02 Understanding Sexual Violence and the SRT

This chapter outlines important definitions and concepts used throughout the SRT and includes data on the prevalence of sexual violence in Australia.

What's in this chapter?

Content warning:

This chapter discusses family, domestic and sexual violence, trauma and institutional betrayal.

Key terms:

- Sexual violence
- Sexual assault
- Sexual harassment
- Consent
- Sexual rights
- Sexual wellbeing
- Gendered violence
- Victim-survivor
- Intersectionality
- Bodily autonomy
- Trauma

Key organisations mentioned:

 Relationships and Sexuality Education Alliance

Prevalence of Sexual Violence in Australia

51% of women in their twenties, **34%** of women in their forties and **26%** of women aged 68 to 73 have experienced sexual violence in their lifetime.¹

1 in 5 women and **1 in 16 men** have experienced sexual violence since the age of 15.²

Almost **1** in **2 LGBTIQ+** people reported being **coerced** or **forced** into sexual acts that they did not want to engage in.³

Women with disability are **twice as likely** to experience sexual violence in a given year compared to women without disability. Men with disability are also **2.6 times** as likely to report sexual violence than men without disability.⁴

Approximately **97%** of sexual offenders are **men.**⁵

Victim-survivors of sexual violence are up to **45% more likely** to experience high levels of financial stress and report worse physical and mental health.⁶





Prevalence of Sexual Violence in Australia

275 students are sexually assaulted in an Australian university context every week.⁷

11% of women and **4.6%** of men have experienced childhood sexual abuse.⁸

Women who experience sexual abuse in childhood are **twice as likely** to experience sexual violence, domestic violence and/or physical violence as adults.⁹

92% of women who have experienced sexual assault by a male **did not report** the most recent incident to police.¹⁰

On average, it takes **23.9 years** for child sexual abuse victim-survivors to tell someone about the abuse. **Some victim-survivors never disclose.**¹¹

3 in 5 Aboriginal and Torres Strait Islander women have experienced physical or sexual violence perpetrated by a male intimate partner.¹²

Alongside the personal cost, the cost to the community addressing violence against women and children in Australia is estimated to be **\$22 billion each year.**¹³

Sexual Violence

Sexual Violence

Sexual violence includes any sexual act, attempt to obtain a sexual act, or unwanted sexual comments or advances directed against a person using coercion, by any person regardless of their relationship to the victim-survivor, and in any setting.¹⁴

Sexual violence includes:

- All sexual interactions imposed by coercion and threat.
- Rape (known as 'sexual intercourse without consent' in ACT law) or attempted rape.
- Sexual assault.
- Non-consensual sexual interactions within marriage or dating relationships.
- Sexual abuse of children and young people.
- Sexual violence as a form of 'punishment' for transgressing social or moral codes.
- Sexual violence driven by homophobia, biphobia or transphobia.
- Sexual assault perpetrated by multiple people.
- Sexual harassment, including unwanted sexual advances.
- Sexual interactions by a person in a position of authority or trust, or who holds care responsibilities, towards someone in their care.
- Technology-facilitated sexual violence, which includes online sexual harassment and non-consensual sharing of intimate images.
- Reproductive coercion, including denial of the right to use contraception or other measures to protect against sexually transmitted infections (STIs), or the removal of these measures without consent, known as 'stealthing' in ACT law.
- Female genital mutilation/cutting.
- Sexual violence as a weapon of war.
- Forced prostitution and trafficking of people for the purpose of sexual exploitation.

Sexual Assault and Harassment

Sexual Assault

Sexual assault is any act of a sexual nature carried out against a person without that person's consent through the use of physical force, intimidation or coercion (such as threats and blackmail). This includes rape, attempted rape, aggravated sexual assault, assault with a weapon, indecent assault, penetration by objects, forced sexual activity that did not end in penetration and attempts to force a person into sexual activity. Anyone can experience sexual assault regardless of their gender, sexuality, age, cultural background, disability, socio-economic or housing status.¹⁵

Sexual Harassment

Sexual harassment is when someone makes an unwelcome sexual advance, requests a sexual favour or engages in unwelcome conduct of a sexual nature (including making sexual statements or jokes) in circumstances which make the person who is being harassed feel offended, humiliated or intimidated. This includes engaging in unwelcome behaviour that is demeaning because of a person's sex.¹⁶ Sexual harassment can be a single event or a pattern of behaviour which may be clear or subtle.



Gendered Violence and Violence Against Women*

Gender and sexual violence are inextricably linked. In particular, violence against women and the social construct of masculinity has an undeniable connection to gendered drivers of violence.

