Towards meaningful engagement:

Key findings for survivor co-production of public policy on gender-based violence

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Acknowledgement of Country

ANROWS acknowledges the Traditional Owners of the land across Australia on which we work and live. We pay our respects to Aboriginal and Torres Strait Islander Elders past and present, and we value Aboriginal and Torres Strait Islander histories, cultures, and knowledge. We are committed to standing and working with Aboriginal and Torres Strait Islander peoples, honouring the truths set out in the <u>Warawarni-gu Guma</u> <u>Statement</u>.

Acknowledgement of lived experiences of violence

ANROWS acknowledges the lives and experiences of the women and children affected by domestic, family and sexual violence who are represented in this report. We recognise the individual stories of courage, hope and resilience that form the basis of ANROWS research.

Caution: Some people may find parts of this content confronting or distressing. Recommended support services include 1800 RESPECT—1800 737 732 and Lifeline—13 11 14.

This is an edited summary of key findings from RF.20.02 "Speaking truth to power: The role of victims and survivors in driving policy change on gender-based violence". Please consult the ANROWS website for more information on this project.

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Note:

Quotes in this report come from interviews with GBV survivors and policymakers carried out as part of the studies and appear in the thesis (Wheildon, 2022) and articles published as part of the thesis. Rosie Batty consented to be named in Studies 1 and 2 and was given drafts of all papers for feedback. All survivor participants in Study 3 were given the option of being named in publications out of the research or not. All participants agreed to be named and are identified as they requested by their first or full names. Survivors' names also appear alongside their quotes with their approval. Every survivor interviewed (except one who specifically requested a transcript not be provided) was provided with their interview transcript for feedback. Several participants provided input on the transcripts, including clarifying points and adding exposition. All survivors were provided copies of the draft paper from Study 3 and asked to approve their quotations and any text directly related to them. They were also encouraged to give feedback on the paper overall. Policymakers were interviewed on the condition of anonymity to ensure unrestrained input, and non-gendered identifiers (i.e. P1, P2, etc.) are used for policymakers to help protect their anonymity.

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In brief

Background

- Survivors¹ with lived experience of genderbased violence² (GBV) are increasingly asking to be involved in developing and reforming public policy, and governments are beginning to engage survivors in co-production³ efforts.
- An example of this engagement of survivors in co-production efforts is the National Plan to End Violence against Women and Children 2022-2032 (the National Plan), which opens with a dedication to, and statement from, victim-survivors and the message that "No meaningful solutions can be made about us without us" (Department of Social Services [DSS], 2022, pp. 8–9). The National Plan commits to working with victim-survivors and recognising the value of lived experience in shaping effective initiatives.
- Engaging survivors in the co-production of policies is expected to make policies and services more relevant and improve outcomes. However, research with other service users indicates there can be a gap between the promise of coproduction in theory and what is delivered in practice, particularly when significant power imbalances exist between policymakers and service users.
- The role of survivors in the co-production of policy is under-researched, as are the public value and the risks. This research contributes to addressing those research gaps.

- 1 Note that the term survivors is the predominant term used throughout this report, as it was the terminology preferred by the majority of those with lived experience of gender-based violence who participated in this research. The terms victim and victim-survivor are used in relation to specific policy documents, theories, etc.
- 2 The term gender-based violence (GBV) is used throughout this report, except in relation to specific datasets, policies, strategies or contexts, as an umbrella term encompassing forms of violence including (but not limited to) family violence, domestic violence and sexual assault. It is an inclusive and accurate way to describe the drivers and impacts of the multiple forms of gendered violence experienced. UN Women Australia defines GBV as "harmful acts directed at an individual or a group of individuals based on their gender ... rooted in gender inequality, the abuse of power and harmful norms" (UN Women Australia, 2020). GBV disproportionately affects women and girls, although men and boys can be targeted, for example, if they do not adhere to rigid gender norms and stereotypes.
- 3 The term co-production is used in this report for consistency and clarity, and because it is one of the primary terms used in the academic literature, in policy and in practice. The terminology is also used because it indicates a best practice end-to-end process, from policy development to evaluation. While there is little consistency in the definition of co-production in the literature, and it is often used interchangeably with terms including co-design and co-creation, the term is generally understood as the active involvement of service users in the process of producing policies and services. Findings from this research are likely to have relevance to other forms of consultation and engagement; however, policymakers should ensure they and the service users they are working with are clear about the form of consultation or "co-work" being undertaken.

