

# Doing Better by Our Rangatahi

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**Sexual Assault Support  
Service Canterbury (SASSC)  
Youth Service Project**

NOVEMBER 2021

Prepared for Aviva by Sofia Ayushi,  
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# Executive Summary

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Across international jurisdictions and New Zealand, it is widely evidenced that young people are disproportionately affected by sexual harm and those with existing vulnerabilities (disability, socioeconomic disadvantage, mental health issues, and previous experience of abuse) are likely to be at increased risk. Yet despite this evidence, there appears to be a shortfall in provision of sexual harm crisis support services specifically. This is of concern because young people engage with services in quite a different manner to adults and children and they require services that are developmentally appropriate.

Young people in Aotearoa New Zealand are profoundly impacted by sexual harm and family violence. According to the Ministry of Justice, in 63 percent of cases of sexual violence reported to the police the victim was a child or young person aged 17 years or younger. 1 in 6 New Zealanders experience sexual harm before the age of 18.

SASSC (Sexual Assault Support Service Canterbury) is a service run by Aviva in partnership with START. The service provides support to individuals and their family/whānau to navigate the aftermath of sexual harm. SASSC was started in 2014 to support the growing numbers of individuals and their family/whānau who were disclosing both historic and recent sexual harm and address the need for a 24/7 crisis support service. SASSC as a service is contracted to deliver this support to individuals who are 18 years and above. However, over the years the service has received referrals from various sources to support youth aged 13-17 years. It was identified that this age group did not have a specific support service that is developmentally flexible to cater to their individual needs. The result has been Aviva recognising that resources specifically catering to this age group are limited in Ōtautahi Christchurch.

To help it better understand and respond to the needs of young people who have experienced sexual assault and family violence, Aviva developed two strategic questions to help it respond to this challenging situation:

1. What does good practice look like in supporting young people?
2. What gaps exist in service provision for this age group in Ōtautahi/Christchurch?

To answer these questions Aviva commissioned two pieces of work: an academic research project including a literature review and primary research to establish what constitutes international best practice, and a

co-design project to engage Aviva staff and clients to capture and better understand the present and past experiences of youth engaged in sexual harm support services. The latter being aspirational in nature in terms of what a future service specifically catering to youth could look like.

For the purpose of this report, the age group considered is 13-25 years old and they will be referred to as “young people” and “youth”.

## The report's findings are summarised below:

- Further work needs to be done to educate and empower youth to understand sexual harm and consent.
- Professionals delivering the service for youth need more resources and training to cater to the individual developmental needs of the youth and their family/whānau.
- For those young people who do experience sexual harm, additional supports need to be devised to empathise, understand, and support them for the likes of crisis counselling and emergency housing.
- Young people who experience sexual harm often want access to instant online professional support delivered in a discrete online environment. In recent times, the demand for these services is increasing. The community at large would benefit from additional services with a youth focus providing online and discrete support around sexual harm to meet their needs.
- Young people who experience sexual harm can be found in every level of the society, every gender and ethnicity, and require individualised care, support, and advice to enable long term healing and recovery. Services already working towards supporting youth after their experience of sexual harm are limited in their resources and need additional resources to provide social work support. Additional resources are urgently needed to increase the capacity of ACC counselling.
- Our social services, health, and justice systems can be challenging for young people to navigate and at times can lead to additional stress. Collaborative and wrap around support from both government and non-government sector agencies with a youth focus that works in a timely and comprehensive fashion is required.

# Service framework for Sexual Harm Crisis Support Services

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## Vision

Sexual violence crisis support services that are accessible and readily available to those affected by sexual harm/violence wherever and whenever they need them and that those services are culturally responsive and based on good practice.

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## Definition of Crisis

Crisis is defined as the person's internal response/trauma to that event and not limited to a timeframe and/or a 'one off' intervention. Therefore, crisis can arise at the point of victimisation, or can be triggered by events later in a victim's/survivor's life.

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## Elements of a Sexual Harm Crisis Support Service (SHCSS)

- **Advocacy:** supporting victims/survivors to communicate and seek appropriate support with other agencies, such as: mental health services, General Practices (GPs), employers, Work and Income New Zealand (WINZ), Police, Accident Compensation Corporation (ACC), Immigration New Zealand or lawyers.
- **Therapy focused support:** Integrated services for sensitive claims (ISSC) are the most appropriate service to deliver therapy-focused support long-term, but SHCSS providers are required to have this capability internally if they do not have links with the ISSC. It is also a critical function of support in the earlier stages of recovery and an on-going need during recovery, as victims/survivors make steps to recovery and may experience setbacks.
- **Psychoeducation** is focused on providing victims/survivors with the tools that they can use to manage their recovery.
- **Support to "navigate" the system:** tailored support by managing referrals and helping the victim/survivor understand their needs and what supports are available to them. A function of navigating is also liaising with appropriate agencies and accessing the necessary supports.
- **Family and whānau support:** trauma processing support for those supporting the victim/survivor can be vital for the recovery of the victim/survivor, especially for Māori. Psychoeducation is also important for family and whānau when supporting the victim/survivor and knowing how to respond to disclosures and triggers supportively.
- **Survival needs:** providing practical support at the time it is needed. It can include safety planning and goal setting, or meeting basic needs such as access to food, housing, and budgeting.
- **Psychosocial support through the criminal justice system:** preparing the victim/survivor for court or justice proceedings and liaising and advocating on their behalf. (This can also be provided as part of crisis support.)
- **Group support:** creating a 'therapeutic community' with other victims/survivors, e.g., male survivors peer support group.

Additional support, providers felt post-crisis support could be complimented by:

- **Prevention:** debunking rape myths, providing targeted prevention programmes, education, and training in schools and the community.
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## Length of Engagement

The length of engagement varies and depends on the support required and the support available. If a victim/survivor requires long-term support but is not eligible to access ISSC, then the SHCSS could be required to 'hold' the person for months or years.

Long waitlists for ISSC in some locations will also impact the length of engagement required in post-crisis care and recovery through SHCSS. Additionally, some victims/survivors require practical support alongside long-term counselling support through ISSC.

This timeframe varies significantly, but there was general agreement that there is a need for at least 6-12 sessions of post-crisis care and recovery support.

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## Short-term Outcomes

- Empower victims/survivors
- Adequately support them back to independence, or to engage in additional supports

**Source:** Ministry of Social Development (2017:13). *Sexual Violence Crisis Support Services: Service Development Consultation Document*. Wellington: Ministry of Social Development

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## Defining Sexual Harm and Consent

Sexual harm is a comprehensive term that includes any forced or inappropriate sexual activity. Sexual harm includes a situation in which there is sexual contact with or without penetration that occurs because of physical force or psychological coercion or without consent, including situations in which the victim would be unable to consent because of intoxication, inability to understand the consequences of their actions, misperceptions because of age, and/or other incapacities.





# Findings and Suggestions

## Psychosocial Needs

The respondents emphasised that each young person's response to sexual harm is individualised and depends on their previous experience and their current development level.

