learn how to build meaningful connection during times of separation from loved ones and physical contact. Escalating risks of depression, despair, suicide and self-harm are substantial and necessitate active risk assessments, intervention, referral and support.

# BLUE KNOT FOUNDATION

## FACT SHEET:

### COVID -19 – For practitioners and health and welfare workers – calming the storm



6. This is a highly stressful time. Acknowledge it and your client's feelings and reactions. In addition to the usual stressors people experience, and for those with existing mental health and psychosocial challenges, there are the additional stressors of employment, housing, health, and finances which for many already needing support will be compounded.
7. People cope with stress differently. This means that as stress heightens, different coping strategies will come into play. We may see tempers fray, interpersonal violence erupt, and the use of alcohol and drugs to calm a dysregulated nervous system heighten. Be alert to these possibilities, including an exacerbation of discrimination, systemic abuse and coercive practices.
8. Regularly check in with clients to see how they are doing. Also consider providing additional strategies around grounding and regulation for them to enact at home. Support clients to acquire the skills to check in with themselves as well. This is a time for true empathy, compassion and understanding. We are all in this together. It's just that we react differently, especially when threatened, and our primal survival responses can be repeatedly triggered. So it is important to understand both the common features of the stress response (e.g. fight, flight, freeze) and that individual coping strategies will also differ in ways we need to attune and respond to appropriately. .
9. During this time of recommended relative physical isolation, support and connection have never been more critical. Encourage clients to identify their support networks and reach out in safe ways to trusted friends and family as well as to broader support networks.
10. Look after your own health – physical and emotional. Continuing to provide support to others at a time of personal stress necessitates resilience and adequate supports. These include ongoing peer connections, debriefing, supervision, and practices to mitigate vicarious trauma and stress/burnout for which health professionals may be at higher risk in the current period.



# Are You Thinking About Applying for Redress?

The National Redress Scheme is a response to the Royal Commission into Institutional Responses to Child Sexual Abuse. It started on the 1st of July 2018 and will end in July 2028.

The National Redress Scheme is available to any person who experienced sexual abuse as a child (before the age of 18) within an institution, whether that is at school, a sporting club, a religious organisation, foster care or group home to name a few.

The aim of the Redress Scheme is to offer survivors of child sexual abuse within an institution an opportunity to apply for the following:

1. Access to counselling services
2. A Redress payment of up to \$150,000.00
3. A direct personal response such as an apology from the institution, which can take a variety of forms and is open for discussion with the survivor

At Blue Knot we are committed to supporting survivors through the Redress process, which we know can be challenging and traumatising if you are considering applying. Our Helpline counsellors can inform you about how the scheme works, as well as provide on-going support throughout the Redress process including completion of the application form. The support we offer is tailored to each person's needs.

We have been working with people applying for Redress since the scheme started. We understand the rhythm of the process and can support and guide you through it in the least traumatising way, while at the same time honouring your unique needs and journey. The counsellors supporting Redress applicants are the same trauma-informed counsellors who provide support on the Helpline. They are skilled at working with survivors with experiences of complex childhood trauma and if you want to apply for Redress, will be able to join you as you undertake the process.

For those of you who have already started the process and have a friend, family member or support worker who is assisting you we can also help support them. We offer a mentoring program which has been specifically set up to support friends, family members and support workers. The program provides a confidential space for support people to chat with a trauma specialist counsellor and to access their own support as they also undertake this journey alongside you.

For those of you who have already put in an application, are waiting for a response from Redress and are finding this difficult please give us a call as we can provide support during this time. We are currently working with other people who have also found this process very challenging, so we understand the impact it can have.

The team at Blue Knot are here to support you during at all stages of the process, whether you are considering undertaking the Redress process, or you have already commenced your application. This can include providing you with information about the Redress Process, helping to determine your eligibility, taking the journey with you or helping you find a face-to-face service in your local area.


If you would like to have a chat about how we can help you, please call us on:

1300 657 380 from 9-5 Mon-Sun for a confidential conversation or you can email us at [redress@blueknot.org](mailto:redress@blueknot.org)

We look forward to hearing from you and offering you our continued support.

# SURVIVOR CONTRIBUTION

## Flitting shade-like, hugging the walls



Flitting shade-like,  
hugging the walls  
along the corridors of my mind  
they come quite silently,  
my devils,  
and silently they lay me waste.

Doubts come confidently,  
ceaselessly,  
arrogant in their sureness,  
aware of the multitudes  
that creep persistently  
behind them.

