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36 Prevention

Introduction

Preventing family violence is essential for the health and wellbeing of our community. While we have tended to focus on how best to respond to family violence once it occurs, prevention deserves an equal degree of attention. Unless we address the problem of family violence at its source, and get better at preventing it from occurring in the first place, our communities and support systems will continue to be overwhelmed. As Mr Ken Lay, APM, the former Victorian Chief Commissioner of Victoria Police, told the Commission:

... despite all that investment, despite all the work, despite all the goodwill, we still have a court system that many victims and women describe as a horrendous experience. We still have women being murdered at almost a weekly rate. We still have terrible, terrible injuries. We still have much of our focus on trying to arrest our way out of this. So the violence continues ... I don't see the current model, unless we get into that primary prevention space, moving. ¹

Prevention strategies in relation to family violence, also referred to as primary prevention, are concerned with changing the underlying social determinants that allow family violence to occur. Prevention and early intervention are often conflated in practice and policy. Early intervention, also referred to as secondary prevention, includes activities that target individuals at risk of perpetrating or experiencing violence. Responding to family violence, sometimes referred to as tertiary prevention, aims to reduce the effects of violence once it has occurred, and to prevent its recurrence. Strategies include providing support for victims of violence, and justice responses to perpetrators.

The first section of this chapter begins with an overview of research on population and individual risk factors for family violence. This research has largely emerged in the context of efforts to prevent violence against women. As intimate partner violence and sexual violence (which may be perpetrated by men who are unknown or unrelated to the woman) are the most common forms of violence against women, the research focuses on the prevention of these forms of violence. This body of research has informed the development of programs and strategies to prevent violence against women and their children, with a key focus on preventing intimate partner violence.

Strategies that seek to prevent violence against women focus on addressing gender inequality by, among other things, challenging gender norms and attitudes towards women:

... primary prevention is not about simply stopping or disrupting an individual from ‘going down a path’ to perpetrating violence. Nor should it end at awareness raising or even attitudinal change. It is a transformative agenda that requires shifting the social conditions that excuse, justify or even promote violence. Individual attitudinal or behaviour change may be the intended result of prevention activity, but such change cannot be achieved prior to, or in isolation from, a broader challenge to the underlying drivers of such violence across communities, organisations, and society as a whole. ²

The literature on prevention of violence against women also recognises that prevention efforts need to address social conditions such as socio-economic disadvantage, discrimination based on race, sexuality or age, and prior exposure to violence alongside gender inequality. ³

Programs to prevent violence against women aim to develop and promote respectful relationships generally, to change broader social norms around the use of violence and to create environments in the home that model non-violent and respectful behaviour to children. On this basis, strategies that have been developed to prevent intimate partner violence against women are also likely to be applicable to the prevention of other forms of family violence, such as violence committed against children, in same-sex relationships, and against parents, siblings and older people.
However, there is still a need for a more robust research base in relation to the factors that drive these other forms of family violence, and the prevention actions required to directly address all circumstances that give rise to family violence.

The chapter then offers an overview of recent prevention policy at both the state and Commonwealth levels and a discussion about the elements of best practice primary prevention responses. Victoria has been recognised internationally for its work in the area of prevention of violence against women in research, policy and practice development over the last 10 years, and the substantial contribution of VicHealth (the Victorian Health Promotion Foundation) has positioned Victoria well for the future. Coordinated policy and planning effort is a significant gap, however, and an immediate priority.

Some of the important features of best practice primary prevention programs are that they involve the whole community, including men and boys, and that they are tailored to, and developed in partnership with, communities who have experienced sustained discrimination, and communities from different cultures. There is growing understanding about the value of investing in prevention strategies focused on children and young people, and in the settings that have greatest influence on their development—such as schools and home visitation programs. The Commission also heard evidence that prevention programs do not work in isolation and that a more systematic approach, rather than a ‘project-by-project’ approach, is required.

Primary prevention strategies work best when they are delivered in the places where people live, work, play and learn. The remainder of this section outlines current prevention actions within key settings including schools and tertiary institutions, workplaces, sporting clubs and local councils. Prevention programs occurring in schools are a particular focus of this section.

In the second section, we outline some of the key challenges raised in the evidence in relation to prevention. These include the lack of a coordinating strategy or framework for the current proliferation of prevention initiatives, and the need for strong leadership by government as well as dedicated funding and more effective monitoring and evaluation of programs.

In the final section the Commission makes its recommendations. It is clear from the evidence that a key priority for the Victorian Government is to effectively coordinate the current efforts supported by appropriate regional governance, and ensure that they are well-founded and resourced, appropriately targeted and subject to evaluation and improvement. To this end we recommend that a dedicated primary prevention strategy be developed as a discrete part of the Statewide Family Violence Action Plan proposed in Chapter 38. That strategy should be informed by the Gender Equality Strategy which is currently being developed by the Victorian Government, and which will address community attitudes towards women and issues such as economic inequality, health and wellbeing, employment and workplace issues, and inequality among diverse groups of women.

Further, we recommend that the Victorian Government resource a mechanism to provide policy and technical advice to policy makers, and oversee the research, development and implementation of primary prevention initiatives within organisations and communities. We have discussed a number of options but have ultimately left the decision to government about the location of that oversight mechanism.

Political leadership will be required to drive this strategy, and a bi-partisan approach is essential. However, the actions of the Victorian Government itself will not be enough. This strategy relies in large part on the efforts of all Victorians in coming together to change attitudes and behaviours. Individuals and organisations all have a role to play.

Finally we recommend that respectful relationships education be mandated in all government schools in Victoria from prep (or foundation) to Year 12, and be delivered through the effective resourcing of a whole-of-school approach. This accords with the evidence that educating children and young people about the basis for healthy and respectful relationships is crucial to preventing family violence in the future. Further work in other key settings, such as workplaces, must also continue. This is discussed further in Chapter 37.

The Commission's recommendations on prevention strategies aim to position Victoria for the next generation of reform in the area of family violence prevention.
Context

Understanding the causes of family violence is an important step in determining what sort of prevention strategies are effective. This section discusses common risk factors that have been identified across different types of family violence, including intimate partner violence and child abuse, and also looks at key population risk factors for violence against women, such as gender inequality. Prevention policies and planning, at both state and Commonwealth level, are also discussed, as are best practice planning principles for engaging the community, including diverse groups, in prevention strategies.

Research on the causes of family violence

The terms of reference for this Commission do not require determination of the causes of family violence. However, understanding the many factors which contribute to it must inform future action, particularly primary prevention strategies.

The Commission has reviewed evidence from expert Australian and international organisations over the last decade about the causes of violence against women. In November 2015, Our Watch, a national body established in 2013 to drive change in the culture, behaviours and attitudes that lead to violence against women and children, released a National Framework to Prevent Violence Against Women and Children. The national framework provides a synthesis of research on the causes of violence against women and their children, and effective interventions.

The most common form of family violence is male intimate partner violence against women. Research on the causes of violence against women, both in Australia and internationally, has focused on factors that contribute to intimate partner violence.

Progress towards understanding, and developing effective prevention measures are recognised to be considerably less well developed for elder abuse.

Research on child abuse and maltreatment (which can occur within a family, but also in institutional and other non-family settings) suggests that child abuse frequently occurs alongside intimate partner violence. Co-existence rates identified in the literature range from 30 per cent to 70 per cent. Research about the risk factors for child abuse and maltreatment indicates that they are broadly consistent with the risk factors relating to intimate partner violence (such as gender inequality, socio-economic disadvantage, discrimination, and violence supportive cultures)—this is unsurprising given the frequent co-occurrence of violence against children and intimate partner violence against women. There is also research on other forms of child abuse such as neglect, maltreatment and sexual abuse and the specific factors associated with these forms of violence.

Professor Leah Bromfield, Deputy Director, Australian Centre for Child Protection, University of South Australia, told the Commission that ‘if you were looking at some of those social determinants for child abuse, they would be common to some of the things you are looking at in trying to reduce the incidence of domestic violence.’

The Commission notes that design of family violence prevention efforts must encompass all available evidence, as well as addressing gaps in the research where they exist. Prevention efforts must be targeted to all forms of family violence, such as elder abuse, violence against men, including gay, bisexual and transgender men, and violence used by young people in the home.
Risk factors

Risk factors are determined by comparing rates of violence, or precursors to violence (such as social tolerance for violent behaviour) between individuals, groups, and communities with varying levels of exposure to certain conditions. Where the rate of violence is found to be lower in the presence of a given condition, this condition is considered a ‘protective factor’ against intimate partner violence. Where the rate of violence is higher in the presence of a particular condition, this condition is considered a ‘risk factor’ for intimate partner violence.

Some of the factors implicated in intimate partner violence are present at the population level; that is, they affect a significant proportion of the population, or the population as a whole. Population-level risk factors refer to social conditions or norms that are reinforced through social structures and cultures.

Research suggests that gender inequality is a significant population risk factor for intimate partner violence. There have been some challenges to this proposition based on observations about violence against women in Nordic countries which are relatively gender equal yet still have high rates of violence against women. However, it has been suggested that this may be the result of increased disclosure of violence in surveys, as disclosing violence becomes less socially stigmatised in more gender equitable contexts. Another possible explanation is that efforts in Nordic countries have focused primarily on women in the public sphere (such as leadership and pay equity), and less focus has been on achieving gender inequality in the private sphere (such as addressing inequalities in roles and responsibilities).

Different forms of inequality and discrimination can create social and economic disadvantage. While international evidence is equivocal on socio-economic status as a factor to the occurrence of family violence, when socio-economic disadvantage intersects with other forms of inequality, the risk of violence increases. In addition, intersections between disadvantage and family violence can contribute to spatial patterns of incidence because disadvantage is heavily concentrated in some areas. Social and economic disadvantage is further discussed in Chapter 21. Gender inequality is discussed in more detail below.

Population-level factors are not the same as those that put particular individuals at high risk of perpetrating or experiencing violence. These ‘individual-level’ risk factors include mental illness and harmful use of alcohol or other drugs. Individual risk factors for family violence are considered in more detail in Chapter 6 and in Chapter 18.

Population-level and individual-level risk factors can interact with one another to influence the likelihood of violence. For example, a woman may have a low level of individual risk if she has a high level of education (education is considered a protective factor), but this may not necessarily equate to a low level of actual risk if there are marked population-level risks, such as intimate partner violence being widely tolerated in her community. Due to the need to assess the relationship between these factors, key expert bodies now use an ‘ecological approach’ to understand the causes of intimate partner violence, where factors are mapped across individual, community and broader social environments. This approach is represented in Figure 36.1.

Recent international studies have found a significant variation between countries in the prevalence of intimate partner violence. This finding, coupled with the evidence that biological factors and individual psychopathologies cannot explain intimate partner violence on their own, has led to a consensus among experts that changeable social conditions play a key role in the prevalence of intimate partner violence.
Gender inequality

There is consensus among international experts that gender inequality is an important population risk factor for intimate partner violence. Responding to gender inequality needs to be considered along with other factors that contribute to or influence violence. For example, poverty or the effects of colonisation and racism, can influence how gender inequality is experienced, and may in some cases have a greater influence on the risk of violence. The impacts of disadvantage and discrimination, when occurring in the context of gender inequality, can increase the probability of violence occurring.

A substantial body of research shows that the prevalence of intimate partner violence varies according to the gender inequality present at each level of the ecological model. This has been confirmed in a recent study, spanning 44 countries, of the relationship between intimate partner violence and a suite of gender equality indicators. Indicators of gender inequality at different levels include:

- social practices, such as the use of violence to discipline children, and applying different rules in child rearing practices about how girls and boys should behave
- social structures, such as gender hierarchies within families and the gender pay gap
- formal and informal social norms, or the rules of conduct and models of behaviour expected by a society or group, such as weak laws against intimate partner violence, or the belief that women are solely responsible for the care of children.

There are particular expressions of gender inequality at all of these levels that are linked with an increased risk of intimate partner violence. Intimate partner violence is likely to be higher when:

- women lack autonomy and men dominate decision-making in public life, as well as in families and relationships. For example, violence is more common in societies where property, inheritance and family laws discriminate against women
- there is rigid adherence to stereotyped gender roles
- dominant constructions of masculinity emphasise dominance, aggression and entitlement in relationships, while dominant constructions of femininity emphasise purity, passivity and subordination
- peer relations encourage bonding between men at the expense of respect for women; relations between men and women are seen as naturally adversarial; or connections between women are weak.
Studies show that social norms that support violence against women, such as the belief by a significant proportion of the population that violence is justified in some circumstances, can increase the risk of intimate partner violence occurring. High levels of exposure to violence, such as exposure to media representations of violence, may also increase this risk. Men who use violence in other contexts, such as in the workplace or in the community, are more likely to also use violence against their female partners. Breakdowns of social norms, for example, in the context of natural disasters, may also increase intimate partner violence.

However, exposure to and tolerance of violence in general is not sufficient, on its own, to explain violence. Many people who have been exposed to violence do not become perpetrators or victims of intimate partner violence.

Child abuse
The causes and prevention of child abuse have been examined in the Protecting Victoria’s Vulnerable Children Inquiry (the Cummins Inquiry), and are currently a focus of the Royal Commission into Institutional Responses to Child Sexual Abuse.

Children may be the victims of violence perpetrated by their fathers or mothers, or as in the case of institutional abuse, by people with authority over them. Research shows that the experience of violence and neglect as a child is linked to perpetrating or being a victim of intimate partner violence as an adult: ‘gender impacts place girls at higher risk of victimisation as adults and boys at greater risk of perpetration as adults’. Boys and girls who are exposed to violence against their mother are learning about gender, power and disrespect in relationships, and they may model this in their future relationships.

Research also indicates that while there are different risk and protective factors for child abuse and for intimate partner violence, many are common. Consideration of child abuse as a precursor to family violence is therefore important, as is consideration of the social determinants that can reduce child abuse, as they may also reduce family violence.

The Commission heard that there is a gap in our collective knowledge about the extent of child abuse in Australia. Child abuse covers a range of behaviours including physical, sexual and emotional abuse, neglect and exposure to family violence.

A recent review by the Australian Research Alliance for Children and Youth of early intervention and prevention practices relevant to children and young people found that there is a core set of protective factors against child sexual abuse present at individual, family, and community levels. These factors include relationship and problem-solving skills development, competence as a parent, the company of positive peers and adults, and supportive school and community environments. Risk factors for child sexual abuse include poverty, family violence, the lack of positive attachment to a parent, and the presence of parental mental illness or substance abuse.

The review notes evidence that services targeted at parents experiencing mental illness, substance misuse and/or family violence have significant flow-on benefits for their children. The Commission heard that an important element of addressing intergenerational violence is targeting intervention efforts towards women with histories of abuse and neglect:

... noting that fostering safe, stable, nurturing relationships between mothers and their partners and between mothers and their children appears to be a key factor in breaking the cycle of abuse from one generation to the next.

The Commission also heard that effective primary prevention strategies in relation to child abuse include ‘kids attending schools, kids going to high quality child-care, parents who are socially connected [and] parents who have access to high quality information about parenting’.
Recent prevention policy and planning

The Victorian Government’s A Right to Respect: Victoria’s Plan to Prevent Violence Against Women 2010–2020 was referred to by many written submissions received by the Commission as one of the significant policy reforms in the area of primary prevention over the last 10 years.43 The health journal The Lancet has recognised A Right to Respect as the ‘first public policy of its kind worldwide with a focus on primary prevention of violence across individual, community, and societal levels.’44

Under this policy, the Victorian Government focused on working with local government to embed prevention practice within schools, workplaces, and sporting clubs.45 With the change of government in 2010, a new policy was developed, and Victoria’s Action Plan to Address Violence Against Women and Children 2012–2015 was released in October 2012. This policy framework committed to targeted primary prevention strategies as part of a broader approach that also included early intervention and response efforts.46

A Right to Respect builds on the evidence in the 2007 VicHealth framework Preventing Violence Before it Occurs—A framework and background paper to guide the primary prevention of violence against women in Victoria.47 Many written submissions received by the Commission highlighted the contribution of VicHealth to policy and practice initiatives that have been recognised internationally relevant to primary prevention of violence against women.

The significance of the VicHealth framework cannot be underestimated and could certainly be described as a key reform and development in the field of preventing violence against women. The framework helped to coordinate effort across a range of sectors previously not engaged in prevention, such as the sport and recreation and education fields. Alongside identifying where action should be directed, the framework consolidated previously fragmented attempts to prevent violence against women through outlining how key partners might contribute to addressing the determinants.48

In October 2014, the Victorian Government introduced Ending Violence Against Women and Children: Further initiatives for Victoria’s action plan to address violence against women and children 2012–2015.49 This strategy outlines a range of initiatives to ‘prevent violence against women and children before it occurs, keep victims of violence safe and hold perpetrators to account’, and was supported with government funding.50 The new government, elected in November 2014, deferred spending the majority of this investment, and it will be reconsidered in light of this Royal Commission’s recommendations.51

There is debate within the Aboriginal and Torres Strait Islander communities about the contribution gender inequality makes to violence against women and children in Aboriginal and Torres Strait Islander families. The Commission heard that, as with policy in relation to responding to family violence generally, the development of prevention policy specific to the Aboriginal and Torres Strait Islander community has had a different trajectory to prevention policy targeted to the non-Aboriginal population in Victoria. Strong Culture, Strong Peoples, Strong Families: Towards a safer future for Indigenous families and communities is a 10-year plan focused on developing ‘an Indigenous specific prevention framework for family violence’.52

This plan led to the Indigenous Family Violence Prevention Framework released in 2012. This was designed to ‘support primary prevention capacity building; effective, sustainable activities, and ownership and leadership within Aboriginal communities’.53 The framework includes six key strategies: raising community awareness, family strengthening, cultural strengthening, responding to grief and trauma information and education, and self-esteem and resilience building.54
Funding for prevention

In 2014–15 the Victorian Government budgeted $3.6 million for prevention programs, services and activities. This represents four per cent of the $80.6 million that the Victorian Government budgeted for services and programs specifically focused on family violence. The Commission notes that this proportion would be even smaller if the total cost of family violence to the Victorian Government was included, such as the proportion of police and court expenditure arising from responding to family violence.

This funding is spread across a number of programs, including:

- Respectful Relationships Education in Schools program ($0.55 million in 2014–15)
- twelve one-off grants supporting local projects to reduce violence against women and their children, including four projects specifically addressing violence in Aboriginal communities ($2 million in 2014–15)
- development and trialling of primary intervention models with two culturally and linguistically diverse communities ($0.55 million in 2014–15)
- a targeted community awareness-raising project focused on elder abuse across six culturally and linguistically diverse communities ($0.22 million in 2014–15)
- support for the Municipal Association of Victoria to build local government capacity and action in the prevention of violence against women ($0.2 million in 2014–15).

Information provided by the Victorian Government indicates that most of the above funding is not ongoing and will lapse.

In the 2015–16 State Budget the Victorian Government allocated $2 million to extend three projects for preventing family violence against women and children. Two projects target key settings (workplaces and local government), with a further project focused on women with disabilities. As we discuss in Chapter 41, most of the additional funding allocated in the 2015–16 State Budget is for one year only, including the above initiative, with the Victorian Government advising that future investment would be informed by the findings of the this Royal Commission.

The Victorian Government acknowledged to the Commission that there is currently a funding gap in relation to prevention:

> Over the years, there has been comparatively low investment in prevention initiatives aimed at the key determinant of family violence or its contributing factors. Prevention programs have often relied on short-term, project-based funding rather than ongoing and sustained investment.

Prior to 2013, the Victorian Government had provided some funding towards prevention programs. For example, in 2011–12, $7.2 million was allocated through the (then) Department of Justice Reducing Violence against Women and their Children grants program. With criteria informed by the VicHealth Framework, Preventing Violence Before it Occurs, the program allocated $600,000 each to eight Victorian regions over three years. The organisations leading these projects were women’s health services, local councils, and community health services. In addition, $2.4 million was allocated to four Aboriginal services for Koori Community Safety Grants. The purpose of these grants was to enhance collaborative relationships at a local level and help build a primary prevention and early intervention evidence base. The programs are being evaluated by the Australian Institute of Criminology, and interim evaluations have demonstrated clear evidence of positive outcomes across the programs.

The Commonwealth approach to prevention

The National Plan to Reduce Violence Against Women and Their Children 2010–2022 has been endorsed by the Council of Australian Governments (COAG). The plan is overseen by a ministerial committee of nominated state and territory ministers, chaired by the relevant Commonwealth minister. The plan is being implemented through four three-year action plans, supported by state and territory implementation plans.
The *Second Action Plan: Moving Ahead 2013–2016* was released in June 2013. As part of the development of each action plan, the Commonwealth and states and territories have nominated a number of priority areas for joint focus. These include: prevention, improving responses for diverse communities, supporting an integrated service response to family violence, improving perpetrator interventions, and continuing to build the evidence base. The third action plan is due in 2016.

Of the six outcome (strategy) areas of the national plan, there are two that relate specifically to prevention:

- **outcome area 1**: Communities are safe and free from violence and
- **outcome area 2**: Relationships are respectful.

Commonwealth-led prevention activities to date have included The Line (a social marketing campaign targeting young people that is now being led by Our Watch); a $3 million Community Action Grants program; and a $9 million Respectful Relationships Grants program. Evaluation of these grants programs is pending.

In 2015, COAG established an advisory panel and nominated a number of new priority areas for action under the national plan. The three priority areas identified were the National Domestic Violence Order Model Law; the national outcome standards for perpetrator interventions; and strategies to keep women safe from technology-facilitated abuse.

During the Commission’s deliberations, the Commonwealth Government announced specific funding for the prevention of violence against women and their children. This included $5 million to expand the Safer Schools website as a resource for teachers, parents and students around fostering respectful relationships. The Commonwealth Government has indicated that this will build on the $30 million national campaign (jointly funded by the Commonwealth, states and territories) to change young people’s attitudes to violence, and will commence in early 2016. In 2015, all governments agreed on a national curriculum, which now includes respectful relationships education. This is detailed further in this chapter.

**National prevention foundation: Our Watch**

In 2013, as part of the National Plan, the Victorian and Commonwealth Governments established and jointly funded Our Watch, a national foundation to prevent violence against women and their children. Our Watch is an independent, not-for-profit organisation that is currently funded until 2017. The organisation’s role is to drive nation-wide change in the culture, behaviours and attitudes that underpin and create violence against women and children. Our Watch has four areas of focus: design and deliver public campaigns; promote a sustained and constructive public conversation; enable organisations, networks and community to effect change; and influence public policy, systems and institutions.

Our Watch and VicHealth have also established a formal partnership. VicHealth is currently transferring knowledge and resources that it has developed to Our Watch.

Our Watch has been funded to deliver specific prevention projects. As part of its establishment in 2013, Our Watch was funded to deliver:

- **respectful relationships education (RRE) in schools.** This project focuses on embedding RRE in a number of secondary schools across three local government areas. This project is discussed further below.

  Further discussion is in Chapter 28.

In late 2015, the Victorian Government provided $900,000 in funding to Our Watch to manage the Workplace Equality and Respect Project, aimed at developing policies and practices relevant to preventing violence in Victorian workplaces. This project is discussed further in Chapter 37.

Our Watch has also been funded to deliver the Strengthening Hospital Responses to family violence project, working with the Royal Women’s and Bendigo Hospitals. This has an early intervention rather than primary prevention focus, and is discussed in detail in Chapter 19.
At the time of writing this report, the South Australian Government, the Tasmanian Government, and the Northern Territory Government have also partnered with Our Watch. In its submission to the Commission, opportunities that Our Watch identifies for collaboration across states and territories are:

- guidance on monitoring and evaluating prevention strategies
- nationally agreed quality standards and implementation tools for work in different settings and tailored for different groups
- technical and specialist expertise in prevention practice and policy
- prevention training programs and materials, adaptable to different sectors
- design and delivery of communications campaigns/social marketing initiatives to change norms, behaviours and practices.\(^7\)

**New national framework for prevention of violence: Change the Story**

The national framework for prevention of violence against women and their children was developed by Our Watch in partnership with Australia’s National Research Organisation for Women’s Safety (ANROWS) and VicHealth.\(^7\) The development of the framework was a priority under the second action plan of the *National Plan to Reduce Violence against Women and their Children 2010–2022*.\(^8\)

*Change the Story: a shared framework for the primary prevention of violence against women and their children in Australia*

The national framework *Change the Story* was released in November 2015. It includes a review of international literature about prevention, and a number of independent opinion pieces about key areas. The framework was informed by consultations undertaken across Australia with researchers, practitioners and policy makers, from community and non-government organisations, community networks, and government agencies.

The intent of the shared national framework is to present current evidence and research about prevention of violence against women and their children, and to outline a conceptual approach and guide to progressing action.

Drawing from the evidence, *Change the Story* provides an explanatory model, key actions to prevent violence, presents practical strategies, and details the most effective settings. A main message is that governments, the service sector, and the community cannot solve this challenge alone—it must be a shared endeavour.

The new national framework will provide Victoria with further evidence and guidance that it can build on to inform its own state level policy and program planning.
Table 36.1 Time line of key milestones in prevention of violence against women and their children (includes national markers)

<table>
<thead>
<tr>
<th>Time line</th>
<th>Victoria</th>
<th>Key indicators</th>
<th>National and International</th>
</tr>
</thead>
<tbody>
<tr>
<td>1995</td>
<td></td>
<td></td>
<td>First national Community Attitudes to Violence Against Women Survey conducted by the Office for the Status of Women (equivalent to the National Community Attitudes towards Violence Against Women Survey [NCAS]).</td>
</tr>
<tr>
<td>1996</td>
<td></td>
<td>1 in 3 women are subjected to male violence at some time in their adult lives</td>
<td>The Australian Bureau of Statistics leads the first Women's Safety Survey.</td>
</tr>
<tr>
<td>2004</td>
<td>VicHealth and Vic Government launch The Health Costs of Violence: Measuring the burden of disease caused by intimate partner violence. This is the first international study assessing the burden of disease associated with intimate partner violence.</td>
<td>Violence is identified as the leading preventable contributor to ill health, death and disease for Victorian women aged 15–44</td>
<td>Release of the Access Economics report, indicating that the economic cost associated with violence against women is $8.1 billion in 2003.</td>
</tr>
<tr>
<td>2006</td>
<td>Victorian survey of community attitudes towards violence against women led by VicHealth.</td>
<td>Of Australian women who had experienced physical assault in the 12 months prior to the survey, 1 in 3 experienced physical assault from a male partner</td>
<td>Australian Bureau of Statistics releases results from the Personal Safety Survey (replaces the Women's Safety Survey undertaken in 1996).</td>
</tr>
<tr>
<td>2007</td>
<td>VicHealth releases Preventing Violence Before it Occurs: A framework and background paper to guide the primary prevention of violence against women in Victoria, commissioned by the Victorian Government.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2012</td>
<td>Victoria’s Action Plan to Prevent Violence Against Women and Children 2012 - 2015, that included a number of prevention projects. Reducing Violence Against Women and their Children Grants, through the Victorian Department of Justice Crime Prevention Program.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Time line Victoria

#### Key indicators

- **2013**: Our Watch, previously the Foundation to Prevent Violence Against Women and their Children, is established by the Victorian and Commonwealth Governments.  
  - 1 in 6 women have experienced violence from a male partner since the age of 15.

#### National and international

- **2013**: Australian Bureau of Statistics releases the third *Personal Safety Survey*.

#### 2014

- **Victorian Government introduces** *Ending Violence Against Women and Children: Further initiatives for Victoria’s action plan to address violence against women and children strategy*.
  - Australia’s National Research Organisation for Women’s Safety (ANROWS) is established under the *National Plan to Reduce Violence against Women and their Children 2010–2022*.

#### 2015

- **Victorian Government starts consultation on a gender equality strategy**.
  - *Change the Story*, a shared framework for the primary prevention of violence against women and their children in Australia, is released.

### Best practice in prevention

Prevention strategies targeted to population-level risk factors for family violence are relatively new. Research on the most effective form of action at the population level is therefore limited. The Commission heard that the success of other population-level prevention strategies relevant to public health, such as reducing smoking and increasing road safety, may be useful in informing prevention strategies relevant to all forms of family violence.

Population-level prevention strategies used with public health strategies vary depending on the issue being addressed, but the following components and approaches are broadly consistent:

- legislative, policy and regulatory reform to support the strategy
- community mobilisation to engage communities in shifting practices and norms
- communications and social marketing to shift social norms and practices
- organisational development to change policies, structures and cultures
- education of key workforces to enable them to build prevention into their job roles
- development of the skills of individuals through direct participation programs
- advocacy to ensure that attention is given to the problem and that barriers are addressed
- research, monitoring and evaluation.

In 2007, VicHealth adopted this framework in developing prevention policy and programs relevant to violence against women.

In 2010, WHO reported on the status of the effectiveness of initiatives to prevent violence against women. Our Watch, as part of the development of its *National Framework to Prevent Violence Against Women and their Children*, has recently updated this research. It categorised prevention initiatives (targeted to prevent intimate partner violence against women) as follows:

- **Effective**—the initiative has shown to be effective in preventing violence
- **Promising**—the initiative has an impact on risk factors, but has not been shown to reduce violence
conflicting—some evaluations show the intervention is effective and others show that it is not ineffective—current studies have not established that the intervention has a positive impact on violence against women or its risk factors.93

These initiatives are outlined in Table 36.2.

### Table 36.2 Interventions to prevent violence against women—current state of the evidence for effectiveness94

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Assessment based on available evidence of effectiveness</th>
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<tbody>
<tr>
<td><strong>Policy, legislative and institutional reform</strong></td>
<td></td>
</tr>
<tr>
<td>Macro-level reforms designed to address specific aspects of human rights and gender inequality established in research to be strongly linked with violence against women</td>
<td>Successfully implemented but not yet evaluated for impact on violence/precursors to violence</td>
</tr>
<tr>
<td>Efforts to reform the media’s representation/reporting of gender relations, women and violence against women (including self-regulation)</td>
<td>Successfully implemented but not yet evaluated for impact on violence/precursors to violence</td>
</tr>
<tr>
<td>Strengthening infrastructure and transport, for example by improving the safety of public transport and street lighting *</td>
<td>Successfully implemented but not yet evaluated for impact on violence/precursors to violence</td>
</tr>
<tr>
<td><strong>Community mobilisation and strengthening</strong></td>
<td></td>
</tr>
<tr>
<td>Community mobilisation, involving community-driven, participatory projects that engage multiple stakeholders to address gender norms</td>
<td>Effective**</td>
</tr>
<tr>
<td><strong>Organisational development</strong></td>
<td></td>
</tr>
<tr>
<td>‘Whole-of-school’ programs involving teachers and other school staff, pupils, reporting mechanisms, parents and the local community, along with national advocacy. A variety of strategies are used (e.g. curriculum and group-based programmes, policy reform, advocacy)</td>
<td>Promising</td>
</tr>
<tr>
<td>Multi-strategy approaches with media outlets to promote the responsible portrayal of women, girls and violence against women in the media (e.g. involving advocacy, training, guidelines)</td>
<td>Successfully implemented but not yet evaluated for impact on violence/precursors to violence</td>
</tr>
<tr>
<td>Organisational auditing processes to identify and address structures and practices contributing to gender inequality and violence against women. Involves developing audit tools and processes for engaging staff, community members and volunteers in using these to reflect on organisational cultures and processes and plan reform. Inducements may be used to encourage or support compliance (e.g. funding, awards)</td>
<td>Successfully implemented but not yet evaluated for impact on violence/precursors to violence</td>
</tr>
<tr>
<td><strong>Communications and social marketing</strong></td>
<td></td>
</tr>
<tr>
<td>Social marketing campaigns or edutainment plus group education. Long-term programs engaging social media, mobile applications, thematic television series, posters, together with interpersonal communication activities</td>
<td>Promising</td>
</tr>
<tr>
<td>Single-component communications campaigns (e.g. a campaign involving advertisements through television and print media)</td>
<td>Ineffective</td>
</tr>
<tr>
<td><strong>Advocacy</strong></td>
<td></td>
</tr>
<tr>
<td>Skills training and capacity building for organisations and community members advocating for gender equality and the elimination of violence against women</td>
<td>Successfully implemented but not yet evaluated for impact on violence/precursors to violence</td>
</tr>
<tr>
<td>Leadership programmes that identify and support influential, non-violent individuals to ‘speak out’ and play a leadership role regarding gender inequality and the elimination of violence against women. These may be targeted to prominent individuals or be delivered through informal peer groups (e.g. among young people) or organisational settings (e.g. workplaces). Based on social norms theory which proposes that the views of prominent others are influential in shifting social norms (Webster et al. 2014)</td>
<td>Successfully implemented but not yet evaluated for impact on violence/precursors to violence</td>
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<tr>
<td>Intervention</td>
<td>Assessment based on available evidence of effectiveness</td>
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<td>----------------------------------------------------------------------------</td>
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<tr>
<td>School or community programs to improve women's and girls' agency. Can include other components such as safe spaces, mentoring and life-skills training</td>
<td>Effective**</td>
</tr>
<tr>
<td>Economic empowerment and income supplements including micro-finance, vocational training, job placement or cash or asset transfers (e.g. land reform)</td>
<td>Conflicting evidence**</td>
</tr>
<tr>
<td>Economic empowerment and income supplements plus gender equality training</td>
<td>Effective**</td>
</tr>
<tr>
<td>Collectivisation^. Supporting women's and girls' empowerment by strengthening supportive links to other women and girls in similar circumstances (e.g. a collective for sex workers)</td>
<td>Effective</td>
</tr>
<tr>
<td>Peer education. Supporting individuals from particular sub-populations to educate their peers on gender norms and violence against women</td>
<td>Successfully implemented but not yet evaluated for impact on violence/precursors to violence</td>
</tr>
<tr>
<td>School programs and community workshops with men and boys to promote changes in social norms and behaviours that encourage violence against women and gender inequality</td>
<td>Effective</td>
</tr>
<tr>
<td>School and community workshops to promote changes in norms and behaviour that encourage violence against women and gender inequality. In contrast to the above, they involve both men and women</td>
<td>Effective**</td>
</tr>
<tr>
<td>Programs to support young people to engage critically with media and popular culture representations of women and gender relations, often referred to as strengthening media literacy. Based on the theory that the negative influences of the media on constructions of masculinities and femininities and on behaviours can be lessened by encouraging young people to engage in a critical way with the media</td>
<td>Successfully implemented but not yet evaluated for impact on violence/precursors to violence</td>
</tr>
<tr>
<td>Programs to strengthen individual skills and knowledge to take positive or 'pro-social' action in relation to attitudes and behaviours supporting violence (e.g. the belief that women deserve violence) and precursors to violence (e.g. sexist attitudes). Often referred to as 'bystander' programs. Typically implemented as part of a broader program of community/organisational mobilisation</td>
<td>Conflicting evidence (emphasis in many current evaluations is on bystander responses to violence, as opposed to its precursors, and on bystander approaches as 'stand-alone' interventions) Have been successfully implemented in Australia</td>
</tr>
<tr>
<td>Programs to support the skills of parents (both men and women) to promote gender equality and non-violence in their parenting practices (noting that these programs differ from the parenting programs below which have the goals of preventing child abuse)</td>
<td>Not yet systematically assessed</td>
</tr>
<tr>
<td>Group or relationship-level interventions for equitable and respectful relationships</td>
<td>Conflicting evidence</td>
</tr>
</tbody>
</table>

**Collectivisation^**: Supporting women's and girls' empowerment by strengthening supportive links to other women and girls in similar circumstances (e.g. a collective for sex workers)

**Effective**: Effectiveness is supported by evidence from multiple sources or large-scale studies, with moderate to high levels of methodological rigor.

**Effective****: Effectiveness is supported by evidence from multiple sources or large-scale studies, with moderate to high levels of methodological rigor.

**Successfully implemented but not yet evaluated for impact on violence/precursors to violence**: Effectiveness is supported by evidence from multiple sources, or large-scale studies, with moderate to high levels of methodological rigor, and there is evidence that the intervention has been implemented successfully. However, there is no evidence yet about its impact on violence or its precursors.

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**Not yet systematically assessed**: The intervention has not yet been systematically assessed or evaluated.

**Conflicting evidence**: Evidence supports both effectiveness and ineffectiveness. The extent of the evidence is mixed, with some supporting effectiveness and some supporting ineffectiveness.

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Intervention Assessment based on available evidence of effectiveness

<table>
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<tr>
<th>Intervention</th>
<th>Assessment based on available evidence of effectiveness</th>
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| Protective behaviours programs[^]: Group programs teaching women and girls how to modify their behaviour to reduce the risk of sexual assault and/or to defend themselves in the event of being threatened with assault | Conflicting evidence.  
Such programs may increase victim-blaming (itself contributing by way of social norms to sexual violence).  
If they encourage women and girls to curtail their movements and divert attention from perpetration as a human rights violation, such programs would be incompatible with a rights-based approach. Promoting self-defence in the absence of comprehensive skills training has been found to increase risk. Ideally these programs would be implemented alongside those promoting changes in norms pertaining to gender and violence among men and boys |

[^ Interventions evaluated were for the purposes of preventing non-partner sexual assault only.  
* Evidence from high income countries only.  
** Evidence from low and middle income countries only.  

**Principles of effective prevention**

The Commission heard that best-practice prevention approaches have a number of features in common. These are:

- involving the community
- having strategies not just single programs
- engaging men and boys
- taking account of the circumstances of particular groups.

Principles specific to respectful relationships education and effective prevention in school and place-based settings are outlined later in this chapter.

**Involving the community**

The Commission heard that while preventing and responding to family violence should be a core responsibility of government, ‘whole-of-community’ approaches to preventing family violence are essential[^].

Community development and community mobilisation are important but underutilised strategies ... Community mobilisation shows increasing promise, with a recent review documenting that well-designed interventions ... can have a positive impact upon violence perpetration or victimisation[^].

