MAY 2021





National Centre of Excellence for Complex Trauma



Welcome to the May edition of Breaking Free

Welcome to this month's edition of Breaking Free. This month our feature article celebrates survival resilience and recovery. In so doing it speaks about coping strategies, strategies we adopt as a protective response, which we often automatically revert to when we triggered or overwhelmed with emotions. We honour the role of coping strategies but also acknowledge that over the longer term some strategies can become less constructive. We discuss the need for good support to develop other resources to not only cope but also to heal and recover and for some to reach a place of strength and growth beyond recovery.

We also include two important opportunities to be involved in current research which can help to change the future for survivors.

We also introduce you to our new ambassador Damien Rider. Damien is a trauma survivor and extreme adventurer who is passionate about sharing his recovery journey and messages of moving forward and possibility. We welcome Damien and look forward to following his next world record challenges, standing on top of a hot air balloon and skydiving back to earth. As Damien reaches great heights, he is raising awareness for Blue Knot Foundation and the work we do, as well as much needed funds to support our services to help survivors heal.

Maybe you would like to help us too? At this time of year we ask our Blue Knot friends to consider supporting the work that we do. We continue to see increasing demand for our Blue Knot Helpline with demand for counselling increasing dramatically in the wake of COVID-19 and media coverage around sexual assault and harassment. Your contribution can make a huge impact and all donations over \$2 are tax-deductible. We are grateful for any support. You are helping change lives.

Until next time, take care.

The Blue Knot Team

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Celebrating survival, healing and resilience

'Healing is not just about recovering what has been lost or repairing what has been broken. It is about embracing our life force to create a new and vibrant fabric that keeps us grounded and connected ... keeps us strong and gentle ... gives us balance and harmony, a place of triumph and sanctuary for evermore'. (Milroy, 2013)

The human ability to survive and adapt is amazing. People who have experienced trauma, especially interpersonal trauma (between people) have had things happen to them that should not happen to anyone.

Each person who has experienced trauma has coped in the best way they can. However ongoing and repeated trauma, especially experienced as a child or young person, can overwhelm a person's capacity to cope. Such trauma forces a person to adapt to be able to survive and these adaptations are known as coping strategies. People adopt coping strategies to help them manage the strong feelings and changes in arousal which trauma causes. A person's coping strategies become familiar and in fact often become that person's default or automatic responses during more stress and trauma. These coping strategies enable a person to survive their trauma and can be seen as strengths that have protected the person as much as possible.

However, some coping strategies do not stay helpful long-term. While the strategies may have been protective before, they often become risks or have negative health impacts. For example, some people cope by using alcohol or drugs, by engaging in selfharm or have suicidal thoughts. Some struggle with rage and aggression. Other people might withdraw and avoid a range of activities and social events. Others shut down and dissociate. All of these coping strategies make sense when people have had experiences of trauma. It is important to understand coping strategies and their role, including in communicating the person's needs.

When coping strategies that are no longer protective are identified, it is important to have the right support to find other ways to cope. It is critical to not remove coping strategies until you have strengthened your other resources. Your coping strategies helped you to stay safe in a dangerous world. You used them for a reason. But there are other ways that you can use to manage your pain and distress. But it can take time, patience and good support. It is critical to not be too hard on yourself because we can all go back to old patterns under stress or trauma.

Many survivors have been harmed in relationships and this can make it hard to trust people and to reach out and find help. This can leave you feeling isolated and alone, and as if you have only a few people they can trust, if any, to talk to or ask for help. It can be hard to feel and be safe but feeling safe is important wherever you are. Because complex trauma happened within relationships, healing also happens within relationships.

Learning to trust others, to feel safe and to turn to them for support is a crucial step in recovery. Doing so challenges the belief survivors often adopt that people are dangerous.

Trust your feelings. Choose people who are available for you, connected to you and who can engage you and your experience. This can include a counsellor or therapist who is experienced in working with adult survivors.

It can be helpful to keep a list of your support people and phone numbers including the Blue Knot Helpline and Redress Support Service number – 1300 657 380 (operates between 9am and 5 pm AEST 7 days/week), Lifeline on 13 11 14 for 24/7 crisis support, friends who understand, or your counsellor, or service. It might also remind you to do some activities that nurture you like remembering to breathe, having a cup of tea, going outside and being in nature, connecting with your pets, having a shower, listening to music, drawing, colouring in. Whatever it is that you find helps you to feel calm, grounded and connected. Keep your list on the fridge, on your phone, or anywhere you can easily find it. To find out more go to: https://www.blueknot.org.au/ Survivor/support

Many people can and do recover from trauma but recovery is a process which depends on a lot of different factors. A key factor is good support to help you process the trauma of hurt and betrayal to help build healthy relationships over time.

Our brain can develop and change in structure and function because of our experiences. This means that our brains can also help us recover from trauma. We call this neuroplasticity. The brain responds to social experiences and social experiences shape the brain. The good news is that neural growth and change can continue through life as a result of positive experiences. Positive interactions support the person to build healthy connections between the nerves in the brain and to recover. This can foster healthy development, functioning and secure relationships.

Many survivors go on to tell stories of recovery and of resilience beyond survival. Resilience means the capacity to sustain and respond to life stress, setback and difficulty. Many survivors process their trauma and come to terms with it. They 'work through' their traumatic experience so that it is no longer overwhelming. In fact, it is possible to grow beyond recovery.

Post traumatic growth is the positive change experienced as a result of a person's journey through trauma. The capacity to survive and negotiate the challenges of significant adversity can promote inner strength and growth (Wilson, 2006). This process can transform a person's reactions, world view and response to adversity.

Many people who have experienced trauma can also grow beyond their trauma. The ability to grow through the experience of trauma is sometimes called post-traumatic growth. Tedeschi and Calhoun (2013) identified five main areas of posttraumatic growth:

- 1. Better ability to relate to others;
- 2. Seeing new opportunities, priorities or pathways in life;
- 3. Developing a greater appreciation for life;
- 4. Better understanding of the considerable personal strengths and abilities that enabled survival; and
- Creating meaning about the purpose of life and survival (e.g. spiritual or existential meaning).

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Rural Healing Program leads to educational resource

An animated video suitable for community and professional education was the unlikely outcome of a community Healing program in the small town of Mullewa, in Western Australia.

Back in 2019, the WA Centre for Rural Health supported a group of local women to use creative processes to explore their experiences of loss, grief, violence and other adversities. The Healing Project was coordinated by Lisa Lockyer, an experienced mental health trained Aboriginal health practitioner living and working in Mullewa.

At the same time, a University of Western Australia Teaching and Learning Community of Practice involving academic and professional staff from different disciplines identified the need for a teaching resource to be used in a wide range of university courses where students learn about family violence – courses such as population health, medicine, social work, education, and law.

A small grant through the City of Greater Geraldton, which stakeholders agreed could be used for a family violence prevention project in Mullewa, brought together the LCAEVS survey results, the Community of Practice and the Healing Project.

The women in the Healing Project recognised that the intergenerational nature of family violence had normalised violence in Mullewa. Their project to interrupt the normalisation of violence through community education resulted in the adaption of an existing animated video to explain the impact of violence and trauma on children's developing brains, developed and led by Lisa Lockyer and Poche Research Fellow Heath Greville. Some women from the Healing Project acted as advisers on the project, giving feedback on the script and meeting by zoom with Philip Pepper, the animator, to comment on the video's graphic design.

Members of the UWA Community of Practice also gave advice on the script. The result is an 8 ½ minute video suitable for community and professional education. Within a week of the video launch, organisations in Geraldton and elsewhere were using it to promote discussions about trauma-informed practice and upskill people working in schools, health, and justice settings.

The video draws heavily on an existing resource developed by Dr Jacob Ham from Mt Sinai Hospital in New York. We acknowledge Dr Ham's generosity in allowing us to adapt his concepts and script for Australian audiences. Dr Ham commented on the WACRH video and script: "I love what you've done with it. Certainly a huge improvement to what I had made."

The video has been warmly endorsed by the Blue Knot Foundation:

"I can't recommend this short clip too highly. It is a clear critical representation of the ways in which different early traumas can affect a child's ability to learn. Importantly it also explores what we can all do to change things." Dr. Cathy Kezelman, AM. President, Blue Knot Foundation – National Centre of Excellence for Complex Trauma.

Learning Brain and Survival Brain: How experience shapes behaviour is linked here: https://www.youtube.com/ watch?v=A3cAhyHeXEk&feature=youtu.be



Your Open Heart Can Help Others Heal Support Blue Knot's EOFY campaign today

Supporting people as they heal from complex trauma starts with an open heart. Yours.