Masculinity encompasses a set of attitudes, behaviours and expectations associated with men. These social expectations can influence the way men act and behave and are often underpinned by aggressive and dominant patterns of behaviour. Research has shown that men who form strong attachments to these norms and expectations of masculinity show a greater degree of sexist attitudes and behaviours towards women, leading to violence.¹⁷

Gendered drivers of violence relate to the structures, norms and practices which arise from gender inequality in public and private life, which create the necessary conditions for violence against women to occur. For example, traditional gender norms (i.e. expecting men to be strong, aggressive or bold) encourage gender stereotypes and further the societal belief that women and gender-diverse people are inferior to men. Gendered drivers of violence must also be considered in the context of other forms of social discrimination and disadvantage, such as within LGBTQIA+ communities and relationships.

Violence against women is any act of gender-based violence that causes, or could cause, physical, sexual or psychological harm or suffering to women (including threats of harm or coercion) in public or private life. This encompasses all forms of violence, including physical, sexual, emotional, cultural, spiritual and financial violence. Gender-based violence can have devastating physical and psychological impacts on those who experience it, and also limits their ability to participate fully in society and inhibits their access to sexual and reproductive health rights.¹⁸

International Context

The **Declaration on the Elimination of Violence against Women**, adopted by the United Nations General Assembly in 1993, defines violence against women as 'any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life'.¹⁹

All countries have an obligation under international law to end violence against women. Importantly, gendered violence is not a 'private' matter - it is a human rights violation which compels governments in all nations to address, prevent and respond to it. This also includes obligations to ensure that all women who experience gendered violence have access to legal, health and social services.

Consent

When engaging in sexual activity, positive and safe consent is:

- Mutual. Everyone involved needs to agree every single time.
- Freely given. Consent must be given willingly, without pressure or threats.
- Informed. People need to understand what is about to happen.
- Certain and clear. It is a 'yes', not a 'maybe' or 'I think so'.
- Enthusiastic. Everyone involved should be excited and want to engage in sexual activity.
- Reversible. You can stop or change your mind at any time.
- **Specific.** Saying yes to one activity doesn't mean consenting to everything. For example, consenting to oral sex does not mean consenting to penetrative sex. Check in regularly with your partner/s during sexual activity to make sure you still have their consent.
- Ongoing. Consent is necessary before and during any and all sexual activities.

The law in the ACT describes situations in which consent to sexual activity cannot legally be given. However, while the legal definitions of consent may vary by location and circumstance, the general concept is always the same: consent is an ongoing process of discussing boundaries and what you're comfortable with. For more information about ACT consent law, see page 70.



Using drugs, alcohol or any other substance does not automatically mean that you cannot consent to sexual activity. However, if a person is intoxicated to a level that they are incapable of communicating their free and voluntary agreement to sexual activity, they cannot consent. A person who is unconscious or asleep cannot consent.

Sexual Rights within a Human Rights Framework

The right to freedom from all forms of violence, including sexual violence, is found within international law and is a human right. Unfortunately, education surrounding sex, sexuality and consent is often limited to the idea of 'harm prevention' rather than encouraging positive sexual health and wellbeing, something that cannot be achieved by only being free from violence. The foundation of relationships and sexuality education should be that sexual wellbeing involves more than the absence of violence, harassment or illness - it is a positive and fulfilling experience. Everyone has the right to feel safe and to feel capable of expressing their boundaries.

This is particularly important in the context of consent education. Teaching consent is often framed as a tool to prevent sexual violence, rather than as a way to present sex and sexuality as an important and positive aspect of a person's identity and wellbeing. In order for individuals to develop a proper understanding of consent as affirmative and positive, it cannot be taught in isolation from education about bodies, sex and sexuality, communication and relationships. Ultimately, a holistic human rights approach to the issue of sexual violence, sex and sexual wellbeing includes the right to age-appropriate and inclusive relationships and sexuality education, alongside the fundamental right to be free from violence.²⁰

Relationships and Sexuality Education Alliance

The Relationships and Sexuality Education Alliance is a group of passionate advocates and partner organisations harnessing their collective experience and expertise to influence and advocate for universal access to comprehensive relationships and sexuality education for all children and young people in the ACT. They believe that relationships and sexuality education is the most powerful strategy to teach sexual rights.

You can apply for membership of the Relationships and Sexuality Education Alliance on their website.

Sexual Health and Wellbeing

Sexual wellbeing encompasses a range of positive sexual health outcomes for individuals. Sexual wellbeing is intrinsically linked to one's physical, mental, emotional and social health. There are two ways to think about sexual wellbeing:

1. Personal sexual wellbeing refers to a person's internal development in terms of the self and the body. This includes notions of identity, agency, self-esteem, perceived body image and understandings of feelings and desires.

2. Relational sexual wellbeing refers to the development and maintenance of mutually respectful relationships. These relationships support gender equality and are free from violence and coercion.²¹

At the **individual** level, sexual wellbeing is influenced by a person's ability to choose whether to have sex and to access sexual health services and contraceptives. It is also shaped by a person's physical, sexual, mental and emotional health and maturity. Sexual wellbeing is also linked to the acceptance of one's own sexual preferences, gender identity and the preferences and identities of others.

