



Findings from the survey by Women's Health Matters of ACT women's experiences of seeking help following a sexual assault

Contents

Executive Summary	2
Background.....	4
The Survey	4
About the women who have responded.....	4
Women's help seeking	5
Specific supports and services in the ACT.....	9
Themes from open- ended questions	13
WHM comment and suggestions.....	24
A final word from the respondents.....	25

Executive Summary

Women's Health Matters (WHM) undertook a survey about the help seeking experiences of ACT women following a sexual assault to complement our 2016 research on women's experiences of seeking help for domestic violence, and to inform the ACT Government's Sexual Assault Prevention and Response program.

The aim of this work was to understand the needs of ACT women who have been sexually assaulted and the way they seek help, and to seek their views on how the response system could be improved.

218 participants were surveyed between 26 March 2021 and 7 May 2021. A wide diversity of women responded, consistent with our understanding that this is an issue that impacts women from many different backgrounds and across all age groups.

Key findings

- **85%** of participants reported that the perpetrator was known to them. Around **8%** of these women specified that they have been sexually assaulted by multiple perpetrators.
- **57%** of participants indicated that they had sought help in the past five years, with the remaining 43% stating that they had not sought help in this time period, with many of these women stating their assault happened historically between 5 and 30+ years ago.
- **74%** of the women stated concerns about their mental health as the main reason that women reached out for help following a sexual assault.
- The most common supports accessed were counselling services (65%), support of family and/or friends (63%) and help from general practitioners or other doctors (45%).
- For those who sought help, nearly **60%** said they were not able to find the help and supports they needed.
- Approximately **45%** of participants reported negative experiences with the help they received from support services, predominantly regarding poor and insensitive handling from the police and legal system that discouraged women from seeking further action and feeling not believed.
- Whereas, about **55%** of participants reported positive experiences in relation to the help they received. Some responses attributed this to respect and validation received from counselling/psychology services, however at the cost of long wait times and limited sessions or financial expense.
- There were many comments about services being inadequately prepared to deal with disclosure of sexual assault and that service providers, education institutions and workplaces lacked training in dealing with such situations. Women told us that they were often made to feel interrogated rather than supported, and felt blamed rather than being believed when speaking with police and some service providers. Having to navigate different services and health professionals to find someone with the capacity to provide appropriate support was also a recurring ordeal from many women's experiences.

Constraints and enablers to women feeling supported were reported to include:

- Respectful care
- Being believed and validated to take matters seriously and provide appropriate care and options;
- Professionalism and expertise in sexual assault support and pathways from police, justice and health services;
- Quality of therapy and/or counselling that is more available and accessible; and
- Consistency and continuity of care, and timeframes of care
- Information to support women find services and make decisions

System responses identified by participants **that do not work well** include:

- Lack of action, follow up or progress
- Complex systems and services
- Rights to justice while trying to minimise having to retell and be retraumatised at each counselling session or report

Identified opportunities and suggestions to enhance supports for women included:

- Improved information about services available and scope of support they offer
- Streamlined services
- Trauma- informed practices
- Widespread education and consent and sexual assault

Our suggestions

WHM considers the following opportunities exist to improve supports for ACT women based on our findings:

1. Improve supports for women who choose to use the justice system.
2. Consider new avenues rather than just police for reporting. E.g. informal online reporting.
3. Consider measures to attract more psychological professionals to work in Canberra.
4. Build a strong network for people who have experienced sexual assault to access a range of appropriate services.
5. Train general police to respond sensitively.
6. Quick access to counselling from time of first contact.
7. Increase funding for CRCC to meet demand.
8. Promote and improve information about the scope of services available for ACT women to report or seek support following a sexual assault.
9. Educate young people about sex and consent earlier and in more detail.
10. More information about consent in the wider community.
11. Train hospital staff who might deal with SA victims to respond sensitively.

Background

Sexual assault is a longstanding serious issue in our community with alarming national statistics, with the vast majority of victims being women.

On 29 March 2021 the ACT Government announced the establishment of a Sexual Assault Prevention and Response program to co-ordinate the community, the service sector, unions and relevant stakeholders on responses to sexual assault in the ACT. The work of Women's Health Matters (WHM) was instrumental in helping to inform the establishment of the program based on the knowledge and evidence for sexual assault we held at the time.

WHM committed to conduct a survey about the help seeking experiences of ACT women following a sexual assault to inform the government's Sexual Assault Prevention and Response program and to complement the work the organisation had published in 2016 *Hear Me Out. Women's experiences of seeking help for domestic violence in the ACT: A qualitative research report*. We understood from previous work with Canberra Rape Crisis Centre that women seeking help following a sexual assault have diverse circumstances and needs, and that there is no single best response that will be suitable for all women. Rather, there needs to be a range of responses available.

The aim of WHM's social research was to understand the needs of ACT women who have been sexually assaulted and the way they approach seeking help and support in the ACT – and an important part of our research was to also gain an understanding of women's views on what worked and what didn't, and their suggestions for how the response system could be improved.

The Survey

WHM's consultation survey opened on 26th March 2021 and consisted of 20 questions.

Apart from the first 3 questions which gathered the demographics of the respondents, all the remaining questions included the capture of both quantitative and qualitative responses, which has allowed WHM to explore the common themes within the comments from the women.

The survey was closed on 7th of May 2021 and after filter of eligible and complete responses there was a total of 218 respondents.

Participants were informed prior to completing the survey that findings may be published or otherwise made available and that WHM is committed to ensuring that personal information is handled in line with WHM privacy policy. Participants were also informed that participation in the survey is voluntary and that they may withdraw participation at any time during the survey.

About the women who have responded

There was a **wide diversity of women** who responded, showing that this is an issue that impacts women from many different backgrounds and across all age groups.

Of the 218 women:

- 30.73% of the women identified as LGBTQI+ (n=67),
- 16.06% are living with a disability (n=35),
- 4.59% are from a multicultural background (n=10); and
- 2.29% identified as Aboriginal and/or Torres Strait Islander (n=5).

In relation to the **current age of the respondents**:

- 35.57% were 25-34 years (n=71),
- 25.23% were 16-24 years (n=55),
- 19.27% were 35-44 years (n=42),
- 16.51% were 45-54 years (n=36),
- 5.50% were 55-64 years (n=12),
- 0.92% were 65+ years (n=2).

