



Submission to the Royal Commission into Family Violence

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Executive Summary

Tens of thousands of women and children in Victoria face family violence each day. Successive reforms have meant that Victoria has been able to lead the way in increasing the reporting of domestic and family violence, encouraging service integration and implementing more collaborative approaches. However, the responses available in Victoria are not able to address the causes of violence or ensure that women and children are safe. It is time to tackle family violence as a fundamental violation of human rights, and to consider innovative whole-of-community solutions to prevent violence and address its impacts.

The Royal Commission into Family Violence offers Victoria the opportunity to re-examine its approach to family violence and develop a comprehensive approach that addresses the causes and consequences of violence.

safe steps Family Violence Response Centre presents this submission to address the deficiencies in the current system, and to propose a new approach that fundamentally confronts the causes of violence, and the needs of women and children who experience family violence. It is structured in two parts: **Part A** outlines the innovation needed to provide a thorough response, and **Part B** discusses how a shared approach across sectors and agencies can support lasting change. This will involve changes in statutory systems, specialist family violence services, and other service systems.

safe steps Family Violence Response Centre has developed significant expertise over 40 years of working with women and children experiencing violence, which informs the comments and recommendations in this submission. As the statewide central responder to family violence, **safe steps** has a broad overview of family violence systems and responses. Internal and external consultation with **safe steps'** stakeholders, analysis of our statewide data on the needs of women and children at highest risk from family violence, and our thorough understanding of the gaps, barriers and opportunities for change inform this submission.

All responses to family violence must address the fact that domestic and family violence is a fundamentally gendered issue. Women and children are overwhelmingly the victims of family violence, and men known to them are the perpetrators. Violence committed by men against women and children has more severe consequences than other kinds of family violence.

Gender inequality is the main cause of family violence. Societies with greater inequality between men and women have greater prevalence of violence against women and children, and societies in which women are more socially, economically and culturally empowered have lower rates of violence against women. Other kinds of inequality exacerbate violence, and interact with gender inequality to make some women and children more vulnerable, and increase the barriers to being safe. A new approach to family violence must therefore address the causes of violence, and seek to empower women and children.

Section 1 of this submission outlines how this can occur through leadership under a single Minister, who has responsibility for prevention and responses to violence across all agencies and areas of government. This should occur through a single, dedicated funding stream and a statewide operational framework for family violence prevention and response. These initiatives will complement the new government initiatives towards developing a Family Violence Index and a Gender Equality Policy.

Section 2 outlines how responding to family violence can be dramatically improved with a new approach to supporting women and children. **safe steps** proposes that the Victorian Government implements a new model of **Family Violence Response Centres**, a community-based solution that offers 24-hour face-to-face support, a multi-disciplinary continuum of options, links to wraparound, holistic supports, and parallel support for children. This model will centre the needs of women and children experiencing violence, rather than expecting them to fit into the fragmented service system we have presently. Family Violence Response Centres will have both a local presence and statewide coverage and consistency, as well as bringing together the statutory and human service agencies that respond to family violence, including police, Child Protection, legal and support services.

To support this model, Victoria needs a strong response to perpetrators. What is absent from current justice approaches to family violence is an understanding of, and response to, the fact that family violence is an ongoing, dynamic and escalating pattern of behaviour. As experts in risk assessment, **safe steps** has considerable expertise with, as well as information about, factors determining perpetrator risk. Central to this is perpetrators' own perception of their power and control in the relationship, which is based on male entitlement to power and control over women and children. At present, a range of agencies collect various data about factors relating to perpetrators, including mental health, justice, homelessness, police, specialist family violence services, Child Protection, and others. Victoria needs a response that keeps perpetrators of violence in view, drawing together the various responses to perpetrators, and centring women's and children's safety and needs.

Part B of this submission discusses the common systemic barriers across statutory systems, specialist family violence services, and other services. These include:

- Responses derived from victim-blaming attitudes that put the onus on women and children to leave a violent relationship, rather than public authorities to keep them safe
- Not identifying family violence, and using inappropriate assessments
- Not believing women, especially if they do not want to leave the perpetrator, and therefore need to use services multiple times before they are ready to leave
- Assuming that violence ends when the relationship ends, and therefore ceasing interventions once the woman has left the relationship
- Assuming that violence only involves physical abuse, and failing to respond to the various, interacting forms of abuse that occur in a violent relationship
- Service systems that are based on regional boundaries, which present particular barriers for women and children who need to relocate to escape violence.

A whole-of-community response is needed to address the disparate effects of family violence across systems and agencies. This must be based on:

- Creating a coherent philosophical approach that centres women's and children's safety
- Developing best practice policies and protocols for intervention agencies that are part of an integrated response
- Enhancing networking among service providers
- Building monitoring and tracking into the system

- Ensuring a supportive community infrastructure for women and children
- Providing sanctions and rehabilitation opportunities for abusers
- Undoing the harm that family violence does to children
- Evaluating the coordinated community response from the standpoint of women's and children's safety.¹

Responses across Child Protection, Family Law, and the family violence system respond to children in different and problematic ways. This results in gaps, limitations and contradictions in responses, which place women and children at greater risk. These responses are based on a fundamental systemic ignorance of the risk posed by perpetrators after separation. Of particular concern are Child Protection interventions that compel women to separate from the perpetrator, and Family Court orders which compel women and children to contact perpetrators after separation.

The many systemic issues within the specialist family violence service system are discussed in section 6. Specialist family violence services are under-resourced, but also underdeveloped to meet women's and children's needs, as well as often inaccessible and inequitable. The system we have at present is focused on accommodation, not safety. It does not have the capacity to respond effectively to the needs of children. And the current service system particularly disadvantages women who already experience a range of disadvantage and inequality. The fundamental reforms outlined in Part A of the submission, particularly a single funding stream, performance monitoring, an access and equity framework, and the establishment of Family Violence Response Centres, are needed to address these deficiencies.

Finally, a number of changes to other service systems must support the key reforms that **safe steps** proposes. Other service systems, particularly housing, homelessness, health and education, need to fulfil their responsibility to prevent, identify and respond to family violence. Wide-ranging reforms are needed to address the consequences of family violence, and meet women's and children's needs.

The recommendations set out in **safe steps'** submission, if adopted, will establish Victoria as the jurisdiction with the most highly innovative, comprehensive, best practice response to family violence in Australia and internationally. Our recommended solutions will address the causes of family violence, meet the needs of women and children who experience violence when and where they seek help, and hold perpetrators accountable. These solutions can be replicated in other States and Territories across Australia, and internationally. **safe steps** looks forward to working with the Royal Commission and the Victorian Government to bring about the vision we present in this submission.

Summary of Recommendations

Part A

1. That the Victorian Government develops and implements a Victorian Gender Equality Strategy to inform actions within government and in the community.
2. That all responsibility for coordinating family violence responses is placed under the one Ministerial portfolio, including responsibility for delivery of specialist family violence services.
3. That the Victorian Government develops a Victorian Family Violence Policy and Statewide Operational Framework to inform all government policy and funded responses to family violence.
4. That the Victorian Government creates a dedicated family violence funding stream separate to existing housing and homelessness funding.
5. That the Victorian Government adopts a partnership approach to funding for family violence services with flexible packaged funding, long-term funding agreements, and a focus on outcomes.
6. That the Victorian Government develops and implements a safety-focused performance and outcome framework for family violence services including specific outcome measures relating to children.
7. That the Victorian Government establishes a dedicated, independent regulatory body for regulatory compliance and performance measurement under the safety-focused performance and outcome framework.
8. That the Victorian Government partners with specialist family violence service providers to develop an access and equity framework for family violence services.
9. That the Victorian Government establishes a Family Violence Response Centre to be the central immediate responder to all Victorians experiencing family violence.
10. That under the Family Violence Response Centre the Victorian Government implements a single statewide access point for all referrals to family violence support, including a 'front door' model of access and linked support.
11. That under the Family Violence Response Centre the Victorian Government implements a centralised referral point for triaging and responding to L17s, operating 24 hours.
12. That under the Family Violence Response Centre the Victorian Government establishes an outreach support service able to provide a 24 hour face to face crisis response to women and children.
13. That under the Family Violence Response Centre the Victorian Government implements an advocacy model of support through provision of Support Advocates.
14. That under the Family Violence Response Centre the Victorian Government develops and funds a secure accommodation facility able to accommodate 40 families.
15. That the Victorian Government utilises the current Housing Establishment Fund used on emergency accommodation to fund the operation of an accommodation facility under the Family Violence Response Centre.
16. That under the Family Violence Response Centre the Victorian Government funds specialist family violence services for children.

17. That under the Family Violence Response Centre the Victorian Government establishes a dedicated transport service to assist women and children escaping violence.
18. That under the Family Violence Response Centre the Victorian Government establishes kennelling facilities for pets of women and children escaping violence to be safely accommodated.
19. That the Victorian Government pilots a perpetrator monitoring program.
20. That the Victorian Government implements accreditation of perpetrator intervention programs requiring programs to centre women and children, evaluate outcomes for women and children, and engage women's family violence services to undertake partner contact.

Part B

21. That Victoria Police implements comprehensive, compulsory training on family violence and the requirements of the *Code of Practice* for all police personnel. That Victoria Police implements compulsory training in identification of the primary aggressor in family violence incidents.
22. That Family Violence Liaison Officers are identified female positions and available at all times across Victoria.
23. That Family Violence Intervention Orders automatically name children on the order, and continue in perpetuity.
24. That police respond to breaches to the full extent of the law and do not minimise the importance of the breach (including phone calls or text messages) by laying charges.
25. That police always seek to respond by issuing a Family Violence Safety Notice and applying for Intervention Orders on behalf of women.
26. That the Victorian Government resources **safe steps** to undertake statewide operational co-ordination with RAMPs to link information across regions, collate data, and provide support where women and children need to relocate across regions.
27. That the Victorian Government extends the specialist Family Violence Court model to cover family law, civil law, Child Protection and criminal law matters, and extends availability across Victoria.
28. That Applicant Support Workers for Intervention Order applicants and children are made available in all Magistrates Courts in Victoria.
29. That the Victorian Government makes additional resources available for community legal centres to assist women applying for Intervention Orders, and when police prosecute breaches.
30. That options for remote court attendance are made available at all Victorian Magistrates Courts.
31. That funded child care is made available for women attending court on family violence related matters.
32. That references to "failure to protect" are removed from the *Children, Youth and Families Act 2005*.
33. That Child Protection strategies prioritise keeping women safe, along with children and holding perpetrators accountable through: minimising risk to women, avoiding pressure on women

and children to leave the home, collaborating with police and family violence services to share information, and in court proceedings. Specialist children's family violence advocates could lead these collaborative responses.

34. That the Victorian Government reviews the responses of the Victims of Crime Assistance Tribunal to women and children who have experienced family violence, with specific reference to:
 - Options to improve crisis responses
 - Options to increase timeliness of responses
 - The adequacy of financial assistance.
35. That the Victorian Government reforms Victorian women's refuges with the intention of providing immediate and equitable access to safe accommodation for women and children at high risk.
36. That the Victorian Government makes equivalent resources available to support children who have experienced family violence as for adults. This includes children's workers across all family violence services.
37. That the Victorian Government ensures that all family violence services can access interpreting and translation services.
38. That the Victorian Government increases the number of places for women without income in high security refuge accommodation, and provides private rental brokerage and financial assistance to women without permanent residency.
39. That the Victorian Government resources a specialist migration and legal advice service for women without permanent residency.
40. That specialist family violence services are resourced to train workers in supporting women with mental health and AOD support needs, and to employ clinical workers to deliver mental health support, AOD treatment and rehabilitation support.
41. That the Victorian Government allocates appropriate resources to modify all existing family violence accommodation to Livable Housing Australia Guidelines Gold level certification.
42. That the Victorian Government continues to provide block funding for the Crisis Response Initiative.
43. That documents and other materials relating to family violence are provided in a variety of languages and formats, including Easy English, Braille, Auslan, video and audio.
44. That the Victorian Government supports the establishment of specialised family violence response services, including perpetrator programs and awareness raising, for LGBTIQ people.
45. That the Victorian Equal Opportunity and Human Rights Commission clarifies the application of exceptions under the *Equal Opportunity Act 2010* with regard to transgender women's usage of women's services.
46. That the Victorian Government supports research for the purpose of developing future family violence services and programs that meet the needs of LGBTIQ persons.
47. That the Victorian Government funds accredited training for the family violence sector and other agencies to meet standards in responsive and inclusive practice for working with LGBTIQ people.

48. That the Victorian Government increases core resources for **safe steps** to address increased demand and to support women and children in crisis accommodation.
49. That the Victorian Government increases availability of Safe at Home responses.
50. That the Victorian Government commissions the development of a validated family violence assessment tool for children.
51. That CRAF training addresses the dynamics of violent relationships in more depth, is delivered by specialist family violence service providers who work with women and children at risk, and includes content on safety planning with women.
52. That the Victorian Government requires level 2 CRAF and safety planning training for a range of professionals including school welfare co-ordinators and counsellors, TAFE and VET welfare workers, GPs, nurse practitioners, hospital social workers, homelessness Access Points, maternal and child health nurses, midwives, mental health services, alcohol and other drug services.
53. That the Victorian Government works with the family violence services, mental health and AOD sectors to establish referral pathways and specific responses for women and children experiencing family violence.
54. That the Victorian Government develops a long-term affordable housing plan to increase the availability of affordable housing across Victoria.
55. That the Victorian Government amends the *Residential Tenancies Act* to provide people who have experienced family violence the option to have their name removed from tenant databases if the matter for which they have been listed is related to family violence.

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Introduction

Family violence is a widespread human rights violation and source of numerous social ills. Victoria has made a number of efforts to address family violence through responding to women and children experiencing violence and holding perpetrators accountable. However, despite these efforts, the persistence of family violence presents a major challenge to Victoria being a truly just and prosperous society. 44 women have been killed so far in 2015 as a result of men's violence, marking a significant increase in the rate of intimate partner homicide compared with the previous year.² **safe steps'** data corroborate that this increase is based on increased violence, with a 29% increase between 2012 and April 2015 in risk factors identified among women assessed by **safe steps**.^a

Victoria must re-evaluate its responses to family violence, and needs to envision a bold new approach that comprehensively addresses the causes, responses and consequences of family violence. The Royal Commission into Family Violence offers the opportunity to do both.

About safe steps Family Violence Response Centre

safe steps Family Violence Response Centre, in its capacity as the 24/7 statewide immediate responder for women and children experiencing violence is committed in its support of the Victorian Royal Commission into Family Violence.

As a respected, trusted service, for over forty years **safe steps** has supported women at children experiencing family violence.