The needs identified fell into several categories including physiological, safety, psychological, accompaniment, information and advocacy, trauma response, and relationships. Of those noted, the needs associated with trauma response, information and advocacy, and relationships were most frequently noted by the professional respondents.

| Needs Identified by Professional Respondents  | Professional Respondent Quotes   |
|---|--|
| Physiological needs such as accommodation, financial assistance, clothing   | <ul style="list-style-type: none"> <li>• ... poverty, housing</li> <li>• Access to supports ... accommodation, basic needs</li> <li>• Not have any money to get to therapy, go to the Police ... not know they can claim that back</li> </ul>  |
| Safety needs  | <ul style="list-style-type: none"> <li>• Protection ... know how not to let it happen again ... physically moving to a safe space or emotionally moving</li> <li>• Immediate safety ... other young people in the house ... make sure they are not exposed to the offender ... liaise with the Police and OT</li> <li>• Ensure physical safety ... system around the young person is as safe as possible</li> </ul>  |
| Psychological needs such as anxiety, isolation, anger, self-harm and suicidality, and PTSD  | <ul style="list-style-type: none"> <li>• ... disengage from school and friends ... isolated</li> <li>• ... meeting friends to overcome isolation</li> </ul>  |
| Accompaniment needs, for example support at the medical/forensic examination and at interviews with the Police  | <ul style="list-style-type: none"> <li>• ... explaining the medical procedures and the Police process, not understand the justice system</li> <li>• Accompaniment to Cambridge Clinic ...</li> <li>• Need to ensure that the person has the correct information and assistance about emergency contraception and STI ... get a free sexual health assessment</li> </ul>  |
| Information and advocacy needs  | <ul style="list-style-type: none"> <li>• ... make calls, fill out victim support forms ... up to \$500 to spend on petrol, accommodation, clothes</li> <li>• Contacting professional, e.g., when haven't heard about the case from the Police will ring the detective involved to get an update</li> <li>• Needing guidance on what to do ... help with moving accommodation ... how to navigate being near perpetrator ... practical things ... connect with counsellors</li> </ul>   |
| Trauma response experienced as threat to life, shock, feelings of helplessness and lack of control, self-blame <sup>1</sup> , fear of being judged <sup>2</sup> or not being believed | <ul style="list-style-type: none"> <li>• Stabilisation ... looking at what needs to be put in place to get things going in life ... going back to school, keep friendships going, sleeping and eating well</li> <li>• ... self-blame</li> <li>• ... ashamed</li> <li>• Change of attitude in society ... provide training and giving way more support to families.</li> <li>• Somatisation of physical symptoms being tied into the trauma loop. A medical lens can go on a physical hunt and overlook the message or the trauma that is presenting as physical symptoms.</li> </ul> |

1 Hammerslough, J., (2014). Guilt, Self-Blame and Shame, in Katz, L. (Ed.) Warrior Renew. New York: Springer Publishing

2 Baum, Cohen & Zhukov (2018) describe the effects of a rape culture on whether those who experience sexual harm are believed.

**The youth respondents identified the following needs in the order of priority:**

- 1. Information and advocacy** (*information about the feelings and behaviours associated with sexual violence, referral to counsellors and other services and support to work with the Police*)
- 2. Psychological needs** (*behavioural issues and being labelled as a problem; anxiety; coping with negative emotions; and struggling with mental health*)
- 3. Assistance with trauma responses and processing** (*empathy, reassurance*)
- 4. Assistance with relationships** and disclosing harm to family/whānau and friends



# Current system of responses for young people

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## National, Regional and Christchurch Services which provide services for young people who experience sexual harm

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### Overarching

Te Ohaakii a Hine – National Network Ending Sexual Violence Together (TOAH-NNEST) – support direct service providers

### National

- Youthline – generalist service with youth perspective
- Accident Compensation Corporation (ACC) sensitive claims
- Shakti Youth – empower youth; understand what works well in terms of engaging youth within their communities; sexual violence from a family member
- Safe to Talk (24 hr service, 0800 044 334) – receive calls from young people, provide immediate help and link them to more comprehensive support
- Oranga Tamariki
- New Zealand Police
- Health Information website
- Victim Support
- Women's Refuge

### Christchurch

- 298 Youth Health – provide a safe space without judgment where young people who experience the chronic effects of abuse are accepted
- School counsellors
- Family Planning
- Sexual Assault Support Service Canterbury (SASSC)
- Cambridge Clinic
- Sexual Health Clinic
- Te Puna Oranga
- ACC counsellors
- General Practices (GPs)
- Victim Support
- Mana Ake and Leading Lights (support for intermediate students)
- Society of Youth Health Practitioners – multidisciplinary teams set up for special needs students by Resource Teachers Learning and Behaviour
- Presbyterian Support Upper South Island Youth Parent payment
- Student Health Centre Counsellors – University
- Oranga Tamariki
- Police
- Schools
- Gateway Clinics
- START
- Shakti Ethnic Women Support
- Male Survivors
- Qtopia

### New Zealand Regions

#### Northland Region

- Shama- National Ethnic Response for Sexual Harm
- Whangarei Rape Crisis
- Miriam Centre
- Auckland Region
- HELP Auckland
- Family Action

#### Waikato Region

- Midlands Sexual Assault Support Services
- Tautoko Mai
- CAPS Hauraki
- Shama – National Ethnic Response for Sexual Harm

#### Bay of Plenty Region

- Tautoko Mai
- Family Focus Rotorua
- Shama – National Ethnic Response for Sexual Harm
- Central Region
- Abuse and Rape Crisis Support (ARCS) Manawatu
- Whanganui Safe and Free
- Wellstop
- Te Ara Pae Trust

#### Eastern Region

- Āwhina Whānau Services
- Whānau Ahuru Mowai- Gisborne Rape Crisis
- Wellstop
- Shama – National Ethnic Response for Sexual Harm

#### Wellington Region

- Wairarapa Rape and Sexual Abuse Collective
- Wellington HELP
- Wellington Rape Crisis
- Shama – National Ethnic Response for Sexual Harm
- Hutt Valley SASH (Sexual Abuse Support and Healing)

#### Tasman Region

- Nelson SASH (Sexual Abuse Support and Healing) – covers Marlborough and West Coast as well
- Rape and Sexual Abuse Support (West Coast)
- Mid-South Island Women's Refuge
- Shama – National Ethnic Response for Sexual Harm

#### Canterbury Region

- SASSC (Sexual Assault Support Services Canterbury)
- START
- Te Puna Oranga
- Shama – National Ethnic Response for Sexual Harm

#### Southern Region

- Southland HELP – Rape and Abuse Support Centre
- Gore Counselling Centre

## What's working well

Respondents commented on some aspects of the system of support that are currently working well for young people who have experienced sexual harm.

- Professionals are more aware of the effects of this traumatic experience and are more aware of the importance of early support and intervention.
- Accessibility of the ACC Sensitive Claims process.
- Features of a local youth service, 298 Youth Health, offered an accessible and responsive model of service for young people.

## What's not working well

- **Workforce and service capacity** – Insufficient workforce capacity (e.g., nurses, school counsellors, ACC counsellors).
- **Government funding** – Some respondents believed that there were gaps in government funding which resulted in services that were inaccessible or not responsive to young people's needs (e.g., ACC funding).
- **Inconsistent approaches** – Practice inconsistency was another aspect of the system that respondents reported did not work well.
- **Respite accommodation** – Tending to the physiological needs of young people after an experience of sexual harm was not always carried out. For example, accessing emergency accommodation for young people was considered a major problem in many parts of New Zealand.
- **Accessing help and support** – Despite the benefit of accessing medical and psychosocial services as a result of disclosing, many young people chose not to disclose or to disclose some time after their experience of sexual harm.

