



Relational Remedy

A Peer Support Framework for the
Australian Antislavery Sector



ACKNOWLEDGEMENT OF COUNTRY

We acknowledge the Traditional Custodians of the lands on which we gather, read, or speak from; the unbroken caretakers of Country, culture, and community and we further recognise the continuing connection to those lands, waters, and communities.

We pay our deepest respects to Elders past and present and extend that respect to all First Nations people.

A message from Matilda

Survivor Connections Steering Committee Member

As a proud Wiradjuri woman, I honour the truth of our history, one that carries deep scars and yet endures with strength, wisdom, and resilience.

The impacts of modern slavery, domestic and financial abuse, and the forced removal of our children are not just personal experiences for me; they are woven into the generational trauma that too many of our people continue to carry.

The pain of having my own children taken was not an isolated moment, it was an echo of policies and systems that have long sought to fracture our families and our identity. But we are still here. Our voices remain strong.

Our people have always known that healing is found in connection – to land, to story, to each other.

Storytelling is more than the words we speak; it is how we pass down knowledge, bear witness to truth, and continue to create change. It is through sharing these truths, through listening and learning, that we walk forward together.

This work, this framework, is a step toward justice, but more importantly, it is a step toward healing. We must stand together, not just in policy but in practice, honouring the strength and survival of those who came before us and those who continue to rise.

May we walk this journey with open hearts, deep respect, and a commitment to building a future where no more children are lost, where no more families are broken, and where healing is not just hoped for, but made real in community.





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ABOUT SURVIVOR CONNECTIONS

Survivor Connections was established by survivors of modern slavery in Australia in February 2023. The initiative was developed in response to a critical need for peer connection, independent survivor advocacy, and support in navigating the often-fragmented service systems in long-term journeys of recovery.

Survivor Connections’ identity was built on independence and survivor leadership. The initiative maintained clear and intentional separation from government and civil society entities to protect its autonomy in development. Some of its members, however, also participated in the antislavery sector in other capacities.

Survivor Connections has remained independent, operating without internal ally participation or funding during its first years to ensure that survivors’ needs and perspectives were central to all of its processes.

With strong survivor leadership established in its foundational stages, Survivor Connections entered a new phase in November 2024. Since then, it has been documenting its purpose, policies, guiding principles, and operational processes for external entities, and defining future goals. During this process, it sought guidance from several trusted allies.

Survivor Connections acknowledges the contributions of the survivor community in supporting each other, all while navigating your own paths to recovery. Walking this journey with you has made this work possible. Your strength and courage inspire us to always strive for a system that delivers better outcomes for survivors.

Survivor Connections governance structure

Survivor Steering Committee	Sarah Schricker Moe Turaga Sarah Bouchet Sherry J. Wanjiru Matilda Constable-Webb Hyun Jin Kim
Ally advisers and support	Fiona David Corinne Baker

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Relational Remedy Peer Support Framework





ABOUT THIS FRAMEWORK

Peer support as an antislavery response

“When harm is relational, healing must be relational”

John Nehme, Allies Against Slavery

Experiences of modern slavery have a profound impact on a person’s functional and relational autonomy, along with self-perceived competence and relatedness, each of which are understood as basic psychological needs for wellbeing.¹ Perpetrators often weaponise core relationships of trust against people to deceive, trap, coerce, abuse, and exploit. Therefore, providing remedy for the harms of modern slavery must be approached in a way that *counteracts* those previous experiences of relational trauma.²

Relational Remedy

The **Relational Remedy Framework** for peer support was created by Survivor Connections in response to the need for a relational approach to recovery from experiences of modern slavery.

It recognises the unique capacity that survivors have to stand in solidarity with their peers. We learned that walking together can complement traditional service-recipient models, by providing the mutuality and reciprocity needed for relational healing.

Peers support providers draw on their lived experience to offer empathy and expertise. They help survivors navigate the challenges of accessing and engaging with service systems. Peer support offers opportunities to rebuild trust and reduce isolation. The emotional and practical support of peers can help survivors reconnect with the world in safe and meaningful ways, promoting empowerment and hope.³

Peer support can offer reciprocal benefits for the recovery, wellbeing, and connection of both the person being supported and the peer support worker.⁴

In developing this framework, Survivor Connections engaged with resources from adjacent sectors in which peer support is already practiced and with a rigorous evidence base from the literature.⁵

These were combined with learnings from reflective practice in responding to peer support needs within the growing survivor community in Australia throughout 2023-2025.⁶



Who is this framework for?

1

For people seeking to connect with community and engage in formal peer support within the antislavery sector

2

For funding entities seeking to understand the policies and practices of Survivor Connections' peer support framework

3

For service providers wishing to collaborate with peer support providers to optimise recovery outcomes for survivors of modern slavery

Guiding principles and values

In developing and delivering this peer support framework, Survivor Connections acknowledges the pervasive impacts of trauma on a person's sense of identity, connection to community, and society as a whole. We resist the influence of shame, judgement and victim-blaming in responses to people who have experienced modern slavery, or other types of violence or abuse.

We aim to practice in a way that is trauma transformative and dignity-affirming. The following principles and values guide our practice:



Create safety in environments and interactions



Build trust – not expected or given, earned and maintained



Create connection and collaboration



Build autonomy and self-determination



Provide mutuality and reciprocity



Promote accountability and integrity



Foster equity and inclusivity



ABOUT PEER SUPPORT

What is peer support?

Peer work is a unique and distinct discipline based on sharing experiences, modelling hope, empowerment, and mutuality. It attracts a diverse group of people who are prepared to use their personal lived experience to provide support.

'Peer Support Framework', Mind Australia 2021

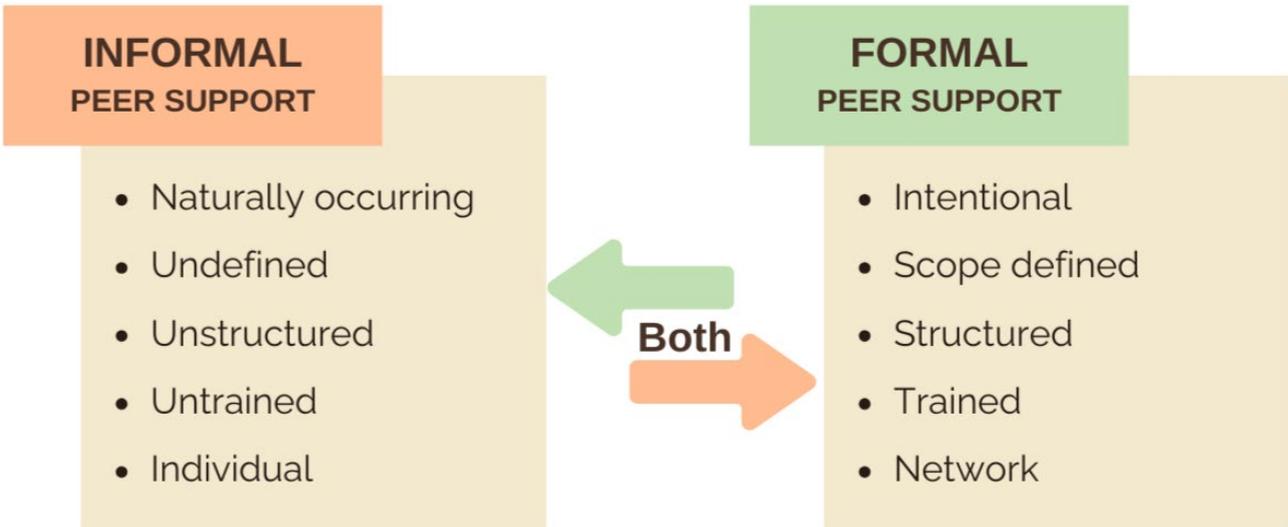
Peer support can be provided in several contexts. It may be shared among friends, on individual and informal bases.

Formal peer support, however, is intentional and structured,⁷ within a defined cohort and scope of practice.

This framework was developed from the evolution of peer support practices within the Australian survivor community, from informal support to a formalised approach.

Delivering peer support in a formal and intentional way ensures consistency, effectiveness, safety, and accountability. It also aims to enable collaboration with broader antislavery efforts.

Figure 1: Distinguishing between informal and formal peer support



Adapted from CBM Global Disability Inclusion



One of the primary challenges in formalising peer support is distinguishing between informal friendship dynamics and structured peer support roles.