This has been a year of challenges and trauma for many across the country, and the world.

For many of us already facing the pain and distress of violence, abuse, and neglect, this period has only added more layers of trauma. The demand for Blue Knot's counselling services has never been greater, and the need is only growing.

So many of our reassuring daily routines have been upended. Now, we're counting on the generosity of Australians like you to help.

Please support Blue Knot as we walk alongside adult survivors of complex trauma on the journey to recovery, with a donation of \$75 this tax time.

The uncertainty of COVID – along with the increased media coverage of sexual assault, abuse and harassment – has highlighted the urgent need for specialised support for many Australians living with the impacts of complex trauma.

I want to acknowledge how challenging these times have been for so many of us. I want to let you know that there is hope, and help, if you are living with the effects of complex trauma.

At present, government funding is helping us meet the growing need. We need your help to ensure that when people call, we have greater capacity to answer, and provide assistance. That's why I'm urgently asking for you to donate today to support the growing need for Blue Knot's services. When survivors can access trauma-informed services and embark on their recovery journey, the results are often lifechanging. The path to healing is rarely straightforward, but when we are heard and understood, we can understand ourselves better, and learn the tools to help – that's when lives are healed.

Our helpline can provide a first step in that important journey. People living with trauma, along with those who care for them, can access trauma-informed care over the phone, including:

- Short-term counselling support to meet the immediate needs of people who reach out for help.

- Information to better understand and process trauma, including how to support a loved one living with complex trauma

- Referrals for ongoing support, next steps, and ways to continue the journey to recovery

I have seen how this essential service can help survivors heal from complex trauma. I have had my own journey of recovery, and am committed to ensuring that fellow survivors and supporters have every opportunity for healing. This is why we need to expand our services and make sure that as many people as possible can be heard.

With your help we can make sure that the more than 1 in 4 Australians who live with complex trauma, can access the care and support they need.

Thank you in advance for your support. You are helping change lives.

Dr Cathy Kezelman AM President - Blue Knot Foundation

Please make a tax-deductible donation before June 30 to help us expand our lifechanging support services. With your help we can better meet the growing need of survivors of complex trauma. Donate Now

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Support our new Ambassador Damien Rider as he smashes world records to help survivors heal

We are delighted to welcome Damien Rider as our new Ambassador. Damien is a multiple world-recordholding adventure athlete, author, creator of One Breath Meditation, and global motivational speaker. Recognised for his International humanitarian work and physical feats, with two National Geographic feature documentaries, and as a speaker in TED talks Asia Pacific and the United States. Damien was the featured baton-bearer during the 2018 Commonwealth Games. He was also invited to be a keynote speaker for the Royal Commission for his work on raising awareness on Institutional Child Sexual Abuse. His work and dedication have led him to become a globally respected wellness and mindset coach.

Always finding the positive in every situation in life, he has an undeniable resilience to keep moving forward. He continues to challenge himself, discovering what is possible mentally and physically, sharing his discoveries with others. Damien has his own lived experience of childhood trauma and abuse and his unique and inspirational path to healing and resilience. He has come on board as a Blue Knot Ambassador combining his passion for supporting people with experiences of complex trauma and possibilities for healing and recovery with his drive to challenge what is possible.

Watch Damien talk about his partnership with Blue Knot here: https://www.youtube.com/watch?v=SRIrDSqXvbM

Read more about Damien's story, and his partnership with Blue Knot Foundation in his interview with Body + Soul here: https://chuffed.org/project/help-damien-rider-raise-fundsfor-blue-knot-foundation

Help Damien raise funds for Blue Knot Foundation by donating here: https://chuffed.org/project/help-damienrider-raise-funds-for-blue-knot-foundation



UP, UP & AWAY!

13,000 feet world record attempt in support of Blue Knot Foundation

On 19th of June during the Bluff City Balloon Festival weekend, Damien will ride on top of a hot air balloon 13000 feet above the ground. Once he has reached this remarkable altitude he will then walk off the top to skydive back down to the earth, setting 2 world records. Damien will then live-stream as he rides on top of the balloon at 3000 feet, sailing through the sky along with other balloons for a third world record attempt, longest distance travelled on top of a hot air balloon.

As part of this incredible event, Damien will be raising funds in support of Blue Knot Foundation and our end of year campaign. We will be following Damien in the lead up to the event and sharing across our social media. Be sure to follow our Facebook and Instagram pages for these latest updates.

Watch Damien talk about his world record attempt and support for Blue Knot Foundation here: https://www.youtube.com/watch?v=1GRB5H0VVhQ

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WE NEED YOUR INSIGHTS

An opportunity to share your views on perpetrator-focused prevention

The University of Melbourne, in collaboration with Bravehearts and Jesuit Social Services, is undertaking research about how victim-survivors of child sexual abuse perceive perpetrator-focused prevention programs like Stop it Now!

We are asking adult victim-survivors of child sexual abuse to share their thoughts and feelings about **Stop it Now! Australia**.

If you are interested, we would ask you to take part in a one-hour interview either online or at a community service organisation near you.







If you would like further details please contact, Gemma McKibbin at: gemma.mckibbin@ unimelb.edu.au or 0437 281 543.

You will receive a \$50 voucher in acknowledgement of your time and contribution to this important research.



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Book Review

Along Came a Spider

About the author:

Deeply scarred emotionally by childhood experiences, Neil Atkinson found his calling, to help and heal. He is a supporter of Indigenous land rights and is against all forms of racial discrimination. His previous book, published by Hybrid Publishers, was The Last Wild West about his experiences in the Northern Territory. He lives in Officer, Victoria. Child abuse survivors' stories of the journey from trauma to triumph



NEIL H ATKINSON

Child abuse survivors' stories of the journey from trauma to triumph - Neil Atkinson

In so many ways, although personal accounts are at times difficult to read, this is a book celebrating the victory of the human spirit over personal tragedy. It is not a book of tears and sad stories, but inspiring lives where you cheer for sexual abuse survivors who show the way with courage to rebuild their lives and not let their experiences frame or shame them.' – Dr Darlene Barriere, Trauma and Child Abuse Counsellor and Psychologist

In this confronting collection by victims of child sexual abuse, you will read not only of their horrific experiences as children, but also of their lifetime of living with the consequences and after-effects of that abuse.

There has been silence for too long, and these stories, uncomfortable though they may be to read, should be hidden no longer. The contributors need a voice. They come from various backgrounds: white, Asian, Indigenous, Jewish – male and female, straight and gay.

It is important that their individual stories are told, and we honour their courage in giving their accounts to show the world that the scourge of child sexual abuse must be brought to light, and hopefully help our society to no longer allow it to be hidden or suppressed.

The aim of this book is to to encourage other victims to seek help and redress; also useful for healers and therapists of child sex abuse survivors and other traumatised people.

'There is a need to hear these stories, to know what did happen and what is still happening. A need to not bury our heads and say "it won't happen to me" or "I will never let that happen to MY kid."' – Lauren White



University of South Australia - Call for survey respondents

What helps young people create healthy relationships and reject domestic violence?

IF YOU: Are 18-30 years old Are fluent in English Live in Australia Experienced living with domestic violence as a child

You are invited to complete a survey being conducted by University of South Australia.

Technology-facilitated abuse is creating 'terror' in women, and it's on the rise in Australia

A seemingly innocent tracking app on *Rose's phone was the secret weapon her abuser used to keep her in a constant state of fear.

"I had an app so he could follow me everywhere I went," she says.

"So he knew every movement I did. I wasn't allowed to leave the home till a certain time, and he made sure I had to be back at a certain time."

The constant monitoring compounded the sexual and physical abuse he inflicted at home.

"I'd get numerous texts every day. And if I didn't answer them within a certain amount of time then I'd get an abusive text, I get phone calls.

"It was constant. What it's done to me... I live with fight or flight every single day."

Even after serving time for his abuse, Rose's ex tracked her down via Instagram.

"My daughter, who first received the first message, came out of her bed screaming... absolutely

screaming... shaking."

Rose's ex has threatened to kill her multiple times, and he is now out of jail.

But the woman telling this story is speaking with a calmness she hasn't felt in years.

She's found a new sense of self and safety with the help of a good psychologist, a caring partner and a watch that, with the press of a button, connects secretly to a monitoring company if she is in danger.

"It's just given me a sense of power back," she says.