When asked **about the person who sexually assaulted them:**

- 26.15% said that the person was known to them but was not their partner or ex-partner (n=57),
- 25.23% were assaulted by a partner or ex-partner (n=55),
- 15.60% said it was a person not known to them (n=34); and
- 15.60% said the person was an acquaintance (n=34).
- 18.35% (n=40) said that someone else was responsible for the assault. Women told us this this included family members, step-parents or parent figures; someone from their workplace such as their employer, colleague or client; as well as other school students and people in position of authority e.g. instructor, police and doctor. 18 (8.26%) of the women who indicated someone else, specified that they have been sexually assaulted by multiple perpetrators.

Women's help seeking

Women were asked **whether they had sought help in the past 5 years for a sexual assault**, a total of 215 women responded of which:

- 57.210% (n=123) advised that they had sought help in the past 5 years; and
- 42.79% (n=92) said that they had not sought help in this time period. The comments provided by women to this question indicated that for many women their assault happened historically between 5 and 30+ years ago.

Women who commented that they did seek help in the past 5 years described accessing counselling/psychologist, the GP, CRCC, the hospital, friends or family, police and/or victim support. Some respondents further described that despite their help seeking they didn't feel supported.

Many of the women who said they had not sought help in the past 5 years told us in their comments that they had never sought help - because they felt scared about disclosing their assault, or that they had experienced stigma and victim blaming which deterred them from seeking help. A number of women also told they had experienced multiple sexual assaults in their life.

Women were asked **at what point they felt ready to reach out for support following the assault**, a total of 209 women responded of which:

- 33.01% (n=69) of the women who responded said it took them longer than 12 months,
- 14.35% (n=30) of women said they reached out within a week,
- 11.96% (n=25) of the women specified they felt ready within a month,
- 9.09% (n=19) of the women stated they sought support between 2-6 months, and

- 6.70% (n=14) of the women indicated that they felt ready to reach out for support between 6-12 months after the assault.

24.88% (n=52) of the respondents selected “other” when answering this question. The majority of the comments from these women highlighted that:

- They had never felt they ready to reach out for help (n=25),
- They did not feel ready within 12 months after the sexual assault with most (n=14) commenting that they did not seek help until 10+ years,
- Whereas 6 women commented that they tried to get help but got nowhere

Women were asked **when they did feel ready to reach out for help and support, if were they able to find the supports they needed**, a total of 202 women who responded of which:

- 40.10% (n=81) said they were able to find the supports they needed,
- 59.90% (n=121) said they were not able to find the help and supports they needed.

In their comments, many of the women highlighted:

- They were able to find services but the services were not supportive to their needs:

“I received support from the Rape Crisis Centre but only had one appointment at which it was suggested that it would cause me more harm than good to go to the police. I did call the police but talked to someone on the switchboard who seemed very unsupportive and did not help me understand the reporting avenues available. I did not end up talking to an officer and eventually sought private psychological support through a mental health plan and referral from my GP.”

“Because it’s hard to articulate what you need and the support struggles to identify it also, so they inform of your rights...but legal support is next to none, pre-court support is next to none, during court there is only volunteers supporting, the counsel is too busy on the case to be sensitive to your needs”

“I found myself stuck in an eternal loop of ‘we can’t help you but this org can’, but when i would go to said org, i would get the same answer, and told to go to another org, and so on and so forth”.

- Long wait times to access counselling services were a significant barrier to receiving the help they needed:

“I contacted the Canberra rape crisis centre 3 months after I was sexually assaulted, at the recommendation of my GP. I had the initial meet and greet/ assessment and was told there was an extensive wait list for counselling, even though I was struggling they said I was actually doing well and that unfortunately my story wasn’t unique. When covid hit the wait list blew out, so they would call every second week to check in, I told them I wasn’t doing well and felt like I really needed help. They told me if I’m feeling like that to call the help line (which they were calling me off) and talk to them... which I was already doing? Then they hung up. It’s not easy for me to ask for help, so this really set me back in my recovery.”

- Lack of empathy and understanding from health care professionals:

"My GP at the time dismissed the need for STI testing, and didn't offer any mental health support."

- Stigma, victim blaming and not being believed:

"People only reacted with anger that I didn't do something straight away so I shut again"

"Because my experience wasn't "as bad as it could have been" many people were reluctant to take me seriously or talk to me about the mental health issues following the assault"

"I was assaulted on a night out in the city. I found the police who were patrolling the city on that night after I had reunited with my friends who had been looking for me. The police took my phone and read my messages and basically said I was flirting with this guy and am I sure I got assaulted, I made it clear that I was flirting with that guy, but that he wasn't the one who assaulted me. I didn't know who assaulted me because I passed out, and that other boy was with my friends looking for me. I got a pretty clear impression that they didn't believe me and weren't going to help, it was 4am and I was exhausted and decided to just go home and not pursue the matter further."

- Unhelpful and distressing interactions with ACT Policing that caused shame and deterred women from seeking further help:

"I would NOT go to the ACT police. Almost all my dealings with them have been negative experiences. They are a heartless and judgemental [sic] team overall, with absolutely no regard for the individual or their circumstances and have been dismissive in the past. My situation also involved some 'partying', which I was not prepared to have examined, or scrutinised."

"It's too hard to go through legal system, better to just leave and move on"

- Fear of repercussions if they were to disclose:

"I think I left it too late to talk about it but I was just so scared to seek support, I feel so gross and disgusted by myself and I even blame myself for one of the repeated incidents that occurred about 13 years ago. I was too afraid to seek support because I was also too terrified that I would be removed from the home and cause the divorce of my family, that CPS would be involved and take away my brother and me from the family and it would all be my fault, and I was scared my family was going to hate me forever and hurt me."

Women were asked **what made you [them] decide to seek help**, a total of 168 women responded of which their top reasons were:

- As a result of deteriorating mental health, with women speaking about suffering from severe anxiety and depression following their assault which had had long lasting impacts on their lives:

"I was having daily breakdowns and flashbacks, any loud noise sent me into a panic and I couldn't be around crowds of people larger than 6."

"I lived with trauma for 11 years and thought it was normal. I then realised I was living in fear. A friend once asked if I was okay and I had a mental break down. I then accessed help in order to deal with my mental health and trauma associated."

"I was having trouble living my life after the rape. It was affecting my ability to work, form relationships, see friends and feel safe. I was not making good decisions and having PTSD symptoms."