Hot shame pants quietly,  
doggedly,  
sure of its mark,  
certain that its touch  
will scorch, that its heat  
will burn holes in  
my wholeness.

Fear sneaks and springs  
and darts through any crack,  
cutting through freshly grown  
roots, severing the tender tendrils  
of my being, throwing the earth  
in my eyes.

And as defence I seem to have  
so little. My forces stand unsteadily beside me,  
unformed as yet into coherent cohorts,  
unable to spring as one at my command.  
They engage in swift uncoordinated forays,  
retreating for rest at  
too soon intervals,  
leaving me vulnerable, afraid, teetering.

- Robyn



## Mental Health Human Rights Survey

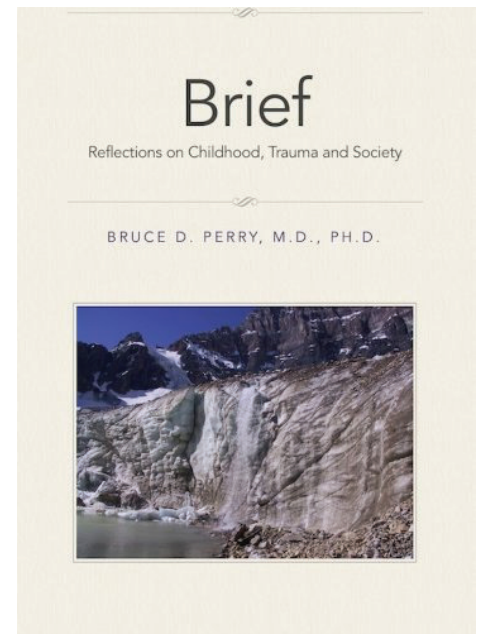
Being, the independent, state-wide peak organisation for people with lived/living experience of mental health issues, is running a survey to collect statistics on consumer experiences of human rights issues in mental health treatment/care and in relation to mental health services generally.

The survey is part of Being's development of a campaign on rights issues in the mental health system. The survey takes only 1 minute and can be found here <https://www.surveymonkey.com/r/DJXB8PQ>

Anyone wanting to contact Being to tell their story is encouraged to join as a member here:  
<http://being.org.au/getinvolved/become-a-member/>

# Book Recommendation

## Brief: Reflections on Childhood, Trauma and Society by Bruce Perry



**This book is a collection of short essays and commentaries by Dr. Bruce Perry, a world renowned expert, teacher, researcher and clinician on childhood trauma. His thoughtful and provocative comments will stimulate deeper thought on how we raise our children and build our communities.**

In the midst of the current coronavirus this small book of observations and insights of other writings about the fundamental, core issues at stake when children are raised in inhumane ways, turned out to be a good choice of how we can support each other through these strange times. It is about the individual and the community, and the author helps to connect the reader to the neurobiological principles as well as the ethical considerations of child abuse and neglect. The last chapter, entitled "Hope", conveys a simple message that is pertinent for children and adult survivors - that it is possible to heal through the consistency of kindness shown by others. That kindness can come in many forms, even in the smallest of interactions, and those interactions can help the individual to build an internal representation of a better world.

### **Purchase the book here:**

<https://www.amazon.com.au/Brief-Reflections-Childhood-Trauma-Society-ebook/dp/B00E7A3FTW>



## An Important Update on Training Related to Coronavirus (COVID-19)

We regret to inform you that Blue Knot Foundation has decided, for the safety of all participants as well as our trainers, to postpone our current workshops and training programs. This includes our published calendar as well as our in-house bookings. We have done this due to the unprecedented public health crisis we are all facing as we grapple with Coronavirus (COVID-19). Blue Knot's priority is always the health and wellbeing of its community.

We will continue to review this situation over the next few months and once, the risk has passed, will reschedule our events. Please watch our website, newsletter and social media for any updates as they occur. We hope to see you at one of our events again in the future. If you have already booked on to one of our workshops or training programs, you would receive email correspondence from Blue Knot in the coming days which will give you all the information that you need. Thank you for your patience and understanding, and we wish you well during these challenging times.



# Disability royal commission given chance to reset with hearings halted

**Maggie Coggan**

A pause on all public hearings in the disability royal commission to stop the spread of COVID-19 to people with disability is a good chance to iron out current issues, disability advocates say.

Commission chair Ronald Sackville AO QC announced on Monday that hearings in Brisbane and Alice Springs would be postponed due to concerns about the spread of COVID-19 to people with disability.

It follows an earlier announcement that community forums due to be held in Tasmania this week had also been postponed until further notice.

