Promoting opportunities. Protecting rights. For older Victorians.

COTA Victoria & Seniors Rights Victoria

Submission to the legal privilege and integrated legal assistance services consultations

To:
Victorian Law Reform Commission
legal.privilege@lawreform.vic.gov.au

Contact:
Jessie Kolthoff
Policy & Advocacy Manager
COTA Victoria and Seniors Rights Victoria
jkolthoff@cotavic.org.au

July 2026

We are supported by financial assistance from the Commonwealth and Victorian Governments.

Contents

1 About us

Council on the Ageing (COTA) Victoria is the leading not-for-profit organisation representing the interests and rights of people aged over 50 in Victoria. Celebrating 75 years of service in 2026, we have led government, corporate and community thinking about the positive aspects of ageing in the state.

Today, our focus is on promoting opportunities for and protecting the rights of people 50+. We value ageing and embrace its opportunities for personal growth, contribution, and self-expression. This belief brings benefits to the nation and its states alongside communities, families, and individuals.

Seniors Rights Victoria (SRV) is the key state-wide service dedicated to advancing the rights of older people and the early intervention into, or prevention of, elder abuse in our community.

SRV has a team of experienced advocates, lawyers, and social workers who provide free information, advice, referrals, legal advice, legal casework, and support to older people who are either at risk of or are experiencing elder abuse. SRV supports and empowers older people through the provision of legal advice directly to the older person.

2 Our position

COTA Victoria and SRV support reform to provide greater protection for communications made through closely integrated legal assistance services. Specifically, we support the establishment of a new category of legal privilege covering communications between clients, lawyers, and social service professionals in closely integrated legal assistance settings, as proposed in Question 5(b) and Option 2 of the consultation paper.

Our position in summary is that the law governing legal privilege should enable access to justice and should not have the effects of preventing a person from receiving the support they need to obtain, understand, and act on legal advice.

2.1 The SRV integrated service model

SRV operates an integrated legal and advocates service to support and prioritise the needs of victim-survivors of elder abuse. Elder abuse commonly involves interconnected legal, family, financial, housing, health, caregiving, and safety issues. The huge impact of these intersecting challenges on a person's psychological and physical wellbeing, alongside their ability to navigate systems and plan ahead, cannot always be addressed effectively through legal advice delivered in isolation – creating demand and significant value in a joint advocate-legal service response.

Furthermore, the social stigma that underpins elder abuse often creates a need for person-centred support that identifies, validates, and provides practical support in responding to the abuse experienced.

Notably, SRV's advocates provide support that better enables our lawyers to understand, connect with, and respond to an older person's circumstances. This includes:

- identifying the person's communication and accessibility requirements;
- supporting the person to participate in legal appointments;
- assisting with safety, housing, care, and family issues that affect the legal matter;
- providing psychosocial support before, during, and after legal consultations;
- making appropriate referrals; and
- undertaking work that supports the legal matter but does not require a lawyer's expertise.

This division of work allows lawyers to focus on legal tasks while ensuring that clients receive the support necessary to engage with the legal process. In many cases, the advocate's involvement is not an additional service provided alongside legal advice, but a necessity to the older person being able to obtain and act on that advice.

Accordingly, where an advocate is performing a function necessary to enable a client to retain information from, instruct, or communicate with a lawyer, their involvement should be regarded as part of the delivery of legal assistance.

3 Responses to consultation questions

3.1 Question 1

Integrated legal assistance services involve the delivery of legal and social services by professionals working for the same organisation or partnership. Loosely integrated legal assistance services impose strict information barriers between lawyers and social service professionals providing services to clients. Closely integrated legal assistance services promote the joint delivery of legal and social services to clients at the same time, sometimes after obtaining client consent to potentially compromise privilege. How easy or difficult is it to implement these two models of integrated legal assistance services in practice?

COTA Victoria and SRV have extensive experience delivering closely integrated legal assistance services to older Victorians experiencing elder abuse. In our experience, while both loosely and closely integrated models can operate in practice, they are not equally effective for all client groups. For many older people experiencing elder abuse, closely integrated legal assistance services are often necessary to enabling meaningful access to legal assistance.

Our experience is that a closely integrated model is both practical and highly effective where organisations have clear governance arrangements, informed consent processes, defined professional roles, and appropriate confidentiality practices. By contrast, a loosely integrated model, characterised by strict information barriers between lawyers and social service professionals, can create significant barriers to service delivery for clients whose legal issues are closely intertwined with social, housing, health, financial, and safety concerns.