- Many women also told us that it had taken them a long time to realise that what they had experienced was from sexual assault and the trauma they were experiencing was valid and needed to be addressed:

"Once I had affirmed to myself that what had happened to me was an assault, my mental Health stated to rapidly decline. While I have struggled to ask for help in many areas of my life in the past, with the assistance of my psychologist I had been working on improving on being able to ask for assistance when I need it. As such, I felt strong enough to go get assistance from relevant healthcare providers and knew if I didn't do so, my mental health would only decline further."

"I had sought help from a GP for various things and mentioned to her the after effects of what I thought was just an unpleasant sexual encounter and she directed me to CRCC and told me I had definitely been assaulted."

"It was affecting my life in unhelpful behaviours. I beat myself up for so long.....it was "MY" fault, I got in the car. It was 1 month before my 14th Birthday. I was a virgin. I felt dirty and full of shame and guilt. My logic mind said "go get help and talk to someone who understands" my emotion mind said "you got in the car, so you deserved it, it wasn't rape because you got in the car, it was your fault". I got help when I told my emotion mind to shut up and listened to my logic mind. I came to believe that getting in a car DID NOT say....you can fuck me. But both my mind's battled for years"

- And for others it was only through the support of family and friends that they felt ready to seek help:

"Didn't want to deal with the shame alone. Support around processing what happened and shifting blame from myself to my assaulted. Gaining an external perspective was important. I wasn't taking care of myself-restrictive eating and my friends were able to help in practical ways like cooking for me and having me in their home"

Women were asked **whether they had sought help for their physical health following the assault and which services they accessed**, a total of 206 women responded of which:

- 76.30% (n=151) of the women said that they did not access health services for their physical health following their assault.
- 28.44% (n=62) accessed services for their physical health, of whom the majority sought STI testing through their GP or sexual health clinic, and the emergency contraceptive through a GP or pharmacy. With some of these women choosing delay or not to disclose that they had just experienced sexual assault.

Several women mentioned attending the hospital for treatment of physical injury as a result of the assault, however many of those women mentioned that the treatment they received from staff at the hospital was judgmental and unhelpful, which deterred them from seeking further help.

When asked **about whether they had sought help for their mental health (including counselling) following the assault and which services they accessed**, 208 women responded.

- 74.04% (n=154) of the women who responded said that they did access support for their mental health following their assault.

Of the women who specified which services they accessed, a large number of them said they had accessed the Canberra Rape Crisis Centre's (CRCC) counselling service, private psychologists and counselling. Many mentioned that they had seen their GP to get access to a mental health care plan as the costs involved with paying to see a private psychologist directly was a significant barrier and that waiting times for free or publicly funded options were discouraging. A small number of women mentioned they accessed counselling support through Victims Support ACT.

There were a number of comments about the national support lines such as Lifeline and 1800 RESPECT - and that ACT women found them unhelpful as they just referred them on to other local organisations which were not able to help. There were also a number of comments about how women felt let down by the limited mental health supports available in the ACT, and as a result many women felt they had not received the mental health or trauma support they needed in a timely manner.

Specific supports and services in the ACT

We asked women **if they sought help from specific supports and services in the ACT**. (Note that they were able to choose as many as were relevant).

Most women's first choices were counselling or family and friends for support.

Services and supports in the ACT accessed by women:

- 62.24% (n=122) Counselling
- 62.57% (n=117) Family and/or friends
- 44.92% (n=84) GP/Doctor
- 39.04% (n=73) Canberra Rape Crisis Centre (CRCC)
- 30.48% (n=57) Police
- 12.83% (n=24) Victim Support ACT (at the Human Rights Commission)

- 10.70% (n=20) Hospital Emergency Department
- 10.70% (n=20) Legal services or advice
- 9.09% (n=17) Domestic Violence Crisis Service
- 8.56% (n=16) Courts
- 7.49% (n=14) FAMSAC (Forensic and Medical Sexual Assault Clinic)

Many respondents mentioned that they were not coping well following what had happened to them and that they found themselves in a desperate situation to heal and move on with their lives. As a result women told us that the top service they accessed were counselling services (including psychologists) which were often recommended through their GP or by a friend or family member. Some were already seeing a counsellor or psychologist for other reasons and already had a trusted relationship with them, so therefore felt comfortable to disclose their assault.

“I needed help to deal with what happened. I needed to talk about it. I needed to not struggle alone.”

“I was incredibly distressed, I felt incredibly threatened and unsafe in the world, and the morning after I felt completely stuck, I couldn't go to my class, couldn't think clearly, and once I got into FAMSAC, it snowballed from there. Psychiatrist/GP/Psychologist have been helping me work on the issues that have emerged afterwards in my relationship- I couldn't have sex without disassociating, I became alcohol dependent, I experience anxiety, and the incident sort of spiralled me into confronting the childhood sexual abuse, and problematic situations/relationships that I had experienced in my life to the point of the assault in 2018. Bit implode.”

“I was having trouble living my life after the rape. It was affecting my ability to work, form relationships, see friends and feel safe. I was not making good decisions and having PTSD symptoms.”

For many women, speaking to family and friends about their assault made them feel safe, believed and gave them the space to discuss their options for seeking professional help for their own health and wellbeing.

“I told my husband when I met him and one of my friends and my daughters. They helped me to realise it wasn't my fault, though sometimes I still think it was. I saw psychologists to investigate my depression/anxiety. I have had low self esteem for many years”

“Friends were my immediate support and then after a while my next point of contact was a GP at the junction clinic.”

“Tried to minimise the number of times I had to repeat the story. Disclosed only to those necessary to get me the help I needed for my main issue that was a problem at the time - which was mental health. My mother supported me to contact victims support and all psychological supports as she works in healthcare which was so helpful. I felt quite overwhelmed as to how yo get help as there are so many avenues”

For those women who accessed CRCC, some said it was immediately after the assault and for others it was some time after. Comments from the women spoke highly of the support and advice they received from CRCC being a specialist sexual assault service provider,

through counselling, and the support to attend court and report to the police. However, a key theme was the long wait times they experienced in accessing CRCC for the counselling when they really needed it, due to the high demand for this specialist service.