Survivor Connections addresses this by:

Defining boundaries and expectations

- Implementing structured peer partnerships to ensure role clarity.
- Establishing feedback mechanisms and engaging clinical supervision and/or therapeutic support to identify and address conflicts between friendship and support roles. This helps ensure transparency and accountability in managing boundary challenges.

Managing trauma responses in peer support

Given the reciprocal nature of peer support, both the peer support providers and peer partner may experience trauma responses in engaging. Survivor Connections integrates a trauma-transformative approach by:

- Training peers to recognise trauma responses and engage in self-regulation and re-regulation strategies.
- Embedding external therapeutic support and clinical supervision for peer support providers to navigate trauma responses within a structured scope of practice.
- Aligning the provision of support with policies that foster trauma-responsive and transformative practice.

Providing connection safely

Facilitating meaningful connection without over-identification or projection of own lived experience is critical in providing peer support. Survivor Connections ensures safe engagement by:

- Establishing a spectrum of lived experience sharing, training peers to support, without imposing personal narratives.
- Recognising and respecting diverse recovery pathways to build autonomy and self-determination.
- Promoting self-empowerment through a “doing with, not for” approach, to build toward functional autonomy.



Recognising personal capacity and building relational skills

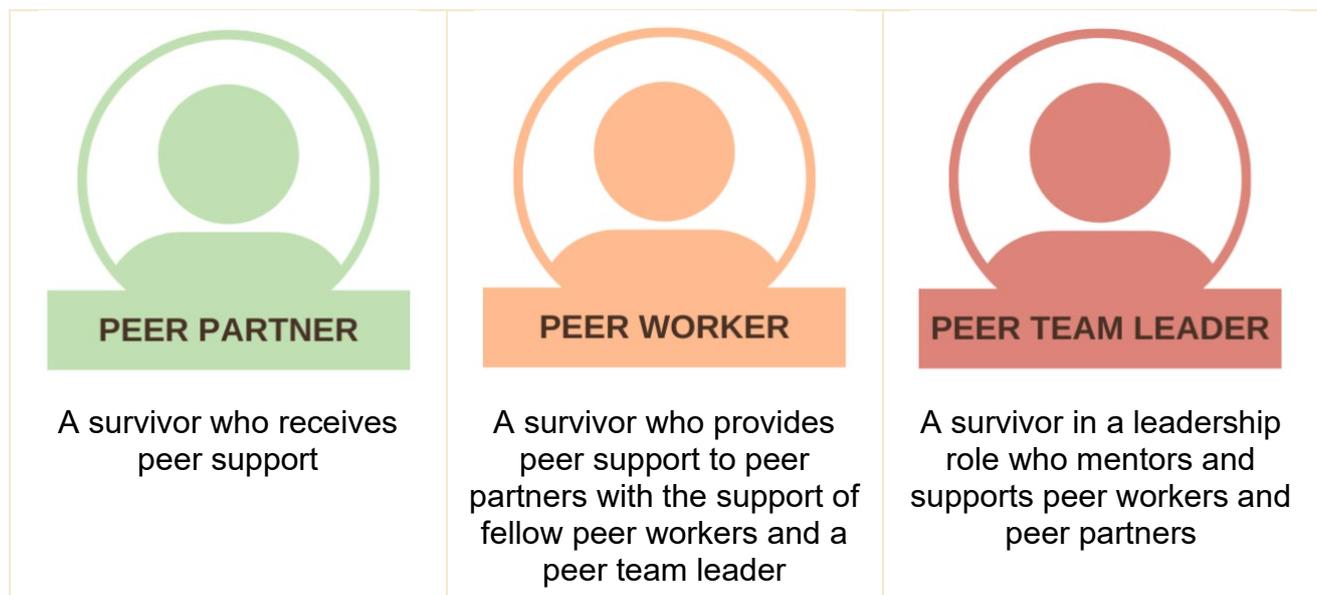
To maintain sustainable peer support, Survivor Connections emphasises the development of relational and self-regulation skills. This includes:

- Onboarding processes that include resources such as individualised Wellbeing Self-Assessment tools and Wellbeing Plans.
- Engaging with professional development and therapeutic support to develop proficiency in managing emotional and relational demands.
- Supporting relational healing – providing opportunity to address and reframe trauma-driven paradigms of relating to others, such as distress-driven connection, rejection hypervigilance, and fears of abandonment.

Who is a peer?

For the purposes of this framework, a peer is defined as a person with lived experience of modern slavery, human trafficking, or related exploitation.

In Survivor Connection's *Relational Remedy Framework*, a person can be a:





What is support?

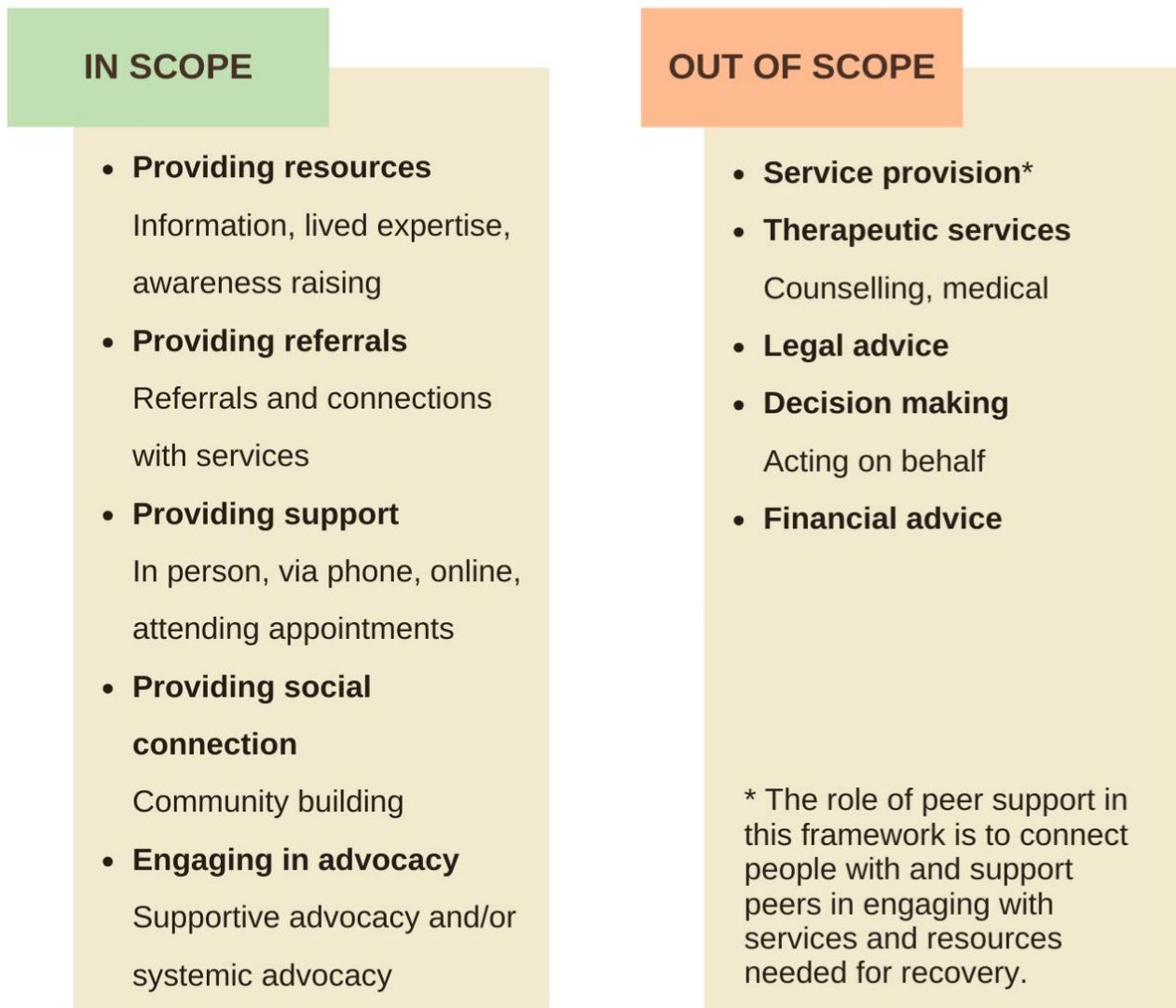
For the purposes of this framework, support provided can be social, emotional, or practical.⁸ This support is grounded in lived expertise of recovering from situations of modern slavery or related exploitation.

Peer support providers (workers or team leaders) may also *have learned experience and expertise*, such as professional qualifications, that make them subject matter experts in certain areas. For example, social work, financial advice, medical qualifications, therapeutic or legal qualifications.