## Gaps in services for youth

The respondents noted the following gaps in services including:

- Support for males who experience sexual harm
- A lack of specialist crisis and trauma support services for young people
- Support for young people who are going through the Police system
- Integration of services for young people
- The relationship gap between staff who are older and young people

## Barriers to access

Several barriers to help seeking by young people were identified by the respondents. These included:

- **Lack of knowledge and awareness of services**
  - Lack of knowledge about helping services for those who experience sexual harm is a significant barrier to accessing supports.
- **Shame, guilt, embarrassment, and not being believed**
  - Feelings of shame, guilt, embarrassment, not being believed and/or being judged were also identified as major reasons for not accessing support services.
- **Breach of confidentiality and privacy** – Fear of experiencing stigma and harassment from their peers and fear of their parents finding out were the reasons offered by the respondents for not taking the risk of privacy breaches.
- **Stigma** – Young people who experience sexual harm and perceive themselves as stigmatised (due to their status as a sexual assault victim) will be less likely to seek support.
- **Convenience** – Lack of availability of the support at convenient times, lack of response by services, lack of money and transport, and the extensive paperwork associated were also barriers to help seeking.
- **Retribution** – Some of the youth respondents stated that they did not contact the Police because they feared that the person who sexually harmed them would seek vengeance.
- **Lack of compassion** – All the youth respondents reported a lack of care and concern by the police, court, and medical examiner for them as young people who had experienced sexual harm.

## Maximising the accessibility

- **Communication** – The respondents noted that more was needed to provide information to young people to answer their questions about: What is sexual harm? What is consent? What services are available for whom? What are the benefits of accessing helping services? They advised that using social media was the preferred communication source for young people. Moreover, communication needed to include age- and gender-appropriate messages.
- **Organisational culture** – Many respondents noted that a youth-friendly organisational culture improved the accessibility for young people who have experienced sexual harm.
- **Building a system of support** – Respondents also talked about the importance of building cross-sector relationships so that there is no wrong door to access support for a young person who has experienced sexual harm.

- **Convenience** – Sexual harm services need to be known about, should be easy to access and not too far away. It should be included in an umbrella of different types of support services to protect young people’s privacy.
- **Funding more youth services** – More services need to be funded by the Ministry of Social Development and the Ministry of Health to ensure that young people can access them. This was particularly noted for rural communities and large cities.

## Equity of access and inclusion for diverse communities

- **Collaboration** – Building relationships and working collaboratively, with communities and non-government agencies who specialise in working with diverse groups was considered a key strategy for improving equity of access.

- **Diversity of staff** – Employing a team of staff who identify with a range of cultures was the second most frequently noted way to improve equity of access for diverse groups.
- **Practice approach** – A culturally competent approach was important to improving the equity of access for young people. Workers should recognise that their culture and values could influence their interactions with young people and that they need to build a respectful and understanding relationship with each of them.
- **Promotion** – Promoting the sexual harm crisis support service using culturally appropriate promotional materials, e.g., focused promotion for Māori and Pasifika Peoples and other ethnic communities.

The youth respondents offered their views about the issues confronting diverse groups and some possible solutions to improve equity of access.



|                                | Issues  | Solutions to assist equity of access   |
|--------------------------------|---|--|
| <b>Men</b>                     | <ul style="list-style-type: none"> <li>• Men struggle to receive help, owing to stigma, such as society struggling to accept that men can be sexually abused by women</li> <li>• Female dominated services can make men question whether they will be taken seriously</li> <li>• Inequality in the justice system, for example the conviction rate for female defendants is lower than for males</li> </ul> | <ul style="list-style-type: none"> <li>• Make services more welcoming to men</li> <li>• Awareness campaigns, such as the ones run by All Right? that tell men they don't have to be strong all the time and it's OK to seek help</li> <li>• Employ male staff</li> </ul>   |
| <b>Rainbow Community</b>       | <ul style="list-style-type: none"> <li>• Trans, asexual, and other rainbow people feel the responsibility to teach their support workers about how their gender identity or sexuality impacts them</li> <li>• Stigma, such as for those in lesbian relationships, owing to societal lack of understanding how a women can sexually abuse another woman.</li> </ul>  | <ul style="list-style-type: none"> <li>• Educate staff on the rainbow community</li> <li>• Rainbow-only support groups</li> <li>• Rainbow diversity among staff</li> </ul>   |
| <b>Māori</b>                   | <ul style="list-style-type: none"> <li>• Inequality of access to services and supports</li> </ul>   | <ul style="list-style-type: none"> <li>• Prioritise engagement with iwi, hapu and whānau in design phase</li> <li>• Holistic approach</li> <li>• Get family involved</li> <li>• Interconnect with whānau, hapu and iwi</li> </ul>  |
| <b>Pasifika peoples</b>        | <ul style="list-style-type: none"> <li>• Shut down and don't talk about it</li> </ul>   | <ul style="list-style-type: none"> <li>• Work with churches and communities to address issues</li> <li>• Train staff in various cultures and collective groups</li> </ul>  |
| <b>Refugees &amp; Migrants</b> | <ul style="list-style-type: none"> <li>• Lack of knowledge about what they have been through</li> <li>• Limited support system in New Zealand</li> <li>• Language barriers</li> <li>• Lack of knowledge about system of support</li> </ul>  | <ul style="list-style-type: none"> <li>• Staff training about countries of origin</li> <li>• Use professional interpreters</li> <li>• Access to Shakti for women where appropriate</li> <li>• Access to a space separate from small communities, for example access to counselling within the community can be difficult if the partner is in a position of power within it</li> </ul> |
| <b>Disability</b>              | <ul style="list-style-type: none"> <li>• Having a support service designed for able-bodied people</li> <li>• Noise and light for people with Autism</li> </ul>  | <ul style="list-style-type: none"> <li>• Universal design of buildings</li> <li>• Easy read</li> <li>• Supported decision making</li> <li>• Provide transport</li> <li>• Access to someone trained to work with people with Autism and who can respond to their needs</li> </ul>   |