[^ Ms Rosie Batty, domestic violence victim advocate, Luke Batty Foundation, told the Commission that community involvement should be as inclusive as possible as ‘cultural change means no-one is immune, everyone has to change, and really become aware of their behaviour and their influence on others’. Professor Tony Vinson, Emeritus Professor at the University of New South Wales submitted that community level prevention approaches should be focused on the most disadvantaged communities with the greatest need.]

The Commission was told that all communities are different—some have good social networks and strong local leadership, others have a diversity of cultures with different attitudes to family violence. Many people talked about the importance of responding to local needs and delivering whole-of-community initiatives in ways that recognise and respond to local circumstances[^].
The Commission also heard about the importance of ensuring that systems are in place to support prevention strategies, as increased community awareness and involvement will mean an increase in demand for service responses.\textsuperscript{100} Ms Batty told the Commission that ‘speaking openly about these issues can make it easier for some women to confront their situation and make a change, and perhaps take steps to leave a violent relationship.’\textsuperscript{101} However, if specialist services are not in place and well-resourced, this can be devastating for victims who are often at their most vulnerable when they try to leave an abusive partner, as was the case for a prevention strategy in New Zealand:

In Gisborne, Levin, Ohakune, New Plymouth and Paeroa, a scarcity of adequate referral, support and intervention services was raised as a primary concern. While the Campaign has resulted in increased awareness and referrals for support and intervention, communities have struggled to meet these demands. Moreover, areas that include isolated rural communities faced additional challenges responding to requests for family violence related support and intervention.\textsuperscript{102}

### Why attitudes matter

Measuring and changing attitudes to violence against women is recognised as an important way of informing prevention activities, as attitudes reflect and reinforce social norms. Attitudes influence community expectations of what is acceptable behaviour, which in turn influences individual behaviour. Community attitudes also influence how people respond to violence, and whether or not they seek help. The 2013 National Community Attitudes towards Violence Against Women Survey identified links between attitudes and behaviour including:

- violence against women is more common in communities where violence-supportive attitudes are prevalent
- men who have violence-supportive attitudes are more likely to perpetrate or say they would perpetrate violence
- where victims have violence-supportive attitudes, they are more likely to experience family violence again
- violence-supportive attitudes held by people who witness violence and its precursors may result in less empathy and support being given to victims of violence, which in turn can affect their recovery.\textsuperscript{103}

The link between attitude and behaviour is not necessarily direct (e.g. if someone holds violence-supportive attitudes it does not mean they will therefore perpetrate violence). Attitudes influence, and are in turn influenced by broader norms and cultures, including how gender roles and relationships in families and organisations are formed, and how women and men are portrayed in the media and popular culture.\textsuperscript{104}

The Commission notes that the 2013 National Community Attitudes towards Violence against Women Survey revealed that community attitudes may be slower than public policy to recognise that alcohol and drug use is not an excuse for family violence. Nine per cent of those surveyed believed that partner violence can be excused if the perpetrator is affected by alcohol and 19 per cent believed that the woman bears some responsibility if she is raped while affected by alcohol or drugs. Eleven per cent also believed that family violence can be excused if the victim is heavily affected by alcohol.\textsuperscript{105}
Strategies not just single programs

Changing deeply entrenched beliefs, behaviours and cultures in communities to prevent problems such as family violence, requires sustained and coordinated efforts over a long period of time. Consistent with the experience in other areas of population-level prevention (like smoking) the evidence suggests that interventions are more likely to be successful when they combine multiple strategies and target more than one level of the community: for example, whole-of-school interventions are more effective than implementing a single strategy such as a group education program. Similarly, media campaigns are more likely to be successful when combined with group training and efforts to develop leadership. Research shows that individual prevention interventions may have positive effects, but violence prevention interventions will not be effective in achieving widespread behavioural and attitudinal change on a ‘project-by-project’ basis:

... duration and intensity of programs makes a difference. We know that one-off, short duration programs are ineffective in changing attitudes and behaviour. Similarly, stand-alone social marketing and communications campaigns which don’t have community development input are also ineffective. Multi component programs which combine multiple prevention strategies are more likely to generate change, according to recent international reviews, although it is challenging to figure out what components are most important or what the most desirable package of interventions is.

There is little evidence that awareness-raising communications campaigns on their own (such as a campaign with advertisements through television and print media) have any substantial positive effect. These campaigns may simply increase demand and without sustained funding, potentially putting victims at increased risk. Messages encouraging victims to feel empowered to ‘end the violence’ by getting help could implicitly reinforce messages that they are responsible for the violence.

It is critical to note that public education and awareness (at the broadest community level or tailored and targeted to particular services and settings such as schools) has the potential to elicit disclosure of current family violence risk. It is essential therefore to ensure that additional resourcing of specialist family violence responses is available to support people making those disclosures, noting that this will likely include children and young people.

Berry Street also highlighted that it was essential to ensure adequate specialist responses were in place before initiating prevention initiatives.

Research indicates that social marketing and media advocacy strategies are of value when they are integrated, mutually reinforce on-the-ground activities, and are supported by cross-sector partnerships that allow for consistent approaches with broad reach. Where these campaigns promote policy or legislative changes, they can have additional benefits. Campaign strategies that are sustained beyond a single ‘dose’ are also important to embed the uptake of campaign messages. The most useful role of social marketing may be to raise awareness and supplement the efficacy of other strategies.

If they are going to run big social marketing campaigns everybody has to be on board because that’s going to have impacts on the police and the courts and the response system. So everybody has to be prepared for that. We have seen examples of Federal Government campaigns increasing people ringing up a phone number and there’s nothing happening at the delivery end, and where the state and Commonwealth haven’t been in sync and the service system hasn’t been engaged. So anything that involves campaigns you can’t just have one ... [and] [t]hey have to be in sync.
The Commission heard that historically the tendency has been for prevention activities to focus on changing community attitudes, without addressing the structures and practices known to shape them, such as practices in families, organisational and community cultures, or the portrayal of gender relations and violence in the media.

In my view, one of the problems in the violence prevention field is that the focus so far has been on attitudes. Attitudes are influential, but not the only determinant. Violence prevention efforts must seek to change not only individual attitudes and community norms, but also behaviours, social and sexual relations, and the structural conditions that perpetuate violence. Interventions aimed at attitudinal and cultural change must be accompanied by changes in social practices and structural relations if violence in relationships and families is to be undermined and prevented ... For example, various forms of gender inequality – such as women's economic dependence on men – are risk factors for family violence. They are related to attitudes but not reducible to attitudes.116

The Commission heard that more attention must be given to prevention programs that go beyond awareness raising and instead focus on supporting communities to develop norms that promote equality and respect. As reported in the 2013 National Community Attitudes towards Violence Against Women Survey:

The literature on which this study was based shows that while there may be some value in community and professional education and campaigns to strengthen attitudes, sustained change is most likely to be achieved by changing the family, social, community and organisational environments that shape attitudes, and influence whether they are manifest in violent or violence supportive behaviour or not.117

Engaging men and boys

I am as concerned for my son as I am for my daughters in this environment. I do not want my son growing up thinking that to be a man means being rough, dominating, having an entitlement to more based on his gender.118

Most interpersonal violence, whether against men or women, is perpetrated by men.119 This suggests that constructions of masculinity—the identities and roles attributed to men, and the norms, structures and practices supporting these identities and roles—are important considerations when discussing prevention strategies. In line with this view, the Commission was told that 'research indicates ... interventions which address and seek to transform gender are more effective than those interventions which do not'.120

Dr Michael Flood, Australian Research Council Future Fellow and Senior Lecturer in Sociology, University of Wollongong, described how masculinity is constructed:

By masculinity, I mean the meanings attached to being a man and the social organisation of men's lives and relations. This does not just include attitudes and values, but men's practices and interactions with others – how men's lives are actually organized, how they learn to treat each other and to treat women.121

The Commission was told that prevention programs need to support men and boys to critically reflect on what it means to be a man, and to shift some of the meanings and practices that are traditionally associated with masculinity.122 Effective prevention work will also require acknowledging that violence against women perpetrated by men cannot be reduced solely to constructions of masculinity or to gender relations, since 'masculinity' is experienced in the context of other social and economic conditions, such as poverty.123

The involvement of men in violence prevention work is now widely recognised as central to the success of primary prevention activities:124

The field of violence prevention has seen a shift in the last decade towards primary prevention activities which explicitly engage men and boys. There is a compelling argument for the need to engage men in prevention of men's violence against women. Prevention activities need to address attitudes, relations and behaviours of men and boys in general.125
Many submissions received by the Commission cited the work of White Ribbon in engaging men and boys to prevent violence. Active in Australia since 2003, White Ribbon is a national public education and violence prevention campaign that aims to drive behavioural and attitudinal change across the community, primarily among men and boys. The Commission heard that the annual White Ribbon Day and Ambassador Program were useful and well-known mechanisms for engagement. The Koori Caucus submitted:

White Ribbon Day events are great activities for reaching out to the whole community; and the events take place across the community. Information packs, t-shirts and caps with messages about not tolerating family violence also feature in White Ribbon Day activities ... White Ribbon Day primary prevention activities often create momentum for future partnerships and prevention activities.

A recent review of efforts in engaging men in the prevention of violence against women found that while there have been a number of achievements, and there is significant momentum to continue this work, most interventions have not been evaluated and therefore their impact is unknown. The review also highlights tensions, including that most work in engaging men in violence prevention continues to be done by women, and that male advocates are often given greater status and power than women doing similar work. Women’s Health in the South East noted caution that ‘[p]lacing male champions of change on a pedestal reinforces traditional power structures and somewhat limits the discourse to “say no to violence”, rather than challenging rigid gender stereotypes and gender inequality.

A review commissioned by the NSW Government in 2014, titled Less to Lose and More to Gain? Men and Boys Violence Prevention Research Project final report found that there are promising prevention approaches targeted to men and boys, including: respectful relationships education; bystander strategies; community development; whole-of-organisation practices; infant and parenting programs; and social marketing. The report emphasises that engaging men and boys in the prevention of family violence is facilitated by:

- addressing the role of gender in violence against women in a way that boys and men can understand
- utilising educators who boys and men can relate to as role models
- recognising that masculinities are diverse and affected by class, location, ethnicity, cultural background, sexuality and other factors
- engaging men and boys in the places where they live, work and play.

The National Community Attitudes towards Violence Against Women Survey refers to evidence that young men in particular are ‘struggling with changes in gender power and gender roles’ and that there is a ‘greater preparedness [among young men] to justify and excuse violence in certain [situations]’. The report states that these findings mean that young people are a priority when designing and delivering prevention programs. It also stresses that effective programs need to draw on contemporary thinking about gender relations:

This is consistent with efforts that critically draw on rather than merely reject aspects of dominant gender scripts—for example, promoting control over behaviour and sexuality as positive masculine characteristics or using high-profile men to denounce violence against women—that are [likely] to be compelling to young people.

Dr Flood told the Commission that, in his view, one of the key challenges in gaining traction with young men is to minimise hostile and defensive reactions:

Often men feel they are being stereotyped as batterers or rapists. In my view, we need to minimize hostile and defensive reactions by emphasising men’s positive role in stopping family violence, by acknowledging their own victimization (which is largely at the hands of other men), and by creating safe spaces for men to reflect and learn.
An interim evaluation of CHALLENGE Family Violence, a program led by the City of Casey and the City of Greater Dandenong, notes that ‘… men engaged with the project [were] keen to contribute to reducing men’s violence against women and developing alternative forms of masculinity that challenge gendered beliefs and behaviours – but not at the cost of their friendships’.\(^\text{137}\) In addition, the project found that men reported ‘feeling uncomfortable in discussing violence-related issues with women present, and were not ready to embrace women as allies’.\(^\text{138}\) While highlighting that there were some positive changes in individual men in the program,\(^\text{139}\) the evaluation also noted:

Men’s speaking out about violence against women and sexism, attending events to call for preventing violence against women and wearing a white ribbon are not enough for social gender transformation …\(^\text{140}\)

The Commission was told that many of the factors that influence intimate partner violence and other forms of family violence are related to how men’s identities are shaped. Targeting prevention strategies to settings where men congregate, such as sports clubs, is particularly important.\(^\text{141}\)

### Engaging diverse communities

Some groups within the community experience higher rates of family violence, and can experience more prolonged and severe violence.\(^\text{142}\) Factors such as Aboriginality, class, age, sexuality, ethnicity and disability intersect with gender inequality to shape the experience and risk of family violence, as well as access to appropriate responses:

Women’s diverse backgrounds, contexts and life experiences demands a sophisticated, long term commitment to addressing the diverse and intersecting forms of discrimination faced by women and ensure an approach to both prevention and response that is accessible, inclusive and relevant …\(^\text{143}\)

### Aboriginal and Torres Strait Islander communities

The higher rates of intimate partner violence and child abuse experienced by Aboriginal and Torres Strait Islander women makes prevention strategies a critical priority for this group.

The need for community-specific prevention programs for Aboriginal and Torres Strait Islander peoples was emphasised to the Commission, as was the need for these programs to be designed and implemented by Aboriginal leaders. At a consultation with members of Aboriginal and Torres Strait Islander communities, the Commission was told about a family violence campaign developed by the community in Mildura:

There was a series of 6 TV ads on local TV in Mildura. They used local people in Mildura, Robinvale, got the attention of those communities because people knew someone on TV. They were run during primetime. They were about elder abuse, younger relationships, early indicators, cyber abuse. They were funded by the Koori Justice Unit as a community safety grant. Makes the community proud.\(^\text{144}\)

The Commission heard that many Aboriginal people prefer to deal with Aboriginal organisations, as community-managed programs that are community-owned and controlled are better able to engage with communities and respond to trauma.

The Commission heard that under the 2011–12 Department of Justice and Regulation’s Reducing Violence against Women and their Children grants program, $2.4 million was provided for four projects in Koori communities (the Koori Community Safety Grants).\(^\text{145}\) There were a number of activities delivered by each of these projects, including the Dilly Bag Programs, Sisters Day Out workshops, Dardi Munwurro youth camps, men’s groups, harmony days, and mediation training.\(^\text{146}\) The Australian Institute of Criminology has reviewed progress to date on these four projects. The interim evaluation found that a number of programs demonstrate leading practice in the design of Aboriginal family violence prevention.\(^\text{147}\)
Lessons from the interim evaluation include the importance of locating the program design in cultural frameworks, and including a mix of targeted and universal activities (a ‘one size fits all’ approach is not appropriate given the differences between communities). Ensuring adequate implementation time is an important factor, as many project workers are juggling a number of roles and responsibilities.

The importance of community-led prevention effort is shown by the results of the National Community Attitudes towards Violence Against Women Survey (NCAS) which found that Aboriginal and Torres Strait Islander communities have a similar attitude to the non-Aboriginal community that family violence is wrong. However, Aboriginal and Torres Strait Islander respondents were two and a half times more likely to believe that partner violence can be excused where a victim is affected by alcohol (25 per cent compared with nine per cent of the broader community surveyed). The survey also indicates that Aboriginal and Torres Strait Islander respondents were nearly twice as likely to agree that such violence can be excused if a person is under stress.

For further discussion see Chapter 26.

Culturally and linguistically diverse communities
The Commission heard that targeted prevention strategies are required for culturally and linguistically diverse communities, and that funding has been limited:

The ‘CALD project’ … announced in July 2013 as an initiative of the Foundation to Prevent Violence against Women and their Children (now Our Watch), and again in September 2014 as part of the National Plan’s second action plan, remains one of two primary prevention Victoria’s Action Plan investments targeting immigrant and refugee communities. Thus far, funding for primary prevention activity in Victorian immigrant and refugee communities has been inadequate, short-term, and ill-timed.

While many CALD communities will be effectively reached by strategies delivered to the population as a whole, there are a number of communities, such as new and emerging communities, or long-standing migrant groups affected by social exclusion, that will require targeted effort.

For respondents born in non-English speaking countries, the NCAS found that while only a relatively small proportion considered family violence to be acceptable, the proportion endorsing attitudes that excuse, trivialise or minimise the problem, or blame the victim, was higher than the broader surveyed community. For example, respondents born in non-English speaking countries were more than three times as likely to agree that family violence can be excused if the victim is heavily affected by alcohol (22 per cent compared with seven per cent of the broader community surveyed).

CALD communities are identified as a priority in the NCAS. A recent AMES and VicHealth report, titled Understandings and Actions to Prevent Violence Against Women in CALD Communities was commissioned through the national plan. The report stresses that when planning, developing, implementing and evaluating prevention strategies, the varying cultural, religious, social and economic circumstances of communities need to be considered. It concludes that prevention work in communities requires a rights-based approach that prioritises the safety, agency and empowerment of women, and responds to increasing diversity in the composition of the migration program, as well as geographic diversity in settlement patterns in Australia.

The Commission heard of a number of initiatives that are progressing work with CALD communities with regard to primary prevention. These include the InTouch Multicultural Centre Against Family Violence program CALD Communities Leading the Way to Respectful Relationships, which was the state winner of the Australian Crime and Violence Prevention Awards, and worked with Croatian, Indian, Sudanese and Vietnamese communities.
The Commission heard that including strategies that focused on women’s leadership and empowerment were important elements of a broader prevention strategy.

Recognising the fundamental underlying role of gender inequalities in VAW, efforts to prevent this violence must support the empowerment of CALD women, including by engaging them as leaders in prevention programs and settings.\textsuperscript{158}

Enhance and foster the leadership of women from immigrant and refugee communities as an integral strategy to build gender equity.\textsuperscript{159}

Seniors Rights Victoria told the Commission that while elder abuse is not necessarily more common in ethnic communities, older people within these communities ‘may be at greater risk or face additional barriers in accessing assistance’, including lack of English language skills, cultural influences and smaller family networks.\textsuperscript{160} Seniors Rights Victoria highlighted that approximately one-third of people over 65 years of age in Victoria are from CALD backgrounds.\textsuperscript{161}

Faith can also play an important role in the experiences of family violence for some people from CALD communities. The Commission explores the role of faith as an important additional setting for prevention later in this chapter, as well as in Chapter 29.

For further discussion, see Chapter 28.

**People with disabilities**

As discussed in Chapter 31 evidence shows that women with disabilities face a higher risk of violence than other women and men with disabilities.\textsuperscript{162} Our Watch told the Commission that women with disabilities are more vulnerable to family violence due to restricted mobility or dependency on the perpetrator, and/or the fear of being institutionalised.\textsuperscript{163}

There is also limited evidence on the effectiveness of prevention and early intervention activities targeted to this group. However, key themes emerging from the available literature include:

- the need for community awareness-raising to address stereotypes about women with disabilities
- training for all service providers on the particular needs of this group
- involvement of women with disabilities in policy development
- providing women with disabilities with information about family violence, and the need for a standard screening and assessment tool for use by a range of services.\textsuperscript{164}

The Commission heard that the Gender and Disability Workforce Development Program, developed by Women with Disabilities Victoria, was a good example of a program that aims to improve the quality of gender-sensitive practice among disability workers.\textsuperscript{165} A key aspect of this approach has been engagement and training of women with disabilities and professional trainers from women’s health and violence response services to deliver jointly the program to disability services.\textsuperscript{166} The program is being evaluated, with an initial findings report indicating that there are changes that can be directly attributed to the program.\textsuperscript{167}
Case study: Gender and disability Workforce Development (Women with Disabilities Victoria)

The Gender and Disability Workforce Development Program is designed to change culture across whole organisations, working with clients, staff, managers and executives. The aim is to improve gender equitable service delivery as a strategy for increasing women’s wellbeing and reducing gender based violence. The package is co-delivered by women with disabilities and professionals from relevant sectors.

- ‘I have observed a marked difference in staff approaches to working with women with disabilities, in particular between staff who have completed the training and those that have not. Moving from managing one residential service to another has highlighted this for me.’ (Participant)
- ‘We lose insight of gender issues in “individual person centred planning”. It needs to remain at the forefront.’ (Disability Service Manager)
- ‘It opened my eyes. It flicked a switch and made me more aware.’ (Disability Support Worker)
- ‘Reaffirmed the amount of power we have over our clients and how we must be mindful (constantly) how we use it.’ (Disability Worker)

The program is targeted to services providing support to women and men with disabilities; one of the findings of the evaluation was that some participants raised that the experience of men with disabilities was a gap within the training.

Rural, regional and remote communities

The Commission heard that geographical factors, and social norms and attitudes that are specific to life in these communities significantly shape the experience of family violence and that these need to be considered for prevention strategies to be effective with these communities.

Through its consultations, submissions and the hearings the Commission noted an increasing awareness in rural, regional and remote communities of family violence, and a growing commitment to seeking to prevent and respond to it. Specific plans and initiatives, many of these initiated and led by the local communities, were described to the Commission. These are discussed in more detail in Chapter 33.

Lesbian, gay, bisexual, transgender and intersex people

People who identify as lesbian, gay, bisexual, transgender or intersex can face particular patterns of family violence, including violence directed at young people by family members in response to their sexuality or gender diversity, the use or threat of outing, or disclosing a person’s HIV status.

Submissions to the Commission identified that there are very few prevention strategies aimed at people who identify as LGBTI. It is argued that the invisibility of family violence in LGBTI communities within the broader community contributes to this problem.

While Moving Ahead 2013–2016, the second action plan under the National Plan to Reduce Violence Against Women and their Children, addresses family violence in some diverse communities it does not specifically refer to LGBTI communities.

The Australian Institute of Criminology report on same–sex partner homicide pointed to the need for a ‘more nuanced approach to violence prevention’ among same–sex attracted persons, and highlighted the effect of discrimination and marginalisation in increasing the risks for these communities.

The Commission also heard that broad-based prevention campaigns need to address LGBTI needs and that the gendered framework often used to discuss family violence does not resonate with the LGBTI community.
The most established family violence information program targeted to LGBTI people is the LGBTI Domestic and Family Violence Project run by the AIDS Council of NSW. This project includes a website (Another Closet), which provides information on support services and campaigns.\textsuperscript{177}

In regard to prevention initiatives in schools, the Healthy Equal Youth Project funds the Safe Schools Coalition Australia, which provides training and resources to schools to become free of homophobia and transphobia.\textsuperscript{178} In addition, materials used in respectful relationships education as part of the national curriculum discuss relationships and gender-based violence, including same–sex relationships, diverse experiences of sexuality and homophobia.\textsuperscript{179} We discuss Respectful Relationships Education below.

Further discussion is located in Chapter 30.

Older people
The Commission heard that there is very little research on the effectiveness of programs in preventing elder abuse, which in the context of an ageing population, is a critical gap. Family violence against older people can take different forms including intimate partner violence, financial abuse and neglect. As with all family violence, violence against older people tends to be under-reported. As discussed in Chapter 27, specific challenges in responding include a reluctance by some older people to engage the legal system in these circumstances.

Awareness and education campaigns must be inclusive of older people in their messages and imagery to enable the abuse to be recognised for what it is, rather than ‘normal’. ... Campaigns should also more generally aim to educate the broader community about elder abuse as a form of family violence. Educational ‘respect’ campaigns should begin in primary schools.\textsuperscript{180}

Older women are less likely to report violence than younger women, and may be in relationships and social environments in which ‘traditional’ or conservative norms about violence and gender relations prevail.\textsuperscript{181} Older women may also have a relatively high degree of economic dependence on their male partners, increasing their vulnerability to violence.\textsuperscript{182}

Seniors Rights Victoria submitted that there is an increasing awareness of the hidden levels of sexual violence against older women, and that the system needs to be more responsive to this issue.\textsuperscript{183}

A focus on children and young people
The Commission heard that there are sustained benefits in targeting prevention strategies to children and young people.\textsuperscript{184} As outlined earlier, research indicates that many of the risk factors for family violence are acquired in childhood. Childhood and adolescence are also stages of life when ideas about and relationships to gender, as well as gender identities, are formed. Intimate relationships outside the immediate family develop during adolescence, and intervention at this life stage can reinforce respectful, non-violent relationships, or change the trajectory of disrespectful ways of relating.\textsuperscript{185} Experiences during childhood and adolescence have a powerful influence on behaviour and outcomes in adult life.\textsuperscript{186}

National research indicates that there is a higher level of tolerance for violence against women and girls among children and young people, than among adults.\textsuperscript{187} Young women experience a high prevalence of intimate partner violence when dating and cohabiting. A substantial proportion of men who report perpetrating rape against women or girls did so for the first time before turning 20 years of age.\textsuperscript{188}

Three recent surveys looking at the attitudes of Australian young people towards violence against women and gender equality found that:

- most young people believe that violence against women is due to men being unable to manage their anger\textsuperscript{189}
- two in five young people agree that ‘rape results from men not being able to control their sexual urges’ (an increase from 2009, when one in three believed this)
- a sizable portion of young people surveyed support male dominance in decision-making in relationships.\textsuperscript{190}
These findings are reinforced by recent research undertaken by the Commonwealth Government to inform a future national campaign to prevent violence against women and their children. The research identifies some of the challenges in engaging young people to prevent violence. These include that intimate partner violence is often not ‘named’ by young people, and young people may have little understanding of its causes.

The research also discusses the ‘automatic defences’ that impede the ability of young people to prevent intimate partner violence. These defences include automatically blaming victims, minimising the behaviour of men, and a tendency to protect and empathise with men’s experience over the experience of women. The implications of these defences are that some young men’s disrespectful and aggressive behaviour goes unchallenged and so is normalised, and in turn some young women accept gender inequality, disrespectful relationships and aggressive behaviour from men as the norm. Mr Lay, informed the Commission that he found the research confronting and highlighted the importance of prevention work with young people.

The Commission heard that effective prevention work with children and young people needs to be appropriately tailored to young people’s specific concerns, contexts and preferred modes of learning. Prevention strategies should also be delivered in settings that are influential in shaping the attitudes and behaviours of children. Embedding respectful relationships education in schools and recreation settings was consistently raised with the Commission.

Prevention work with children and young people also needs to be able to respond effectively when violence occurs and to the ways in which it manifests. The Commission heard about adolescents who use violence against family members, and sibling violence, as growing areas of concern. The Commission also heard that these young people are often victims (or have been victims) of family violence themselves. Research also demonstrates the seriousness of sibling conflict, including aggression and violence, which has been linked ‘to a wide range of negative youth outcomes’.

Prevention strategies targeting children and young people are discussed in more detail in Chapter 10 and Chapter 23.

The influence of media and popular culture on young people was also a common theme raised with the Commission. The need for increased support for young people to engage critically with popular culture and new media, including critiquing representations of women and girls in the media, is a recommendation of NCAS.

Current prevention practice in key settings

Places where people live, work, learn and play, such as schools and workplaces, are key settings for implementing prevention strategies. Evidence to the Commission identified a number of key settings for delivering prevention strategies, which are described below.

Schools

Many people the Commission consulted emphasised the importance of educating children and young people about healthy and respectful relationships.

There need to be education programs in schools about healthy relationships, bullying, intimate relationships. Teaching boys how to treat girls and women and teaching women what comes under the umbrella of abuse. Needs to be mandatory. Girls don’t recognise abuse. You need messages outside the family especially if you are in a violent family.

I think it should be in schools – they talk about sex education, but they don’t talk about family violence. Need to explain that everyday abuse is not OK. It’s so common, kids don’t know what’s right and wrong.
This message was reinforced when the Commission met with the principals and staff of government secondary schools, the Catholic Education Office, Independent Schools Victoria, and the Australian Education Union. The Commission heard a strong and consistent view that the prevention of family violence, and creating generational change in attitudes to family violence, must start with children and young people. The Commission also heard that violence prevention initiatives targeted to children and young people have been shown to work.\textsuperscript{207}

Respectful relationship education programs that are delivered, predominantly in secondary schools, are ... an important development contributing towards preventing family violence ... These programs successfully introduce concepts around gender that challenge existing rigid gender stereotypes that create inequity and violence supportive attitudes and behaviours. This approach works systemically to prevent family violence through creating cultures that are based on principles of equity and respect. Further extension of this work in both the early childhood and primary school settings is needed to ensure that these important messages are being embedded from an early age and in all phases of development. It would be beneficial for this to be incorporated in to government policy and curriculum development across all education settings.\textsuperscript{208}

Recognising the value of schools as a platform to drive cultural and attitudinal change has long been recognised. In 2006 the Victorian Law Reform Commission in its \textit{Review of Family Violence Laws: Report} recommended the Victorian Government consider introducing a ‘state-wide and consistent education program for Victorian secondary schools on respect in relationships’.\textsuperscript{209}

Schools are a logical environment for prevention action for a number of reasons:

- Schools are small communities that provide a ‘mass and captive audience’ for learning about family violence.\textsuperscript{210}
- As well as sites of learning, schools are workplaces, which means that prevention strategies in schools can reach two main population groups: ‘students who are at a critical age for forming their attitudes and knowledge, and a diverse teacher and non-teaching workforce’.\textsuperscript{211}
- Violence-supportive cultures are evident in some schools, so situating prevention programs in this setting can target these aspects of the school environment.\textsuperscript{212}
- Delivering prevention programs in schools is relatively cost effective and less stigmatising than other settings.\textsuperscript{213}
- Violence prevention education generates broader benefits for schools, and children’s overall education and development. It can help make schools safe and supportive environments and reduce time and energy spent on conflict resolution and managing disruptive behaviour.\textsuperscript{214}
- Prevention programs delivered in schools reach beyond the immediate school environment—they facilitate partnerships between the school and parents, teachers and counsellors.\textsuperscript{215}

The importance of starting in schools and with education was emphasised to the Commission as essential for all communities. Ms Jill Gallagher AO, the Chief Executive Officer of the Victorian Aboriginal Community Controlled Health Organisation, told the Commission that to ‘get violence out of our community, keep families together and give kids the best start in life that we can ... we need education’:

For example, we need to run programs in our local schools that teach our young men and young women about what respectful relationships are. Already, as teenagers, we see that our young men are displaying behaviours that are disrespectful and we are seeing our young women accepting that behaviour, they think that it’s normal but it’s ... not part of Aboriginal culture.\textsuperscript{216}

The importance of school environments to the lives of children was highlighted by Hue Man Dang, a year 12 student and Hobsons Bay Young Citizen of the Year.
... schools are the main environment, other than their homes, where children spend most of their day, and it is where children learn the life lessons of what is right and wrong. These institutions combined with a healthy relationship program, will shape the normative and secretive culture of domestic violence, into a healthier one. Most importantly, education into domestic violence will allow students, who have experienced or witnessed domestic violence, to identify stressors throughout their life, which will as a result improve their development and overall education. Schools are an oasis for children who live in violent homes, and to make it a better place, we need to make it more supportive and accommodate the young people who are often neglected.

Finally, we need to show students, this is what a healthy relationship looks like, this is where you go to get help, and we need to let them know that they are not alone. The education program should cover things such as: The definition of domestic violence, what constitutes as domestic violence and the warning signs; causes of family violence and abuse; the differences between a healthy and unhealthy relationships; gender stereotypes within intimate relationships; how and where to seek help; if a victim is being abused, it isn’t their fault.217

Respectful relationships education

In 2009, the then Victorian Department of Education and Early Childhood Development published *Respectful Relationships Education: Violence prevention and respectful relationships education in Victorian Secondary Schools.*218 Developed by VicHealth, the report maps current violence prevention programs in Victorian schools, and identifies the most effective and promising practices in Victoria and elsewhere. The report remains the most comprehensive overview of the evidence relating to school-based primary prevention initiatives.

Prior to 2009, specialist family violence, sexual assault and women’s health services primarily delivered these programs, on request by the school. In 2010, the Victorian Government committed to implementing respectful relationships education in schools as part of a multi-setting approach to prevention, under the policy *A Right to Respect: Victoria’s Plan to Prevent Violence against Women 2010–2020.*219 While the state policy did not continue, pilots commenced in four Melbourne secondary colleges, based on the good practice criteria outlined in the Respectful Relationships Education report.220 The pilots ran for 10 weeks and tested two units of curriculum—one designed for year 8, to develop a common understanding of gender, relationships and respect; and one designed for year 9, exploring family violence and sexual assault in the context of power, social and institutional structures, and young people’s lives.221

In 2014, following this pilot, an optional AusVELS (now the Victorian Curriculum F–10) curriculum222 for years 8 and 9, called ‘Building Respectful Relationships: Stepping Out Against Gender-based Violence’ was released. The curriculum provides ‘a set of sequential teaching activities to educate secondary school students about gender, violence and respectful relationships’.223

Also in 2014, under the Respectful Relationships Education in Schools project, the Victorian Government provided funding to Our Watch to support up to 30 schools in central, outer eastern and western metropolitan Victoria to implement the Building Respectful Relationships curriculum resource. As a result of the project, 4000 students received respectful relationships education.224 The project sought to build the capacity of the education system through a suite of professional learning for individual teachers and all school staff.225 Additionally, three specialist project implementation leaders based in Department of Education and Training regional offices worked closely with the schools.226 Leadership from departmental Deputy Regional Directors was reported as an essential strategy for principals and schools engaging with the project.227 Internal school project champions (such as the principal, or the curriculum leader), were seen as essential and the most highly valued external supports were the Department of Education and Training regional office specialist project workers.228 A particularly valued element of their role, according the evaluation, was the translation of a whole-of-school approach.

The draft evaluation report for the project provided to the Commission said that students demonstrated increased understanding about violence, gender and gender inequality, and were also less likely to trivialise and excuse gender-based violence, or victim blame.229
As stated in the evaluation however, ‘perhaps the greatest impact of the RREiS pilot was the positive changes in student behaviour’, with 64 per cent of 42 teachers stating that there had been a positive change in classroom behaviour.230

In addition, the evaluation emphasised that schools need to have better training, and access to referrals for responding to disclosures. Increased disclosures from students, as well as from staff members, was common across all schools in the pilot.231 A common theme through all parts of the evaluation was a strong concern about the lack of staff confidence in where to refer, and how to respond, as well as not having procedures in place.232 This was particularly the case for those disclosures that fell outside of the mandatory reporting guidelines.233

As part of the project, Our Watch will develop a suite of resources that can be used ‘by schools, community organisations, local governments, and the Department’s own regional offices as part of a whole of school approach to assist in building school cultures that support equality and respect’.234

The Commission notes that there are varying understandings about what constitutes respectful relationships education in a school context. As respectful relationships education is a relatively new field, there is not yet a standard model in the Australian context that can guide policy makers and education departments.235

The Commission heard that there are currently a number of programs, focused on healthy and respectful relationships, being delivered in schools. Several of these have been delivered over a number of years, and have in the main been developed and delivered by sexual assault, women’s health and family violence services. In addition to the program currently being delivered by Our Watch, other respectful relationships prevention programs include:

- **Sexual Assault Prevention Program in Secondary Schools.** An initiative of CASA House, this program includes staff professional development, respectful relationships curriculum for year 9 and 10 students, train-the-trainer workshops for teachers, peer educator programs for older students, and evaluation. It depends on strong, committed partnerships between sexual assault services and schools and has been evaluated.236

- **Solving the Jigsaw.** Developed by the Centre for Non-Violence (formally EASE) in 1997, this program includes classroom activities, accredited trainers, and professional development of teachers and others to deliver whole-of-school 20-week program.237

- **Girls Talk/Guys Talk.** An initiative of Women’s Health West, this program combines year 9 sexuality education with a World Health Organization whole-of-school approach, a feminist philosophy, and VicHealth’s Participation for Health: Framework for Action.238

- **Gippsland Respectful Relationships Education in Schools.** An initiative of Gippsland Women’s Health, this program seeks to prevent violence against women by promoting gender equality and reducing adherence to rigid gender roles in school communities.239

- **Respect Protect Connect Program.** An evaluated initiative of South Eastern CASA, this program offers workshops for students at all secondary year levels, to build understandings of violence, healthy relationships and respect.240

- **Reality and Risk.** Run by Brophy Family Community Services, which has developed a range of educational materials to promote critical thinking about pornography, including curriculum resources, teacher-training materials, parent education and audiovisual resources

- **Feeling Safe Together.** A South Eastern CASA initiative, this program is delivered in a number of primary schools and focuses on advanced personal safety.241

The White Ribbon Foundation also offers a respectful relationship program for schools nationally that includes a professional development program, and works ‘with school leadership to embed models of respectful relationships in school culture and classroom activities’.242
Strengthening the respectful relationship education program

In August 2015, the Victorian Government announced that in 2016, respectful relationships education will be introduced into the school curriculum from prep to year 10. It will ‘focus on challenging negative attitudes such as prejudice, discrimination and harassment that can lead to violence, often against women’.243

The Secretary of the Department of Education and Training, Ms Gill Callister, told the Commission that successful implementation will require the development of age-appropriate curriculum for these year levels:

- We have a number of resources currently, as I said, that will help implement that curriculum. But our most immediate focus is to have some independent assessment of those different resources and look at how we develop something much more specific but more primary appropriate for the foundation to year 6. So there will be resources that are more explicit about gender and more explicit about violence. We think we have some of them, but we want some advice about how to integrate them and build on them utilising what we know now about the year 8, year 9 resources.244

On 14 September 2015, the Victorian Government announced the development of a new state curriculum under the Education State reform agenda.245 The government emphasised to the Commission that support for disengaged and disadvantaged students is a focus of the new reforms, noting that factors such as isolation and poverty can indicate an increased risk of family violence.246 The Education State reform agenda notes that funding will be provided over three years to ‘help all government school teachers teach the new Victorian Curriculum—including mandatory new subjects like digital coding and respectful relationships’.247

Victorian government and Catholic schools are required to use the new curriculum for Victoria schools, called the Victorian Curriculum (F–10).248 Independent schools may use the curriculum as a model and resource for the effective implementation of the Australian Curriculum.