While learned experience may inform decision making for referral pathways or support, the provision of peer support *must never* be conflated with the scope of other disciplines or be provided as a substitute for professional services.

The following activities are in and out of scope of the *Relational Remedy Framework* of peer support:

Figure 2: Definition of what is in scope and out of scope of peer support





RELATIONAL REMEDY FRAMEWORK

Aiding an individual to develop the ability to respond and take control, learn new things, reclaim their purpose, rediscover who they are through hope and possibility are all vital aspects of the peer worker role.

‘Valuing Lived Experience’, FNQ Peer Workforce, 2016

At Survivor Connections, we see peer support as walking alongside individuals in their quest for healing. Recovery from situations of modern slavery is not always a linear process. Progress and survivors’ capacity can change, with periods of growth, setbacks, or detours along the way. Our approach acknowledges these realities while celebrating progress in long term journeys of recovery.

Key components

The CHIME model⁹ informed Survivor Connections’ approach. This foundational framework synthesises research on recovery into five key components:

CONNECTEDNESS	Building supportive relationships and reducing isolation
HOPE	Cultivating optimism and belief in a positive future
IDENTITY	Reclaiming a sense of self beyond past experiences
MEANING IN LIFE	Finding purpose and direction
EMPOWERMENT	Gaining confidence, autonomy, and self-determination

These key components inform our practices, aiming to restore agency, build connections, and move toward **functional autonomy**.



Functions

The *Relational Remedy Framework* facilitates peer support through four key functions: Resource, Referral, Support, and Social.

Figure 3: Survivor Connections' functions



In incorporating these key components and functions in antislavery responses, Survivor Connections' *Relational Remedy Framework* identifies six *practice outcomes* that we believe make it possible to move along this scale, from just surviving, to thriving.

Figure 4: The healing scale





Outcome targets

It is impossible to achieve outcomes that we do not aim for or envision. Goals identified by peer partners become the target outcomes for each individual, reflecting their unique aspirations, priorities, and needs. By defining these goals, individuals take an active role in shaping their future. This ensures the support they receive and the connections they build align with their needs and desired outcomes.

The *Relational Remedy Framework* identifies six outcome targets that guide the delivery of meaningful results for survivors:

1	Meet core needs
Housing	Affordable, long-term.
Safety	Safety means different things to different people. It can be physical, emotional/psychological, or social safety.
Stability	Shifting circumstances undermine the stability needed to heal and work toward long term goals.
Connection	Isolation and loneliness increase risk of revictimisation.
Sustainability	Pathways to education, training, income or employment.
Purpose	Purpose fosters resilience, provides motivation and strength to fight for healing.

2	Provide hope
Learn from others	Believing that healing and thriving is possible because of shared journeys of recovery.
Centre a can-do attitude	Systemic barriers decimate hope. Peer support acknowledges the barriers, while finding ways forward with what 'can be done'.

3	Promote recovery
'Recovery' means different things to different people	Identifying goals and actively supporting someone to work towards them.
Solving root causes of harm is the focus	'Temporary' or short-term solutions lead to instability and limit recovery. Long-term solutions rather than 'band-aid' solutions are actively identified and pursued (for example, housing, income) to help people reclaim functional autonomy.



4	Facilitate relational healing
Discover identity and authenticity	As opposed to referencing the demands of others.
Practise new communication skills	Learning to express needs and boundaries.
Identify safe interactions	Learning to identify interactions that allow trust to grow, and are reliable, transparent, kind, responsive and respectful of needs.
Learn to navigate conflict	Learning to express needs, set boundaries, and regulate emotions. Learning that disagreement can be navigated in respectful ways.

5	Affirm dignity
Acknowledge	Acknowledging individual lived experience but seeing the person beyond the trauma.
Deconstruct shame	Deconstructing shame among peers can help support people in recognising that what happened to them doesn't define them. It can foster self-compassion and understanding that trauma does not make them unworthy or unlovable.
Create opportunities	Creating a range of opportunities for peers to realise goals and dreams that are important to them.
Provide feedback and validation	This is critical to someone who's sense of worth has been systematically decimated.

6	Develop functional autonomy
Empower choice	Supporting someone to consider all options available to them.
Identify priorities	Supporting someone to identify priorities when complex needs become overwhelming.
Create a safe space to practice making own decisions	Celebrate a 'no' and boundary setting, foster a culture of learning, even from mistakes.
Support exploration	Supporting to explore decision/outcome correlations.



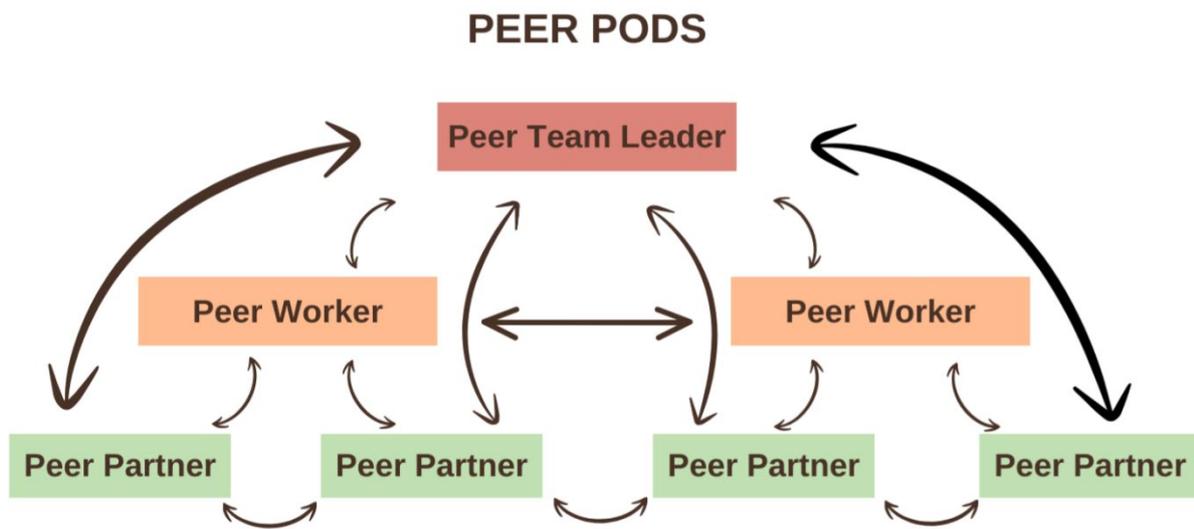
RELATIONAL REMEDY STRUCTURE

Survivor Connections aims to address isolation and disconnection by offering a structured support network and community engagement opportunities.

Peer pods

Survivor Connections uses a Peer Pod structure to deliver peer support:

Figure 5: Peer Pod structure



Introductions and the peer partnering process in onboarding provide an opportunity to assess if a match is suitable for both the peer worker and peer partner. Alternatives are provided if needed.

The process of being matched with a peer worker within a Peer Pod will consider compatibility based on lived experience, and cultural, social, and trauma needs.

“It has been life changing, I would not have reached this far without the survivor community. All the help I have received so far has been through the efforts and referral from the community.”

Survivor Connections participant





For peer support to be mutually restorative and sustainable it must respond to:

Needs of Peer Workers and Peer Team Leaders (Providers)	
 <p>PEER WORKER PEER TEAM LEADER</p>	<p>Peer support providers must balance supporting others, with their own recovery needs. This requires access to support and the flexibility to step back when needed. Complex trauma can trigger survivor guilt, caregiver instincts, or an excessive sense of responsibility, making this challenging.</p>
Needs of Peer Partners	
 <p>PEER PARTNER</p>	<p>Building trust and connections is not easy for people who have experienced complex trauma. Changes to established relationships of trust can trigger betrayal or abandonment trauma, causing disengagement or re-isolation.</p>

Processes must be implemented to mitigate risks for co-dependence, re-traumatisation, and burnout with regard to the needs of both peer workers and peer partners.

The Peer Pod model ensures that peer partners build trust within a network of peers, rather than relying on a single peer worker. This allows peer workers to prioritise their own needs, when necessary, without disrupting support.

Peer partners can regularly connect with others socially and check in with the pod team leader, fostering trust and open feedback early on. If a peer worker needs to step back for a time, the team leader – who has an established relationship with the peer partner – can step in, ensuring continued support. Meanwhile, peer partners maintain social connections within their pod, preventing a sense of disconnection, which can be re-traumatising.

“The survivor community is crucial. To be seen and supported without stigma, sensationalism and shame by others who have shared similar experiences is so powerful.