Romola Hollywood, People with Disability Australia director of policy and advocacy, said the cancellation of all public events, including face-to-face sessions with abuse and neglect survivors, was unfortunate but necessary. She said it would give the royal commission the opportunity to properly set up a way for people with disability to give evidence in private and address confidentiality issues.

She told Pro Bono News it would take legislative change to see that existing submissions remained confidential beyond the life of the royal commission, something PWDA would continue to push for.

"We understand that this requires legislative change to the Royal Commission Act, but the pause to the royal commission gives us a chance to ensure that that legislative change occurs," she said.

## Public hearings paused indefinitely

Sackville said that the decision to cancel the events was based on the commission's responsibility to protect the health and safety of people with disability, staff members and the community at large.

"The commission has decided that these measures are necessary in view of the risks to health, especially to people with disability who are often particularly vulnerable to infections," Sackville said.

## Commission has postponed the following hearings;

- Education scheduled for next week in Brisbane, Queensland.
- Justice scheduled for April in Brisbane, Queensland.
- First Nations people with disability scheduled for May in Alice Springs, Northern Territory.

Witnesses and people who have registered for community forums are being contacted by the commission to inform them of the decision.

The \$528 million inquiry, launched nearly 12 months ago, has already exposed shocking cases of abuse, including evidence that people with disability were physically restrained, "chemically castrated", and sexually assaulted in group homes.

## The show must go on

Sackville said work would still continue despite the postponement, including publishing the Issues Papers and preparing for future hearings.

He also said that people with disability would still be able to tell the commission about their experiences of violence, abuse, neglect and exploitation.

"They can do this in any way they choose, by phone, in writing or by making an audio or video recording," he said.





## Here's what Harvey Weinstein said in court before his 23-year sentence

By Eric Levenson and Lauren del Valle, CNN

Harvey Weinstein did not testify in his own defense during his trial. But on Wednesday, moments before he was sentenced to 23 years in prison for two felony charges, he finally spoke up in court.

In comments that stretched for about 20 minutes, Weinstein expressed remorse, defended his relationships with the women who testified against him, said he was "confused," bragged about the charity money he raised after 9/11 and Superstorm Sandy, lamented that his children won't speak to him and fretted about the future of the American legal system.

His statement was unexpected and, perhaps, unwise. In general, defendants like Weinstein, who plans to appeal his guilty verdict and faces other rape and sexual assault charges in Los Angeles, are advised not to speak because what they say can be used against them, according to Michelle Simpson Tuegel, an attorney who has worked in criminal defense.

### Here is the full court transcript of his comments:

First of all, to all the women who testified, we may have different truths, but I have great remorse for all of you. I have great remorse for all the men and women going through this crisis right now in our country.

You know, the movement started basically with me, and I think what happened, you know, I was the first example, and now there are thousands of men who are being accused and a regeneration of things that I think none of us understood.

I think that -- I can't help looking at Jessica and Mimi and hope that something of our old friendship in me could emerge, but I'm sure like me, they have lawyers who say to them be careful of what you say.

I read, you know, those letters where people talked about, you know, missing you, loving you, that kind of thing. As you know, having a serious friendship, that is what I believe that I had with Mimi and Jessica. You know, I really, really was maybe hypnotic and under that impression that I had that feeling, that I had that relationship.

That five years with Jessica and the years that I knew Mimi were always filled with, don't go on the plane Harv, I want to have dinner with you first from Mimi. Or, Harv, whatever, let's get, you know, can you look at this idea I have for a television series. Or Harv, I'm in Cannes, can I go to the premier. Or Jessica, can I get into the Soho Club, which is a very exclusive, tough

place to get into. But she needed it for herself. I got her a job at the Peninsula Hotel which she excelled at for awhile.

I'm not going to say these aren't great people, I had wonderful times with these people, you know. It is just I'm totally confused and I think men are confused about all of these issues.

You know, I just -- dealing with the thousands of men and women who are losing due process, I'm worried about this country in a sense too. I'm worried there is a repeat of the blacklist there was in the 1950's when lots of men like myself, Dalton Trumbo, one of the great examples, did not work, went to jail because people thought they were communists.

You know, there was a scare, and that is what happened, and I think that is what is happening now all over this country.

Two years ago, we wrote a letter to 15 friends, I think, the ADA quoted part of it, but the part of it that was the most important part was I'm a builder, I know how to build, and I know how to generate, you know, things on a charitable nature, and I know how to pass my success forward.