Ms Callister gave evidence that there are two areas in the curriculum that address the underlying factors relevant to family violence—Health and Physical Education ‘learning area’ curriculum, and the Personal and Social ‘capability’ curriculum. In particular, the curriculums in these two areas address gender stereotypes and norms, power imbalances, and the use of violence or aggression to resolve conflict or express negative emotions.249

Ms Callister further advised that the resources available to assist schools in delivering the curriculum are:

- Building Respectful Relationships: Stepping Out Against Gender-Based Violence, for years 8, 9 and 10
- Building Resilience: A model to support children and young people
- Catching On sexuality education resources.250

The Commission was advised that all Victorian government and Catholic schools will be required to implement the new curriculum, including the content about respectful relationships.251 How this is undertaken, including the particular resources used, is a decision for the school.252 Funding has been provided to support government schools to implement the new curriculum, including training for school leadership teams and new staff in regional schools.253

In December 2015, the Victorian Government announced that a new module for year 10 will be introduced, which includes a focus on sexualisation, pornography and gender, and will build on the respectful relationships modules for years 8 and 9.254 The year 10 curriculum was developed with a view to equipping young people to understand how they can develop a positive sexuality that incorporates respect and the negotiation of free and full consent.255

Dr Flood gave evidence to the Commission about the importance of discussing pornography with young people. Dr Flood described the link between pornography and violence as follows:

There is good evidence ... particularly from research among young adults, that pornography consumption, particularly consumption of violent pornography, is linked to the perpetration of sexual violence; that is that young men, for example, who consume pornography, particularly violent pornography, are more likely to be tolerant of and indeed to perpetrate sexual violence to try to coerce or force a girl or woman into sex, than other young men.256
Similarly, the Jewish Taskforce Against Family Violence told the Commission that...

... many young men think that what they see on those sites reflects normal sexual relationships and young women feel coerced into complying with their boyfriends' requests lest they are cast aside... What is required is funding to provide programs which are, in essence, respectful relationship programs but with an emphasis on how porn demeans women.257

A number of submissions commented on the Reality and Risk project developed by Brophy Family Community Services as a project that is contributing valuable resources, research and curriculum focused on 'engaging young people in thinking critically about pornography'258

The Victorian Government has also announced continued funding for the Partners in Prevention program, led by Domestic Violence Resource Centre Victoria, which aims to build the capacity of school staff to support schools in delivering respectful relationships education. Community organisations which work with early childhood services and primary and secondary schools are included in the program.259

The Commission understands that the Minister for Education has broad powers under section 5.2.1(2) of the Education and Training Reform Act 2006 (Vic) to issue directions to education institutions. Specifically, section 5.1.2(2)(b) states that the Minister has the power to issue policies, guidelines, advice and directions to education or training institutions in or related to Victoria. In addition, the Minister has the power to set the overall policy for education and training in or related to Victoria.260

In her evidence to the Commission prior to the Victorian Government announcement of the new state curriculum, Ms Callister stated that it may be possible to mandate the inclusion of respectful relationships programs in Victorian schools through use of a Ministerial Direction.261

Respectful relationships education in the national curriculum

The inclusion of respectful relationships education in the national curriculum was an agreed action in the National Plan to Reduce Violence against Women and their Children 2010–2020.262

On 18 September 2015, the Education Council, consisting of ministerial representatives from all Australian jurisdictions (and New Zealand), endorsed the contents of the first national school curriculum, from prep to year 10, for Australia.263 The curriculum includes the following learning areas: English, mathematics, science, humanities and social sciences, the arts, technologies, and health and physical education.264 The health and physical education component of the curriculum includes express reference to respectful relationships, sexuality and safety. The curriculum addresses:

physical, social and emotional changes that occur over time and the significant role relationships and sexuality play in these changes. The content supports students to develop knowledge, understanding and skills that will help them to establish and manage respectful relationships. It also supports them to develop positive practices in relation to their reproductive and sexual health and the development of their identities. In doing so, students will gain an understanding of the factors that influence gender and sexual identities.265

...[it includes] safety issues that students may encounter in their daily lives. The content supports students to develop knowledge, understanding and skills to make safe decisions and behave in ways that protect their own safety and that of others.266

These topics will be included in the curriculum for all year levels, from prep to year 10.267 State and territory authorities are responsible for implementing the curriculum in their respective jurisdictions, and for the timing of that implementation.268
A whole-of-school approach
The Victorian Government’s 2009 Respectful Relationships Education report states that the single most important criterion for effective violence prevention and respectful relationships education in schools is the adoption of a whole-of-school approach.269 This was also a clear message from the Commission’s consultations with education and community service providers, researchers and academics:270

The most effective programs – in terms of positive changes to student attitudes/behaviours and to school culture/practices – were those that used a whole-school approach. This meant that prevention of violence was integrated into the curriculum and teacher training, supportive school policies and protocols were developed and widely understood, and school leadership, parents and community organisations were engaged.271

A whole-of-school approach requires a prevention program to address four broad areas:

- curriculum, teaching and learning: curriculum content, pedagogy, resources and outcomes
- school policy and practices: formal school policies and practices
- school culture, ethos and environment: informal school culture and ethos (attitudes, values and practices), extracurricular activities, and the social and physical environment
- partnerships and services: the relationships between school, home and the community.272

Figure 36.2 Elements of a whole-of-school approach273
As outlined in the respectful relationships curriculum, a key challenge is for schools to apply the whole-of-school approach comprehensively:

... it may be tempting for educators and others to focus on issues of program content and delivery, and these are undoubtedly important, but more important are the comprehensive involvement of schools in violence prevention.274

The Commission heard that effective implementation of whole-of-school violence prevention approaches requires substantial commitment from schools. Resources and training are one aspect; another challenge is investing the time required to set up the systems and structures to ensure the sustainability of initiatives and their adoption across the whole school and broader school community.275

The Commission heard that there is also a need for both policy and institutional support for a whole-of-school approach, as ‘without support for and commitment to schools-based violence prevention, efforts will be piecemeal, insubstantial, vulnerable and ultimately ineffective’.276 The specialist regional support being provided by the Department of Education and Training, within the current model being tested by Our Watch, was spoken of highly by schools participating in this trial. Feedback from the Our Watch evaluation also reflected that the ‘centralised support and “top down” leadership from Ministers is essential and needs to be sustained’.277

Involving parents is an essential aspect of whole-of-school approaches, as they are one of the ‘critical domains of influence’ on children’s lives.278 A number of submissions raised the importance of including parents in the delivery of school-based prevention programs,279 as well as highlighting the role of schools in changing the attitudes and behaviours of parents.280 Schools and other educational settings play a central role in teaching children and young people about violence against women and how it can be prevented, and provide an environment in which children and young people already living with violence at home or in their relationships may receive support and appropriate referrals.

Schools are also major workplaces and community hubs: the school culture, policies and practices can therefore influence attitudes and behaviours of staff, parents and other adults towards violence, discrimination and stereotyping.281 In addition, Our Watch’s recent review of respectful relationships education highlights several ‘infrastructure’ requirements to ensure successful implementation of the whole school model:

- policy and planning frameworks helping to mainstream respectful relationships education into implementation and school strategic plans
- programs are supported and included within school global budgets
- schools engage the right expertise, such as gender and family violence experts
- the whole school community, including school leadership, teachers, parents/carers and school staff is engaged and supportive.282
Principles of school-based prevention

Effective implementation is a critical element in the success of school-based prevention programs. Conversely, inadequately resourced programs are ineffective, and in some cases cause harm. An international review of the available evidence undertaken by Our Watch has distilled seven criteria of good practice in schools-based violence prevention programs:

- Take a ‘whole-of-school’ approach—recognise that change will not be achieved through classroom learning alone.
- Address the drivers of gender-based violence—respectful relationships education approaches need to acknowledge the power imbalances that foster gender-based violence in age-appropriate ways.
- Have a long-term vision and the funding to match—political leadership and sustainable resourcing is required to ensure respectful relationships education is embedded across all schools.
- Establish mechanisms for collaboration and coordinated effort—working in partnership with specialist services is key to supporting successful implementation in schools. These specialist services will require increased support to respond to disclosures.
- Ensure integrated evaluation and continual improvement mechanisms are in place—there are currently no longitudinal research studies in Australia to demonstrate the effect of prevention strategies on the prevalence of family violence.
- Provide resources and support for teachers—well-trained teachers can teach respectful relationships education and promote gender inequality through all their subjects. Teachers will require access to secondary consultation and specialist support when they require advice on how to approach a specific student’s issues or disclosure.
- Use age-appropriate, interactive and participatory curriculum—curriculum needs to match the developmental age of students, and should be designed to allow for applicability to students of all diverse backgrounds.

Reaching children and young people not in schools

The Commission notes that school-based interventions will not reach all young people. Many young people most at risk of perpetrating or experiencing family violence may not be engaged with formal educational institutions. School-based interventions therefore need to be complemented by interventions targeted to children who do not attend school.

The need for joined-up approaches across prevention and response settings for children and young people was emphasised:

The historical focus of work in this area with children and young people has been on responding to existing violence and (more recently) on intervening early. As a result, early intervention and response programs and systems exist in a number of settings and across jurisdictions nationwide. A key challenge and opportunity lies in ensuring a ‘joined up’ approach, so that children and young people who experience violence are not only respected, supported and encouraged in their own efforts to overcome its impacts – but that all children and young people in Australia grow up with the skills to build healthy relationships and reject violence.

Education, health and social services departments can play a key role in ensuring and/ or strengthening such a coordinated and holistic approach between primary prevention, early intervention and response initiatives with this age group.
The Commission heard that from 2016, the Victorian Government will fund new initiatives responding to children and young people who are disengaged from schooling. These strategies included new Lookout Centres, working with children in out-of-home care, and the ‘Navigator’ initiative, which will provide specialist support workers to maintain regular contact with disengaged young people. These initiatives are discussed in Chapter 10.

**Tertiary institutions**

There is limited prevention work currently undertaken in Victorian universities. The Commission heard that Monash University is participating in the White Ribbon Workplace Accreditation Pilot Project and has a focus on promoting gender equity; and La Trobe University includes a focus on respectful relationships through their Living Well student counselling and education program. Compared to universities in the United States however, where sexual violence prevention programs are a common feature of induction for first-year students, this area is underdeveloped. Dr Flood informed the Commission that the international evidence is positive with regard to the effect of these programs, and a ‘systemic rollout in Australia’ should be considered.

Our Watch submitted that the university setting offers unique opportunities to implement prevention activities, with potential to drive whole-of-campus activities, link to associated professional development for relevant university educators, develop tools for students to engage in respectful relationships and take bystander action, and reach a number of businesses who are onsite at the university.

The Department of Education and Training informed the Commission of relevant work in the area of vocational and higher education, including standards and guidelines that recognise that students attending vocational training and higher education settings may be experiencing family violence.

The Commission also heard that Victoria University, working in partnership with Victoria police, relevant experts, and local support services, is developing a Respect and Responsibility policy that includes professional development for university staff and students, and bystander strategies. A key driver of this policy was VU acknowledging ‘the prevalence and impact of violence against women on individuals, communities and our society in general’ and understanding ‘our responsibility, as a public institution, to support those who have experienced this violence’.

Given individual students can be with us for a number of years, an opportunity is created for the University to undertake activity which raises awareness of the unacceptable nature of violence against women and provides students with the necessary behaviours and skills to reject this violence, as they progress into the broader community.

The role of universities in incorporating an understanding of family violence into curriculum and pre-service training is discussed in Chapter 40.

**Local government**

For many years, local government has been a key setting for mobilising local communities to prevent family violence. Local councils have broad reach and access to members of the community who may be otherwise hard to reach, such as people with disabilities, people from culturally and linguistically diverse backgrounds, and Aboriginal people. Local councils are also major employers, and in rural and regional areas are often the largest employer in the whole local government area and are therefore ideally positioned to implement workplace-based prevention initiatives.

The Commission received over 26 submissions from local government, and 29 local governments were represented at community consultations. These representatives told the Commission about numerous programs and initiatives undertaken by local councils or by councils in partnership with the Victorian Government, aimed at preventing family violence.
A number of councils mentioned the statewide capacity-building program funded by the Victorian Government through the Municipal Association of Victoria, which provides expert advice and support to all local councils relevant to prevention initiatives. The Commission also learnt about funded partnerships between VicHealth and local governments.

In 2009, the Victorian Government funded the Preventing Violence Against Women Local Clusters Project, which involved the Outer Eastern Metropolitan Cluster, Maribyrnong City Council and the Mount Alexander Shire Council. An overview of this project is presented in the case study below.

Some councils are members of family violence regional integration committees, and the Commission heard that councils are also involved in forming Children and Youth Area Partnerships, which are aimed at better addressing child and youth vulnerability. These partnerships are discussed in Chapter 10.

The Commission understands that a significant number of councils currently include activities to address violence against women or family violence in their 2013–17 Municipal Public Health and Wellbeing Plans. A number of submissions received by the Commission include a recommendation that the Victorian Public Health and Wellbeing Plan should mandate the inclusion of family violence prevention programs in municipal plans.

In addition to specific, targeted programs that look to prevent and respond to family violence, many local governments have made efforts to promote the prevention of family violence and violence against women in the broader community. This includes programs and strategies that aim to reduce gender inequality at a community and organisational level. Maribyrnong City Council, for example, introduced the She’s Game program in 2015 which sought to increase the participation of women and girls in local sporting clubs.

In 2012, the City of Ballarat endorsed the City of Ballarat Community Charter for the Prevention of Violence Against Women. This charter aims to:

highlight the need for a community approach to prevention, gather support for action that reduces violence against women and inspire people to act at an individual and community level to eliminate the attitudes that support violence. Approximately 3000 residents have signed ‘The Charter’ since its launch in October 2012. The Charter has not been formally evaluated, however its exposure to the community in a wide variety of settings (including education, business and community) has allowed for a community conversation and greater understanding of the extent of violence against women.

Like the City of Ballarat, many local governments have created a plan for the prevention of family violence. For example, Brimbank City Council has worked to implement the Brimbank Family Violence Prevention Action Plan (2010–2013), which outlines ‘a whole-of-Council approach to create a respectful, gender equitable and violence-free community in the municipality.’

As discussed further in Chapter 37, many local governments have sought to make their own organisations more aware of preventing and recognising family violence. In 2010, Surf Coast Shire Council introduced a family violence clause into their Enterprise Bargaining Agreement allowing up to 20 days of paid leave for staff experiencing family violence. Other local governments have adopted this clause and/or have sought to make their employees more aware of family violence and how it may be affecting not only the community but their own staff as well.
Case study: Preventing Violence Against Women Local Clusters Project

The evaluation of the Victorian Government Preventing Violence Against Women Local Clusters Project, initiated in 2009, has provided information to inform further investment in place-based initiatives. The project’s aims were to embed cultural change in local governments to mainstream gender equity across policy and programs, and build skills in local governments and their communities to promote respectful relationships and non-violent norms. An evaluation was undertaken by the Australian Institute of Criminology. Positive findings included:

- increased understanding and awareness of the severity and prevalence of violence against women and its underlying causes among council staff
- the capacity of council staff to promote gender equitable relationships and non-violent norms improved
- the project was innovative in both its design and approach to preventing violence against women, particularly in terms of the role of local government.

The evaluation concluded that local government should continue to take a leadership role in the delivery of prevention initiatives. The evaluation however reported a number of barriers to successful implementation. These included insufficient senior management ‘buy-in’ across the local councils, due to inadequate project management resourcing. The original intent of other mutually reinforcing programs were to be included (such as programs in schools and workplaces) did not eventuate, due to state government funding decisions. There was also wide variation across councils around the selection of particular activities, resulting in difficulty measuring any cumulative impact.

Place-based initiatives

Place-based initiatives are collaborations between government (often local government) and a local community, including businesses, service providers and community groups. The Commission heard about place-based prevention initiatives which harnessed community effort by establishing trust and respect, and recognising the existing of cultural practices that may ‘assist (or hinder) the change process’. The Rotary Club of Maryborough submitted that the community needs to accept that change is required and that the Victorian Government should then actively support local campaigns to progress change.

Mr Jeremy Hearne, Manager of Prevention, North and Inner North at cohealth, also told the Commission that place-based initiatives must be targeted to the local community, and engage with the community where ‘they are ready to start the conversation.’

The idea is we will support local communities to be able to pick that up and drive that themselves. So it’s really taking a linking national to local kind of approach. The community mobilisation or community action is about local communities who what to do something about family violence but are not sure where to start or what to do, and the campaign team will help support them in terms of identifying where their community is at, what they are ready for, what are the right messages, what’s going to work, what might work in this community.

The Commission heard that while place-based approaches may be diverse, the principles underpinning them should be consistent.

Local and regional knowledge is essential in ensuring successful community led approaches based on universal principles which are tailored to specific areas and populations. These should build on pre-existing networks and communities of interest and engage local leaders and influencers from a range of sectors, including community, health, education, business, sport and agriculture, essentially engaging mainstream partners.
Implementing a whole-of-community approach to preventing violence against women: Lessons from effective practice

The Australian Institute of Criminology was commissioned by the then Victorian Department of Human Services’ Office of Women’s Affairs to prepare a guide for agencies, such as local government, implementing whole-of-community strategies to prevent violence against women.

The guide was developed following a comprehensive literature review, a small number of focus groups and workshops, and a review and analysis of past evaluations of the Preventing Violence Against Women in our Community Project. Because research specific to whole-of-community approaches to preventing violence against women is limited, the Institute also drew on community-based programs for other social problems such as ‘health disorders (eg childhood obesity), child abuse and neglect and criminal offending (eg alcohol-related violence).’

The guide defined 11 principles, based on best-practice evidence, for the design, implementation, delivery and management of a whole of community approach.

1. Communities should be selected on the basis that they are ready to receive, support and participate in the program.

2. The operation of the program should be overseen by a high-level governance body comprised of representatives from key program agencies who have delegated authority and have demonstrated their willingness and ability to work together.

3. Prior to implementing the program, it is important to develop an accurate understanding of the nature, extent and causes of VAW [violence against women] (determinants and contributing/protective factors) in the community being targeted.

4. Program staff and coordinators should attempt to collaborate with a range of key partners and in key settings in a range of capacities. Key partners should be selected on the basis they have a role to play in preventing VAW, have demonstrated their willingness and ability to work together, and their culture is consistent with the key aims and messages of the program.

5. Identify the level of community engagement required to drive the program, and the tools and methods that will be used to facilitate this process.

6. Involve men as leaders, participants and advocates and approach them as partners in addressing VAW rather than simply as the cause.

7. Appropriate strategies should be identified early in the program period and supported and maintained throughout the program period.

8. All aspects of the program should be deliverable with the available resources.

9. Responses that target key determinants, contributing and protective factors for VAW, are supported by evidence of effectiveness and are relevant to the intended audience.

10. Plan for evaluation from the start of the program period and identify short-term and intermediate outcomes that are attributable to the program.

11. Plan for program sustainability by ensuring that the program is implemented in accordance with evidence-based principles, identifying opportunities for ongoing funding throughout the life of the program and embedding the program in core work undertaken by program partner agencies.

Source: Based on Australian Institute of Criminology report produced to the Commission by the Department of Premier Cabinet.
The Commission heard about several examples of place-based initiatives to prevent family violence within local communities.

**Generating equality and respect project**

The Generating Equality and Respect pilot is a place-based model funded by VicHealth, which commenced in 2012. The program was delivered over three years through a partnership between VicHealth, Monash City Council and MonashLink Community Health Service. Previous VicHealth investments have focused on prevention efforts within ‘single’ settings, such as in local councils, in workplaces and in sporting clubs. GEAR was designed as a ‘saturation’ model, providing one community with many mutually reinforcing programs. Its goals included to:

- build communities, cultures and organisations that are gender equitable and value and support non-violent norms
- foster respectful and equal relationships between men and women
- realise sustainable primary prevention through strong collaboration with established and new partners
- pilot an innovative model for the primary prevention of violence against women that is transferable and informs practice.322

Over the life of the program, prevention activities focused on the suburb of Clayton and included:

- the Baby Makes 3 program, for first time parents delivered through Maternal Child Health Services
- an organisational change program at MonashLink Community Health Service and Monash City Council to promote respect and equality within the workplace, which will be extended into the broader community through the programs and services they deliver
- a suite of training has been delivered to more than 700 participants including the VicHealth Preventing Violence Against Women Short Course and Leaders’ Masterclass
- a local Monash Partners in Prevention Network to actively support youth practitioners to deliver good practice respectful relationships education and promote gender equality through their programs and services. Network members include local teachers, police, school nurses, youth services and community organisations
- Robert Bosch Australia, a significant employer in Clayton, is a partner in the program and has joined forces with Monash Council, MonashLink Community Health Service and VicHealth to raise awareness of family violence and respectful relationships for its male and female employees. The Clayton headquarters of Robert Bosch Australia is a home for awareness raising and training activities integrated into existing staff health and HR programs over the next six months.323

The evaluation of GEAR found that having effective gender equity processes in place within lead organisations is a necessary prerequisite to work in external settings. In effect, prior to undertaking work with communities, organisations needed to ‘get their own house in order’:

- Of the settings included in the Program those that attained most depth were the two organisational partners. Having mature and embedded gender equity processes in place within lead organisations is a necessary prerequisite to work in external settings, and in particular communities and or/sites.324

This element was emphasised in research underpinning the development of the GEAR model which indicated that leadership was a key ingredient in place based interventions: ‘if there’s no authority or buy-in, there’s no reach’.325 The GEAR evaluation also found that leadership within a place-based intervention requires organisational and partnership agency backing, with links to specialist support and expert partners to build credibility. In addition, the evaluation reinforced that as a prevention to place based prevention, a well-functioning violence against women response system was a prerequisite.326
The Central Goldfields Council has developed a strategy to address disadvantage within the Central Goldfields Shire. The Go Goldfields Alliance is the committee tasked with implementing the strategy. The Alliance includes a Family Violence Action Group, which has developed the Central Goldfields Family Violence Strategy. The strategy covers prevention, early intervention/detection, tertiary response and capacity building. Prevention actions include:

- funding a maternal and child health nurse to consider prevention and early detection strategies in rural communities
- training service providers to recognise family violence
- using a White Ribbon event to raise community awareness of family violence.

The evaluation report for the first stage of the Go Goldfields program, states in relation to family violence that:

Go Goldfields has produced a Family Violence Position Statement to acknowledge that family violence is a community issue and there is collective responsibility to take action against it. Apart from Council, there have been no other signatories. This indicated that more work is required to fully engage the Go Goldfields Alliance in the family violence work.

SAFE

Maryborough Rotary told the Commission that it decided to take action on family violence because the Maryborough region has ‘one of the highest rates of family violence in the state’. After consulting with their local council and groups like Go Goldfields, Maryborough Rotary developed the SAFE model to change community attitudes about family violence:

SAFE would provide an umbrella to coordinate community messaging [about family violence] and work with the district’s support services and partner organisation networks. Central to the social change model was its communications and marketing strategy.

One of the club’s first steps was to ‘make a public statement in the form of a White Ribbon oath, pledging to take a stand against family violence and to become strong advocates for its eradication’. Mr Garry Higgins, Membership Director of Maryborough Rotary, argued that this experience ‘seeded the motivation to put words into action’.

Since the SAFE program was launched in January 2015, education programs have been rolled out in workplaces, sporting groups, schools and the general community. Initiatives include:

- preparing and disseminating wallet cards with information and advice about where to get help
- sponsoring a message campaign that used local transport company truck signage to spread the campaign message
- working with sporting clubs to get the SAFE messages to target groups like young males
- funding overseas travel for vocation scholarships to benchmark best-practice family violence projects in overseas communities
- sponsoring bystander projects to help people know what to do if they are aware of or witness someone subject to or perpetrating violent behaviour. These were delivered through onsite workplace education.

Mr Higgins stated to the Commission that as a result of the SAFE project, there is greater awareness of family violence in the Maryborough community and this has influenced decisions made by local government and service providers. A group has been established to promote collaboration in delivering community focused services, and there is a plan to establish a family violence project in the shire with a dedicated worker. Reporting of family violence has also increased.
Workplace and organisational settings

Workplaces are an important site for family violence prevention and response strategies. Women’s experience of violence in the home affects the workplace in many ways, and workplaces can play a direct role in supporting victims of existing violence. Workplaces can support victims through providing access to services and a safe place away from home, and through providing family violence leave. Workplaces can also reduce the future harm of violence by supporting women to retain employment. Being unemployed can contribute to keeping women ‘stuck’ in violent situations as they lack the financial autonomy to leave.338

Workplaces are settings that provide significant opportunity to reach large sections of the population, as well as unique potential to reach and support vulnerable or isolated groups. For newly arrived immigrant or refugee women, the workplace may be the only contact with systems of support beyond their own families.339

Organisations and organisational cultures are increasingly recognised as having significant potential to influence and shape social norms, through modelling respectful behaviours and reinforcing gender equitable and non-violent cultures.340 Workplaces can play a key role in building people’s capacity to challenge sexist, discriminatory and bullying behaviours and cultures. Active bystander training has been identified as an important aspect of all prevention initiatives undertaken in workplaces and organisations.341

As with all prevention activity, organisational change is not a short-term exercise, and each organisation is likely to face different issues. A key finding from an interim evaluation of workplace partnerships in the western region of Melbourne titled United: Working Together to Prevent Violence in the West highlights the need to engage senior management to implement prevention strategies effectively in the workplace.342

The role of workplaces is further discussed in Chapter 37.

Sports settings

Sports clubs are accessed by a large segment of the community and so are a key setting for promoting prevention and gender equity equality programs. They can also be primary sites for reinforcing negative community attitudes about women, and some sporting environments may increase the risk that men associated with them will perpetrate violence.343 Recent media reports of women being harassed by prominent sportsmen highlight the need to target sport settings for prevention activities.

The Commission heard that sports clubs have an important role to play in influencing the behaviour of men and boys.

In part, sport has been identified as a setting for primary prevention as a result of the number of high-profile incidents of sexual assault and violence against women, and also because of the sexist peer norms that are often associated with male-dominated sports (Dyson & Flood, 2008). This has been described as ‘group disrespect’, a phenomenon which includes rude and aggressive behaviour, consumption of pornography, and encouragement of group drinking at both individual and group levels (Rosen et al., 2003).344

Some of the most well-developed workplace initiatives aimed at men have taken place among athletes in male-dominated sporting workplaces.345 Both the Australian Football League and the National Rugby League have developed violence prevention programs for their athletes and the wider communities associated with these sports. The AFL’s Respect and Responsibility initiative was developed with VicHealth in consultation with violence prevention agencies, and launched in 2005. The initiative includes changes to AFL rules regarding violent behaviour, education of players and officials, development of model policies and procedures, and a public education program.346

In 2015, the Commonwealth Government provided funding for a Sports Grants program, managed by Our Watch, to ‘facilitate violence prevention activities in the sporting community and embed gender equality and respectful relationships into their networks and communities’.347 The AFL, NRL, Netball Australia and Australian Rugby Union will each receive $250,000 over a three-year period to participate in the program, and will contribute their own additional funding to demonstrate their commitment.348
Dr Sue Dyson, Associate Professor and Principal Research Fellow at the Australian Research Centre in Sex, Health and Society, La Trobe University, evaluated the AFL Victoria program Fair Game Respect Matters, a program that works with clubs to create socially inclusive environments and promoting gender equitable programs and environments behaviours. Dr Dyson spoke to the Commission about the longer-term outcomes that such programs can deliver:

Early changes that I observed in clubs were superficial. Women in clubs were consulted about what would make the club more welcoming for them. From this emerged simple solutions like cleaning up the female facilities, installing baby change tables, and decentring the bar – which was usually at the centre of the club rooms where (mainly male) social gatherings occurred. By making simple physical changes, more women started to see the club as welcoming and stayed for longer rather than dropping their children at training and leaving. These clubs focused on becoming family-friendly as well as on encouraging equal and respectful relationships ... Six years on, we can see more complex, nuanced changes that have emerged in the culture of clubs and the structure of the organisation. Women have asserted themselves in a range of roles and are making themselves heard in operations, such as decision making and in a range of (often non-traditional) on- and off-field positions. Structural change has also been implemented at the head office of AFL Victoria: policy changes have been introduced and social responsibility mainstreamed into every aspect of the sport, so equal and respectful relationships have become part of training for coaches, umpires and development staff who work in schools and with Indigenous and multicultural communities.

Bystander intervention

A bystander is somebody who observes an act of violence, discrimination or other unacceptable or offensive behaviour. Bystander action refers to actions taken by a person or persons who is not the victim or perpetrator of violence to identify, speak out about, or seek to engage others in responding to specific incidents of violence and/or behaviours, attitudes, practices or policies that contribute to violence.

Bystander action can have different objectives. While some forms of bystander action require intervention in violent incidents, others challenge the social norms and attitudes that perpetuate violence in the community.

Bystander training is a prevention approach that is increasingly being adopted by sports teams. Research undertaken with professional male athletes in the AFL highlights the value of this work, but it also raises some significant challenges. The research indicates that while many men are willing to raise concerns when others express disrespectful attitudes or behaviours towards women, there were substantial numbers that were hesitant or unwilling to do so.

... it depends on who the comment was said to. Like you know if someone said to a random girl walking past something super-derogatory, you’d just have to [say] ’What was that? I don’t know if I liked that at all’. But you know, if we’re just in here and someone just makes a joke about someone’s mum or wife, or something like that, the boys just generally laugh it off.

Some of the reasons given by men for not responding to disrespectful behaviour include:

- fear of not belonging to the group
- being young and lacking in confidence
- concerns about the implications of intervening
- homosocial codes of silence, that is, ‘what happens on the end of season trip stays on the end of season trip’.

The Commission heard that this research reinforces the need for prevention interventions to be appropriately tailored to the existing culture of the specific organisational, sporting or workplace context.
Sport is also a useful way to reach particular communities. The Commission heard of an indoor soccer program in Whittlesea that works with Iranian men, providing targeted respectful relationships training ‘adjusted to incorporate a human rights, legal education and settlement lens’. The Municipal Association of Victoria told the Commission that local and state governments have particular leverage with sports clubs given the funding they contribute to sport and recreation associations. Local councils, in particular, intersect regularly with these associations.

There are a number of programs directed at improving the participation of women and girls in sporting activities. While these may not be specifically aimed at reducing family violence, they may contribute to doing so. The Commission heard about the Active Women and Girls Policy introduced by Moreland City Council in 2009. The policy is directly linked to sporting ground allocations, and any club wanting to access community-owned facilities for their sports teams must demonstrate the role girls and women have at their clubs. Moreland City Council has seen a substantial increase in participation by girls and women since the implementation of the policy.

The Gender Lens for Leisure project, led by Knox City Council, has produced a ‘suite of recommendations’ for the council’s three outer east leisure services teams (Knox, Maroondah and Yarra Ranges) around identifying ‘the ways in which leisure services can support the equal participation, inclusion and respect of women and girls in sport and recreation activities’.

### Media and popular culture

The normalisation and acceptance of violence against women portrayed in media, is a factor contributing to violence against women. The media is therefore an important site for influencing the prevention of violence, and many submissions received by the Commission highlighted their important role. Other submissions suggested that building awareness does not necessarily lead to changed behaviour: ‘The recent increase in media exposure and awareness is making the public more aware but unfortunately awareness is not transferring into a change of perceptions or attitudes’. Mr Joe Calafiore, Chief Executive Officer of the Transport Accident Commission also commented on the media’s ‘important and a critical role in influencing debate, [both] good and bad’.

In 2015, the Victorian Government released *Working with News and Social Media to Prevent Violence Against Women and their Children: A strategic framework for Victoria (2015)*. Developed by Domestic Violence Victoria, the framework makes it clear that accurate news coverage and engaged social media interaction around family violence makes a positive contribution to prevention efforts. The framework emphasises the need for:

- accuracy in reporting
- challenging common myths
- ensuring women’s experiences of violence are accurately and sensitively communicated.

The Commission also heard about the Eliminating Violence Against Women Media Awards, first funded by VicHealth through Domestic Violence Victoria. The EVAs honour journalists for excellence in reporting on violence against women, and include guidance and training for journalists. In 2014, the EVAs became the Our Watch Awards, with Our Watch continuing to coordinate the awards annually. The Commission heard that these awards have made a positive contribution to more responsible journalism, and are a successful incentive-based approach to prevention.
A recent current ‘state of knowledge’ review by ANROWS regarding media representation of violence against women and their children has further contributed to understanding the media’s role and influence around family violence. The review highlights:

- the frequency with which stories about violence against women are sensationalised
- over-reporting on incidents where the perpetrator is female
- the propagation of myths such as ‘stranger danger’
- how the media can reinforce victim blaming by providing excuses for perpetrators.

Another initiative that has received positive attention is the Media Advocacy Project, which ‘empowers women by giving them the tools to tell their stories so that they are heard and understood’. The statewide service Safe Steps Family Violence Response Centre has operated the program over several years. The Commission also heard that a number of women’s health and family violence services run similar programs as part of their media advocacy.

The importance of strong engagement between specialist family violence services and the media, particularly local media, was emphasised to the Commission as a way to ensure that the media makes a positive contribution to preventing violence against women. The Commission also heard positive examples of local Aboriginal community family violence prevention initiatives working in partnership with local media, in particular the Mallee District Aboriginal Service’s Community Safety Project TV advertisements.

**Faith-based contexts**

Faith communities are places where people ‘learn their values, experience community [and] practise their gender relationships’ and are therefore, as much as any other setting, a space to target prevention strategies.

The Commission heard several examples of faith and spiritual leaders responding to and preventing family violence in the community. As noted in Chapter 29, the Anglican Diocese of Melbourne launched Anglicans Helping to Prevent Violence against Women in 2011, which is a primary prevention model that seeks to build ‘a culture of equal and respectful gender relationships in Anglican organisations and local churches’. Another model was the CHALLENGE Family Violence project, an interfaith collaboration involving three local governments (City of Casey, Cardinia Shire Council and City of Greater Dandenong), and Monash Health. A component of this model focuses on influential male community leaders ‘promoting … gender equity and challenging sexism [and] male privilege … within their spheres of influence’.

The Anglican Diocese of Melbourne submission emphasised to the Commission that preventing family violence requires sustained work, commitment and resourcing, as ‘challenging deeply engrained norms … affect how women are viewed and treated, individually and systemically’.

Women’s voices are largely silent in my church except in the choir, Sunday School and women’s groups. Women seeking a voice have to counter the many theological arguments – based on Biblical interpretation – advanced to deny women access to church leadership. What is worse, women like me who strive to break with tradition find themselves in many instances without the support of their own gender in their struggle.

The Commission heard that providing faith leaders with sustained support and training was essential.

Active bystander training, coaching and peer mentoring all assist leaders to develop a deeper understanding of the issues involved in prevention work and builds capacity for change at a structural and cultural level. One-off awareness raising sessions that are not linked to training, are the least effectual in terms of bringing about any significant change to attitudes or behaviour.

Faith-based communities and family violence are discussed further in Chapter 29.
Challenges and opportunities

A consistent message to the Commission in evidence and submissions was the need for an integrated, system-wide approach to primary prevention, which encompasses governance mechanisms, funding and resources, and provides a framework to address all forms of family violence.

The absence of a primary prevention strategy

Many submissions articulated the need for a statewide strategy to prevent all forms of family violence. For example, Darebin City Council submitted that ‘without leadership, a state policy commitment and plan to implement primary prevention actions, our [prevention] efforts are greatly diminished’. In its submission, the State of Victoria recognised that ‘Victoria needs a consistently applied and resourced prevention framework with both universal and targeted programs’.

The Commission heard that while increased awareness of the need for prevention programs has led to innovation, in the absence of such a framework, the standards guiding these programs and broader benefits of these programs are unknown.

The Chief Executive Officer of Domestic Violence Victoria, Ms Fiona McCormack observed:

> What we’ve got now, family violence is like the flavour of the day, and we get every man and his dog claiming “oh yes we do prevention, we do prevention”. We get civic groups saying: “We’re starting a website, we’re doing this for women, or we’re doing this for men”. People who have absolutely no qualifications, expertise, they’re people in the community. If we’re going to prevent violence against women we actually need the community, but without a policy framework that says “in Victoria this is what informs our approach, and this is where we’re heading”, it’s very difficult to hold those organisations to account, or even bring them in under the umbrella, in the fold, which is what is needed.

The Commission heard, for example, that the diversity of respectful relationships programs currently available to schools presents challenges:

> As public awareness of family violence has grown, many community members have become interested in working with young people on the topic, developing their own modules and engaging directly with schools. This process is not guided by any central coordinating body, accreditation process, or minimum standards, and as such the style, content and quality of programs vary considerably. Some programs are not informed by current research, and may promote ideas about gender and violence which are confusing or harmful.

The Commission heard that a statewide prevention policy and corresponding plan should be informed by research on best practice and implemented across key settings, as outlined in the previous section of this chapter, and that it should be supported by strong infrastructure. The infrastructure most commonly identified in the evidence before the Commission was:

- leadership and governance mechanisms at all levels
- funding and resources
- a framework that addresses all forms of family violence
- a trained prevention workforce
- evaluation and monitoring.
The Commission heard that prevention strategies must address gender inequality, as well as being linked to other policy agendas related to family violence:

Prevention of violence against women activity should be conceptualised as having ‘common cause’ with policy and practice agendas to end alcohol abuse, redress socio-economic disadvantage or prevent violence against children, for instance, and should seek to inform and strengthen such agendas (and be informed and strengthened by them).388

In the same vein the World Health Organization reported that there is little coordination between programs and research agendas on child abuse, alcohol and substance misuse, and intimate partner and sexual violence and yet ‘all of these problems regularly affect families, predictably with greater frequency in economically disadvantaged communities where there is often also greater inequality between women and men’.389

Submissions emphasised the importance of ensuring that there was an effective support system to back up prevention strategies:

Primary prevention can often be associated with a surge in service demand and police reporting and referrals, as community awareness about violence against women increases, the topic loses its ‘taboo’ status, and women experiencing violence become more aware of their rights to live free from violence.390

Leadership and governance

Strong government leadership and policy around prevention is urgently required.391

Active engagement and formal support from leaders at all levels of government, non-government organisations, and private sector agencies was cited as essential to ensuring the development and implementation of a statewide prevention strategy. Dr Dyson described the need for ‘authorising environments’ to champion and propel change:

... those formal and informal bodies and significant individuals that provide legitimacy and support for a particular issue or area. These might include governments, community organisations and non-government organisations, religious leaders, senior managers, published research based evidence, high profile advocates, the media and many others that have an influence on public opinion.392

Dr Dyson emphasised that the ‘importance of authorising environments at all levels cannot be overstated as the foundation’ of effective prevention strategies.393 She told the Commission that two key factors for success emerge from evaluations of sexuality and relationships programs in Australia: ‘active leadership from the school principal and high-quality training for teachers’.394

There was a focus in the evidence on the fundamental role of the Victorian Government in creating the conditions for other organisations to drive change.395

Ms Helen Campbell, Chair of the Eastern Metropolitan Regional Family Violence Partnership, told the Commission that clarity from government is required to support services working more effectively together.