Key findings

- The power of survivors' narratives of their lived experiences, their independence and their positioning outside the regular policymaking context are key to their influence and the creation of shared or public value.⁴
- Survivor networks and collective action are invaluable to successful survivor advocacy, helping to ensure that a range of voices are heard, including (but not limited to) lived experience, and providing survivors with peer support and independence.
- Survivors from marginalised communities, including Aboriginal and Torres Strait Islander peoples, LGBTQ people and intersex people, and people with disability, are unlikely to be heard through one-size-fits-all co-production approaches.
- Without adequate induction, training and trauma-aware support, survivors will not feel confident, safe and adequately prepared for the work of co-production.
- 5) Public value is likely to be compromised unless policymakers involved in co-production work have been trained in the co-production process and fully appreciate the importance of lived experience. Without appropriate training and support, policymakers working with GBV survivors are at risk of exacerbating survivors' trauma and experiencing vicarious trauma.

Key recommendations for policymakers

- Ensure co-production efforts support and encourage survivors' independence. Invite survivor networks to engage in co-production efforts that respect and acknowledge the importance of their independence and promote unfettered survivor engagement.
- Contribute funding to independent survivor networks to train and provide ongoing support to survivors involved in co-production and advocacy work.
- Prioritise co-production with survivors from marginalised communities by working with communities to establish survivor networks and develop tailored mechanisms to listen and respond to their experiences and distinct needs.
- 4) Support the development of induction and training for survivors, which explain the policy and co-production processes and the role of survivors within them, as well as introducing survivors to the other experts informing those processes. Provide trauma-aware support for survivors throughout the co-production process, ideally supporting survivors to utilise their existing support networks (such as psychologists).
- 5) Ensure policymakers working on co-production efforts with survivors are trained in co-production and its benefits. Policymakers should be encouraged to take risks and to work with survivors to identify and remove barriers to sharing power and genuine engagement. Policymakers working with GBV survivors also require training in trauma-aware practice, managing vicarious trauma, and access to ongoing mental health support.

Positioning outside the regular policymaking context

Survivors' narratives, independence and positioning outside the regular policymaking context are key to their influence and the creation of public value.

Collective action

Networks and collective action are invaluable in successful advocacy, providing peer support and ensuring a breadth of lived experiences and voices are heard.



Marginalised voices

The voices of survivors from marginalised communities remain excluded from one-size-fits-all co-production efforts. Survivors' independence should be valued, respected and supported. Find ways to support independent survivor networks that encourage unfettered survivor engagement and improve public value.



Invite independent survivor networks to engage in co-production efforts and support the development of survivors' capabilities and networks through those efforts.

Prioritise co-production with survivors from marginalised communities by partnering with those communities to establish survivor networks and develop tailored co-production processes. Recommendations for policymakers

Support for survivors

Induction, training and trauma-aware support are crucial to ensure survivors feel confident, safe and prepared for the work of co-production.

Findings

Support for policymakers

To enhance the delivery of public value, policymakers involved in co-production require training in co-production. Policymakers working with GBV survivors are at risk of experiencing vicarious trauma. Focus on best practice co-production by providing induction to survivors regarding the policymaking process and their role within that process and supporting survivors to undertake co-production training. Provide clear and specific role descriptions and trauma-aware support.



Ensure policymakers working on co-production efforts with survivors are trained in co-production and encouraged to work with survivors to address barriers to sharing power and genuine engagement. Policymakers working with GBV survivors also require training in trauma-aware practice, vicarious trauma, and ongoing access to mental health support.