It makes me feel seen, it reminds me of my strength, and I feel immense pride when I am in a position to support others in their journey to recovery.”

Survivor Connections participant





Levels of support

For survivors to make progress toward functional autonomy, they may require different levels of support at various times and may move between the different levels.

Intensive support - Proactive

During times of increased stress or crises, individuals may find it challenging to seek support or feel overwhelmed when trying to follow up on matters. In these situations, support is *proactively* offered by the peer worker/team leader. Support and referrals are offered and organised if accepted, and actions sequenced as per the person's priorities to reduce the risk of the peer being overwhelmed. For suicidality, risk to life, or risk to a child – critical incident management protocols apply.

Support offered

- Daily check in - text / talk
- In person support (at hospital or with police)
- Escalate / liaise with professional support / services as required

Shared support - Active

At this level of support, a peer worker and partner share mutual agreement about what is helpful. Support offered is needs-based and peer partner-led. Peer workers actively follow up referrals with team leaders and provide ongoing support, being aware of time critical needs (for example, housing/accommodation option ending, visa expiring, etc.).

Support offered

- Minimum weekly check in - text / talk
- Peer partner directed support and referrals

Connected support - Reactive

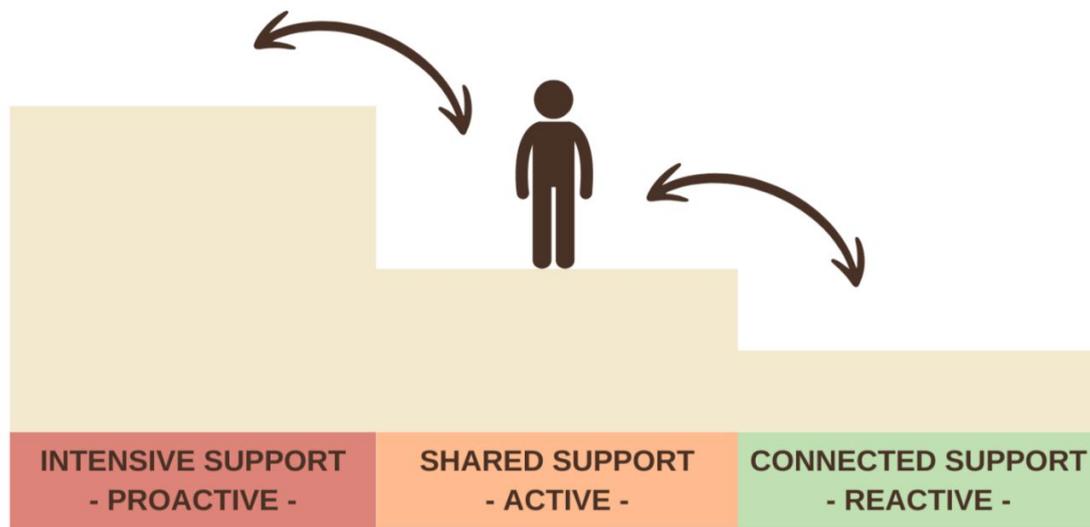
At this level of support, a peer partner's essential needs are met, but emotional support and social connection is provided. Peer support providers acknowledge and celebrate progress and successes with the peer partner.

Support offered

- Unstructured but present
- Celebrate progress
- Facilitate social connection



Figure 6: Levels of support



Changes in the level of support required are identified based on needs, either by peer partners or peer providers. These changes are discussed and documented collaboratively.

Critical incidents, such as threat to life, risk of harm to a child, medical emergencies or sudden homelessness, are responded to via separate protocols, regardless of the level of support a peer is engaged in.

Responses must follow relevant emergency protocols but must also be escalated to a team leader as soon as practicable. Whenever possible, the team leader will escalate concerns to relevant service providers or emergency services, in accordance with internal protocols and legal requirements, to ensure appropriate action and support.

Critical incident management and resulting changes in levels of support must be documented and followed up as per internal protocols.

“The only reason I have been able to access services was because another survivor introduced me to them. There are several other survivors who were only able to access support because of me.

I shared my knowledge about resources with them and helped them access the service. We have been supporting survivors on voluntary basis, unpaid and often used our own money to support others in emergencies.

With the right co-designed structures survivors have a lot of knowledge to offer to identify and offer peer support to other victim-survivors.”

Survivor Connections participant





RELATIONAL REMEDY

PROCESS OF CONNECTING AND SUPPORTING

Transparency and self-determination in engagement

To address the relational harm caused by modern slavery, where individuals are entrapped through deception, coercion, and force, relational healing must provide opportunities for experiences that rebuild trust, autonomy, and empowerment.

The *Relational Remedy Framework* aims to achieve this in the following ways:

Clear information and transparent processes

To build trust, participants receive:

- Clear information about the provision of peer support and options for participation throughout the onboarding process and the duration of their membership.
- A personalised Participation Plan is collaboratively developed. This allows peers to decide how they engage.
- Regular opportunities to connect with other peer partners, peer workers, and team leaders to ask questions and give feedback are provided.

Freedom to engage, disengage, and re-engage

- As healing is different for everyone, participants have the choice to engage, disengage, and reengage as needed, without pressure or penalty.

Ongoing informed consent

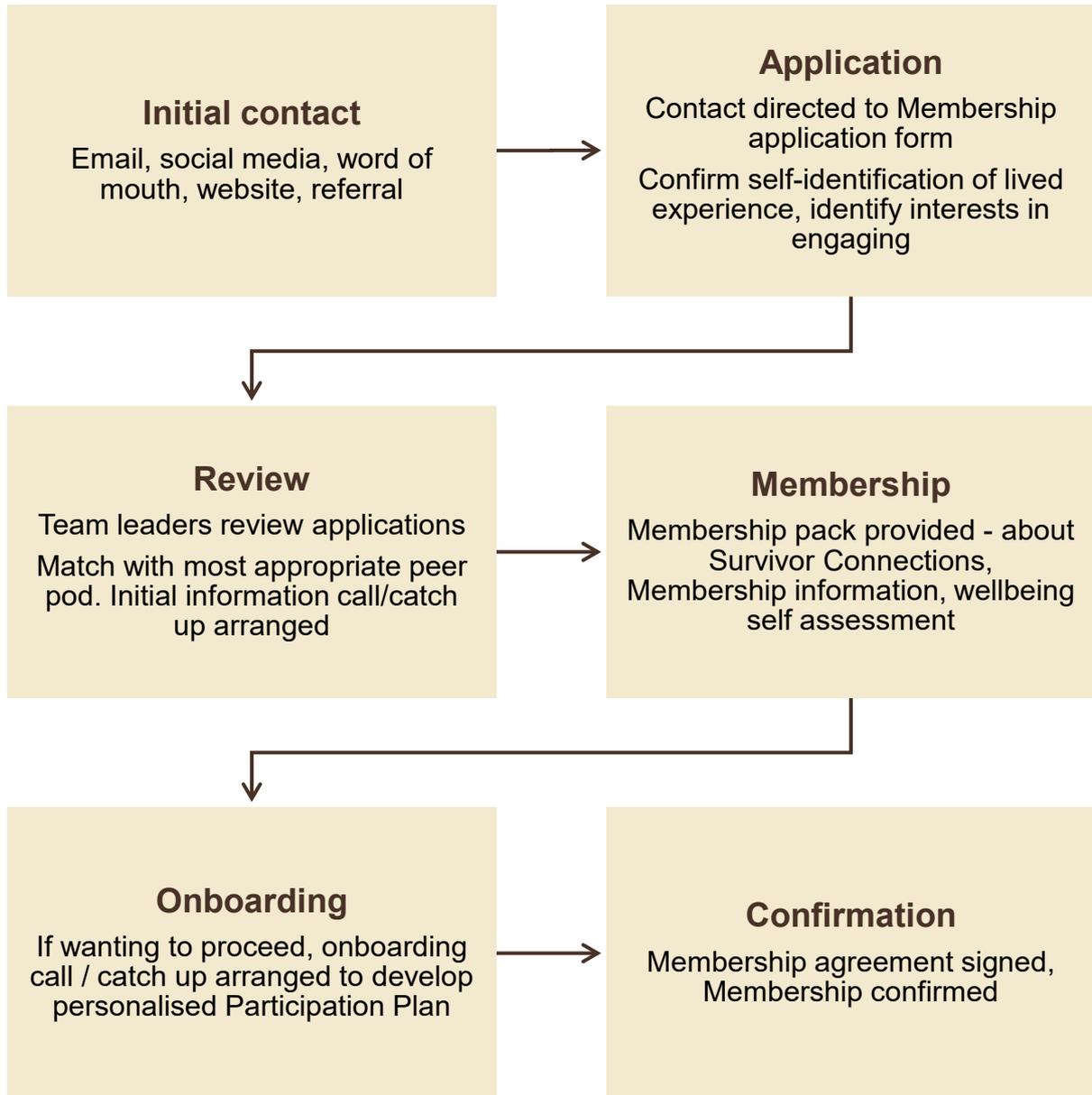
Consent is not a one-time decision but a continuous process. Participants are regularly:

- Given opportunities to review and adjust their participation.
- Encouraged to express concerns and preferences.
- Supported in making informed choices that align with their needs.
- Each time consent is obtained, clear information is provided on how to withdraw it.