The SRV integrated service model

SRV operates an integrated legal and advocacy service because the needs of older people experiencing elder abuse rarely fall neatly into legal or social categories. Elder abuse commonly involves interconnected legal, family, financial, housing, health, care, and safety issues. These issues frequently affect a person's ability to engage with legal processes and implement legal advice.

Under SRV's service model, lawyers, and advocates work collaboratively while maintaining distinct professional responsibilities. Lawyers provide legal advice and representation, while advocates assist clients to access, understand, and act upon that advice. Advocates also provide the practical and psychosocial support that enables many clients to participate safely and effectively in legal processes.

Closely integrated services reflect the realities of elder abuse

Many older people seeking SRV's assistance experience circumstances that make a traditional lawyer-client consultation difficult or impossible without additional support. Clients may be experiencing trauma, cognitive impairment, disability, declining health, language barriers, digital exclusion, or social isolation. Many also rely on family members for everyday support.

These circumstances become particularly complex where the legal matter involves elder abuse. The family member upon whom an older person depends on may also be the person using harm or otherwise capable of influencing what the older person is willing or able to disclose.

The presence of a family member during a legal consultation may therefore compromise the client's ability to provide independent instructions. However, excluding that family member may also remove the practical support the client requires to participate. In these situations, an independent advocate provides a safe alternative by supporting communication and participation without creating the conflicts that may arise where a family member is present.

The advocate therefore performs a function comparable to that of an interpreter or another trusted facilitator whose involvement is necessary to enable effective communication between lawyer and client.

Challenges associated with loosely integrated models

By contrast, loosely integrated models require legal and social service professionals to operate behind strict information barriers. While these arrangements may reduce uncertainty about legal privilege, they can significantly reduce the effectiveness of service delivery for vulnerable clients.

In practice, strict separation often requires clients to:

- repeat traumatic experiences to multiple professionals;
- navigate separate legal and social support systems;
- determine which information may or may not be shared;
- reconcile different streams of advice; and
- coordinate communication between professionals themselves.

These expectations may be manageable for some clients but can create substantial barriers for many others, including older people with a cognitive impairment, disability, or experiencing family pressure.

Importantly, the burden created by separated service delivery does not fall primarily on organisations; it falls on clients who are already navigating complex legal and personal circumstances. Requiring clients to repeatedly recount experiences of abuse, make difficult decisions about information sharing or independently coordinate multiple services may discourage disclosure, delay assistance, or lead to disengagement from the legal process.

Practical implementation considerations

Our experience is that closely integrated legal assistance services can be implemented effectively where organisations establish appropriate governance arrangements. This includes:

- clearly defined professional roles;
- informed client consent processes;
- transparent explanations regarding confidentiality;
- secure record management;
- staff training regarding privilege and information sharing; and
- organisational policies supporting collaborative practice.

SRV's experience demonstrates that integrated practice does not require professional roles to become blurred. Rather, effective integration depends upon each professional contributing their own expertise while working collaboratively around the client's needs.

Similarly, the existence of integrated practice does not remove the importance of confidentiality or client autonomy. Clients should understand the respective roles of lawyers and advocates, how their information may be used, and the circumstances in which it may be disclosed. These governance arrangements support effective integrated practice.

COTA Victoria and SRV consider that closely integrated legal assistance services are both practical and necessary for many vulnerable clients, particularly older people experiencing elder abuse. While loosely integrated models may operate effectively in some settings, they can create significant barriers where clients require coordinated legal and social support to participate meaningfully in legal processes.

The law should recognise that, for many clients, legal advice cannot be separated from the practical, psychosocial, and communication support necessary to obtain, understand, and implement that advice. A legal framework that accommodates closely integrated legal assistance services will better reflect contemporary service delivery, improve access to justice, and support better legal outcomes for older Victorians experiencing elder abuse.

3.2 Question 2

What are the benefits of integrated legal assistance services for clients, service providers and the justice system? Do you have case studies, examples or other evidence you can share?

We believe that integrated legal assistance services deliver significant benefits for clients, service providers, and the justice system. For many older people experiencing elder abuse, an integrated model is the mechanism through which legal assistance becomes genuinely accessible. By responding to legal, practical, social, and emotional needs together, integrated services improve access to justice, support better legal outcomes, reduce unnecessary trauma, and enable more effective use of limited community resources.