The research project

66 Speaking truth to power: The role of victims and survivors in driving policy change on gender-based violence

Background

GBV is a prevalent and persistent problem worldwide with many causes, contributing factors and consequences. Like other complex or wicked policy problems, GBV requires policymakers to rethink traditional ways of working, recognise that there are no quick fixes, work across agency boundaries, consider innovative approaches, and undertake effective stakeholder and citizen engagement (Australian Public Service Commission, 2007, as cited in Davis & Althaus, 2020). One such citizen or service user engagement approach that has emerged to address GBV is the participation of survivors in the co-production of policy development and reforms. Co-production is an approach that emphasises that people with lived experience of public services and systems have insights and capabilities to offer. It is an approach that treats people as active participants in improving policies and services rather than passive service recipients (Needham & Carr, 2009).

The history of the victims' rights movement in creating momentum for policy change is long and well-documented (Ginsberg, 2014; Hall, 2011; Rock, 2010; Walklate, 2007, 2016). However, the rise in individual survivor advocates helping to develop and implement policy has been a more recent phenomenon in Australia. The co-production of policies with survivors has meant that individuals' lived experiences are increasingly informing the policy process. However, the role of survivors and the best ways to engage them in co-production

work are under-researched and require greater understanding and analysis.

A body of evidence, particularly from disability, mental health and social care, on the impacts of policies and services co-produced with those with lived experience reveals significant benefits for participants. Benefits include improved feelings of hope, self-esteem, understanding, connection and empowerment, and health benefits (Boyle et al., 2006; Needham & Carr, 2009; Nelson et al., 2006). However, a growing body of literature also highlights potential risks associated with engaging service users in policy co-production, particularly when there are significant power imbalances between policymakers and service users (Bevir et al., 2019; Steen et al., 2018; Voorberg et al., 2015). Survivors of GBV may be particularly vulnerable to these risks because of the specific challenges of gendered stereotypes and social norms, such as victim-blaming (Ryan, 1971; Taylor, 2020; Weis & Borges, 1973) and the ideal victim (Christie, 1986; Donovan & Barnes, 2018). In addition, the history of the victims' rights movement indicates that the power of victims' stories has frequently been coopted to promote the agendas of political actors (including the media) that are not always in victims' interests (Elias, 1993; Garland, 2001; Walklate, 2012). Further, there is a considerable body of feminist literature highlighting how institutions, particularly public institutions, reflect and reinforce patriarchal power relations and gender inequality through formal and informal rules and norms (Chappell & Waylen, 2013; Krook & Mackay, 2011; Witz & Savage, 1991). Consequently, the existing literature highlights likely benefits, risks and challenges for survivors engaged in the co-production of public policy with government institutions.

In line with the National Plan to End Violence against Women and Children 2022–2023 (DSS, 2022) and the commitment to work with people with lived experience in informing appropriate and effective initiatives for ending violence, this research contributes to building an evidence base. The findings and recommendations from this research are of direct relevance to policymakers considering establishing lived experience groups to embed survivor input in national, state and territory-level policy and service reforms, including, for example, work currently underway by the Domestic, Family and Sexual Violence Commission and the NSW Government.

Methodology

This research explored the role of survivors of GBV in policy development and reform and considered the potential benefits and risks of co-production for survivors, policymakers and the creation of public value.

The research consisted of three studies, and the design process was iterative, employing an emergent approach, with each stage informing and shaping the next.

Study 1

The Rosie Batty case study (Wheildon et al., 2022): An empirical case study analysis of lived experience advocate⁵ Rosie Batty and her role in helping instigate the reform of the family violence system in Victoria following the murder of her eleven-year-old son Luke by her ex-partner in 2014. This case study is informed by content analysis of government documents, media reports and in-depth interviews with Batty and eight policymakers.

Study 2

The Victorian Government's Victim Survivors' Advisory Council (VSAC) case study (Wheildon et al., 2023): An empirical case study analysis of the first three years of VSAC, informed by content analysis of government reports and interviews with Batty and eight policymakers. Government reports analysed included the *Valuing the Lived Experience* report, based on 31 unstructured interviews with current and past VSAC members, members of the VSAC Secretariat, and Victorian Government and GBV sector stakeholders (Family Safety Victoria, 2019).

Study 3

The survivor perspectives study on what works in driving policy change on GBV (Wheildon, 2022): A narrative research study of 11 GBV survivors from often marginalised communities, including First Nations women, women with disabilities, migrant women and a transgender woman.