“Wanted a feminist perspective, was most heightened and upset outside of hours, liked that it was a rape and sexual assault specific service with a feminist orientation”

“Counselling to work through trauma and process it. CRCC supported me to refer matter to police and file a report as a means of closure”

“Needed to make sure he didn’t give me any STDs. And CRCC to discuss potential reporting but I didn’t hear from them for months”

Many women told us that they did not go to police as they were afraid of the process and of being disbelieved or blamed for what had happened to them. Others who did report to police told us that their experience was retraumatising, the process unhelpful and that they were not treated respectfully. This led a number of women not following through with their report or seeking further help. The main reasons women said they wanted to report to police were to hold the perpetrator to account in the hope of stopping the same thing happening to other women.

“I went to CRCC instead of a counsellor, GP or police because I wanted specialist support for dealing with rape. I have had negative experiences with counsellors, GPs and police in the past. Additionally, I do not feel I can tell family or friends intimate details like that I have been raped.”

“None of the others could help. ACT Police are hopeless. In future I will take retribution into my own hands rather than seek support from Police.”

“Previous experience taught me that most crisis centres/police/doctors usually treated it was my fault for being a sex worker and gave me subpar care. I knew my psychologist wasn't whorephobic so I went and saw them as I knew it'd be treated with basic respect”

Some women also commented that they did not know where to go for help and that it was not easy to find local information about their options.

When we asked women **if they felt the support they received was helpful**, 197 women responded to which:

- 34.01% (n=67) of them replied a definite “yes”,
- 10.66% (n=21) chose “no”, and
- 53.33% (n=109) selected to further describe their experience.

Of the 109 women who selected to further describe their experiences accessing various services across police, legal and mental health:

- 63.30% (n=69) of the women described negative experiences predominantly regarding poor and insensitive handling from the police and legal system that discouraged women from seeking further action and feeling not believed.
- 42.20% (n=46) of the respondents described positive experiences mainly in regard to the respect and validation they received from counselling/psychology services,

Victims of Crimes Unit and CRCC as being most helpful and supportive however, at the cost of long wait times and limited sessions or financial expense.

"I blamed myself for my assault, I felt totally ashamed and couldn't be around my friends and family. The counselling I received through crcc really helped me to see that it wasn't my fault and, helped me to normalise my feelings and took my shame away."

"It lacks. There is not enough pre legal support and after legal support. I was humiliated in court. I won't ever report sexual assault again because I was treated like a criminal."

"I felt supported by every place besides one. I went to the police because i wanted to file an information report. They failed because i had to write it in the waiting area where people where coming in an(d) out. The police officer then proceeded to say sexual assault out loud in front of other strangers. This was at the Belconnen police station which was extremely disappointing because they failed to tell me about FAMSAC which my teacher told me about after talking with her about what happened (to assist with school assignments). This was in March in 2021"

"Yes and No. The court and getting the interim DVO was the only support that helped my immediate safety. I felt when dealing with Police they did not take my matter seriously, there were Police system failures, Police re-traumatised me, Police did not respect many of my human rights. Police did not tell me about the support services available to me. There was no wrap around program made available to me. I had to seek it out. I had to tell what happened to me many times to the Police."

"The private psychologist and support from my GP was the most valuable. But my attempts to get advice about charging him were not successful at all. I felt like everyone wanted to deflect me and for me to go away."

"No, as I was refused a mental health plan due to covid and i was told to go to a counsel(l)or/psychologist by myself. That is not something financially viable for me however."

"Yes/No - counselling support was good but I did not persue[sic] a police report because I was told of the impacts it may have going through the court, if it did."

"My psychologist is fantastic, but I didn't feel like I could talk about it previously and it took a LONG time before I was ok talking about it with her. But once again a professional of this standard is over 200 dollars a hour."

There were many comments about services being inadequately prepared to deal with disclosure of sexual assault and that service providers, education institutions and workplaces lacked training in dealing with such situations.

"The emergency department and follow up health care were great, as was the crisis counselling[sic]. The police however were extremely unhelpful and I decided not to take the matter further as I had the impression they didn't want to know."

"My university where I study/do casual work and where I met the perpetrator made my situation more unsafe when I made a report. DVCS was supportive ... getting my matter from

local Police to SACAT, helping me with a home safety plan e.g. the installation of cameras. My full-time workplace was supportive and made me feel safe when I was at work."

"Police caused trauma I was grilled all sorts of irrelevant sexual questions and at the station for hours, after 2 years was informed they'd decided no to try and prosecute despite video evidence such a long process and no closure. Counselling was helpful but impacted financially. Family and friends supportive. Dvcs and rape crisis such a valuable resource even years after."

When we asked women **if they felt the services they received help from supported them in a respectful and empathetic way**, 187 women responded:

- 54.01% (n=101) of women said that they felt the services they accessed treated them with empathy and respect,
- 14.44% (n=27) said they did not feel respected or treated with empathy; and
- 31.55% (n=59) had mixed feelings about their treatment and provided further explanation.

Women told us that they were often made to feel interrogated rather than supported and blamed rather than being believed when speaking with police and some service providers, and that they had to go through a number of different services and health professionals until they found someone with the capacity to provide appropriate support and that they felt comfortable and ready to discuss their situation with.

"At the time I decided not to report my assault. They never made me feel bad about my decision or pressured me. My counsellor always spoke to me with respect and understanding"

"CRCC, FAMSAC, Psychologist yes. Police.... was just a cluster of disaster. I can't in good conscience ever recommend that people who have been assaulted report. It was worse than the assault."

"My Psychologist was respectful and caring but the Police were terrible. They didn't listen to my brother and me during repeat police interventions in the house and I feel like that's rooted in ableism and they disregarded what we had to say because we were children and furthermore, autistic children."

Themes from open-ended questions

Women were asked in the survey to provide free-text responses to a number of questions. The key themes from these responses are summarised below.

Women were asked **what worked well with the support they received** and most recurring themes from their comments were:

- **Respectful care** from all supports and services in the police, legal and health system and a strong understanding and practice of trauma-informed care for victim/survivors.

"My Phycologist was respectful and listened to my entire anxious rambling about what happened. She said I didn't have to repeat what happened again because I think she made notes on it and it's obviously triggering to talk about such traumatic events."

“Both Canberra Rape Crisis Centre and the Police were very supportive, respectful, and knowledgeable about rape and domestic violence, which helped me.”

- **Being believed and validated** to take matters seriously and provide appropriate care and options.