On any given day **safe steps** receives over 150 calls for support. We will exceed more than 55,000 calls this year. In fact at peak times we respond to a call for assistance, from women at risk of physiological and /or physical harm every three minutes. A third of these calls are from women who are at high risk of serious injury and or death who need an immediate response to get them to safety.

Our doors never close 365 days a year.

As specialist family violence services largely operate 9 am – 5 pm Monday to Friday, we support the highest risk women and children in our community. Our vital role is to assist women anywhere at any time to have the support, resources and protection they need to live their lives free from violence and abuse.

We do not turn away or have in place criteria that preclude women and children at risk.

We have no waiting list, no limited bed numbers and no capped caseloads and will support children and women who are not able to access other family violence services.

All other services refer to **safe steps** when they are full or when women and children do not meet to criterion of the refuge. We also provide the critical pathway into the current Victorian specialist family violence system, link women and children with supports and services in their area, provide women with information and assist them to explore their options and choices.

^a Based on cumulative Family Violence Risk Assessment Profiles Jan-Apr 2015. This data is collected through the Specialist Homelessness Information Platform.

safe steps is in a unique position to be the single state-wide immediate responder to family violence and is the only organisation overseeing the referrals for those children and women who are at the highest risk in Victoria, and whose experience of violence is the most critical.

About this submission

This submission is based on statistical service data gathered by **safe steps**, interviews with direct service workers, consultation with stakeholders and a focus group with women who have experienced family violence who were recruited through the **safe steps** Media Advocacy Project.^b **safe steps** thanks stakeholders for their contribution to this submission.

A visionary new approach

It is time to take a bold step and implement an across-the-board approach to ensuring that women and children are safe in their homes and relationships. This requires a human rights framework that puts women's and children's safety at the centre and prioritises equity of access to safety, justice, support, and accountability mechanisms.

This submission makes comprehensive recommendations for how the Victorian Government can ensure that women's and children's rights are fulfilled:

1. Leadership and governance of a whole-of-government approach which concentrates Ministerial responsibility for responses into a single portfolio, establishes a single funding source, and independent regulation and performance monitoring to ensure quality and equity of access to support
2. A statewide operational framework which brings together prevention, responses, perpetrator accountability, links regions across the state, ensuring consistency of consumer experience
3. A new model to better meet women's and children's needs whenever they seek support, ensuring safety at home, equity of access, a continuum of response options, a survivor-centred advocacy approach, and parallel services for women and children
4. A targeted approach to responding to perpetrator risk factors through improvements to training, perpetrator programs, and data sharing
5. Sharing responsibility across systems by addressing gaps and barriers across statutory systems, specialist family violence services, and other service systems to ensure women and children are safe, their needs are met, and perpetrators are held accountable.

Together these elements outline the components of a comprehensive package of reform to address family violence across the Victorian community.

This submission is structured in two parts:

Part A outlines a vision for a comprehensive approach to ensuring women's and children's rights are fulfilled and perpetrators are held accountable.

^b The Media Advocacy Project involves training provided by **safe steps** for women who have experienced family violence in engaging with media. The training empowers women by giving them the tools to tell their stories so that they are heard and understood. Over 90 women have participated in project thus far.

Part B sets out the gaps and barriers in current responses, and recommends service and system changes needed to support a rights-based approach to ensuring that women and children are safe.

Together these address the Terms of Reference for the Royal Commission based on **safe steps'** expertise with working with women and children experiencing violence, and statewide response.

Part A – A vision for change

Part A responds to the following questions from the Commission's Issues paper:

1. *Are there other goals the Royal Commission should consider?*
 2. *What circumstances, conditions, situations or events, within relationships, families, institutions and whole communities, are associated with the occurrence or persistence of family violence?*
 3. *What circumstances and conditions are associated with the reduced occurrence of family violence?*
 11. *What are some of the most promising and successful ways of supporting the ongoing safety and wellbeing of people affected by violence? Are there gaps or deficiencies in our approach to supporting ongoing safety and wellbeing? How could measures to reduce the impact of family violence be improved?*
 12. *To what extent do current processes encourage and support people to be accountable and change their behaviour? To what extent do they fail to do so? How do we ensure that behaviour change is lasting and sustainable?*
 17. *Are there specific cultural, social, economic, geographical or other factors in particular groups and communities in Victoria which tend to make family violence more likely to occur, or to exacerbate its effects? If so, what are they?*
-

1. What drives family violence

What is family violence?

Family violence involves an ongoing pattern of threatening, coercive and violent behaviour in a current or former domestic, intimate or family relationship. This not only includes physical assault, but also threats, verbal abuse, emotional and psychological abuse, abuse of institutional and administrative systems, economic abuse and control, social abuse and isolation, cultural or spiritual abuse, all of which cause a person to live in fear. Family violence is most likely to be perpetrated by men towards women and children³ – this makes family violence a gendered form of violence.

For this reason this submission will focus on women and children as those experiencing family violence, and men as perpetrators of family violence.

Family violence is ongoing, patterned and strategic in nature. It involves a range of tactics that work in combination to exert power and control over women and children. Relationships where family violence is present may appear supportive and affectionate to outsiders, although these behaviours can form part of the pattern of controlling behaviour by the perpetrator. **safe steps'** data shows that the severity of incidents of violence is increasing, along with a significant increase in the level of risk and number of risk factors that women and children are presenting with. This, along with the increasing number of deaths due to family violence, now estimated to be two deaths a week across Australia, signifies the urgency of the issue.

safe steps recognises that men can also experience family violence and women can be perpetrators. Often, this is due to other kinds of disadvantage and inequality in or affecting a relationship, such as ageism that shapes the abuse of older people, and widespread homophobia that contributes to victimisation of men in same sex relationships. Men's violence towards women

and children is far more likely to result in serious injury or death than violence perpetrated by women or children and young people.

Children's experience of family violence

It is often assumed that children experience domestic and family violence passively as 'witnesses'. In fact, there are children in the majority of households where family violence occurs and experiencing family violence has profound effects on children, from pre-natal development through to adulthood. Perpetrators of family violence seek to control children as well as women through fear and threats, often using children as pawns to intensify their control over women. Family violence must therefore be understood as implicating the dynamic relationships between all family members.

Children can be direct and indirect targets of violence, with perpetrators extending abuse to children through, for example, violence towards pregnant women's abdominal areas, as well as abuse towards mothers affecting foetal development. In early childhood abuse toward mothers can affect learning and development, which can have life-long impacts on children. Children also experience abuse when attempting to protect their mothers, siblings and pets.⁴

Family violence inexorably affects women's relationships with their children, disrupting healthy emotional development, attachment between mother and child, as well as the capacity of women to parent their children. Women's capacity to meet children's needs, including establishing authority and setting boundaries, is often affected by family violence.⁵

Often, separation increases risk to children particularly, which is a factor that most statutory response agencies neglect to address. After separation, when perpetrators have their direct access to women reduced, perpetrators often retain some access to their children, and switch abusive tactics towards the children. There is increased risk of children being abducted, and emotionally and physically abused through the gaps in the Family Law system.⁶ It is often at these points that children are at the greatest risk of being killed by perpetrators.⁷

Yet children's needs are neglected in family violence responses, and it is often assumed that ensuring that mothers separate from perpetrators is sufficient to keep children safe and address their needs. Addressing children's needs requires holistic therapeutic responses to name the violence and address its impact, as well as support to maintain educational engagement and reduce the longer-term risk of victimisation or perpetration of violence.

Gender inequality – the primary cause

The primary cause of family violence is gender inequality. The World Health Organization has demonstrated that countries with reduced gender inequality in the form of income disparity, labour market participation, and responsibility for unpaid caring labour, have reduced rates of violence against women and children.⁸

Supportive attitudes towards male domination over women and children serve to build a widespread sense of entitlement by men to control women and children. The cultural and social contribution of norms about gender, such as assuming that masculinity involves physical strength that men need to demonstrate against other men as well as women and children, is a major cause of gender inequality. Women are seen as having less value, and having a primary purpose of fulfilling men's needs and desires.

Power, control and risk

Male entitlement to dominate women and children drives family violence. This sense of entitlement is borne from gender inequality and normative gender roles that assume that women are subordinate to men, and women's needs, interests and capacities are of lesser value. The interaction of broader social inequality and dynamics within the relationship shape the outcomes of violence.

Perpetrators rely on the privacy of the family to conceal their violence. In public contexts many perpetrators are often prominent and respected members of their communities and workplaces. This contributes to the ongoing silencing of women, and the escalation of violence when it goes unchallenged or the challenge is disproportionate to the perpetrator's sense of entitlement to power and control.

Most Victorian systems responding to family violence do not have a sufficiently nuanced approach to addressing the risk factors that predict or influence perpetrator behaviour, which can be complex and multifaceted. External factors affecting perpetrators, such as economic changes, natural disasters, and the broader level of gender equality in society contribute to perpetrator behaviour and the prevalence of family violence.⁹

Inequality leads to violence

The nature and experience of family violence is influenced by a range of other kinds of inequality, including ageism, racism, discrimination and stigma towards people with disability. Eliminating gender inequality alone will likely not be sufficient to eliminate family violence.

Women and children who face intersecting types of inequality, along with gender inequality, experience greater levels of violence, as well as more barriers to escaping violence. Often this is due to discrimination, social and economic exclusion, isolation, dependence and human rights violation. Often women experiencing multiple and intersecting inequalities experience violence directly targeted at their identity and associated circumstances, such as Aboriginal and Torres Strait Islander status, disability or sexuality.

Aboriginal and Torres Strait Islander women and children are more likely to experience abuse and neglect than non-Aboriginal women and children¹⁰ and are overrepresented among victims of intimate partner homicide.¹¹ Factors that contribute to this high prevalence of violence include:

- Dispossession of land and forced disconnection from culture
- Past policies of child removal
- Intergenerational trauma
- Disruption of customary cultural arrangements that mitigate against interpersonal violence
- Economic exclusion and discrimination.

Although there is not systematic evidence about violence experienced by women with disability, available evidence indicates that women with disability are more likely to experience violence than women without disability.¹² The nature of violence against women with disability often specifically relates to their disability, including withholding necessary equipment or medication, use of physical and chemical restraints, confinement, threats of institutionalisation, fraud and forced sterilisation.

Migrant women, particularly if they do not have permanent residency in Australia, are at greater risk of particular forms of violence that relate to their migration experience and status, such as trafficking, domestic slavery, threats of deportation, and economic abuse. Language barriers and

cultural exclusion also contribute to the isolation of many women from non-English speaking communities. This can also be a barrier to understanding that they have a right to be safe and to access support. Additionally, women from non-English speaking backgrounds can choose not to leave violent relationships because it would mean leaving their community, and potentially being isolated from anyone who speaks their language.

The extent and experience of family violence towards LGBTIQ people is distinct from violence experienced by heterosexual and cisgender people due to the broader context of cissexism¹³, heterosexism¹⁴ and stigma towards sex, gender and sexual non-conformity. This can include a range of tactics such as threats to divulge the sex, gender or sexual identity of their target or HIV status, physical assaults targeting genitalia or secondary sex characteristics, or telling the person experiencing the violence they deserve abuse because of their identity. Although family violence against LGBTIQ persons generally is under-reported and under-researched, available evidence suggests that the prevalence of family violence is similar among the LGBTIQ population as in the general population.¹⁵ There is some evidence that violence against LGBTIQ women is more prevalent and severe than violence towards LGBTIQ men.¹⁶ **safe steps'** data indicate that women in violent lesbian relationships face higher levels of risk than other women experiencing violence (an average of 8 risk factors compared with 6.7 risk factors)^c.

Primary prevention and empowerment of women

Government can make a powerful contribution to the elimination of gender inequality and promotion of women's empowerment. Government functions in employment, service provision, legislation, regulation and justice all contribute to the overall level of women's empowerment, and must have a focus on eliminating gender inequality.

Primary prevention should focus broadly on empowering women through education, employment, and participation in public and community life. This includes efforts such as financial literacy, access to employment, leadership and participation in cultural activities.

Recommendation

1. That the Victorian Government develops and implements a Victorian Gender Equality Strategy to inform actions within government and in the community.

A human rights issue

Family violence is one of the most widespread human rights violations in Australia. Occurrence of family violence undermines many human rights, not only the right to liberty and security of the person, but can also violate rights:

- to life
- to be free from torture or cruel, inhuman or degrading treatment or punishment
- to the highest attainable standard of physical and mental health
- to property, and the right not to be arbitrarily deprived of property
- to an adequate standard of living
- to work
- to education

^c Based on a subset of individual Family Violence Risk Assessment Profiles Jan-Apr 2015, compared to the broader population of cumulative Family Violence Risk Assessment Profiles Jan-Apr 2015.

- to equality before the law
- to effective remedy for violation of rights.¹⁷

Family violence also undermines the rights of Indigenous Peoples, people with disability, children and refugees in a variety of ways.

In the past, it was seen that women and children are not entitled to these rights in the context of a domestic, intimate or family relationship. Increasingly this is changing, and there is now public agreement in Victoria that family violence is unacceptable.

This Royal Commission offers an opportunity to extend the denunciation of family violence into a positive commitment by government to ensure women and children are safe, that their rights are realised and that perpetrators are held accountable. The family can no longer be considered a totally private sphere where human rights, and government responsibilities to ensure them, do not apply.

A rights-based approach confers a range of responsibilities on the part of governments and statutory agencies, as well as non-government agencies. It can highlight where and how policy, systems and practice can improve. This is especially useful where women and children have particular support needs or face barriers to the fulfilment of their rights. A rights-based approach can be holistic, and address all women and children's needs to be safe, whatever those needs are.

Stand-alone legislation outlining the responsibilities of the Victorian Government to ensure women and children are safe, to provide support to those who are experiencing and survivors of violence, and hold perpetrators accountable, would greatly assist **safe steps** and other specialist family violence services with work to ensure women and children are safe, that their voices are heard, and their rights are fulfilled.

Responsibility for keeping women and children safe

Ministerial Responsibility

The effects of family violence are experienced across society, from children in utero, during childhood development, and through adulthood. Family violence is the leading cause of illness, disability and death in Victorian women, and is the primary driver of homelessness, self-harm including suicide, mental ill-health, alcohol and drug misuse, and poverty. This results in an enormous loss of human potential and community contribution that is neither measured nor answerable for. The profundity of these effects require an overarching approach to governance that recognises family violence as the cause of critical social problems, of poor financial, employment and health outcomes, as the driver of social inequity and not the consequence.

Dispersed departmental responsibilities serve to keep family violence hidden, and conceal its impact on social services and justice systems. The volume of family violence related activity by police, Child Protection, courts, Corrections, education, health and community services warrants a more integrated and comprehensive approach to family violence from government. All responses to family violence should be coordinated through a single area of the Victorian Government, including responsibility for program and funding development and management, policy development and public accountability. **safe steps** puts forward that this responsibility should fall entirely under the Minister for the Prevention of Family Violence.