I think even Mimi and Jessica would say that I was generous, you know, in that part of the relationship.

The thing that I wanted to do in that letter was I wanted to build a hospital, but not a hospital like the regular hospital, a hospital that deals with this, rehabilitation and redemption; people losing their jobs over the fact they testified for me, or people being afraid to testify that they will lose their jobs. That is not the right atmosphere for this United States of America. It is wrong, you know, and that is what is happening. Everybody is on some sort of blacklist.

I had no great powers in this industry. Miramax, at the height of its fame, was a smaller company than by far any Walt Disney, any Sony, Paramount. I could not blackball anybody, because if I said don't use that actress, the guys at Warner Brothers would say I'm going to use it to ... spite that bastard, whatever. That is what it was. But it became blown up like power, power, power. I was not about power, I was about making great movies, I was a perfectionist, and I think I drove myself crazy.

I'm not going to also run away from what the District Attorney said about some of the things I did say. I had a fight with my brother, yes, people said I said bad things to people, but there are so many people, thousands of people who would say great things about me.

Sixty executives in this industry were trained by me. They are at the top of their field. They were running studios in top positions in this country.

When I was an assistant at Paramount, they said if you are five minutes late, don't come in, or they would black me the whole day.

There never was in our industry a book that said this is how it should be. We always passed it on from assistant to assistant. An assistant was almost like if you were my assistant, it was like going to the Marine Corps, I mean could you survive two years with me and then become an executive. And those two years were tough, and I admit it.

If I had to do it over again, I would not do it that way. If I had to do a lot of things over, I would care less about the movies and care more about my children, family, and other people and friends and other people in this life.

The thing for me is I have not seen my three older children since the newspaper, since the New Yorker article came out; not the New York Times, but the New Yorker article, so I have not seen them. I just have no idea what they are doing, and I'm in no communication with them, that for me is hell on earth.

I just think my empathy has grown over the last 2-1/2 years. I can look at everybody there, you know, and just say, you know, I understand things, I empathize, I feel things, and I was not that person until this crisis started. I have to just say that.

I mean that part of this is such a tough process and has come out where I have learned so many things. I never thought I could deal with or things I dealt with in Arizona. I said, I'll build this hospital blah, blah, blah. I said to two 15-year-olds what would you name the hospital, they said the Wonder Woman Hospital. I said you have to think of like a Greek God. He said Athena. Those two 15-year-olds, because they were all part of this group, were hooked on opiates and whatever, and you know, prostituting themselves to make money for it.

I met all sorts of people and I have grown.

For me, the idea of perfection in art and business is over. My mission is to help people. And I also want to make one clear statement. My wife Eve (my first wife) and my wife Georgina knew nothing about this.

I went to extraordinary lengths to hide my extramarital affairs; that was a terrible thing that I did by having those extramarital affairs, and God knows if I could take it back, I would. I know everybody in this room feels the same way.

It had nothing to do with anything. I was unfaithful to both, and I just cannot tell you how bad I feel about that.

You know, I never see my children again and they are everything to me in this world.

You know, when I deal with subjects like this, I don't wish for vengeance, I wish for understanding. That is why I wanted to build a hospital. I wanted to build a hospital where if somebody is accused of something, they work, women, men, me too, they work with accredited groups that come in and help them and help them grow.

You know, I wanted to testify, but they told me all these things the District Attorney just said would come in my way before I testified. I wanted to talk to everybody, but anyhow, they all came up as it is. Now you should know some of the other side of that because I recognized the voices in those.

One of those voices, one -- I lost my train of thought. I just recognized some of the names who complained, but what was known about me was with the toughness came the kindness, the person who probably hates me the most in this world, their daughter has a situation where she needs the help of a great doctor. I got her that doctor. That doctor is there to date with her.

Her father could not get that doctor. This is the person who hates me the most in this company. When his mother was sick I helped him with a doctor too. There was not any request that I refused on the part of the people who worked with me.

As far as the million dollars is concerned, I wrote a check out from the company, but I reimbursed the company because that is the way we did it. That million dollars was mine and I will say that over and over again.

9/11 happened, and I woke up two days later, I called John Seiss, I said we have to do something for New York, not only for the money, but for the attitude. We raised \$100 million dollars free of expenses.

Ask the police who got that money. Ask the firemen if they respect me. Ask the workers if they respect me, and most of all, ask the victims of 9/11 who received \$35 million dollars of that \$100 million dollars if they respect me.