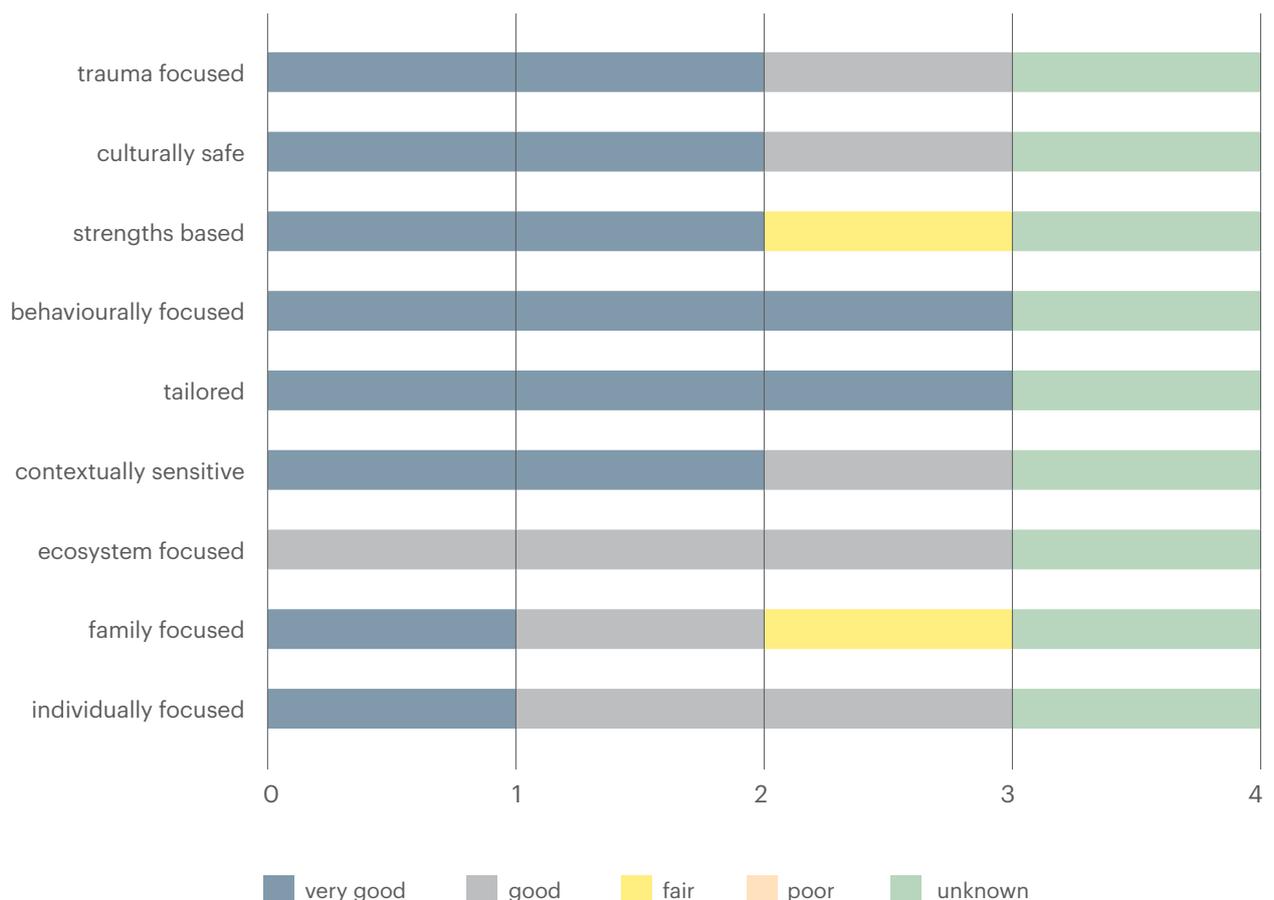
## Range of services delivered by a sexual harm crisis support service

Ideally the respondents advised that a sexual harm crisis support service for young people would comprise of an integrated suite of services to prevent youth having to run around to different places with different people. This suite of services would take account of the primary prevention services delivered to youth as well as the immediate, intermediate, and longer-term needs of young people who experience sexual harm. The services noted by respondents included:

- **Preventative services**, for example programmes about healthy relationships
- **Immediate crisis services** involving supporting a young person who has recently experienced a sexual harm or who has been triggered some time after the incident.
- **Intermediate crisis services** that involves providing social work support, building a system of support (e.g., family, peers and community) for the young person as well as providing support for the family, providing support through the police, Family Group Conference and court processes, advocacy, brief intervention, facilitating peer mentoring programmes and working collaboratively with other NGOs to provide wrap around services.

## Young people’s views about practice and approach

The youth respondents were of the view that behaviourally focused interventions and intervention tailored to meet their individual circumstances were the most helpful. Trauma-focused, culturally safe, and contextually sensitive services were rated as very good and good.



## Frequency and length of service

The youth respondents were asked for their opinion about the frequency and length of service. Most of the youth respondents commented that weekly sessions were adequate for them, but they recognised that some young people might want to see a service provider more often especially after a recent sexual harm incident. With respect to the length of service, most of the youth respondents preferred an integrated approach whereby they saw a crisis service for a period of time followed by a longer-term counselling service.

## Outcomes

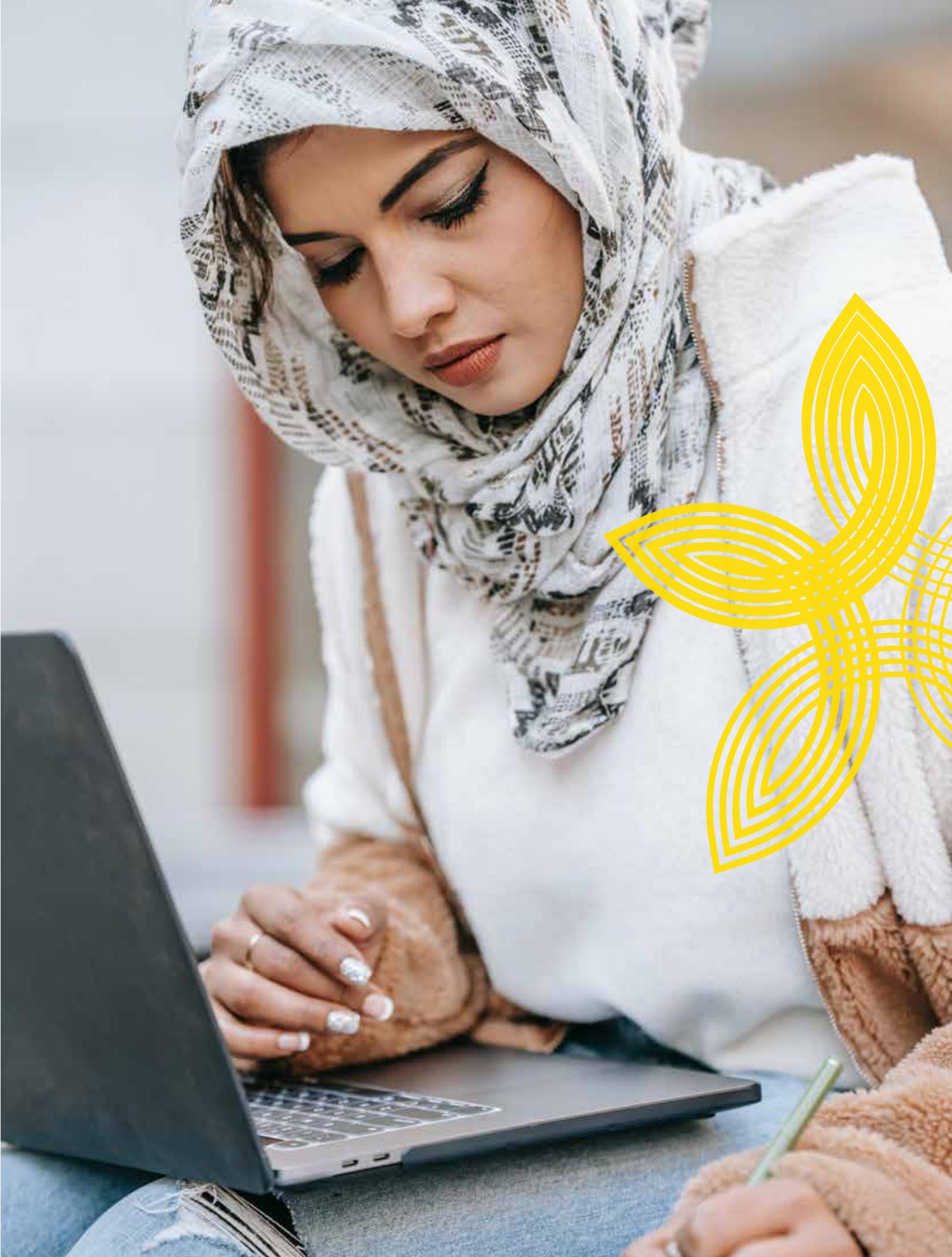
The respondents were asked to identify the outcomes that might be achieved for young people who attended a sexual harm crisis support service.