We will do everything within our power to build those relationships and partnerships at a regional level. But at the same time we all need the same shared authorising environment which stipulates a very clear and unequivocal statement of what safety looks like and means for every single service sector in the state.396

In terms of regional leadership and planning for prevention, the Commission heard that women’s health services have played a substantial role in building regional partnerships with local government, specialist and community organisations, and most now have published regional prevention plans.397
The Women’s Health Services Leading Regional Action to Prevent Violence Against Women and Children 2013–2015 project was developed by the Women’s Health Association of Victoria (WHAV) and funded by the Department of Health and Human Services. The statewide service Women’s Health Victoria, is the lead agency and coordinator of the project and will play a primary role in ensuring the guidelines are maintained and updated and that the tools and resources are current and evidence based.

The project aims to support a consistent and coordinated approach to primary prevention activities across Victoria, with outcomes including a new online hub, called Equality and Safety for Women, that brings together information, evidence, tools, resources and best practice examples to support planning, implementation and measurement of primary prevention efforts in the Victorian regional context. The online hub was launched in late 2015. A guide has been prepared to assist those preparing regional plans, and the Victorian Government has funded Women’s Health Victoria to appoint a person to support the preparation of these plans.

Women’s Health West Inc. described to the Commission how their regional prevention plan, Preventing Violence Together has contributed to a better coordinated prevention system:

... as a result of their participation in the United project, 100 per cent of Preventing Violence Together partners have integrated primary prevention and/or gender equity into significant organisational and community planning documents (including integrated health promotion plans and municipal public health plans). This demonstrates that the commitment to primary prevention, as well as the vision and leadership for it, are steadily and surely building in our region. Even though it is still early days, regional action plans such as Preventing Violence Together appear to be effective in forging links between partners, harnessing the strengths and capacities of each, and working for a seamless primary prevention system of partner organisations with incredible reach into the wider community.

Women’s Health in the North highlighted in its submission some of the achievements since it launched it regional prevention strategy in 2011, Building a Respectful Community Strategy:

In May 2013, 50 organisations endorsed the vision and goals of the strategy, including seven councils, nine community health services, three PCPs, three hospitals, and 29 community organisations, including family violence services and Victoria Police...

Since the adoption of the regional strategy, three local councils have developed and adopted gender equity strategies. Three have adopted specific family violence policies and strategies. All seven local councils in the NMR [Northern Metropolitan Region] have identified violence against women, gender equity and family violence in key organisational strategies and plans (Community Safety Action Plans and Municipal Public Health Plans (MPHPs)).

The Commission heard that there are currently a range of other regional governance systems in place, such as Crime Prevention Regional Committees, Services Connect, and Children and Youth Partnerships.

The role of local government in coordinating prevention strategies, as well as delivering local services was emphasised to the Commission by the Victorian Government:

Local government plays an important role in delivering local services, including jointly delivering the Maternal and Child Health Service, public education and community development initiatives, supporting local partnerships, influencing a range of local settings via prevention activities and pursuing their own organisational change.
Maribyrnong City Council advocated for more resourcing of local councils relevant to prevention programs and that programs should build on the Preventing Violence Against Women Local Clusters project. As previously discussed, as part of the work of this project, the Victorian Government commissioned the development of a guide, titled *Implementing a Whole-of-Community Approach to Preventing Violence Against Women: Lessons from effective practice, to support whole-of-community approaches.* This guide is targeted to community-based organisations, particularly local government.

The Commission was also told of the need for leadership to sustain community initiatives. Several people referred to ‘backbone’ support, which is specifically recognised in the Go Goldfields project evaluation as a condition for success:

> Creating and managing Collective Impact requires a separate organisation(s) with staff and a specific set of skills to serve as the backbone for the entire initiative and coordinate participating organisations and agencies.

**A peak body**

A number of submissions argued for a well-resourced peak body to coordinate primary prevention action and strategy, and engage with and expand partnerships across the sector. The Commission was told that, in addition:

> State funded coordinator roles similar to the Family Violence Regional Integration Coordinators model (currently funded by the state government) ought to be implemented. These coordinators would act as an advocate and conduit between local work and the peak body.

Ms Patricia Kinnersly, Director, Practice Leadership, Our Watch told the Commission that while VicHealth and the Victorian Government have undertaken this role to some extent and at different points, a lack of an ongoing centralised body to coordinate prevention strategies has meant that resources are used inefficiently:

> So what's happened in that absence of that kind of vision, if you like, housed within a structure that can do evaluation and monitoring and all of those sorts of things is that there has been short-term funding, project funding, which we know is not an effective way to do prevention—prevention is a long-term effort—and so there can be competitiveness in the sector because there’s only a small amount of money and people needing to access that money; the skill base moves around, so it is hard to invest long-term in building the skill base because the funding is short-term.

The role of political leadership in ensuring that effort could be sustained was reinforced to the Commission, with submissions reflecting the need for a prevention strategy to have bipartisan support so that it can withstand changes in government.

> The State government must develop a stand-alone primary prevention action-plan for Victoria that sets out the government’s long-term commitment to preventing violence against women. This plan must be long-term, adequately funded, evidence-based, targeted towards redressing the determinants of violence against women, and represent a whole-of-government commitment to preventing violence against women.
Dedicated prevention funding

Dedicated government funding for prevention programs was a consistent theme in the evidence before the Commission. Various stakeholders told the Commission that the buy-in and collaboration across organisations that are central to cultural change are undermined by funding uncertainty. Women’s health services currently leading regional prevention strategies emphasised this point, noting that the significant time spent on planning for future funding is time not available for implementing programs. Further, uncertainty about whether resources will be available to see a project through can mean that projects are not embraced and therefore have limited impact.

Primary prevention needs to be funded for more than one or two year funding cycles. Everyone talks about evidence based. With primary prevention, the evidence base is thin. The need for evaluation is there. We have a sense that what we do at the primary prevention level works and the evidence base is building. But to convince funders to fund stuff for 5 or 10 years or for ongoing funding ...

The Commission heard from many sources that moving to approaches that worked across settings across local areas (such as progressing school-based and workplace programs concurrently), could not be done within current resources.

The Australian Institute of Criminology report has noted that having sufficient resources to deliver whole-of-community prevention programs is a key principle of good program design. The lack of resources is, however, a commonly cited problem.

A prevention framework that addresses gender inequality

Gender inequality refers to the ‘gender norms, roles, cultural practices, policies and laws, economic factors and institutional practices that collectively contribute to and perpetuate unequal power relations between women and men’.

In the National Plan to Reduce Violence against Women and their Children gender equality is identified as having a profound influence on violence at every level of society. The Victorian Government notes in its submission that:

A key determinant of family violence is gender inequality, yet the government does not have a long-term gender equity framework. Not enough has been done to target gender inequality in a whole of government fashion, addressing gender stereotyping, discriminatory behaviours and leadership disparities between women and men. Nor has there been sufficient investment in gender focused programs.

In December 2015, the Victorian Government commenced consultations on the development of a Victorian gender equality strategy. The terms of reference address a broad range of issues including community attitudes towards women, economic inequality, health and wellbeing, employment pathways and flexibility in workplaces, and inequality amongst diverse groups of women. The consultation phase runs to March 2016.

The Commission also heard of the need for a better understanding of how the link between gender inequality and family violence is ‘operationalised’ through prevention strategies. Further research is being led by Our Watch and ANROWS, and the Commission notes that the new National Framework to Prevent Violence Against Women and their Children provides guidance in this area.
The need for policy makers in all parts of the system to assess how policies may have disproportionately adverse impacts on women’s lives, was another issue raised with the Commission. Some organisations have treated building gender equality as an essential first step in building commitment to prevent violence against women. For example, the City of Whittlesea’s Gender Equity Strategy policy includes:

- applying a gender lens to sporting facilities that are being built and upgraded, to ensure equitable access for women and girls
- partnering with the Planning Institute Australia to host a Women in Growth Areas forum to explore opportunities to enhance gender equity in growth area communities
- scheduling a pay equity audit every four years
- extending parenting programs to weekends and after-hours, and increasing engagement around parenting with men/fathers.

Respectful relationships education has included material on gender equality and gender roles. The schools that the Commission met with gave positive feedback about the response of boys and male staff to this aspect of the curriculum. The curriculum itself identifies the risk of the curriculum being seen to ‘blame the boys’. Testing of the curriculum in fact indicated that boys can see the connection between the construction of gender and violence, and understand that it is ‘not an individual problem but rather a collective and institutional problem’.

More broadly, the Commission heard of the importance of schools creating cultures based on gender equity and respect, and challenging discriminatory behaviours and attitudes.

I do not want my son growing up thinking that to be a man means being rough, dominating, having an entitlement to more based on his gender, superior, etc. Addressing gender effectively in a primary school environment is good for boys as well as girls. I do not believe that there is any particular or widespread opposition to gender equity within the school. However, there appears to be a general lack of understanding about the full importance of promoting a gender equitable environment and how to go about it. This is an area where prevention work could reap significant rewards.

Submissions received by the Commission also highlighted that supporting teachers to reflect on their own internalised assumptions about power and gender increases their confidence and skill in their ability to teach, shape and model appropriate attitudes, so that ‘every teacher is a teacher of culture and gender’.

Schools are becoming vigilant at picking up on the need to recognize and deal with racism and homophobia – so should it be with sexism. Whether it be sexist jokes in the playground – or the staff room, whether it be internet pornography, students sharing sex texts or sex pics, students participating in forums such as Tinder – all need to be challenged, every time. Teachers need to have increased training around family violence to know how to recognize this, how to ask about this and where to refer families in trouble.

Nine leading Victorian organisations recommended building blocks for prevention, with one of these building blocks being an ‘intersectional gender analysis’ applied to all government policy:

- Be informed by an intersectional gender analysis;
- Involve consultation with women’s organisations;
- Include provisions or resources specifically designed to address existing gender inequalities and empower women; and
- Require a gender impact statement, ideally as part of a broader Human Rights Impact Assessment Statement. This would take account of all forms of discrimination against women, to ensure that policies and practices are consistent with the Charter of Human Rights and Responsibilities 2006 and that they [policy makers] continue to work to promote and progress the right to equality and non-discrimination.
The literature on prevention of violence against women also recognises that prevention efforts need to address, alongside gender inequality, social conditions such as socio-economic disadvantage, structural discrimination and exposure to violence.\textsuperscript{434}

In evidence, representatives of Our Watch and VicHealth agreed that if there was a state entity dedicated to primary prevention of family violence it would need to deal with preventing all forms of family violence, as well as violence against women, while maintaining a focus on the gendered nature of violence against women.\textsuperscript{435}

**Workforce development**

There is a diverse approach to developing and implementing prevention strategies in Victoria. Concerns were expressed to the Commission about inconsistent practices within the prevention workforce.

The Commission heard that an understanding of health promotion theory and practice is important to effectively developing and delivering prevention programs.

Many are skilled practitioners who use a feminist framework based on understandings about gender and power. For others, the public health discourses that underpin many programmes may not be well understood or well applied. Without a critical understanding of the application of health promotion theory, programmes are unlikely to be effective. Health promotion is a discipline which should be implemented by practitioners with a sound understanding of the practice and its ramifications (Whitelaw et al., 2001).\textsuperscript{436}

As part of its review in developing national standards for the primary prevention of sexual assault, the National Association of Services against Sexual Violence reported that there is a lack of workforce development programs for people working in primary prevention,\textsuperscript{437} and that programs have historically been developed by professionals working with victims of violence, which means that ‘there may be an assumption these workers do not require further training and skills to deliver prevention education’\textsuperscript{438}

The primary focus of prevention work is behaviour change. People delivering prevention programs need a range of skills in behavioural science, and education, as well as an understanding of family violence.\textsuperscript{439} As NASASV states in its report, ‘doing primary prevention in the area of sexual assault is a practice far more sophisticated than merely raising people’s awareness’.\textsuperscript{440}

Pre-service training targeting early childhood educators, teachers and health promotion workers was highlighted as a priority and a current gap in workforce development:

While some in-service training is currently provided for prevention practitioners, no specific pre-service training is available to prepare people for the work, which is complex and challenging and requires specific skills, resources, tenacity and a belief that change is possible.\textsuperscript{441}

The Commission heard that a well-equipped prevention workforce has ‘two arms’—those working outside and those working within organisations:

First are the primary prevention experts who can work alongside workplaces and sports clubs to provide them with technical advice. Second are the in-house experts, the staff inside the workplaces and sports clubs, who can be provided with training so that they integrate prevention to their existing skillset in, for example, human resource management, sports administration, workplace wellbeing, or community development. Further and coordinated development of these two arms of the prevention workforce would enable greater traction for prevention across sectors and enhance outcomes in relation to equal and respectful relationships.\textsuperscript{442}
In addition to workers having expertise in prevention, the Commission heard that they must have the capacity to respond to violence, and to be effectively linked to response services. This was particularly raised in the context of prevention work with children and young people:

No setting in which prevention activity is undertaken should be presumed to be free of existing violence. Nor should the likelihood be overlooked that some children and young people who are participants in prevention programs and activities are already experiencing violence. For this reason, while a clear distinction needs to be drawn between the prevention of violence and early intervention or response efforts, any prevention activities that involve working with children and young people should seek to link with and support early intervention initiatives aimed at children experiencing (or who have experienced) violence (and create referral pathways to link individual children to those programs and services where appropriate).443

The Youth Affairs Council of Victoria provided an example of a model for enhancing coordination as the Partners in Prevention, or PiP, network. Established in 2007, the network is hosted by Domestic Violence Resource Centre Victoria and was set up to augment the capacity of various sectors (among them health, youth and education) who work with young people in the area of primary prevention.444 The network provides online resources and operates as a community of practice for respectful relationships educators.445 The Youth Affairs Council of Victoria submitted that models such as PiP could be extended to other areas—particularly to support youth services operating in rural communities.446

The Commission notes that VicHealth has previously developed workforce modules, including evaluated short courses and leaders’ courses, specific to preventing violence against women. The Commission understands that the national foundation, Our Watch, is considering its national workforce development and training role in this area.

**Evaluation and monitoring**

It was reiterated to the Commission that there is a need for ongoing applied research and evaluation to keep workforces up to date on how to develop and deliver prevention programs.447

The Commission heard that in an area like family violence, success is hard to measure and it is difficult to be confident about what will work.448 Measuring the outcomes of prevention initiatives and programs is conceptually and practically difficult, and requires an understanding of the complex factors that contribute to family violence, as well as long-term investment. In a report prepared for VicHealth on preventing violence against women, Dr Wei Leng Kwok noted that:

As with other health and social problems, the challenge of addressing violence against women is conceptualized as a long term endeavor: reducing or ending violence against women is unlikely to be seen in the life of a project or program, suggesting that the effects of any primary prevention initiative can only ever contribute incrementally to change on the underlying determinants and that this change in turn contributes eventually to ameliorating the problem.449

Mr Hearne told the Commission that people involved in place-based prevention activity recognise that the stakes are high and are aware of the importance of evaluating what has happened elsewhere, and how new initiatives might be monitored, assessed and improved as information about effectiveness emerges:

... you would be looking at considering what the data might be telling you with regard to the need in a certain community or within a given population, but also you rely on your local understanding of the community in which you have relationships and a general understanding of what the indicators might be for greater risk for communities such as the diversity, the level of employment or unemployment or underemployment in the community, what the data says around family violence outcomes through justice indicators.450
While there is research available on the outcomes of prevention programs and activity, it has primarily focused on individual and organisational change (given the short-term nature of many prevention programs), rather than on social, structural or cultural change. Given this context, the majority of current evaluation has focused on measuring changes in individual attitudes or beliefs around gender and violence, changes in organisational practices, and increases in individual skills to promote non-violent social norms (such as increased bystander activity). Our Watch has argued that while these evaluations have ‘sometimes been perceived as ‘weaker’ than those measuring reduced future levels of violence’, changes against the factors known to contribute to violence could be assumed to affect future levels of such violence. Individual initiatives delivered alongside other programs (such as a school based program delivered concurrently with a local media campaign or community initiative) may have greater impact.

The need for long-term evaluation was made by Mr Shaun Leane, Member for Eastern Metropolitan Region, who emphasised the need for strengthened regional effort:

One area where evidence is missing relates to the impacts of undertaking a range of mutually reinforcing activities at a population level. Well evaluated regional action plans have the capacity to add to this gap in evidence.

The Commission heard that funding decisions are currently premised on a ‘confidence’ that individual-level outcomes will lead in the longer-term to population-level outcomes.

The World Health Organization emphasised however, that despite the challenges with the current evidence base, action cannot wait:

Although pressing, the need for evidence and further research in all these areas in no way precludes taking action now to prevent both intimate partner violence and sexual violence. Those programmes that have evidence supporting their effectiveness should be implemented and, where necessary, adapted. Those that have shown promise or appear to have potential can also play an immediate role – provided strenuous efforts are made to incorporate at the outset rigorous outcome evaluations. It is only by taking action and generating evidence that intimate partner and sexual violence will be prevented and the field of evidence-based primary prevention of such violence will successfully mature.

The Commission heard that alongside the challenges of resourcing, the prevention workforce has limited guidance about how to evaluate primary prevention initiatives. The Commission notes that this area has been a significant focus of VicHealth's work, and that a number of resources have been developed.

The Commission was told of the value of building communities of practice to pool and develop evidence-based practice resources:

... one of the things that VicHealth has given us the opportunity to do with the AFL projects and with the one in the YMCA is a much more in-depth kind of evaluation, which is called constructivist evaluation, where the evaluation isn’t something that comes in and judges the value of change at the end but works alongside the project giving it continuous feedback and allowing for continuous improvement to occur.

The Commission also notes there are opportunities for greater collaboration across national expert research bodies, such as Our Watch, ANROWS, the Australian Institute of Family Studies, and the Australian Centre for Child Protection, so that evaluations have a broader scope and use best-practice methodologies.
The way forward

Preventing family violence requires cultural change. There are no quick fixes—a long-term perspective and sustained effort is needed. Successful population-level prevention strategies in Australia, such as anti-smoking and drink-driving campaigns, are a good source of information about what it takes to shift social practices and norms. Preventing family violence is an even bigger task—it is one of the most complex problems confronting the Victorian Government and the Victorian community.

The Victorian Government must make preventing all forms of family violence a priority. This will require political leadership. As recommended by the Commission in Chapter 38, the government should develop a Statewide Family Violence Action Plan. A discrete and prominent part of this plan needs to address primary prevention of family violence. There should be a Victorian body either within or outside government responsible for championing, driving and monitoring the implementation of prevention strategies under the plan. This function must be well resourced. As submitted by Women’s Health West Inc:

Primary prevention is different from the response system because the actions and settings required to prevent violence before it occurs are different from those required to respond. Prevention is everyone’s business and requires a distinct system comprising cross-government, multi-sector, community and business partnerships; and a distinct workforce and practitioner skill set. It also needs to be funded and resourced distinctly from the already-overloaded response system, not as ‘either/or’ but as ‘both/and’.

To date, the discussion around prevention has been focused largely on preventing intimate partner violence against women. Preventing intimate partner violence must remain central to a prevention strategy, as it remains the most prevalent form of family violence. Addressing gender inequality, and changing social norms that perpetuate an acceptance of violence will be of significant benefit to the whole community. The co-occurrence of family violence, child abuse and neglect means we must target effort towards children and young people, and in the settings that have greatest influence on their development—such as schools and home visitation programs.

Effort should also be directed to increasing our understanding about how best to prevent specific forms of family violence, such as the abuse of children, older people, parents and siblings. Prevention programs also need to be tailored to, and developed in partnership with, communities who have experienced sustained discrimination, and communities from different cultures.

Promising prevention programs, including respectful relationships education in schools, should be enhanced and made a mandatory part of the school curriculum across all year levels, with the resources necessary for these to have their full effect provided. Prevention efforts in workplaces should also be given high priority.

Engaging communities in the task of preventing family violence is essential. Whether communities are defined by a geographic place, or a population group with a shared ethos or interests, the culture they establish can have a powerful influence over the behaviour of individuals. Cultural change cannot happen without enabling community-led prevention action.

There are a number of recommendations relevant to prevention that are discussed in other chapters. These include the need for statewide and regional governance (Chapter 38), development of the prevention workforce (Chapter 40), and the need to prioritise prevention efforts in workplaces (Chapter 37).
Develop and implement a prevention action plan

As recommended in Chapter 38 of this report, an independent Family Violence Agency will be established to monitor the implementation of the Royal Commission’s recommendations. One of the Commission’s recommendations is that the Victorian Government develop a Statewide Family Violence Action Plan for Victoria. This plan will include both prevention and response strategies and actions. Prevention strategies and actions must be a discrete and prominent part of this plan.

The overarching goals of the plan should be the prevention of family violence in all its forms; addressing the structures, norms and practices that are driving and contributing to all forms of family violence; and building community awareness. All prevention action must be underpinned by a commitment to keep victims safe and hold perpetrators accountable.

Victoria has been investing in the prevention of violence against women and their children for a number of years, and there is a strong base of practice and understanding in the community sector and in government on which to build. A key aim of the National Plan to Reduce Violence Against Women and their Children 2010–2022 is to build mechanisms to share evaluation and learning about good practice across jurisdictions. The national plan should inform Victoria’s statewide plan, and in turn, Victoria’s statewide plan will form part of its commitment to the national plan. The recent release of the national framework by Our Watch, and research undertaken by ANROWS and VicHealth, will be of value to the Victorian Government when considering prevention planning. This work focuses on preventing violence against women and their children.

Family violence, sexual assault and women’s health services have been key in developing and supporting the translation of prevention models into mainstream sectors. Drawing on their expertise will be necessary to developing effective prevention programs, as well as bringing the voices and experience of women and children into prevention practice.

The prevention aspect of the Statewide Family Violence Action Plan should last for at least 10 years so that prevention approaches can be adapted in response to evaluation outcomes. The plan should feature a carefully phased approach. Pre-conditions for implementing effective prevention strategies include assessment of community or organisational readiness, putting the right support services in place, building the right workforce, and training people in how to respond to disclosures.

To date, the Victorian Government has funded piecemeal initiatives and pilots aimed at preventing violence against women and children. Dedicated prevention funding has primarily been time-limited and targeted to one-off projects. Projects that demonstrate effectiveness need to be resourced for the longer term. Future funding arrangements for prevention should be sustainable, give certainty to service providers to adequately plan and implement strategies, and allocate for a duration that recognises that prevention activities have a longer time frame than service delivery. The Commission notes the approach of VicHealth and the Department of Justice and Regulation in investing in prevention programs for the longer-term, and for their commitment to evaluation.

The Commission notes the Victorian Government’s commitment to developing a gender equality strategy. The prevention aspect of the statewide plan should be informed by, and align with, that strategy.

The plan should reflect the following principles and make provision for their implementation.

Prevention requires a multi-strategy, multi-setting approach

A range of prevention approaches and strategies is required. These will include direct participation programs, organisational development, and building community engagement and mobilisation. Social marketing and communications campaigns are important strategies, but they need to be multi-phased and not undertaken as single initiatives. The Commission notes that community awareness-building campaigns about violence against women and children come within the remit of Our Watch, which has a national reach. Victorian prevention activities need to be aligned with the work done by Our Watch.
The proposed prevention action plan should put in place mutually reinforcing prevention initiatives across multiple settings, such as schools, early childhood services, local government, sports clubs, workplaces and the media. Other settings, such as tertiary institutions, should be assessed for intervention given the evidence of their potential. Online and digital environments should also be used.

Priority should be given to interventions targeting children and young people, through respectful relationships education in early childhood and care settings, primary and secondary schools and parenting services. The Commission makes a number of recommendations below about mandating respectful relationships education in schools.

Employers have an opportunity to implement best-practice responses to victims of family violence and promote gender equity in their own workplace. Many employers are also recognising that attitudes towards women in the workplace have implications for how employees make decisions in their service or business delivery and interact with the community.

The Victorian Government is in a position to drive change across public sector workplaces.

The Victorian Government’s role as an employer extends beyond providing employees with family violence leave and associated supports. The government and its agencies can also institute policies and programs in public sector workplaces that take a broader view of responding to and preventing family violence, by building respectful and gender equitable cultures.

The work that has been commissioned through Our Watch by the Victorian Government, the Workplace Equality and Respect Project, will provide government with advice about program models that it can draw from. In addition, as Victoria Police implements the recommendations from the Victorian Equal Opportunity and Human Rights Commission review, this will have broader application to other public sector workplaces, in preventing violence–supportive attitudes that can contribute to the occurrence of family violence.

Detailed discussion about this area and related recommendations are included in Chapter 37.

**Prevention must engage communities**

The Commission heard that government-initiated prevention campaigns can ‘wash over’ communities. Prevention programs targeted to communities need to be designed in consultation with communities, and the Victorian Government should provide support to community-led initiatives that have been shown to work.

The Commission heard many examples of how the altruism and effort of communities has been harnessed around the issue of family violence to great effect. The approaches adopted were diverse, but several principles that emerge are likely to be relevant to future endeavours in mobilising community effort to prevent family violence:

- A broad cross-section of the community must be involved, not just government agencies and funded service providers. Leaders in the economic, social and civic spheres of the community, as well as those with the lived experience of family violence, need to be engaged.

- The community must determine the initiatives that it is going to work on and how it is going to pursue them. They cannot be imposed upon the community. The priorities of different parts of the community may be quite different.

- Government and funded service providers can act as enablers by providing information and advice, and at times some funds, but they cannot control or run community initiatives. These must be led by the community.

- Wherever possible, existing networks and social and administrative infrastructure should be used rather than attempting to establish something new.

- While specific initiatives may change from time to time a long-term commitment is required.

- The identification of measurable outcomes underpinned by data collection that enables the measuring progress can assist in keeping the community engaged and in engendering confidence that change is possible.
Prevention work must be adequately resourced to support this effort.

A ‘backbone’ organisation can be valuable in providing of administrative support and ensuring there is continuous communication with all involved.

**Prevention should reflect diverse communities**

Given that population-level strategies will not reach all, there will need to be targeted investment in and co-design of prevention strategies tailored to different communities, including Aboriginal and Torres Strait Islander communities, culturally and linguistically diverse communities, people with disabilities, and LGBTI communities.

There is increasing evidence that context is important and that more research is required on how successful programs can be transferred from one setting to others. This is particularly the case for whole-of-population strategies that may not translate for all groups.460

Elsewhere in this report, the Commission recommends that prevention programs and activities reflect the diversity of the community (see Volume V).

**Effective prevention requires a dedicated specialist workforce**

The Commission notes that there is currently limited investment in specialist expertise for delivering prevention programs. Limited workforce training programs are available and there is a lack of accredited training. Our Watch is committed to development in this area as part of the transfer of resources from VicHealth, but the nature of its investment is currently unclear. A dedicated workforce development strategy that is part of the industry plan (see Chapter 40) will be required to deliver the Statewide Family Violence Action Plan. An oversight mechanism will also be required to coordinate and maintain consistent prevention practice (see below).

**Prevention programs need to be monitored and evaluated**

A performance monitoring and evaluation framework is required. In the short term this could include appropriate indicators to measure changes in attitudes and social norms relating to family violence. In the longer term, however, we should expect to be able to measure whether primary prevention activities result in a reduction in the prevalence of family violence. Work with the Australian Bureau of Statistics will be required to build on the National Community Attitudes towards Violence Against Women Survey so that Victoria can run local surveys and collect data at regional area levels to support local level planning and monitoring.

There is existing evidence about what works to prevent violence against women. The Victorian Government should continue to build on this evidence base, by continuing to support the work of Our Watch and ANROWS. Working with other relevant research bodies will also be necessary to increase the evidence, and to develop effective primary prevention strategies, in relation to forms of family violence other than intimate partner violence.

**Prevention should inform and be informed by other policy**

The Victorian Government must work effectively with sector partners and relevant academic institutions to build the evidence base in the area of intimate partner violence and other forms of family violence. Strengthened partnerships between those working on the prevention of family violence and those working in other areas of social policy—such as alcohol and drug misuse, mental health and child protection—will consolidate shared effort and resources.

For example, the Commission heard that Victoria’s **Vulnerable Children—Our Shared Responsibility Strategy (2013–22)**, had three goals, one of which was to ‘prevent abuse and neglect’.461

At a national level, greater linkage between relevant policies, such as the **National Plan to Reduce Violence Against Women and their Children**, and the **National Framework for Protecting Australia’s Children 2009–2020** needs to be further developed.
**Recommendation 187**

The Victorian Government ensure that the Commission’s recommended Statewide Family Violence Action Plan includes a primary prevention strategy [within 12 months] that should:

- be implemented through a series of three-year action cycles
- refer to actions to be taken and be accompanied by performance measures
- guide and be guided by the Victorian Government’s Gender Equality Strategy
- be supported by dedicated funding for family violence primary prevention.

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**Overseeing prevention activities**

There is a plethora of programs, some positive innovation, and strong sector momentum to continue the work in prevention. However this work has been inconsistently funded and supported, and programs often operate on an ad hoc basis. The Commission has heard that it is critical that prevention activities be funded consistently in the future.

Implementing the family violence prevention plan will require a process to oversee and coordinate prevention activities within and across government, local government, community agencies and the broader community.

Because VicHealth has now reduced its involvement in this area, Our Watch has assumed some aspects of VicHealth’s previous role in prevention. Established and located in Victoria, Our Watch provides technical expertise in prevention to Victorian government and non-government services, undertaking research and testing prevention programs across a range of settings. Our Watch is also responds to calls from community organisations for advice on prevention as the momentum and interest in this area has grown.

However, Our Watch is a national organisation and will be unable to provide the level of support to Victorian agencies and communities that is required to drive prevention practice.

There is a need for a mechanism at state level to:

- oversee and work with organisations already involved in prevention activities
- undertake evidence-based program design
- provide technical advice and expertise to organisations engaged in prevention
- build partnerships with governments, non-government organisations, the private sector and community
- contribute to the development of the prevention workforce.

These functions are outlined in Table 36.3 below.
Table 36.3 Proposed prevention oversight functions

<table>
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<th>Function</th>
<th>Example</th>
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| 1. Program design, technical advice and expertise | ▶ Statewide coordination role in monitoring implementation of prevention practice across different settings  
▶ Provides support to regional governance structures and arrangements  
▶ Provides technical advice and expertise to government, community organisations |
| 2. Build partnerships with governments, non-government organisations, private sector and community | ▶ Works with peak bodies in Victoria, such as Municipal Association of Victoria, the Victorian Employers’ Chamber of Commerce and Industry, Worksafe, state sporting bodies to support their prevention efforts  
▶ Builds partnerships with sectors new to prevention, such as health, arts, media  
▶ Works with business and corporate sector |
| 3. Workforce development* | ▶ Provides technical advice to inform the industry plan  
▶ Coordinates training delivery through registered training organisations  
▶ Manages communities of practice, facilitates workshops, conferences to build and share knowledge  
▶ In conjunction with Our Watch, disseminates up-to-date practice guidance, tools and resources |
| 4. Build on the evidence base | ▶ Funds and supports research/innovation where gaps identified, but is not a grant making body  
▶ Seeks philanthropic funding to support research/innovation  
▶ Works in partnership with Our Watch, ANROWS, the Australian Institute of Family Studies and other relevant research agencies in family violence prevention. |

* Note that the agency will not directly provide workforce development and training, and will work through registered training organisations.

The Commission considered a number of ways that prevention activities could be overseen and supported. One option would be to locate these functions within government, for example, within the proposed family violence unit in the Department of Premier and Cabinet. This would align prevention with other aspects of family violence planning and facilitate interaction with other departments when they implement family violence prevention and workplace initiatives.

A second option would be to place the prevention function within the independent Family Violence Agency. The proposed independent Family Violence Agency will be a statutory body that will oversee the implementation of the Royal Commission’s recommendations and have power to undertake research and provide expert policy advice. This would create a coherent link between oversight of family prevention and support activities. On the other hand, the Commission is concerned that engaging in prevention could detract from the independent Family Violence Agency’s broader role. In addition, the location of the prevention function within the Family Violence Agency could create the perception of a conflict of interest between its role in monitoring the performance of the system and its own prevention activities.

A third option would be to create a stand-alone entity that is independent from government and separate from the Family Violence Agency.

The Commission looked at national agencies that were established specifically to drive prevention. The Australian National Health Prevention Agency was established in 2011 as a statutory entity through the Council of Australian Governments, with the agreement of all governments. It was responsible for providing advice to governments on the development of preventive health policy, managing a research fund and evaluating existing programs, and publishing biennial reports on the state of preventive health in Australia. It was also responsible for developing national guidelines and standards, conducting educational and community awareness campaigns, and establishing partnerships with governments, health and industry sectors. It was abolished in 2014.462

The Commission heard evidence about the Transport Accident Commission, a government-owned entity whose role is to promote road safety, improve the system and provide support to victims.463 The TAC spends ‘about $160 million of its budget on prevention work’.464
The Victorian Equal Opportunity and Human Rights Commission is a statutory organisation that monitors and reports the implementation of relevant legislation to eliminate inequality and discrimination. VEOHRC’s role includes responding to individuals experiencing discrimination, community engagement and awareness raising.

The Commission has not expressed a view about which of these options should be adopted. Each has advantages and disadvantages. Whichever option is adopted, it will be important for the prevention mechanism to be supported by:

- a government commitment to funding for prevention as part of the delivery of the Statewide Family Violence Action Plan, with continued government leadership
- adequate funding for response services, as an increased investment and focus on prevention activity will increase disclosure
- effective regional governance and coordination for local and regional prevention planning that can act as a conduit for the state agency
- continued funding for the national foundation, Our Watch and for the national research body driving research, ANROWS
- adequate investment in the prevention workforce, and training for those sectors who are prioritised, such as teachers. This will need to be supported by the industry plan, and appropriate registered training organisations with the capacity to deliver accredited training.

Whichever option is adopted, it will be necessary for the Victorian Government to consider how the mechanism collaborates with Our Watch, to avoid the risk of duplication and confusion among Victorian stakeholders.

**Recommendation 188**

The Victorian Government resource an initiative (either inside or outside government) [within 18 months] to:

- oversee prevention of family violence activities in Victoria
- provide policy and technical advice to policy makers—including government—on primary prevention
- provide to organisations technical advice and expertise on building primary prevention in their organisations and within communities
- coordinate research that builds evidence around the primary prevention of all forms of family violence
- ensure that accredited workforce development training in primary prevention is available through registered training organisations.

This Victorian initiative should be undertaken in close collaboration with Our Watch, ANROWS (Australia’s National Organisation for Women’s Safety) and other relevant bodies.
Respectful Relationships Education in schools

One of the most consistent messages the Commission heard was about the opportunity that the education of children and young people offers to prevent family violence in the future. In all of our community consultations with victims of family violence, specific communities and people who work in family violence-related fields, across metropolitan Melbourne and regional Victoria, people emphasised the value of educating children and young people about respectful and healthy relationships.

Respectful relationships education must be a fundamental component of Victoria’s family violence prevention strategy. The objectives of RRE should be to educate our children to have greater respect for themselves and for one another, and to support more cohesive families and communities.

The Commission acknowledges the Victorian Government’s planned expansion of respectful relationships education curriculum in schools from prep to year 10. The need to expand into primary schools was an area highlighted as a gap in a number of submissions.465

However, the Commission is concerned that the Victorian Government’s current approach to the implementation of respectful relationships education is inadequate. It does not appear to meet the whole-of-school test that the best evidence indicates is necessary for the program to be effective and for unintended harm to be avoided. A whole-of-school approach requires not only the introduction of new curriculum but needs to be accompanied by a broad range of school policies, training and professional learning for teachers beyond those actually delivering the curriculum, the establishment of protocols with support agencies beyond Child Protection, and the engagement of the parent community in preventing family violence.

The Commission is particularly concerned that a failure to incorporate these aspects creates the risk that harm already caused by family violence will be exacerbated if the curriculum triggers disclosures of family violence in schools without appropriate policies and protocols in place, without teachers having the appropriate knowledge and skills, and without parents understanding respectful relationships education.

In addition, the design of appropriate respectful relationships education curriculum and associated resources for all year levels will be required, building on the Building Respectful Relationships: Stepping Out Against Gender-based Violence curriculum developed for years 8 to 10. The implementation of respectful relationships education should occur in concert with, not in competition with, other programs that schools are implementing to build the health, wellbeing and resilience of children and young people, such as programs addressing bullying, homophobia and transphobia, and sexual and reproductive health.

The Commission acknowledges that the implementation of respectful relationships education in a way that reflects whole-of-school best practice, will entail major reforms in Victorian schools and will necessitate significant resourcing throughout an implementation period of several years. This is a small price to pay for the very real prospect that these programs will support future generations to adopt attitudes and behaviours that will leave a legacy of significant reductions in all forms of family violence.