Recommendation

2. That all responsibility for coordinating family violence responses is placed under the one Ministerial portfolio, including responsibility for delivery of specialist family violence services.

Statewide Operational Framework

A rights-based approach necessarily involves addressing the needs and rights of all people experiencing domestic and family violence. Current responses and options do not meet this standard, as they are inadequate, inaccessible, inequitably distributed and crisis-driven. Women and children currently do not receive the support they need when they need it, resulting in increased risk.

Family violence services must be holistic, flexible, culturally competent, accessible and offer integrated support to address all women's and children's needs, both short and long term. This will require changes to funding, program and policy arrangements.

A Statewide Operational Framework and accompanying policy framework for family violence needs to be developed to ensure quality, accessibility and consistency in family violence services and responses. This would be used to monitor and measure effectiveness of efforts to address family violence across all sectors: government, statutory agencies and service providers, and inform ongoing reform of family violence responses.

A Statewide Operational Framework should be outcomes focused, and should target efforts to ensuring women and children remain safely in their own homes, and that effective support is immediately available rather than only becoming accessible when they are at high risk. The Statewide Operational Framework must also ensure that perpetrators are held accountable to the women and children they harm.

The Framework needs to have capacity to coordinate resources allocation and focus service activities across systems with the unifying objective of ensuring women and children are safe, and their needs are met. This should include women and children across the entire spectrum of family violence and at all levels of risk. This should include service activities in statutory, generalist, and specialist family violence services across the continuum of primary prevention, early identification, intervention, crisis response, holistic support, and perpetrator accountability.

The development of the National Plan of Action to Reduce Violence Against Women and their Children is a vital step towards eliminating family violence. However, for ongoing consistency in implementation of Action Plans and other initiatives, it is important that there is an operational or implementation framework to draw implementation efforts together. The voices of women, children and service providers need to inform this framework.

Recommendation

3. That the Victorian Government develops a Victorian Family Violence Policy and Statewide Operational Framework to inform all government policy and funded responses to family violence.

Data collection and sharing

Currently, program data is collected by individual services, and also held by the Victorian Police, Child Protection and other bodies. However, there is no single agency responsible for the collection or analysis of Victorian family violence data. This data could be used to significantly

increase the safety of women and children, through strategies to utilise the information collected on perpetrators, and to share information about the risk to individual women and children.

The data held by family violence services could also be used to inform understandings of the incidence of Victorian family violence, gaps in the current system and the effectiveness of prevention or intervention strategies. It is hoped that the newly announced Family Violence Index project will utilise this collective data to work towards increased safety for women and children.

Currently specialist family violence services use a range of information platforms to collect information and report, including the Specialist Homelessness Information Platform (SHIP) and the Integrated Reporting and Information System (IRIS). A standard reporting system, shared by all family violence services, along with guidance on the type of information about risk to be collected, is needed to increase the safety of women and children. There are also a number of gaps in data collection, including detailed perpetrator data, which could be used to inform the work of the police, and data on intervention orders and associated breaches.

A Victorian data sharing strategy, over and above the relevant privacy legislation, is also needed to guide information sharing between services (for example RAMPs) with the intention of reducing risk for individual women and children.

Funding and program framework

Victorian specialist family violence services currently sit under the specialist homelessness services division within the Department of Health and Human Services. By positioning family violence policy and funding under housing and homelessness streams, family violence remains restricted by the limitations of a policy and funding environment dominated by public housing, tenancy management and chronic homelessness.

The homelessness sector in Victoria is often the last resort for women and children experiencing family violence only because all other systems have failed. Current responses to family violence focus on accommodation rather than centring safety and women's and children's needs.

Family violence specialist support being categorised as homelessness assistance skews service provision in many ways that force women and children into crisis. Women and children need a variety of support to live free from violence, however, support is focused on providing accommodation, rather than meeting women and children's needs so they are safe. Therefore it is particularly vulnerable women and children with intersecting disadvantage, such as lack of permanent residency or mental illness, who cannot access support. Support is unavailable for women who seek to remain in a relationship with a partner who is abusing them, and there is a lack of continuity and consistency of support across women and children's entire experience of violence, especially to live sustainable lives free from violence in the long term.

Many service responses are limited to a single region, but women and perpetrators often relocate during the course of family violence, or to escape, and regional approaches cannot 'follow' them. The service system assumes that women and children who have separated from the perpetrator are safe, when this can actually increase the risk for women and children.

It is also often counterproductive for family violence services to be in competition with homelessness services through a common funding stream, as it creates an incentive for homelessness agencies to refuse a response to women and children experiencing family violence who also have complex needs or are at risk, by referring them to family violence services.

Additionally, those family violence services which remain governed by the homelessness service system are, because of homelessness demand, referred women and children at little or no risk of family violence reducing the number of beds available to women at high risk.

Standards of Practice

Regulation of the delivery of family violence services is needed to ensure that Victorian women and children always receive a consistent quality of support, no matter their location or their level of need. Statewide specialist family violence practice standards, developed in partnership with specialist family violence services, could provide a regulatory framework. This would need to comprise standards of: immediate response time, access and equity, quality and consistency of support, and key practice principles.

Recommendation

4. That the Victorian Government creates a dedicated family violence funding stream separate to existing housing and homelessness funding.

A trusted partnership between government and services

A dedicated funding stream will need to deliver program funding that is flexible, reliable and outcomes-focused. A 'trusted partnership' model can deliver more effective outcomes through:

- flexible, packaged funding to meet women and children's needs
- longer-term (3-5 year) funding agreements to provide reliable funding allocations
- outcome-focused funding, so that performance measurement can focus on delivery of agreed objectives rather than narrowly on outputs.

Recommendation

5. That the Victorian Government adopts a partnership approach to funding for family violence services with flexible packaged funding, long-term funding agreements, and a focus on outcomes.

Performance and accountability

Specialist family violence services for women and children have no consistent accountability and performance framework. Current outcome measures focus on inputs or activities relating to providing accommodation, rather than broader safety-related outcomes. In **safe steps'** experience, relocation or alternative housing is not what the majority of women experiencing violence seek. Furthermore, as perpetrator accountability efforts have increased success, a family violence service system predicated on relocation will become increasingly inappropriate. The statewide operational framework should outline appropriate performance measures relating to outcomes for women's and children's safety. This will address the current skewing of service provision towards clients who can meet services' need to meet target numbers, and ensure quality and transparency. A dedicated accreditation and performance monitoring body is needed to monitor performance under the statewide framework.

Recommendations

6. That the Victorian Government develops and implements a safety-focused performance and outcome framework for family violence services including specific outcome measures relating to children.
7. That the Victorian Government establishes a dedicated, independent regulatory body for regulatory compliance and performance measurement under the safety-focused performance and outcome framework.

Equity of access

All women and children have a right to be safe, regardless of their support needs or circumstances. Victorian family violence services struggle to respond appropriately to women who are vulnerable and disadvantaged. Many services have been designed or developed based on a range of assumptions about who women are, and then have difficulty meeting women's needs when they do not 'fit the mould'. This can be exacerbated by the need to limit demand for insufficient resources by tightening eligibility criteria, and allowing access to a smaller population of women and children.

Responses to family violence should address the fact that family violence inherently involves disruption of women's lives, causes trauma and financial disadvantage. This can lead to behaviours of concern, escalation of mental illness symptoms, intensification of substance use, legal problems, and crime. At times, these factors can be the result of deliberate actions by perpetrators.

To address this, an access and equity framework for family violence responses should sit under the Statewide Operational Framework to support appropriate responses, as well as managing a range of risks. The framework should:

- Highlight legal obligations for equity of access
- Outline best practice
- Highlight how equity of access obligations can be balanced with risk or resource limitations
- Provide guidance for services on responding to discriminatory behaviour by clients

Recommendation

8. That the Victorian Government partners with specialist family violence service providers to develop an access and equity framework for family violence services.

Costs of family violence

It is estimated that family violence costs the Victorian community \$3.4 billion per annum in lost hours of work, use of support services, ill health and long term disadvantage.¹⁸ The human cost is much greater. Women and children bear the greatest burden of this cost, as family violence prevents them from fully participating in society. The community also misses out on the benefit of their contribution, while needing to respond to the many social problems that arise from family violence, such as addiction, mental illness, educational disengagement, homelessness, poverty and crime.¹⁹

Responses to family violence in statutory and social services must value women and children, and the contribution they make to our society. The cost of family violence responses must be considered against the overall cost to society of not responding to family violence, or responding inadequately. The Family Violence Index under development by the Victorian Government and the Australian National Research Organisation for Women's Safety (ANROWS) therefore needs to capture these hidden long term costs as well as the measures of specific, time-limited consequences such as incidents attended by police, hospital separations, and use of services.

Social performance measurement

The community sector holds considerable data on the performance of other system responses to family violence, long term consequences of family violence, risk factors for women and children, and factors affecting risk posed by perpetrators. These data are under-utilised in responses to

family violence, evaluation and research. **safe steps** alone holds comprehensive data about women and children at high risk, which could be used much more effectively and systematically.

One of the barriers to effective usage of data is the aggregation of family violence services' data along with other specialist homelessness data. The performance indicators used in the SHS and family violence sectors are the same, however the objectives of both sectors are distinct: SHS focuses on housing, while specialist family violence services focus on safety. Data from both sectors is transmitted directly to the Australian Institute of Health and Welfare. Collation of state-based data, especially community sector data, to measure and evaluate the performance of various state-based response systems such as education, health and justice, could inform ongoing improvement in responses. The Family Violence Index should be able to measure the performance of sectors and systems that respond to family violence, as well as the overall cost burden.

2. A new way of working

The 24/7 statewide immediate responder

safe steps provides the central point of access Victorian specialist family violence support and services for those at the most serious risk of harm, including being the responder to the highest risk L17 referrals from Victoria Police.

This position gives **safe steps** a unique perspective. We are in a position to hold the statewide data on those at the highest risk, and are able to work with the Victorian Government to build evidence of the number women and children are in need of support. As the agency overseeing access to the specialist family violence system, **safe steps** is also able to provide an overview of gaps in the current provision of family violence support, and capture a picture of accessibility to services and performance of service providers through our referral data.

This places **safe steps** in the ideal position to partner with the Victorian Government in building a new way of working in family violence support.

safe steps works directly with generalist services, statutory agencies and legal services as well as specialist family violence services, at both the local and the statewide and central level. Our support is available to all women and their children experiencing violence, no matter their location, culture, age, LGBTIQ status, ethnicity, or the gender or age of their children. We are able to provide a service to every woman and child, no matter where their experience is situated on the spectrum of violence and control, from those just beginning to identify controlling behaviour to those in extreme danger.

Current family violence responses do not work for all Victorian women and children. While programs and services provide support for individual women and families, their timeliness, quality and availability is inconsistent, particularly in regional and rural areas. Services cannot provide a systemic response that guarantees that every women and child affected by family violence will be effectively supported, no matter their location or their circumstances.

Family Violence Response Centre

safe steps proposes a new response to Victorian family violence via the Family Violence Response Centre.

The Centre will be governed by the following principles:

- Universal access – any woman and her children can access support
- Centralised – one point of access for support or referral
- Support is immediate and 24/7, support is available for women and children face to face, phone, outreach, on site and remotely via web and video conferencing. Women can choose the way they receive support, and can access support regardless of their location
- Women and children are at the centre – all programs reflect their needs and wishes
- Based on women's stories and experience – services reflect the support that women and children tell us they need

The Centre will enable all Victorian women and children to access support 24/7 regardless of where they live, their cultural background or language. The Centre will operate the Victorian

statewide crisis response, and also be the centralised point of access for referral to specialist family violence services (including refuge) and L17 referrals. These functions will operate 24/7.

Rather than support only being available once a woman and children are in crisis, and support only remaining available for the period of the crisis, support will be provided across the spectrum of family violence. We know that many women choose not to leave a violent relationship. At the Centre, support will be available to all women experiencing family violence, including those who choose to stay with or return to their partner, and those who no longer experience violence but need support.

Specialist and equal children's services will be available, so that children can receive the support they need through dedicated programs.

The Centre will operate as a multi-disciplinary service hub, housing a range of wraparound services to meet women's and children's needs. The Centre is also able to be replicated in the form of regional hubs, to provide access for women and children across the state.

Safe at home and in the community

As a first crucial step, the onus needs to be shifted from the woman and children experiencing violence leaving a home to the perpetrators of violence being removed. This needs to be executed through initial police response, justice and court responses and through the responses of services.

Currently, women report not being able to stay at home because their safety cannot be ensured, even when the perpetrator is removed. Through intervention order processes, security provided to women, better police responses and consequences for order breaches, this dynamic needs to be reversed.

Our data show that between 65 and 70 per cent of women who contact **safe steps** chose to either stay at home or find alternative accommodation, without requiring high security refuges^d. Under the Family Violence Response Centre, an intensive wrap around support program will be provided which will resource women to return to their homes securely and safely, and supports their safety while they do so. This will enable women and children to remain safe without having to enter the refuge or homelessness system. This will also reflect a service that acknowledges and responds to women's and children's wishes and needs, rather than forcing them to enter a service system in order to remain safe.

The Family Violence Response Centre service model

While the Centre provides a wide range of support and program elements, they are unified by having the common goal of keeping women and children safe. Every program and support provided is a specialist response delivered by a family violence practitioner.

Designing a family violence response system that addresses women's need for safety would offer a more holistic and comprehensive range of supports than what is currently available. Women's and children's needs for safety are not only met by high security supported accommodation. Life circumstances such as housing, income, employment and health can all contribute to increased risk, or, if they are resolved, to safety. For example, appropriate support for a mental health

^d Client location after accommodation, Mar-Apr 2015. See Appendix 2 – Data.

condition can mean the difference between dependence on a perpetrator and being able to live free from violence.

Women most often tell **safe steps** that they want the violence to stop. They do not necessarily want to relocate, end the relationship or punish the perpetrator. Some women must maintain contact with the perpetrator because of shared custody or child contact arrangements. Women and children in these circumstances need support as much as those at high risk.

Centralised access

The Centre is based firmly in, and is an active part of the community, and is open 24/7 to ensure that access to support is always available to women and children at the time they need it. Any woman can access family violence support at any time, rather than support only being available to her when she is in crisis or needs accommodation.

The Centre will operate as the central access point for all specialist family violence services, in the same way that Homelessness Access Points prioritise and provide access for all referrals to homelessness services. This central access point will include the current 24/7 statewide crisis response, centralised referral point and 24/7 triaging and response to L17s, and a 'front door' access point, where women and children can attend for immediate assistance or to access the on-site services. The Centre will also link women and children to support provided by other agencies as needed.