You know, when you want to investigate, take both sides into the equation, then when Sandy happened and people lost their jobs, and people lost their houses, again, we went to the board and we raised \$77 million dollars.

Ask the guy in Coney Island, ask the guy in Far Rockaway when he lost his business and we were able to walk in there and save his business; ask him if he likes me.

Ask the captain who was killed in action. I took his children to the Super Bowl and to the Academy Awards because somebody had to do it. I did it with Steve Tisch. There are so many examples of that.

Robin Hood (Foundation) raised \$2.5 billion dollars for the children and people of New York City. We built schools, built advocacy groups. I'm not saying I was a great part of it, but I was one of the board there and 22 years, and I had a lot to say and a lot to do. (Paul Tudor) Jones was the one who deserved the credit, but \$2.5 billion dollars to build schools. I showed it by my work.

You can't achieve what we achieved at AmFar. You cannot achieve what we achieved at AmFar without doing the hard work, getting the people, and we raised \$170 million dollars and I started with AmFar. People would not touch each other, like the virus today, people would not touch each other. They were scared of AIDS and there were three hundred people who raised \$300,000 the first night.

The year I left AmFar, we raised \$30 million dollars and \$170 million dollars overall. I worked too hard. As a result of working too hard, I felt too much pressure on myself. I really feel the remorse of this situation, I feel it deeply in my heart. I feel emotional, I feel like to go and talk to you guys, you know, just really, really caring and really trying and really trying to be a better person. Thank you, your Honor, for the time.

# George Pell's appeal went before the High Court on Tuesday. Here's what might happen.

By Danny Morgan

George Pell's final bid for freedom at the High Court this week will be one of the most closely watched hearings in Australian legal history.

It's one of the most high-profile and contentious High Court cases in recent memory — up there with Lindy Chamberlain.

In December 2018, when a jury found Pell guilty of sexually abusing two choirboys, many of his supporters were hopeful the convictions would be overturned on appeal.

Only one of the former choirboys gave evidence at the trial, the other died of a drug overdose in 2014.

But a majority of the three judges at the Victorian Court of Appeal backed the jury's verdict, leaving Pell to continue serving a six-year jail term.

Now it all comes down to a two-day hearing before the full bench of the High Court starting on Tuesday.

Here's a quick guide to how the case will run.

## What are the grounds for Pell's appeal?

If you have time for the long version, Pell's legal team sets out its case in a 21-page written submission to the High Court.

The Crown's response is also 21 pages and there are further written submissions on the High Court website.

Essentially, Pell's lawyers argue the Victorian Court of Appeal should have ruled that the guilty verdict handed down by the jury was unsafe.

"They say the evidence at the trial means that even if you accept the complainant's testimony as seemingly credible, it's not enough to convict Pell because the other evidence creates too much doubt," Melbourne University Law School Professor Jeremy Gans said.

"The Crown say the Court of Appeal majority considered all of that and was still left without doubt that Pell was guilty."



PHOTO: University of Melbourne Law School Professor Jeremy Gans said the High Court had not yet agreed to hear George Pell's appeal. (ABC: Simon Leo Brown)



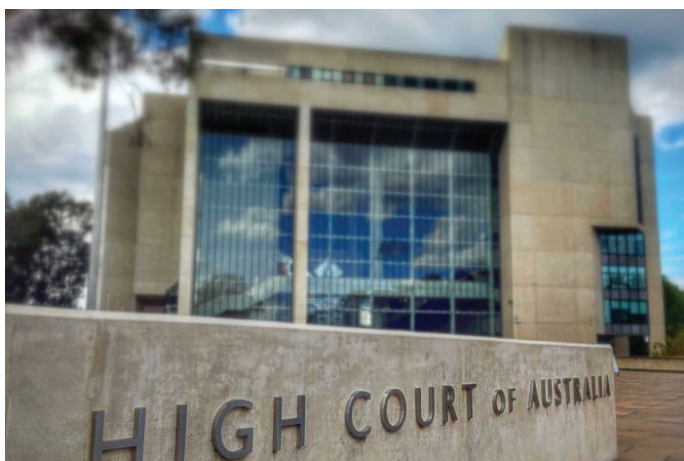


PHOTO: George Pell's child sex abuse appeal case is one of the most high-profile cases heard at the High Court in recent memory. (ABC TV)

### Has the High Court agreed to hear the appeal?

Funnily enough the answer is no, or at least, not yet.

Despite setting a two-day hearing where the parties will argue for and against the appeal, the High Court is yet to grant what's called 'special leave to appeal'.