Given the complexity of this change, a detailed and staged approach to implementation will be required. The Commission welcomes the Victorian Government’s commitment to expand respectful relationships education in 2016, however given the planning and preparation that will be required to ensure readiness within individual schools, we suggest that a staged approach should be adopted.
The Commission expects that by the end of 2016, a learning and development strategy for the education workforce will be implemented to support the statewide rollout of the *Building Respectful Relationships: Stepping Out Against Gender-based Violence* curriculum to all secondary schools in years 8 and 9. Concurrently, the department’s module of respectful relationships education for year 10 will have been tested and evaluated. By the end of 2018, new curriculum, teacher training and associated resources for prep to year seven should be developed. These will have been piloted and tested in primary and secondary schools, building on the lessons from the Our Watch evaluation. In addition, the Commission considers that respectful relationships education should be developed for years 11 and 12.

The Commission notes that the resources and guidelines that Our Watch have developed will be important to build on, given that the Commission notes the varying understandings about what constitutes respectful relationships education in a school context, and as a relatively new field, there is not yet a standard model in the Australian context that can guide policy makers and education departments.466

The Commission notes from the Our Watch evaluation the strong message that teaching and learning resources and curriculum are often used as the ‘way in’ to implementing a whole-of-school approach, but they are just one part of the larger strategy that is required. We also heard that leadership from senior executives in the Department of Education and Training was essential, as was expertise located in regional offices dedicated to support schools.

In addition, one of the most critical elements was the need for greater guidance, training and support for school staff to manage the increase in disclosures from students and staff. This will be a priority element of the rollout of the respectful relationships program.

The Commission notes that all three education sectors—government, independent and Catholic—now have an enabling environment for respectful relationships education through the national and Victorian curriculums. Consistent with the statewide implementation for government schools, the Commission’s view is that Catholic, and independent schools should be supported to mirror this commitment, and we note that the Victorian Government has indicated that ‘support for Catholic and independent sector schools will be arranged with the respective sectoral authorities’ for implementation of the new Victorian curriculum under the education state reforms.467

**Recommendation 189**

The Victorian Government mandate the introduction of respectful relationships education into every government school in Victoria from prep to year 12. Implementation should be staged to ensure school readiness and to allow for ongoing evaluation and adaptation. It should be delivered through a whole-of-school approach and be consistent with best practice, building on the evaluation of the model being tested by the Department of Education and Training through Our Watch [within five years].
Endnotes

1 Transcript of Lay, 15 October 2015, 3705 [14]–[22].
2 Our Watch—01, Submission 922, 6.
5 Our Watch, Australia’s National Research Organisation for Women's Safety and Victorian Health Promotion Foundation, above n 4.
8 Statement of Miller, 14 July 2015, 6 [19] (citations omitted).
11 Transcript of Bromfield, 12 October 2015, 3358 [11]–[15].
13 Our Watch, Australia’s National Research Organisation for Women’s Safety and Victorian Health Promotion Foundation, above n 3, 15.
14 Ibid 16.
15 Equal Opportunity Act 2010 (Vic) s 3(6)); ibid 16–17.
16 Our Watch, Australia’s National Research Organisation for Women’s Safety and Victorian Health Promotion Foundation, above n 3, 55.
17 Ibid.
19 UN Women, above n 3, 26; Our Watch, Australia’s National Research Organisation for Women’s Safety and Victorian Health Promotion Foundation, above n 3, 40.
23 UN Women, above n 3, 26.
25 Our Watch, Australia’s National Research Organisation for Women’s Safety and Victorian Health Promotion Foundation, above n 4, 21, 55.
27 Victorian Health Promotion Foundation, above n 4, 8, 36–9.
28 Our Watch, Australia’s National Research Organisation for Women’s Safety and Victorian Health Promotion Foundation, above n 3, 31.
29 For example, violence against women is more common in communities in which violence-supportive attitudes are prevalent: Victorian Health Promotion Foundation, ‘Australians’ Attitudes to Violence Against Women: Findings from the 2013 National Community Attitudes Towards Violence Against Women Survey’ (September 2014) 37.
30 Our Watch, Australia’s National Research Organisation for Women’s Safety and Victorian Health Promotion Foundation, above n 3, 32.
32 See, eg, Jenny Mouzos and Toni Makki, ‘Women’s Experiences of Male Violence: Findings from the Australian Component of the International Violence Against Women Survey (IVAWS)’ (Research and Public Policy Series No 56, Australian Institute of Criminology (Chi), 2004) 83, 112.
33 Department of Health and Human Services, Gippsland Region: Changing Family Futures Initiative’ (15 May 2013), 7, produced by the State of Victoria in response to the Commission's Notice to Produce dated 5 June 2015.
34 Victorian Health Promotion Foundation, above n 29, 9, 41–2, 50, 203, 226.
35 Transcript of Bromfield, 12 October 2015, 3358 [9]–[15].
36 Ibid 3356 [1]–[5].
37 Ibid 3359 [13]–[21].
Department of Premier and Cabinet, ‘Implementing a Whole-of-Community Approach to Preventing Violence Against Women—Lessons from Effective Practice’ (Australian Institute of Criminology (Cth), 2015), 8–9, produced by the State of Victoria in response to the Commission’s Notice to Produce dated 5 June 2015.

See, eg, Transcript of Callister, 16 October 2015, 3928 [16]–3929 [2].

Statement of Batty, 6 August 2015, 3 [10].

Michael Roguski, ‘“It’s Not OK” Campaign Community Evaluation Project’ (prepared for the Ministry of Social Development (NZ), 18 March 2015) 27.


Victorian Health Promotion Foundation, above n 29, 37–41.

Ibid 53. Webster et al, above n 103, 128.

Our Watch, Australia’s National Research Organisation for Women’s Safety and Victorian Health Promotion Foundation, above n 4, 59.


Our Watch, Australia’s National Research Organisation for Women’s Safety and Victorian Health Promotion Foundation, above n 4, 45; See also Roguski, above n 102, 45, 54.

Roguski, above n 102, 27.


Berry Street, Submission 834, 32.

Ibid.

Our Watch, Australia’s National Research Organisation for Women’s Safety and Victorian Health Promotion Foundation, above n 4, 47.

Dr Michael Saltner, ‘“Preventing Violence Before it Occurs” Framework Redevelopment, Stage 1: Literature Review’ (University of Western Sydney, 2015) 43.

Transcript of Callister, 16 October 2015, 3928 [16]–30.

Statement of Flood, 9 July 2015, 4 [16].

Webster et al, above n 103, 5.

Susan Rennie, Submission 248, 4.

Australian Bureau of Statistics, above n 6, Table 6.

Statement of Flood, 9 July 2015, 2 [12]. See, eg, Michael Flood, ‘Where Men Stand: Men’s Roles in Ending Violence Against Women’ (Ribbon Prevention Research Series, No 2, 2010) 32 citing a recent international review by the World Health Organization, which documents 57 interventions with evaluations. The study found that those programs which sought to transform gender roles and promote more gender-equitable relationships were the most effective of all types of programs reviewed. Gary Barker, Christine Ricardo and Marcos Nascimento ‘Engaging Men and Boys in Changing Gender-Based Inequality in Health: Evidence from Programme Interventions’ (World Health Organization, 2007). See also Our Watch, Australia’s National Research Organisation for Women’s Safety and Victorian Health Promotion Foundation, above n 4, 66, which identifies effective or promising practices as including those which deliver initiatives that are gender transformative, as compared to those that are gender blind.

Statement of Flood, 9 July 2015, 4 [15].

Webster et al, above n 103, 12.

This view has also been advanced by Our Watch, Australia’s National Research Organisation for Women’s Safety and Victorian Health Promotion Foundation, above n 4, 12, 32.

See, eg, Webster et al, above n 103, 12.

Statement of Flood, 9 July 2015, 2 [9].

White Ribbon Australia. Submission 880, 2.

Koori Caucus, Submission 946, 17.


Ibid 4.

Women’s Health in the South East Inc, Submission 370, 9.


Ibid 7–8.


Ibid 68.

Ibid.

Statement of Flood, 9 July 2015, 6 [25].

Department of Justice and Regulation, above n 60, 17.

Ibid 18.


Ibid 43.

Our Watch, Australia’s National Research Organisation for Women’s Safety and Victorian Health Promotion Foundation, above n 3, 70–1.


Shaun Leane—Member for Eastern Metropolitan Region, Submission 139, 3.

Community consultation, Melbourne 1, 14 May 2015.

Department of Justice and Regulation, above n 60, 1, 3, 13.
269. Transcript of Callister, 10 August 2015, 2448 [13]–[14].

257. Transcript of Flood, 10 August 2015, 2437 [7]–[9].
259. Transcript of Flood, 10 August 2015, 2436 [24]–[31].
260. Statement of Callister, 4 August 2015, 30 [132].
261. Supplementary Statement of Callister, 13 October 2015, 1 [3].
262. Ibid 2 [5]–[6].
264. Supplementary Statement of Callister, 13 October 2015, 8 [45].
265. Ibid 9 [48].
266. Statement of Callister, 4 August 2015, 28 [125].
267. Supplementary Statement of Callister, 13 October 2015, 12 [57].
268. Ibid.
269. Department of Education and Training, above n 247, 9, 12, 14.
271. Statement of Callister, 4 August 2015, 30 [132].
272. Transcript of Flood, 10 August 2015, 2436 [24]–[31].
274. Transcript of Flood, 10 August 2015, 2437 [7]–[9].
277. Renee Imbesi, ‘CASA House Sexual Assault Prevention Program for Secondary Schools (SAPPSS) Report’ (Royal Women’s Hospital, Centre Against Sexual Assault, 2008) 10; See also Flood, Fergus and Heenan, above n 210, 29.
279. Women’s Health West Inc, Submission 239, 28.
281. Ibid.
283. White Ribbon Australia, Submission 880, 7.
285. Transcript of Callister, 16 October 2015, 3931 [12]–[22].
286. Supplementary Statement of Callister, 13 October 2015, 1 [3].
287. Ibid 2 [5]–[6].
289. Supplementary Statement of Callister, 13 October 2015, 8 [45].
290. Ibid 9 [48].
291. Statement of Callister, 4 August 2015, 28 [125].
292. Supplementary Statement of Callister, 13 October 2015, 12 [57].
293. Ibid.
294. Department of Education and Training, above n 247, 9, 12, 14.
296. Statement of Callister, 4 August 2015, 30 [132].
297. Transcript of Flood, 10 August 2015, 2436 [24]–[31].
299. Transcript of Flood, 10 August 2015, 2437 [7]–[9].
301. Education and Training Reform Act 2006 (Vic) ss 5.1.1(2)(a).
302. Transcript of Callister, 10 August 2015, 2448 [13]–[14].

269 Flood, Fergus and Heenan, above n 210, 27.

270 Commission for Children and Young People, Submission 790, 9; Our Watch—02, Submission 922, 25; Family Planning Victoria, Submission 557, 6; Warrnambool and District Network of Schools, Submission 797, 3.

271 Australian Education Union Victoria, Submission 235, 6.

272 Flood, Fergus and Heenan, above n 210, 29.

273 Ibid 8.

274 Ibid 28.

275 Ibid 30.

276 Ibid 82.

277 Our Watch, above n 224, 6.

278 Flood, Fergus and Heenan, above n 210, 28.

279 Brotherhood of St Laurence, Submission 818.

280 Australian Education Union Victoria, Submission 235, 5.

281 Ibid.


283 Ibid 15, 21, 27, 30.

284 Ibid 3.

285 Our Watch—02, Submission 922, 26.

286 Commission for Children and Young People, Submission 790, 9; Our Watch—02, Submission 922, 25; Family Planning Victoria, Submission 557, 6; Warrnambool and District Network of Schools, Submission 797, 3.

287 Australian Education Union Victoria, Submission 235, 5.

288 Ibid.

289 Ibid 2–3.

290 Our Watch—02, Submission 922, 26.

291 Statement of Flood, 9 July 2015, 9 [37].

292 Ibid.

293 Our Watch—02, Submission 922, 26.

294 Such as the Vocational Education and Training (VET) Quality Framework: Statement of Callister, 4 August 2015, 55 [236].


296 Ibid 1.

297 Ibid.


299 Municipal Association of Victoria, Submission 641, 22.

300 Women’s Health West Inc, Submission 239, 25.

301 Maribyrnong City Council, Submission 362, 17.


304 Municipal Association of Victoria, Submission 641, 16.

305 Ibid; Our Watch—02, Submission 922, 28; Gippsland Women’s Health, Submission 692, 3.

306 Maribyrnong City Council, Submission 362, 17.

307 City of Ballarat, Submission 146, 1.

308 Ibid 1–2.

309 Brimbank City Council, Submission 123, 4.

310 Municipal Association of Victoria, Submission 641, 47.

311 Australian Institute of Criminology (Cth), ‘Meta-evaluation of the Preventing Violence against Women in our Community project: Final Report’ (Australian Government, 2014) 84.

312 Ibid 86.

313 Statement of Hearne, 5 August 2015, 4 – 5 [22].

314 Transcript of Higgins, 10 August 2015, 2503 [27]–2504 [5].

315 Maryborough Rotary Club, Submission 133, 5.

316 Transcript of Hearne, 10 August 2015, 2495 [27]–[38].

317 Transcript of Hann, 12 October 2015, 3320 [12]–[22].

318 Women’s Health Grampians, Submission 824, 10.

319 Department of Premier and Cabinet, above n 99, 15.


322 Victorian Health Promotion Foundation (VicHealth), Submission 243, Appendix 3, 32.

323 Ibid.

324 Victorian Health Promotion Foundation, ‘GEAR’, 2, provided by Victorian Health Promotion Foundation to the Commission, 5 January 2016.


326 Ibid 33. Victorian Health Promotion Foundation, above n 324, 3.

327 Go Goldfields, Submission 498, 2.


329 Ibid 30.

330 Statement of Higgins, 7 August 2015, 3 [20].

331 Maryborough Rotary Club, Submission 133, 3.

332 Statement of Higgins, 7 August 2015, 4 [27].

333 Ibid.
Ibid 35.

Ibid 4 [31]–5 [34].

Ibid 5 [36].

Ibid 8 [51].


Ibid.

Our Watch, Australia’s National Research Organisation for Women’s Safety and Victorian Health Promotion Foundation, above n 4, 41, 44.

Powell, Sandy and Findling, above n 338, 23–4, 28.

Department of Justice and Regulation, above n 40, 21.

Our Watch, Australia’s National Research Organisation for Women’s Safety and Victorian Health Promotion Foundation, above n 3, 28, 57.

Statement of Dyson, 4 August 2015, 6–7 [32].

Michael Flood, ‘Preventing Violence Against Women and Girls’ in Ronald J Burke and Debra A Major (eds), Gender in Organizations: Are Men Allies or Adversaries to Women’s Career Advancement (Edward Elgar Publishing, 2014) 405; AFL Community Club, AFL Taking the Tackle: Respect is for Everyone <http://www.learningseat.com/servlet/ShopLearning?companyId=aflcommunityclub&categoryName=Browse+%BB+%3CB%3EClub+%3CB%3E+Management+Courses+%3CB%3E+%BB+AFL+Taking+the+Tackle+%3E+&learningId=90192>.

See also Transcript of Dyson, 10 August 2015, 7 [33].


Statement of Dyson, 4 August 2015, 8 [37]–[38].


Ibid 11.

Ibid 14.

Ibid 16.

Whittlesea Community Connections, Submission 375, 18.

Community consultation, Melbourne, 30 April 2015; Wyndham City Council, Submission 518, 17.

Municipal Association of Victoria, Submission 641, 63.

Ibid.


Primary Care Connect, Submission 145, 5; Gippsland Lakes Community Health, Submission 229, 2; Australian Greek Welfare Society, Submission 578, 9.

Phoenix Foundation, Submission 675, 3.

Transcript of Calafiore, 15 October 2015, 3831 [25]–[26].

Domestic Violence Victoria, above n 361.

Ibid 8.

Ibid.

See, eg, the EVAs, Eliminating Violence Against Women Media Awards <http://www.evas.org.au/>.

Domestic Violence Victoria, above n 361, 3B.

Sutherland et al, above n 360.

Ibid 18.

Safe Steps Family Violence Response Centre, Submission 942, 2.

Preventing Violence Together Partnership, Submission 491, 11.

Loddon Campaspe Integrated Family Violence Services Consortium, Submission 914, 20. See also, Domestic Violence Victoria—05, Submission 943, 25.

These were funded by the Department of Justice and Regulation’s ‘Reducing Violence Against Women and their Children, Victorian Grants Program’ as part of the Mallee District Aboriginal Service Family and Community Violence Prevention Project. A series of six television advertisements were developed and designed by community members. See the advertisements at Mallee District Aboriginal Services: Mildura, Swan Hill, Kerang and Robinvale, Ending Family Violence (2013) <http://www.mdas.org.au/familyviolence>.

Transcript of Holmes, 10 August 2015, 2439 [28]–[31].

Anglican Diocese of Melbourne, Submission 173, 7.


City of Casey, Submission 354, 4.

Anglican Diocese of Melbourne, Submission 173, 10.

Ibid.

Ibid 12, 15.

Preventing Violence Together Partnership, Submission 491, 15; Women’s Health and Wellbeing Barwon South West Inc, Submission 780, 24; Our Watch—02, Submission 922, 16; Municipal Association of Victoria, Submission 641, 24.

State of Victoria, Submission 717, 39.

Darebin City Council, Submission 222, 8.

Domestic Violence Victoria—01, Submission 943, Attachment 2, 9.


Statement of Ferguson, 7 August 2015, 9 [45].

World Health Organization and London School of Hygiene and Tropical Medicine, above n 4, 3.

Women’s Health West Inc, Submission 239, 21.


Statement of Dyson, 4 August 2015, 13 [60].

Ibid.

Statement of Dyson, 4 August 2015, 9 [40].

Our Watch, Australia’s National Research Organisation for Women’s Safety and Victorian Health Promotion Foundation, Submission 514, 20.


State of Victoria, Submission 717, Appendix C, 134.

Ibid 29.

Maribyrnong City Council, Submission 362, 2; Municipal Association of Victoria, Submission 641, 5, 24.

Department of Premier and Cabinet, above n 99, 8–9.

Go Goldfields, above n 328, 52.

Preventing Violence Together Partnership, Submission 491, 16; Knox City Council, Submission 227, 1; Wyndham City Council, Submission 518, 30; Darebin City Council, Submission 222, 14.

Maribyrnong City Council, Submission 362, 11.

Transcript of Kinnersly, 12 October 2015, 3340 [3]–[13].

See, eg, Transcript of Lay, 15 October 2015, 3706 [2]–[11].

Preventing Violence Together Partnership, Submission 491, 3.

Department of Justice and Regulation, above n 60, 21.

Ibid 17, 19, 20.


Department of Premier and Cabinet, above n 99, 15.

UN Women, above n 3, 10.

Council of Australian Governments, above n 66, 15.

State of Victoria, Submission 717, 39.


Our Watch, Australia’s National Research Organisation for Women’s Safety and Victorian Health Promotion Foundation, above n 3, 17–20.

MonashLink Community Health Services Ltd, Submission 121, 7; City of Casey, Submission 354, 5; City of Melbourne, Submission 798, 8.

City of Whittlesea—01, Submission 714, 30–1.

Department of Education and Training, above n 179, 34.

Ibid 11.

See, eg, Gleeson et al, above n 207, 9.

Susan Rennie, Submission 248, 1.

Family Planning Victoria, Submission 557, 6.

Christine Craik, Submission 437, 1.

The nine organisations are: CASA Forum (Victorian Centres Against Sexual Assault); Domestic Violence Victoria; Multicultural Centre for Women’s Health; No To Violence; Our Watch; Victorian Equal and Opportunity and Human Rights Commission; Women’s Health victoria; Moira Carmody et al, ‘Framing Best Practice: National Standards for the Primary Prevention of Sexual Assault Through Education—National Sexual Assault Prevention Education Project for NASAVS’ (University of Western Sydney, Social Justice and Social Change Research Centre, April 2009).

Our Watch, Australia’s National Research Organisation for Women’s Safety and Victorian Health Promotion Foundation, above n 4, 12, 29, 31–2.

Transcript of Rechter and Kinnersly, 12 October 2015, 3351 [25]–3352 [15].

Statement of Dyson, 4 August 2015, 4 [21].

Carmody et al, above n 433, 60.

Ibid 59.

UN Women, above n 3, 32.

Carmody et al, above n 433, 61.

Statement of Dyson, 4 August 2015, 21 [91].

Statement of Imbesi, 6 August 2015, 3 [14].

Our Watch—02, Submission 922, 13.

Youth Affairs Council of Victoria Inc, Submission 938, 32.

Domestic Violence Resource Centre Victoria, Submission 945, 79.


Statement of Dyson, 4 August 2015, 21 [91].

Statement of Higgins, 7 August 2015, 8 [54].


Transcript of Hearne, 10 August 2015, 2490 [10]–[20].


Ibid.

Our Watch, Australia’s National Research Organisation for Women’s Safety and Victorian Health Promotion Foundation, above n 3, 64.

Shaun Leane—Member for Eastern Metropolitan Region, Submission 139, 3.
World Health Organization and London School of Hygiene and Tropical Medicine, above n 4, 2.


Kwok, above n 449, 2.

Transcript of Dyson, 4 August 2015, 2430 [22]–[29].

Women’s Health West Inc, Submission 239, 25.

Flood, Fergus and Heenan, above n 210, 2, 10. Our Watch, above n 451, 10.


Australian National Preventative Health Agency (Abolition) Bill 2014 (Cth).

Transcript of Calafiore, 15 October 2015, 3816 [21]–[25].

Transcript of Eccles, 16 October 2015, 3924 [7]–[8].

Australian Education Union Victoria, Submission 235, 5; Inner East Community Health, Submission 438, 5; Victorian Council Of Social Service, Submission 467, 39; CASA Forum, Submission 828, 7.

Gleeson et al, above n 207, 7.

37 The workplace

Introduction

Workplaces can play an important role in preventing and responding to family violence. They reflect the breadth and diversity of the community and offer a key opportunity to reach people who are affected by family violence, to provide support for them and to help them take steps to secure their safety. Workplaces are also important sites for dealing with family violence because the effects of violence reach into them in a variety of ways and because attitudes and cultures that prevail in them can influence the level to which violent behaviour is supported or condoned.

The first section of this chapter considers the factors that make workplaces, and workplace culture, important in preventing or countering family violence, and the impact family violence has in the workplace—for workers experiencing family violence, their co-workers and employers. It then outlines initiatives that have been developed and implemented in workplaces in Victoria with the aim of preventing and responding to family violence, and some of the main findings that have emerged about what is required for effective implementation of these initiatives.

The second section of the chapter discusses the concept of paid family violence leave, which emerged in evidence to the Commission as an issue, and considers recent moves to expand its availability to a greater number of employees who might be affected by family violence. The section discusses evidence from employers about how they have responded to the practical challenges of implementing family violence leave.

In this section, the Commission also explores opportunities for expanding the roles and functions of WorkSafe Victoria and the Victorian Equal Opportunity and Human Rights Commission to work with employers to ensure that workers are protected from occupational health and safety risks posed by family violence and from any discrimination they might experience as a result of being a victim of family violence.

In the final section of the chapter, after considering current practice and the issues raised by stakeholders, the Commission sets out a way forward. The Commission proposes that the Victorian Government ensure that when it implements its decision to provide public sector employees with access to dedicated family violence leave, it also provides employees with suitable information and supports, and managers with training and resources. Secondly, the Commission proposes that the Victorian Government implement best-practice workplace programs in all public sector workplaces to ensure that these workplaces have suitable policies for helping family violence victims and to build a respectful, gender equitable culture.

Finally, in order to foster more widespread adoption of family violence–related policies and programs in Victorian workplaces, the Commission proposes the Victorian Government support moves to expand the availability of family violence leave to non-government employees, facilitate the dissemination of resources and tools to help workplaces address family violence, and review and report on options for using existing regulatory frameworks and government procurement policies to support all Victorian employers in implementing best-practice family violence policies.

In Chapter 36, the Commission discusses the importance of engaging with organisations to promote cultures of non-violence, respect and equity as strategies to prevent family violence.

Context and practice

Workplaces are an important site for intervening to prevent and respond to family violence. This section examines the relationship between family violence and workplaces and provides an overview of various workplace programs and initiatives for preventing and responding to family violence.
... we know that [family violence] is an issue that needs to be dealt with by the community at large and that the workplace is a very important part of the community, and that if we are serious about tackling this issue then the workplace has to be part of the solution.\footnote{1}

Workplaces present an opportunity to reach large sections of the population. This is important both for harnessing community effort in tackling family violence and for reaching people who might need help or advice.

Workplaces have particular potential to reach and support members of vulnerable or isolated groups, who can have limited access to services and agencies they need. For newly arrived immigrant and refugee women, for example, their workplace might be their only point of contact with systems of support beyond their own families.

**Relationship between family violence and workplaces**

Workplaces are widely regarded as an important site for intervening to address family violence for several reasons:

- Family violence can have a negative impact on a victim’s employment.
- The workplace can be a place where family violence is perpetrated.
- Employment can be a protective factor against family violence, and employers and colleagues can play a role in recognising the signs of violence and supporting an employee who is experiencing it.
- A workplace’s culture can perpetuate attitudes that support and condone family violence, making it an important place for promoting gender equity and positive changes to violence-supportive attitudes and behaviours.\footnote{2}

Many of these considerations were apparent in the account one woman provided in a witness statement to the Commission. Ms ‘Anjali Jana’ told of her experience of family violence, including how it affected her employment and, in turn, how her workplace supported her in seeking help and regaining her financial independence:

I was doing really well at work and I was given more shifts than I was contracted for, meaning that I was earning quite a bit of money ... He [my husband] started to make me put all of my money that I was earning directly into his personal bank account, so that I had nothing. I had to rely on him for access to my money, but he always spent it and said that we had no money for anything.

Because of [the abuse], I began to feel sad all of the time, and it was hard to feel motivated, particularly in terms of my work. Previously I had been an excellent employee but now I was having trouble concentrating and I found it hard to do a good job, like I used to, I found that I would make lots of mistakes at work. They started giving me less shifts as a result.

People at work had noticed the drop in my performance and I think that they were privately concerned for me but I didn’t talk about my life at home with them. I didn’t understand at the time that a marriage was supposed to be any different to what I was experiencing. I thought that this is just how marriage is supposed to be. However, when I spoke to the other people that I worked with, I began to see that they were really happy in their marriages and their lives. In contrast, I grew to realise that the marriage that I was living in was like being in hell. I knew that there was something wrong with my marriage, that the way that my husband was treating me was not right.

My manager spoke to me and I admitted to her what was going on, that it was really bad. I knew that if I went back I would do something that I would regret, to myself, because this was not the life that I wanted. One of my colleagues was there and she gave me a 1800 number to call, I think it was the Woman’s Domestic Violence Hotline. I called them but they said that they couldn’t help me because I had a job. They told me to call WAYYS in Dandenong instead, so I did. WAYYS told me to come and see them in person. I asked my manager and she said that was absolutely fine, that I needed to go and sort this out and get my life in order because I couldn’t work like this. She said that she would look after my shift and that I should take as long as I needed. My manager spoke to the area
manager and he said that this was OK as well. Normally you have to give four days’ notice for leave but they were great about letting me go with no notice at all. They were so supporting and lovely throughout the whole process.

I am starting to get my life back on track after all of this. It has been about a year since I left. He took everything, every penny in my account, however I have been able to save up by working hard and my manager helped me to find extra shifts. In addition, the people at work have been so amazing in helping me get all of the basics that I needed. They gave me money to help me when I had first left my husband. They were like my family, when I had no one else to turn to. My employer has been so supportive, they did things like making sure that I was never rostered on alone until my intervention order was in place, in case my husband turned up at work, so that I was safe. They have been amazing.

I have saved enough money and I have started my training to be a nurse. I am so happy. However, I will still keep working one shift with my employer so I can stay in contact with all of my friends there.³

The effects of family violence on employment

Family violence can have negative effects on a victim’s employment, which can in turn compound the overall effects of the violence. Victims report that unexplained absences, poor performance, anxiety and distress caused by family violence can lead them to leave or change their employment, accept insecure employment or otherwise disrupt their working arrangements. The Commission was told of a case in which a woman’s employment was directly at risk as a result of the time she took off work following episodes of violence:

She had been in full time employment for 27 years in a large metropolitan school. She began to feel deeply embarrassed about the injuries to her face and arms, which were becoming more visible, and started missing work. As a result, she was disciplined and told she could be terminated from her role and the ongoing financial security and safety it provided to her.⁴

ANROWS (Australia’s National Research Organisation for Women’s Safety) analysed the 2012 Australian Bureau of Statistics’ Personal Safety Survey and found, among other things, that:

... 145,700 women who had been physically assaulted by a male cohabiting partner, took time off work in the 12 months after the incident. This is over one in four women who were employed during this time and who had experienced this type of violence.⁵

The Australian Family and Domestic Violence Clearinghouse’s National Domestic Violence and the Workplace Survey in 2011 found as follows:

... women with a history of domestic violence have a more disrupted work history, are consequently on lower personal incomes, have had to change jobs more often and are employed at higher levels in casual and part time work than women with no experience of violence.⁶

Nearly half of the survey respondents who had experienced family violence reported that the violence had affected their capacity to go to work. The main reason for this was physical injury or restraint (67 per cent). Some reported that their violent partner hid keys and personal documents such as drivers licences, failed to care for children or refused access to transportation money;⁷ others reported that sleepless nights affected their performance at work or that the violence caused them to be distracted, anxious, tired or unwell.⁸

This experience was echoed in the Commission’s community consultations. One woman reported:

I lost one job because I went to work with a black eye and they said we don’t want your crazy husband here. So staff don’t understand, managers don’t understand. There’s no trust, you can’t confide in anyone because people gossip, people blow it out of proportion, people don’t understand.⁹
The workplace as a site of family violence

The workplace itself can sometimes be a site where family violence occurs—for example, if a victim is harassed by the perpetrator at her place of work or in the context of her employment in a family business. People now work in many types of environments, and the workplace can be a site of family violence when victims of family violence work from home.

Of the respondents to the Family and Domestic Violence Clearinghouse survey who reported family violence in the preceding 12 months, 19 per cent reported that the violence had continued in the workplace in the form of abusive telephone calls, emails or physical confrontations.10

It is also not uncommon for violence to occur between two employees at the same workplace who are in a relationship.11 The FDVCH survey results show that 12 per cent of those who reported experiencing family violence were employed in the same workplace as the person perpetrating the violence.12

In a recent case heard by the Fair Work Commission an employer was found to have unfairly dismissed a woman who had taken time away from work because of a domestic violence incident perpetrated by her partner and her subsequent court attendance to obtain an intervention order against him.13 Both she and her partner worked at the same place. When the woman returned to work her employer told her it would 'not be safe or nice for [her] employment to continue'14 and that 'keeping [both her and her partner] in the office [was] a no'.15 The Fair Work Commission found that the employer’s words during the meeting effectively amounted to the woman’s dismissal and ordered the employer to pay her $27,500 in compensation.16

A perpetrator can also use a woman’s earning capacity to abuse her financially. Financial abuse is discussed in Chapter 21.

Employment as a protective factor

Employment is a crucial ‘protective’ factor in relation to family violence:

- The financial security and independence provided by paid employment increase a victim’s ability to leave the relationship and recover from the effects of the violence. This is discussed in Chapter 21.
- The workplace can be the only place where the victim spends time physically away from the perpetrator, giving her the space to take steps to ensure her safety.
- Employers and colleagues can play an important role in helping victims recognise that they are experiencing family violence and supporting them in seeking help.

The Commission heard that the financial security provided by paid employment is of particular importance when someone is leaving a violent relationship. The Young Men’s Christian Association of Victoria noted in its submission:

A critical factor for women experiencing violence is their ability to secure financial independence. Maintaining employment is therefore crucial. At the same time, the impacts of the violence may compromise the victim’s ability to get to work and meet agreed expectations at work. This creates a ... dilemma for women seeking to escape the impact of violence – at the time they most need their work they are most [in] danger of losing it.17

The Commission was also told about the ways in which a workplace can provide access to support services, as well as being a source of support itself.

... we do know that people do get support through their workplace, it is a significant place where women get support. For some women it’s the only safe place they have. It may be the only place that they can look on-line for resources and know that they are not going to be checked, their browser history is not going to be checked, where they can have 10, 15 minutes to themselves. So work is an incredibly important place for women to get support about family violence.18
Initiatives taken by the City of Whittlesea are indicative of the protection that can be afforded victims through their employment:

The City recognises the impacts that workplace policy has on increasing access to support services for women experiencing violence and how it could engage in the prevention of escalating violence by intervening early through support and paid leave entitlements for staff. The policy helps to develop an environment that promotes gender equity and models non-violent and respectful relationships to prevent family violence occurring; while creating a supportive environment to encourage victims of family violence to seek support.19

ANROWS has reported that the 2012 ABS Personal Safety Survey shows that work colleagues were included among the most common sources of support for women who had been physically assaulted by their cohabiting partner.20

Workplace culture

Some workplaces are said to contribute to the family violence problem. Dr Michael Flood, Australian Research Council Future Fellow and Senior Lecturer in Sociology, University of Wollongong, has noted that ‘there is now substantial evidence that violence-supportive attitudes are encouraged and institutionalised in the peer relations and cultures of particular organisations and workplaces’—particularly male-dominated sporting clubs, workplaces and military institutions.21

Dr Sue Dyson, Associate Professor and Principal Research Fellow at the Australian Research Centre in Sex, Health and Society, La Trobe University, reflected this point in her statement to the Commission:

Workplaces are another setting in which sexism and cultures of disrespect can thrive. There are also likely to be women in any workplace who have been personally affected by violence and the culture of the workplace can potentially exacerbate the effects of intimate partner or sexual violence. Despite decades of anti-discrimination legislation and the availability of equally (or better) qualified women, gender equality in senior leadership roles remains an intractable problem ...22

Workplaces have therefore been identified as important settings for the prevention of family violence and violence-supporting attitudes. Employers can be partners in violence prevention by encouraging attitudinal and behavioural change in their workplaces: they can create a culture that encourages respectful relationships, both inside and outside the workplace, and builds people’s confidence to challenge sexist, discriminatory and bullying behaviours and environments.

Workplace programs and initiatives

Numerous workplace-based programs and initiatives for preventing and responding to family violence have been developed and implemented in Victoria and elsewhere in Australia in the past 20 years, led by a range of different organisations.

Our Watch commissioned RMIT University to review workplace and organisational programs and approaches for preventing violence against women.23 The RMIT researchers noted that workplace initiatives can have three main targets of activity—responding to violence that is already occurring, preventing violence, and promoting gender equality and respect.24 Most of these activities are voluntarily engaged in by employers, although, as discussed shortly, employers also have a range of legislative obligations to provide safe and non-discriminatory workplaces.
In the case of responding to violence that is already occurring, workplace initiatives can include the following:

- helping individual staff and managers to recognise the signs that an employee might be experiencing violence at home, to respond appropriately to a disclosure of violence, and/or to refer the person concerned to appropriate services
- having policies and additional leave entitlements to support individuals experiencing violence. The availability of family violence leave is discussed in detail later in this chapter, under the heading ‘Family violence leave’
- supporting people in taking bystander action to confront perpetrators of violence about their behaviour or intervening in an incident observed in the workplace.

Bystander intervention approaches are designed to instil a sense of responsibility in community members, so they are able to intervene in incidents of violence or challenge violence-condoning attitudes. There is strong support for incorporating bystander training in workplace programs. Victorian research conducted in 2012 analysed the factors suggesting that an individual might be more likely to take bystander action when witnessing sexist, discriminatory or violent behaviour. Central factors were the individual’s level of confidence, their assessment of whether the action would have a positive effect, and whether they thought the action would have the support of their friends, peers or colleagues. In a workplace context an additional factor was an individual’s confidence that their employer would take the matter seriously.

Prevention and gender equality initiatives involve improving workplace culture, conditions and practices to combat violence-supporting attitudes and behaviours and to ensure women’s equal participation in the workforce. Organisational development is increasingly recognised as a specific component of effective prevention strategies: as a technique, it recognises that organisations and organisational culture have great potential to influence and shape social norms through modelling respectful behaviours and reinforcing gender equitable and non-violent cultures.