Access will be provided to all women needing support, including those who use alcohol or drugs, have adolescent sons, have mental health issues, have no income, no permanent residency or have migration issues. The Centre will also assist older women, LGBTIQ and transgender women, and women that do not speak English.

The Centre will partner with and provide links to specialist family violence services across Victoria, with a focus on region centres and rural areas. This will include linking women and children with immediate support in their locality, and where no support is available, providing support remotely via phone and remote access to services. This will mean that equal support will be available to women and children no matter their location.

Additionally, the Centre model will be able to be replicated in order to provide a support Centre for women and children in every region of Victoria.

Recommendations

9. That the Victorian Government establishes a Family Violence Response Centre to be the central immediate responder to all Victorians experiencing family violence.
10. That under the Family Violence Response Centre the Victorian Government implements a single statewide access point for all referrals to family violence support, including a 'front door' model of access and linked support.
11. That under the Family Violence Response Centre the Victorian Government implements a centralised referral point for triaging and responding to L17s, operating 24 hours.

Face-to-face crisis responses available 24/7 across Victoria

safe steps considers face-to-face assessment and response to be best practice in any early intervention or crisis response. A face-to-face contact, particularly as the initial contact a woman makes with the service system, is vital to ensure a woman receives the support she needs.

Conducting an initial assessment face-to-face offers opportunities for the assessor to understand body language and other cues that may indicate further information about risk factors or the history of violence, and opportunity to build a relationship of trust.

While face-to-face crisis responses are sometimes available to some women and children in metropolitan Melbourne, the availability of this response is insufficient to respond to even a fraction of the crisis referrals received by **safe steps** on any day, and are unavailable in most parts of Melbourne and Victoria. All women and children experiencing family violence should have access to an immediate face-to-face crisis response regardless of their location.

The Family Violence Response Centre will act as the central coordination point for outreach services providing a face-to-face response to women. In regional areas this can be coordinated through regional hubs, and opportunities to explore the use of teleconferencing facilities to increase access to support for women in regional areas will also be explored.

Empowering women through an advocacy approach

Family violence response systems, particularly police and the justice system, have inconsistent and unpredictable responses. For women and children experiencing family violence this not only leads to uncertainty, but makes them unsafe and deters women from reporting. In many cases, a familiar abuser whose pattern of abuse is known and expected is a simpler option than an inconsistent legal and justice system that may either assist or may increase their risk.

Furthermore, despite efforts to improve integration in recent years the specialist family violence system remains fragmented. Integration efforts have mostly focused on relationships between services through regional co-ordination, consistency of risk assessment and data, and referral pathways with police. What is missing is a consistent and continuous response that places women and children at the centre.

While many family violence services offer good support to women and children, this response is fragmented and often inadequate, limited to the range of programs an agency is funded to provide and the parameters of that funding. Many agencies do offer individual advocacy in navigating the service system, however small and localised family violence services are limited in the parts of the service system they engage with.

Through Support Advocates, the Family Violence Response Centre will provide continuity of support that can stay with women and children regardless of their circumstances, when and where they are.

Support Advocates will have the capacity to follow women and children through their entire experience of violence and abuse after seeking support, including through their interactions with Child Protection and the legal system, and provide recovery support once after they are no longer experiencing the violence. This approach which can maintain a long-term relationship of trust is needed to overcome the limitations in other systems that respond to family violence. This would involve:

- Continuity of support from a single worker/agency from the first point of contact
- Individual advocates for women and children who can work with them over the long term
- Continuous risk assessment and monitoring
- Safety planning
- Support in court appearances, with police and other agencies

- Assisting women to navigate between Victorian and Federal services and systems e.g. Family Court, Centrelink, and immigration authorities
- Co-ordination between a range of services and systems involved with family violence e.g. Child Protection, justice system.

A major gap in our current range of response options is the limited support for women currently in relationships living with perpetrators.²⁰ An advocacy approach of this nature will provide this support.

Furthermore, a survivor-centred approach to advocacy would complement the monitoring of perpetrators and hold them accountable. Advocates would be able to develop a profile of the pattern of abuse in the relationship, liaise with other agencies such as RAMPS, and respond to less overt forms of abuse such as emotional, institutional and economic abuse. Advocacy would also need to respond to children, with specific advocates for children that can work with them both separately and in conjunction with working with mothers.

Recommendations

12. That under the Family Violence Response Centre the Victorian Government establishes an outreach support service able to provide a 24 hour face to face crisis response to women and children.
13. That under the Family Violence Response Centre the Victorian Government implements an advocacy model of support through provision of Support Advocates.

Accommodation

Currently, hundreds of Victorian women and children in need of immediate accommodation are forced to stay in costly motels while they wait for a place in women's refuge to become available. This isolates women and children at the time that they are most vulnerable, and inefficiently uses the scarce resources available to specialist family violence services.

At present the vast majority of accommodation services that offer specialised family violence support are high security refuges. Victorian women's refuges provide vital safety and specialist responses to women and children escaping violence. This model is a fundamental element of the family violence response system. It is crucial for women and children at the highest risk, particularly if the perpetrator will pursue the woman. However, the requirements of high security refuges prevent women's contact with family and friends, require women to cease attending work and children to cease attending school. **safe steps** is frequently contacted by women and children who do not require refuge, but we have few or no options to refer them in these circumstances. Although housing and homelessness services are the default option in these cases, the moderate level of risk for women and children in these circumstances is often too high for homelessness and housing services.

Many of the limitations of women's refuge also do not meet women's and children's needs, including shared living space and the requirement for women to leave their employment and children to leave their schools. These factors can result in women choosing to return to an unsafe home rather than wait in a motel or stay in a women's refuge. As a part of the spectrum of services of the Family Violence Response Centre, **safe steps** proposes that the Victorian Government establishes medium security accommodation services for women and children at risk. These could have a number of features that current accommodation services cannot offer such as:

- Providing women options to attend work, and children to remain in school

- Providing dedicated family violence support
- Women and children remaining in contact with family, friends and their community

This will mean that women and children can be provided with immediate accommodation until such a time as they have somewhere safe to stay. Sufficient housing is provided that no woman or child is forced to stay in a motel waiting for a bed to become available.

Crisis accommodation funded by the Housing Establishment Fund (HEF) does not represent an efficient and effective use of resources, nor represent the best accommodation option for women and children at risk. The Victorian Government has provided welcome increases to safe steps' HEF allocation, however we believe that assistance can be delivered more effectively, within the same quantum of funding, if it were provided without the constraints upon HEF.

According to **safe steps'** data on the number of women and children currently needing emergency accommodation, and data on projected demand, we estimate that accommodation for approximately 40 families is required for no woman or child to need to be accommodated in a motel.^e

Recommendations

14. That under the Family Violence Response Centre the Victorian Government develops and funds a secure accommodation facility able to accommodate 40 families.
15. That the Victorian Government utilises the current Housing Establishment Fund used on emergency accommodation to fund the operation of an accommodation facility under the Family Violence Response Centre.

Supports for children

At the Centre, support for children will be considered to be of equal importance to that provided to their mother, and all programs and services will be run in parallel to meet children's needs.

Children who have experienced family violence have a range of risks for disruption to development, mental health concerns, behavioural problems, and future victimisation by or perpetration of family violence. 50 per cent of people accommodated by **safe steps** are under the age of 18^f. **safe steps** and other specialist family violence services regularly work with children, however most family violence services are not specifically resourced to meet children's needs. There are no resources specifically allocated to supporting children, and some resource allocation models work against agencies' efforts to support children. There is no specific risk or needs assessment tool for children who have experienced family violence.

The Centre will support children, intervening before child protection involvement, with the aim of preventing families from falling into the statutory system. This will include the following specialist children's services on site: specialist children's Support Advocates, group work, childcare for those women who need to attend court or appointments, and a toy library and donated books and toys for children forced who have lost their possessions through family violence.

^e This reflects the average number of women and families that **safe steps** supports while they await safe accommodation. This data is collected through the Specialist Homelessness Information Platform.

^f Based on all clients accommodated with support period in 2014.

Recommendation

16. That under the Family Violence Response Centre the Victorian Government funds specialist family violence services for children.

Integrated services

The Family Violence Response Centre will also provide a site for integrated service delivery through providing a arrangements for with statutory and government agencies to be based at the Centre, including on site Child Protection workers, Victorian Police officers based on site and Legal Support Advocates able to provide timely legal advice to women when they first need assistance.

This will also provide the opportunity for collaborative service provision through government and non- government agencies, including an opportunity for all areas to increase their understanding of family violence and develop an expertise. This multi-disciplinary approach also creates opportunities for cross pollination and new ways of working.

The Centre will link to and provide coordinated support with other services around the state through acting as an integrated access point and supported pathway to localised specialist family violence services. This will be an integral aspect of all levels of service delivery, and build on active service partnership arrangements.

Holistic, wraparound services

A range of wraparound services will also be delivered at the Family Violence Response Centre to ensure that the needs of all children and women are met. This support will include:

- Education – for women and children focussed on increasing their knowledge of the dynamics family violence and supporting them to increase their future safety
- Group work for women and children
- Social and community connection for women and children
- Employment assistance – to assist women to gain employment, including the provision of employment opportunities such as traineeships
- Co-located and visiting services including Maternal & Child Health, primary health services and therapeutic services

Transport – relocation is often the most appropriate response to family violence but safe transport is a major barrier in providing family violence support. **safe steps** and other family violence services frequently use taxis for transport for women and children to safe locations however these are not always safe and offer no support. The Family Violence Response Centre will provide a dedicated transport service to transport women and children who are escaping violence, and their possessions, to safe accommodation. This will include the employment of female drivers who are also able to provide support at this crucial time, and vehicles with the capacity to accommodate large families, luggage and pets.

Recommendation

17. That under the Family Violence Response Centre the Victorian Government establishes a dedicated transport service to assist women and children escaping violence.

Pets and animals – **safe steps** often supports women and children with pets who are frequently fearful for the safety of their pets. Abuse towards pets is a key risk factor in the escalation of violence, which can indicate that the woman and her children are unsafe at home. In some cases

women will remain with a perpetrator out of fear for the safety of pets and other animals. This can be a particular concern for women in regional and rural areas.

However, support services generally have little capacity to assist women to keep pets safe. Facilities specifically for pets of women and children experiencing family violence will address this need. **safe steps** acknowledges that the Victorian Government has allocated resources in the 2015-16 Budget, however these resources are inadequate to provide a consistent statewide response.

Recommendation

18. That under the Family Violence Response Centre the Victorian Government establishes kennelling facilities for pets of women and children escaping violence to be safely accommodated.

Specialist family violence services are concentrated at crisis and high-risk responses, with little or no response to women and children at more moderate levels of risk, or who do not want to relocate. A more responsive range of options is needed to ensure that all women's needs for safety are met. This includes women who remain in relationships with abusers, and who are not in crisis. Complemented by advocacy throughout their experience, a continuum of support will enable earlier and more effective interventions to keep women safe.

Women who remain living with the perpetrator of violence, or who own their own homes, have few options for support. This service is currently funded through family violence services in the form of outreach case management, however caseload caps, capacity and resource constraints mean that women and children wait for weeks or months for follow up contact.

The Family Violence Response Centre, through the Support Advocates program, will support women at home immediately, from the time they make contact, and continue to provide support no matter the woman's decision about her relationship.

Comparable models:

The operation of the Family Violence Response Centre can be compared with other Victorian service models such as:

- Community Health Centres
- Community / service hubs
- Youth Foyer
- Integrated Children's Centres
- Multi-agency safeguarding hubs (UK)
- Family Justice Centres (US)

The centralised functions of the Family Violence Response Centre are aligned with the following service models:

- **safe steps'** current 24/7 statewide crisis response service
- Homelessness Access Points
- Victorian Alcohol and Other Drug Intake Centres
- Victorian Mental Health Intake Services

Case Study – current Victorian family violence support

A woman, accompanied by her four children, who is experiencing family violence but does not need crisis assistance, is able to contact the family violence service in her area. The service is likely to be at capacity, so she may be told that either there is a waiting list, or that the service is not taking referrals at present. If she finds a service does have capacity, she will need to 'fit' into one of the agency's programs by meeting all the eligibility criteria (for instance, she will need to be asking for assistance to stay home to be eligible for Safe at Home assistance). If she needs ongoing support, but also needs assistance finding emergency accommodation, she will probably need to be referred to a second agency and will need to travel there with her four children in order to tell her story a second time. With no refuge vacancies, she and her children may need to be accommodated at a hotel until a bed is available, and her children won't be able to attend school. She probably won't be able to receive any face to face assistance from a support worker during this time.

Case Study – Family Violence Response Centre

A woman, accompanied by her four children, who is experiencing family violence but does not need crisis assistance, is able to phone the Family Violence Response Centre any time, or visit in person and undergo an assessment. She isn't sure yet whether she wants to leave her relationship, but she is able to get some advice on what her options would be, including some on site legal advice about intervention orders. When things reach crisis point in her relationship she can call or go to the Centre where she already has a Support Advocate and feels safe. After the violent relationship has ended, she wants to stay in her home so the Support Advocate accompanies her home to do a safety assessment and to organise some additional security measures. The Centre is able to give her some resources, including a myki card and some donated food. She sees the Centre's legal advice service for advice, and the Support Advocate is able to accompany her to court while she applies for an intervention order. If she does decide to go to refuge accommodation, she is able to stay at the Centre's supported accommodation until a bed becomes available.

3. Perpetrator accountability

This section responds to the following question from the Commission's Issues paper:

12. To what extent do current processes encourage and support people to be accountable and change their behaviour? To what extent do they fail to do so? How do we ensure that behaviour change is lasting and sustainable?

Perpetrators must be accountable to those they harm

safe steps considers that perpetrators should primarily be accountable to the women and children who they have abused. At present, perpetrator accountability mechanisms have a mixed emphasis on: early intervention to prevent future violence and accountability to the State through criminal sanctions. The needs and choices of women and children are not central to perpetrator accountability at present.

Accountability has differing meanings for each person, and will require a range of responses. Women most often tell **safe steps** that they want the violence to stop, not that they want the perpetrator punished. Women may also have particular objectives to hold perpetrators accountable e.g. ensuring their children maintain a relationship with their father while they remain safe. At present perpetrator programs do not always centre the needs of women and children.

Keeping perpetrators of violence in view

Each perpetrator uses different patterns of coercion and control against the women and children he targets. These patterns are affected by a range of factors that affect his perception of his level of power and control including employment, mental health, relationships with others, and access to support networks and other resources such as education and finances for those experiencing violence. Perpetrators relate to these factors through a sense of entitlement to be privileged and maintain control. The dynamic interactions of these factors are predictive of risk to women and children. Women and children often tell **safe steps** that opportunity for external monitoring of these is what they find most valuable about men's behaviour change programs.