"Because even if he came up and he attacked me again, I can goddamn tell you, I will press that button. And even if he killed me, they're going to know exactly who it is.

"He can't hurt me anymore. Because I'm going to press that damn watch and he's going to go to prison for the rest of his life and be tried.

"It's empowered me again."

Rose shouldn't have to wear a watch to be safe. But her remarkable story of survival shows technology's grim potential for misuse, as well as its promise of hope to victim-survivors of family violence.

Women asking for fire extinguishers for protection

The watch was provided by the company Protective Group as part of a project with Wayss, a support agency in Melbourne's outer suburbs.

Its chief executive Stephen Wilson and his colleague Nicholas Shaw recently travelled to Queensland, in the wake of a series of violent attacks on women, to see clients.

Just last month, the body of 27-year-old Kelly Wilkinson was found in her backyard with burns. Her former partner has been charged with her murder.

"There was an unprecedented amount of fear," Mr Shaw says.

Rather than some people being affected by the news, as would usually be the case, Mr Shaw says "every household that I attended was affected".

And although he was there to offer IT help, he was being asked for fire extinguishers.

Technology-facilitated abuse is overwhelmingly gendered — 96 per cent of perpetrators are male and 93 per cent of victims are female.

A recent national survey by women's services network WESNET found almost all women experiencing family violence suffered from technology abuse.

It's a term that covers everything from abusive texts and social media posts, to tracking of smartphones, to covert monitoring of a victim's movements.

And it's getting worse.

Since 2015, the survey found a 244.8 per cent increase in frontline workers reporting perpetrators' use of GPS tracking of victim-survivors, and a 183.2 per cent increase in the use of cameras.

The risk for Indigenous women more than doubled in that time.

Children are increasingly being drawn into the abuse.

"Children being given a phone or other device as a way to contact their father and monitor their mother's movements showed an increase of 346.6 per cent from 2015," the report found. And that has harmed children's mental health in 67 per cent of cases, according to an eSafety Commissioner report.

'Let's disrupt that power'

The Protective Group's Mr Wilson joined the police force at 16 in 1978, and says times have changed since he saw his first domestic violence incident at 17.

"You'd be driving in a divvy van with a sergeant and he'd say, mate, don't bother. We don't want to go that one, someone else will grab that job," he says.

"Because it was all too hard."

But the current level of fear has made an impression on him.

Mr Wilson says his company has helped about 12,000 women and children over a decade.

He says women should not have to modify their behaviour to counter the changing methods of their abusers.

"It should be about him stopping doing it," he says.

"And that's where we sort of step into that really early stage of how we can keep them safe. Let's disrupt that power. Let's take that power away from him and give it back to her."

His company's audits check locks on doors, finds tracing or monitoring devices, and checks phones and computers for stalking tools.

He's found perpetrators who had videoed women while they slept at home.

Mr Shaw says companies selling monitoring devices actively market their wares as means to control women.

"Doing the work I do... I often get targeted on social media by companies trying to sell me hidden cameras and hidden tracking devices," he says.

He says often the devices are pitched at finding out if partners are cheating.

"And I find that absolutely disgusting," he says.

Ultimately, Mr Wilson knows his services, while potentially life-saving, do not address the underlying problem.

"I can't make excuses for my gender," he says.

'We've seen people fit kill switches to cars'

Experts say the problem is getting worse.

But while tens of thousands of frontline family violence workers have been trained in the field, many women struggle to find the expertise they desperately need.

eSafety Commissioner Julie Inman Grant says while the bulk of tech abuse functions are readily available in smartphones, some perpetrators are getting more devious.

"We've seen people fit kill switches to cars, so that a woman can't go beyond the school and back without her car stalling," she says.

"We've seen people program smart TVs to leave menacing messages every time the TV is turned on.

"We've seen people remotely controlling heat or lighting, to either heat out their family or keep them in the dark."

She said there was varying levels of technical expertise among perpetrators, but there weren't enough services using people with technical knowledge to provide assistance.

It's that gap that's led Wayss to commission a security firm with a donation, in a project led by Robyn Roberts.

"I'd like to see a technology-facilitated abuse assessment upfront in every service that we provide to family violence victim-survivors," Ms Roberts says.

"I think it's really important to intervene early on in our relationship, to support that person around their safety and their future escaping from family violence.

"So the sooner we can do it, the better the outcome for that person."

'Fear and terror'

WESNET chief executive Karen Bentley is concerned about the mental toll of such abuse.

"One thing that came out very strongly in our survey was the mental anguish and the fear and terror... the sort of the mental toll that that takes on you, because it can be covert, and it can be all-encompassing," she says. She says it is hard for women to get away from technology, which has an impact on their mental health.

"And, of course, that doesn't help when you are trying to seek support, because people are going to think it's a mental health issue potentially, rather than a real technology issue," she says.

Ms Inman Grant says technology-based abuse victims "may not be carrying visible scars".

"But it's deeply, deeply distressing for them," she says.

She says it makes women feel like they can't escape.

Rose points to the dilemma around technology for violence survivors like herself, who turn to platforms like Facebook when they are isolated and terrified at home.

"That was a way of me feeling like I was leaving the home to speak to friends, or seeing their lives. I didn't want to lose that," she says.

Global momentum

Women in danger still face inadequate, patchy responses.

This week's annual report examining Victoria's implementation of recommendations from the 2015 family violence royal commission said for victims who remained at home, monitoring of perpetrators was inadequate.

It labelled safe housing as a priority area.

"Despite a series of investments in a range of accommodation types, this system limitation has seen the least progress out of all areas of the reform since the royal commission," the report reads.

At the same time, the World Economic Forum praised Australia as a world leader in putting the onus back on tech companies to make their products safer.

Ms Grant says the progress made with tech giants represents "a cultural change".

But citing Zoom's 'zoom-bombing' issues during lockdown, where people were able to hack into others' meetings, she says "tech wreck" moments keep happening. "All of this was in the haste to roll out technology without anticipating the risks and building in the safety protections upfront," she says.

"We've got product liability laws that prevent manufacturers from putting out products that injure people. This needs to happen with our technology platforms and our technology devices as well."

Rose agrees.

"I think the government needs to take a very damn hard look at themselves. And so does Facebook, so does Instagram," she says.

"I'm sure that they can come up with some things within these phones, to make them more safe."

While technology moves slowly towards protection, Karen Bentley says it's not the endgame.

"Technology is often blamed as the reason that this is happening," she says.

"But at the end of the day, it's the abusers' behaviour."

*Rose is not her real name.



Karen Bentley says the technology-facilitated abuse can be impossible to get away from.(ABC News)

Extension for Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability

The Morrison Government today announces that it will extend the final reporting date for the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability to 29 September 2023.

This provides an additional 17 months to account for the impact of COVID-19 and recognising the broad issues of inquiry under the Royal Commission's terms of reference.

"This extension will enable the Government to receive and implement recommendations as expeditiously as possible," Minister Ruston said.

"This will make meaningful change to the lives of people with disability, while also enabling the Royal Commission to fulfil its terms of reference.

"We remain focused on supporting people with disability, their families and supporters, advocacy groups and the disability community."

Attorney-General Michaelia Cash said the Government had favourably acted on requests from the Chair since the inquiry started.

"The Government has added a seventh Commissioner, refined the Letters Patent to articulate the Chair's role and progressed legislative amendments to the Royal Commissions Act 1902 to assist the Commission's workload," the Attorney-General said.

The Royal Commission is independent from Government and sets its own processes including how it approaches its terms of reference, informs itself for the inquiry and, importantly, hears directly from people with disability, their families and loved ones. The Government continues to fund free and independent counselling and advocacy support for people with disability that have experienced violence, abuse, neglect and exploitation, as well as their families and carers, and anyone affected by the Royal Commission.

A national legal advisory service and legal financial assistance scheme are funded and available for people or entities giving evidence or engaging in other ways with the Royal Commission. Additional funding for support services for an extended reporting date will be considered through the ordinary budget processes.

The Government looks forward to receiving the Royal Commission's final report on 29 September 2023.

/Public Release. This material comes from the originating organization and may be of a point-in-time nature, edited for clarity, style and length.

Commission of Inquiry into Child Sexual Abuse officially launched in Tasmania

The Commission of Inquiry - Tasmania's version of a Royal Commission - has launched in Hobart. The Inquiry will examine how the Tasmanian Government and its institutions responded to allegations and incidents of child sex abuse.

Keelie McMahon was 14 when she alleges she was sexually abused by family friend and nurse, James Geoffrey Griffin.

