

SASVIC SUBMISSION

06/04/2026

ReGEN Think Tank

Who we are and
our experiences

Bio (ReGEN Think Tank)

The ReGEN Think Tank is a lived-experience advisory group within La Trobe University's Reducing Gender-Based Violence Research Group. Its members are survivor-co-researchers who work alongside academics to shape, guide, and co-design research on gender-based violence. The Think Tank plays a central role in ensuring ReGEN's projects are grounded in the expertise of lived experience, bringing insight, accountability, and survivor-centred decision-making into every stage of the research process.

About the Sexual Violence Think Tank

The Sexual Violence Think Tank is a lived-experience-led advisory and co-research group that brings together victim-survivors of sexual violence to inform, strengthen, and improve sexual violence service systems.

Convened by La Trobe University, in partnership with the Centre Against Sexual Assault – Central Victoria and Thorne Harbour Health, the Think Tank provides a structured and supported mechanism for incorporating survivor perspectives into service design, evaluation, and continuous improvement.

Sexual violence remains widespread in Australia, and evidence consistently demonstrates that many victim-survivors encounter barriers to accessing, navigating, and remaining engaged with sexual violence services. These barriers are often compounded for people living in regional and rural areas and for members of the LGBTQIA+ community. The Think Tank responds to this systemic challenge by embedding lived experience expertise into processes that shape service delivery, policy development, and sector-wide reform.

Members of the Think Tank participate as lived-experience co-researchers, contributing across all stages of the work, including design, implementation, analysis, and dissemination. This approach ensures that survivor feedback is not only collected, but meaningfully interpreted and acted upon within service and policy contexts.

The Think Tank operates in accordance with trauma-informed, feminist, and anti-oppressive principles, with a strong emphasis on safety, confidentiality, informed consent, and participant autonomy. Members are remunerated for their contributions, may choose to participate anonymously or under a pseudonym, and are supported to develop skills relevant to research, consultation, and knowledge translation.

Through its work, the Sexual Violence Think Tank supports evidence-informed decision-making and contributes to more responsive, equitable, and survivor-centred sexual violence service systems.

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Lived-experience accounts:

Victim Survivor Statement: *I always knew a trauma-informed doctor can make a fundamental difference in a victim-survivors life. After the best part of a decade, I finally found a GP that I could trust. Now, I can truthfully say: he has been a positive influence on every aspect of my life - my physical health is stable; my mental and emotional well-being has improved; I have found a healthy relationship with a loving partner; and I am working in a fulfilling job.*

Victim Survivor Statement: *I'm lucky to have an excellent GP who genuinely understands that much of what I deal with stems from trauma. He's been consistently supportive over the years, and often in very practical ways, things like seeing me early or right on time when he can, so I'm not sitting in the waiting room during times of heightened anxiety.*

Victim Survivor Statement: *In 2025 I had a really distressing experience whilst attending an appointment for an ultrasound. I had not been prepared by my GP that I would require an internal ultrasound, so I had only psychologically prepared myself for an external ultrasound. The sonographer was male, and whilst he was polite and respectful and ensured that the appropriate consent form was signed and that one of his female colleagues was in the room during the time he was conducting the internal ultrasound, I felt very overwhelmed and triggered by the questions he was asking me. The questions which impacted me the most were "Are you in a relationship?" (my most recent relationship ended 10 years ago and was extremely abusive), "Do you have any children?" (the perpetrator in that previous relationship caused me to miscarry during the only pregnancy I've ever experienced), "Have you been sexually active or are you a virgin? We can't do internal ultrasounds on virgins". I know that he was asking these questions as part of a medical assessment, and not out of his own personal curiosity, but I still found it very confronting at the time as no-one had prepared me that I would be asked such things. I used humour in my interaction with the sonographer to deflect from how uncomfortable I was feeling. The ultrasound results discovered a range of concerning issues that ultimately determined that I am at high risk of developing cancer and have a chronic disease and require surgery. The sonographer did not explain any of the medical terminology that he was discussing with me, and I subsequently had to do a Google search to find out for myself what was wrong with my body. I walked into that appointment feeling positive about the fact that I might get an answer as to why I was anaemic, and I walked out of the clinic distraught and cried my eyes out when I got to the safety of my vehicle. I found myself crying for days after this appointment as it had made me feel so unsupported, violated and triggered. I wish there was a way to indicate on intake forms at GPs and other allied health providers that I have experienced trauma and sexual violence, so they have a sensitivity to that when responding to my healthcare needs.*

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