### Outcomes Identified by Professional Respondents

| Short-term outcomes  | Medium-term outcomes   | Long-term outcomes  |
|--|--|---|
| <ul style="list-style-type: none"> <li>Experienced confidentiality &amp; privacy</li> <li>Engaged in service</li> <li>Voice heard &amp; understood</li> <li>Felt accepted</li> <li>Stabilised</li> <li>Safe</li> <li>Physiological needs met</li> <li>Feel validated &amp; believed</li> <li>Understand Police investigation processes</li> <li>Understand the forensic &amp; medical check processes</li> </ul> | <ul style="list-style-type: none"> <li>Needs fulfilled</li> <li>Positive whānau, peer and community relationships</li> <li>Ready for &amp; participating in long-term therapy</li> <li>Whānau coping &amp; supportive</li> <li>Positive &amp; trusting experiences with social services</li> <li>Resume everyday activities</li> </ul> | <ul style="list-style-type: none"> <li>Reduced revictimisation</li> <li>Reduced suicide rates</li> <li>Reduced rates of self-harming</li> <li>Engaged in education, training, or employment</li> <li>Reduced substance abuse</li> <li>Create your own family</li> <li>Experiencing healthy relationships</li> <li>Positive life functioning and wellbeing</li> <li>Less frequent memories of trauma</li> <li>Feel safe, confident &amp; powerful</li> </ul> |

### Outcomes Identified by Youth Respondents

| Immediate outcomes  | Intermediate outcomes   | Long-term outcomes  |
|---|---|---|
| <ul style="list-style-type: none"> <li>Improved understanding of consent</li> <li>Improved understanding about the red flags of an unhealthy relationship and the green flags of a healthy relationship</li> <li>Feeling safe</li> <li>Improved understanding about reactions after a trauma</li> <li>Understand how to manage the symptoms of psychological trauma</li> <li>Understand how the brain works after a trauma</li> </ul> | <ul style="list-style-type: none"> <li>Higher rates of conviction for those who commit sexual harm</li> <li>Knowledge about how to feel better</li> <li>Improved self-worth</li> <li>Return to school with an understanding about how to support the young person</li> <li>Knowledge of how to access help</li> </ul> | <ul style="list-style-type: none"> <li>Personal closure</li> <li>Empowered</li> <li>Feeling safe from the person who caused the sexual harm</li> <li>Find employment, return to study, get a hobby</li> <li>Inner peace &amp; calm</li> </ul> |



## 1. Sophie's story

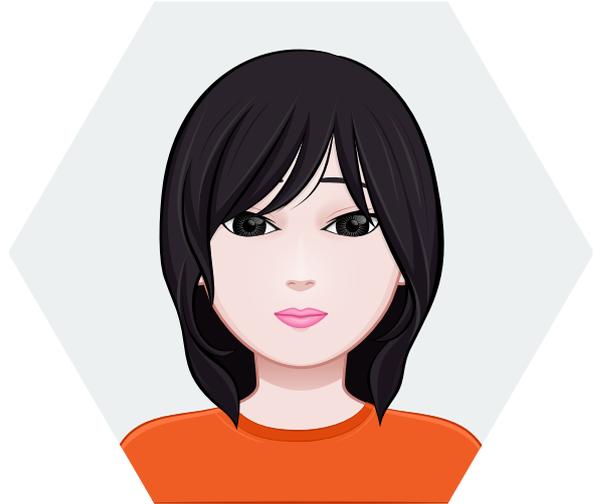
Sophie is a 16 year old high school student living in Christchurch. She comes from a middle class home with two professional parents and a younger brother. Up until last year her life has been safe, secure, and reasonably normal for a young middle class Pākehā woman growing up in a stable home environment.

Sophie contacted the SASSC team after finding out that a boy she recently had a casual sexual relationship with had taken a video recording of them having sex. This video recording has been uploaded onto a 'revenge porn' website and several of Sophie's friends had viewed the recording.

She is presenting with a range of anxiety and stress related behaviours. In particular, she is reluctant to give any information about herself and desperate to protect her privacy. Sophie has no idea what she can do to get help.

The SASSC team provides Sophie with validation and support to unpack the experience that she is going through. They explain the current legislation as well as its limitations. They connect her with information from Netsafe and the Police. They also talk her through what she can practically do to secure her online accounts and better manage her use of social media.

The challenge for young people like Sophie is that while she may have consented to having sex with this boy, she did not consent to being filmed let alone for those images being made public. She is unsure what her rights are and even whether a crime has been committed. She needs to have her experience validated and needs specific advice about how to proceed. The Harmful Digital Communications Act 2015 is really hard to prosecute under. SASSC team members feel obliged to explain this to Sophie so that she has realistic expectations about what the Police are likely to be able to do.



**“I’m reluctant to access mental health support for sexual harm. There’s a lot of work to be done in the crisis system, because they are so understaffed.”**

– SASSC YOUTH VOICE

### Aviva would like to provide:

- The time and resources to lobby for legislative change to better protect young people from online abuse and coercion
- Education programmes to high school students to create safe and secure relationships and better equip them to deal with online abuse especially around sexual harm and coercion
- Ultimately, Aviva would like justice for young people like Sophie who are victims of online sexual harm

## 2. Amber's story

Amber is a 22 year old Pākeha woman living in short term rental accommodation with her young son. She grew up in an abusive household and at a young age got involved with a man who was part of a gang. At high school she started using drugs and now has a problem with methamphetamine addiction. Her life has been shaped by intergenerational trauma and an insecure home environment.

Amber contacted the SASSC team because her current partner (who is also part of a criminal gang) is becoming increasingly physically violent and sexually abusive towards her. Amber needs help but is anxious not to be seen as betraying her partner and his associates to the Police.

Amber presents as frustrated and hostile. She has a history of previous harm that was not taken seriously when she tried to report it. She is caught between desperately wanting and needing help and feeling dependent on her partner and fearful of the organised crime gang he is part of. She is also suspicious of the Police and social service agencies.

The SASSC team helps Amber access short term financial support so she can get food and accommodation away from her abusive partner. They also provide safety planning and 'safe@home' home security upgrade information as well as encouragement and advocacy.

What Amber really needs is a comprehensive 'wrap around' intervention including basic safety and privacy, ongoing help concealing or transforming her identity, health care and alcohol and drug support, long term safe and secure housing, and long term counselling for both the historic family abuse and the recent incidents of partner violence she has experienced.