Our experience demonstrates that older people rarely present with a single legal issue. Rather, they commonly experience interconnected legal, family, financial, housing, health, care, and safety issues. Addressing only the legal issue risks leaving unresolved the barriers that prevent a client from engaging with or benefiting from legal advice. Integrated services provide a coordinated response that reflects the client's circumstances as a whole.

Benefits for clients

The primary benefit of integrated legal assistance services is that they enable people who might otherwise struggle to obtain, understand, or act upon legal advice to participate meaningfully in the legal process.

Many older people seeking assistance from SRV experience trauma, cognitive impairment, disability, declining health, social isolation, language barriers, or digital exclusion. These factors can affect a person's ability to communicate, provide instructions, understand advice, and participate confidently in legal processes. Advocates provide the communication, practical, and psychosocial support that enables clients to engage effectively with their lawyer.

Integrated services also provide person-centred support that responds to the dynamics of elder abuse. Victim-survivors commonly experience shame, self-blame, fear, or anxiety about seeking legal assistance, particularly where family relationships are involved. Advocates create a supportive environment in which clients feel heard, understood, and believed, helping them disclose information that is often critical to identifying legal issues and developing an appropriate legal response.

The integrated model also improves legal outcomes by supporting clearer communication, earlier identification of legal and safeguarding issues, and more informed decision making. It reduces trauma by minimising the need for clients to repeatedly recount distressing experiences to different professionals and lowers the cognitive burden associated with navigating multiple services.

Importantly, integrated services continue beyond the provision of legal advice. Advocates assist clients to implement advice by supporting them to engage with other services, attend appointments, address safety concerns, and overcome practical barriers that might otherwise prevent legal outcomes from being realised.

Benefits for service providers

Integrated legal assistance services enable lawyers and advocates to contribute their respective expertise within a coordinated model of care.

Lawyers are able to focus on legal advice, negotiation, and representation, while advocates provide communication support, psychosocial assistance, safety planning, service coordination, and practical follow up. This represents an efficient use of limited resources, particularly within community legal centres.

Working collaboratively also improves communication between professionals, reduces duplication, and enables legal and social issues to be identified and addressed earlier. The result is a more coordinated and responsive service for clients with complex needs.

Benefits for the justice system

Integrated legal assistance services also strengthen the justice system by improving the quality of participation in legal processes and reducing barriers to justice.

Clients who receive integrated support are generally better able to provide coherent instructions, understand legal advice, comply with legal processes, and make informed decisions. This contributes to better legal representation, stronger evidence, and more effective participation in legal proceedings.

Integrated services also reduce the risk that vulnerable clients disengage from the legal system because the process becomes overwhelming or inaccessible. By addressing practical and psychosocial barriers alongside legal issues, integrated models enable more people to pursue legal remedies and participate effectively in the justice system.

More broadly, integrated legal assistance services recognise that access to justice requires more than the availability of legal advice. It requires legal services to be delivered in a way that enables people experiencing disadvantage to exercise their legal rights on an equal basis with others.

Case studies demonstrating these benefits are attached at Appendix A.

3.3 Question 3

Integrated legal assistance services may compromise a client's ability to retain legal privilege and expose their private information, including through the professional reporting obligations of social service professionals. Do you have case studies, examples or other evidence that indicate how easy or difficult it is for lawyers, social service professionals or clients to manage information disclosure requirements and requests in this context?

We recognise that integrated legal assistance services require careful management of confidentiality, information sharing, and client consent. In our experience, these issues can be managed effectively through clear governance arrangements, informed consent processes, and well-defined professional roles. However, the current legal uncertainty surrounding privilege in integrated service settings creates practical challenges that influence service delivery, even where disputes over disclosure do not arise.

At SRV, clients are informed about the respective roles of lawyers and advocates, how their information may be collected and used, and the circumstances in which information may be shared. Information obtained through advocacy services is only disclosed where it is relevant to the client's matter or support needs, where the client has consented, and where the client would reasonably expect the information to be used in that way. These practices support client autonomy and help maintain trust in the service.

To date, SRV has not experienced significant operational disputes concerning compelled disclosure or the loss of legal privilege arising from its integrated service model. However, this should not be interpreted as evidence that the current legal position provides sufficient certainty or protection.

In practice, the greater challenge is uncertainty. Where the legal position is unclear, organisations may adopt more cautious approaches to service design, including limiting information sharing, avoiding joint consultations, or maintaining greater separation between legal and advocacy services than would otherwise be necessary. These decisions are often made to manage legal risk rather than because they reflect the needs of clients.