“Willingness to listen No judgement as I had not told anyone for some time Female providers I was able to process when I was ready and privately Strong family support”

“Validation, placing blame on person who assaulted me, giving perspective on the issue”

- **Professionalism and expertise** observed from service providers in their sexual assault support and pathways.

“The weekly sessions at CRCC were fantastic. I was able to bring my dog to sessions for support. The location was accessible for my disability. The initial counsellor was respectful, validating and empathic. I feel like the treatment I have received since she left the service has been almost neglectful. I work in this industry, and I would never allow this kind of treatment towards the people I work with.”

“People making it clear that it was not my responsibility to hold the perpetrator accountable and that getting my own mental health in order was important. The support workers were very honest about what I may go through in the future.”

- **Quality of therapy and/or counselling** that is available and accessible.

“Counselling with a psychologist that was known to me from previous hospital admissions prior to the disclosure. The fact that the sessions were free helped ease my guilt at the burden this would have had financially on my family.”

“It put the blame where it belonged., on the perpetrator. NOT me. It taught me I could say NO at any stage. It took the fear away, of any man who came near me. It made me confident when in situations to voice my demands. It taught me empathy for others”

“It is free, accessible, supportive, consistent and committed to survivors.”

- The respondents’ ability to make **informed decisions** from resources that were available and accessible.

“Trauma informed counselling Having people (caseworker/social worker etc) organise and co-ordinate appointments with support organisations. If I had to seek them out myself, I wouldn't have.”

“Being heard. Actually, FAMSAC was really interesting because they wouldn't do anything without my deciding or consent, which was so hard because I was pretty substantially disassociated/depersonalised, but I think it was grounding that they wouldn't just let me let the process happen. I had to think, I had to choose. CRCC, it was nice having people who knew the system and knew the nature of things to talk to, it helped me feel less alone. VVCS/ Open Arms has meant that I haven't copped a massive bill for the therapy that I need, and I can't say how grateful I am for that.”

“CRCC was supportive and welcoming from my first phone call. Amazing support, and I had regular counselling for months. The counsellor supported me to report my assault to ACT Policing and accompanied me to meet with SACAT. The officers at SACAT were empathic and

explained everything with care and respect. They were really great and provided realistic overviews and advice throughout the process. My family and friends were also incredibly supportive and wonderful when I told them."

- Other themes of notes that were found were: **consistency and continuity of care**, to be able to **feel safe**, and the importance of **supportive family and/or friends**.

"My psychologist was very available to me. I just needed people around. I needed to be looked after and I was. I don't think anyone left me alone for two weeks afterward."

Women were asked about **what did not work well with the support they received** and the themes that emerged from their open responses were:

- **Lack of continuity of care and/or very limited timeframe of care** was found to be problematic for women aiming to prioritise their health and rights to justice while trying to minimise having to retell and be retraumatised at each counselling session or report.

"In 12 months time during the process my DPP witness assistant changed twice, my prosecutor changed twice, my VSACT case manager changed 3 times. It's very hard to create trust with someone and then things keep changing"

"I didn't feel listened to or understood. I had no opportunity to continue seeing someone who I did connect with as it was difficult to get subsequent appointments after my first appointment. I did not have any resolution in the end."

"It seemed time limited - once the 'crisis' was over it was difficult to find ongoing support"

"Consistency of counselling/staffing issues at crcc - as well, I was triaged as being relatively important for crisis counselling for a handful of reasons, but for those not in my shoes wait times are quite long particularly for accessing ongoing counselling"

"Anyone who flaked (the first two counsellors I had at crcc both left which was traumatic for me as I had to keep telling my story again) plus the police not turning up as they had been called out to another appointment but took over a month to recontact me. I also felt they had an agenda rather than genuinely caring and being sensitive to my experience."

- **Not being believed and/or victim blaming** when seeking support can have long term negative impacts of hopelessness, distrust in the system, shame and guilt, and deteriorating mental health issues.

"Victim blaming - judging my behaviour (having had 2-3 drinks, and my friend having gone home without me and without telling me), and unhelpful judgement (often inaccurate/overly conservative) about what I wore out (for reference - less revealing than most other people around me and my age)."

"some friends and family members have a "suck it up, this is just how the world works" attitude"

"CRCC had too long of a wait list SACAT detective on my case uses language that almost comes off as victim blaming and conversations were centred around how I probably wasn't

mentally well enough to take this to court. They also said that if it went to court, it just looks like I'm an alcoholic where he is a surgeon who saves people's lives. The initial interview with police, questions were designed to make me doubt myself."

- **No action, follow-up or progress** of reported cases is frustrating to women being left in the dark of another crime left unsolved.

"The police were.. woeful. The original detectives were helpful and attentive, they took my clothes and we did a statement over 4-6 hours, and I agreed to do a pretext call, all within 48 hours of the assault. Once I left the pretext call, I didn't hear from them for a month, and I had to call up to find out what was happening, my case had been reassigned to someone else, who was clearly not familiar with the details, and indicated that she thought that there was nothing to the matter, and I asked her to look at the evidence and get back to me. Next week, she called to tell me that there was no evidence that it was a non-consensual encounter, and the matter was dropped. 6 months later, I submitted a complaint, as outlined above."

"Victim's support case workers frequently changed so no continuity of care or support. Police have taken no action in 8 months since I reported the rape"

- **Navigation of systems and services** was described to be complicated and very effortful to seek justice and accessible healthcare.

"not being believed, not receiving clear advice, not knowing where to go or who to see. i felt like it was a 'tick & flick' process for most"

"The red-tape and time-frames associated with making victim claims was onerous and off-putting. As a result, there were things I was eligible for that I didn't bother claiming due to the sheer stress and annoyance of it all. I didn't need the added "admin" on top of everything else. I understand it needs to be this way, but it was difficult to navigate, especially when you are at your height of vulnerability. Also, I had to wait a very long time to be allocated a regular counsellor through CRCC. Again, whilst I understand why this was so (and I am grateful to be accepted in the program), I would have benefited from having counsellor support through the case trial, but I had to wait my place in the queue which came some time after the sentencing (I know I had the option of calling them to get whoever was on the phones to talk to, but this is not the same as having a regular person who knows you and your situation). Also, once I got a spot with CRCC, I had 3 different counsellors. For someone that was reluctant to speak to a counsellor in the first place - this was very distressing. Counsellor rapport and confidence is everything with something so sensitive and traumatic. (and am still waiting for my sessions to resume due to covid. I am offered 30 min telephone sessions, but this is just for 'checking in' and not for actual 'counselling')."