**“When survivors open up (to others) I would hope they accept them exactly as they are, as well as acknowledge that they have been harmed.”**

– SASSC YOUTH VOICE

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### Aviva would like to provide:

- A fast tracked protection order for young people like Amber who are experiencing gang related sexual harm
- Community education to reduce the stigma experienced by women in gangs
- Ultimately they would like to see gang members held accountable for the treatment of young women and children

### 3. Salma's story

Salma is a 19 year old migrant woman who has been living in Aotearoa New Zealand for just over a year. She moved here with her husband from Pakistan immediately after their marriage, which was arranged by their families. She is well educated and was looking forward to further study at University but her conservative husband has told her that he wants a family and that she will need to stay at home. Salma doesn't know anyone in New Zealand and has a limited understanding of our cultural norms and legal system.

Salma contacted the SASSC team after her husband recently physically and sexually assaulted her. She feels isolated and unsure where she can turn to for understanding and support.

Salma presents with shame and guilt at letting her family down. She feels that people won't believe her and is also fearful of her partner and his extended family. She is trapped in an abusive relationship in a foreign country. She is also fearful that her immigration status might mean she will be sent back to Pakistan and her unsupportive family.

The SASSC team helps Salma to validate the seriousness of her experience. They provide education and resources about consent and about her rights under New Zealand law. They work with Salma to access either culturally specific support or a 'non-cultural' or generic support from an appropriate agency.

What Salma needs is a comprehensive plan moving forward. She also needs her own social connections in the community that are safe and supportive. She also needs to know that her status as a resident in Aotearoa New Zealand is not necessarily dependent on her living with an abusive partner.

#### **Aviva would like to provide young migrant women like Salma with:**

- Wrap around support to build Salma's self confidence and social connections in the community
- Culturally responsive support and advice in partnership with Immigration New Zealand
- Increase capability, knowledge, and sensitivity across the sector in how to support migrant women



**“Within a service, having a representation of different staff would be important for immigrants and migrants as it is easier to speak in their first language.”**

– SASSC YOUTH VOICE

## 4. Jacob's story

Jacob is a 16 year old boy from a working class Pasefika family. He has a strong sense of his identity, faith, and community. His parents and siblings are very supportive of his academic achievement and he enjoys school as well as participating in team sports on the weekends. Jacob is likely to be the first person in his extended family to go to University. Despite being a calm and gentle person, Jacob has recently started drinking and getting into fights.

Jacob contacted the SASSC team after getting especially drunk at a party and accidentally punching one of his friends who tried to break up the fight. Jacob knows that he is having trouble with anger and violence. He suspects that this might be connected to an experience of sexual abuse that he experienced between the ages of 7 and 10 when his uncle was living in the family home.

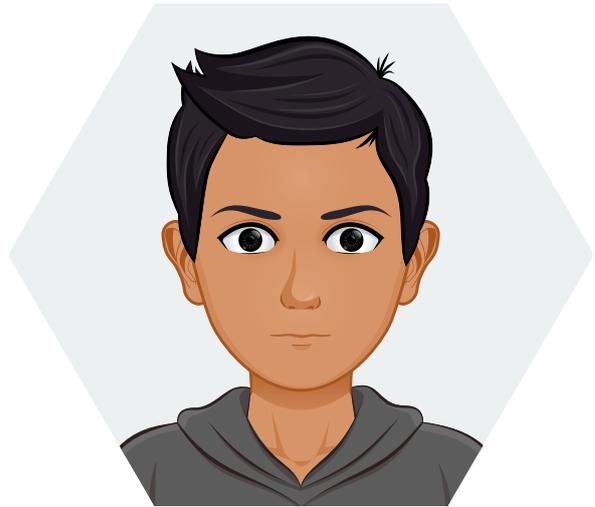
Jacob presents as an intelligent and articulate young person who is confused about the way he has started behaving. He is doubtful of the kind of support available outside his own culture and community but has nowhere else to turn.

The SASSC team provides validation of the seriousness of Jacob's experience and refers him to culturally relevant support and advocacy services. If Jacob decides to tell his parents about his experience then this can include holistic family and whānau support. The SASSC team will also provide resources and education about consent. They can also help Jacob find emergency housing if necessary.

What Jacob needs is someone who can understand the complexity of the situation without overreacting, ideally someone from a similar cultural and religious background who can connect with Jacob's calm and gentle demeanor.

### Aviva would like to provide:

- A more culturally diverse team that can better support young people like Jacob
- Cultural responsiveness across the sector to help agencies meet the needs of young people from Pasefika communities who experience sexual harm
- Community education and outreach to help schools, church groups, and sports clubs to understand the signs of abuse and how to support young people to get support



**“If men were to seek advice, I would hope they would go to a support service as opposed to keeping it to themselves.”**

– SASSC YOUTH VOICE

## 5. Ally's story

Ally is an 18 year old Pākehā woman in her first year at Canterbury University. She has moved into a student flat with some girlfriends from high school, mainly to get away from her wealthy parents who she finds overbearing and anxious about her. Ally is confident, capable, and looking forward to a successful career of her own.

Ally contacted the SASSC team after she was sexually assaulted by a fellow student after a party at her flat. She has decided not to report the incident to the Police, or to tell her family, but realises that she needs support to understand and process what happened. She has tried the University counselling service but recognises that she needs more expert support. She wants to put the incident behind her and doesn't want to be defined by the experience.

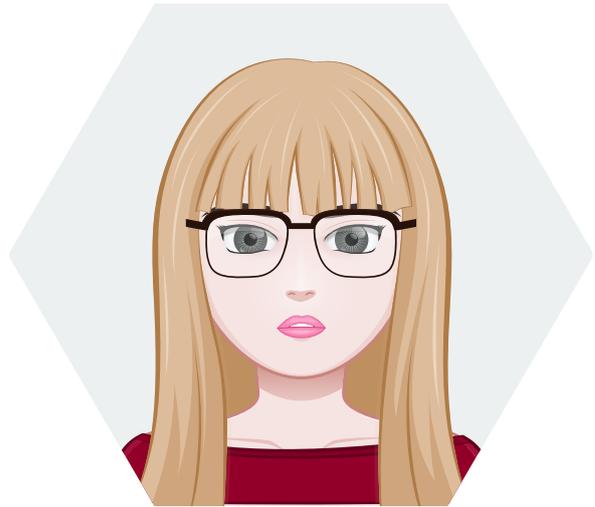
Ally presents as an intelligent and confident young woman who is struggling to process a traumatic event. Ally has proactively accessed online resources to help her understand her own experience, but remains anxious about telling her friends and the stress and trauma is affecting her studies, which is causing more stress and anxiety. She wants to be strong and independent but recognises that she is isolated and needs help.

The SASSC team helps by validating Ally's experience and the choices she is making. They help with writing letters of support and connecting Ally with support at the University. They also provide advice about the long term effects of sexual harm and different kinds of counselling available.

What Ally needs is a confidential service that will support her choices. She needs help to navigate the aftermath of this event, and advice about how to move forward with her life in a way that gives her the practical support she needs.