At the **interpersonal** level, communication and relationship-building with a person's intimate partner/s can lead to feelings of connection, safety, comfort and sexual pleasure. Relationships with friends and family can also influence sexual wellbeing and behaviour for young people due to the influence of sociocultural norms that circulate within peer circles. Societal norms and values also contribute to the development of sexual wellbeing, especially those relating to abstinence and sexual activity, gender and sexuality. For example, traditional gender roles can impose limits on the sexual freedom and choice of certain people, such as young women and gender and sexuality diverse individuals.

Language and Terminology

Language is powerful. It can have a significant impact on the people we speak to, particularly those who have experienced trauma at some point in their lives. Using trauma-informed or trauma-sensitive language is an important part of avoiding re-traumatising or triggering others when talking about or responding to violence.

Victim or Survivor?

A person who has experienced sexual violence is often referred to as a victim or survivor. Both terms are valid. Some people identify as a victim, while others prefer the term survivor. The best way to be respectful is to ask for their preference.

The term '**victim'** is often used when referring to someone who has recently been affected by sexual violence, when discussing a particular crime, or when referring to aspects of the criminal justice system. The term '**survivor'** is often used to refer to someone who has gone through the recovery process or when discussing the short or long-term effects of sexual violence. The Safe Response Toolkit uses **victim-survivor** to include both of these terms.

Perpetrator

A person who uses sexual violence is often referred to as a '**perpetrator'.** The term **sexual offender** may also be used to describe someone who has been convicted of a criminal offence of a sexual nature. The Safe Response Toolkit uses **perpetrator** for clarity and accessibility purposes, but note that this is inclusive of situations involving multiple perpetrators.

Supporters

Supporters are an important element of a victim-survivor's journey after an experience of sexual violence. Supporters can be friends, family members, mentors, teachers, trained professionals or anyone who receives a disclosure of sexual violence.

Disclosing sexual violence can be very daunting. If someone you know tells you that they have experienced sexual violence, it is important to provide support in the best way you can.

For more information and resources about responding to disclosures and supporting and checking in, see pages 35 and 36.

Trauma

Trauma is a negative emotional response to an event or experience, such as sexual violence. Every person reacts differently to trauma and there is no 'right' or 'best' way to respond. The healing process from a traumatic experience differs from person to person and has no set timeframe.

Intersectionality

Intersectionality is the understanding that different forms of inequality and discrimination (such as discrimination based on ethnicity, race, gender, sex, sexuality, age, religion, socio-economic status and/or physical and mental ability) combine, overlap and intersect to shape and influence an individual's experiences.

Intersectional feminism recognises how different aspects of a person's gender and identity interact to influence the way they experience the world (especially patriarchy, misogyny and sexism) and the barriers they might face as a result. It recognises that some victim-survivors of sexual violence find it much harder to achieve justice and support because of these intersecting forms of discrimination. For example, disclosing sexual violence, reporting to police, going to hospital, asking for help or receiving other forms of assistance may be especially difficult or complicated for some victim-survivors as a result of these intersecting forms of discrimination and the additional systemic or structural barriers that they face. ²²

An intersectional feminist approach to sexual violence activism and advocacy is underpinned by the understanding that each victim-survivor's experience is unique, and that addressing sexual violence requires us to address other forms of discrimination and oppression as well.

Bodily Autonomy

Bodily autonomy refers to the right of all human beings to control their own bodies. It includes the right to control one's health and body, including one's physical and sexual freedom and safety, the right to reproductive freedoms and the right to be free from physical violence and coercion.²³ You are in charge of your own body. An experience of sexual violence may make you feel as if your bodily autonomy has been diminished or taken away. You have the right to reclaim control of your body and health. You have the right to decide what happens to you after an experience of sexual violence, including whether to seek assistance or the type of assistance you would like. No matter what, no one can take these rights away from you.

Institutional Betrayal

Institutional betrayal is the harm that an institution inflicts on people who depend upon it. Individuals who expect and trust an institution to keep them safe may feel betrayed if the institution instead fails to prevent violence, creates difficult or unsafe processes for reporting, supports cover-ups, endorses misinformation or punishes victim-survivors who disclose their experiences.

Institutional betrayal includes instances where institutions, such as police and legal systems, do not believe victim-survivors and fail to respond appropriately to their reports. These systems are designed to protect the community, provide justice for victim-survivors and hold perpetrators accountable. However, these expectations are not met when a victim-survivor is disbelieved, blamed or stigmatised while reporting their experiences.

Institutional betrayal can cause further harm in addition to the trauma that victim-survivors experience. This immense psychological pressure can prevent victim-survivors from speaking freely or from providing a full and accurate account of their experience. The STOP Campaign aims to hold these institutions accountable by providing victim-survivors and their supporters with information and knowledge about their available options following sexual violence. We have engaged directly with these institutions to provide accurate information about the reality of the services they provide.

The STOP Campaign acknowledges the existence of structural and discriminatory barriers for many victim-survivors when seeking help and support from systems within the ACT. It is important to note that victimsurvivors may have different experiences when engaging with the processes outlined in this resource.

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