- Women reported **still experiencing trauma** demonstrates that the support need has not been met, and not much has changed.

"It was very brief and I hadn't really worked through it. I still haven't, 20 years later."

"I did not feel safe going to the police. Because of the circumstances of the assault, I was scared to talk about it with the police as I thought they would not believe me. I still think that."

- Other themes that were explored were: **long wait lists, not being heard, not being informed about available options**, and **experiencing stigma and discrimination**.

"I also probably didn't access services due to them not being culturally appropriate. Medical services have overlooked me in the past as a Aboriginal woman because I have lighter skin and I don't fit the stereotype. So at first intake if a worker doesn't ask me if I'm Aboriginal/Torres Strait Islander I assume they are making a assumption and I won't get appropriate care."

"Having to wait long periods for access to therapy is really awful when you are struggling with trauma, and feeling like you may be cut off from those services because you've run out of rebates, or other people need help more, etc, made it difficult to really open up."

Women were asked about **they would change the path they took to seeking help and support** and their commentary demonstrated that they wish:

- They **accessed supports or services earlier**, particularly those who now recognise the mental health impacts on themselves and/or to prevent the perpetrator from repeating the offence to other women.

"I wish I had reported the abuse a lot earlier. I wish I could have received justice. Of course, years ago the system was different and when I did contact the police I was told they could not act until my perpetrator has actually done something in real time. I wish I had pursued charges to stop him from hurting other potential victims."

"I would have sought help immediately following the incident. It was frequently pointed out that if I had reported immediately my case would have a better outcome, not that that advice is useful retrospectively. I would have tried to access counselling sooner and gone straight to the psychologist I am seeing now instead of CRCC"

"I would look for more specific services and go to the police asap for myself not 3 years later when a colleague experienced the same thing and couldn't come forward. 12 other women eventually made claims against this man once I came forward"

- They had the **confidence to practice their rights to health and/or justice** as many women reported being fearful of consequences negatively impacting themselves if they were to disclose or report.

"Whilst my gp offered to record what had happened to me in case I wanted to take it down a legal avenue in future, I was scared that due to the complexity of the assault, and the fact that I verbally said yes even though I felt I was coerced into it with no other safe option but to comply, I was scared that therefore my assault would not be seen as one by her. That was no fault of hers as she was extremely empathetic and helpful, but due to the stigma and stereotypes of what is seen as assault, perhaps I may have recorded it if I was confident that I would be affirmed."

"I would have insisted on having photos taken of my injuries. Rape crisis did not assist me enough with this decision"

"I felt like given the way the Police have treated me to date I would not report the sexual assault to the Police. However, it is the only avenue I have to get the justice I deserve and to stand up to the perpetrator that hurt me so badly both physically and psychologically."

"I would have called and called until someone helped. I'd also try lifeline"

- They **went direct to a support or service** and bypassed another.

"I would have liked to have been linked in to support by the police before I did my statement. I would have like to have been told more about the court process given it was not my case and I was classified as a witness but did not understand if I was also allowed to press charges or not. I wouldn't have gone to the uni counsellor."

"Would see female GP and talk with friends. I would also contact the RCC. I was in shock at the time and the experience including GP has taken years to process."

"I would have reported him to the police e rather than thinking I could get past it and things would be ok."

- They were **better informed about navigating the system**.

"The police also served me the documents to attend court at my parents house so they found out because of the police and not on my terms. I was also blamed by my parents and this did a huge amount of damage with that relationship. I also think having a pamphlet or something to explain the options, not just of supports but also about reporting and pressing charges etc or even disclosing to a friend or something readily available and easy to understand."

"Education of what is sexual assault, and what are the signs, and learn when you should seek help. I was also a minor when my assault took place, and tried at the time to seek mental health help for other reasons, but withdrew from that because I couldn't access help without my parents being informed. I was also in a small town, and people talk a lot in small towns. Kids help line back in the day helped, but it wasn't free to call from a mobile."

- Whereas some women reinforced that **there's no point of seeking help** and expressed they were not hopeful about the current system in providing appropriate help as they perceived pursuing help caused pain more help with recovery after sexual assault.

"Tough one! While I would have liked the person who assaulted me to face consequences, I don't know how I would have gone about that. I would have liked to have the knowledge and power to recognise and name what happened and take action, but I'm not sure I would have. I'm still not sure I would take action having seen what women who do go through."

"I never sought the police, or took the perpetrator to court. I am not sure I ever will because I fear the process."

“May have sought help from police if the reputation of the judicial system was not to victim blame”

“I would not have reported to police. I have been sexually assaulted since this first incident and have decided not to report. It is so painful to go through the process knowing it is unlikely any charges can be made.”

“I wouldn't waste my time with the police or with the Canberra rape crisis centre. Frankly the process of going through both of those avenues were more traumatic than the actual assault.”

- Other themes explored were of **supports or services to be avoided, having early awareness of what is sexual assault, to not disclose to certain people and to record evidence on one's accord.**

“I don't know if I could have changed anything because of how afraid I was. My abusers had me convinced that if I told anyone I would get in trouble too. But if otherwise, I would definitely have tried to tell someone else immediately after the situation occurred, and I wish I had known what rape was at an earlier age so I had known what happened wasn't okay and that it wasn't my fault and that I didn't deserve or encourage it. If I was brave enough I would have contacted CPS, I would have told other adults in my life that I wasn't related to if I knew any trusted adults. I would have tried to tell a teacher on school grounds about another incident if I understood what had happened”

The respondents were also invited to provide **suggestions of ways supports and services could be improved to help other ACT women in their situation** and most common themes revealed were:

- **Expectations of and information about options in the justice, police and health systems.**

“Simplify it! Reassure women of the pathway they will travel on and the way their case/ story will be managed when they access a service. The service should include not only counselling but access to psychiatrists too. A one stop shop for all aspects of health that this impacts on as well as branches to victim support. If rape crisis centre does this as dreary it is poorly communicated to the young people affected. A 'crisis centre' also sounds huge and bad - I feel like my information would be shared around a lot within that.”