Survivor is fine. I don't like the term "victim". It makes me feel less than. (Nina)

I'm a survivor, that's the reality. I was a victim of somebody else at one point in time, but I don't feel like a victim now at all. (Russell Vickery)

Key findings

1) Survivors' narratives, independence and positioning outside the regular policymaking context are key

The Rosie Batty case study found that Batty's combined powerful narrative, with her independence and position outside the regular policymaking context (within government and the women's safety sector), were central to her influence and the reform of Victoria's family violence system, which she helped precipitate (Wheildon et al., 2022). This finding regarding the importance of Batty's outsider status reinforces the work of political scientists who have argued that those sitting outside government and the regular policymaking context can be better positioned than those inside to shape government agendas (e.g. Davies & True, 2017; McCaffrey & Salerno, 2011; Roberts & King, 1991).

Further, Batty revealed that she felt that her voice and influence began to be compromised when she became the inaugural Chair of VSAC, which was at the time positioned within the Department of Premier and Cabinet in the Victorian Government. Batty felt this diminishment of her influence was exacerbated the more that she became part of the policymaking context. Confirming a critical element of Christie's (1986) ideal victim theory regarding the need for ideal victims to be compliant, Batty also recounted feeling the need to be obedient and avoid "rocking the boat" and upsetting powerful interests, such as ministers and senior bureaucrats: "There is a perception you should be subordinate" (Rosie Batty, cited in Wheildon et al., 2023, p. 8). These findings were reinforced in the subsequent studies (2 and 3), with the VSAC case study (Study 2) finding that state institutions, as gendered sites with significant power imbalances, can find it challenging to provide a safe space for marginalised voices to speak freely and be heard. Study 2 concluded that, unless addressed, power imbalances can compromise survivor input and undermine public value creation (Wheildon et al., 2023). In Study 3, most survivors interviewed preferred being activists outside the regular policymaking context but greatly respected those survivors working inside. This view was most robust amongst those with experience working within government.

2) Networks and collective action are invaluable in successful advocacy

Building teams, using and expanding networks and working with advocacy coalitions emerged from Study 1 as key to Batty's success as a change agent and what political scientists have called a policy entrepreneur (Kingdon, 2003; Mintrom, 2019). Batty reflected on having established a strong network of experts around Australia:

That's my approach ... build up a network of people who are highly regarded ... I have always been one of those people that doesn't try to be the expert. That actually tries to introduce or connect [people]. (Rosie Batty, cited in Wheildon et al., 2022, p. 1693) In Study 3, several survivors identified that collective action around clear, shared objectives, can be safe, highly compelling and effective. Two survivors interviewed had been involved in the <u>#LetHerSpeak/#LetUsSpeak</u>⁶ campaign to change "gag laws" for survivors in several Australian jurisdictions, and they found that work especially rewarding. Several survivors in Study 3 particularly appreciated the peer support that collective action offers and recognised the value of people with diverse backgrounds and lived experiences of GBV coming together.

Most survivor research participants in Study 3 felt that they were better able to bring about effective change by engaging in co-production efforts through collective action external to government. However, there was immense respect for survivors who work within the regular policymaking context and an acknowledgement that there are institutional challenges whether working inside or outside, as this comment reflects:

When I talk to other women and other victims who want to do this [advocacy/ activism] and be heard – I'm very clear to say that there's lots of ways to do this work and every one of them is valid. So, you can work within the institution and make change from within. You have to know that's slow, it's incremental and you'll be compromised. ... Then you can be outside and throw shit at the institutions and criticise them all you like and you got to know they're not going to like you. They're not going to welcome you in, you're not going to be praised. Attempts to silence you might be much more overt and direct as opposed to "here's a carrot, we'll give you this pretty, shiny object and then we just expect you to behave this way". (Lula Dembele, cited in Wheildon, 2022, pp. 145–146)