Membership process

Figure 7: Survivor Connections' membership process





Participation plans

People with lived experience can engage as members of Survivor Connections in different ways. As part of the onboarding process, all members develop an individual **Participation Plan**, which guides their engagement. This plan supports their personal goals, preferences, and areas of interest in peer support and advocacy.

All members have access to:

Function 1: Resources

Lived expertise, key information and materials to support their healing journey.

Additionally, they can engage in:

Function 4: Social activities

Fostering community connection and mutual support.

Members are also invited to participate in advocacy projects that Survivor Connections is actively engaged in. In this way, they can contribute to systemic change and survivor-led initiatives.

If survivors wish to participate in Survivor Connections' *Relational Remedy Framework* for peer support, they can do so in two ways:



**As a Peer Partner
receiving support**



**As a Peer Worker or Peer Team Leader
providing support**



In the *Relational Remedy Framework*, peer support is delivered under two functions:

Function 2: Referral

This function responds to the needs of peers, connecting them with appropriate services or professional support in their recovery journey. This may include healthcare, mental health support, housing services, legal assistance, and other community resources.

If a direct referral to a service is to be made, it must be within scope for a peer organisation (e.g. referrals requiring medical/qualified assessments are not in scope). If this is the case, the peer team leader may support a peer partner by directing them to the appropriate provider for the referral.

Referrals that are in scope are made by the peer team leader in collaboration with the peer partner, ensuring informed choice, consent, and alignment with their needs and goals.

Function 3: Support

Support functions are primarily provided by the peer workers but are supported by peer team leaders. Support provided can be individual or group based, and can include actions such as assistance or accompaniment at appointments, provision of support letters and debriefing or problem solving support.

It also offers a safe space for listening, planning, and identifying needs and goals via phone, text, online meetings or in person.

Individualised Participation Plans are regularly reviewed and ensure that members can engage in ways that align with their capacity, needs, and goals. This reinforces Survivor Connections' commitment to empowerment and peer-led support.

“Having Survivor Connections was incredibly important to me. Without it, I don't know what I would have done”

Survivor Connections participant





Maintaining wellbeing

Peer support cannot be effective without focusing on individual wellbeing. Burnout, vicarious trauma, compassion fatigue, and emotional exhaustion are significant risks, making self-care and professional support essential.

Wellbeing self-assessment

To promote sustainable wellbeing, all members complete a wellbeing self-assessment during the onboarding process. This centres self-determination and equips potential peer partners and peer support providers with knowledge and tools aiming to maintain wellbeing. These assessments are reviewed quarterly to help identify stressors and areas requiring additional support. Changing needs can also be escalated to team leaders or therapeutic service providers at any time.

Wellbeing Plan

The wellbeing self-assessment provides the basis for an individualised Wellbeing Plan as a part of the onboarding process. It focuses on strategies for trauma management, self-care, and professional development. This ensures that wellbeing remains a priority and aligns with the member's personal needs and circumstances.

Clinical supervision and/or therapeutic support

Clinical supervision and/or therapeutic support is mandatory for peer support providers under the *Relational Remedy Framework*. Regular engagement with supervision or therapeutic support provides a structured space for reflection, emotional processing, and professional growth, ensuring that peer workers can continue to provide safe and effective support.

Documentation

All relevant information must be documented according to internal protocols on the secure database. This includes:

- Membership and onboarding processes
- Individual Participant Plans
- Wellbeing Plans
- Training/professional development records
- File notes when relevant
- Delivery of support and referrals documentation
- Critical incidents reports.



ROLES AND RESPONSIBILITIES

Rights and responsibilities in engagement

In engaging with peer support, all participants have the right to be heard, respected, and to share their experiences in their own words. They have a right to do so without fear of judgment, shame, or pressure to disclose more than they are comfortable to.

Members must respect diverse perspectives, use caring language, avoid assumptions or comparisons, and honour personal boundaries. A safe, inclusive, and supportive environment relies on mutual respect, mindful communication, and a commitment to learning and healing together.

Survivor Connections developed the [Brave Space Guidelines](#) to ensure that participants' rights are respected and that everyone shares responsibility for fostering a safe and supportive environment.

Peer roles

Peer Partner	
	<ul style="list-style-type: none"> • Complete membership onboarding. • Complete wellbeing plan. • Complete participation plan. • Access to resources. • Engage in peer support (optional). • Engage in social activities (optional). • Engage in systemic advocacy activities (optional).
Peer Worker	
	<ul style="list-style-type: none"> • Complete all onboarding and mandatory training. • Complete vetting process to provide support. • Complete wellbeing plan, engage in clinical supervision and/or therapeutic support. • Engage in monthly practice update and quarterly professional development training. • Identify referral needs – liaise with team leader to refer. • Provide peer support within scope of practice. • Organise monthly peer pod social activities (alternating roster). • Engage in systemic advocacy activities (optional).



Peer Team Leader



PEER TEAM LEADER

- Complete vetting process, all onboarding training, mandatory training, and additional responsibilities training.
- Complete wellbeing plan, engage in leadership mentorship, clinical supervision and/or therapeutic support.
- Prepare and facilitate monthly practice updates and organise the quarterly professional training sessions (rotational roster with team leaders).
- Membership onboarding: screen applications, allocation to peer pod, prepare Participation Plan collaboratively (worker/partner).
- Liaise with peer workers regarding referral needs: if referral is in scope, it is approved, consent forms completed and referral actioned, documented, and followed up. If out of scope, link peer partner with the right provider for the referral.
- Weekly catch-up with peer workers, monthly catch up with peer partners, support/mentorship of peer workers who are organising monthly social activity.
- Risk assessment and mitigation strategy – documentation maintained.
- Monitoring and evaluation – documentation maintained.
- Liaising with management team, board, ally partners to maintain delivery of functions.
- Participate in and/or organise systemic advocacy activities (optional).

“A lot of organisations have a risk averse attitude towards survivor peer support. But survivor peer support is really powerful and transformative.

Just like clinicians, peer support providers need training and support. More investment should be made to support grassroots efforts to flourish!”

Survivor Connections participant





ONBOARDING AND TRAINING

Onboarding resources

For all members

Training modules are optional for peer partners unless representing Survivor Connections in systemic advocacy activities

Membership process

- Welcome to Survivor Connections
- Develop Participation Plan (Resource, Referral, Support, Social, and optional systemic advocacy)
- Membership Code of Conduct agreement

Wellbeing onboarding

- Complete Wellbeing Self-assessment and Plan
- Brave Space Guidelines
- Privacy and confidentiality

‘Understanding modern slavery’ module

‘Ethical storytelling, empowered advocacy’ module

Mandatory training

For Peer Workers and Peer Team Leaders

- Mental Health First Aid Certificate (external provider)
- Basic Life Support Certificate (external provider)
- Mandatory Reporter Accreditation (external provider)
- Cultural competence training (external provider)

‘Relational Remedy’ module: Delivering formal peer support

1. Scope of formal peer support
2. Professional Practice – Confidentiality and informed consent
3. Roles and responsibilities – Functions: Resource, Referral, Support, Social
4. Assessing for and responding to risk (escalation model)
5. Relational basics: centring autonomy, accountability and feedback, communication skills, building trust, boundaries, responding to conflict, asking for help
6. Reflective practice



‘Trauma transformative practice’ module: towards healing

1. Responding to disclosures
2. Trauma basics (physical and psychosocial)
3. Identifying trauma responses
4. Responding to trauma: validate, de-escalate, re-regulate
5. Managing vicarious trauma
6. Principles of post-traumatic growth

‘Navigating systems and services’ module

- Accessing resources and services, in and outside of the antislavery sector

‘Communication styles and strengths’ module

‘Documentation protocols’ module

Additional responsibilities training

For peer team leaders

- ‘Responding to needs: referral competency’ module
- ‘Responding to critical incidents’ module
- ‘Additional problem-solving’ module: resolving conflict, systemic barriers
- Fostering continuous improvement: monitoring and evaluation processes