Understanding of these dynamic factors is absent from the justice system's response to holding perpetrators accountable, as it is reactive, responding only after an incident of violence, and only to that incident.

At present there is no systematic assessment and monitoring of perpetrators or the factors that may affect their use of violence. This information is held by specialist family violence agencies who are working with women and children, but is often incomplete.

The development of RAMPs is a positive step towards monitoring perpetrators and assessing the dynamic interaction of risk factors. However, this approach only responds to women and children at high risk. Perpetrator factors that might escalate risk are not routinely monitored to inform referrals to RAMPs or for other justice responses.

Other proposed approaches, such as electronic monitoring and perpetrator registration, are static, cannot respond quickly, and do not have capacity to address the complexity of risk factors affecting perpetrator behaviour.

A new approach is needed which:

- Keeps perpetrators in view
- Maintains a dynamic understanding of risk factors
- Continues to monitor risk after a relationship ends
- Is not restricted to a region or area
- Can intervene in relation to unmet needs that may incentivise the perpetrator to return to the home and use violence, e.g. AOD services, housing, mental health and other factors
- Informs women and children about factors that can contribute to risk or at particular times e.g. Court ordered child contact
- Liaises with police, child protection, and other agencies
- Can provide evidence relating to future risk of harm in court proceedings.

This could be based on a community corrections case management model or similar which involves supervision of offenders.²¹ Requiring these interventions when an Intervention Order is finalised would be an opportunity to intervene at a time of high risk, and prevent escalation of violence.

Recommendation

19. That the Victorian Government pilots a perpetrator monitoring program.

Quality improvement in perpetrator interventions

Men's behaviour change programs in Victoria are currently limited in a number of ways:

- Lack of consistency and quality monitoring
- Programs are over-subscribed, and there are long waiting lists, making it risky to rely on them as part of a court ordered intervention
- There are few or no consequences for men who cease attending
- Lack of consistent evaluation
- Lack of consistency in referrals to perpetrator programs by courts and police
- Inconsistent partner contact by some perpetrator intervention programs

There is also a lack of adequate or funded perpetrator programs for lesbian perpetrators, carers, Aboriginal perpetrators as well as language-specific perpetrator programs. Many of the above issues can be addressed through accreditation, quality assurance, and outcome-based measurement and evaluation.

Some men's behaviour change programs do not engage women's family violence services to undertake partner and family contact to monitor the safety of women and children. This can escalate risk to women and children, as family and partner contact needs to ensure that it has the capacity to respond rapidly to increased risk. Working in closer partnership with women's services would enhance the effectiveness of perpetrator programs.

Recommendation

20. That the Victorian Government implements accreditation of perpetrator intervention programs requiring programs to centre women and children, evaluate outcomes for women and children, and engage women's family violence services to undertake partner contact.

Part B – Gaps and barriers in current responses

Part B responds to the following questions from the Commission's Issues paper:

2. *The Royal Commission wants to hear about the extent to which recent reforms and developments have improved responses to family violence, and where they need to be expanded or altered.*
 3. *Which of the reforms to the family violence system introduced in the last ten years do you consider most effective? Why? How could they be improved?*
 4. *If you or your organisation have been involved in programs, campaigns or initiatives about family violence for the general community, tell us what these involved and how they have been evaluated.*
 5. *If you or your organisation have been involved in observing or assessing programs, campaigns or initiatives of this kind, we are interested in your conclusions about their effectiveness in reducing and preventing family violence.*
 8. *Tell us about any gaps or deficiencies in current responses to family violence, including legal responses. Tell us about what improvements you would make to overcome these gaps and deficiencies, or otherwise improve current responses.*
 9. *Does insufficient integration and co-ordination between the various bodies who come into contact with people affected by family violence hinder the assessment of risk, or the effectiveness of (early intervention, crisis and ongoing) support provided, to people affected by family violence? If so, please provide examples.*
 10. *What practical changes might improve integration and co-ordination? What barriers to integration and co-ordination exist?*
 18. *What barriers prevent people in particular groups and communities in Victoria from engaging with or benefiting from family violence services? How can the family violence system be improved to reflect the diversity of people's experiences?*
 19. *How can responses to family violence in these groups and communities be improved? What approaches have been shown to be most effective?*
-

4. Common systemic barriers

This section addresses the outcomes of recent reforms, and gaps and barriers to addressing family violence in statutory, specialist, and other service systems. Many of the responses from non-specialist systems, including police and justice, are derived from similar systemic limitations and assumptions.

Limited knowledge and understanding

Many human service systems, including police and the justice system, have a response to family violence derived from victim-blaming attitudes. The assumption that women and children must be the ones to leave the violent relationship, rather than public authorities having a responsibility to keep women and children safe and hold perpetrators accountable, contributes to this attitude. Often, unless women present as the 'ideal woman' who assists agencies' attempts towards the outcome of her leaving the home and the relationship, women are characterised as non-compliant and undeserving of support.²²

Many human services do not identify family violence appropriately, or ask about it in inappropriate ways. For example, many practitioners will ask women and children directly "are you experiencing family violence?" which can be confusing and confronting for a woman who has not named what she is experiencing as domestic or family violence. **safe steps** is also aware that

agencies ask women about family violence while the perpetrator is present, or ask him to leave only for that specific part of the assessment. This can make it risky for the woman to disclose that she is unsafe.

The widespread societal belief that women are unreliable narrators of their abuse, or that it “can’t be that bad if she returns/stays” often manifests in service systems as increasing scepticism to repeat presentations to services. Women experiencing domestic and family violence often attempt to leave the relationship multiple times before they can be successful.²³ This is often due to the systemic barriers for women experiencing family violence. Many systems have barriers for people who present to services multiple times, and have stigmatising attitudes towards repeat clients.

Many services and systems also assume that violence ends when the relationship ends or if the couple is no longer living together – often due to an assumption that there is something about the relationship that causes the perpetrator to be violent, rather than violence being a choice of the perpetrator. This is untrue, many perpetrators escalate violence when they perceive that they are losing control.

Abuse is often not visible, particularly if the behaviour or action constituting abuse is not a criminal act. Emotional, economic, cultural and social abuse, and using institutional or administrative processes to exert power and control, and constrain the options for the woman, are frequently involved in family violence. For instance, sabotage of women’s education or employment, humiliating women and children in public, implicating women in criminal acts, creating rifts within women’s support networks, making reports of child abuse or neglect, or racking up fines in a woman’s name are all actions which perpetrators take to undermine women’s resources, support and self-determination in a relationship.

Many systems do not respond well to these abuses of power by perpetrators. However, an understanding of the specific ways family violence comes about in particular ways in various sectors or industries, based on a gendered understanding of power, control and violence, is needed for all Victorian systems to respond in ways that support and do not undermine women’s and children’s safety.

Regional boundaries

Most service systems in Victoria, including services delivered by the Commonwealth Government, are divided regionally. People accessing services must seek assistance within their home region. This is risky and problematic for women and children experiencing family violence because often the only safe response is to relocate to a new region. Support must be delivered rapidly in order for relocation to ensure women’s and children’s safety. Yet service systems that are regionally divided typically respond slowly and poorly to women seeking assistance outside the area of their home address.

The need for a whole-of-community response

The Duluth, Minnesota Coordinated Community Response (CCR) approach addresses many of these limitations in service and system responses through shared policies and protocols between agencies that enshrine a shared conceptual approach to family violence.²⁴ This approach is based on:

- Creating a coherent philosophical approach that centres women’s and children’s safety

- Developing best practice policies and protocols for intervention agencies that are part of an integrated response
- Enhancing networking among service providers
- Building monitoring and tracking into the system
- Ensuring a supportive community infrastructure for women and children
- Providing sanctions and rehabilitation opportunities for abusers
- Undoing the harm that family violence does to children
- Evaluating the coordinated community response from the standpoint of women's and children's safety.

5. Reform to statutory systems

Despite considerable reform, statutory systems have systemic issues with responding to family violence, primarily in that they compartmentalise family violence incidents and do not recognise the overall escalating pattern of violence. Responses from police, judicial officers and Magistrates demonstrate this limited understanding, which influences the responses in charging, court proceedings, and sentencing.

Policing

L17 Police referrals

L17 is the form number used by police to refer women to specialist family violence services. There is a designated L17 response agency in each DHHS region, and **safe steps** receives high risk and after-hours L17 referrals. Police referrals make up 17% of all referrals to **safe steps**, of which 29.98% are L17 referrals, making L17s 5.1% of total referrals^g.

L17s have been extremely successful in facilitating police referral to family violence services. However, their success has created its own challenges.

Many L17 response agencies operate during business hours only, or only an on-call system for after-hours response. This can mean that an L17 referral can wait up to 15 hours to be seen on weekdays or 63 hours on weekends.

No additional resources have been provided to respond to L17s after their implementation, so prioritising and following up L17s places additional pressure on the already overburdened existing system. In response, **safe steps** is aware that police are bypassing the L17 system to refer directly to specialist family violence agencies in some areas. This creates a risk of inconsistent risk assessment and service responses. This can disadvantage Aboriginal women, as they are not offered a choice to access a culturally appropriate service.²⁵

An improved system would be able to immediately prioritise and follow up L17s, 24/7, regardless of location, through a central L17 referral point. Dedicated workers could also work with the police stations and Family Violence Liaisons. This could be executed through the centralised access point and Family Violence Response Centre discussed in Section 2 of this submission.

Implementation of the Police *Code of Practice for the Investigation of Family Violence*

Victoria Police have invested enormous effort and resources into better responding to family violence, and have been some of the leading advocates in improving systems and support for women and children. This has included the recent development and implantation of the Code of Practice for the Investigation of Family Violence (2014).

safe steps regularly works with the Police *Code of Practice* as well as the Family Violence Referral Protocol between the Department of Health and Human Services and Victoria Police. **safe steps'** staff communicate with Victoria Police on a daily basis, and the two agencies collaborate at every level. While the overwhelming majority of this collaboration is positive, there remain issues with police responses to women and children in family violence incidents.

^g Based on snapshot of referral source for all support periods Oct 14-Mar 15

Family Violence Units have been a welcome initiative, however their responses and responsibilities are inconsistent across regions. According to women's stories of their experience of police responses and safe steps response workers experience of police response, many women who contact **safe steps** have already sought a police response, but have been dismissed or police have not acted. Police, even in Family Violence Units, do not always have an understanding of the principles of family violence or the *Code of Practice* demonstrated by:

- The perpetrator's account being believed over the affected family member's
- Women not being believed because of a history of drug or alcohol use, and are assumed to be intoxicated or affected by drugs when they appear distressed
- Police dismissing women because they have made repeated reports / calls about family violence, particularly if she has not left the relationship (e.g. comments such as "if it's really that bad, why doesn't she leave?" or referring to women as "frequent flyers" when they make repeat calls)
- Assuming that both the woman and the man are mutually abusive when there is evidence of the woman resisting abuse or defending herself
- Assuming that abuse in same-sex relationships is mutual
- Assuming that women who present as agitated, distressed or anxious are not credible or reliable
- Aboriginal women and children have historically had poor treatment when making contact with police, often being disbelieved when they report violence, leading to an overall reluctance to report²⁶
- Poor treatment of women with disability, often based on assuming their reports are unreliable or, if they have communication or behaviour support needs, disregarding their reports in favour of the perpetrator's account.

Perpetrators of family violence regularly use the privacy of the home and the incident-based responses of police to conceal the extent of violence. At incidents attended by police perpetrators can appear calm and reasonable, and suggest to police that the woman is unreasonable due to her apparent agitation. Police must be trained to identify the primary aggressor in family violence incidents. Female-identified Family Violence Liaison positions would assist with making women feel more comfortable to disclose to police.

Police do not always engage an independent interpreter for women who do not speak English. At times police ask a family member or friend of the perpetrator to interpret for the woman. This is a problematic practice that can put the woman at risk, and breaches the woman's confidentiality, as the family or community members may protect the perpetrator or not want the woman to disclose her experience.

Children are often overlooked in police responses to family violence, for instance police do not always ask if children are present, especially at night when they are asleep. If the woman appears distressed, police will sometimes remove her from the home and leave children with perpetrator.

Practice has improved dramatically since the introduction of the *Code of Practice*, and many police officers who contact **safe steps** demonstrate good practice responses to women and children at risk from family violence. However, many of the examples above illustrate actions in conflict with requirements of the *Code of Practice*, and **safe steps** staff must frequently refer police with whom they are liaising to the *Code of Practice*, as the police officers are unfamiliar with its requirements.

This suggests that training has not reinforced the importance of the *Code of Practice*, and has not been comprehensive across all sections of Victoria Police.

Recommendations

21. That Victoria Police implements comprehensive, compulsory training on family violence and the requirements of the *Code of Practice* for all police personnel. That Victoria Police implements compulsory training in identification of the primary aggressor in family violence incidents.
22. That Family Violence Liaison Officers are identified female positions and available at all times across Victoria.

Family Violence Intervention Orders

safe steps strongly supports Family Violence Intervention Orders. Their benefits have been clear, as they contribute to legal recognition that:

- Family violence is ongoing and patterned in nature, and includes abuse that is not a crime
- Perpetrators must be held accountable for violence
- It is preferable to exclude perpetrators from the home rather than expecting women and children to leave their home to escape violence.

There are some issues with the way that Family Violence Intervention Orders are issued and managed. 43.3% of clients assessed by **safe steps** had Intervention Orders^h, and **safe steps** works with many clients to obtain Intervention Orders where the client has not already obtained one.

A positive change under the *Family Violence Protection Act 2008* granted police the power to apply for an Intervention Order on behalf of another person. However, **safe steps** continues to hear reports that police officers respond by suggesting that women apply for Intervention Orders themselves, rather than police applying on behalf of the woman.

Many women have difficulties with extensions and variations of Intervention Orders, as they must re-apply for an order after it expires or attend court multiple times to extend an order to her children. This is based on an erroneous assumption that risk to the woman and her children will cease after the relationship ends, when this is actually a time of heightened risk. The New Zealand *Domestic Violence Act 1995* sets out a number of useful conditions that the *Family Violence Protection Act 2008* does not, including that protection orders continue in perpetuity and do not expire, and automatically apply to the children of the applicant.

Many women do not have confidence with Intervention Orders due to prior experience with deficiencies with enforcement of orders, particularly with police reluctance to lay charges for breaches. Rural stations with few police have particularly poor response to breaches and reports.

