

## **Essential Foundations** for Sexual Assault Workers

### **Trauma & Resistance: Innovative Responses to Oppression, Violence and Suffering**

***Presenter:*** Vikki Reynolds

**Date:** Monday 18<sup>th</sup> March 2019

***from*** 9.30am – 4.30pm

***at*** Queen Victoria Women's Centre  
210 Lonsdale St  
Melbourne

In this experiential workshop, Vikki offers an alternative approach to work with 'trauma', from a decolonising anti-oppression stance which focuses on the resistance of victims of violence and oppression. Honouring the wisdom of the people we work alongside with in their responses to trauma brings forward their agency and wisdom.

### **Workshop Objectives**

- Gain familiarity with the witnessing approach to therapy
- Identify ways of structuring safety as the foundation of the work.
- Gain insight into alternative understandings of 'trauma' that resist normalizing practice of re-framing oppression, harm and suffering as personal deficit and disguising acts of resistance as trauma and pathology symptoms.

**To register for this workshop - fax registrations forms to 99288749 or email  
[Secasa@monashhealth.org](mailto:Secasa@monashhealth.org)**

**For more information about this workshop please contact**

Sarah McGregor, Training Co-ordinator,

Statewide Sexual Assault Workforce Development

email [sarah.mcgregor@monashhealth.org](mailto:sarah.mcgregor@monashhealth.org) or phone 99288741 Mon- wed



**CASA Forum**  
Victorian Centres Against Sexual Assault Inc

## **Essential Foundations** for Sexual Assault Workers

### **Trauma & Resistance: Innovative Responses to Oppression, Violence and Suffering**

## **Registration Slip**

**Statewide Sexual Assault  
Workforce Development**

**Advanced workshop** for those working in DHHS funded sexual assault support services. If there are vacancies, non-sexual assault workers can attend for a fee please contact the training coordinator Sarah McGregor [sarah.mcgregor@monashhealth.org](mailto:sarah.mcgregor@monashhealth.org) or phone 99288741 Mon- wed

**Monday March 18<sup>th</sup>, 2019**

Name: \_\_\_\_\_

Agency: \_\_\_\_\_  
Position \_\_\_\_\_

Phone No: \_\_\_\_\_

Email: \_\_\_\_\_

Date -----

**Please complete this Registration Slip and return to SECASA  
Fax 9928.8749 or Secasa@monashhealth.org**