It may even hear all the arguments on the appeal itself before ruling if leave is granted. That's not unusual in High Court cases.

If leave is not granted, the appeal fails, and Pell must serve his time. If leave is granted, the High Court will then make a judgment on the appeal and publish its reasons.

### How will the case be heard?

The case will be heard before the full bench of the High Court. That could mean five judges or seven judges — for the moment the High Court won't say how many.

The exact number will become clear later on.

The judges won't examine all the trial evidence.

"The High Court will be looking at the appeal judgment and around 100 pages of trial transcript selected by the parties," Professor Gans said.

"Each side has asked for four hours to make their case, but it's up to the court how long they have.

"If the judges disagree on the special leave application or the appeal itself, the majority decision stands."

### What are all the possible outcomes?

According to Professor Gans, there are five possible outcomes from Pell's High Court application:

- Refuse special leave — which ends the case and leaves Pell in prison.
- Grant special leave and dismiss the appeal — which again leaves Pell in prison, but the High Court will publish more detailed reasons.
- Grant special leave and allow the appeal — that ends the case and means Pell is cleared and must be freed immediately.
- Grant special leave and send the case back to the Victorian Court of Appeal — that puts the case back where it was a year ago, after Pell was sentenced.
- Do something else — for example ask Pell and the Director of Public Prosecutions (DPP) to provide more arguments or information down the track.

### Could there be a result on Tuesday?

Technically, yes.

Professor Gans said it was possible the court could decide to throw out Pell's appeal after his lawyers put their case forward.

"They could just wait until Pell's counsel is finished and say, we have heard enough, he can't win, and they could dismiss his appeal then and there or deny special leave."



PHOTO: The High Court will begin hearing George Pell's appeal and is likely to take at least a month to make a decision. (AAP: James Ross)

But he said it was more likely the court would reserve a decision.

"It doesn't have to decide anything this week and typically takes a few months to make a decision and write a judgment."



PHOTO: Lindy Chamberlain-Creighton was wrongly convicted of murdering her nine-week-old baby in Uluru in a case that spanned more than 30 years. (AAP: Xavier La Canna)

### Is this Pell's last chance to beat his convictions?

Pretty much.

If he loses, that's the end of the appeal process. But it's still technically possible for Pell to have his convictions overturned in the future.

"The only exception is if fresh and compelling evidence of his innocence emerges down the track," Professor Gans said.

Only last year, Melbourne man Faruk Orman had a murder conviction quashed despite earlier having his application for leave to appeal rejected by the High Court.

Mr Orman was freed by the Victorian Court of Appeal after it emerged his lawyer Nicola Gobbo (aka Lawyer X) was a police informer and had helped coach the main witness. Lindy Chamberlain-Creighton was also eventually freed despite losing at the High Court.

### Which lawyers will argue the case?

Prisoners don't usually attend High Court cases, unless they are representing themselves. Instead Pell will be at Barwon Prison near Geelong while the case is heard.

Here's Professor Gans's take on the lawyers arguing the case:

For Pell: Bret Walker SC, probably Australia's top lawyer. He appears all the time in the High Court, and also represented Pell at his Victorian appeal last year.

With him is Ruth Shann, who was Pell's second barrister at his trials and his Victorian appeal (Robert Richter QC, Pell's main barrister at his trials, is no longer on the case).

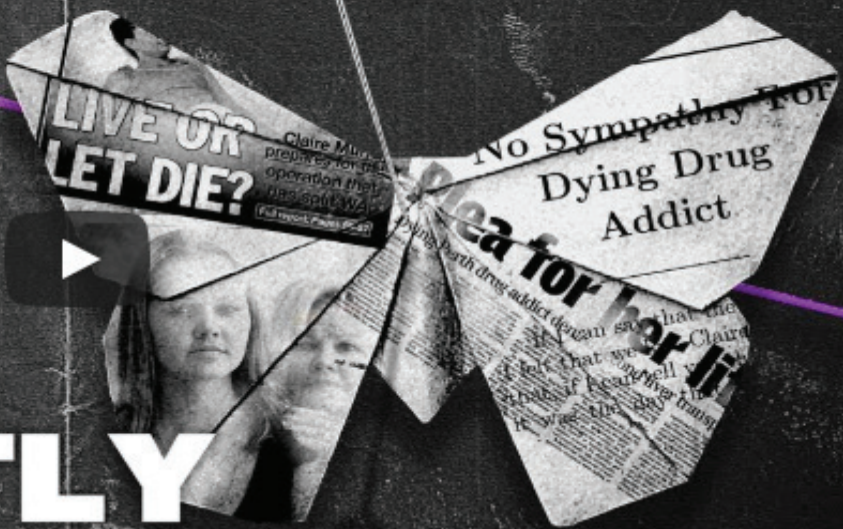
For the DPP: Kerri Judd QC, Victoria's Director of Public Prosecutions since March 2018. This case will be her third-ever appearance as lead counsel in an appeal before the High Court, and it's the first time she's represented the prosecution in court in Pell's case.