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Engaging with the Framework

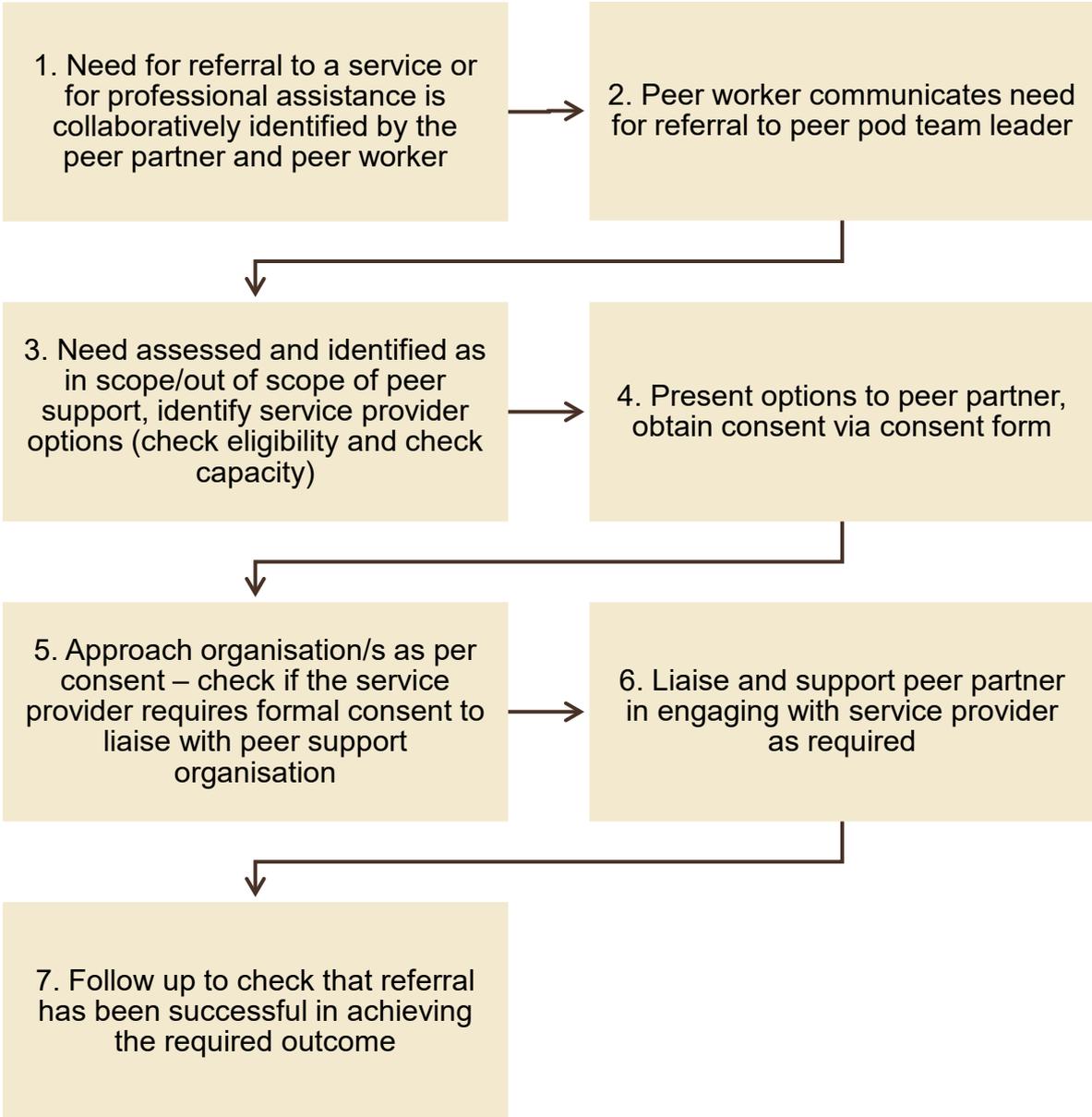




WORKING WITH SERVICES

Referral process

Figure 8: Survivor Connections' referral process

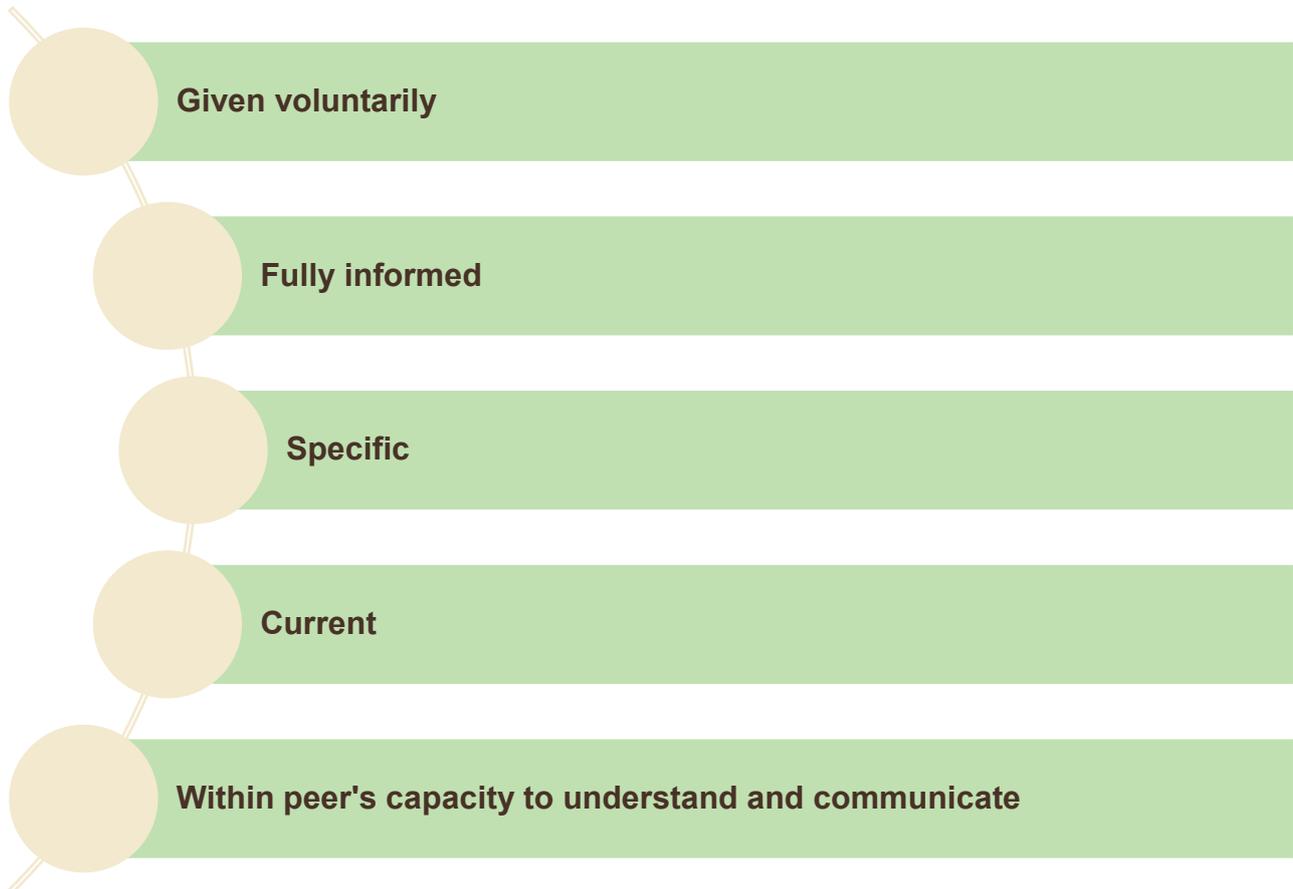




Obtaining consent

Consent obtained must be explicit, not implied or assumed, and must be appropriately documented by the peer worker/team leader as per internal protocols. In obtaining consent peer workers and team leaders are mindful that the consent must be¹⁰:

Figure 9: Consent checklist



Every effort must be made to ensure that consent is given at a time when a peer is not activated, in a trauma response, or affected by any other factors that may impair their decision-making capacity.

These factors may include emotional distress, cognitive overload, substance use, or external pressures that could compromise their ability to fully understand and voluntarily agree to the decision.

Ensuring a calm, supportive, and informed environment allows for meaningful and ethical consent, respecting the peer's autonomy and wellbeing.