### **Aviva would like to provide young women like Ally with:**

- A peer support group
- Self confidence and self esteem building
- Family and whānau support



**“Clients should be able to determine the frequency of support and this can be open to change.”**

– SASSC YOUTH VOICE

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## 6. Bobby's story

Bobby is a 19 year old of Māori and Pākeha descent. Bobby has identified as gender non-binary for several years and recently they decided to start transitioning from a female to a male identity. Bobby's lived experience includes bullying at school, self harm, and a periodic eating disorder. They have enrolled in several courses at the local polytechnic and currently work in two part time jobs.

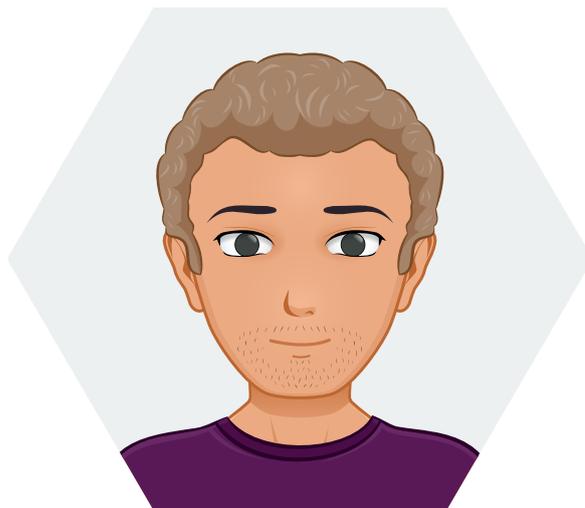
Bobby contacted the SASSC team after they experienced sexual harm within the local LGBTQIA+ community. This is not the first time Bobby has experienced this, and this incident was more serious. Bobby is reluctant to report the incident, both because of negative experiences they have had with agencies and the justice system, as well as a sense of loyalty to the LGBTQIA+ community.

The SASSC team supports Bobby by validating their identity choices and using correct pronouns. They also acknowledge the complexity of Bobby's situation and the difficult choices they face. Practically the SASSC team connects Bobby with resources and external referrals to services that are LGBTQIA+ specific.

Young people like Bobby need understanding and respect. They also need a range of support and advocacy including LGBTQIA+ counselling, health checks, alcohol and drug support, and ongoing support for the journey of transitioning.

### **Aviva would like to provide young people like Bobby with:**

- LGBTQIA+ diverse counsellors
- Community and school based education that reduces social stigma towards LGBTQIA+ people
- Cultural responsiveness training across the sector to support LGBTQIA+ young people



**“The support services just need to be diverse in who it has working for them because they would be the best people to address the needs of the rainbow community.”**

– SASSC YOUTH VOICE

## 7. Anne's story

Anne is a 25 year old woman living and working in Christchurch. She identifies as having both Māori and Pākehā ancestry and has been married for five years and has two school aged children. Her husband works in the construction industry and Anne recently started working again as the office manager at a local retail business. Recently Anne saw a documentary on TV about the Royal Commission of Inquiry into Abuse in Care and this triggered vivid memories of the sexual abuse and psychological manipulation she experienced as a child by a close family member.

Anne contacted the SASSC team after experiencing a range of difficulties in her intimate relationship with her partner. These are obviously connected to her experience of historical sexual abuse. She disclosed some of her experience to a close friend when she was in her late teens but decided not to report the abuse to the Police.

Anne presents seeking help with the immediate problem of her intimate relationship with her husband. While Anne's is no longer an experience of a young person, the sexual harm and psychological abuse she experienced took place when she was a child and the long-term effects of this violence are undermining the life Anne has managed to build for herself.

The SASSC team helps Anne to understand how historical harm impacts people's lives. They provide her with resources that she can share with her partner. They also provide her with information about the police process and support her to liaise with the Police if she decides to report the historical abuse.

What Anne needs is validation that her experience matters and that there are people who can support her to move forward. Anne also needs justice and to see the user of violence held accountable.

### Aviva would like to provide:

- Urgent counselling funded by ACC
- Easy access to partner counselling and sex therapy
- Support with disclosing historic abuse with the wider family and whānau



**“For Maori, support that is more interconnected with whānau and extended family and iwi could help to identify the needs of the whole group.”**

– SASSC YOUTH VOICE

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## 8. Scarlet's story

Scarlet is a 23 year old Pākehā woman who moved to Christchurch to get away from a dysfunctional family in the North Island. She works as an exotic dancer at a brothel in the city. She likes the money that she earns and the fact that she doesn't have to have sex with the clients. Mostly she likes the party lifestyle her job funds. Scarlet enjoys drinking and using recreational drugs.

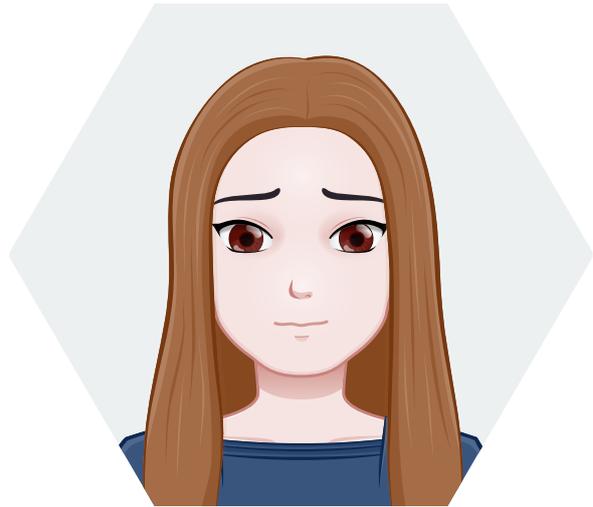
Scarlet contacted the SASSC team after she was violently assaulted by a client after being followed home from work one night. Despite suffering serious injury to her face and body Scarlet is confused about whether the incident was sexual harm or not because the perpetrator was a client at the club. She is also concerned about reporting the incident because she had been using drugs earlier that night, and how her employer would react.

The SASSC team provides Scarlet with validation about the seriousness of the assault. They provide information about employee support and workplace safety. They can also support with a protection order and alcohol and drug support if needed. SASSC also helps Scarlet with a referral to the New Zealand Prostitutes Collective.

Scarlet urgently needs a health check and victim support and education about her rights under the law. She also needs to report the assault to the Police and to be supported through that process.

### **Aviva would also like to support people like Scarlet with:**

- Personal safety and consent education
- Advocacy and representation for sex workers and their right to a safe workplace
- Public education to reduce stigma for sex workers/ adult industry workers as a community



**“I really needed someone who could support me in my journey as a survivor and not judge me for my work.”**

– SASSC YOUTH VOICE

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## 9. Tane's story

We know very little about Tane because he is one of many young people who choose not to report their experience of sexual harm. We only know about him because he is using the Aviva website and because he calls the anonymous helpline.

From what Tane is willing to share, we think he is Māori and in his early twenties. He is heterosexual male who was sexually assaulted while he was at high school. It is likely that he disclosed the incident at the time and had a negative experience, either not being believed or being advised not to report it to the Police. It sounds like he has a full time job and a steady girlfriend, but he is starting to experience emotional dysregulation and feelings of shame and anger. Tane is struggling to reconcile his strong masculine self identity with the powerlessness of his sexual assault.