With her is Mark Gibson QC, the prosecutor at Pell's two trials in 2018 (Chris Boyce QC, the prosecution's main barrister at the Victorian appeal, is no longer on the case).



PHOTO: Bret Walker will represent George Pell this week alongside Pell's second barrister Ruth Shann. (AAP: Julian Smith)





# WILD BUTTERFLY

## Wild Butterfly: Telling Claire Murray's Story

Ten years ago, Claire Murray, a 24-year-old young mother of two, died in a Singapore hospital from complications of a live liver transplant after a decade of battling the effects of childhood trauma from sexual abuse and bullying that led to homelessness and drug use.

### Screening locations and times in Western Australia.

The tragedy is that Claire's story was not widely known at the time she became headline bait for local media, simply because no one asked the most fundamental of questions, why.

Why did a happy young girl's school life alter so terribly?

Why did the health system fail her on multiple occasions from the time her parents started seeking help for her depression when she was just 12 years old?

Why did a television station ask viewers of its nightly news bulletin in a phone poll if Claire, whose liver transplant had failed because of blood clots, should receive further treatment or left to die?

A documentary, Wild Butterfly, aims to address some of these questions while tackling head on the issues of community responses to childhood trauma, bullying and stigmatisation of drug users.

Claire's parents, Michael and Val Murray, promised their daughter that her full story would be told to encourage change in the way our society handles these issues and alter their destructive consequences.

The documentary has been almost a decade in the making by filmmaker and psychotherapist Shireen Narayanan. It began when the former director, now a lead researcher, at Curtin University's National Drug Research Institute, Professor Steve Allsop, put her in touch with the Murrays.

"When I first met the Murrays, it was less than a year since Claire had passed away and the family were very vulnerable, grieving and traumatised, not only by Claire's death, but what had played out so brutally in mainstream and social media," Shireen said.



Claire Murray



The film was, as Shireen describes, “an eight-year marathon production” for her team.

“This process involved a lot of investigative journalism and the more pieces of the puzzle we put together, the more we realised how Claire’s story is integral to a much bigger story,” she said.

“We were compelled to not only tell the story, but it needed to be part of a project that would make a difference. That has led to the development of a social impact campaign. So, we began developing campaign objectives and, in that process, gathering a group of multi-disciplinary experts across the sectors – from child and adolescent mental health, alcohol and other drugs, media, medicine, social work, psychology and education.”

Finance for films is always difficult, however, this campaign, with ambassadors such as adolescent mental health expert Professor Patrick McGorry and Blue Knot Foundation president Dr Cathy Kezelman (an Australian Centre for Excellence in complex trauma), drew a different pool of potential funders.

The union movement was supportive of the project and became its major backer.

“Wild Butterfly is a universal story and the unions understood that what happened to Claire could have happened to their sons or their daughters, their mothers, their fathers, friends, colleagues,” Shireen said.

“They were not in any way deterred by the fact that while the film deals with what I call the trifecta of stigmas – sexual abuse, mental health and drug use – and the film’s themes of fairness and social justice speak to the heart of the union movement.

“They not only wanted justice for Claire, they wanted to raise awareness of discrimination and violence, about standing up for humanity and equality, and they also wanted to see the perpetrator of Claire’s sexual abuse brought to justice.”

For Professor Steve Allsop, Claire’s story became personal when he discovered that he was an acquaintance of her father Michael. Before the men talked at length, Steve’s knowledge of Claire’s story was what the media was saying and writing and he was appalled.

The full story horrified him even more.

“I was initially cautious about Michael’s proposal because I had seen how badly Claire and her whole family were treated, and I thought that they could be persecuted and devastated again. It’s still a hell of a risk for this family,” he said.

“But they were determined, so I put them in touch with Shireen, who I know and trust.”

Steve’s working life has given him a deep understanding of the stigma and discrimination of drug use and users.

“The lack of understanding of them as human beings is the single biggest issue we have to address. And because of the stigma and discrimination, vulnerable people refuse to see themselves as being at risk and that gets in the way of effective prevention and treatment,” he said.