Maintaining confidentiality

Maintaining confidentiality in peer support contexts presents unique challenges, due to the personal nature of interactions and the trust built. Peers often share more personal details than in traditional service settings, making it crucial to handle information ethically and responsibly. Documentation regarding consent, referrals, critical incidents, and Participant Plans must be stored via approved and secured processes, as per internal protocols.

Survivor Connections is guided by the following process to maintain confidentiality when supporting peers:

1. Set clear confidentiality expectations

Peers are informed about what can and cannot be kept confidential, including legal or ethical exceptions (for example, risk of harm to a child, risk to life).

2. Obtain explicit consent

Peer workers/team leaders ensure that peer partners clearly understand what information will be shared in referrals and get their informed consent before passing on any details to services. Informed consent is documented as per internal protocols and legal requirement.

3. Information sharing

Team leaders share only necessary details required for referrals, avoiding unnecessary personal disclosures. Clear information will be available to peer partners about situations in which information sharing outside of agreed paradigms may be legally required.

4. Maintain boundaries

Peer support providers remain mindful of professional boundaries while offering support. This can be challenging due to close relationships and extended time spent with peer partners.

5. Use secure communication processes

Peer support providers store and transmit information securely, following established internal protocols to protect privacy.

6. Seek supervision and training

Peer workers / team leaders regularly engage with ally advisers and training to navigate confidentiality challenges effectively.



ADVOCACY

Supportive advocacy

In contexts in which power imbalances exist (for example, service provider to beneficiary), supportive advocacy plays a crucial role in ensuring that services are inclusive, effective, and responsive.

By addressing potential risks of marginalisation (for example, racism, language barriers, poverty, stigma, or victim blaming), peer support providers can help to build trust with services, improve communication, and enhance outcomes for those they support.

Supportive advocacy does not override a person's autonomy but empowers them to be heard, make informed decisions, and fully engage with services. This contributes to stronger relationships between service providers and individuals, leading to more equitable, person-centred support. Key advocacy activities may include:

Ensuring accountability

Helping to identify and address conflicts between the peer's needs and service priorities, supporting them if they face inconsistencies, and acting as a witness in interactions.

Promoting safety

Raising and escalating concerns if service plans or actions do not meet needs or compromise the safety or wellbeing of a peer partner.

Addressing marginalisation

Advocating for equitable support when a person is underserved or disadvantaged by systemic barriers.

Facilitating communication

Ensuring that a peer partner is heard and not ignored, spoken over, or dismissed. This may involve redirecting conversations to their concerns, reiterating their points, or providing support to ensure cultural preferences and needs are respected.

Peer supportive advocacy aims to enhance the effectiveness of antislavery efforts and improve long-term outcomes for survivors.



Systemic advocacy

Survivor Connections is an independent, survivor-led initiative and is committed to engaging in systemic advocacy. All members may engage in systemic and independent advocacy as per the Code of Conduct in their membership agreement. If they are representing Survivor Connections in advocacy activities, they must have completed their onboarding resources, including the 'Understanding modern slavery' and 'Ethical storytelling, empowered advocacy' modules.



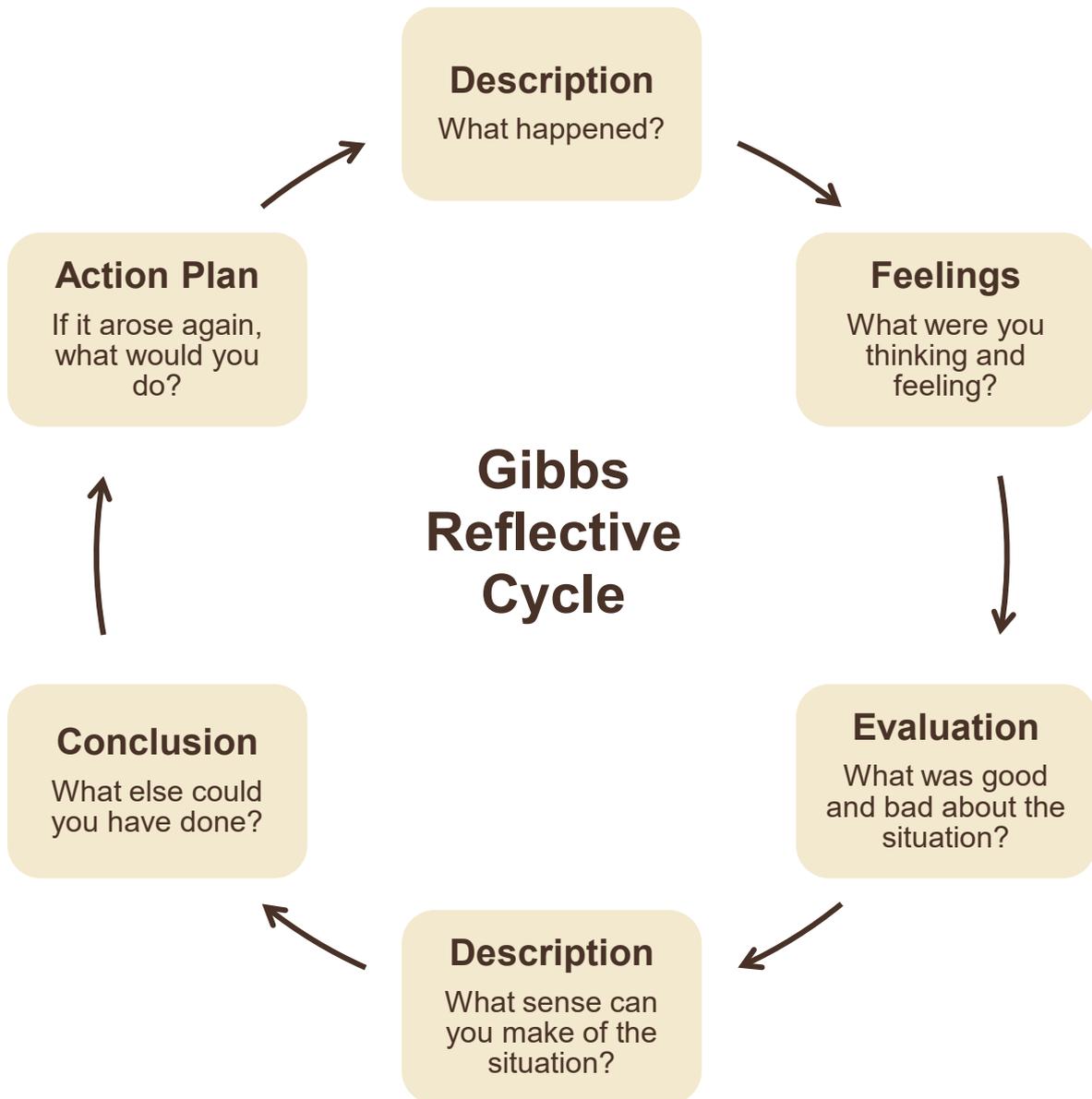
FEEDBACK MECHANISMS

Reflective practice

Evidence-based, best practice is always evolving. Reflective practice, which is the practice of regularly assessing and learning from experiences, guides Survivor Connections' approach to continuous improvement.

Survivor Connections uses the Gibbs Reflective Cycle¹¹ to centre a culture of learning. It embeds it in personal professional practice, routine practice updates, and professional development activities to ensure ongoing growth and improvement.

Figure 10: Gibbs Reflective Cycle





Communication channels

Communication is essential for human connection, fostering understanding, maintaining trust, and resolving conflict. Trauma can impact on a person's ability and confidence to communicate, making regular opportunities for communication essential.

Structured communication channels will be established within Survivor Connections' functions, depending on a member's participation plan and the role they have within the organisation. Establishing strong communication channels during stable periods increases the likelihood that peers will be able to raise concerns, provide timely feedback, or effectively address challenges in times of crisis or conflict.

At Survivor Connections, we cultivate a learning culture, recognising that trauma can make communication challenging, particularly around giving/receiving feedback and navigating conflict. To support recovery, we embed structured, learning-based approaches across our operations that are shame/blame sensitive.

We encourage and celebrate the practice of voicing needs, feelings, and boundaries, as modern slavery often disrupts these relational skills. Healing within a supportive community enables peers to rebuild and strengthen these abilities together.

Accountability and complaints mechanism

1

All members are subject to the Code of Conduct as signed in their membership agreement.

2

Peer partners and peer workers can raise concerns with their Peer Pod Team Leader in the first instance.