In **safe steps'** experience, police who are reluctant to bring charges against a perpetrator cite lack of evidence of the breach for the decision. Even where evidence is available, police are reluctant to investigate and bring charges for what are viewed as 'technical' or 'minor' breaches of an Order such as text messages or telephone calls. Police and courts must understand that such breaches can be part of ongoing intimidation or stalking and may indicate that the woman is at risk.

^h Based on cumulative Family Violence Risk Assessment Profiles Jan-Apr 2015.

Even where women give verbal permission for perpetrators to enter the property, or meet with the perpetrator in violation of an Intervention Order, this is still a breach of the Order by the perpetrator and must be followed up. Women may make these decisions in order to minimise risk at the time, yet still require police action in response to the breach.

Aboriginal agencies are particularly concerned about the enforcement of intervention orders with Aboriginal perpetrators, as this may increase risk of harm, injury or death in police custody. Aboriginal agencies have made a range of recommendations for culturally safer issuing and enforcement of Intervention Orders with Aboriginal and Torres Strait Islander perpetrators.²⁷

Recommendations

23. That Family Violence Intervention Orders automatically name children on the order, and continue in perpetuity.
24. That police respond to breaches to the full extent of the law and do not minimise the importance of the breach (including phone calls or text messages) by laying charges.
25. That police always seek to respond by issuing a Family Violence Safety Notice and applying for Intervention Orders on behalf of women.

Risk Assessment Management Panels (RAMPs)

RAMPs are an important development in family violence responses, as they aim to remove perpetrators and keep women and children safely at home.

A significant constraint with RAMPs is their capacity to respond when women and children, or perpetrators, move out of the RAMP region. This is a common consequence of family violence, however **safe steps** has significant concerns that RAMPs are constrained to address it. **safe steps'** role is to work with women and RAMPs in these circumstances, however this operational co-ordination role is unrecognised and un-resourced, which increases pressure upon **safe steps**. There also appears to be limited capacity to track perpetrators when they move out of the RAMP region. These limitations could be overcome with dedicated resources for **safe steps** to undertake statewide operational co-ordination with RAMPs. (**safe steps** is aware that a statewide RAMP resourcing and support role has been implemented, however this role does not have the operational co-ordination capacity required to address the cross-regional issues noted here.)

Recommendation

26. That the Victorian Government resources **safe steps** to undertake statewide operational co-ordination with RAMPs to link information across regions, collate data, and provide support where women and children need to relocate across regions.

Courts

Court jurisdictions and the specialist Family Violence Court

Family violence does not end when women separate from the perpetrator, especially if the woman and the perpetrator have children. **safe steps** supports many women for whom Family Court processes prolong the abuse and offer the perpetrator further opportunities to exert power and abuse women.

There remain very problematic conflicts in the jurisdictions of the Children's Court, the Family Court, and the *Family Violence Protection Act 2008*, partly due to the overlap of Federal and State

jurisdictional responsibility. In particular, overriding of Family Violence Intervention Orders by Family Law orders for child access or contact presents risk to women's and children's safety, particularly in cases where the perpetrator seizes a child. In these cases police cannot act until the Family Court has made a recovery order.

The Children's Court, Family Court and Magistrate's Court all have different conceptual and legal approaches to family violence. At the same time, each of these courts may view a mother experiencing family violence as a protected person, failing to protect a child, and an alienating parent.

The assumption of shared parenting in Family Law is particularly problematic, as it trivialises the ongoing risk to children posed by the perpetrator even if they have not yet been specifically targeted, enabling abuse.²⁸

While **safe steps** supports the establishment of the Family Violence Court model, this alone is not enough to address the problematic intersection in jurisdiction between the Family Court, Children's Court and Magistrate's Court matters. When these issues are exploited by perpetrators who use legal processes abusively, the legal systems themselves can make women and children unsafe. If family law, civil law, criminal law and Child Protection matters were all able to be addressed under the Family Court model, this would be a more effective and integrated solution less open to abuse. This model should be available to women and children across Victoria.

Recommendation

27. That the Victorian Government extends the specialist Family Violence Court model to cover family law, civil law, Child Protection and criminal law matters, and extends availability across Victoria.

Legal assistance and court support

safe steps provides support to clients to attend court to pursue finalisation of Intervention Orders. Women may not have legal representation, although respondents for Intervention Order applications qualify for Legal Aid assistance. Usually, when prosecuting breaches of Intervention Orders, police prosecutors do not speak to the woman before the hearing. These processes are fundamentally disempowering, as other agencies take control of the woman's information, which can shape the conditions of an Intervention Order.

Additional support for women and children attending court for Family Violence Intervention Orders is needed to empower women and children. The pilot initiative introducing Applicant Support Workers for Family Violence Intervention Order applicants has been positive. However, this role has never been expanded from the pilot sites. **safe steps** would see great value with extending this model to all Magistrates Courts and providing specific Support Workers for children to ensure their needs are represented.

Recommendations

28. That Applicant Support Workers for Intervention Order applicants and children are made available in all Magistrates Courts in Victoria.

29. That the Victorian Government makes additional resources available for community legal centres to assist women applying for Intervention Orders, and when police prosecute breaches.

Court appearances

Appearing at court is often difficult for women and children who have experienced family violence because:

- Travelling to and from court can be risky and costly, resulting in some women not appearing at court
- Many women do not have access to child care during court appearances
- Waiting areas in courts may require women to be in the same space as the perpetrator, putting her at further risk of abuse.

safe steps has worked with the Magistrate's Court and Women's Legal Services Victoria to establish a pilot project so that women can appear at court through video conferencing. This increases the safety of women and their access to justice. As the Magistrate's Court has been allocated additional resources to support video conferencing for court appearances, **safe steps** would like the opportunity to extend this pilot project.

Recommendations

30. That options for remote court attendance are made available at all Victorian Magistrates Courts.

31. That funded child care is made available for women attending court on family violence related matters.

Child Protection

Unlike police and justice responses, the Victorian Child Protection Service has not undergone reform to improve its response to family violence. Despite more than half of reports to the Child Protection Service in Victoria²⁹, 64 per cent of child deaths³⁰, and over 90 per cent of Aboriginal children in out-of-home care being removed due to family violence³¹, **safe steps'** experience is that Child Protection responses are inconsistent and often inappropriate to women and children experiencing family violence. Yet Child Protection data systems do not record the presence of family violence nor do assessments identify family violence using validated family violence assessment tools.

The Child Protection Service in Victoria often mistakes or misapply risk assessments in cases of family violence in ways that place blame on mothers as "failure to protect" children for violence perpetrated by men. In doing so Child Protection practitioners often draw false equivalences between abusive behaviour by male perpetrators and the self-protective behaviour of women. Perpetrators often present as calm and friendly to outsiders when the woman is distressed due to the abuse, which Child Protection authorities view as more credible and reasonable. In many cases abusers' behaviour will directly affect a woman's capacity to care for her children through, for example, control over family resources such as vehicles or money. In **safe steps'** experience, these dynamics are often poorly understood by Child Protection practitioners, which can increase risk to women and children.³²

safe steps welcomes the funding committed in the 2015-16 Victorian Budget for child protection flexible responses, including co-locating family violence specialist workers in child protection offices as a necessary step in overcoming these barriers.

safe steps staff often liaise with Child Protection practitioners who are putting pressure on a mother to leave a violent perpetrator, even when she believes this will increase risk to her

children. Relationship separation is a time of heightened risk to women and children³³, however Child Protection practitioners are often uninformed about this risk. **safe steps** often supports women who report that Child Protection practitioners have told her she is risking losing custody of her children unless she leaves the relationship. Conversely, Child Protection often informs **safe steps** clients that they cannot expect to keep their children if they move into crisis or transitional accommodation, as they are seen as unable to support their children.

In addition, **safe steps** recommends that the Royal Commission prioritises the contribution of Child Protection services to working with women to hold perpetrators of family violence accountable, and recognises that domestic and family violence fundamentally disrupts the relationship between a mother and her children, including her capacity to protect them from violence. A number of new initiatives, such as the newly announced family violence Child Protection workers which will work across both family violence and Child Protection agencies, will be very positive towards this outcome.

The Child Protection Service also has limited responsiveness to women and children experiencing family violence in a range of circumstances that commonly occur when family violence occurs:

- Where a woman is identified as a protective parent, even if she is the target of family violence, the Child Protection Service will cease intervention
- Where a woman moves into refuge or relocates, the Child Protection response will cease or be limited, as the practitioner is based in a particular region and cannot follow up in person
- If a woman moves into transitional accommodation to escape violence, the Child Protection response will be to remove the children as it is assumed she cannot provide for her children
- Where the woman has separated from the perpetrator, the Child Protection service assumes that risk has ceased, even though this is the time of highest risk for women and children
- Even though a woman is identified as a protective parent by the Child Protection Service, her protective actions may be construed by the Family Court as alienating the father from his children
- Child Protection risk assessments do not respond well to cumulative harm experienced by children who have witnessed family violence over many years, but where immediate risk of harm is limited.

Recommendations

32. That references to “failure to protect” are removed from the *Children, Youth and Families Act 2005*.
33. That Child Protection strategies prioritise keeping women safe, along with children and holding perpetrators accountable through: minimising risk to women, avoiding pressure on women and children to leave the home, collaborating with police and family violence services to share information, and in court proceedings. Specialist children’s family violence advocates could lead these collaborative responses.

In circumstances where family violence has been occurring over the long term but children are not at immediate risk, there are few options for support services for children. Increased therapeutic supports offered through Family Violence Response Centres would bridge this gap.

safe steps experience is that ChildFIRST and Early Intervention services are under-resourced to meet demand for children who have experienced family violence who are not at immediate risk. Appropriate support from child and family services is therefore unavailable to address the needs of children who have experienced family violence. ChildFIRST and other services for vulnerable children would be better able to address the needs of vulnerable children if specialist family violence services had adequate resources to support children who have experienced family violence.

Victims of Crime Assistance

Although many of the women **safe steps** works with would be eligible for Victims of Crime assistance, the process to access this assistance is time consuming, complex, and unclear to women and support agencies. There is little feedback from the Victims of Crime Assistance Tribunal (VOCAT) on decisions about eligibility and amounts of financial assistance granted. Urgent applications can take months for finalisation. A comprehensive review of Victims of Crime Assistance is needed to improve responsiveness to women and children who have experienced family violence.

Recommendation

34. That the Victorian Government reviews the responses of the Victims of Crime Assistance Tribunal to women and children who have experienced family violence, with specific reference to:
- Options to improve crisis responses
 - Options to increase timeliness of responses
 - The adequacy of financial assistance.

6. Specialist family violence services

There has been significant investment in the specialist family violence sector in recent years. This has included the introduction of new Victoria Police protocols, multi-agency panels and responses, investment in new facilities, introduction of a common risk assessment framework, and work toward better integration with other key agencies.

However, while these reforms have generally been positive, they have not addressed the major systemic issues with specialist family violence services, particularly reliance on a refuge-based service model that increasingly does not meet women's and children's needs, inadequate resources, an inappropriate funding and program framework, lack of capacity to address children's needs, and fundamental inequity of access to support.

Resource and program constraints

Although many of the reforms in recent years have been successful in improving the reliability of responses from police, justice and specialist family violence services, this has increased demand and there has been no commensurate increase in resources. Over the past two yearsⁱ police attendances at family violence incidents has increased by 20%, while calls to **safe steps** have increased by 58.7%.

Several factors have contributed to an increased pressure on the family violence crisis response system:

- The number of women and children presenting to **safe steps** requiring accommodation due to high-risk family violence has more than doubled (130% increase) over the past two years^j, increasing the pressure on **safe steps** to accommodate women in motels in the absence of crisis accommodation vacancies.
- There is an average 35% daily vacancy rate among refuge providers (although not beds)^k, but eligible women wait up to 8 days for their referrals to be accepted^l, and most refuges only accept referrals during business hours. Many women are ineligible for or cannot access refuge accommodation, increasing the pressure on the crisis accommodation system.
- Refuges are no longer meeting clients' needs – 65% of clients accommodated by **safe steps** return to living safely in the community^m, either in their own homes or in alternative accommodation, without needing access to refuge.
- **safe steps** has limited access to alternative accommodation options in the community.

Barriers to accessing refuge

High security accommodation is a critical service for women at high risk; however the Victorian women's refuge system no longer adequately meets the needs of women and children. It is

ⁱ Police attendances are for 2013 and 2014 calendar years, while **safe steps** data is for March 2013- March 2015.

^j Based on total number of clients accommodated in Mar 2013 and in Mar 2015.

^k Based on percentage of refuge services who reported a vacancy Mar-Apr 15. This percentage refers to numbers of refuge providers, not refuge properties or beds. Actual bed vacancies vary on a daily basis due to varying sizes of families accommodated.

^l Based on length of stay and client location after accommodation Mar-Apr 2015.

^m Client location after accommodation Mar-Apr 2015. See Appendix 2 – Data.

recommended that the Victorian Government restructures the system of support offered by women's refuges in order to provide a diversity of responses rather than high security only, more immediate responses for women and children at high risk in need of secure accommodation, and services that are both equitable and accessible.

Analysis of **safe steps** daily referral status data for accommodated clients in March-April 2015 demonstrates these pressures:

- On any given day approximately 35% of refuge providers had vacanciesⁿ (some across various properties)
- 48% of bed nights over this period were occupied by clients waiting for referrals to refuge, but of these only 8% were accommodated by **safe steps** because of a lack of vacancies^o
- This meant that over 40% of bed nights for accommodated clients were occupied due to delays in processing referrals, or extended stays even after women had been accepted into refuge
- Although 48% bed nights were occupied by women and children waiting for refuge, only 35%^p of women and children ultimately exited to refuge – this demonstrates that women and children seeking refuge were accommodated for longer periods than other clients
- The average length of stay in March-April 2015 for women and children waiting for refuge was 8 nights; for other clients the average length of stay was 5.5 nights^q
- Common reasons for delays include lack of resources for 24-hour intake, needing additional time to prepare rooms, and incomplete referrals.
- The majority of clients accommodated by **safe steps** did not go into refuge: 33% returned home usually after considering their options or having security equipment installed, and 31% moved to other accommodation, including family and/or friends, interstate, hospital or supported accommodation for people with disability^r
- Over 21% of bed nights were occupied by women and children who needed refuge but were found ineligible – the majority of these clients (over 80%) were considered ineligible because they did not have permanent residency (and therefore did not have income), a further 17% had mental health and/or drug and alcohol issues (however, for some this is an issue with the methadone/suboxone dispensation program rather than limits on accommodating women with AOD issues)^s
- Nearly half of Victorian refuges are in rural and regional areas, which are under-serviced and lack access to transport. The design of the homelessness system means that women only have access to longer term housing options within the area the refuge is located. This means moving permanently out of metropolitan areas into rural and regional areas. While women would like to leave their area due to it being safe, many women prefer to remain in metropolitan Melbourne.