“Governments are also less inclined to put money into those sorts of issues. Historically, that’s been the case, notwithstanding significant improvements in federal and state funding over the years.

“Then, of course, when people do reach out for help, they don’t always get the help they deserve.

“A physician I worked alongside on an advisory group about pharmacotherapy came out with something that has really stuck with me. When we were looking at what seemed to be a roadblock for outcomes, he piped up: ‘It’s not rocket science. It’s not that hard. Doctors do all sorts of complex things. It’s just that they don’t like doing them very much’.

“Half my time is trying to persuade people to give a damn and not jump to conclusions. I guess it shows in this



Michael Murray



Val Murray



Scene from Wild Butterfly

documentary that people, not just medical practitioners, but the community generally, jumped to conclusions about what Claire's drug use was about and what caused her medical problems. And often people don't look beyond the drug use.

"It's not true to say that everyone who uses drugs has got some trauma in their lives, but those who have the greatest need, those who end up in our drug treatment services, do have a multitude of problems. By just saying to them, 'stop doing it', not only fails to understand the problem, it can make things worse.

"Drug use in this case is intimately caught up with sexual abuse, so what does that knowledge do to your judgment now? That's what the film draws our attention to – not to judge until you know the full story and neither let your judgment get in the way of good clinical diagnosis.

"And neither should we allow the media to sensationalise people's stories."

Steve said improved communication in the health sector was vital.

"There are some excellent drug treatment services and excellent patient care and management. And there are some fantastic doctors liaising with drug treatment services, and housing services. But the treatment services can be difficult to navigate."

"In Claire's story there were a lot of failures along the way, like a lack of follow-up between services. Even a communication between professionals 'Did you get that message? Everything okay?' That may take time but it takes less time than having to keep re-admitting patients."

He said there was now a better connection between medical and health services; primary health care and drug and alcohol services; and vice versa, as well as significant improvements in access to services.

In terms of the media coverage of the small proportion of Claire's story, Steve says:

"I think that if we repeat that sort of media coverage about drug use, we're going to prevent people putting their hand up for help, and we're going to continue to see people get less good quality health. It actually prevents us doing good prevention and it prevents us doing good treatment.

"And the other issue is, would you like your daughter, your son, your friends to be treated this way?

"I think it's changing. Senior people in the media are beginning to realise they need to be talking about these issues differently."

Steve's hope the film will raise the community's consciousness around stigmatisation and discrimination.

"We denigrate people who are affected by drugs as lesser human beings. And that's not to say we shouldn't hold people accountable for bad and unacceptable behaviour, but we must try to understand what their drug use is about.

"That should lead to better integrated treatment services. Governments are putting more in but it is just the start of the journey.

Shireen's vision for change looks at increased public awareness.

"We're not about pointing fingers. We're want this film to strengthen the conversation and understanding of trauma and how that fits into informed practice," she said. "We're developing professional and tertiary education modules with reference to health, education, justice and journalism sectors."

At the time of Claire's death, she had, not without controversy, won support from the then Health Minister Dr Kim Hames, who approved an interest free loan to the Murrys for her Singapore treatment.

He writes in the film's prospectus:

"My political involvement in supporting the Murray family was born of the deep concerns of people who develop dependence on alcohol and other drugs as the result of having experienced the trauma of sexual abuse. I hope that this documentary can contribute to a change in the way our community reacts to these complex and devastating issues."

Shireen also wants this film to reopen a police inquiry which seeks to find the perpetrator of Claire's abuse.

"There's a violent offender out there and we hope that the legacy of this film will be justice, and a more compassionate, supportive society."

#### **Screening locations and times in Western Australia.**

**Screenings of Wild Butterfly will be held in various locations from March until May: 9 March @ Event Innaloo; 9 March @ Ace Rockingham; 11 March @ Hoyts Millennium; 12 March @ Palace Cinema Paradiso; 12 March @ Grand Bunbury; 20 May @ Windsor Cinema**



**Breaking Free** is Blue Knot Foundation's monthly eNewsletter for survivors of childhood trauma, their supporters and community members. For feedback or to contribute, please email [newsletter@blueknot.org.au](mailto:newsletter@blueknot.org.au) or call (02) 8920 3611.



## In-house Training for the second half of 2019

You can browse through our In-House training options for the second half of 2019 here. Please email [trainingandservices@blueknot.org.au](mailto:trainingandservices@blueknot.org.au) or call (02) 8920 3611 to find out more.