The now-24-year-old has been telling her story to encourage other survivors of child sexual abuse to speak out.

"I'm doing it to help other people that have gone through it, so they can get the courage to come forward and talk about what's happened to them as well," she told SBS News.

In 2019 five woman came forward and made historic complaints of sexual abuse against James Griffin, ranging from the late 1980s through to 2012.

Mr Griffin was charged with a number of criminal offences involving repeated sexual abuse of a child, but he died in October 2019 before he could face court.

"He started getting charged for all these different things,

more people came forward, and then all of a sudden it just stopped, because he committed suicide, and that was the end of it," Ms McMahon said.

The allegations against Mr Griffin led to further allegations against other public servants.

Since October 2020, 14 Tasmanian state service employees have been stood down, pending investigations into allegations of child sex abuse.

According to the Tasmanian government, nine of those are historical allegations, and five relate to contemporary allegations. One of those individuals has since returned to work.

In response to the allegations, a Commission of Inquiry into Child Sexual Abuse was announced last year. The Commission of Inquiry - Tasmania's version of a royal commission - officially launched in Hobart on Thursday.

"We are going to be looking at the role and responsibilities of the Tasmanian government, its institutions and officials, in protecting children from child sexual abuse, and responding appropriately to reports and information about such abuse," President Commissioner Marcia Neave said.

"We will also reach out to every part of the Tasmanian community, including Aboriginal people, people from culturally and linguistically diverse communities, people with disabilities, people with diverse gender identities and sexualities, and people in remote locations."

Principle Solicitor at Odin Lawyers Sebastian Buscemi represents a handful of clients who have made allegations of sexual abuse within Tasmania's institutions.

He said the Terms of Reference that outline what the Commission of Inquiry will investigate don't go far enough.

"By only looking at the sexual abuse, by only looking at one type of abuse, you're limiting how much you're examining what's gone on," he said.

Mr Buscemi said he has clients alleging physical abuse and human rights' violations while at the Ashley Youth Detention Centre in Tasmania's north.

"The Terms of Reference don't allow for the examination of non-sexual abuse ... the reasons for why abuse is occurring is far deeper and far broader that simply sexual abuse, and that will not be examined."

The Commission of Inquiry launched its official website on Thursday, and public submissions are now open. "The most successful reform proposals are those which are developed and implemented in collaboration with those who are most closely affected by the issues under review," Commissioner Neave said.

"We have 16 months from now to complete our independent inquiry. and I emphasise that word independent, because of course, we are independent from government."

In a statement, Tasmania's Attorney-General Elise Archer thanked the commissioners.

"We are fortunate to have such skills and experience leading this Commission of Inquiry," she said.

"There is nothing more important than ensuring the vulnerable in our community are protected and we recognise the extraordinary courage it takes for someone to come forward and report sexual abuse."

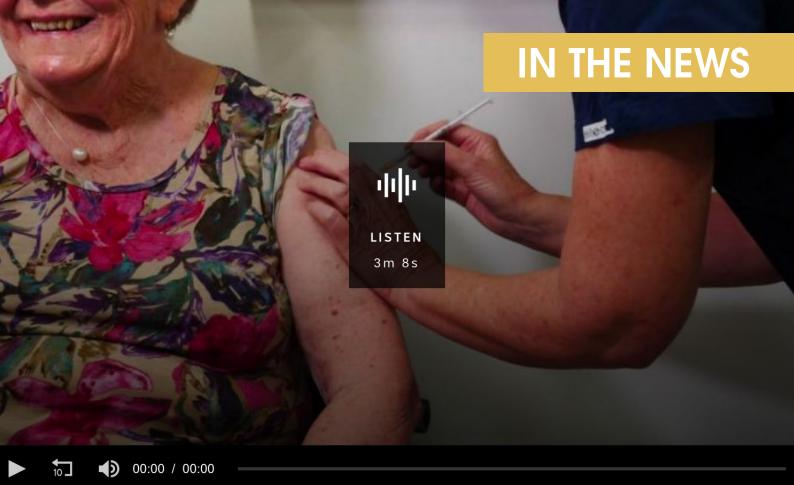
The Commission of Inquiry will build on the work of the fiveyear Commonwealth Royal Commission into Child Sexual Abuse.

The final report and recommendations are due in August 2022.

If you or someone you know is impacted by sexual assault, call 1800RESPECT on 1800 737 732 or visit 1800RESPECT.org.au.

Readers seeking support with mental health can contact Beyond Blue on 1300 22 4636. More information is available at Beyondblue.org.au. Embrace Multicultural Mental Health supports people from culturally and linguistically diverse backgrounds.





Disability Royal Commission examines vaccine rollout

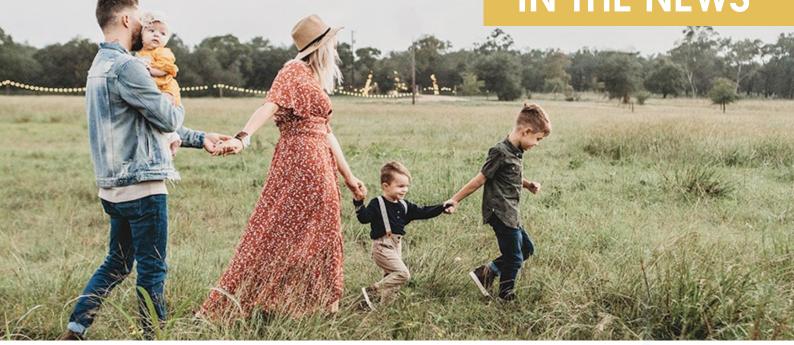
Three months since the start of the COVID-19 vaccine rollout, disability service providers remain concerned that some of society's most vulnerable have been unable to get the jab.

Now the disability royal commission will examine those issues in a one day hearing.

Duration: 3min 8sec

Broadcast: Mon 17 May 2021, 6:10am

Listen Here https://www.abc.net.au/radio/programs/am/disability-royal-commission-examines-vaccine-rollout/13346928



Foundation exec hailed as 'National Families Week 2021 Champion'

Blue Knot Foundation's Dr Cathy Kezelman has become a Champion for National Families Week 2021 – Australia's celebration of the importance of families.

National Families Week is held annually from 15 May to 21 May (coinciding with the United Nations International Day of Families on 15 May).

The aim of the week-long celebration is to highlight the vital role that families play in Australian society. The theme 'Stronger Families, Stronger Communities' highlights the importance of families to communities and that community wellbeing is enhanced by family wellbeing.

Thousands of people are expected to participate in registered events around Australia, illustrating the importance of families within the community. Events are being held in regional communities as well as in every capital city in Australia. The diversity of events reflects the diversity of the Australian community.

Dr Brian Babington, CEO of Families Australia, said: "the challenges of the past year have underlined the fundamental importance of families to society, communities and to us as individuals. Whatever form they take and in all their marvellous diversity, families need nurturing, respect and support. National Families Week is a great time to reflect on and take action to further strengthen our families." Dr Cathy Kezelman expressed her excitement for being involved in such a celebration.

"Recent bushfires, floods and the COVID-19 pandemic have highlighted the importance of connection and support. Whether it's your family of origin, the family you have created or the people you choose to have around you, reach out, stay connected and find the support you need and deserve.

"Connection and support are a vital component of the work that we do at Blue Knot, which is why we are excited to support National Families Week. Through this week and right through the year, we reach out and foster the support networks which people with complex trauma experiences need to heal and recover." Dr Kezelman said.

National Families Week is supported by the Australian Government Department of Social Services as a valuable opportunity to demonstrate that families, across the lifespan, are integral to our society.

National Families Week is run by Families Australia, a national member-based not-for-profit organisation that supports family and child wellbeing.



Alarming spike in online child abuse revealed in new report

"Stretched" and "exhausted" law enforcement officers have struggled to keep up with an alarming surge in reports of online child exploitation, abuse and grooming, according to a new study.

The University of NSW research found the concerning increase in agencies dealing with complaints, both in Australia and across the globe, was compounded by staffing resource issues as a result of the COVID-19 pandemic.

Criminologist Michael Salter said the work of supporting or identifying victims had not scaled up to cope with demand.

He also highlighted significant and concerning ignorance from social media and online gaming platforms who he said let complaints and alerts of abuse go "unanswered".

"At the same time as we've got online abuse increasing, unfortunately agencies were finding it very difficult to get out to the community and notify families, kids, parents and schools," Dr Salter, the report's lead author, told NCA NewsWire.