Legal uncertainty can also affect clients directly. Workers may be required to provide lengthy and qualified explanations about confidentiality and privilege, including legal risks that cannot always be predicted with confidence. For some clients, these conversations can be confusing and may discourage open disclosure.

SRV's experience is that integrated services can operate safely and responsibly within existing professional and ethical obligations. Nevertheless, greater statutory clarity would provide confidence to clients and service providers, reduce unnecessary administrative complexity, and support the continued delivery of integrated legal assistance services without compromising appropriate safeguards for confidentiality and information sharing.

Case studies demonstrating these benefits are attached at Appendix A.

3.4 Question 4

Should the law enhance protection for communications between clients, lawyers and social service professionals in integrated legal assistance service settings? Why or why not?

We support enhancing legal protection for communications between clients, lawyers, and social service professionals within closely integrated legal assistance services.

The law of legal privilege has developed around the traditional lawyer-client relationship. While that framework continues to serve an important purpose, it does not adequately reflect contemporary models of legal assistance, where clients with complex legal and social needs often require coordinated support from both legal and non-legal professionals to obtain, understand, and act upon legal advice.

For many older people experiencing elder abuse, the involvement of an advocate is necessary to enabling effective communication, facilitating informed decision making, providing practical and emotional support, and assisting clients to safely participate in the legal process. Treating the advocate's involvement as a potential threat to privilege does not reflect the reality of how integrated legal assistance services operate.

The current legal uncertainty also has practical consequences. It may discourage organisations from adopting integrated service models or lead them to impose unnecessary separation between lawyers and advocates to minimise legal risk. In turn, this can reduce the effectiveness of legal assistance and create additional barriers for clients who already experience disadvantage.

Importantly, enhanced protection for integrated practices should not diminish existing safeguards. Clients should continue to receive clear information about the roles of different professionals, how their information may be used, and the circumstances in which disclosure may be required by law. Reform should strengthen confidence in integrated practice, rather than reduce transparency or accountability.

In our view, the law should recognise that, where a social service professional is assisting a client to obtain, understand, or act upon legal advice as part of an eligible integrated legal assistance service, their involvement supports, rather than undermines, the delivery of legal assistance. Reform should therefore protect these communications in a way that reflects promotes equitable access to justice for people with complex support needs.

3.5 Question 5

Are you in favour of establishing:

a. social service professional privilege that would enhance protection for communications between clients and social service professionals in loosely integrated legal assistance service settings and/or (potentially useful, but it doesn't go far enough in that it only improves protection in some settings)

b. a new category of legal privilege that would enhance protection for communications between clients, lawyers and social service professionals in closely integrated legal assistance service settings?

We support Option B: the establishment of a new category of legal privilege applying to closely integrated legal assistance services. This approach better reflects contemporary models of service delivery and recognises that legal and social issues are often inseparable for people experiencing complex disadvantage. It would provide greater certainty for clients and practitioners, reduce unnecessary caution in service design, and enable integrated services to operate in accordance with best practice without creating avoidable risks to legal privilege.

Importantly, this reform would improve access to justice for clients whose ability to obtain legal advice depends on coordinated support from both lawyers and social service professionals. It would also recognise that the presence of an advocate, where their involvement is reasonably connected to the provision of legal assistance, supports rather than compromises the lawyer-client relationship.

3.6 Question 6

If you support a social service professional privilege for loosely integrated legal assistance

service settings, do you have a view on the scope, elements, eligibility requirements or implications of the privilege? If so, what is it?

We support the establishment of a social service professional privilege in principle, provided it complements, rather than replaces, a new category of legal privilege for closely integrated legal assistance services.

A standalone social service professional privilege would strengthen protections for communications between clients and social service professionals in circumstances where legal and social services are delivered separately. It may encourage clients to seek support earlier, provide greater confidence that sensitive information will remain confidential, and reduce uncertainty in loosely integrated service settings.

However, in our experience this reform would not adequately address the needs of many older people experiencing elder abuse. At SRV, advocates frequently perform functions that are integral to the delivery of legal assistance, including supporting clients to communicate with their lawyer, understand legal advice, participate safely in consultations, and implement legal outcomes. In these circumstances, the advocate forms part of the process through which legal assistance is delivered.

As such, we suggest that any standalone social service professional privilege should be viewed as a complementary reform, rather than a substitute for a privilege applying to closely integrated legal assistance services.

If introduced, we consider that eligibility should be limited to recognised social service professionals working within organisations that are subject to appropriate professional governance, confidentiality obligations, and information management practices. This could include community legal centres and other organisations delivering integrated legal and social support through appropriately qualified professionals. Any eligibility framework should be practical and proportionate, recognising existing governance arrangements rather than creating unnecessary administrative burdens.