ⁿ Based on percentage of refuge services who reported a vacancy Mar-Apr 15 This refers to numbers of refuge providers, not refuge properties or beds. Actual vacancies vary on a daily basis due to varying sizes of families accommodated.

^o Analysis of daily referral status of accommodated clients. See Appendix 2 – Data.

^p Client location after accommodation Mar-Apr 2015. See Appendix 2 – Data.

^q Based on length of stay and client location after accommodation Mar-Apr 2015.

^r Client location after accommodation Mar-Apr 2015. See Appendix 2 – Data.

^s Analysis of daily referral status of accommodated clients. See Appendix 2 – Data.

Refuge accommodation essentially requires that women and children go into hiding – providing secure accommodation where statutory systems have failed to intervene to protect women and children. Furthermore, as discussed below, access to refuge is inequitable, with mostly women in vulnerable and disadvantaged circumstances missing out.

Recommendation

35. That the Victorian Government reforms Victorian women's refuges with the intention of providing immediate and equitable access to safe accommodation for women and children at high risk.

Constraints on crisis accommodation

Supported crisis accommodation places in Victoria have not grown along with demand. In addition to the supported accommodation operated by **safe steps**, we work with partner agencies who provided supported crisis accommodation, with varying levels of support (e.g. some are not available on weekends).

Other crisis accommodation provided by **safe steps** is funded by the Housing Establishment Fund (HEF), which has a number of constraints that mean **safe steps** is limited to providing accommodation to women and children in motels while they wait for an appropriate place in refuge. **safe steps** is not funded to provide any support, advocacy, or co-ordination of other support services to women and children accommodated in motels, and must deliver this service within limited resources.

Due to constraints in the availability of refuge accommodation, **safe steps** has experienced a large increase in the number of women and children accommodated in motels and the length of time they stayed (see Tables 1 & 2). This has led to increased cost pressures, as motel costs have also risen during this period. A Family Violence Response Centre model with supported crisis accommodation would provide more effective support with a similar funding allocation.

Table 1: Percentage of clients with at least part of crisis accommodation stay in a motel

2012	2013	Snapshot September 2014	Snapshot March- April 2015
74.50%	78.98%	88%	95.28%

Table 2: Average nights in motels^t

All of 2013	March-April 2015	Increase
2.48	3.88	56.06%

Capacity to meet children's needs

Children's experience of family violence is unique, and must be addressed separately from that of their mothers. This includes therapeutic responses to recognise and address the impact of violence, and support to maintain engagement in education. Lack of appropriate support results in children and young people being at risk of a variety of adverse outcomes including mental ill-

^t Of those who stayed in motels, this number represents their average number of nights in motels. Some clients moved to other crisis accommodation after they were accommodated in a motel – this table does not include that time.

health, behavioural problems, unemployment, alcohol and other drug issues, poverty, and future victimisation or perpetration of violence.

Relocation to high security refuge accommodation has major disruptive impacts for women and children especially disruption to schooling, child care and other services e.g. health, and disconnection from friends, family and supportive relationships in the community.

Women are often reluctant to leave abusive relationships because of concern for their children's wellbeing, particularly their educational participation. Dedicating resources to making children's workers available in family violence crisis accommodation and refuge services can better address this concern and ensure the wellbeing of children escaping family violence.

At present **safe steps** and other family violence services are not resourced to address children's needs, despite 50.3% of clients supported being under 18^u. A rights-based approach needs to address the fact that family violence presents a fundamental disruption to the security and safety of children, and provide commensurate resources to support children as government makes available to respond to adults.

Recommendation

36. That the Victorian Government makes equivalent resources available to support children who have experienced family violence as for adults. This includes children's workers across all family violence services.

Equity of access

Too often it is the most vulnerable and disadvantaged women who cannot access support when they seek it. The specialist family violence service system is based on a range of assumptions about who clients are, and services often struggle to support women who not 'fit the mould'. Frequently this is because of a lack of flexibility in funding and programs, resulting in services being unable to manage resource constraints or risk that affect service provision. For example many women with history of contact with the criminal justice system cannot access support, as services must often consider other risks before they can accept women with criminal convictions, and have few options to manage risks.

This can reinforce broader social attitudes that some women do not deserve support to be safe if they choose to accept a level of risk, e.g. if they are injecting drug users, or if they prioritise their cultural obligations, because services must work harder to support them than other women. This is concerning as women who are already disadvantaged receive less appropriate support than women who are part of the dominant group.

Rethinking family violence responses must begin from a basis that all women and children have a right to be safe, regardless of their circumstances. A more holistic and flexible range of support is needed to address all women's and children's needs.

Culturally safe services for Aboriginal and Torres Strait Islander women and children

5.5% of **safe steps** clients identify as Aboriginal and/or Torres Strait Islander^v. Aboriginal-specific services in Victoria are currently working well to support Aboriginal and Torres Strait Islander

^u Based on all clients accommodated with a support period in 2014.

^v Based on all supported clients in 2014.

women and children. They provide culturally safe³⁴ support for Aboriginal women and children. However, **safe steps** is concerned that they may have limited capacity to respond, and that other family violence services should also ensure that Aboriginal and Torres Strait Islander women and children can access culturally safe mainstream services.

Cultural competency

Women and children who are from migrant families, particularly if they are first generation migrants, are often socially isolated and may not speak English. This can mean that they rely on their spouse and family to a greater degree for information about their rights and acceptable gender norms. Isolation presents significant barriers for women when they experience family violence. Most women in Australia who leave their homes due to family violence stay with family and friends.³⁵ However, lack of family or friends in Australia can mean women who have migrated have few options to turn to. This isolation can mean that migrant women rely more heavily on specialist family violence services for support than other women.

However, they do not always have access to appropriate support because:

- Not all family violence services have access to interpreters
- Interpreters who are available may know the woman or the perpetrator, particularly if they are from a small community
- Lack of capacity to provide support with immigration issues
- Lack of nearby places of worship
- Refuges that are located in regional areas are not close to culturally and linguistically diverse communities, services or facilities
- Refuges may have limits in whether they can meet women's dietary requirements, which is a particular constraint in regional areas.

A bilingual and culturally competent workforce in Family Violence Response Centres will address many of these limitations.

Recommendations

37. That the Victorian Government ensures that all family violence services can access interpreting and translation services free of charge.

Options for women without permanent residency or income

Over 80% of women and children in **safe steps** accommodation who are ineligible for refuge are ineligible due to lack of permanent residency^w, and they remain in crisis accommodation twice as long as other clients.

For women without permanent residency, abuse is compounded by the lack of eligibility for income support and social housing. This then limits access to services, due to lack of income (rather than residency status). Accommodation providers charge clients accommodation co-payments, which clients without permanent residency cannot pay. Furthermore, as other housing assistance is unavailable, women without permanent residency have limited options to exit from refuge. The services which have the capacity to support clients without income are overburdened and cannot meet the level of demand.

^w Analysis of daily referral status of accommodated clients. See Appendix 2 – Data.

safe steps accommodates women without permanent residency and their children for much longer than other clients, due to their ineligibility for other services. Increasing the availability of supported refuge accommodation for women without permanent residency would address this gap more effectively. Family Violence Response Centres would be inclusive of women without income or permanent residency.

The range of support needs of women without residency are not met, particularly legal and migration advice and housing. Applying for protection visas is a lengthy and complex process requiring considerable preparation. Support to navigate the complexities of family law, Child Protection, civil law, criminal law and migration law is desperately needed for women without permanent residency to be safe in the community. However, there are few migration advice services available, and these services are challenged to meet the level of demand, and are not resourced to provide this specific assistance.

Recommendations

38. That the Victorian Government increases the number of places for women without income in high security refuge accommodation, and provides private rental brokerage and financial assistance to women without permanent residency.
39. That the Victorian Government resources a specialist migration and legal advice service for women without permanent residency who are experiencing family violence.

Appropriate support for women with mental health and/or alcohol and other drug issues

Over 40% of women assessed by **safe steps** have identified having mental health or alcohol and/or other drug (AOD) issues.^x Women with mental health and/or AOD issues are particular targets for victim-blaming and dismissive attitudes towards family violence, as they are seen as choosing to expose themselves and their children to risk, and being unfit mothers. These attitudes are particularly evident when women with mental health and/or AOD issues contact police and Child Protection.

These broader attitudes can be reinforced through lack of appropriate specialist family violence service provision because:

- Services do not have capacity to assist women to access treatment or rehabilitation services
- Services do not have the training to support women to manage their medication
- Services cannot support women to safely access treatments, e.g. accessing methadone requires women to return to the original pharmacy, which may be unsafe for her
- Services do not have the capacity, training or resources to manage risks associated with behaviours of concern, suicidal or self-harming behaviour
- Services may already be accommodating a woman with a particular AOD or mental health issue and do not have the flexibility to manage the risks for multiple women with similar issues

Where women cannot be accommodated by specialist family violence services, they usually remain in motels or crisis accommodation, supported by **safe steps** and other services. However

^x Based on self-identification of mental health concerns. Cumulative Family Violence Risk Assessment Profiles Jan-Apr 2015.

we and other family violence services have little capacity to assist women to manage their support needs. Motels can particularly exacerbate mental health conditions.

Specialist family violence services need specialist mental health and AOD resources available within the specialist family violence system to support women effectively and to manage risks to safety with varied support needs. This would be included in specialist Family Violence Response Centres.

Recommendation

40. That specialist family violence services are resourced to train workers in supporting women with mental health and AOD support needs, and to employ clinical workers to deliver mental health support, AOD treatment and rehabilitation support.

Access and equity for women and children with disability

Women with disability are at greater risk of abuse.³⁶ This is due to stigma relating to disability, and the isolation, disadvantage and disempowerment that result from inequality.³⁷ Often women with disability are abused by a person who provides their disability related support needs, including paid support workers. This complicates the experience of abuse and can mean that seeking alternative support is difficult. It can often mean that women with disability have greater difficulty than women without disability to naming the abuse, recognising it is not their fault, that it is unacceptable, and they have a right to live free from violence.

Many women and children with disability face barriers to accessing support when they seek it because:

- There is poor understanding of disability among police, with police often considering women with disability unreliable witnesses, or disregarding their reports of abuse in favour of the perpetrator
- Courts do not give equal weight to the testimony of women and girls with disability
- There is a lack of physically accessible crisis and refuge accommodation properties
- Women with disability may have support needs that specialist family violence services cannot meet, particularly if their disability results in behaviours of concern, or if they have communication support needs
- Women with disability may seek to remain in a relationship with the person abusing them, and at present the service system struggles to respond to these needs.

safe steps commends the initiatives that the Victorian Government has taken to respond to violence experienced by women with disability, including resourcing Women with Disabilities Victoria to address the systemic barriers for women with disability, provide community education and build the capacity of women with disability. It is essential that these initiatives continue.

At present, **safe steps** accesses funds from the Crisis Response Initiative administered by the Department of Health and Human Services to meet the disability support needs of women with disability when they come into our service. At present this is working well. However, as all Victorian disability funding will be redirected to the National Disability Insurance Scheme (NDIS), the Crisis Response Initiative is at risk. **safe steps** would strongly prefer to see the Crisis Response Initiative continued through DHHS, as the NDIS model is not responsive to emergencies and crises.

Recommendations

41. That the Victorian Government allocates appropriate resources to modify all existing family violence accommodation to Livable Housing Australia Guidelines Gold level certification.
42. That the Victorian Government continues to provide block funding for the Crisis Response Initiative.
43. That documents and other materials relating to family violence are provided in a variety of languages and formats, including Easy English, Braille, Auslan, video and audio.

Integrated, specialised responses to sex, gender and sexual diversity

safe steps has partnered with No To Violence, the peak body for men's behaviour change programs, to develop specific submission to the Royal Commission on the family violence response needs of lesbian, gay, bisexual, transgender, intersex and queer (LGBTIQ) persons. Comments below are supplementary to the discussion and recommendations in that submission.

Transgender women have particular difficulties accessing support. **safe steps** recognises transgender women as women however, many family violence specialist services decline to provide support because they do not recognise transgender women as women. Often this is expressed in terms of perceived 'risk' to staff or other clients. This is particularly concerning as some evidence indicates that transgender women are much more likely than cisgender women and transgender men to experience violence.³⁸ **safe steps** recommends that the Access and Equity Framework recommended above has a particular emphasis on equity for transgender women under the *Equal Opportunity Act 2010*, and clarifies exemptions for gender-specific services.

Response services for LGBTIQ people experiencing family violence are scarce and do not respond to the full extent of family violence towards LGBTIQ persons. There are no responses available for people with non-binary gender identities, intersex people and gay men when they experience family violence. **safe steps** recommends that new specialist responses need to be developed, in partnership with LGBTIQ communities. Specialised responses from known and trusted LGBTIQ organisations can draw on their established connections to the community and knowledge base about community needs, while specialist family violence agencies can bring expertise with risk assessment and safety.

Recommendations

44. That the Victorian Government supports the establishment of specialised family violence response services, including perpetrator programs and awareness raising, for LGBTIQ people.
45. That the Victorian Equal Opportunity and Human Rights Commission clarifies the application of exceptions under the *Equal Opportunity Act 2010* with regard to transgender women's usage of women's services.
46. That the Victorian Government supports research for the purpose of developing future family violence services and programs that meet the needs of LGBTIQ persons.
47. That the Victorian Government funds accredited training for the family violence sector and other agencies to meet standards in responsive and inclusive practice for working with LGBTIQ people.

Outcomes of recent reforms

Statewide crisis response

Statewide crisis responses have improved considerably as a result of many of the reforms of recent years. **safe steps** provides the statewide specialist crisis response, which is complemented by other crisis response services with which we work closely, including Victoria Police. This improvement has been driven by:

- Providing an immediate response to every woman and child
- Triaging and better assessment of women and children at the time that they present;
- Changing practice, including adopting a broader view of family violence and responding to women who once found it difficult to find support (such as women with mental health issues or those using alcohol or drugs);
- Better service collaboration across generalist services, health services and police; and
- Increased partnerships between specialist family violence providers.

As the statewide central response agency to women and children in crisis, **safe steps** maintains a vital role in the specialist family violence response system. Further detail about **safe steps'** crisis response model is provided in Appendix 1.

Over the past 2 years **safe steps** has seen a 130% increase in demand for accommodation and a 58.7% increase in calls, outstripping increases in police attendances^y. In response, **safe steps** has made changes to its crisis response to ensure that either all calls are answered or returned. **safe steps** is challenged to meet the demand pressure and requires an ongoing boost to funds for our core operations.