The research surveyed frontline and specialist law enforcement professionals from around the world through funding from the Australian eSafety Commission, and also discovered an increase in online risk-taking by minors and live streaming of abuse material during the pandemic.

These "major increases" in child exploitation crimes were not matched by a boost in victim identification and victim support efforts, which remained at pre-pandemic levels, according to the report.

Dr Salter said the "clear message" was technology companies needed to step up and take responsibility for the horrific rates of abuse occurring on their social media and online gaming platforms.

"We had a range of complaints from many agencies that they were dealing with the overflow from social media companies who just weren't responding to reports fast enough and hadn't invested in online safety during the pandemic," he said.

"So cases and complaints were just going unanswered but, more broadly, their platforms are just so unsafe for children that at a time of crisis there were no brakes to put on, there were no safeguards to raise. "Children were abjectly at risk on these online platforms and there was just nothing that could be done about it."

The criminologist said there was "absolutely no question the epidemic levels of online abuse and exploitation" seen during the pandemic was "a result of the lack of preventive measures from online platforms".

"To a certain extent, they've tied their own hands behind their back because it's crazy that the online profile of a user who is sexually exploiting children and the online profile of a legitimate user appear the same to the social media company," he said.

"They haven't designed their platform to make those distinctions."

Dr Salter applauded the efforts of the eSafety Commission but called for a significant increase in investment globally to help victim support services.

He said young and vulnerable victims of online abuse were currently left to manage the crisis on their own.

"We're talking about 14 or 15-year-old kids who are going online to often find and report their own abuse material," Dr Salter said.

"There are some really horrific scenarios out there at the moment."

It's Time For Employers To Deepen Their Understanding Of Trauma

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The conversation about trauma in the workplace has evolved considerably in the past year. Prior to the COVID-19 pandemic and protests against racism that defined 2020, the issue of trauma was already top-of-mind for many employers, especially those that seek to hire veterans or those located in places at high risk for natural disasters. The events of the past year have deepened society's understanding of trauma and broadened the view of how many people are coping with the impacts of trauma on a daily basis - even if not officially diagnosed with or being treated for Post-Traumatic Stress (PTS). It is important for employers to understand the dimensions of trauma, including how both major traumatic events and daily "micro-traumas" impact an employee's behavior and performance; how past childhood trauma might be triggering certain mental health challenges in adulthood; and the ways in which the workplace itself could be inducing or exacerbating emotional trauma.

Recognizing the Many Dimensions of Trauma

Events such as the death of a loved one, serious injury or illness or experiencing violence or abuse are highly likely to produce symptoms of PTS. Once thought to be solely the province of soldiers, the U.S. Department of Veterans Affairs estimates that about 7-8% of the population will experience PTS at some point, a percentage that is virtually guaranteed to increase as so many people around the world cope with pandemic-related grief, loss and survivor's guilt. The VA also acknowledges that there are millions of people that experience trauma but do not report PTS and may not be included in statistics. A large portion of that population includes marginalized communities that have been powerfully outspoken about racial traumas endured on a daily basis. The African-American community, of course, has worked to expose the intensity of their interactions with law enforcement; millions of Black men (up to 30%), especially,

are racially profiled, arrested, handcuffed, and released, clear of charges but left with emotional trauma that lasts a lifetime. As one man from Oakland explained recently in NBC News, even seeing police across the street can create a "flight or fight" stress response. Similarly, the early 2021 surge in hate crimes against Asian American Pacific Islander (AAPI) community – which includes 6.1% of the American population, according to MHA – has elevated the issue of intergenerational trauma among immigrant communities. Employers have a responsibility to maintain a psychologically safe working environment, and this includes being keenly aware of the threats and traumas that any of their employees might be experiencing on a given day.

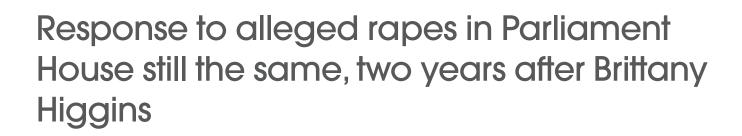
Acknowledging the Lingering Effects of Childhood Trauma

Adverse Childhood Experiences (ACEs) can include – but are not limited to - emotional, physical or sexual abuse; neglect; witnessing domestic violence or substance abuse; or enduring a divorce. Research on ACEs and their consequences is relatively new, but increasing, especially with California Surgeon General Dr. Nadine Burke Harris driving the conversation. This is good news for youth today, but many adults may be suffering from depression, anxiety or substance use or sleep issues that are a direct result of childhood trauma. Recognizing the sources of childhood trauma and the prevalence (estimates show that two-thirds of children experience at least one traumatic event before age 16) can help working adults confront their past and work through emotional damage. Fortunately, more adults - including celebrities like Oprah Winfrey - are opening up about their own journeys to overcome childhood trauma and normalizing the conversation.

Employers: Don't Forget to Look Inward

The phrase "toxic workplace" is not just hyperbole. The workplace exists in the same society and universe as personal life and therefore the scenarios that can create childhood traumas can be mirrored, to a degree, in a workplace. Managers or bosses can be emotionally or sexually abusive; power dynamics can feel threatening and workloads looming and inescapable – so much so that employees might consider suicide. Female employees are at particularly high risk for experiencing workplace trauma, as sadly, sexual harassment in the workplace is still too prevalent. As clinical psychologist Dr. Colleen Cullen explains, an incident of sexual harassment can "either trigger symptoms of depression and anxiety that are new to the person; or it can exacerbate a previous condition that may have been controlled or resolved." Such an incident can be extremely disruptive to the employee's career. Even if your organization has an extremely positive, transparent and supportive culture, understand that employees could have experienced a traumatic experience in another work environment and might be triggered by a comment made in a meeting, a tense work situation or other scenario.

For some, the word trauma might feel like a 'taboo' word. A recent piece in The New Yorker on the rise of "therapy-talk" explained this counterpoint – that "invoking 'trauma' where 'harm' might suffice could play into the hands of 'people who despise and fear vulnerability.'" While language is crucial, the most important thing is to recognize and understand that traumatic events can impact anyone, and that an employee must be able to trust his or her employer to respond with empathy and support. And as has been said previously, the pandemic has made these factors more severe and the "second wave" of increased anxiety, depression and PTS is upon us.



Two years after the alleged rape of Liberal staffer Brittany Higgins at Parliament House, the bureaucrats who run the building have conceded nothing has changed in how the incident would be handled if it happened again.

Despite an onslaught of revelations over the Department of Finance calling in the cleaners to clean the room without realising it was an potential crime scene, the failure to call an ambulance for an unconscious woman and complex rules about handing over the CCTV to police, a top bureaucrat has admitted the furore has not prompted any policy changes.

During a grilling by Labor Senator Katy Gallagher, Labor demanded to know what lessons had been learned.

"I asked the Department 'has anything changed in the way the Department responds to incidents at Parliament House since March 2019'?," Senator Gallagher said. "The answer given is `there have been no changes to these policies'. Is that the case? Mr Stefanic?"

In response, Department of Parliamentary Services secretary Rob Stefanic said there were no changes to existing policies.

"Um, that's correct senator," Mr Stefanic replied.

Senator Gallagher said she found that difficult to believe asking "please tell me" that something had changed.

"A young woman was allegedly raped in this building a couple of years ago and I am hearing from you guys there are no changes that need to happen?," she said.

"To the way this building is managed? Or security is provided? Red flags are watched? You're saying to me nothing needs to change."

At that point, the President of the Senate Scott Ryan

interrupted to insist the line of questioning was unfair.

"Do not put words in my mouth," Senator Ryan said.

During the evidence, Department of Parliamentary Services secretary Rob Stefanic revealed that the President of the Senate was first advised of an "incident" in the then-Defence Minister Linda Reynolds' office on March 27.

But they did not know it was an alleged rape at the time until police came knocking for the CCTV.

Mr Stefanic said he "hand delivered" the executive summary to Minister Reynolds because he didn't want to put it on the email system.

But by the Friday, Minister Reynolds' chief of staff was seeking formal advice from the Department of Finance on how to handle a potential sexual assault.

However, Minister Reynolds has maintained she didn't even know it was a sexual assault when she called Ms Higgins to an employment meeting in her office on Monday, April 1, in the same room the incident allegedly occurred.

She subsequently apologised for this error of judgment after news.com.au revealed the decision and Ms Higgins' sense of trauma over being brought back into the room in February.

Mr Stefanic was also asked about a new media policy that prohibits staff from speaking to the media.