3) The voices of survivors from marginalised communities continue to be excluded

The persistence of gendered social norms and stereotypes, including victim-blaming and notions regarding ideal and non-ideal victims, and their role in determining which survivors' voices are heard and which are not, was evident across the studies. According to the criminological literature, the ideal victim is someone whose narrative elicits compassion and is heard over and above the narratives of other non-ideal victims, who are frequently from marginalised communities, including LGBTQ people and intersex people, and people with disabilities (Christie, 1986; Donovan & Barnes, 2018; Maher et al., 2018). Further, the research confirmed that, as other scholars have found, ideal victims' experiences, particularly of police and criminal justice system responses,

^{6 #}LetHerSpeak/#LetUsSpeak began in 2018 and was created and is managed by journalist, author and sexual assault survivor advocate, Nina Funnell.

generally do not represent the experiences of the majority of survivors of GBV (Inzunza, 2022; Reeves & Meyer, 2021). As Batty said: "The very fact that I am not that stereotypical victim is the reason I had any cut through, because otherwise people are already tuned out" (Rosie Batty, cited in Wheildon et al., 2022, p. 1696).

Study 1 found that the assumption expressed by many of the policymakers interviewed that Batty would open the door for other, more diverse survivors to be heard was questionable (Wheildon et al., 2022, p. 1701). Studies 1 and 2 confirmed that not only do some survivors struggle to be heard (even when they are given a seat at the policy table), but they can effectively be silenced. However, Study 1 also established that ideal victims must be compliant to maintain their ideal victim status. They are also at risk of being co-opted by powerful interests (e.g. the media and politicians) to promote agendas that are not always in survivors' interests. Ultimately, Study 1 found that the ideal victim is not a status to aspire to.

Building on the work of feminist scholars who have studied institutions (including Chappell & Waylen, 2013; Krook & Mackay, 2011; Lowndes, 2020). Study 2 found that state institutions, as gendered institutions, constructed around hierarchies and power imbalances, can struggle to provide a safe space for marginalised survivors to be heard. Several policymakers revealed that this could be a highrisk environment, particularly for survivors who have experienced the removal of agency and had power exerted over them by perpetrators of GBV. Policymakers recounted realising over time that the risks of triggering PTSD and re-traumatisation in this environment were high. Study 2 highlighted that allowing survivors from marginalised communities to be heard requires a substantial overhaul of formal and informal rules within state institutions and abandoning onesize-fits-all approaches. It concluded that what is needed is the prioritisation of marginalised voices and the development of tailored strategies. Study 3 found that collective action can help diverse voices be heard.

4) The support survivors need

All of the studies highlighted the importance of induction, training and trauma-aware support in ensuring survivors feel confident, safe and prepared for the work of co-production.

Induction, such as introductory training or mentoring, is crucial to ensure survivors understand the policy process, the broader policy context and their role within that context. Induction is also essential to ensure survivors understand the role of other forms of experience and expertise in the GBV policymaking process, such as data analysis, evaluation and primary prevention.

Training is vital to ensure survivors understand the co-production process and to maximise their contribution. For example, Study 1 found that there are specific strategies that can help survivors be effective advocates and policy entrepreneurs. Some of these strategies can be learned and taught, including framing problems, scaling up advocacy efforts and using and expanding networks.

Survivor participants in Study 3 recounted how training also helped them prepare for disclosures of GBV (from other survivors and perpetrators) and backlash, including online trolling.

Several survivors in Study 3 also underscored the importance of training in understanding GBV, its drivers and prevention strategies:



The main feature that I liked about the [Safe and Equal Advocates for Change] program was that they explain how family violence or abuse is systemic and how it made me feel a little bit like not only supported, but also validated ... It wasn't just me being silly and stupid and allowing that to happen, but that's something that it doesn't matter who you are or how well educated you are or how independent you think you are: it can happen to anyone. (Luisa Fernanda Mejia, as cited in Wheildon, 2022, p. 150)

The value of peer support was frequently raised in Study 3, and training helped establish survivor cohorts who continued to stay in touch and, in some cases, to work together after the training. I actually made some very good connection(s) and I shared experiences with them that I hadn't shared with anyone else, even in my own language. So it was very interesting and it was very good to be able to share those experiences and see the similarities, but at the same time, seeing how different it is when you come from another country. (Luisa Fernanda Mejia, as cited in Wheildon, 2022, pp. 150–151)

Studies 2 and 3 also underscored the importance of specialist trauma-aware support to help survivors throughout the co-production process. Study 2 highlighted the need to provide financial assistance to survivors to use existing supports (such as psychologists) rather than having to establish new relationships with providers (such as Employee Assistance Programs).