The privilege should apply only to confidential communications made for the purpose of providing professional social support and should operate consistently with existing legal obligations relating to mandatory reporting, safeguarding, and other statutory disclosure requirements. It should also preserve clients' ability to make informed decisions about how their information is collected, used, and disclosed.

Importantly, the introduction of a standalone social service professional privilege should not encourage artificial separation between legal and social service professionals where integrated practice is necessary to meet clients' needs. It also should not create incentives for organisations to redesign effective integrated service models simply to obtain the benefit of one form of privilege over another.

3.7 Question 7

If you support a new category of legal privilege for closely integrated legal assistance service settings, do you have a view on the scope, elements, eligibility requirements or implications of the privilege? If so, what is it?

COTA Victoria and SRV support the establishment of a new category of legal privilege for closely integrated legal assistance services. In our view, this reform would better reflect contemporary legal service delivery and improve access to justice for people whose legal needs cannot be meaningfully separated from their social, health, family, or safety needs.

For many older people experiencing elder abuse, legal assistance is only effective where it is delivered alongside advocacy and other social supports. The involvement of an advocate is often necessary to enable a client to communicate with their lawyer, understand legal advice, make informed decisions, participate safely in legal processes, and implement legal outcomes. A new category of legal privilege should recognise that these functions support, rather than undermine, the lawyer-client relationship.

Definition and scope

The privilege should apply where legal assistance is delivered through an eligible closely integrated legal assistance service. It should not depend on whether every individual communication can be characterised as having a dominant legal purpose. Closely integrated services are designed to respond to interconnected legal and social needs, and applying the dominant purpose test to each interaction risks reproducing the uncertainty that reform is intended to resolve.

Instead, the relevant question should be whether the communication occurred as part of an eligible integrated legal assistance service and was reasonably connected to the client obtaining, understanding, participating in, or acting upon legal assistance.

The privilege should apply where:

- legal assistance is being provided by a lawyer through a community legal centre, Legal Aid service, pro bono practice, or another eligible legal assistance provider;
- a social service professional is employed by, engaged by, or working in a formal partnership with that legal assistance provider;
- the client has requested or consented to the involvement of the social service professional; and
- the communication was made and retained in circumstances demonstrating an intention that it remain confidential.

The privilege should extend to communications made:

- during joint appointments;
- separately between the client and the social service professional;
- between the lawyer and the social service professional;
- during intake and assessment;
- while undertaking safety planning, service coordination, or referrals;
- while assisting the client to understand or implement legal advice; and
- in records created as part of delivering the integrated service.

This approach reflects the reality that integrated legal assistance involves a continuum of interactions, rather than a series of isolated legal consultations.

Eligibility requirements

Eligibility requirements should provide certainty without creating unnecessary administrative or financial burdens for community legal centres and other not-for-profit legal assistance providers.

Eligibility could be demonstrated through existing community legal centre accreditation, funding arrangements, or professional governance frameworks, supplemented by minimum integrated practice requirements. These could include:

- documented confidentiality and information-sharing policies;
- informed and accessible client consent processes;
- clearly defined professional roles and responsibilities;
- secure record management practices;
- staff training regarding privilege and disclosure obligations; and
- processes for managing conflicts of interest, risk, and requests for information.

Importantly, any eligibility framework should recognise the diversity of integrated legal assistance models across Victoria. It should support good practice without prescribing a single operational model or imposing complex accreditation requirements that smaller services cannot reasonably meet.

Safety exception

COTA Victoria and SRV recognise that any new privilege should accommodate circumstances involving serious and immediate risks to a client or another person, however; any safety exception should be subject to a high threshold. Older people experiencing elder abuse often disclose financial abuse, coercive control, neglect, psychological abuse, threats, and family conflict while exploring their legal options. They may wish the abuse to stop without ending important family relationships, removing a family member from the home, or triggering formal intervention. Many continue to depend on the person using harm for care, housing, or daily support.

If clients believe that these disclosures will routinely result in information being shared without their consent, they may choose not to disclose abuse or may avoid seeking legal assistance. A broadly drafted safety exception therefore risks undermining the purpose of the privilege by discouraging the open communication upon which legal advice depends.

Implications for social service professionals

The proposed privilege would provide greater certainty for social service professionals working within integrated legal assistance services. Rather than requiring staff to rely on uncertain interpretations of existing privilege principles, the law would more clearly recognise the role that advocates, and other social service professionals play in facilitating legal assistance.