Asked if the female security guard who recently spoke out to Four Corners over what she witnessed on the night of the alleged sexual assault of Brittany Higgins if the new policy was in place at the time, Mr Stefanic gave a clear answer.

"No," he replied.

NSW adopts affirmative consent in sexual assault laws. What does this mean?

New South Wales Attorney-General Mark Speakman has announced a suite of reforms to consent law, following a two-and-a-half year review by the Law Reform Commission.

The review was prompted by survivor-advocate Saxon Mullins, who endured two trials and two appeals, only to end up with no legal resolution to her rape case. Since then, Mullins has advocated for affirmative consent.

However, the final report from the commission, released in November last year, failed to recommend this standard. Despite this, Speakman has stood alongside Mullins with the promise of a bill that goes beyond the recommendations of the commission — and will make affirmative consent the law in NSW.

What is affirmative consent?

Affirmative consent means that consent is actively sought and actively communicated. This approach shifts from a "no means no" standard to "yes means yes", in that an individual seeking to have sex with another person must obtain clear, expressed consent from them before (and while) engaging in a sexual act.

In other words, submission without active, participatory agreement is not sufficient to claim that consent was given. In practice, this could be something as simple as asking someone if they want to have sex. This type of consent standard shifts the emphasis from the actions of the victim-survivor to those of the accused. This is important, since we know that the same rape myths and gendered stereotypes that permeate society can be brought sharply to bear in sexual assault trials.

Despite this, and international shifts towards affirmative consent, governments across Australia have been hesitant to legislate it, and Law Reform Commissions are apparently loathe to recommend it.

In addition to the NSW Commission, the Queensland Law Reform Commission earlier this year also failed to recommend affirmative consent, opting instead to recommend no substantive change to consent law. That report was heavily criticised as relying largely on research that had not been peer-reviewed, and ignoring recent Australian academic research.

The changes in New South Wales

The bill announced today changes that course. Speakman has presented reforms that go beyond the Law Reform Commission's recommendations and, if enacted, would legislate affirmative consent in NSW.

This is because the bill requires that a person who is seeking to raise the defence of "reasonable belief in consent" must demonstrate what actions they took or what words they spoke to ensure they had consent. A failure to do or say something (that is, to "take steps") to ascertain consent means that any belief in consent will not be reasonable.

This is affirmative consent in action - and it takes its lead from the law in Tasmania, which has operated without controversy for nearly two decades.

It is also where other jurisdictions fall down. Victoria, for example, is often heralded as a leader in affirmative consent. However, my research analysing rape trial transcripts from the County Court of Victoria shows that defence counsel continue to rely on narratives of victim resistance or "implied consent", that construct women's ordinary, everyday behaviour as indicating consent.

This is, as I have argued, because Victoria does not require an accused person to show they did anything to ensure their potential sexual partner was consenting. If a person did take steps to ascertain consent, they are able to raise this in their defence.

However, the reasonableness of a belief in consent, in Victoria, can be built exclusively on the accused person's perception of the victim-survivor's conduct - whether she was drinking alcohol, wearing certain types of clothing, dancing near him or not offering enough "resistance" to his sexual advances.

The NSW government has sought to respond to these problems that continue to plague Victorian courts by making these consent steps mandatory. This means the NSW provision will act as a protection to victim-survivors in their pursuit of justice, and will protect from prosecution accused people who, even in their mistake, acted reasonably.

What does this mean?

The ethos that a person who wants to have sex should make sure their potential partner also wants to should underpin both our responses to and prevention of sexual violence.

This approach can set the framework for how we teach young people - or "re-teach" older generations - about consent, relationships and sexuality. In the context of a rape trial, the hope is that affirmative consent will go some way to ensuring that attitudes which blame women for their victimisation, and excuse sexual violence, do not play a role in the outcome. This does not, as some may claim over the next few months as we see this bill progressing through parliament, reverse the onus of proof. People accused of sexual assault will continue to be afforded their right to the presumption of innocence.

However, this bill does place an evidential burden on an accused person who seeks to raise a defence of reasonable belief in consent to show they took steps. The onus remains on the prosecution to disprove this once the defence has discharged its evidential burden.

A win for survivors

The NSW reforms are a huge win for survivors, particularly Saxon Mullins, who catapulted consent onto the public and political agenda.

But it is not the end of the story. The law, while holding potential to set community expectations, is - and should be - the avenue of last resort. Attention must also be paid to preventing sexual violence before it occurs.



A special program is helping Indigenous offenders with disability turn their lives around

The Murri Court in Brisbane, in partnership with Carers Queensland, is helping Aboriginal and Torres Strait Islander defendants access the support they need to stop reoffending, including from the NDIS - and it's working.

Aboriginal and Torres Strait Islander people provided with disability support services as part of a special Queensland court have recorded a 100 per cent rate of not reoffending.

It is the first time National Disability Insurance Scheme (NDIS) services have been directly offered to offenders in the Murri Court after it was found most had some form of undiagnosed disability.

In Queensland, one in every three of the almost 9,000 people in prison is Indigenous, while making up only four per cent of the general population.

Marshall Mead and Owen Goltz both have acquired brain injuries (ABI) and were among the very first recipients of NDIS support just over a year ago after being sentenced.

Marshall, a 36-year-old Baryulgil man from Grafton in New South Wales was sentenced for assault.

Owen, a 32-year-old from Woorabinda in Queensland, was convicted of a domestic violence offence.

"I was at the time homeless, I didn't have any support or anything like that and it made it very hard, and that's why I was offending," Marshall said.

Owen said his days of offending are over after getting support from a carer.

"I don't offend, anything like that. I now go to the beach, go into the gym. I'm having a good time and that's keeping me out of trouble."

Ahead of Reconciliation Week beginning on Thursday held annually with the aim of strengthening relationships between Aboriginal and Torres Strait Islander peoples and non-Indigenous peoples - the two men returned to the Murri Court in Brisbane for all the right reasons.

They were there not to appear before magistrate Tina Previtera, but for a visit.

"Hello Mr Mead, Mr Goltz, how you going, long time no see?" Ms Previtera said as they entered Court 32, which is specially designed for the program and decorated with Aboriginal and Torres Strait Islander artworks and awards.

"I haven't seen you in this court so you're obviously going very well," she said.

Neither man has reoffended despite the usual recidivism rate being 75 per cent for those convicted.

"The NDIS has made a huge difference," Ms Previtera said.

"We've got nine participants from the Murri Court who are on NDIS packages, and none of them have re-offended - and some of them have been on it for 12 to 18 months. I think that just speaks for itself."

It also makes good economic sense, she said.

"It costs \$250,000 a year to keep one prisoner. The average NDIS package is \$34,000."

The Murri Court is a specialist court for Aboriginal and Torres Strait Islanders who, if they plead guilty to charges, are given special assistance to rehabilitate under the guidance of community elders.

NDIS support services are offered by provider Carers Queensland to help them comply with their bail conditions, which counts towards mitigating their sentences, and they continue to receive them after sentencing.

"They all have a past history of abuse, grief, loss, alcohol and drug use as a result of trauma, or they have head injuries from accidents, but trauma is the key that's led them into the criminal justice system," Ms Previtera said.

"What's different about Aboriginal and Torres Strait people is that they've suffered racism and prejudice and intergenerational trauma that has been passed down due to colonisation and other government policies."

A study three years ago found most had undiagnosed disabilities, knew nothing about the NDIS, or had difficulty applying if they did.

"This sort of work hasn't been done before at all. We were surprised and what we found was really high rates of disability within participants who attend court," said Colin Tidswell from Carers Queensland.

Mr Tidswell attends the Murri Court every week.

"Most of them have got a disability of some degree - 30 per cent of our participants have acquired brian injury. That means it's also very high in the prison system. "It's the first time some of these people have had support in their lives."

Mr Tidswell arranged for Marshall and Owen to be assigned carers to help them better manage their lives.

"A common reason for people to go back to jail is they don't turn up for court dates, and if you've got an acquired brain injury you can't remember when your court dates are up," he said.

"It's so very simple, just give people some support, which is enormous for them and also for taxpayers."

Cutting Indigenous incarceration is a Closing The Gap target and was a recommendation of the Royal Commission into Aboriginal Deaths in Custody 25 years ago but numbers have gone up in Queensland.

"The system hasn't failed the nine people who are on the NDIS packages," Ms Previtera said, stressing it is her view and she is not speaking for the courts.

"I'd like to think the system isn't going to fail the people that will get on those packages. The government is supportive of this program but we could use more money, we could always use more money.