A particular change, for which **safe steps** did not receive specific resources, was to introduce case management support for clients accommodated in motels, due to increasing numbers and lengths of time women and children were accommodated in motels. This has improved support and material aid available to women and children in motel accommodation. The Victorian Government provided a welcome increase in resources in its 2015-16 Budget for this initiative, however the allocation is short term only and will need to be ongoing in order to meet demand.

Recommendation

48. That the Victorian Government increases core resources for **safe steps** to address increased demand and to support women and children in crisis accommodation.

Crisis Advocacy Response Services (CARS)

CARS provide after-hours face-to-face responses to crises around metropolitan Melbourne. **safe steps** strongly supports the CARS model, as we believe that a face-to-face response is best practice in responding to women and children who have experienced family violence. However, current CARS resources are insufficient to provide a consistent response, and no response is provided to women and children in rural and regional areas. Family Violence Response Centres would absorb and increase CARS capacity to provide 24/7 face-to-face crisis responses across Victoria.

Safe at Home responses

Safe at Home responses have been an important innovation in family violence response services. The purpose of Safe at Home responses is to ensure women and children can remain at home and

^y Based on total number of clients accommodated, and total number of calls, in March 2013 and in March 2015

do not become homeless as a result of violence, and the perpetrator is removed. These have a number of features:

- Collaboration with police to ensure the perpetrator is excluded
- Changes to locks and installation of security equipment
- Outreach support to the woman and her children
- Ensuring that contact between the perpetrator and children occurs away from the home.

These features are both economic and just – rather than women and children needing to leave their homes and thereby using greater resources in homelessness services, one perpetrator is excluded from the home. The woman and her children maintain stability, and the risk of long-term homelessness, poverty and other adverse outcomes is reduced.

Recommendation

49. That the Victorian Government increases availability of Safe at Home responses.

The Victorian Risk Assessment and Management Framework

The Risk Assessment and Management Framework is also known as the Common Risk Assessment Framework (CRAF). It has been a useful tool for a consistent approach to risk assessment and data sharing. Other state governments are exploring the implementation of a common framework.

safe steps uses the comprehensive level 3 CRAF assessment but has a number of supplementary questions that we ask in addition to the main CRAF questions. This is because the CRAF tool does not meet all the needs of **safe steps** and other specialist family violence services to determine the level of risk for women and children, particularly with regard to factors relating to the perpetrator. The purpose of the CRAF tool is to assess risk of lethality, which at present it cannot do because it lacks some dimensions including:

- Severity of particular behaviours or types of abuse – many items are quite general e.g. ‘has harmed or threatened to harm’
- Risk factors are not weighted for comparative severity, e.g. stalking v. pursuit, so the risk profile is not nuanced enough to indicate the most appropriate response
- There is no validated family violence assessment tool for children
- The CRAF tool is not nuanced enough to account for relationship dynamics and perpetrator factors that might affect risk, particularly gender-related factors e.g. perpetrator hopelessness and traditional values toward gender roles.

While improving these capabilities within the CRAF would generally be more useful for specialist family violence services, **safe steps** believes these changes could make it a useful assessment tool for other uses, particularly police and the justice system. Often what is missing from the justice system’s understanding of family violence is future risk of harm, as the understanding of family violence is usually based on isolated incidents or actions rather than an ongoing pattern of escalating abuse. **safe steps** speaks to many police officers who underestimate the severity of risk based on the number of risk factors in a CRAF risk profile because it lacks contextual information about the interaction of risk factors. A more nuanced assessment tool would greatly assist the family violence sector to provide useful evidence to the justice system as well as providing appropriate support to women and children.

safe steps understands that the Department of Health and Human Services is reviewing the CRAF tool, and looks forward to participating in the review.

Training

CRAF training was initially very comprehensive when it was first implemented. Over time it has become less comprehensive, and there is less of an emphasis on the comprehensive level 3 CRAF assessment. It is therefore becoming less useful for family violence agencies. The online CRAF training is perhaps more useful for other service systems than for specialist services. However, it is limited in that it offers little guidance about how to respond. Service providers should be involved in developing and delivering CRAF training, which would strengthen relationships between specialist family violence services and other systems. **safe steps** already delivers some external training, however strengthening this capacity would be beneficial.

Training needs to address factors that cause or contribute to the development of family violence, dynamics of a violent relationship, the reasons women choose to stay, the factors that support them to leave, and the barriers to leaving. Without this comprehensive view, the CRAF can easily become a tokenistic check list, without enabling the practitioner to explore the experience of family violence and accurately identify risk. This should be supplemented with training in safety planning, which prioritises the woman's own perceptions of risk and her strategies to manage risk.

Furthermore, generalist level 1 or 2 CRAF training is not as inclusive as it could be of the circumstances of women with disability, women in regional and rural areas, Aboriginal and Torres Strait Islander women, and the dimensions of family violence influenced by culture.

Recommendations

50. That the Victorian Government commissions the development of a validated family violence assessment tool for children.
51. That CRAF training addresses the dynamics of violent relationships in more depth, is delivered by specialist family violence service providers who work with women and children at risk, and includes content on safety planning with women.

7. Limitations in other service systems

Family violence identification in other services and systems

Women frequently report to **safe steps** that the most important thing they need from first response services is recognition that what they are experiencing is family violence. Naming violence is an important part of recognising that the violence is not the woman's fault, that she and her children are at risk, and that she has a right to support. A shared approach to fulfilling women and children's rights to safety means that professionals in all human services have a responsibility to respond appropriately.

While there have been some efforts to increase competency among General Practitioners, maternal and child health nurses and other professionals, many of these have been hampered by a lack of knowledge about how to respond to disclosures of violence. At present effective responses from universal service systems rely on individual practitioners going out of their way to access this information.

A more thorough approach to early identification must involve:

- University and VET curricula including compulsory content on family violence identification and response
- Specific training for a range of professionals in undertaking CRAF assessment
- Professionals in a range of human services having basic competency with developing safety plans with women and children, particularly health, mental health, AOD services and school welfare co-ordinators
- Establishing referral pathways and protocols for generalist human services into specialist family violence services through local, regional and statewide services and networks.

Recommendation

52. That the Victorian Government requires level 2 CRAF and safety planning training for a range of professionals including school welfare co-ordinators and counsellors, TAFE and VET welfare workers, GPs, nurse practitioners, hospital social workers, homelessness Access Points, maternal and child health nurses, midwives, mental health services, alcohol and other drug services.

Homelessness Services

It is estimated that over 33% of people presenting to Victorian Homelessness Access Points state the primary cause of their homelessness is family violence or family breakdown³⁹, making Victorian homelessness service providers a critical responder to family violence. Homelessness and housing services are a vital partner in responding to women and children who are escaping violence, or displaced as a result of family violence, and partnerships between specialist family violence services and homelessness services can provide better, more sustainable housing outcomes for women and children.

However, accessing support through housing and homelessness services is not always safe or appropriate for women and children. Some women and children will not be considered eligible for homelessness assistance if they have equity in home, social housing tenancy, or private rental accommodation. In other cases, homelessness services are reluctant to assist women and children at risk, regardless of the level of risk.

Homelessness agencies do not routinely assess for or prioritise women experiencing family violence. Although they are expected to undertake level 2 CRAF assessments⁴⁰, this does not occur among many homelessness agencies. **safe steps** estimates that family violence is under-identified and misidentified as ‘family breakdown’ among homelessness clients.

Under the Opening Doors Framework, each area has a face-to-face Access Point, which has referral rights to accommodation services in the area. This means that they often require women to return to their home area to access services daily or weekly, which may be quite risky. Refuges also exit women to homelessness services, but regional boundaries mean that they can only refer to services in their region. With most refuges located in regional areas, this means that women and children are forced to move to a region not of their choosing if they need to leave their home.

Homelessness services provide accommodation and material aid through Housing Establishment Fund (HEF) resources, but homelessness services have a fixed allocation of HEF funds per client, regardless of the number of times the client presents to the service. Although it is well-documented that women and children often present to services multiple times over several attempts to leave a relationship⁴¹, fixed HEF allocations per client penalise women and children experiencing family violence who may need to use homelessness services multiple times before they can permanently separate from the perpetrator.

The types of accommodation provided through homelessness services are not always appropriate for women’s and children’s needs. Frequently, women and children are placed in motels along with other service users, or they are placed in mixed-gender rooming house accommodation, which can increase risk.

Furthermore, homelessness agencies have few support options to offer women and children escaping family violence. They do not have the capacity to assist with women’s and children’s therapeutic needs or with accessing support needed to separate from the perpetrator and live free from violence.

Health services

The health system is an important site for early intervention opportunities and therapeutic support to women and children experiencing violence, and offers women and children important opportunities to disclose their experience. However, the persistent barriers for women and children experiencing family violence in the health system impede these opportunities.

safe steps has low numbers of referrals from health services², including GPs, nurses, midwives, maternal and child health nurses, and allied health practitioners. Also, despite some evidence that nearly half of all women who present to Emergency Departments having experience of family violence, there is no systematic screening of women in hospitals and considerable under-identification of family violence within hospitals.⁴²

Compulsory screening of women and children presenting to hospitals and health services, with training for practitioners in appropriate responses to women who disclose that they are experiencing violence, would greatly assist with early identification and intervention.

² 2.6% of all referrals to **safe steps** are from hospitals, and 0.65% of referrals are from mental health services. However, some police referrals are made after a hospital presentation by women and/or children. Based on snapshot of all clients with support period Oct 14-Mar 15.

Mental health and Alcohol and Other Drug (AOD) Services

Mental health and AOD services, while being a major site for women and children who have experienced family violence to seek help, do not always respond well. Often, they do not identify the violence as the cause of the mental health concern, or misdiagnose Post-Traumatic Stress Disorder (PTSD) as depression, anxiety, psychosis or borderline personality disorder.⁴³ **safe steps** is also aware of mental health and AOD services misidentifying the aggressor in family violence when they are working with perpetrators of violence, and reinforcing violence supportive beliefs held by perpetrators.

Some mental health and AOD services will also not work with women and children experiencing family violence because they are considered transient, or may be out of area due to relocating to escape violence. This is a particular barrier for women who are expected to undergo AOD treatment and rehabilitation before accessing high security refuge.

Trauma-informed practice and greater competency with identifying family violence would contribute greatly to better outcomes for women and children when they contact mental health and AOD services.

Recommendation

53. That the Victorian Government works with the family violence services, mental health and AOD sectors to establish referral pathways and specific responses for women and children experiencing family violence.

Education

The universal coverage of the education system makes it an important site for children and young people to access support, information and intervention when they are unsafe or at risk. However, **safe steps** receives few referrals from teachers or student welfare staff.

At present schools' engagement with family violence involves mandatory reporting to the Child Protection Service. There is no systematic identification of children at risk through the education system, or responses to risk. As discussed above, this is an inadequate and inappropriate response, as the Child Protection Service does not identify or respond appropriately to family violence. A protocol between the Department of education and Training (DET) and DHHS, such as that between DHHS and Victoria Police, to respond to family violence would enable greater collaboration between schools, Child Protection and other services for vulnerable children.

Educational disengagement is also a major risk for children who experience family violence. This can occur due to mental health, developmental or behavioural issues as a consequence of violence, or needing to relocate to escape violence. This can result in life-long disadvantage and risk of re-victimisation due to family violence. **safe steps** recommends that DET develops targeted responses to children and young people at risk of educational disengagement due to family violence.

Addressing the long-term impact of family violence

The impact of family violence can last long past the end of the relationship. Consequences of abuse such as loss of educational opportunities, employment and housing contribute to women and children experiencing long term poverty for their entire lifetime after the experience of family

violence. This is an enormous loss of human potential, which we as a society have never properly valued or remedied.

An advocacy model as described above would have capacity to work with women and children to address these consequences through supporting the woman and her children to obtain financial assistance employment, training, or housing.

Housing

Housing stress in the context of a housing crisis across society contributes to women and children being unsafe, as women and children have narrowed options to escape violent relationships. Lack of affordable housing also contributes to greater pressures on specialist family violence and homelessness services, as clients rely on accommodation services for longer periods of time due to the lack of alternative options. This increases pressure on crisis and refuge services.

Women in private rental accommodation often find it difficult to obtain stable accommodation when they leave the relationship, due to lacking a rental history or being listed on a tenancy database for damage or rent arrears caused by the perpetrator. Efforts to increase women's access to provisions to change leases have been useful, particularly with the introduction of the VCAT Family Violence Support Worker position. However, there are limited options for women listed on tenancy databases or without rental histories.

Women living in social housing have some barriers to relocating to escape family violence. Social housing transfers are lengthy processes, particularly for women with several children, which can increase risk. Furthermore, if women need to relocate to crisis accommodation to escape violence, they may remain liable for rent while they are also paying accommodation charges for refuge accommodation.

Recommendations

54. That the Victorian Government develops a long-term affordable housing plan to increase the availability of affordable housing across Victoria.
55. That the Victorian Government amends the *Residential Tenancies Act* to provide people who have experienced family violence the option to have their name removed from tenant databases if the matter for which they have been listed is related to family violence.

Conclusion

This submission has outlined a comprehensive case for reform, as the current responses to family violence do not fulfil women's and children's rights, and tend to compel women and children to fit into service models that do not meet their needs. This leaves women and children facing multiple risks when they do seek intervention from statutory and other service systems. Furthermore, the specialist family violence sector is hampered by inadequate resources and inappropriate program frameworks, as well as conflicting approaches from other agencies.

Some of these issues can be addressed through policy, program and resource changes to enhance the capacity of current systems. However, to truly fulfil women's and children's right to be safe, Victoria needs to fundamentally re-think its approach to family violence. We cannot continue to work with fragmented and ineffective tools for the task at hand.

A bold and visionary approach is needed that comprehensively addresses the causes and consequences of violence, and which enshrines women's and children's right to safety as the central organising principle. This requires:

1. Clear leadership, with a Minister responsible for all family violence responses, and a dedicated funding source
2. Bringing together all family violence responses under a statewide operational framework
3. A new model of support that meets women's and children's needs when and where they seek support
4. Improving capacity to monitor and track risk factors in perpetrator behaviour and circumstances, and ensuring that women's and children's needs are centred
5. Ensuring a co-ordinated, shared responsibility for addressing family violence and ensuring the needs of women and children are met.

This submission has detailed all of the elements needed to ensure these requirements are met, based on **safe steps'** expertise with working with women and children experiencing violence, consultation with our staff and stakeholders, and statewide coverage.

safe steps looks forward to working with the Royal Commission and the Victorian Government to progress our recommendations, and welcomes the opportunity to provide further feedback on anything discussed in this submission, or related matters. The appendices detail (1) further information about **safe steps**, and (2) statistical service data.

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