Importantly, the reform should not create additional administrative burdens that undermine the effectiveness of integrated services. Community legal centres operate in a constrained funding environment, and any new legislative framework should be accompanied by practical guidance, implementation support, and, where appropriate, additional resources.

Reform should strengthen effective integrated practice rather than requiring organisations to redesign successful service models around new procedural requirements.

4 Appendix A: Case studies from SRV

4.1 Case study 1

An 84-year-old older person (OP) had lived in a small Victorian country town for more than 50 years with a relative. Both had disabilities and supported one another, with additional assistance from OP's older sibling, who lived in a nearby town. The three family members spoke by telephone daily, and the sibling regularly visited for extended periods. OP was well connected within the local community and had established relationships with local services and support groups.

OP had diagnoses of two mental illnesses and declining cognitive capacity. OP had not spoken with their adult child (AC) for eight years and had only intermittent contact during the preceding 15 years. Contact between OP and their sibling was also restricted, with meetings only permitted under the monitoring of AC.

When the relative's health declined and they approached end of life, AC re-established contact. AC attended a private lawyer in the local town and requested that OP's power of attorney (POA) and will be prepared according to instructions they provided.

OP was taken to the lawyer and instructed to "sign here". There was no capacity assessment and no suggestion that OP obtain independent legal advice. Following the signing of the documents, OP was told they were going on a two-week holiday and that their home had been "packed up". OP's sibling questioned why the home would be packed up if OP was only going away for two weeks.

OP was subsequently taken approximately five hours away by AC and placed in a residential aged care facility. When OP's sibling and their family drove approximately 5.5 hours to visit, they were informed on arrival that the visit had been cancelled and they could not see OP. Communication between OP and the sibling subsequently ceased at the direction of AC.

Concerned about OP's wellbeing, the sibling contacted a helpline and spoke with an advocate. As the advocate was unable to speak directly with OP, further enquiries and research were undertaken. A family member (the sibling's child) subsequently applied for guardianship and requested that an independent third party be appointed as administrator.

At the time of writing, the guardianship and administration application remains pending.

4.2 Case study 2

An OP was admitted to hospital with a life-threatening illness and underwent surgery. Their recovery was expected to take several months. The day after the operation, while OP

remained in and out of consciousness and was experiencing significant pain, a lawyer attended the hospital and asked them to sign POA, medical treatment decision maker (MTDM) appointment and will.

OP signed the documents, despite their condition affecting their capacity to make these decisions. The documents were not adequately explained to them, and they were not offered the opportunity to obtain independent legal advice.

OP subsequently contacted the SRV helpline, where they were booked for legal and advocacy advice and the matter progressed to casework. The POA was revoked, and a new will was prepared.

4.3 Case study 3

An OP contacted the SRV helpline seeking assistance to recover a significant amount of money they had loaned to their adult child. During the call, OP disclosed that they had moved in with their adult child because of psychological, emotional and financial abuse by their partner. They had subsequently returned to live with their partner because of abuse from their child.

OP was booked for advice with a lawyer and advocate. During the appointment, OP made a comment about “favours” that alerted the social worker to the possibility of other forms of abuse. The advocate communicated their concerns to the lawyer and requested that the legal advice be truncated so that OP’s immediate safety could be assessed and addressed.

Further discussion identified significant sexual abuse. OP initially minimised the abuse, saying it was “nothing they couldn’t live with”. The advocate undertook a risk assessment and safety planning and referred OP to a local family violence service. The local service and SRV worked together to support OP.

The advocate assisted OP to identify where they wanted to live and located suitable private rental properties, as well as units being refurbished within a retirement village. OP also identified that being able to take their dog with them was essential. The advocate assisted them with an application for a new home.

OP subsequently disclosed that their partner had told her them would be removed from the home because they would not provide the sexual acts their partner requested. The local family violence service supported OP to attend the police station to seek an intervention order (IVO) and supported them through court proceedings. The service later disengaged when OP moved to another part of Victoria.

In their new area, the advocate supported OP to contact The Orange Door, which arranged crisis accommodation. OP remained in crisis accommodation for a further two weeks until their new unit was ready. When the perpetrator identified the location of their crisis accommodation through friends, the advocate again supported OP to contact police.

OP moved into secure accommodation with their dog and received ongoing support. Once their immediate safety had been addressed, legal action to recover the debt that had prompted their initial contact with SRV was resumed.