The SASSC team provides Tane with a range of online resources to help him make sense of what he has experienced. The anonymous helpline provides a sensitive listening ear when he needs support. SASSC can also provide education regarding the Police reporting process so Tane can make an informed decision about reporting. They also provide education for partners.

What Tane urgently needs is validation that his lived experience matters and that what he is going through can be navigated. He clearly needs time and space. Online resources provide the information he needs and the helpline conversations help build the trust needed for him to take the next step.

### **Aviva would like to continue to provide people like Tane with:**

- A listening ear
- Discreet online resources
- Fully funded assistance for young people who desperately need to access support, without the requirement that they report the sexual harm to Police or social services



**“Text messaging or instant messaging is helpful because calling doesn’t work for everyone.”**

– SASSC YOUTH VOICE

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# 3

## PART THREE

# Theory of Change

### Ultimate Outcomes

- Safe, attentive, and responsive communities of care
- Healthier youth, families and whānau, and more vibrant communities
- Decrease in sexual harm within communities and an increase in youth wellbeing
- Reduction in costs of sexual harm impacts on NZ society

**Problem statement:** young people who have experienced sexual harm are at risk of adverse physical, psychological, behavioural, and sexual impacts.

| Inputs   | Activities   | Short-term Outcomes   | Medium-term Outcomes   | Long-term Outcomes   |
|--|--|---|--|--|
| <b>Outcomes for young people</b>   |  |   |  |  |
| Qualified & highly skilled workers<br><br>Young people aged 13-25 years<br><br>Supportive family systems<br><br>Accessible agency & services<br><br>Trauma-informed & culturally competent agency<br><br>Diversity incorporated throughout structure, policies & practice<br><br>Partnerships to deliver integrated services<br><br>Youth involved in design & implementation of services<br><br>Sustainable | Deliver primary prevention programmes to young people & their whānau<br><br>Deliver timely, development & age appropriate, trauma informed, trauma specific & culturally competent services<br><br>Two-generation approach to intervention<br><br>Build relationships with diverse stakeholder to enable integrated services | <ul style="list-style-type: none"> <li>• Reduced normalisation of sexual harm</li> <li>• Increased awareness of actions to take if you or someone else is sexually harmed</li> <li>• Increased knowledge of risk-reduction strategies</li> <li>• Increased understanding of consent</li> <li>• Improved understandings about the red flags of an unhealthy relationship</li> <li>• Increased knowledge about help seeking</li> <li>• Increased disclosure</li> <li>• Increased participation in medical, forensic, criminal justice &amp; psychosocial services</li> <li>• Increased feelings of control</li> <li>• Increased access to protective factors</li> <li>• Increased understanding of impacts of trauma</li> </ul> | <ul style="list-style-type: none"> <li>• Healthy relationships</li> <li>• Early disclosures and more immediate positive responses to youth experiencing sexual harm</li> <li>• Enhanced community awareness and pro-social responding to sexual harm</li> <li>• Increased coping skills</li> <li>• Increased access to helping services</li> <li>• Increased connection to support systems</li> <li>• Stabilised</li> <li>• Increased readiness for long-term therapy</li> <li>• Improved service engagement and retention</li> <li>• Reduced long-term impacts for youth and greater resiliency/productivity</li> <li>• Increased self-esteem/efficacy and restoration of mana</li> </ul> | <ul style="list-style-type: none"> <li>• Reduced revictimisation</li> <li>• Reduced psychiatric disorders</li> <li>• Healthy relationships</li> <li>• Re-integration into positive life functioning</li> <li>• Personal closure</li> </ul> |

This theory of change provides a visual representation of the outcomes of a sexual harm crisis support service for young people and the way in which the results will be achieved. It can be used for a variety of purposes including service planning, as a communication tool that captures the complexity of delivering the service and the performance story, and a blueprint for measuring indicators of success and as the basis for reports to funders and governance groups.

In the light of this theory of change for a sexual assault crisis support service the following recommendations are offered:

1. Select qualified and highly skilled employees who are committed to working with youth in a youth development, developmentally appropriate, trauma informed, and family systems manner. They must be compassionate, empathetic and non-judgmental, have strong interpersonal relationship skills, be culturally competent, and be flexible and adaptable.
2. Deliver the service from a centrally located youth centre which offers a range of activities and services for youth as well as offering services via technology – both of which have been found to protect the privacy and confidentiality of young people.
3. Deliver primary prevention and tertiary prevention services to provide a trusted and consistent agency for young people to access as well as providing a balanced workload for workers to prevent vicarious trauma and burnout.
4. Provide sexual harm support services for a number of months and deliver engagement and stabilisation services. These services are intended to provide emotional, social, and physical safety, and meet those needs, establish a family system around the young person, establish routines and prepare the young person for when they are ready to access long-term trauma counselling when available.
5. Structure the service in a way that is tight as well as loose – loose to address the flexible approach taken by young people and tight in terms of providing services that only engage and stabilise the young person without entering into long-term trauma therapy.
6. Tailor the service and information to meet the developmental stages of the diverse range (age, gender, ethnicity, diversity of environmental circumstances, etc.) of young people accessing the service.
7. Utilise research-informed models of practice such as psychological first aid, crisis counselling, trauma informed cognitive behavioural counselling, and strengths-based counselling.
8. Explore ways in which the sexual assault crisis support service can include Te Ao Māori and Te Reo in the delivery of services, reflect the bicultural nature and diversity of cultures within New Zealand, and include cultural competency and cultural safety professional development opportunities for staff.
9. Develop a trauma informed and culturally competent organisation to support the sexual harm crisis support service.
10. Develop a service that is accessible for young people by providing a youth friendly, welcoming, and inclusive environment – a service that incorporates manaakitanga.
11. Include family or an adult support system for all young people especially for those in their early and mid-teens.
12. Establish and maintain partnerships with a range of psychosocial services especially those with whom there is often inequality of services access and responsiveness.
13. Involve youth in the design and implementation of the sexual harm crisis support services (governance, management, and delivery of services).
14. Enhance the sustainability of the service by accessing a diverse array of funding sources, implement employee wellbeing policies and practices, develop an outcome monitoring framework, develop and implement a stakeholder engagement plan with which to ensure stakeholder ownership of the service, and undertake an annual SWOT analysis that facilitates adaptability to changes in the internal and external environments.
15. Undertake a longitudinal research and evaluation project as part of the ongoing programme that considers the longer-term psychosocial outcomes from the implementation of a sexual harm support services. The detrimental impacts of sexual harm warrants gathering evidence about its impact on the psychosocial and economic outcomes for young people as well as outcomes for their whānau and their communities.

## **About Aviva**

Aviva is a Canterbury-based, specialist family and sexual violence agency dedicated to making New Zealand Aotearoa violence-free. They offer an extensive range of integrated, specialist services to support all people, children, youth and adults, to live free from violence and overcome its enduring harms.

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## **About Sexual Assault Support Service Canterbury (SASSC)**

Aviva works in partnership with START, to deliver Sexual Assault Support Service Canterbury (SASSC). SASSC offers 24/7 crisis support to individuals and their family/whānau after the disclosure a recent or historic sexual harm incident.

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## **About START**

START provides specialist recovery support services for children, young people and adults who have experienced sexual violence. Please visit [www.starthealing.org](http://www.starthealing.org) for more information.



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