"It would be great if this could be rolled out to people in mainstream courts - this isn't just an Aboriginal and Torres Strait Islander issue."

For Marshall, he said the support has changed his life "dramatically".

"I've got some structure now. Before I didn't have structure, not being able to go places, yeah it's made a difference," he said.

He now hopes to go to TAFE and study electronics.

Owen is studying his ancestry and undergoing rehabilitation after being injured.

"I hope one day I'll get a job and do my own stuff. I'm very happy with what I'm doing with my life now."

Children who see mothers abused 'more likely to suffer asthma, language problems'

Children exposed to family violence from infancy are up to three times more likely to develop asthma and have a psychiatric diagnosis, emotional behavioural difficulties or impaired language skills by the age of 10.

These are some of the grim findings from a decade-long study led by the Murdoch Children's Research Institute, which documented the experiences of more than 1500 firsttime Victorian mothers.

The study which has been published in the prestigious British Medical Journal, also found children who saw their mothers endure intimate partner violence over an extended period during the first 10 years of life fared much worse than those who received intervention by the age of five.

Poor health outcomes surged for children with experience of family violence in the year they turned 10, with researchers finding they were up to three times more likely to experience poor mental health, elevated blood pressure and sleep difficulties than children who had not seen such abuse. Exposure to violence in the first four years of life also put children at three times higher risk of developing asthma and language difficulties before the age of 10.

The researchers say the findings highlight the critical urgency of effective intervention, with health outcomes for children greatly improving when they received support early or were taken out of a family violence situation before they turned five.

As part of the study, 1507 mothers were recruited from six Melbourne hospitals. They were questioned in the first year of the child's life and then in the child's fourth and 10th years. Data collated from maternal questionnaires was analysed retrospectively by the researchers.

More than one in four women and children were exposed to intimate partner violence during the first 10 years.

Last year it was revealed an increasing number of women were coming forward for the first time to report family violence as COVID-19 lockdowns worsened the potential for abuse in many homes.

One of the study's lead researchers, Stephanie Brown, said the findings showed clear evidence that when intimate partner violence was addressed before middle childhood, adverse health outcomes such as a psychiatric diagnosis or emotional behavioural difficulties were less likely.

"The children that were exposed to intimate partner violence in their household when they were under five, in that early part of their lives, but not exposed when they turned 10 were doing much better in terms of their mental health than the children who had recent exposure to intimate partner violence," Professor Brown said.

But the scientists found irrespective of early intervention, if a child was exposed to intimate partner violence in their early years their risk of developing language difficulties and asthma was unchanged.

Royal Children's Hospital paediatrician Harriet Hiscock said delayed diagnosis could be behind some of the asthma cases, but she pointed out that studies have shown children exposed to intimate partner violence were more likely to have higher cortisol levels, a marker of stress.

"Stressful events in general have been implicated as predictors of asthma," she said.

"We know that asthma is linked with inflammation in the body and perhaps growing up in these sorts of environments, which we know leads to very heightened brain responses, that maybe it's leading to heightened immune or inflammatory responses."

After being exposed to family violence since birth, Evie's fiveyear-old daughter has sensory issues, is prone to emotional outbursts and has a preference for dressing up in costumes.

"I think that comes from this idea of, 'I don't have to be scared, I can be a superhero,' " said Evie*, who left her husband last year after 10 years together.

"Sometimes it can be really difficult for her to feel her arms and legs due to her sensory issues and her emotions escalate from zero to 100 instantly."

Professor Brown said intimate partner violence was not limited to physical and sexual violence. Often, it was characterised by a pattern of psychological control and coercion.

"Children can pick up on this and experience constant fear or anxiety at home," she said. "What's most striking from this study is just the scale of of the issue for our community. One in three children's lives were impacted by this issue by the time they turned 10."

While there had been significant focus on family violence during pregnancy and the early postnatal period following a royal commission on the issue, "we were still completely missing the fact that this issue continues in the lives of children and their mothers", Professor Brown said. "We need to have service responses that encourage women to seek support for themselves and for their children and feel confident that services will not judge them and will have pathways of support," she said.

"All the evidence suggests that women of all ages and social and cultural backgrounds strive really hard to support and protect their children."

Since separating from her husband, Evie said, she had noticed a marked improvement in her daughter's mental health and she has applied for assistance from the National Disability Insurance Scheme to help with her behavioural challenges.

"I didn't realise until recently, but you can apply for help for children, even if they don't have a diagnosis, if they're under the age of seven, so that has given me big peace of mind," she said.

"I believe trauma is one of those things that you can recover from the sooner that it's dealt with. We are in a rough patch at the moment as I'm starting to see a lot of her trauma unravel. But that's probably a good thing, because she's in a place where she feels safe to express herself for the first time in her life."

If you or anyone you know needs support, contact the National Sexual Assault, Domestic and Family Violence Counselling Service on 1800RESPECT (1800 737 732).

*Evie's real name was withheld at her request.



Patriarchal conditioning responsible for the increase in sexual violence against women needs to be addressed in children to prevent aggression, writes Anushka Britto.

*CONTENT WARNING: This article discusses rape and sexual abuse

MARGARET ATWOOD once famously said:

"Men are afraid women will laugh at them. Women are afraid men will kill them."

There lies a sad truth in one sentence. You can tiptoe around it, you can scream it, you can dress it up and make it look like something else but upon that four-posted bed of patriarchy lies a mountain of assaulted women. And we as a society make our bed in it every night.

Our news feeds are flooded with stories, both local and international, of alleged sexual assaults in Parliament, of women never making it home from an evening walk and men killing their partners. Instead of the incensed vitriol questioning the character of victims of sexual violence and the #notallmen hashtags, perhaps we should pause for a moment and consider what it will take to break down a culture in which we teach men and women that masculinity and being male is power and domination over women, that "real men" cannot show weakness or shame.

What could a public policy look like, with the aim of systematically breaking down the patriarchal teachings passed down from one generation to the next?

The issue of sexual violence against women is currently addressed by the Office for Women which claim that one in four women have experienced violence by an intimate partner since the age of 15 and one in five women have experienced sexual violence since the age of 15. The figures are even worse for Indigenous women, with them being 34 times more likely to be hospitalised for violence.

The National Plan to Reduce Violence Against Women and their Children 2010-2022 is now implementing the fourth phase of this plan. The plan states that it seeks to implement a primary prevention approach — that is preventing violence against women before it occurs.

Yet all the actions within the plan focus on addressing the three heuristics consistent in young people aged 12-24 as part of the plan's focus group:

- blame the victim;
- minimise the behaviour of males; and
- empathise with, and protect, males.

When we talk about sexual violence against women we say "one in five women have experienced sexual violence since the age of 15" as if it simply happened to them, as if there is no perpetrator. The way that we talk about sexual violence needs to call out who is committing these offences. For example, "in Australia in 2015-2016, 71 in every 100,000 males had committed a sexual assault offence, while six in every 100,000 females had committed a sexual assault offence".

While the number of female perpetrators only accounts for a small portion of total perpetrators, the number of female victims to male is an inverse proportion. In 2019, there were 26,892 victims of sexual assault officially reported — of these, 83% were female.

Why is women's safety an issue for the Office for Women? It's because we expect women to alter their behaviour and take accountability for their own safety from sexual assault. Granted, the current perpetrators of sexual violence should go through Men's Behaviour Change courses and address their own deep insecurities and shame that has led them to feel a sense of entitlement over women's bodies.

But might I suggest an alternative approach? If we are to truly reduce sexual violence against women and the omnipresent fear that women feel in daily life, we need to start with education about bodily autonomy and consent and it needs to start with mandatory age-appropriate lessons from pre-school age onwards.

In its Fourth Action Plan, the National Plan will focus in part on 'raising awareness and understanding of issues such as gender equality, consent and healthy sexual relationships, particularly for young people'. While this is a great initiative, there is a gap in the way we address sexual violence through education. Schoolgirls Tamsin Griffiths and Chantel Contos have called for it in their respective interviews and petitions.

In her petition, Tamsin writes that education around consent came too late in year ten, with half her friends already being raped or sexually assaulted by boys from neighbouring schools by then. If we do not teach consent about bodily autonomy to young children, long before they reach an age where they know about sex or feel sexual desire, how can we expect to teach them consent in relation to sex when they have not yet been taught consent to their physical space and person, or felt ownership of their own body?

Perhaps you believe this does not apply to you and your social circle, that it is "other" men who are sexually violent

towards their partner or other women. However, the attitudes that give rise to perpetrators of violence believing that their actions are acceptable are borne by a significant number of us.