The survivors interviewed in Study 3 recounted that trauma-aware support from specialist service providers (such as Engender Equality in Tasmania and Safe and Equal in Victoria) was vital in assisting them in preparing for (and debriefing after) consultation sessions and public speaking events.

Study 3 found that training and trauma-aware support were critical to help survivors develop new capabilities and rebuild their lives beyond their experiences of victimisation:

Because you can't do that forever. You just honestly can't. And making it so it's okay for people who have done that stuff there to let go of that, because there's progression onto other things. (Nicole Lee, cited in Wheildon, 2022, p. 151)

5) The support policymakers need

Study 2, the VSAC case study, found that training is vital for policymakers to understand best practice approaches to co-production, particularly the importance of sharing power, addressing institutional barriers and understanding the value of lived experience. Several policymakers interviewed revealed that they had been unprepared for the work of co-production, and this was particularly evident in the lack of clarity regarding VSAC's role, as these comments from policymakers indicate:



P5 said VSAC was high-level and strategic: "getting into the detail is problematic ... It's not their job; it's our job". In contrast, P6 argued that VSAC's role should not be high level and that when "it's about the bigger sort of policy and design and things, *I think that's challenging". P2 and P6* identified VSAC's most successful work as being more detailed; for example, providing advice about engaging with other survivors. P2 also felt VSAC had a crucial role in driving internal cultural change: "as a motivation to keep working ... as a reminder of why we actually do this". P7 felt VSAC members should not share their lived

experiences but focus on "feeding back to government things that were working and things that weren't", [w]hile P1 believed members should raise awareness of family violence by sharing their experiences. (Wheildon et al., 2023, p. 7)

These conflicting views about VSAC's role reinforced power imbalances between policymakers and VSAC members, leading to distress, particularly for survivors.

Some policymakers were also candid about their lack of preparedness for the ongoing trauma experienced by survivors and the need for trauma-aware support: "There's just an incredibly significant traumatisation exposure that we all underestimated" (P5; Wheildon et al., 2023, p. 8). This lack of preparation also affected the policymakers working with VSAC and highlights the need for training in trauma-aware practice and managing vicarious trauma for those working with survivors on co-production efforts.

Confirming the work of co-production scholars (Needham & Carr, 2009), Study 2 found that policymakers must be prepared to share power in co-production endeavours, with power imbalances explicitly addressed and encouragement provided for policymakers to take risks and address formal and informal barriers to power sharing, including writing this into policymakers' position descriptions. As P4 said: "Working well with people with lived experience means sharing power, or even relinquishing power ..." (Wheildon et al., 2023, p. 10).

Embedding the findings to improve GBV co-production policy

The practical implications of the insights provided by this research for policymakers are threefold:

- Knowledge to improve existing programs and develop new programs.
- 2) Understanding of good practices to support decisions, including around funding.
- Guidance regarding the risks and limitations of co-production and what works, particularly in relation to collective activism and training for policymakers and survivors.
- Survivors' outsider status and independence should be respected and supported. Positioning survivors inside government, and even within institutions which are at arm's length from government but reliant on government funding (e.g. domestic and family violence services), may diminish their autonomy and influence through co-option, institutional resistance and the reinforcement of power imbalances, thus causing distress and jeopardising public value creation.
- Engaging and encouraging independent survivor action and networks is necessary, especially within marginalised communities. This approach can help address power imbalances, ensure diverse voices are heard and help develop community advocacy capabilities and strategies.