“More education of what to do if this happens to you. In schools we are taught how to protect ourselves, but not services we can access when it happens, given there is a 97% chance that it will. Better access to help when reaching out. For survivors like me, saying that we need help isn't easy, so anyone who declines to give us help can be really detrimental. Better education to officers within the SACAT team, of more empathetic language to use and communication techniques to those who have gone through sexual assault. 2 security checkpoints within the court house so that I don't have to see my attacker when attending. 2 separate PPO waiting rooms are available but still had to see him at security. Mediators at PPO hearings need to be trained appropriately so that they are actually impartial and don't perpetuate rape culture.”

- **Wide-spread education about consent and sexual assault across all ages, sexualities and cultures, and how to appropriately respond.**

“Help for women getting out of living situations that are abusive. Living under the same roof but separated doesn’t work. Access to public housing. Educate everyone. Just because you are in a relationship with someone doesn’t mean it can’t be rape.”

“Understanding of sexual assault and/or coercion in LGBTIQA relationships. Standing up to family courts on all kinds of family violence issues. Clear legislation and community education around non fatal strangulation, and consent. Something similar to the NSW SARO, but much easier to fill out. Smoother processes with the surrounding NSW region, to improve access to services and remove gaps. Criminalising coercive control. Removing barriers to leaving abuse when there are children involved- including legal systems manipulation, misidentification of victims, weaponising illness and disability, including allowing services to pass the responsibility on to family law.”

“Universities must be more aware of the frequency with which sexual assault still occurs on campus. They must provide better and more easily accessible mental health services on campuses. The ACT must also begin stronger campaigns to show women where they can access the help required”

- **Streamline process to accessing appropriate services and supports.**

“It’s very clunky. Information about what to do if you experience rape might be helpful and what to expect. Police need to handle sexual assault reporting a lot better. It is currently unacceptable and very disempowering. I could understand why women would either not bother, withdraw their report, or have severe re- traumatisation and mental health issues as a result”

“Don’t let women do it alone. Have someone support them and advocate for them through the entire process, all the way to the end.”

- **Trauma-informed practice** of do-no-harm where the care must include active listening, believing and continuity of care.

“I think it would be best if all support services were female-led and directed, and that the people you actually report it to are female because it makes it much easier to talk to someone about when they might have had a similar experience or understand your perspective. I think the police should take sensitivity training and be better familiarised with intellectually impaired people. Also, treat children with greater respect when reporting incidents. Maybe in schools children should be better educated about what rape and sexual assault are and the many forms it comes in so they can be better aware of it in case they are/have been assaulted and are unaware.”

“Do not allow victims of violence to come into contact with their abusers at court. Stop the loopholes where he can get to her or her to him.”

- **Being supported and protected to safely seek further action** if that is the chosen option by the victim/survivor.

“Remove the stigma and judgement. Not make the process so traumatic. That is what scared me the most when I sought help. I felt it was the situation was my fault when it wasn’t. I was scared of the judgement and criticism or people saying it was my fault or not believe my story. They is why I did not report it. The system needs to be more friendly to victims so they feel safe and protected when they come forward.”

- Other themes that were explored and of note were: **increasing funding to specialist sexual assault services** with the aim of reducing wait times, increasing appointment availabilities and outreach services, ongoing support to avoid having to discharge clients too early and ensuring safety and wellbeing of staff.

“More funding to CRCC. I cannot rate the service highly enough, and it deserves enough funding to attract and retain staff and put on more staff to support Canberrans.”

“More funding to enable more availability, more time, not being exited from the service so quickly, no waiting lists!”

An open discussion for respondents to **share more about their experiences of seeking help and support in the ACT following a sexual assault** exhibited:

- The overwhelming themes of stressing the importance of **the police and justice system to take victims/survivors more seriously** and **the urgency for increased appropriate services available to meet the needs of victims/survivors in a timely manner.**

“Even my friend, who is a lawyer who deals with DV and child protection, would not seek out ‘support’ in Canberra. It is a) too small...everyone knows each other’s business; b) the supports are wildly inadequate and c) the victim for want of a better word, gets dragged through a horrendous process of reliving their assault over and over. I had to live next to my attacker for three years before he moved out (I own, he rented). I just couldn’t have faced that daily, if I was trying to process my situation. I am a single mum...time poor and financially was doing it tougher than many. I just needed to get on with life. The attack has left me very distrustful. I have shed 95% of my friends, I see barely anyone and I am trying to deal with the effects of Oreo-menopause too. I am a shell...a ghost of my former self. I feel bereft and angry all of the time. I need help.”

“It is woefully inadequate at the current state. When you believe even the police won't help you where do you go? I wasn't raped/penetrated but my body was still violated and I had trouble thinking that anyone would help or believe me after the way the situations were dealt with repeatedly. There is a void for where easily accessible help and support should be especially within the city centre and high risk venues.”

“People react and deal with experiences differently and while I didn't feel like I needed 'support', I would have liked an avenue for reporting the behaviour that didn't mean I was dragged through the mud.”

“It was shit, and there was zero support, or knowledge[sic] about what to do next after the assault[sic]. I was just told to go the police, that was it... and that was really uncomfortable as the police don't even persecute the assault[sic] crimes 80% of cases”

“The system is rigged against victims of sexual assault. Instead of support it feels more like hoops to jump through. A survival of the fittest, of if we can convince people that our case deserves to be heard... that we deserve justice. That if we want to protect other women from the men who assaulted us we have to put ourselves on the line.”

- Another theme of mention was the **need to upgrade the standard for those working with sexual assault victims/survivors to understand the realities of sexual assault, the long-term impacts and ways to do no further harm (trauma-informed practice)**.

“I think the culture and societal views are a major barrier to women feeling they can access help. Also poor training in this area for psychologists is a problem when women do disclose. Lastly inadequately funded services mean the waiting list for appropriately trained counsellors[sic] is appallingly long.”

- **Gratitude to ACT local specialist sexual assault services** was also a theme that respondents expressed about feeling safe when being supported by compassionate and patient experts.

“I cannot speak highly enough of Chrystina Stanford at Rape Crisis Centre and the whole organisation. I have felt supported and safe during a range of engagements with them over the past 15 years.”

Commentary throughout the survey demonstrated various interactions and communications involving **key stakeholders in women’s experiences with seeking help and support following sexual assault** and they were:

- **The Police**

“When you believe even the police won't help you where do you go?”

“The police were... woeful.”

“When reporting to the police I felt I was being interrogated rather than a victim of a crime.”