The 2017 National Community Attitudes towards Violence Against Women Survey (NCAS findings) on knowledge and attitudes towards sexual assault in Australia found that for Australians aged 16 and over:

- one in five (19%) were unaware that non-consensual sex in marriage is against the law;
- one in ten (11%) believed that women were "probably lying" about sexual assault if they did not report it straight away;
- two in five (42%) agreed that "it was common for sexual assault accusations to be used as a way of getting back at men";
- one in three (33%) believed that "rape resulted from men not being able to control their need for sex"; and
- one in eight (13%) agreed that a man is justified in having non-consensual sex if the woman-initiated intimacy in a scenario where a couple had just met and one in seven (15%) agreed this was justified in a scenario where the couple were married and the womaninitiated intimacy (Webster et al. 2018).

Jess Hill explores the relationship between shame and power and abuse in her award-winning book, See What You Made Me Do, a book on intimate partner violence in Australia. If we wish to raise our children in a world where men are allowed to show emotions like shame and sadness without fearing that women will laugh at them and women can live a normal life without fearing that men will kill them, then we need to address the patriarchal conditioning of our children so that they do not continue to have the attitudes present in Australian society today.

We need to do it with the faces of Saxon Mullins, "Clare" (from the Four Corners report 'Code of Silence'), Lynette Daley, Eurydice Dixon, Jill Meagher, Aya Maasarwe and Courtney Heron emblazoned in our minds because we failed them and if we don't do it now, we will only have more blood on our hands.

If you would like to speak to someone about sexual violence, please call the 1800 Respect hotline on 1800 737 732 or chat online.

Anushka Britto is a day-time auditor, night-time philosopher, writer and creative spirit who lives in Melbourne.

COVID vaccine rollout delays frustrate vulnerable Australians in priority group

Any Australian over the age of 50 will be able to get a COVID vaccine from May 3, but many vulnerable Australians are frustrated that they are still yet to be vaccinated despite being in the priority group.

Margaret Ruff's son Raymond, 45, contracted meningitis as a child and is now intellectually disabled and cannot talk, he also has hemiplegia and epilepsy.

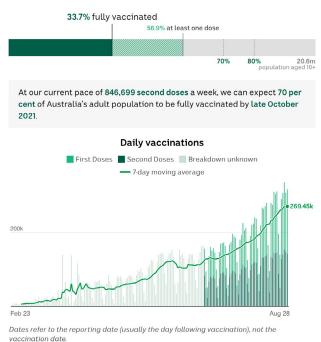
He lives in a disability care home in the Melbourne suburb of North Fitzroy with four other residents and their carers but Mrs Ruff said no-one there, including staff, had been vaccinated.

"I'm going to lay it right on the line: what country gives their politicians injections when people with a disability and the staff looking after them still haven't had them?" she said.

"It's disgusting. I have morals, I have ethics, and I can't believe that people are disregarding Ray."

Ms Ruff's mother contracted COVID in an aged care facility during Melbourne's second wave. Her mother survived and has now been vaccinated, but Ms Ruff said she will not have peace of mind until her son is vaccinated too.

Australia's vaccination rollout



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"I was absolutely terrified, because on one hand, I knew mum was really sick, and while all this was happening I was terrified I might also lose my son," she said.

Vaccines for disability sector to ramp up

In a Senate committee hearing on COVID-19 last week, officials from the Department of Health admitted just 6.5 per cent of residents in disability care had received a vaccine.

Disability care residents and workers are considered a priority vaccination group under the Commonwealth's rollout strategy, along with the aged care sector and frontline health and border workers.

Brendan Murphy, the department's secretary, told the committee the risk of death if another COVID outbreak was to occur was greater for residents in aged care, which is why that sector was prioritised.

"While we did originally intend to do disability and aged care together, the complexity of aged care meant we had to prioritise to get that group protected at the same time as trying to get disability started," he said.

Professor Murphy said vaccinations in the disability sector would ramp up this week.

"The plan is to get all of phase 1, the vulnerable people, done by the middle of the year but that doesn't mean disability in 1A isn't a priority," he said.

The Government has also announced vaccinations for the general public for anyone over the age of 50 will begin on May 3.

Ms Ruff said she was speaking out to ensure authorities keep their commitment to disabled people as the broader rollout gets underway.

"I'm absolutely disgusted but I'm not surprised at all. Most residents in aged care facilities don't have an advocate," she said.

"So when I speak for Ray I'm speaking for all the people with disability, whose parents are either too sick, too old or too scared to say anything.

"I would like to see everyone in a disability home, including the staff, treated with respect and vaccinated as soon as possible."

Jane Halton, chair of the Coalition for Epidemic Preparedness and former secretary of the Department of Health, defended the Government's decision to prioritise elderly people in care.

"I understand why they (authorities) took that decision and that it was sensible, based on the epidemiology," she said.

"I think we need to remember that we can actually do the two things at once — the priority population in 1A are absolutely important but we do need to lift our game, particularly on people with disability." University of Melbourne epidemiologist Tony Blakely agreed that while the decision was tough, authorities were right to put elderly people first.

"The aged care sector includes older people who are much more likely to die," he said.

"People with disabilities are more likely to die compared to someone of the same age without a disability, but they won't be as old on average.

"It's all about averages and trying to get your vaccine to where it will have the most affect, so age before disability, yes, is the right decision."

The latest government figures showed 201,848 residents in aged and disability care have been vaccinated, up 24,328 from the same time last week.

Frustration over the rollout

Jess Kapuscinski Evans, a quadriplegic who requires the support of a carer, runs an arts company in Melbourne that supports artists with a disability.

Ms Evans said she is not upset that elderly people in aged care were prioritised.

However, she is frustrated that the general population will soon have access to the vaccine when the 2A phase of the rollout begins on May 3, while many disabled people are still waiting for their jabs.

"People in nursing homes were vaccinated faster than people in disabled care and I don't feel that's a problem per se, because the (elderly residents in aged care) face some of the same health and social justice issues that disabled people do," Ms Evans said.

"More what I'm concerned about is the fact that perfectly healthy non-disabled people, and people who aren't elderly or part of marginalised communities, are able to get access to the vaccine before people who are at higher risk.

"The pandemic exacerbated or made clear to people various social justice and health problems for marginalised communities, and for that reason marginalised communities should be prioritised for being vaccinated as opposed to the general population.

"It seems like the general public are getting vaccinated at a faster rate for some reason."

Commodore Eric Young, the new operations coordinator for the government's Vaccine Operations Centre, said jabs for at-risk populations were increasing.

"Critically last week, over 350,000 doses of vaccine were administered to vulnerable Australians, up from 330,000 the week before," he said.

"Our focus every single day is making sure all vulnerable Australians are offered the vaccine as soon as possible." In a statement, a spokesperson for the Department of Health said "the vaccination of people with disability and disability workers eligible under phase 1a remains a high priority".

"We understand and appreciate that many people in this group are eager to access the COVID-19 vaccine.

"The vaccination of people with disability in residential settings is a complex logistical operation which has commenced with a small number of sites, in consultation with disability providers, carers and the broader sector.

"This has provided the Government opportunity to refine the delivery model for disability to ensure, as we now ramp up, the model is appropriate and able to meet the needs of people with disability."

Some aged care homes still waiting for vaccine

Florence Estepa manages Cumberland Manor, an aged care home in Melbourne's west that was hit hard by COVID — 53 residents there contracted coronavirus last year and nine died.

Ms Estepa said residents and staff there were still waiting to be vaccinated, and is surprised they were not considered a priority given the severity of the outbreak at Cumberland Manor last year.

"We were the most hit, we were the vulnerable ones, and I would think we were first on the queue (for vaccines)," she said.

"We have got consents (for residents to be vaccinated), we are prepared when they (vaccination workers) turn up. We only got the date last week that they will be coming, on the 12th of May."

However, Ms Estepa said only the residents will be vaccinated, and staff are expected to go to their GPs or state-run vaccination sites across Melbourne.

"It is very frustrating for them, because they thought that they were forgotten," she said.

Karen Hollis, who has worked as a general services manager at Cumberland Manor for 20 years, said she was surprised over 50s in the general public would soon get vaccinated while frontline workers were still waiting.

"It seems funny that people that haven't been in the frontline with COVID seem to be getting the vaccinations, and the ones that have been here working their butt off, day in day out within the COVID, have still got to wait," she said.

"It just doesn't make very much sense."





National Centre of Excellence for Complex Trauma



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