The RMIT paper noted that, although response and prevention activities are conceptually distinct, in practice they can and do co-exist and are often blurred. The authors also state that ‘policies and programs to respond to incidents of violence are less likely to be effective within an informal workplace culture that condones violence against women, sexist and/or other discriminatory behaviour, or accepts gender inequality’. Table 37.1 shows the various activities possible in each focus area nominated in the RMIT paper.
Table 37.1 Response, prevention and promoting gender equity: complementary models for change in the workplace

<table>
<thead>
<tr>
<th>Model</th>
<th>Area of focus</th>
<th>Example activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Responding to violence</td>
<td>Knowledge, attitudes</td>
<td>Awareness-raising communications across the organisation about the extent and nature of intimate partner violence and how to support staff who may be experiencing it.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Leadership active in speaking about intimate partner violence.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Support and referral information for potential victims and perpetrators made available throughout the workplace.</td>
</tr>
<tr>
<td></td>
<td>Behaviours, informal culture, practices</td>
<td>Managers and key contact staff trained to recognise the signs of family violence, respond appropriately to disclosures, and refer to services.</td>
</tr>
<tr>
<td></td>
<td>Structures, formal policies, procedures</td>
<td>Family violence leave provisions, and flexible work policy and safety planning in addition to legislative requirements (e.g. Sex Discrimination Act 1984 (Cth), and Workplace Gender Equality Act 2012 (Cth)).</td>
</tr>
<tr>
<td>Preventing violence against women</td>
<td>Knowledge, attitudes</td>
<td>Awareness-raising communications across the organisation about the extent and nature of violence against women and the connection between sexism, rigid gender roles and gender stereotyping in supporting violence against women.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Leadership active in speaking about violence against women and challenging sexist cultures and practices within workplaces.</td>
</tr>
<tr>
<td></td>
<td>Behaviours, informal culture, practices</td>
<td>Managers and key contact staff trained in recognising and responding to sexism and discriminatory or exclusive gendered practices.</td>
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<tr>
<td></td>
<td></td>
<td>Staff trained in taking prosocial action as bystanders when they witness sexism and discriminatory or exclusive gendered practices.</td>
</tr>
<tr>
<td></td>
<td>Structures, formal policies, procedures</td>
<td>Employee codes of conduct and/or values statements commit to intolerance of sexism, discrimination and violence against women, in addition to meeting legislative requirements (e.g. Sex Discrimination Act 1984 (Cth) and Workplace Gender Equality Act 2012 (Cth)).</td>
</tr>
<tr>
<td>Promoting gender equity and respect</td>
<td>Attitudes, norms</td>
<td>Awareness-raising communications across organisation about the foundations and causes of gender inequality, sexism, discrimination, unconscious gender bias and promoting respectful relationships.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Leadership active in speaking about valuing females and males equally, promoting the same rights, opportunities and rewards across the organisation, including women's equal participation in decision making and pay structures.</td>
</tr>
<tr>
<td></td>
<td>Behaviours, informal culture, practices</td>
<td>Managers trained to recognise and address unconscious gender bias in workplace decision making and practice.</td>
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<tr>
<td></td>
<td></td>
<td>Leadership training for women to encourage and promote women in leadership positions.</td>
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<tr>
<td></td>
<td>Structures, formal policies, procedures</td>
<td>Reporting to the Workplace Gender Equality Agency on equity measures. Building a gender equality strategy in consultation with staff. Review of hiring and promotion policies and practices to attract and retain quality women employees.</td>
</tr>
</tbody>
</table>
During the course of its inquiry the Commission learnt about a number of programs that incorporate some or more of the types of response and prevention activities listed in Table 37.1:

- Act@Work—Challenging Sexism, Discrimination and Violence against Women and Children (Women’s Health Grampians in partnership with Child and Family Services Ballarat, WRISC Family Violence Support and the City of Ballarat)31
- Engage to Change (McAuley Community Services for Women)32
- the White Ribbon Australia Workplace Accreditation Program33
- Take a Stand: Working Together against Domestic Violence (VicHealth, Women’s Health Victoria, Women’s Health Loddon Mallee, Melton City Council, Women’s Health and Wellbeing Barwon South West)34
- United: Working Together to Prevent Violence in the West (Women’s Health West Inc.)35
- Gender and Disability Workforce Development Program (Women with Disabilities Victoria)36
- Y Respect Gender Project (YMCA Victoria)37
- We Need to Talk: Preventing Violence Against Women Strategy (City of Melbourne)38
- Darebin Says NO to Family Violence: A Whole-of-Organisation Approach to Preventing Violence Against Women (City of Darebin)39
- Paving the Way (Wellington Shire Council, Baw Baw Shire Council)40
- the Equal Footing tool kit (VicHealth)41
- Safe at Home, Safe at Work (previously the Workplace Rights and Entitlements Project) (UNSW Australia’s Family and Domestic Violence Clearinghouse under the leadership of the Centre for Gender Related Violence Studies)42
- Male Champions of Change (established by Elizabeth Broderick AO, Sex Discrimination Commissioner, Australian Human Rights Commission)43
- Male Champions of Change (Victorian Equal Opportunity and Human Rights Commission)44
- the Respect and Responsibility initiative (Australian Football League).45

Building on this work, the Victorian Government has announced it will allocate $900,000 to a project, the Workplace Equality and Respect Project, to be carried out by Our Watch to help Victorian workplaces equip their staff to recognise and respond to family violence and maintain respectful relationships.46 The project will work directly with selected participating workplaces and will partner with regional service providers to support the implementation of workplace programs in rural and regional Victoria. It is expected the project will directly reach over 2000 employees in multiple sectors, workplaces and geographical locations.47 It will draw on existing programs, resources and evidence about effective practice to strengthen and consolidate workplace initiatives in Victoria. It will also develop minimum-practice standards as well as tools, guides, resources and training packages for future workplace programs.48 These resources will be made available on an ‘online knowledge hub’.49 A project evaluation report is due to be provided to government in May 2017.50

During its inquiry the Commission received information from the Department of Premier and Cabinet, the Department of Justice and Regulation, Victoria Legal Aid and Victoria Police about the policies and supports in place for any employees experiencing family violence.51 In broad terms, the initiatives consisted of access to employee assistance programs, fact sheets on family violence, the provision of referrals to support services and the availability of leave. The Family Violence Support Guidelines and Related Policy, issued by the Department of Justice and Regulation, offers staff access to professionally trained family violence officers within the Victims Support Agency. The role of these officers is to take a sensitive, non-judgmental approach to an employee who is experiencing family violence, assist with referrals to community support services, discuss measures for making safety a priority, and offer advice about suitable leave and flexible working arrangements.52
Court Services Victoria told the Commission that, although it has no support, referral or assistance programs that relate specifically to family violence, court staff can have access to an employee assistance program for a range of matters. It further advised that at present it has no policies, guidance or work directions for managers that relate specifically to employees experiencing family violence, but is considering the development of such policies as part of its process of reviewing a number of human resources policies. The Commission also heard from the Magistrates’ and the Children’s Courts that staff have access to an employee assistance program and that individual support is provided as required by management to staff, although there is no formal policy on this.

Victoria Police provides a number of employee support services, among them a confidential counselling service and a consultation service for managers seeking advice about employee wellbeing. Chapter 14 discusses work done by Victoria Police to respond to family violence incidents involving police members as victims and/or perpetrators and to address cultural norms and attitudes within the organisation relating to casual sexism, adherence to rigid gender stereotypes and support for gender inequality.

The Independent Review into Sex Discrimination, Sexual Harassment, including Predatory Behaviour, in Victoria Police, conducted by the Victorian Equal Opportunity and Human Rights Commission at the request of Victoria Police, presented its Phase One report in 2015. The review’s recommendations focused on the response to and prevention of sexual harassment and sex discrimination, recognising that workplaces are crucial settings for the prevention of violence against women. Among the recommendations, a whole-of-organisation Gender and Diversity Strategy linked to performance and capability was proposed, as was improving recruitment and retention processes and promotional pathways. The review also recommended developing victim-centric internal complaint mechanisms and appropriate victim support services. The Victorian Government has since announced a Victorian Equal Opportunity and Human Rights Commission review of gender equity and workplace culture in Victoria’s fire services.

The South Australian Government has commissioned the Equal Opportunity Commission of South Australia to work with all South Australian government departments to achieve accreditation as White Ribbon workplaces. The Commission was told that the Department of Justice and Regulation in Victoria is participating in the White Ribbon Australia Workplace Accreditation Program. In addition to engaging in a range of activities, such as an annual campaign, social marketing and promotional activities, White Ribbon offers, on a fee-for-service basis, prevention programs in schools and workplaces. Its workplace accreditation program involves workplaces committing to implement policies, programs, leadership and training to prevent and respond to violence against women. Workplaces are accredited for three years, during which time they must continue to promote cultural change, which is measured by means of a survey after 18 months.

**Principles of workplace initiatives to address family violence**

Although there have been limited reviews and evaluations of workplace initiatives, there is some evidence that they are effective in raising awareness and understanding within organisations, and in encouraging people to speak out against violence condoning attitudes and behaviours.

A number of factors have been cited in the literature and by people the Commission consulted as important considerations or preconditions for effective implementation of workplace-based programs. Central among these are the importance of leadership, ensuring that programs are tailored to the needs of the organisation and its employees, and building and disseminating the evidence base for what works.

**Leadership required at all levels to promote organisational change**

The Commission heard that leadership in organisations is crucial to ensuring not only that programs and initiatives are taken up in the first place but also that they are given priority within an organisation, that messages are consistently reinforced, and that employees have the confidence to put what they have learnt into practice.
A recent evaluation of the workplace training component of the Take a Stand program—which aims to strengthen organisational capacity to promote gender equality and non-violent norms—found that employees in organisations where the leadership style encouraged and valued employee feedback and participation, felt more positive about their capacity to challenge behaviours and attitudes that normalise violence against women. Employees in these types of organisation also felt more positive about their capacity to obtain help for a colleague found to be experiencing domestic violence.65

It is also important that such a workplace program is part of the organisation’s strategic and business planning process and is seen as the direct responsibility of senior organisational leadership,66 rather than approaching family violence as merely a ‘private issue’ for individual workers, to be managed by human resources departments.67 Additionally, it is vital to involve both senior managers and middle managers in organisational change programs.68

The role of internal workplace ‘champions’ in leading organisational change is also seen as crucial to creating an enabling environment.69 The Take a Stand evaluation stressed that such champions are needed to encourage respectful cultural attitudes, to provide advice about how to respond to inappropriate attitudes and behaviours, and to provide referrals to people seeking help when needed.70 The specific role of the senior project officer of the Y Respect Gender project was cited in that project’s evaluation as an important success factor; it had a positive impact on other senior managers, who also became advocates internally and in the wider community.71 Providing opportunities for internal workplace champions has also been identified as a way of involving more men in strategies for combating family violence.72

The City of Whittlesea informed the Commission that, as part of its family violence workplace support policy, it has 16 family violence contact officers on staff to act as contact points for anyone in the workplace experiencing family violence.73 The role of the contact officers is to provide information about external services and workplace entitlements, to liaise confidentially with the local family violence specialist service on behalf of the employee, and to act as a conduit between the employee and the human resources department if the employee does not wish to talk to her immediate manager about her situation.74

Tailoring the intervention to the needs of the organisation and its employees

The Commission heard that approaches to encourage workplaces to become involved in family violence prevention and responses need to be tailored to meet the needs of an individual organisation and that ‘starting where the organisation is at’ is an important part of ensuring that suitable programs are identified for specific organisations. There is no ‘one size fits all’ model. Knowledge of an organisation’s readiness for change, as well as levels of motivation within the organisation, will help determine the nature of the resources, support and interventions to be adopted.

The RMIT paper reinforced the notion that understanding an organisation’s current capacity and readiness is essential to determining the ‘way-in’:

... it became apparent that, for some workplaces, engaging in a discrete project of raising awareness of family violence and improving workplace policy and responses to potential victims of family violence (such as through the White Ribbon Workplace Accreditation Program), became a way-in to progressing further workplace changes in policy and practice to promote gender equity. [Alternatively] for other workplaces, such as in some corporate environments, gender equity in relation to retaining skilled women in senior positions and leadership was a way-in to a broader program of change that connected gender equity, respect and the prevention of violence against women.75

Experience from previous programs suggests that program messaging and delivery need to be both targeted to the audience and ‘non-confrontational’.76 The Y Respect Gender project pointed to challenges in communicating the project goals in ways that did not alienate people and in managing defensive responses from some senior staff, particularly some male staff.77 Similarly, the authors of the RMIT paper found that the language and concepts used in some workplace programs are overly technical and complex and are not easy to communicate to diverse audiences—in particular, the way they explain the connection between attitudes and gender stereotypes and incidents of violence.78
It has also been found that local ownership is crucial in both facilitating attitudinal and organisation change and ensuring program stability and sustainability.79

**Building and disseminating the evidence base**

As with many other programs and policies in the area of family violence, there is relatively little evidence about whether and how effective workplace-based programs are at preventing or responding suitably to family violence. It has been noted that ‘new initiatives need comprehensive review and evaluation so that some form of cost–benefit can be accurately estimated to give an indication of the utility and effects of these types of interventions’.80

Evaluating programs and initiatives and gathering information about their impact are also important for guiding the development of tools, knowledge and resources that reflect leading practice. Such materials can be disseminated to workplaces that have an interest in doing what they can to prevent and respond to family violence but do not know where to start or what steps to take.

In this regard, the RMIT paper puts forward a series of recommendations, including for the creation of a web-based portal for workplaces interested in relevant programs, the development of tool kits and common education materials that can be adapted for use by different organisations, and the introduction of national standards for workplace programs, supporting good evaluation practice, and highlighting promising practice.81

**Challenges and opportunities**

The Commission received evidence about the value of family violence leave as a necessary support for people experiencing family violence. This section considers the current extent of family violence leave in Victorian workplaces where enterprise agreements currently include or soon will include such leave. Additional mechanisms for providing family violence leave for employees who are not covered by existing entitlements under federal workplace laws, is then considered.

In the final part of this section other regulatory measures to deal with the workplace impacts of family violence are explored—such as occupational health and safety legislation and equal opportunity legislation.

**Family violence leave**

Lack of dedicated family violence leave can make the situation worse for people who are experiencing family violence. The Commission heard that victims often exhaust their leave entitlements when they must attend medical appointments and court appearances, organise accommodation, and care for their family. As one family violence survivor said, ‘All workplaces should be able to give leave for those leaving a violent relationship, without my long service and sick leave I would not have financially survived’.82 The Commission was also informed that without paid leave, women are less likely to report family violence or manage the necessary interactions with courts, medical services and schools.83

Mr Craig O’Donnell, the father of Rekiah O’Donnell, who was killed by her partner, submitted that immediate family members of homicide victims should be entitled to a special category of leave to enable them to attend the trial of the accused ‘without penalty or loss of job ... nor having to ... use some other form of leave that they have rightly accrued’.84 Mr O’Donnell submitted that this would ‘help minimise the trauma in seeking time off when experiencing such an ordeal’.85
The concept of dedicated paid family violence leave has evolved as a specific mechanism for supporting victims. The ACTU submitted:

Paid domestic violence leave is designed to assist victims of domestic violence to remain in paid employment, support them through the process of escaping violence and to promote safe and secure workplaces for them and their work colleagues. The leave is based on an employee’s need to, for example, attend court appearances and related appointments, seek legal advice, and make re-location arrangements. 86

The availability of family violence leave also sends a message to staff that the organisation takes family violence seriously.

On the question of whether there should be a designated family violence leave entitlement or simply greater access to already existing leave entitlements, Ms Ged Kearney, President of the ACTU, told the Commission she was in favour of specifically naming the entitlement ‘family violence leave’ because:

... if we do actually label it, if we do say that this is specifically for family and domestic violence leave, then it makes absolutely no doubt that that is the issue we are trying to tackle ... I think that that’s an important part of culturally swinging about the attitude to domestic and family violence in the community. 87

Mr Phil Cleary, whose sister was killed by her former partner in 1987 and who has been a long-time advocate for the prevention of violence against women, submitted that paid family violence leave should be supported because it validates a woman’s experience of violence. 88

Ms Wil Stracke, Campaigns and Industrial Officer at the Victorian Trades Hall Council, gave evidence that the provision of a specific family violence leave entitlement in an enterprise agreement was also a way of countering the stigma associated with family violence, the message to victims being:

This is a workplace where your co-workers have voted with you in an enterprise agreement for this entitlement, so they stand with you, and your employer has accepted that claim, which means they stand with you. So this is a workplace where we all stand together to support you in this situation. 89

The Commission heard that for people who do not have other sources of support and advice, this might encourage a victim to disclose violence and seek assistance. 90

The Commission notes that in August 2015 the Senate Finance and Public Administration References Committee handed down its report on domestic violence in Australia. 91 The committee supported the notion of victims of domestic and family violence having access to leave provisions that help them maintain employment and financial security while attending necessary appointments such as court appearances and obtaining legal advice; it recommended that the Commonwealth Government investigate ways of implementing this throughout the private and public sectors. 92

Enterprise agreements

In the past five years there has been a marked increase in the adoption of family violence leave clauses in enterprise agreements. The Productivity Commission’s report on its Workplace Relations Framework Inquiry noted that 840 enterprise agreements approved between 1 January 2012 and 30 June 2015—covering an estimated 630,592 employees—contained a family violence provision of some kind, most of them providing for family violence leave. It also noted that access to domestic violence provisions is skewed in favour of public sector employees. 93
One of the earliest family violence leave clauses negotiated in Victoria was that between the Australian Services Union and the Surf Coast Shire Council in 2010. The agreement provided for up to 20 days’ paid leave for an employee experiencing family violence. The employee could use the leave for medical appointments, legal proceedings and other activities related to the violence. The clause required the employee to provide evidence of the violence in the form of a document issued by the police, a doctor, a district nurse, a family violence support worker or a lawyer in order to obtain the entitlement. By September 2014 at least 60 of Victoria’s 79 local councils had family violence leave provisions incorporated in their enterprise agreements.

The Commission heard from employers who, through their association with the White Ribbon Foundation and other initiatives, have introduced family violence leave policies into their workplaces. Ms Katherine Paroz, Human Resources Advisor at Telstra Corporation, gave evidence that Telstra’s family violence leave policy had received a very positive response in that organisation’s workplace. She noted that, with 33,000 employees, Telstra thought it highly likely that some of its staff would be experiencing family violence. Accordingly, Telstra introduced a policy providing for 10 days of paid, dedicated family violence leave for permanent employees and 10 days of unpaid family violence leave for casual employees in order to support staff and ensure that the business does not lose talented employees unnecessarily.

In August 2015 the Victorian Government announced that all future Victorian public sector enterprise agreements would contain a family violence clause. The government is the state’s largest employer, so this will significantly increase the number of Victorians having access to family violence leave. Under an in-principle agreement reached with the Victorian Public Service, employees will be entitled to up to 20 days’ paid family violence leave. Similarly, an in-principle agreement has been reached with Victoria Police, whereby employees will be entitled to 10 days’ paid family violence leave plus such additional leave as is reasonable. The government has not yet released any further details about how the entitlement to family violence leave will be communicated or otherwise implemented.

Although entitlements arising out of enterprise agreements negotiated to date provide coverage for a large number of Victorian employees, the current availability of family violence leave is low overall and largely dependent on an employer’s goodwill. As Ms Stracke told the Commission:

... it should not be a matter of luck that you work for an employer who will do those things and bend over backwards, and that’s why our submission is around an entitlement to this leave, that that’s a critical thing because your safety should not be dependent on having an employer who is understanding.

Mr O’Donnell similarly submitted that entitlement to family violence–related leave should be ‘enshrined in law’ on the basis that not all employers are ‘so gracious’ as to offer a special category of paid leave when asked by an employee.

Many women work in insecure employment, do not have union representation, or work for organisations or businesses that are not covered by enterprise agreements, so inclusion of family violence leave in enterprise agreements can only ever be part of a broader effort to extend the availability of family violence leave throughout the workforce. As a result of this concern, the discussion associated with family violence leave has become focused on the creation of a right or entitlement to family violence leave entrenched in statute or modern awards.

Efforts are being made to make family violence leave an entitlement that is available to all national system employees (that is, employees covered by Australia’s national workplace relations system) through inclusion in the National Employment Standards and to include an entitlement to family violence leave in all modern awards.

The Productivity Commission noted in its report on the Workplace Relations Framework Inquiry that employer organisations have been generally opposed to, or silent on, the introduction of a regulatory obligation on employers to provide entitlements related to family violence, on the basis that employees already have access to other generic forms of leave. For its part, the Australian Industry Group has said that in its view the best way of involving employers in responding to family violence is to engage them in a positive way, to educate them and encourage their participation, rather than imposing ‘heavy handed and inappropriate measures on them’.

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Ms Julie Kun, Deputy CEO and Business Development Manager of WIRE (the Women’s Information Referral Exchange) gave evidence that, when advocating in the past for employers to implement family violence leave entitlements, she has found employers responsive to the argument that such entitlements offer benefits not just for individual employees but also for the workplace and the wider community and in terms of how employers are perceived.108

The Productivity Commission noted that paid domestic violence leave provisions can impose additional costs on employers but can also offer productivity and other benefits.109

The National Employment Standards

The National Employment Standards are a set of 10 minimum employment standards that apply to all national system employees and cannot be displaced by employment contracts, modern awards or enterprise agreements.110 They are contained in the Fair Work Act 2009 (Cth) and cover entitlements such as annual leave, personal or carer’s leave, and compassionate leave.111 Pursuant to the standards, employees (other than casual employees) may also make a request for flexible working arrangements, including in circumstances where they are experiencing violence from a member of their family.112

It has been proposed that the National Employment Standards be amended to include an entitlement to family violence leave. Subject to the way such a standard is drafted, including family violence leave in the standards would ensure that most employees in Victoria would have access to this category of leave. In 2011 the Australian Law Reform Commission recommended that the Commonwealth Government review the National Employment Standards with a view to including an additional entitlement to family violence leave.113 Amending the standards to this end has the support of the ACTU National Congress, which passed a resolution supporting the initiative in May 2015.114

In November 2015 the Commonwealth Government stated that it would consider the proposal to introduce family violence leave into the National Employment Standards and noted that the Productivity Commission was considering the matter as part of its workplace relations review.115 The Productivity Commission has since concluded that any decision about including family violence provisions in the standards should await the outcome of the Fair Work Commission’s review of modern awards.116

The Federal Opposition announced, also in November 2015, that it would incorporate five days of paid family violence leave in the National Employment Standards if elected to government, following consultation with business, unions and other stakeholders.117

Modern awards

Modern awards, which are made by the Fair Work Commission, set minimum conditions for employees working in particular industries or occupations; they apply to all employees and employers covered by the relevant modern award.118 Not all employees will be covered by a modern award. A modern award creates a safety net for an industry, ensuring that the terms of any enterprise agreements made in that industry are better overall than the terms of the relevant modern award. Modern awards also offer the benefit of covering employees in the classifications set out in the award across an industry, regardless of the employees’ relative bargaining power or level of union representation.

The Commission was informed that the ACTU and its affiliated unions are running a campaign to include 10 days’ paid family violence leave as a minimum entitlement in all modern awards.119 The ACTU submitted:

The inclusion of domestic violence leave in Modern Awards ensures that the entitlement is available to all employees [for whom the award applies who are] affected by domestic violence as a matter of law and removes the need for [these] employees facing extremely difficult circumstances to negotiate with their employer in order to take time off work.120
The Commission received no submissions from employer groups on the question of including family violence leave in modern awards. A number of employer groups did make submissions to the Fair Work Commission as part of the four-yearly modern award review process, opposing the introduction of a family violence leave clause. For example, the Australian Industry Group expressed concern that the inclusion of family violence provisions in modern awards was ‘heavy handed’ and risked generating negative views among employers in relation to efforts to deal with family violence. It went on to say:

Awards are already far too complex to constitute a genuine safety net. Awards need to be simplified – not expanded to deal with the numerous very important community problems which exist. If family violence is to be dealt with through a specific clause in awards, why not street crime, drug dependence, alcohol dependence, illiteracy, homelessness, mental health, age discrimination, gender inequality, road accidents, traffic congestion, environmental degradation, and so on? All social problems interact with the workplace in one way or another.

The Commission notes that the Fair Work Commission has scheduled a hearing for October 2016 in respect of the inclusion of a family violence leave clause in modern awards as part of its modern awards review.

Considerations for employers introducing family violence leave

A number of concerns were expressed about the practical implementation of family violence leave in the workplace, regardless of the source of the entitlement. In particular, concern was expressed about the supports provided to employees, privacy, confidentiality, and the type of evidence to be provided by an employee seeking access to paid family violence leave.

A University of NSW Australia study of the incorporation of domestic violence clauses in enterprise agreements surveyed a number of large workplaces and consulting employees about their experiences. The researchers concluded, ‘[T]he essential elements for a successful implementation of domestic violence clauses are ongoing monitoring and research, awareness and information strategies, the guarantee of confidentiality, and training.’

Ms Paroz of Telstra told the Commission that when the corporation introduced family violence leave it communicated the policy widely to staff, required leaders to attend training, and provided assistance to managers in supporting employees seeking leave. The Commission heard in evidence, however, that by July 2015 only 17 people had availed themselves of the entitlement to family violence leave since its introduction in November 2014, there being a total 45 days of family violence leave taken in this period. Ms Paroz stated that Telstra was confident the policy was understood internally and that she expected employees would develop the confidence to use the entitlement to family violence leave over time.

The ACTU has proposed the following set of best-practice principles for evaluating and guiding the implementation of paid family violence leave provisions in workplaces:

- There must be a workplace contact for employees who want to disclose family violence.
- The role and responsibilities of the person to whom an employee has disclosed family violence must be clear.
- Processes and procedures for ensuring confidentiality for employees disclosing family violence must be clear.
- The clause must take account of mandatory reporting and Privacy Act 1988 (Cth) requirements if relevant.
- The clause must include anti-discrimination protections for employees disclosing family violence.
- Training and support must be provided for all employees—in particular, those who are likely to have an employee disclose circumstances related to family violence to them.

The Victorian Equal Opportunity and Human Rights Commission expressed concern about the evidence that an employee who sought access to family violence leave would be required to provide—for example, whether an employer would ask for a note from a police officer, doctor or family violence worker or whether a statutory declaration signed by the victim would be sufficient.
VEOHRC suggested that the test could be modelled on section 107 of the Fair Work Act, which provides that an employee who has notified their employer that they intend to take leave ‘must, if required by the employer, give the employer evidence that would satisfy a reasonable person’ that the leave is taken for the permissable reason. This test would usually be satisfied by a statutory declaration signed by the employee.132

Further regulatory measures

Employers have some statutory obligations—in addition to those relating to existing general leave provisions—that require them to take into account some of the potential workplace impacts of family violence. For example:

- Occupational health and safety legislation requires that employers maintain a safe workplace.133 These provisions can apply, for example, to a situation in which family violence is being perpetrated in the workplace by a co-worker.

- Equal opportunity legislation requires that employers not discriminate against employees on the basis of certain attributes. A woman who is treated less favourably by her employer because she is experiencing family violence might be able to avail herself of the protection afforded by the legislation if the treatment relates to one of the existing protected attributes. If, for example, the discrimination relates to mental illness she experiences as a result of the family violence, she might be able to make a discrimination claim on the basis of the disability attribute.

Some submissions the Commission received recommended that these regulatory regimes be amended to impose express obligations on employers to take steps to respond to family violence in the workplace. For example, a number of submissions called for amendments to OHS legislation to include the impacts of family violence at work as an express OHS consideration and for the introduction of a new attribute in the Equal Opportunity Act 2010 (Vic).

VicHealth has previously identified scope for employers to use workplace policies in these contexts as vehicles for responding to family violence:

- There is potential for incorporating support for bystander action in key policies (such as occupational health and safety, equal opportunity) as a way of fulfilling for example legislated employer ‘positive duty’ obligations. Promoting an organisational culture where sexism, discrimination and violence (including sexual harassment for example) towards women are not only not tolerated, but where staff are encouraged and skilled to identify and take action when witnessing these behaviours, could be an important component of these positive duty obligations.134

Occupational health and safety

Under OHS legislation, employers are obliged to provide and maintain a working environment that is safe and does not pose risks to health.135 They are also required to monitor employees’ health, including their psychological health.136 WorkSafe Victoria, the authority with responsibility for monitoring and enforcing compliance with Victorian OHS laws, provides guidance to employers on their obligations in cases where a person is being bullied, abused, threatened or assaulted in circumstances relating to their work—including how to identify and respond to hazards and risks and implement suitable control measures.137 Victorian OHS legislation and policy is silent on whether the specific impacts of family violence in the workplace constitute risks to workers’ health and safety.

The Canadian province of Ontario has amended its Occupational Health and Safety Act to include ‘domestic violence’ as a type of workplace violence. Pursuant to this legislation, an employer is required to take every reasonable precaution to protect an employee from physical injury in the workplace if the employer becomes aware, or should reasonably be aware, that domestic violence is a risk. Employers are also required to have policies and programs relating to workplace violence.138
Some submissions the Commission received argued that Victoria's OHS laws should be amended to include the impacts of family violence at work as an OHS consideration. Submissions referred the Commission to recommendations the Australian Law Reform Commission made in its report *Family Violence and Commonwealth Laws—Improving Legal Frameworks*, which considered the Commonwealth OHS system in the context of moves to harmonise OHS law across Australia.

According to the ALRC among the circumstances in which family violence can pose a clear OHS concern or risk are the following:

- physical or verbal abuse between partners employed at the same workplace
- threats to a partner or the partner's co-workers at the workplace
- harassment or attacks on a partner or a partner's co-workers at their workplace either in person or through phone calls and emails
- stalking a partner at the partner's workplace – for example, 29 per cent of victims who were stalked by their previous partner reported that the person using family violence loitered outside their workplace
- in the most extreme cases, family violence-related homicide at the workplace.

The ALRC concluded that lack of knowledge, rather than legislative inadequacies, was the primary challenge in this regard and made a range of recommendations in relation to the need for guidance, education, training and appropriate employer responses. It pointed to the need for future policy development in this area to be guided by further research—in particular, in relation to instances of family violence where it is more difficult to establish that the incident would engage an employer’s duty of care or be covered by existing OHS laws.

The ACTU submitted to the Royal Commission:

- The Victorian Government and WorkSafe Victoria should work with Safe Work Australia, unions, employer organisations and other relevant bodies to raise awareness about family violence and its impact as a possible work health and safety consideration, as well as develop and provide education in this area.
- WorkSafe Victoria should ensure that information about family violence as a work health and safety matter is provided to employers and employees.

Our Watch called for the Commission to recommend that WorkSafe Victoria examine the possibility of strengthening prevention work through existing OHS strategies and that support be provided to private sector workplaces and other non-government organisational settings to implement good-practice programs. It observed that this should be done by means of a comprehensive and coordinated model and strong evaluation to ensure consistent standards and adherence to legislative requirements, including those of the *Occupational Health and Safety Act 2004 (Vic)*.

WorkSafe Victoria has established a number of programs that adopt what are known as 'integrated approaches' to worker health and safety. Integrated health, safety and wellbeing approaches address environmental exposures in the workplace, the social context that workers experience on the job, and workers' individual health behaviours and in so doing seek to improve workforce productivity. WorkSafe Victoria's principal programs of this nature are WIN (the WorkHealth Improvement Network) and WorkHealth.

A 2013 report prepared for WorkSafe Victoria by Monash University and the Institute for Safety, Compensation and Recovery Research reviewed initiatives in Victorian workplaces and concluded that integrated approaches are effective for both physical and mental health outcomes, provide a positive return on investment, and are able to be adopted rapidly within existing OHS structures. The report found that, in addition to engaging in activities related to physical workplace safety, an integrated approach should consider non-work factors such as work–family conflict. On the basis of the report’s findings, WorkSafe Victoria has published a guidebook on implementing integrated health, safety and wellbeing approaches in the workplace.
The annual WorkSafe Awards are another relevant initiative. The awards celebrate businesses, groups or individuals who ‘are making a dedicated commitment to safety, health and wellbeing and return to work in their workplace’.[153] This is not limited to workplace health and safety; it can extend to initiatives aimed at improving the wellbeing of employees more generally. For example, in 2015 St Vincent’s Private Hospital was shortlisted for an award as a consequence of its implementation of a program the McAuley Community Centre developed to help management and staff recognise and respond to family violence and know where to refer staff for support.[154]

**Equal opportunity and discrimination**

The Commission was informed that victims of family violence may experience both direct and indirect discrimination in the workplace, which can exacerbate their initial experience of family violence.[155] Victims report they fear that disclosure will jeopardise their position or career progression, they will be stigmatised, and/or their employer will be unresponsive to a disclosure.[156]

It was also argued that victims of family violence face a unique set of negative stereotypes at work. One union representing workers in a predominantly female profession reported:

Specific negative assumptions and stereotyping about victims of domestic violence include that they are unreliable, likely to underperform or bring danger or disruption into the workplace. These assumptions are likely to reflect community attitudes towards domestic violence and specifically, stigma attributed to victims, who are perceived as complicit in their own abuse.[157]

In their submissions to the Commission, the Victorian Equal Opportunity and Human Rights Commission, the Victorian Trades Hall Council, the Australian Education Union (Victorian Branch), the ACTU and the Australian Services Union (Victorian and Tasmanian Authorities and Services Branch) recommended that the Victorian Government amend the Equal Opportunity Act to include ‘victim of family violence’ (or ‘victim/survivor of family violence’) as a protected attribute for the purpose of anti-discrimination legislation.[158] VEOHRC recommended that the definition of family violence in the Equal Opportunity Act be aligned to that in the *Family Violence Protection Act 2008* (Vic).[159] These organisations submitted that a dedicated attribute would have both symbolic and practical effects. In broad terms, they submitted that a dedicated attribute would help combat negative stereotypes and allow victims to obtain assistance safely while at work. Both the Australian Law Reform Commission and the Australian Human Rights Commission have previously advanced a similar proposal.[160]

Section 18 of the Equal Opportunity Act provides specific protections against discrimination in the workplace. ‘Discrimination’ is defined as including the following:

- denying or limiting access by the employee to opportunities for promotion, transfer or training or to any other benefits connected with the employment
- dismissing the employee or otherwise terminating their employment
- denying the employee access to a guidance program, an apprenticeship training program, or another occupational training or retraining program
- subjecting the employee to any other detriment.[161]

These protections apply to people who have an attribute protected under the Equal Opportunity Act; among these attributes are disability, age, sex, race, religion, sexual orientation, political belief or activity, and expunged homosexual conviction.[162] The Equal Opportunity Act prohibits treating people unfavourably or imposing unreasonable conditions on them because of those attributes.[163]
If ‘victim of family violence’ were to be added to the list of attributes, victims who experienced unfavourable treatment would no longer be required to fit their experience into an established category of discrimination but would instead be able to rely on their status as a victim of family violence in order to gain the relevant protections. The new attribute would prohibit employers from discriminating against victims of family violence in the ways just described. For example, it would be unlawful for an employer to fail to promote a woman because of a perception that she is ‘unreliable’ or uses too much personal leave as a result of family violence. Affording victims of family violence this protection could be particularly important for casual employees, for whom paid family violence leave might be unavailable. Adding ‘victim of family violence’ to the list of attributes protected by the legislation would also make it unlawful to discipline a woman whose violent partner attends the workplace and threatens other staff.

A protection under anti-discrimination legislation might also offer an avenue of relief for someone whose employment has been terminated as a result of the impact family violence has had on their work, in a situation where no other relief is available under unfair dismissal laws.  

The protections offered by the Equal Opportunity Act apply not only in the context of paid employment: they also apply in other areas of public life—for example, in the delivery of services. Accordingly, if an education provider refused the enrolment or temporary attendance of a child affected by family violence who was living in a refuge or transitional accommodation, this could amount to discrimination under the Act.

The Victorian Equal Opportunity and Human Rights Commission also submitted that this specific protection would foster important cultural and attitudinal change in the workplace on the basis that the Equal Opportunity Act places an obligation on duty holders to take positive action to eliminate discrimination, sexual harassment and victimisation. In this way a new attribute would promote proactive improvements by requiring employers and other holders of a duty to take reasonable and proportionate measures to eliminate discrimination as far as possible. VEOHRC suggested that duty holders could be expected to do the following:

- introduce or review existing policy/practices which either directly relate to, or indirectly affect, people experiencing family violence
- increase awareness of the issue of family violence in the workplace or the provision of accommodation
- introduce staff training on the issue (particularly for management and human resource personnel), including training on the causes of violence against women
- conduct an environmental scan of their organisation’s policies, procedures and practice to look more broadly at what they can do to support victim/survivors (e.g. whether to provide external counselling, safety planning, peer support, flexible arrangements). This scan should also consider the drivers of family violence and what the organisations can do to improve gender equity.

The Royal Commission notes that it received no submissions from employer groups or others in relation to the proposal to add a new attribute to the Equal Opportunity Act.

**The way forward**

The manner in which family violence intersects with the workplace is profound and multi-faceted. The Commission supports workplace-based initiatives to prevent and respond to family violence and acknowledges the extensive work that has been done to date to harness workplaces’ capacity to deal with such violence. Although, as highlighted in the RMIT paper, these endeavours have primarily focused on addressing intimate partner violence against women, they have laid the foundation for similar approaches that can and should be taken to prevent and respond to all forms of family violence.
As settings that represent and reflect the community at large, workplaces can identify and respond to victims and perpetrators, reduce further harm, and act in accordance with changing social norms and attitudes. Employers are vital partners in dealing with family violence, having responsibilities such as motivating employees—and even clients and consumers—to take part in efforts to end family violence.

The Victorian Government should model best practice. Because the Victorian Government is the state’s largest employer, it has the opportunity to support and equip its own workforce to respond to and prevent family violence.

**Modelling best practice in Victorian public sector workplaces**

The Victorian Government’s decision to provide all public sector employees with an entitlement to paid family violence leave is a welcome initiative, not only because of the practical benefits it will bring to people whose working lives are disrupted by such violence, but also because it shows its workforce that the Victorian Government takes the impact of family violence on individuals seriously. This is important in building a community that confidently recognises and responds to disclosures of family violence.

The Commission supports the introduction of paid family violence leave for Victorian Government employees. It is essential, however, that it be accompanied by adequate information and support for employees, and training and resources for managers and human resources staff to implement the new entitlement. The Victorian Government cannot require other employers to introduce family violence leave, but its own successful implementation of this category of leave for public sector employees might well persuade other employers to do the same.

The Commission recommends that, in implementing its commitment to provide family violence leave to public sector employees, the Victorian Government ensure the following:

- Employees have access to appropriate support services and referrals.
- Any requirement for employees to provide evidence supporting their application for leave is not excessively onerous.
- Employees’ confidentiality is maintained as far as possible.
- Employees are helped to make reasonable and necessary adjustments to their working arrangements.
- Employees, managers and human resources staff are trained and equipped to respond suitably to disclosures of family violence, taking into account all the types of family violence and the diversity of people who are affected by it.
- Provision is made for managing situations in which a victim and a perpetrator are working in the same workplace.

Although government departments and agencies currently offer staff access to generic employee assistance programs, the Family Violence Support Guidelines and Related Policy issued by the Department of Justice and Regulation represents a detailed family violence-specific policy aimed at providing practical and specialised advice and support to any employee experiencing family violence. Adoption of a policy along these lines could be more widespread throughout government and its agencies.