“The initial police reaction was horrendous and gave me no confidence that there was any point in pursuing the issue further.”

“The initial interview with police, questions were designed to make me doubt myself.”

“The police process is extremely confronting”

“I did not feel safe going to the police. Because of the circumstances of the assault, I was scared to talk about it with the police as I thought they would not believe me. I still think that. Police was just a cluster of disaster. I can't in good conscience ever recommend that people who have been assaulted report. It was worse than the assault.”

“Police didn't want to hear it. They victim blamed and also questioned why I came in a couple of months afterwards. They didn't follow up after the statement I gave. I could talk for hours on the things they did/said that were disrespectful and not helpful.”

“Victim blaming - judging my behaviour .. and unhelpful judgement (often inaccurate/overly conservative) about what I wore out.”

- **The justice system**

“Police were not respectful, courts were not respectful, lawyers were not respectful.”

“The courts/DPP don’t understand really the impacts of some of the process on your mental and emotional wellbeing - you never fully get prepared for what you’re going to experience.”

“I find the court system very harrowing and frightful.”

“Better access to help when reaching out. For survivors like me, saying that we need help isn’t easy, so anyone who declines to give us help can be really detrimental. Better education to officers within the SACAT team, of more empathetic language to use and communication techniques to those who have gone through sexual assault. 2 security checkpoints within the court house so that I don’t have to see my attacker when attending. 2 separate[sic] PPO waiting rooms are available but still had to see him at security. Mediators at PPO hearings need to be trained appropriately so that they are actually impartial and don’t perpetuate rape culture.”

“Courts, lawyers and police, to be trained more impactfully in DV, sit in a support group of individuals who have been managing this behind closed doors, for a while and hear their stories, and hear how it impacted them, and their children”

“Set me back financially and wellbeing was grossly impacted”

- **Hospital Emergency Department**

“Pushing me to do certain treatment or rushing me to do things I’m not ready to”

“I have made a complaint about the Dr on that day. Nothing has happened to this Dr. even though there was a witness. It was all my fault, I deserved what happened.”

“the hospital mishandled my case. I wasn’t talked to by a doctor or health professional. I was placed in a private room and ignored for 3+ hours, while people were aware of my trauma and were staring at me, and whispering (the doctors and professional staff at the hospital)”

- **GP/Doctor**

“Because ultimately a GP hasn’t got the right information, the time, or the training to support someone who declares that they have been sexually assaulted.”

“A doctor I saw told me that I may be experiencing another mental health issue, or that I had been over-dramatising the situation.”

“No because when speaking to the doctor I was very rushed, didn’t explain all of the reasons I felt I needed a mental health plan”

“GP tried to find a relevant referral in ACT and unable to find someone to take me on.”

- **Domestic Violence Crisis Centre**

“Lack of continuity of support people”

“There was one occasion I accessed DVCS and sought a caseworker to accompany me to court, however this caseworker did not show up for whatever reason. I had no other support person at the time.”

- **Canberra Rape Crisis Centre**

“I was surprised with how quickly CRCC initially saw me, but have been severely disappointed with how long it took to find a replacement counsellor.”

“CRCC needs more funding to meet demand and reduce wait times. Appropriately trained responders in all schools and health services.”

“I wanted to go to the rape crisis centre but was told it would be months and months before getting support so I never bothered. Now, I've been triggered so much by recent events but know that there just isn't availability in the services so I don't bother seeking support.”

“The weekly sessions were disrupted every month due to a rotating roster requiring the counsellors to work nightshifts. Understandable, but also inconvenient.”

“I always had the sense that the service was flooded with people needing help. I did occasionally feel guilty that I was taking up someone else's spot who was more in need”

“The Rape Crisis Centre Must Change Its Name. It is so very exclusionary and triggering.”

WHM comment and suggestions

The findings presented in this report reveal stories of diverse women with many experiences of seeking help and support in the ACT following a sexual assault. It is important to hear directly from ACT women regarding their experiences of services so that responses can be designed to meet their needs and improve women's ongoing safety.

The findings highlight a range of strengths and weaknesses in the ACT system for supporting women who experience a sexual assault. Women's Health Matters considers the following opportunities exist for improvement based on our findings:

1. Improve supports for women who choose to use the justice system.

“The whole system needs reforming. The way 'victims' are treated needs to be completely changed. The follow through and unmet time frames makes a stressful and traumatic time more stressful”

2. Consider new avenues rather than just police for reporting. E.g. informal online reporting.

“I think that potentially the recent NSW police initiative to record your assault online without having to pursue the matter formally would be extremely helpful.”

3. Consider measures to attract more psychological professionals to work in Canberra.

"More funding to CRCC. I cannot rate the service highly enough, and it deserves enough funding to attract and retain staff and put on more staff to support Canberrans."

4. Build a strong network for people who have experienced sexual assault to access a range of appropriate services.
"Have peer workers, not just DVCS in courts, utilise therapy dogs, and video, look at the laws, there is so much that could be facilitated."
5. Train general police to respond sensitively.
"General police officer at Belconnen station when I first made a report was not great - tried to get me to describe the assault in the waiting room"
6. Quick access to counselling from time of first contact.
"I was asked to wait four months, that is way too long when you've finally been able to seek support."
7. Increase funding for CRCC to meet demand.
*"More funding for Canberra Rape Crisis Centre. As a nurse I refer women there and the waiting list for counselling is 3-4 months which is completely unacceptable."
"Rape crisis centre should get funding for more counsellors and community outreach activities."*
8. Promote and improve information about the scope of services available for ACT women to report or seek support following a sexual assault.
"More education of what to do if this happens to you. In schools we are taught how to protect ourselves, but not services we can access when it happens"
9. Educate young people about sex and consent earlier and in more detail.
"Maybe in schools children should be better educated about what rape and sexual assault are and the many forms it comes in so they can be better aware of it in case they are/have been assaulted and are unaware."
10. More information about consent in the wider community.
"Clearer information on consent that had been withdrawn during intercourse. I.e. Consenting to sex, but then feeling uncomfortable and wanting him to stop."
11. Train hospital staff who might deal with SA victims to respond sensitively.
"It is not the job of an ER nurse to determine whether an allegation is false or a patient is "just being dramatic"

A final word from the respondents

"Please support women more. I just told you my story which was hard. But I honestly don't think anything will change. I'm sad and I continue to push through because I have absolutely no other option."