- Provide training for policymakers involved in co-production projects. Training should focus on the elements of best practice co-production, including addressing power imbalances, sharing power and embracing service users' perspectives. Encourage policymakers to take risks, identify points of institutional resistance and call out the reinforcement of power imbalances, gendered stereotypes and social norms. Provide policymakers with training in trauma-aware practice and vicarious trauma and ongoing mental health support.
- Develop clear, specific roles to enable policymakers and survivors to identify role responsibilities, assign accountability, and measure their work's impact, outcomes and public value.
- Provide thorough inductions for survivors when engaging them in co-production activities, including explaining the policymaking process, the attributes of best practice co-production, the other areas of experience and expertise that will be utilised and the role of survivors within the bigger picture. Ensure expert, trauma-aware support is provided.

- Provide funding and support for independent survivor networks, potentially supported by specialist domestic and family violence services, to deliver advocacy and co-production training and provide expert, trauma-aware support to survivor networks. These organisations would train independent and community-based networks within their jurisdiction and provide a conduit for them to give feedback on policy and service reforms. Training will help survivors develop networks, strengthen diverse voices and help maintain independence.
- Ensure co-production efforts are tailored to engage those from communities with the highest GBV prevalence rates and who are likely to suffer the most significant impacts from GBV, such as those likely to experience multiple forms of violence. Institutional power imbalances, which

can maximise some voices and minimise others, must be explicitly addressed through tailored mechanisms to ensure the most marginalised are heard.

Addendum: The authors note that interviews for the VSAC case study took place in 2018 and 2019 and focused on the first three establishment years of the Victim Survivors' Advisory Council (from July 2016 to April 2019). The research does not reflect the ongoing work done and outcomes achieved as the Council has matured and established its role at the heart of Victoria's family violence reform agenda, nor does it reflect that since April 2022, VSAC has had the Family Violence Lived Experience Strategy (Family Safety Victoria, 2022) in place to guide government and the sector to embed lived experience across the full spectrum of family and sexual violence reform.

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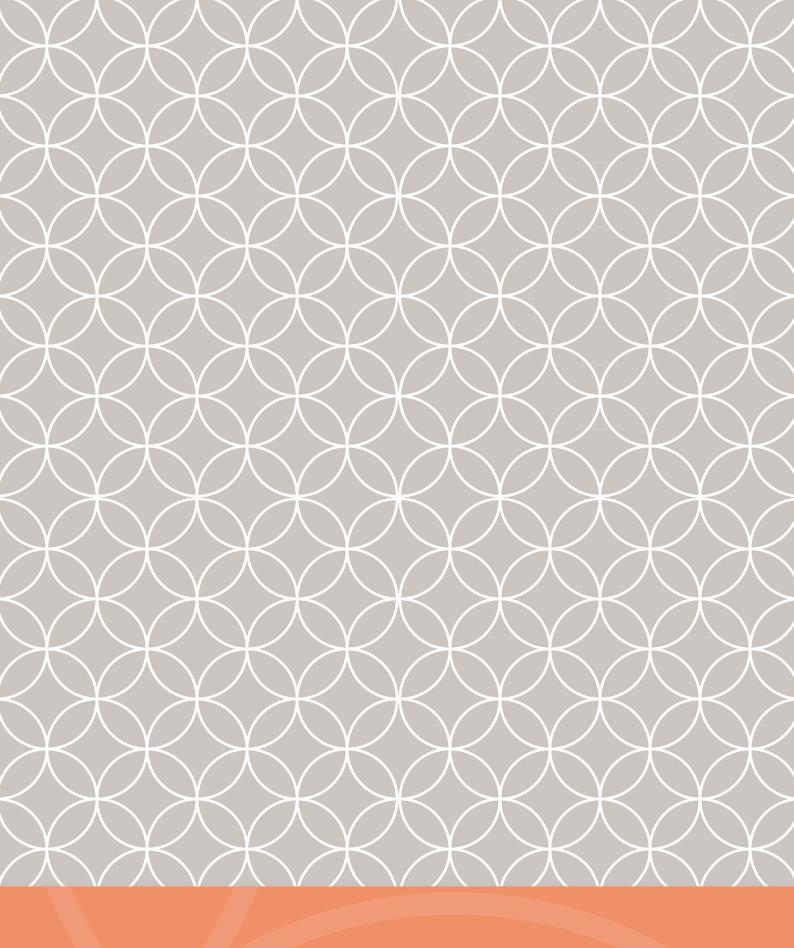
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