The Commission notes that, although family violence leave clauses are generally aimed at supporting victims of family violence, it might be that they could also be used by perpetrators of family violence—depending on how the clauses are drafted—including to facilitate the attendance of perpetrators at court hearings as well as compliance with any relevant court orders to attend appointments. Consideration will need to be given to the eligibility of perpetrators for family violence leave—including whether perpetrators’ use of such leave should be restricted to activities of a rehabilitative nature such as attending counselling appointments and men’s behaviour change programs. It will also be necessary to equip managers and staff to respond to circumstances of this nature. Additionally, consideration will need to be given to whether the leave entitlement should be available to employees who are relatives of victims of family violence in exceptional circumstances—for example, when there has been a homicide.
Of course, the Victorian Government’s role as an employer extends beyond providing family violence leave and associated supports and information to its employees. The government and its agencies can also institute in public sector workplaces policies and programs that take a broader view of responding to and preventing family violence by building respectful and gender equitable cultures. This represents a crucial leadership opportunity for the Victorian Government.

The Commission therefore recommends that the Victorian Government implement best-practice workplace programs in all public sector workplaces to:

- enable them to build respectful and gender equitable cultures
- ensure they have suitable policies for family violence victims
- provide suitable responses and do not allow for collusion with family violence perpetrators
- build skills and support staff in taking bystander action.

**Leave entitlement in National Employment Standards and modern awards**

The Commission supports moves to extend the availability of dedicated family violence leave to as many Victorian employees as possible by embedding an entitlement in the National Employment Standards and modern awards, and recommends the Victorian Government encourage the Commonwealth to make the necessary amendments to the standards. It acknowledges the close consideration of these matters by the Productivity Commission and the Fair Work Commission and the contributions employer and employee representatives have made in those forums. Since these matters fall within the Commonwealth’s purview, the Commission recommends that—in the context of discussions by the Council of Australian Governments on family violence reforms—the Victorian Government encourage the Commonwealth to amend the National Employment Standards in Part 2-2 of the Fair Work Act to include an entitlement to paid family violence leave for employees (other than casual employees) and unpaid family violence leave for casual employees.

The Victorian Government might also consider making a submission to the Fair Work Commission, as part of the Modern Awards Review, in support of the inclusion of family violence leave in all modern awards. It is noted that, according to the directions the Fair Work Commission issued on 30 November 2015, any interested party supporting the introduction of family and domestic leave must file written submissions and any witness statements or documentary material on which it seeks to rely by 16 May 2016.166

**Encouraging and supporting initiatives in non-government workplaces**

In addition to being the state’s largest employer, the Victorian Government and its agencies have the capacity to influence the culture and practices of private and community sector workplaces and to ensure the more widespread availability of family violence–related information, supports and/or protections in a broad range of industries and professions throughout the state. The government collaborates with industry at a policy level but also in relation to the procurement of goods and services. Agencies such as WorkSafe Victoria and the Victorian Equal Opportunity and Human Rights Commission work closely with employers to improve the health, safety and rights of employees.

The Victorian Government’s recent announcement of its $900,000 commitment towards workplace programs is a critical initiative—in particular, because it is intended to develop resources and tools that can support the involvement of a greater number of employers and workplaces in combatting family violence in the future. At present different providers deliver different programs and activities, with very little independent assessment or evaluation. The Workplace Equality and Respect Project, which is being conducted by Our Watch and funded by government, offers an important opportunity to test workplace strategies aimed at combatting family violence, taking into account lessons from past programs, and to advise the Victorian Government and the community on the most effective ways of securing the participation of employers and employees.
Similarly, the findings of the Victorian Equal Opportunity and Human Rights Commission’s review of Victoria Police have a broader application to other workplaces in preventing violence-supportive attitudes that can contribute to the occurrence of family violence. Victoria Police recognised that attitudes towards women in the workplace have implications for how police make decisions and interact with the community.167 By confronting gender-based harm in the workplace, employers have an opportunity to implement best-practice responses to victims, target violence-supportive attitudes, and promote gender equality in their workforce and in their service delivery.

In order to maximise the outcomes of the Workplace Equality and Respect Project, on receiving the final report of the project the Victorian Government should support the maintenance of the planned online hub of program models, tool kits, training resources and packages for application in government and non-government workplaces.

The Commission considered submissions about extending or clarifying the occupational health and safety or equal opportunity regimes to support or require employers to implement measures to respond to family violence. The Commission is conscious that any regulatory intervention to mandate family violence strategies in the workplace through frameworks would need to be supported by a suite of educational and other materials that are based on best-practice knowledge. It therefore considers that any regulatory reform in this area should await the further development and evaluation of strategies, tools and measures for dealing with family violence in workplaces through the Workplace Equality and Respect Project, and should be subject to further detailed consideration and consultation with experts and stakeholders by means of a separate review.

In relation to the application of occupational health and safety laws, the Commission considers that there is scope for a greater role for WorkSafe Victoria to support workplaces that respond to family violence, and any future work it embarks on in connection with integrated health, safety and wellbeing approaches to complex problems. Such a role would capitalise on WorkSafe Victoria’s expertise in and capacity for engaging with workplaces large and small throughout Victoria on a broad range of workplace matters. It would also bring efforts currently made in a piecemeal, ad hoc fashion into the sphere of core government business.

This would require WorkSafe Victoria to have a detailed understanding of the workplace impacts of family violence and a familiarity with workplace strategies for preventing and responding to such violence. To this end, the Commission suggests that the Victorian Government facilitate the involvement of representatives of WorkSafe Victoria in the Workplace Equality and Respect Project—for example, as part of the project’s advisory group. We also suggest that Our Watch consult with WorkSafe Victoria as part of the Workplace Equality and Respect Project to identify opportunities for WorkSafe Victoria to lead future workplace strategies relating to family violence.

As major purchasers of goods and services, governments can use their purchasing power and procurement policies to encourage the implementation of improved workplace policies and practices by the organisations with which they contract. For example, members of the Victorian Government’s Government Legal Services Panel are required to commit to a range of conditions aimed at achieving some broader social justice benefits, including the provision of pro bono legal services, equal opportunity practices in the workplace, the briefing of female barristers, and adherence to model litigant guidelines.168

The Commission proposes that, in reviewing options for invoking equal opportunity and OHS frameworks to address family violence, the Victorian Government also identify ways in which its procurement policies can incorporate requirements for employer organisations with which it contracts to provide family violence-related information, support, and/or leave entitlements to their employees.
Recommendation 190

The Victorian Government should ensure that the inclusion of family violence leave in all public sector enterprise agreements is accompanied by access to suitable support services and referrals, as well as adequate planning, training and resources to equip managers and human resources staff to communicate and implement the leave entitlements.

Recommendation 191

The Victorian Government, through the Council of Australian Governments, encourage the Commonwealth Government to amend the National Employment Standards in Part 2-2 of the *Fair Work Act 2009* (Cth) to include an entitlement to paid family violence leave for employees (other than casual employees) and an entitlement to unpaid family violence leave for casual employees [within 12 months].

Recommendation 192

On receipt of Our Watch’s Workplace Equality and Respect Project final report, the Victorian Government should:

- begin implementing best-practice workplace programs in all public sector workplaces in order to:
  - enable them to build respectful and gender equitable cultures
  - ensure that they have suitable policies for family violence victims
  - provide adequate responses to and not allow for collusion with family violence perpetrators
  - build skills and support staff in taking bystander action
- support the maintenance of the proposed web-based portal or database of program models, tool kits, training resources and packages for application and use in all workplaces
- review and report on options for using existing regulatory frameworks and government procurement policies to support all Victorian employers in implementing best-practice family violence policies [within 12 months of receipt of the final report].
The workplace

Endnotes

1 Transcript of Kearney, 10 August 2015, 2509 [10]–[14].
2 See, eg, Statement of Bignold, 13 July 2015, 6 [28]–8 [37], 12 [58].
3 Statement of 'Jana', 16 July 2015, 1 [7], 2 [13], 5 [31], 9 [36]–[37].
4 Statement of Kun, 10 July 2015, 10 [41].
7 Ibid, Table 6.
8 Ibid 10, Table 9.
9 Community consultation, Melbourne, 6 May 2015.
10 McFerran, above n 6, 10, Table 8.
11 We also touch on this issue in the context of the police force in Chapter 14.
13 Leyla Moghimi v Elana Construction and Developing Group Pty Ltd [2015] FWC 4864. A subsequent application by the employer to appeal the decision was refused: Elana Construction and Developing Group Pty Ltd v Leyla Moghimi [2015] FWCFB 7476.
14 Leyla Moghimi v Elana Construction and Developing Group Pty Ltd [2015] FWC 4864, 22.
15 Ibid 23.
16 Ibid 59.
17 The Young Men’s Christian Association of Victoria, Submission 196, 9.
18 Transcript of Kun, 16 July 2015, 453 [28]–454 [5].
19 City of Whittlesea–01, Submission 714, 29.
20 Cox, above n 5, 113.
22 Statement of Dyson, 4 August 2015, 11 [48].
24 Ibid.
27 Ibid 8.
30 Powell, Sandy and Findling, above n 23, 10–12.
31 Women’s Health Association of Victoria, Submission 509, 13; Women’s Health Grampians, Submission 824, 11; City of Ballarat, Submission 146, 4.
32 McAuley Community Services for Women, Submission 480, 38–40.
33 White Ribbon Australia, Submission 880, 8; Australian Education Union Victoria, Submission 235, 9; Child and Family Services Ballarat Inc, Submission 687, 2.
34 Women’s Health Victoria, Submission 514, 19–20; Women’s Health Loddon Mallee. Submission 772, 11; Mallee Family Violence Executive, Submission 617, 15–16; Castlemaine District Community Health Ltd on behalf of Health and Community Services Sector—Mount Alexander Shire, Submission 211, 1; Melton City Council, Submission 538, 13; Women’s Health and Wellbeing Barwon South West Inc, Submission 780, 25.
36 Women with Disabilities Victoria, Submission 924, 10.
37 The Young Men’s Christian Association of Victoria, Submission 196, 3–7.
38 City of Melbourne, Submission 798, 7–8.
39 Darebin City Council, Submission 222, 11.
42 Robyn Dale and Ludo McFerran, Submission 854, 4.
49 Ibid 5.
50 Ibid 11.
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52 Department of Justice and Regulation, Family Violence Support Guidelines and Related Policy, above n 51, 1.

53 Court Services Victoria, ‘Request for data and information’ (2 July 2015), 2, produced by Court Services Victoria in response to the Commission’s request for information dated 5 June 2015.

54 Magistrates’ Court of Victoria and Children’s Court of Victoria, ‘Magistrates’ and Children’s Courts—Information Request Response’, 10, produced by the Magistrates’ Court of Victoria and the Children’s Court of Victoria in response to the Commission’s request for information dated 5 June 2015.


57 Ibid Appendix 1, 347–8.

58 Ibid Appendix 1, 352.


61 Correspondence from Department of Justice and Regulation to the Royal Commission into Family Violence, 22 January 2016.

62 White Ribbon Australia, Submission 880, 1–2.

63 Ibid 7.

64 See, eg, Department of Justice and Regulation, Reducing Violence Against Women and Their Children, above n 35, 5, 9; Department of Premier and Cabinet, ‘Meta-evaluation of the Preventing Violence against Women in our Community Project’, 46–53, produced by the State of Victoria in response to the Commission’s Notice to Produce dated 5 June 2015.


67 Chung, Zufferey and Powell, above n 66, 39.

68 Powell, Sandy and Findling, above n 23, 33–4. See also Department of Premier and Cabinet, Meta-evaluation of the Preventing Violence against Women in our Community Project, above n 64, 55, 102.

69 Powell, Sandy and Findling, above n 23, 33.

70 Department of Justice and Regulation, above n 65, 49.

71 The Young Men’s Christian Association of Victoria, Submission 196, Attachment 2, 35.

72 Powell, Sandy and Findling, above n 23, 39.

73 City of Whittlesea—01, Submission 714, 29.

74 Statement of Nagle, 28 July 2015, 6 [27].

75 Powell, Sandy and Findling, above n 23, 19–20.

76 Ibid 27.

77 The Young Men’s Christian Association of Victoria, Submission 196, 6.

78 Powell, Sandy and Findling, above n 23, 27.

79 Ibid 24.

80 Chung, Zufferey and Powell, above n 66, 55–1.

81 Powell, Sandy and Findling, above n 23, 43–44.

82 Anonymous, Submission 161, 4.

83 Robyn Dale and Ludo McFerran, Submission 854, 7.

84 Craig O’Donnell, Submission 657, 1.

85 Ibid. 2015.

86 Australian Council of Trade Unions, Submission 521, 5.

87 Transcript of Kearney, 10 August 2015, 2511 [8]–[15].

88 Phil Cleary, Submission 470, 3.

89 Transcript of Stracke, 10 August 2015, 2511 [29]–2512 [3].

90 Transcript of Kun, 16 July 2015, 455 [14]–[27].


92 Ibid 9 [2.31].

93 Productivity Commission (Cth), ‘Workplace Relations Framework: Productivity Commission Inquiry Report Volume 1’ (Inquiry Report No.76, November 2015) 545. The ACTU told the Commission that over 1.6 million employees now have access to paid domestic violence leave negotiated by their unions and employers in workplace agreements: Australian Council of Trade Unions, Submission 521, 5. This figure appears to encompass employees covered by enterprise agreements as well as government employees covered by directives federally and in Queensland and Tasmania, awards in New South Wales, guidelines in the Northern Territory and policies in South Australia: Australian Council of Trade Unions, ‘Implementation of Domestic Violence Clauses—An Employer’s Perspective’ (November 2015) 3 n 1.


95 Ibid Clause 4.3.3.1.

96 Ibid Clause 4.3.4.

97 Statement of Nagle, 28 July 2015, 5 [26].

98 Transcript of Paroz, 10 August 2015, 2508 [18]–[28].


100 Ibid 2 [15].


129 Victorian Trades Hall Council, Submission 562, 5–6.


131 Ibid.


133 Powell, above n 26, 41–42.


135 Ibid s 22.


137 Statement of Paroz, 14 July 2015, 3 [22]. In evidence, Ms Paroz stated that the number of people who had taken family violence leave had increased slightly to 22 people as at August 2015: Transcript of Paroz, 10 August 2015, 2516 [30]–2517 [1].

138 Transcript of Paroz, 10 August 2015, 2517 [2]–[11].


140 Australian Law Reform Commission, above n 113, 440 [18.38] (original citations omitted).

141 Ibid 431 [18.2], 440 [18.39].

142 Ibid 442–443 [18.47].

143 Ibid 440–441 [18.40].

144 Australian Council of Trade Unions, Submission 521, 11.

145 Our Watch –2, Submission 922, 34.

146 Ibid 27.


149 Cooklin et al, above n 149, 10.


151 Transcript of Stracke, 10 August 2015, 2515 [6]–[11].

152 Craig O’Donnell, Submission 657, 1.

153 Productivity Commission (Cth), above n 93, 550.


155 Statement of Kun, 10 July 2015, 9, [40]; Transcript of Kun, 16 July 2015, 451 [26]–[30].

156 Productivity Commission (Cth), above n 93, 550.

157 Fair Work Act 2009 (Cth) s 61. The NES do not apply to employees who fall outside the Fair Work regime, such as certain public sector employees: see Fair Work Act 2009 (Cth) ss 13, 14, 55, 61. Employers and employees not covered by the Fair Work Act 2009 (Cth) are covered by the applicable state industrial relations system. Further, while full-time employees must be provided with conditions that meet all 10 standards, casual employees are paid a loading in lieu of some of the entitlements.

158 Fair Work Act 2009 (Cth) ss 87, 96, 104.

159 Ibid s 65.


161 Australian Council of Trade Unions, Submission 521, 9.


163 Ibid, above n 93, 552.


166 Australian Council of Trade Unions, Submission 521, 7.

167 Ibid 8.

168 Modern Awards are reviewed by the Fair Work Commission every four years and updated where necessary: Fair Work Act 2009 (Cth) Division 4.


171 Ibid 4 [12].


174 Transcript of Paroz, 10 August 2015, 2508 [5]–[15].

175 Statement of Paroz, 14 July 2015, 3 [22]. In evidence, Ms Paroz stated that the number of people who had taken family violence leave had increased slightly to 22 people as at August 2015: Transcript of Paroz, 10 August 2015, 2516 [30]–2517 [1].

176 Ibid s 65.

177 The NES do not apply to employees who fall outside the Fair Work regime, such as certain public sector employees: see Fair Work Act 2009 (Cth) ss 13, 14, 55, 61. Employers and employees not covered by the Fair Work Act 2009 (Cth) are covered by the applicable state industrial relations system. Further, while full-time employees must be provided with conditions that meet all 10 standards, casual employees are paid a loading in lieu of some of the entitlements.


157 Australian Education Union Victoria, Submission 235, 19.

158 Victorian Equal Opportunity and Human Rights Commission, Submission 609, 10–11; Victorian Trades Hall Council, Submission 562, 6–8; Australian Education Union Victoria, Submission 235, 17–18; Australian Council of Trade Unions, Submission 521, 10; Australian Services Union—Victorian and Tasmanian Authorities and Services Branch, Submission 482, 27–8.

159 Victorian Equal Opportunity and Human Rights Commission, Submission 609, 10–11; Victorian Trades Hall Council, Submission 562, 8.


161 Equal Opportunity Act 2010 (Vic) s 18.

162 Ibid s 6.

163 Ibid s 7.

164 For example, employees are required to have completed a ‘minimum period of employment’: see Fair Work Act 2009 (Cth) ss 382–4. Employees will also not be protected from unfair dismissal where they earn above the high income threshold: see Fair Work Act 2009 (Cth) s 382.


166 Fair Work Commission, Directions, Family and Domestic Violence Clause (AM2015/1), 30 November 2015.


38 Sustainable and certain governance

Introduction

The Royal Commission’s terms of reference require it to, among other things, ‘identify and focus on practical short, medium and long-term systemic improvements to Victoria’s current response to family violence and the need for this response to be sustainable into the future’. The Commission therefore investigated systemic responses to family violence in different systems and considered how government agencies and community organisations might better integrate and coordinate their efforts.

This chapter proposes a governance system to support overall reform. Governance is particularly important because of the complexity of family violence and the fact that many systems are involved in the response to it. Without strong governance arrangements to underpin these systems, family violence can fall between the gaps and not attract the policy attention and investment it requires and deserves. For individuals seeking to engage with agencies or services, the unnecessary complexity, confusion, duplication, service gaps or inconsistent practices that are identified in this chapter and throughout this report can compromise safety or compound the effects of the violence, or both.

For these reasons the Commission considered whether the existing governance structures and consultative forums are working effectively and identified areas in which they can be improved.

The first section of this chapter briefly outlines the recent history of family violence governance arrangements in Victoria and how the family violence reforms of the mid-2000s evolved into the arrangements in place today. The second section of this chapter considers evidence and submissions the Commission received about how the existing arrangements are failing to deliver on their promise and could be improved. There were a range of consistent themes. For example, many individuals and organisations expressed frustration at a fragmented and dislocated system, with disparate governance and consultative arrangements running parallel and, occasionally, at cross-purposes. The absence of agreed goals and a system for overseeing the overall performance of the family violence system was also highlighted as a concern.

In the final section of this chapter the Commission makes recommendations for a new system architecture. This includes recommendations for a Statewide Family Violence Action Plan, arrangements for supporting regional governance, a clear focus on prevention and the establishment of a dedicated agency to provide expert independent oversight and monitoring. It is intended that these changes will promote greater coordination, consistency and accountability throughout the state, without stifling innovation and tailored approaches at the local level.

The Commission recognises the need for strong political leadership and bipartisanship to ensure that family violence remains a central consideration in policy-making and investment decisions. This will provide stability and consistency for service providers and the people they support. We make a number of recommendations to embed the continued consideration of family violence in all levels of government, drawing on clear goals and shared principles.

The Commission also proposes that the voices and experiences of victims of family violence directly inform service planning and performance evaluation, to ensure that the system is designed to suit victims’ needs, rather than being based on bureaucratic convention or convenience. Family violence governance arrangements will be ineffective if they fail to take account of the needs of the people and families they are intended to support.
Context and current practice

Following is a brief overview of the historical development of the family violence system and in particular the reforms in the mid-2000s, which were intended to create an integrated family violence system. Chapter 4 provides a more comprehensive history. The second part of this chapter then describes the current governance arrangements.

Historical development

From the late 1960s onwards, many women worked to expose the extent of family violence and keep women and children who were victims of such violence safe. Much of their work was done at a grass-roots level, without the benefit of formal support structures at the government level.

In the mid-2000s a series of reforms were implemented to formalise the governance arrangements for the various systems and processes in place to address family violence. One of the main objectives of the governance arrangements was to achieve an integrated family violence system. Describing the system before the reforms, Dr Rhonda Cumberland, Chief Executive Officer of Good Shepherd Australia New Zealand, stated:

Well, in the pre-integrated period there was no nuance or real complexity, let me be blunt. It was simply you came into one part of the system, you might have come through via Victoria Police, you might have come through via a women's service, you might have come through via an intervention order through a legal support program. But those programs never spoke to each other. Hence, as a service provider we had very few options that we could provide to women. It was one way or no way at all. Of course, those systems failed and women were subjected to repeat incidences of violence. The system did not, as a system, protect or give her options or in any way treat her as an individual with particular sets of circumstances where she might exercise some decision about what might happen to her.²

The introduction of the Victoria Police Code of Practice into the Investigation of Family Violence in 2004 represented the first step towards a multi-agency integrated response to family violence in Victoria. For the first time, police were required to make referrals to family violence services when they attended a family violence incident, regardless of whether police took further action.³

In 2005 the Statewide Steering Committee to Reduce Family Violence plotted a course toward an integrated family violence system in its report titled Reforming the Family Violence System in Victoria.⁴ The vision of the Steering Committee was a response to family violence in which all parts of the system focused on the safety of the victim—including by managing perpetrator risk. The goal was to build an 'integrated family violence system' that would bring together all key services to ensure that 'women receive an appropriate response regardless of the pathway through which they choose to receive assistance'.⁵ The report stated:

Family violence is a problem that cannot be addressed by one sector or service alone or when services work in a fragmented and inconsistent way. The model proposed in this paper will bring together government and non-government agencies, including the police, justice system, housing and community services to work together to provide an effective and consistent response to family violence.⁶

The report’s recommendations went beyond coordinating services and referral pathways: the vision was for a fully integrated response supported by regional implementation to allow for local circumstances.⁷ The report said that an integrated approach is ‘critically dependent on agencies across the service system agreeing and articulating what an integrated system means and the components that are necessary to ensure that an integrated response by the justice system and victim support services can be achieved’.⁸
The report noted, that while there were local examples of organisations working together and other positive steps to improve responses, this was the first attempt to integrate a family violence response at the statewide level. The committee concluded:

Integration of services is more than co-ordinated service delivery – it is a whole new service. Co-location of agencies, agreed protocols and codes of practice, joint service delivery, agencies reconstituting or realigning their core business to confront the challenges posed by a broadened conception of the problem: these are the key indicators of an integrated response.

One of the features of the Victorian reforms is that the roll-out was statewide. Elsewhere, an integrated approach had been applied at the local level as ‘the operation of such initiatives is relatively easy to influence monitor and evaluate’. The achievement of an integrated approach across all of Victoria was recognised as a challenging but important aspiration.

Among the elements of the integrated system put forward by the Committee in 2005 were the following features:

- multiple entry pathways to ensure that a person entering the system received a consistent response regardless of the entry point
- expanded and improved support services that embrace diversity
- individual advocacy for women and children at all points in the system
- common risk assessment and referral processes
- consistent case coordination
- intensive case management for high-risk and complex-needs families
- a more streamlined justice response through legislative and practice change
- longitudinal tracking of cases
- effective data collection and recording that includes data on Aboriginal and Torres Strait Islander peoples, culturally and linguistically diverse communities and women with disabilities
- advocacy at a systems level, informed by experiences in advocating for individuals
- effective and efficient monitoring and evaluation processes mechanisms.

This broadly correlates with the features of an integrated response to family violence identified by the Australian and New South Wales law reform commissions in their 2010 report.

As a result of the Statewide Steering Committee’s report, a statewide and regional governance structure involving courts, police and specialist family violence services was introduced to build an integrated response to family violence. Other important developments from this era included:

- enactment of the Family Violence Protection Act 2008 (Vic), which set out objectives for the family violence intervention order system, introduced family violence safety notices, and extended protection to a wider range of family violence victims
- community–government partnership governance structures that supported the development and implementation of the Indigenous Family Violence 10 Year Plan: Strong Culture, Strong People, Strong Families
- oversight arrangements for the development and implementation of the Family Violence Risk Assessment and Risk Management Framework (also known as the Common Risk Assessment Framework, or the CRAF).

These reforms, often referred to as the ‘first generation’ of governance arrangements, set a strong foundation for the current family violence system.
Governance structures from the mid-2000 reforms

The Victorian Government’s submission to the Commission outlined the various statewide and regional structures established in the years following the release of the *Reforming the Family Violence System in Victoria* report in 2005, describing these as the ‘beginnings of an integrated family violence system’. At the statewide level, these included:

- establishment of a Family Violence Statewide Advisory Committee, which met quarterly and consisted of key government, sector and statewide representatives, co-chaired by the Department of Planning and Community Development and Victoria Police, to provide advice to government on the progress of the reforms and on the direction and issues related to the reform program (renamed in 2011 as the Violence Against Women and Children Advisory Forum)
- regular meetings between relevant senior ministers and the establishment of a Family Violence Interdepartmental Committee, a regular meeting of senior executive officers with relevant portfolio responsibilities
- a Family Violence Roundtable—a biannual meeting of all stakeholders.

In addition, the Indigenous Family Violence Partnership Forum was established following the release of the Indigenous Family Violence Task Force Report (2003) to provide a forum for ongoing, high-level dialogue between government and Aboriginal communities. Chapter 26 provides more detail about the forum and the task force’s report.

Current governance arrangements

The main features of the current governance arrangements in Victoria include:

- a ministerial task force, chaired by the Premier and attended by relevant ministers, meeting monthly to set strategic directions for addressing family violence. This is now a standing sub-committee of Cabinet
- family violence regional integration committees
- the Indigenous Family Violence Regional Action Groups and the Indigenous Family Violence Partnership Forum
- Violence Against Women and Children Advisory Forum—a quarterly meeting for policy discussion and consultation attended by government, justice and community agencies.

In its submission, the Victorian Government also highlighted governance arrangements made as a consequence of this Royal Commission, including ministerial roundtables convened on a temporary basis and a Family Violence Royal Commission Interdepartmental Committee.

The Commission was also informed of regular meetings of the Victorian Secretaries Board, which consists of seven departmental secretaries, the Chief Commissioner of Police and the Victorian Public Service Commissioner.

Mr Chris Eccles, Secretary of the Department of Premier and Cabinet, told the Commission that the Victorian Secretaries Board has three primary responsibilities: coordination, leadership and stewardship. He went on to say it could play an important role in guiding the Victorian Government response to family violence because ‘[i]t is the perfect forum for a matter that has whole-of-government significance that presents in complex issues’.
Figure 38.1 shows the current governance arrangements.

Figure 38.1 Governance architecture: Victoria

Source: State of Victoria, Submission 717, 33.
Regional arrangements

Governance arrangements for integrated family violence systems at the regional level have been in place since 2006. The role and responsibilities of family violence regional integrated committees were set out in *Guiding Integrated Family Violence Service Reform 2006–2009*. These regional committees were intended to provide a forum to support coordinated responses to family violence at the local level. They were given nine priorities:

- establish regional coordination and planning structures
- work together to provide quality services for clients
- develop clear referral pathways and intake processes
- develop continuous improvement strategies
- ensure access by Indigenous Victorians
- ensure access by diverse groups—including culturally and linguistically diverse people and lesbian, gay, bisexual, transgender and intersex people
- focus on children and young people
- develop critical linkages
- ensure workforce development to support quality services

Some regional committees identified additional priorities such as primary prevention and/or a focus on children and young people.

The regional committees were intended to bring together local representatives of the sectors that made up the integrated family violence system. Each committee was to be overseen by a Regional Integration Chair and supported by a Family Violence Regional Integration Coordinator (RIC). Funding for the establishment and implementation of these arrangements, including funding for the role of the RIC, was provided by the (then) Department of Human Services to auspice agencies that were responsible for recruiting, employing and managing the RIC on behalf of the regional committees.

The family violence regional integrated committees have been represented through nominated chairs and RICs on the Family Violence Statewide Advisory Committee, and later the Violence Against Women and their Children Advisory Forum, to provide regional perspectives on implementation challenges and opportunities to the Victorian Government. Domestic Violence Victoria convenes biannual meetings of chairs and RICs to explore emerging challenges and opportunities, as well as provide an information-sharing forum.

The structure and roles of the committees were reviewed and the (then) Department of Human Services and this review provided further guidance to support more consistent arrangements across the state in 2013.

In Chapter 26 the role of Indigenous Family Violence Regional Action Groups (IFVRAGs), established in 2003, is discussed. IFVRAGs have a leadership role in implementing community-led responses that aim to educate, prevent, reduce and respond to family violence in Aboriginal and Torres Strait Islander communities.

The regional committees and IFVRAGs work to pursue projects and initiatives to support responses to family violence in Aboriginal communities. While the mechanisms and effectiveness of these collaborations vary across the state, these relationships are crucial for developing culturally-appropriate practice throughout the system in responding to Aboriginal people affected by family violence.
Challenges and opportunities

Family violence requires government to set policy and fund or provide services in many different areas, including health, human services, courts, police, correctional services, legal services and education. Community organisations provide services to victims and perpetrators under service agreements with government. All of these services contribute to the response to family violence.29

The Commission heard about the many efforts agencies and non-government organisations make to respond to the needs of victims of family violence and to ensure that perpetrators take responsibility for their behaviour. It was told that there is often cooperation, and various levels of service coordination and integration, between people and agencies working in different parts of the system at the local, regional and state levels.

Despite this, the evidence before the Commission was that the existing system faces problems. As outlined here, the Commission was told of a system that is fragmented and broken into 'silos', with diffuse responsibilities spread across different departments, agencies and community organisations. The importance of effective system oversight and a shared understanding of how best to respond to family violence was emphasised. In particular, the Commission was told there is a need for strong political leadership and bipartisanship in the area of family violence, to ensure that it is considered core government policy. The need for victims' voices and stories was also highlighted.

Fragmentation and lack of coherence

Lack of integration in policy and service responses

Although submissions to the Commission spoke positively about the reforms of the mid-2000s, many noted that the potential to build a system that provides an integrated response to family violence has not been fully realised. Court Network described a ‘patchy and incomplete reform process’ which has resulted in ‘cobbling together responses, without understanding how changes in one part of the system impact on another’.30

Court Network also noted:

A coherent governance structure with clear and shared Ministerial accountability to guide the reforms has not been maintained ... Integration at the local level has lacked clear direction and guidance about ‘what’ and ‘how to’ integrate – there was no ‘blueprint’ or direction for integration that might have assisted in developing common understandings about how to achieve integration.31

The Commission heard that implementation of the reforms failed to maintain momentum in the long term.

Dr Cumberland said in evidence:

We hoped for more momentum in the reforms that were set out in 2005. We built the reforms unfortunately for a sprint race, where we should have built them for a marathon, and we are feeling the consequences of that today. We now know that the biggest challenge in any policy reform, whether it be in family violence or in any social policy, economic policy or reform, the challenge is to have it last the distance ... it’s about a longer term agenda and it’s about what we leave for next generations. So how we use all our policy capacity to build tools and structures that ensure reform can last the distance I think is a big challenge, and it’s something we failed to do back then.32
Many witnesses criticised the absence of governance processes to support better services for victims and perpetrators of family violence. Ms Helen Campbell, Chair of the Eastern Metropolitan Family Violence Partnership, told the Commission:

In terms of the mechanisms for integration I think a lot of the conversation in recent years has really focused around services integration and has ignored the policy, strategy and legislative and authorising environment integration that enables this to happen.33

The need for a system owner

The Commission was told that, although various departments had responsibility for individual parts of the family violence system, there was no ‘system owner’. Ms Fiona McCormack, Chief Executive Officer of Domestic Violence Victoria, told the Commission:

Say for us as a peak body, if I want to go and talk to government about how the system is going there’s nowhere to go to. I might go and talk to DHHS about what they are doing. I might go to police and talk about what they are doing. But in terms of anything that’s working together or towards common objectives there’s nowhere.34

It was argued there should be some central point of accountability for all the systems that have a role in preventing and responding to family violence. In its submission, Good Shepherd Australia New Zealand told the Commission:

The main governance challenge would appear to be identifying a central point for governance of the system. The most obvious central point would be the Premier and Cabinet. The present system of a group of Ministers working as a Ministerial Council has been problematic. Ministers have competing priorities and family violence has never been on top of the list.35

Stakeholders felt it was important to ensure that government departments do not shift responsibility for family violence between each other. Although different departments and agencies have different roles in responding to family violence, there was a view that overall responsibility for the operating of the system should be shared. Mr Dave Heatley, Principal Advisor, New Zealand Productivity Commission stated:

I think whole-of-system oversight obviously doesn’t fit well within one agency, one existing government department. Defining outcomes I think is something that is a role of government rather than agencies. Overall system performance again cuts across agencies, because no one agency is in a position to determine it by themselves.36

Good Shepherd Australia New Zealand further noted, ‘Under the current system everyone is responsible for a part, which often means no one is responsible for the whole’.37

A focus on programs rather than people

The Commission was also told that a focus on programs rather than people had contributed to a framework where departments and agencies operated in silos. These programatic barriers can result in multiple referrals to different agencies and programs, rather than a response to all aspects of a person’s experience. As one victim put it:

While we have received verbal assurances of sympathy (and disbelief) at what has occurred, there is a resounding pattern. Every person who has been contacted has referred us across to another agency. Our ‘file’ has just been sent around in a big circle. Not one person or agency has at any point really looked into what is happening to me, my children and now my partner.38
This problem was acknowledged by departmental secretaries who gave evidence to the Commission. Ms Gill Callister (former Secretary of the Department of Human Services and current Secretary of the Department of Education and Training), gave the following evidence:

I think part of the problem is that the programmatic lens, which is the lens that the system is designed to view the client through, is the label that you get. So it’s a focus on program and problem rather than people. So some of the examples … that the Commission will be familiar with after lots of evidence are that if you appear in the homelessness system as a victim of family violence you are largely seen through the lens of homelessness; if you appear in the mental health system as a victim of family violence you will be seen through a mental health lens; if you appear in the family violence system as a victim but you have a mental illness you will be seen perhaps first through a family violence lens; and you won’t necessarily get much attention as a child until you appear in a child system.

So it’s about sort of I think changing the lens from a program-dominated lens to understanding the whole person and what’s going on. One of the consequences of those lenses is people are referred to a service for each component, and each service does a plan and each service has a kind of intervention plan with the client.39

This lack of integration is also seen in the fact that family violence, sexual assault and Child Protection have traditionally been dealt with separately in policy development and service provision, despite the obvious link between them. This is described further in Chapters 11 and 12.

Lack of shared understanding
As discussed elsewhere in this report (see, for example, Chapters 11, 18 and 26), there are persistent philosophical and theoretical differences in relation to policy and service provision in the area of family violence.

It was said there is still some way to go to reach a shared understanding within government and the not-for-profit service sectors about how best to prevent and respond to family violence. This has been described in the following way:

The structural fragmentation in the family violence sector also involves a great deal of philosophical and organisational cultural variation in the way that family violence is understood, and the way that responses to it are framed within organisational cultures.40

In relation to violence against women, Ms McCormack said in her evidence:

... fundamentally one of the core issues that we have is a lack of gender literacy amongst the public sector. So it’s really, really difficult even having discussions around what we need to be doing in family violence or how regional committees are going when we are talking a completely different language. We don’t even have a fundamental understanding of the causes of the impact of gender on population health outcomes.41

The Commission heard that this lack of a shared understanding or language can inhibit the development of effective responses.

Disconnection between state government and regional bodies
The Commission heard concerns about the state government’s lack of engagement with the regional family violence governance structures in recent years.42 Witnesses noted that the regional governance arrangements had been developed with a strong state government ‘centre’ but that whole-of-government oversight had diminished. This meant that regional committees had effectively been operating in isolation. The Gippsland Integrated Family Violence Service Reform Steering Committee told the Commission ‘Consequently there have been several regional initiatives developed without consideration of family violence from a policy or practice level at a state wide level’.43
This issue was also reflected in concerns about the lack of a formal process by which peak organisations and regional family violence governance bodies could inform government about problems or positive developments or discuss proposed changes. Ms Tammy Smith, Regional Integration Coordinator, Ovens Murray Goulburn Integrated Family Violence Network, said to the Commission:

We had a structure where we could actually feedback up into and alert the ministers and the government of what the localised and statewide concerns were. We don't seem to have that at all at the moment. So it appears that we need some sort of structure in place where we can actually have – whether it’s an authorising body or a committee, I’m not sure, but we need some sort of structure in place where we can actually feed up and feed down.44

Ms Kym Peake, then Acting Secretary of the Department of Health and Human Services, said there was a three-year evaluation of the regional governance structure under way, but that some feedback had suggested that guidance was needed on state government directions.

... what needs to happen is that there is a state framework which describes what is our approach to improving the way that we deal with family violence which cascades down to a local plan, and I think that sort of structure and resourcing could then be incredibly powerful in helping to develop that local plan, to track progress against that plan and to share learnings across the state about what is working.45

The Commission was told that the role of family violence regional integration committees, their reporting lines to government and their relationship with other regional bodies should be more precisely defined.46 On this point, Ms Peake told the Commission:

That structure really has evolved over the last 10 years as a very organic, ground-up way of bringing together all of the professionals who may have a role in better supporting particularly victims but increasingly also responding to perpetrators of family violence. So its strength is that it has built those relationships, but I think, as you have heard, the challenge for that structure is that it is neither embedded in any sort of statewide structured approach to thinking about where to put your effort, nor is it supported to be really clear about what the priorities, accountabilities and reporting on results should look like.