3

If it is not possible to raise or resolve issues within the relevant Peer Pod structure, there are two other points of contact to provide feedback or raise complaints:

- One in Survivor Connections' management (board appointed)
- One ally partner

This approach aims to ensure there is always a place to provide feedback or raise complaints without conflict.

Complaints will be responded to as outlined in the membership agreement and as per legal obligations.

Accessible and usable feedback mechanisms are a key way in which Survivor Connections will foster a culture of learning, accountability, and model continuous improvement in its work.



GLOSSARY

These definitions are used by the Survivor Connections community in the specific context of survivors of modern slavery and this framework. The terms may be interpreted in other sectors or contexts differently or with other nuances.

General recovery and trauma terms

Abandonment trauma	Deep emotional distress caused by past experiences of being neglected, rejected, or left by caregivers or loved ones. It can lead to fear of rejection, insecurity, and can create challenges in forming healthy relationships.
Acceptance	A process of acknowledging and validating past trauma while focusing on healing and rebuilding one's life.
Activated	A physical or psychosocial response to a trauma related stressor.
Advocacy	Speaking up for rights, justice, and better support for those affected by and recovering from modern slavery.
Belonging	The deep feeling of being accepted, valued, and connected to a group, community, or relationship where one feels safe and understood.
Betrayal trauma	The emotional distress caused by being betrayed or perceived betrayal by a trusted person or entity, such as a partner, friend, caregiver or service providers/systems responses. It can lead to feelings of shock, distrust, and difficulty forming secure relationships.
Connection	A meaningful bond, built on mutual understanding, trust, and shared experiences.
Co-dependency	Part of a trauma response that can cause someone to become very dependent on someone else for support, limiting their opportunity to build functional autonomy.
Dignity-affirming	Actions, attitudes, or practices that respect and uphold an individual's inherent worth, validating their experiences without blame, and promoting self-respect and empowerment.
Functional autonomy	The ability to thrive, reclaim personal agency, and achieve individual goals for recovery, productivity and fulfillment.
Intersectionality	The overlap between different forms of abuse, disadvantage, discrimination, or marginalisation that can make people vulnerable to exploitation or victimisation. Intersectionality considers how power intersects within systems and structures to create overlapping forms of discrimination, oppression, or disadvantage that can impact an individual, a group of people, or a community, based on gender, sex,



	sexual orientation, ethnicity, language, religion, class, socioeconomic status, ability or age, among other characteristics. ¹²
Intergenerational trauma	Trauma that affects not just an individual but also previous and/or future generations, impacting families and communities.
Lateral violence	When peers harm or undermine other peers instead of uniting against systems of oppression.
Perpetrator	A person who victimises others with exploitation, violence, or abuse. Perpetrators can play many roles in a person's life. They can be family, friends, a boss, a partner, or a stranger. Close relationships can make it difficult to identify perpetrators in some situations.
Post-traumatic growth	Personal growth that occurs as a result of overcoming the impacts of trauma and abuse, leading to increased resilience, personal strength, and purpose for life.
Recovery	The process of healing from trauma, reclaiming voice, and rebuilding functional autonomy.
Rejection hypervigilance	A heightened sensitivity to perceived or actual rejection, often leading to distress and defensive behaviours to avoid rejection.
Relational	This term refers to the way people connect, interact, and build relationships, especially in the context of healing from trauma through supportive and meaningful connections with others.
Relational Remedy Framework	The formal peer support framework developed by Survivor Connections, using a relational approach to recovering from experiences of modern slavery.
Remedy	In the context of recovery from trauma and modern slavery, remedy can be legal, psychological, social, or medical measures provided to survivors to restore their rights, wellbeing, and dignity. A comprehensive remedy aims to address both the immediate and long-term impacts of exploitation and trauma, ensuring survivors receive justice, protection, and the support needed to rebuild their lives.
Re-traumatisation	When someone is exposed to a situation that is similar to past traumatic experiences, adding new layers of trauma.
Reasonable adjustment	Adjustments in access to participation that allow peers to maximise their potential to engage in recovery, work, or peer support in an empowered and safe way.
Shame	A deep, distressing feeling of being fundamentally flawed, unworthy, or inadequate. It is often created and reinforced by experiences of trauma, abuse and societal victim blaming.
Trauma	A physical, emotional, and/or psychosocial response to a distressing experience that overwhelms an individual's ability to cope, forcing them into a crisis of survival.



Trauma transformative practice	The ability to translate trauma-informed principles into practices that respond to trauma in a way that focuses on healing, empowerment, and long-term recovery.
Wellbeing	Encompasses quality of life and the ability of people and communities to contribute to the world with a sense of meaning and purpose. ¹³

Lived experience and peer support terms

Lived experience	In this document, lived experience refers to the firsthand knowledge of modern slavery, human trafficking, or related exploitation.
Lived expertise	Lived experience that has been translated into expertise that can help improve policies, services, and solutions for people recovering from modern slavery.
Learned experience / expertise	Knowledge of something through education, training, or work/volunteering. ¹⁴
Participation Plan	A personalised plan created to reflect a person's interests and needs in participating as a Survivor Connections member.
Peer Partner	A survivor who receives peer support.
Peer Support Provider	A survivor who engages in the provision of peer support under Survivor Connections' <i>Relational Remedy Framework</i> .
Peer Team Leader	A survivor in a leadership role who mentors and supports peer workers and peer partners.
Peer Worker	A survivor who provides peer support to peer partners with the support of fellow peer workers and a peer team leader.



Modern slavery and exploitation terms

Modern slavery involves the use of force, fraud, or coercion to exploit someone for personal or commercial profit.¹⁵

Modern slavery and slavery-like practices	Crimes that involve one person treating another as if they owned them. It removes a person's agency and choice about their own life.
Forced marriage	When one or both people are pressured into a marriage against their will. The people being forced to marry may be adults or children, and may be coerced, forced, or tricked into a marriage by their families, communities, or other parties.
Forced labour	When someone is made to work because of force, fraud, or coercion. The International Labour Organisation has developed resources to help people identify forced labour with <u>11 indicators</u> . ¹⁶
Servitude	Situations in which someone is forced, tricked, or coerced to work or provide services. They are made to believe they are not free to leave or stop working or providing services.
Sexual servitude	A type of modern slavery where someone is made to provide sexual services because of force or threats. This could be in person or online.
Deceptive recruitment	When someone is tricked about the nature or conditions of work they are being recruited for.
Debt bondage	When someone is forced to work to pay off a debt without defining how to repay it. It is difficult or even impossible to repay the debt in a way that is fair and/or reasonable.



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End notes

¹ As noted in the literature review prepared to support the development of this framework, the well-established Basic Psychological Needs (BPN) framework argues that individuals have three fundamental needs that are crucial for wellbeing: autonomy, relatedness, and competence. See further: Deci & Ryan, 2000.

² *Remedy as Relational*, Journal of Modern Slavery.

³ On the important role of peer support in providing engagement and emotional support, the literature notes that the engagement role involves building trust, reducing isolation, and engaging people in services, while the emotional role contributes to empowerment, hope, comfort, and again building trust. See further: Cooper et al., 2019; Mikolajczak-Degrauwe et al., 2023; de Beer et al., 2024; Konya et al., 2020; de Ven et al., 2023; Shalaby & Agyapong, 2020; Smit et al., 2023; Charles et al., 2020; Burke et al., 2019; Mutschler et al., 2022.

⁴ On reciprocity, see further Shalaby & Agyapong, 2020; Konya et al., 2020; Watson, 2019; Smit et al., 2023; Burke et al., 2019; de Ven et al., 2023.

⁵ Shannon Hobbs, Sherry Wanjiru, Fiona David, The Potential of Peer Support in Recovery from Modern Slavery: A Rapid Review, 2025, available at www.fairfutures.com.

⁶ See Survivor Connections' Action Summary February 2023 – February 2025

⁷ Wellways Peer Workforce Framework 2019.

⁸ *Community Mental Health Good Practice Guide: Peer Support* – CBM Global disability Inclusion.

⁹ Leamy et al - Conceptual framework for personal recovery in mental health: Systematic review and narrative synthesis, 2011.

¹⁰ Information and Privacy Commission NSW, 2025.

¹¹ Gibbs, 1988.

¹² Maram Framework, Victorian Government, 2019.

¹³ Health Promotion Glossary of Terms, WHO, 2021.

¹⁴ Lived Experience Engagement and Employment Framework – NHS August 2024.

¹⁵ Anti-slavery International, 2025.

¹⁶ International Labour Organisation, 2012.