I know we will move through to how we think about the whole sort of governance and stewardship model, but the solution to better supporting joining up of organisations on the ground needs to be connected to both how there is that vertical connection to planning strategy, evaluation and accountability for family violence services specifically and for responses to people experiencing family violence specifically, but also the sort of horizontal connection to how are social service systems being organised and how are community safety strategies being given effect. As we move through that there will always be a place for place-based partnerships that bring together the professionals particularly focused on family violence, but they can be better supported, more structured and more accountable.47

The Commission also heard that in some regions, overlapping and inconsistent administrative boundaries set by different portfolios have created difficulties for regional family violence governance and service provision. This in turn has implications for victims seeking access to services. Ms Smith told the Commission:

So we don’t have a marrying up of the Department of Health boundaries with Department of Human Services boundaries and Victoria Police boundaries, which can create a few anomalies for some of our local government areas in terms of where they receive responses from and where our referrals go to in our region.48
The Commission notes that an independent review of regional development, led by former Premier and Regional Development Minister Mr John Brumby, has been conducted for the Victorian Government. It examined the administrative arrangements for delivery of services and governance arrangements of various portfolios in the state. The Victorian Government is working through the findings of the review. Ms Peake told the Commission that the intention is that any new regional governance arrangements will:

> ... connect government with local government, Commonwealth Government and community leaders to identify what the strategic plan is for a region, which then cascades down into what’s the specific actions that are going to be taken in that place to advance family violence.

The departmental secretaries suggested it would be desirable that, as part of these arrangements, there should be:

- guidance from government about a number of common statewide priorities but flexibility to supplement these with local priorities
- a focus on strategic place-based planning, including engaging non-government participants and obtaining information from local regions to inform central decision-making
- improved feedback in both directions, between government and the regional management forums
- a direct connection between the regional management forums and the regional integration committees, with possibilities including the committee chairperson being a member of the forum or otherwise participating in its planning processes.

Mr Eccles, Secretary of the Department of Premier and Cabinet, told the Commission that ‘regional governance is being addressed as part of a broader plan to set the direction of Victoria’s regional policy’.

### Victoria’s Regional Statement

In November 2015 the Victorian Government released *Victoria’s Regional Statement: Your Voice, Your Region, Your State*. The statement outlines arrangements for government administration and community consultation in rural and regional Victoria as well as initiatives in a range of areas such as employment, tourism and telecommunications. It confirmed that from 1 July 2016, regional partnerships will be formed in nine regions in rural and regional Victoria, replacing the regional management forums. The regional partnerships will bring together representatives from local business, education, social services and community groups with the three tiers of government, with the aim of connecting regional priorities with government decision-making processes. The partnerships will develop existing regional strategic plans and determine ‘actions and outcomes to progress economic and social priorities’. Each partnership will communicate directly with a rural and regional ministerial committee, providing a direct pathway for regional priorities into resourcing decisions by ministers and departments. The statement acknowledged that knowledge, expertise, resources and experience are present in all sectors—public, private and community—and that a change to one-size-fits-all approach often does not work.

### Leadership and a whole-of-government approach

In evidence to the Commission, Dr Cumberland stated that a whole-of-government approach was needed to ensure that family violence is treated as a priority:

> The first thing we have to do is to get our public sector system more involved in family violence. We can’t keep treating a mainstream problem in the margins. We have to move into this real whole government response ... It was an integrated response, but it was still deeply isolated from a whole-of-government perspective.
It would seem to me that we won’t make inroads until we really start to look at our departments and our government in a holistic way, our courts in a holistic way, and once and for all accept that family violence is not the filtered down problem at the end of the spectrum … Because if it’s having such an impact on the work that you do, in courts, in hospitals and in police and in support services, if it is having that impact, then don’t put it as number 10 on your list, put it at number one.60

**Strong political leadership**

Overwhelmingly, the evidence put to the Commission pointed to the importance of strong political leadership in bringing about a whole-of-government approach to family violence. The Commission heard that until recently this leadership has been lacking.

Mr Ken Lay APM, Chair of the Council of Australian Governments Advisory Panel on Reducing Violence against Women and their Children, highlighted the contrast between the political leadership shown by government and opposition members in making changes to reduce road accident–related death and injury and the approach to family violence:

> The political leadership was there that spoke about this, that understood it was important. Premiers, police ministers, road ministers knew what worked, knew what didn’t work, and we had a model as a result where I had never seen a group of agency heads so tight as they were in the road safety space. I think it was because of the political leadership. They felt empowered. They were game to actually challenge politics. Innovation flowed, investment flowed, legislation flowed; and I always take it back to that political leadership.61

In the past decade, ministers with portfolio responsibility for women have typically taken a ‘lead’ role in family violence. The current Victorian Government has appointed a Minister for the Prevention of Family Violence, The Hon. Fiona Richardson, who has actively advocated for change. As Mr Lay observed, recent statements by the Prime Minister and the Victorian Premier have been ‘… enormously empowering, I suspect, for people like the Chief Commissioner, for agencies, for the community, and people start to understand’.62

The Federation of Community Legal Centres submission emphasised the importance of government leadership on family violence:

> … from the top-down [there] must be strong leadership and multi-ministerial responsibility on this issue, including sending an inspirational message to the community that male leaders are prepared to put men’s violence towards women and girls at the forefront of public policy. It would demonstrate that violence is not only a women’s issue, but also a crisis that affects all Victorians and which requires a well-resourced and concerted effort in order to be effectively addressed.63

**A whole-of-government approach**

Submissions to the Commission argued that leadership on policy relating to family violence and violence against women must come from all parts of government at both political and bureaucratic levels. It should be backed up by clear arrangements to hold departments responsible for implementing the overall policy. For example, Women’s Legal Service Victoria recommended that:

1. The State Government create a governance structure that places responsibility for addressing and eliminating family violence across multiple Departments and Ministerial Portfolios.

2. The State Government develop protocols and processes that strengthen communication, collaboration and accountability across Departments and Ministerial portfolios.64
As part of the Victorian reforms of the 2000s, the Victorian Government supported the SAFER research project. This was an Australian Research Council Linkage Project and included a research stream into governance. The researchers found that the elements needed to drive whole-of-government reform included:

... the demonstrated commitment to reform and leadership provided by ministers, agency heads and senior managers; the involvement of community sector representatives; and the role of the Department of Planning and Community Development.

The importance of bipartisanship

Individuals and organisations spoke of the importance of ensuring stability and continuity in family violence policy and argued for a process that ensured that family violence reform was not dismantled every time a new government was elected.

In reflecting on the adequacy of existing arrangements, the Victorian Government has acknowledged the lack of robust governance structures. In its submission to the Commission, the Victorian Government observed, ‘We need lasting structures—with proper governance and accountability arrangements—which outlive the commitment of the current government to address the problem.’

The Commission notes that bipartisan commitment was shown by members of parliament at the joint sitting of the Legislative Assembly and Legislative Council on 26 November 2015. At this joint sitting victims of family violence, the Chief Commissioner of Victoria Police and representatives of a number of specialist family violence services addressed Victorian Parliament. The Premier, the Leader of the Opposition, and members of parliament from all parties also made their own contributions on the topic of family violence, acknowledging the harm it causes, its prevalence, and its disproportionate impact on women and children. They also acknowledged the need for a suite of mutually reinforcing strategies to tackle family violence, for the implementation of measures that are proven to work, and for reforms that will bring about cultural and attitudinal change in the long term.

System oversight

The Commission heard that there is no formal mechanism for planning and overseeing prevention of, and responses to, family violence. Such a mechanism is needed to ensure that departmental, functions, policies, services and funding relevant to family violence fit together rationally and respond to the needs of people affected by such violence.

Nor is there any process for evaluating the overall system or major system components such as police, courts or Integrated Family Services’ responses to family violence.

The Commission notes that in its new program to ensure that government agencies respond to sexual and family violence more effectively, New Zealand has recognised that there needs to be a cohesive whole-of-government approach with a clear understanding of who is leading the areas of service response.

The recent New Zealand Productivity Commission report argued that there was a need for a ‘system steward’ in New Zealand to oversee and actively manage the social service system. The responsibilities of a system steward include conscious oversight of the whole system, clearly defined outcomes, performance monitoring, consistent standards and regulations, data collection and dealing with system underperformance. The New Zealand Productivity Commission report treated these functions as falling within the concept of system stewardship. The report observed:

The role of system steward falls to the Government. This is because of its unique role as the major funder of social services, and its statutory and regulatory powers unavailable to other participants. Stewardship responsibilities can be spread over several bodies or agencies – for example, responsibility for monitoring performance could be assigned to a separate, independent, government entity. As part of stewardship, the Government has responsibility for the “enabling environment” for the social services system. Two particularly relevant enablers are budgeting for and funding social services, and ensuring a comprehensive data network that can boost the capabilities and effectiveness of all participants.
Overseeing implementation of reforms

In his evidence Mr Neil Comrie AO, APM, Implementation Monitor, Hazelwood Mine Fire Inquiry, warned that there was also a need for oversight to ensure that the recommendations of this Royal Commission were implemented. He commented:

[S]adly, with my long history in the government area ... there are many reports from reviews, inquiries that have not been fully implemented and I think it's worthy of note that some of these same issues keep re-emerging at subsequent inquiries. So I think the rigour and discipline that this monitoring process applies is really important to make sure that there is not only a commitment but a delivery of the undertaking.75

The Victorian Government has previously established monitors to oversee implementation of recommendations made by previous Royal Commissions and other inquiries. Mr Comrie held the statutory position of implementation monitor for the Victorian Bushfires Royal Commission and now monitors implementation of the recommendations made by the Hazelwood Coal Mine Fire Inquiry.76 In that capacity, Mr Comrie’s role has been to ‘ensure that the commitments made by the State in response to the Royal Commission and the Inquiry [were] implemented, and to comment on the efficacy of the implementation actions that were put in place’.77

In his evidence to this Commission, Mr Comrie explained that the responsibilities of the Victorian Government in implementing the recommendations of the Victorian Bushfires Royal Commission were assigned to particular agencies and that discussion between the implementation monitor and the relevant agency sometimes resulted in a modification of priorities. Mr Comrie told this Commission that the implementation process:

… provided me with the opportunity to go back to the department or agency and say, "Look, you have done these things, but when we have examined them we don’t actually think they are achieving what the Commission wanted to be achieved or we don’t think that it’s actually going to make a difference in the long run."

… I have made the point on a number of occasions that with the best of intentions sometimes an agency will commit to do something in the immediate aftermath of the inquiry or commission, but then with further examination they may find there’s actually a better way of doing something. It makes no sense to me to lock in to doing something in a way which is superseded or not efficient when another way has been identified. So we consider that. On a few occasions in my reports I have actually said that the State has opted to undertake this a better way but we agree with that because we believe it’s a more effective and efficient way of doing things.78

Mr Comrie said that having an independent monitor:

… sends out a very strong signal about the importance of the issues that are being addressed. Having a legislative background ... really sends out a very strong signal that the state is serious about addressing these issues.79

Independent oversight and monitoring of performance

One of the matters explored in the hearings was whether these two oversight functions— monitoring implementation of this Commission’s recommendations and independently evaluating the performance of the system as a whole—should be combined in a single body.

The departmental secretaries who gave evidence to the Commission discussed various options. Mr Eccles put forward the tentative view that the functions of conducting research into the operation of the system and monitoring the implementation of the Commission’s recommendations should be located in separate entities.80 He recognised, however, that a ‘blended’ model of monitoring the implementation of the Commission’s recommendations could then transition into a broader ‘assurance and reporting’ role.81
The importance of victims' voices in policy and service design

It was suggested to the Commission that listening to the experiences and voices of victims is crucial to assessing the effectiveness of the family violence system. There are several contexts in which victims might participate in policy development and system improvement. These include:

- having the opportunity to share their stories directly with those who have ongoing responsibility for making decisions, running agencies and delivering services, with a view to ensuring that people working in organisations that respond to family violence understand the nature and dynamics of that violence
- being consulted on policy proposals and reforms as a member of a standing committee or on an ad hoc basis
- providing direct feedback to services and agencies on their experience of the family violence system, with a view to guiding system improvement through either better complaints processes or surveys.

Various organisations representing victims of family violence already play a vital role in making sure that victims’ stories and experiences are reflected in their advocacy. Some research projects also seek to record and reflect the experiences of victims. ANROWS (Australia’s National Research Organisation for Women’s Safety) is funding a range of projects that use participatory and qualitative research methodologies involving victims/survivors of family violence. In its submission to the Commission it noted the importance of researchers ‘amplify[ing] the voice of women themselves, their articulation of their experience of violence, their needs and the needs of their children’.82

The Commission heard that victims’ voices should be heard more directly by policy makers and service providers. Vixen Collective, Victoria’s peer-only sex worker organisation, emphasised the importance of women being allowed to speak on their own terms:

- Listening directly to the voices of those affected.
- Understanding that those affected by violence must be considered the key stakeholders in the discussion.
- Recognising that when other interest groups are permitted to speak on behalf of those affected by violence, this both silences the voices of those directly affected and takes up space in which their lived experiences may be heard.83

A similar point was made by the Aboriginal Family Violence Prevention and Legal Service Victoria, which noted the importance of maintaining a focus on Aboriginal and Torres Strait Islander women’s individual voices in community-led strategies to prevent and eliminate family violence in Aboriginal communities:

- FVPLS Victoria wholeheartedly supports the notion that solutions to family violence impacting Aboriginal people lie within Aboriginal communities and that Aboriginal people must lead strategies to prevent and eradicate family violence in our communities. Community ownership and community-driven solutions are fundamentally important. However, it is crucial that community approaches do not result in the voices and perspectives of Aboriginal women being lost. Without reference to women or to gender, reliance on a ‘community voice’ can serve to reinforce pre-existing gendered power dynamics and silence Aboriginal women.84

A number of other submissions to the Commission emphasised the importance of victims having a voice in the reform of the family violence system. For example, Women’s Legal Service Victoria recommended strengthening victims’ participation in influencing change through the establishment of a peak advocacy organisation led by victims.85 It also supported government agencies, Victoria Police and the court system ‘[formalising] the participation of women who are victims of family violence in the development of reforms. This could be achieved through an advisory group structure’.86
Mr Eccles noted that, in evaluating the performance and efficacy of programs, qualitative assessments are often best served by speaking with the program users:

Data is not going to be able to capture every element of system performance. I would imagine they would be able to make a qualitative assessment of the system’s performance by talking to victims, families and perpetrators.  

**Community initiatives to capture victims’ experiences**

The Commission heard of a number of current community initiatives that seek to capture the experiences of people experiencing family violence.

The Centre for Non-Violence, an integrated family violence support service in the Loddon Campaspe region, is developing a ‘listening post’ model in consultation with women from the region who have suffered family violence and specialist family violence organisations. The model is being developed under the auspices of the Loddon Campaspe Family Violence Advisory Committee. It will pilot ‘listening post’ workshops with the women, with a view to informing advocacy and consultation sessions with services, police and court registry staff to improve family violence responses. The Family Violence Advisory Committee told the Commission:

The ‘listening post’ project aims to improve the family violence system response (family violence stakeholder culture, practice and advocacy) and its systems of accountability for women and children experiencing family violence in the Loddon and Campaspe region (Maryborough, Bendigo, Echuca and Kyneton).

The ‘listening post’ is an evidence based evaluation method of the family violence system response that enables family violence stakeholders to hear directly from the women their lived experiences of their practice.

Women with lived experience of family violence are recruited through trusted family violence stakeholders and supported to convey their lived experience of their family violence system response to relevant family violence stakeholders in a confidential safe setting.

The Commission was made aware of The Listening Project: Victims and Survivors Voices Heard, a series of workshops held on 3 December 2015 and hosted by the Victorian Parliament. The project provided an opportunity for family violence victims to tell their stories and offer opinions on how the current system can be improved. 

The Commission also heard about programs to promote advocacy work by victims, such as the Eastern Media Advocacy Program and the Safe Steps Family Violence Response Centre’s Media Advocacy Project.

Finally, the Commission learnt of another option for inviting victims’ input—a legal system victim impact statement. This involves victims describing the impact of the interaction with police on them in a written statement; has been said to serve ‘an important expressive function for the victim, and be instrumental in the development of “best practices” in the field.’
The way forward

Preventing and responding to family violence is a complex endeavour. There is no simple solution, no single source of expertise, and no guarantee that solutions advanced today will continue to be the most appropriate solutions in the future.

The Commission was told by numerous organisations and individuals that previous measures to make family violence a priority for all parts of government have not been sustained. Among the reasons for this were said to be the following:

- a lack of shared understanding and agreement throughout the community and service systems about the goals of family violence responses and the best way to achieve them
- a lack of sustained leadership
- loss of momentum following a change of government
- a lack of bipartisanship on policy responses to family violence
- a lack of accountability and oversight of the system
- the absence of machinery to support service providers in working in a more integrated and consistent way.

In response to this, the Commission proposes a governance framework that makes family violence a central consideration for all levels of government. It is intended to provide strong leadership and support effective and coordinated strategies to address family violence. In summary, this framework comprises:

- a bipartisan standing parliamentary committee on family violence
- a Cabinet standing sub-committee chaired by the Premier of Victoria
- a requirement for all ministers to report regularly on the risks and opportunities in their portfolio relevant to family violence
- Victorian Secretaries Board oversight of government administration arrangements for family violence policy
- a family violence policy unit located in the Department of Premier and Cabinet
- a reinvigorated Statewide Family Violence Advisory Committee, including representatives of the Indigenous Family Violence Partnership Forum as members
- a continuation of the Indigenous Family Violence Partnership Forum
- family violence regional integration committees, supported by Regional Integration Coordinators
- an independent Family Violence Agency established by statute
- mechanisms for ensuring that the voices of victims are heard and guide policy development and service delivery.

The Commission also proposes that the Victorian Government prepare a Statewide Family Violence Action Plan to guide implementation of the recommendations put forward in this report. This plan will include both prevention and response to family violence. In recognition of the importance of prevention the plan must include a discrete primary prevention strategy.

This section sets out the detail of the proposed framework, as well as the underpinning rationale and guiding principles.

Recommended principles for a statewide response to family violence

The Commission heard that although individuals, non-government organisations and government agencies have worked hard to respond to family violence, disparate approaches and the development of ‘silos’ have undermined coordinated efforts and consistency in responding to the problem. Reforms will succeed only if all parts of the system have a shared understanding of how best to prevent and respond to family violence. Defining the goals that guide the prevention of and the response to family violence will help to build this understanding.
The goals of the family violence system should be to:

- prevent family violence in all its forms and to establish and promote a culture of non-violence and gender equality
- keep victims safe—and in their homes and communities as much as possible
- hold perpetrators to account for their violence
- help victims find the assistance they need to rebuild their lives and reach their goals.

On the basis of the evidence and submissions, as well as its consultations, the Commission considers that the following principles should be adopted to guide the statewide response to family violence:

- Family violence is a fundamental violation of human rights. All members of society should be protected from such violence and be enabled to live free of it.
- Preventing family violence is the most effective way of protecting people from it in the long term.
- Ending family violence requires a change in the attitudes of individuals and in community attitudes that allow violence to be excused, justified or condoned. All elements of the community should be involved in ending family violence: government, business, non-government organisations, the media and communities should play a part.
- Priority should be given to early intervention in family relationships where violence is threatened or likely to escalate.
- Services for victims and perpetrators of family violence must be adequately funded.
- Family violence service systems must ensure the safety of all victims of family violence, regardless of the family relationship within which the violence occurs. The majority of those harmed by family violence are women and children. Services must be accessible and able to respond to a broad range of victims and types of family violence—including non-intimate partner violence and other less understood forms of family violence.
- All parts of the system should apply evidence based risk assessment and management and understand their roles and responsibilities for this.
- Services (whether universal or specialist) must treat victims with dignity and respect their choices. Service provision cannot be based on provider convenience. Services should:
  - empower victims and respect their needs and decisions
  - aim to reduce, as far as possible, the need to seek support from many different services
  - take account of factors that might increase the risk of someone being a victim or perpetrator of family violence—including poverty, locational disadvantage, disability, mental illness and substance misuse
  - respect differences in culture and identity while making it clear that family violence cannot be condoned in any community or culture
  - be consistent and predictable.
- Supporting children and young people should be central to family violence policies. This includes both child victims of family violence and children or young people who use family violence, some of whom might previously have been victims of it. Young people who use violence should be helped to change their behaviour.
- Services for victims of family violence should not be confined to providing crisis support but should also aim to support victims to recover from the effects of past violence and to rebuild their lives at their own pace.
- Those who use violence against family members should be held responsible for the violence and helped to change their behaviour. It should never be seen to be the victim’s responsibility to stop the violence. Those who use violence should always be held responsible for their actions, although this might not always require a criminal justice response. Stopping the violence is the way to ensure the safety of victims.
Making family violence a central government concern

At present, responsibility for family violence is diffused across a variety of government departments and agencies. This fragmentation has led to family violence policy and service design being pushed to the margins of broader government policy making, rather than being a central concern for all parts of government. Family violence has not been given the priority—in policy development and investment—it deserves. As a consequence, policies are vulnerable to changes of government and bureaucratic arrangements.

Family violence is a complex phenomenon, no single area in government can take entire responsibility for responding to it. In many instances the way that different policy decisions intersect with family violence will not be immediately obvious: responses to natural disasters, tenancy matters and liquor licensing, prenatal care and equal opportunity initiatives are examples of areas that have a relationship with family violence. A failure to identify intersections and overlaps between different government initiatives can lead to unintended policy consequences or a failure to seize opportunities.

Accountability for achieving the goals of the family violence system needs to be held at each level of the system—cascading down from ministers to government agencies and the service providers who work on preventing and responding to family violence. There should also be horizontal accountability, so that each system that responds to family violence has a responsibility to act in ways that support an integrated approach. No single sector can assume responsibility for safety, accountability and recovery outcomes: all have a role to play in ensuring that the gaps that people might fall through, are closed.

The importance of bipartisanship

Family violence is a problem so deeply embedded in our society and culture, and so widespread, that bipartisan support is required to maintain a sustained and coherent strategy.

The Commission’s recommendations are intended to encourage bipartisanship on family violence policy, to increase and build on community involvement in preventing family violence, and to support people who are affected by it. A bipartisan approach needs to be premised on a shared commitment to the principles set out in this chapter.

This commitment to addressing family violence means that the response to family violence can move beyond raising awareness of the nature and extent of the problem, towards a much more sustained focus on developing and evaluating initiatives that will have a real impact on the incidence of family violence. The Commission considers that Victoria is well placed to face the challenges ahead.

The establishment of a standing parliamentary family violence committee—as applies in the case of road accident deaths and injuries—would encourage development of a bipartisan approach to family. The family violence standing parliamentary committee should be clearly defined to support the goals of the family violence system and oversee matters relating to prevention and responses to family violence in Victoria. The role of the committee should be to:

- inquire into and report on any proposal, policy or legislation concerned with family violence
- examine and report to Victorian Parliament when legislation is introduced that might be relevant to family violence—including whether it has the potential to support or undermine the Statewide Family Violence Action Plan.

In doing so, the committee would need to liaise with the Scrutiny of Acts and Regulations Committee.
**Integrated and effective system architecture**

A whole-of-government response to family violence requires ‘system stewardship’. The Commission proposes a governance architecture that ensures oversight of the overall government response to family violence.

The architecture would also distribute functions such as monitoring, evaluation, data collection and funding across different parts of government. As noted, the goals of the family violence system relate to the areas of prevention, safety, accountability and recovery. The governance architecture is intended to meet these goals.

The Commission also makes a number of related recommendations in relation to coordinated approaches to funding (Chapter 41), data collection (Chapter 39) and prevention of family violence (Chapter 36).

**Continuing Cabinet involvement**

The Commission welcomes the establishment of a Cabinet sub-committee dedicated to family violence and recommends that a standing Cabinet sub-committee on Family Violence, chaired by the Premier, continue into the future. Establishment of that sub-committee recognises the priority to be accorded to family violence in government policy, and will enable discussion and reconciliation of different ministerial views. It will support integrated whole-of-government decision-making processes at the highest levels.

**The role of the Cabinet sub-committee**

The primary role of the Cabinet sub-committee would be to oversee the development and implementation of the Statewide Family Violence Action Plan.

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**The Statewide Family Violence Action Plan**

The Statewide Family Violence Action Plan should be based on the recommendations of this Commission. The plan should be a 10 year plan setting out the concrete outcomes to be achieved in the short and long term. It should also explain how performance will be measured and monitored. For example, short-term service outcomes could include a requirement that victims who leave their homes because of family violence are housed in particular accommodation within a specified period or a requirement that police conduct a regular audit of the response to family violence incidents, for example, investigation of breaches. A longer term prevention outcome might be reductions in the prevalence of family in particular communities and a reduction of the number of children taken into care because of family violence.

The Statewide Family Violence Action Plan should not be a static document: it should evolve over time in response to community experience and expert knowledge of the effect of particular approaches and programs. The plan should be developed by the Victorian Secretaries Board, which would also have responsibility for implementing and reviewing the plan. This process would be overseen by the Cabinet sub-committee and endorsed by Cabinet. The Family Violence Statewide Advisory Committee and the independent Family Violence Agency would provide advice on future strategy and necessary modifications to the action plan.
The Cabinet sub-committee should introduce a process whereby relevant ministers agree to make a joint budget submission to support implementation of the Statewide Family Violence Action Plan. This will require sub-committee members to reach agreement about budget bids to ensure that investment is aligned with family violence plan priorities.

The Premier of Victoria should direct all ministers to review and regularly report on the family violence–related risks and opportunities within their portfolio areas and the Cabinet sub-committee should assess the potential impact of Cabinet submissions that might have an impact on family violence prevention or responses. One method that could be used to ensure that family violence is given priority is through the use of charter letters (also known as portfolio priority letters), which could be sent by the Premier to all ministers with instructions to this effect. The purpose of this reform would be to ensure that approaches taken in other areas of government responsibility support the Statewide Family Violence Action Plan and that other policy initiatives do not undermine the plan.

Another way of achieving this goal would be to require departments proposing legislative or policy change to submit a family violence impact statement, describing the relationship between the proposal and the Statewide Family Violence Action Plan. Victorian government policy requires a legislative impact statement to be prepared if legislative proposals impose potentially significant effects on business or competition, or both. Along similar lines, the Charter of Human Rights and Responsibilities Act 2006 (Vic) requires that all new bills be accompanied by a statement of compatibility assessing the extent to which the Bill is consistent with the human rights protected by the Charter.95

On balance, the Commission decided against this latter approach. A large number of proposals put to Cabinet will have no relevance to family violence and departments already have to prepare impact statements in other contexts. There is a risk that requiring a family violence impact statement might be given lip service only. In the Commission’s view, the requirement for regular reports, whether incorporated in charter letters or otherwise, offers a more effective way of requiring ministers to maintain family violence as a priority regardless of the extent to which their portfolio intersects with family violence.

The government is considering a means of introducing a more coordinated system, involving ministers being jointly responsible for achieving outcomes in priority areas, with funding allocation to occur across portfolio areas.96 The Commission considers that family violence could be identified as a priority for the purpose of this initiative.

**Bureaucratic leadership**

Heads of relevant departments will have central responsibility for implementing the Statewide Family Violence Action Plan and 10 year industry plan, as endorsed by Cabinet.

The roles and responsibilities of departmental heads relate to their capacities as policy makers and advisors, service deliverers, service purchasers and employers. Further consideration of how the Victorian Secretaries Board oversees system matters associated with family violence will, however, be needed.

**The Victorian Secretaries Board**

The Commission envisages that the Victorian Secretaries Board will have collective responsibility for promoting a whole-of-government approach. In all matters, the board’s focus will be on family violence system implications, regardless of how many (or few) portfolios are involved in policy and programming processes. The board should resolve working and decision-making arrangements to ensure that a whole-of-government perspective and oversight is maintained, without delaying or impeding the good efforts of individual portfolios.

The Victorian Secretaries Board should appoint a sub-committee to take primary responsibility and report to the board. The Secretary of the Department of Premier and Cabinet should chair the sub-committee. The secretaries of Treasury and Finance, Justice and Regulation, Health and Human Services and Education and Training, the Chief Commissioner of Victoria Police and the Chief Executive Officer of Court Services Victoria should be members. In the case of prevention proposals, the Victorian Secretaries Board’s working arrangements might include other members—for example, the portfolios of Local Government and Sports and Recreation.
**Roles and responsibilities**

Some of the ‘siloing’ described in this chapter occurs within departments and could be dealt with by more effective planning and coordination. Ensuring better information sharing across programs could prevent the unintended effect of one policy or initiative undermining the purpose of another. It will also enable expertise acquired in one area to be shared throughout government.

The Commission envisages that the Victorian Secretaries Board will advise government on performance outcomes and be responsible for delivering and reporting on milestones associated with the Statewide Family Violence Action Plan. It will also prepare the Statewide Family Violence Action Plan for the Cabinet sub-committee’s consideration.

As part of the Statewide Family Violence Action Plan, it is envisaged that the Victorian Secretaries Board will oversee planning to implement the Commission’s recommendations. The Secretaries Board should assume responsibility for developing the overarching performance framework for the action plan, as well as a framework to guide monitoring and evaluation at all levels of the system. Members of the Secretaries Board will be held jointly and individually accountable for meeting the objectives set by the Statewide Family Violence Action Plan. The Secretaries Board should also play a crucial role in ensuring that activities in different areas of government are developed and implemented in ways that are coordinated and support intended policy outcomes for family violence.

In developing the Statewide Family Violence Action Plan, the Victorian Secretaries Board should also consider the role of departmental secretaries as employers. Heads of departments should lead culture changes within their workplaces to help to prevent family violence. Secretaries have an important role to play in changing social attitudes—in the same way as leaders of business and organisations such as Victoria Police have done. For example, Victoria Police led the way in commissioning the Victorian Equal Opportunity and Human Rights Commission’s independent review of sex discrimination, sexual harassment and predatory behaviour in Victoria Police.97 Leadership in the workplaces for which secretaries are responsible could model, build and track progress towards building respectful and inclusive workplaces and ensure that gender equity, and an understanding of its relationship to family violence, are enhanced in their respective workplaces.

The Secretaries Board should also advise the Cabinet sub-committee and relevant ministers on the relationship between the Statewide Family Violence Action Plan and relevant state policy and the National Plan to Reduce Violence against Women and Children 2010–2022.98

Another important function of the Victorian Secretaries Board will be to consider the changes necessary to bring the family services, child protection and family violence systems closer together and maintain oversight of progress in individual portfolio areas. This will also require that police, the courts and service systems operating in these areas work together more effectively. The Commission notes that there is some common membership between the proposed sub-committee of the Victorian Secretaries Board and the Children’s Services Coordination Board, which was established under the Child Wellbeing and Safety Act 2005 (Vic). As a result of the relationship between child services and family violence services, it would be useful for the Victorian Secretaries Board family violence sub-committee to engage with the Children’s Services Coordination Board.

Both the standing Cabinet sub-committee and the Victorian Secretaries Board sub-committee should be able to seek advice from the independent Family Violence Agency—the establishment of which is proposed shortly.

The Victorian Secretaries Board should also oversee adjustments to the procurement requirements and processes of individual departments to ensure that the Victorian Government consistently and adequately specifies the type of and standards for services it intends to procure, as well as the way in which those service providers will be expected to interact with the wider family violence system.
As noted briefly in this chapter, and discussed more comprehensively in Chapter 39, there is an urgent need to purchase or redesign information technology to underpin and enable the collection of data that can be used to assess and improve risk management and system performance. Victoria needs databases that effectively link the courts, the police and other service systems. This is essential if we are to protect victims of family violence; it is also essential to enable evaluation of the overall effects of policy changes made in different service systems.

The Victorian Secretaries Board should also assume responsibility for ensuring that systems are established to permit the collection and sharing of data for these purposes. Further, the Victorian Secretaries Board should be responsible for ensuring that their member departments’ regional implementation is consistent with the intent of the Statewide Family Violence Action Plan.

As discussed elsewhere in this report, ongoing identification of government expenditure on family violence is required. An important function of the Victorian Secretaries Board will be to create the impetus for and propose comparable methodologies for department’s reporting of expenditure, to make funding for family violence more transparent so that the costs and benefits of particular strategies can be assessed.

The Victorian Secretaries Board would advise and report to the Cabinet sub-committee on the implementation of the Statewide Family Violence Action Plan, including the funding measures required to implement it. It is also envisaged that the board would report to the Cabinet sub-committee and relevant ministers on progress with the implementation of recommendations relating to core system factors such as information sharing, risk assessment and management mechanisms, Support and Safety Hubs, workforce development, the systems data platform, and procurement of the data system to support risk management.

Administrative support

The Commission proposes that the work of both the Cabinet sub-committee and the Victorian Secretaries Board be supported by a dedicated Family Violence Unit in the Department of Premier and Cabinet.

Systemic advocacy, from the community sector and from victims, will continue to have an important role in the design of prevention strategies and in liaising with the Victorian Government on response matters. For the reasons explained shortly, the Commission recommends the re-invigoration of statewide consultation recommends the arrangements with the establishment of a new Family Violence Statewide Advisory Committee. The dedicated family violence unit will provide secretariat support for the statewide consultation mechanism to support the design and implementation of the Statewide Family Violence Action Plan.

In addition to providing secretariat services to government and its advisory structures, the role of the dedicated family violence unit should be to:

- coordinate and provide strategic policy advice to government on directions and implementation of all aspects of the Statewide Family Violence Action Plan, including, in collaboration with the Office of Women’s Policy, reporting on the National Plan to Reduce Violence against Women and their Children 2010–2022
- manage and coordinate effective consultation with advisory bodies and stakeholders to guide the development and implementation of the Statewide Family Violence Action Plan
- manage regional governance structures
- liaise with and consult throughout government to support and implement all efforts to prevent all forms of family violence and all forms of violence against women.
System accountability: an independent agency

Family violence systems are not static and new problems and concerns will arise in the future. There is need for an expert body, independent of government, that has, among other roles, the task of advising government about future responses to family violence, monitoring progress of systems processes and outcomes, identifying opportunities for improvement, and encouraging cultural change within systems to support those improvements.

The creation of an independent agency would recognise that family violence should be at the centre of government policy in an enduring way.

The primary function of the independent Family Violence Agency would be to advise government on the overall performance of systems designed to prevent and respond to family violence and to identify areas where the Statewide Family Violence Action Plan should be modified in the future. The agency would have the capacity to respond to requests for advice by the Cabinet sub-committee, the Premier and the Victorian Secretaries Board, as well as to conduct own-motion investigations of particular matters and perform or commission research for those purposes.

The Family Violence Agency’s work would complement the research activities of ANROWS by focusing on Victorian practice, and encouraging communication between service providers in relation to policy successes and failures.

In relation to the question of whether this agency should have both a monitoring function and broader oversight one (as discussed earlier in this chapter), the Commission considers it appropriate that the agency have responsibility for monitoring implementation of the Commission’s recommendations as well as the broader functions just described.

The Commission considered various independent bodies that have been created at the state and territory and Commonwealth levels. These bodies fulfil some combination of the following functions:

- engaging in primary prevention activities
- providing education programs to the community
- providing services in particular areas of government activity
- collecting and assessing data in relation to the relevant subject area or coordinating data collection and impact assessment
- conducting and disseminating research about the relevant subject area
- monitoring and reporting on performance of the relevant system as a whole
- conducting system-wide reviews
- issuing guidelines in the relevant area
- setting written performance indicators
- providing policy advice to the relevant minister, Premier or a Cabinet committee—including advice on priorities for funding
- coordinating whole-of-government policy and implementing government reform initiatives
- providing or evaluating training to maintain and strengthen capability
- independently monitoring implementation of the relevant scheme

Many of these bodies are empowered to conduct research relevant to the area for which they have responsibility and to advise ministers or other bodies. Some of these bodies also have a function similar to that of an implementation monitor along with other functions, and some bodies are empowered to carry out system reviews or monitoring.
Monitoring implementation will require an examination of how the family violence system, or particular parts of it, is functioning. It is desirable that the function of monitoring implementation of the Commission’s recommendations be brought together with that of carrying out applied research into the effectiveness of particular policies and systems that are currently in operation, and advising on new ways of addressing family violence. The proposed applied research functions of the agency will equip it to ascertain whether prevention activities or service initiatives have met their objectives or should be modified to make them more effective.

**Functions and structure of the independent Family Violence Agency**

**Functions**
The Commission proposes that the independent Family Violence Agency have the following functions:

- **monitor implementation of the Commission’s recommendations**—including that of the Statewide Family Violence Action Plan
- **provide expert policy advice on family violence** at the request of Cabinet, the Premier or the Victorian Secretaries Board
- **conduct and commission applied research, policy and evidence reviews as well as conduct own-motion inquiries** into the operation of the family violence system
- **liaise with relevant Commonwealth Government and national agencies** to inform policy and practice to improve primary prevention efforts and responses to family violence
- **establish a means by which service providers can share information about programs**
- **liaise with the Crime Statistics Agency and other agencies** to coordinate data collection and sharing for the purpose of monitoring the overall performance of systems that respond to family violence.

The agency should be required to report to parliament annually on the performance of its functions.

The independent Family Violence Agency would not be involved in the implementation or coordination of any programs or services. These would remain the role of government. Instead, the agency’s role would be providing advice and monitoring and evaluating the program of work set out in the Statewide Family Violence Action Plan. Among other matters to be reviewed, monitored and evaluated for their systems impact are risk assessment and management processes, workforce development strategy and standards, procurement, quality assurance processes, governance, and consultation and engagement processes to enhance the inclusiveness and impact of primary prevention and family violence responses across the state.

Any overlap between the monitoring role of the independent Family Violence Agency and the financial and performance audit functions of the Victorian Auditor-General would need to be considered and resolved in the establishment phase of the agency.

**Structure**
The Family Violence Agency should be established by statute as an independent entity and be chaired by a person who is independent of government. It should have a board of directors with primary responsibility for guiding the development of a family violence system that upholds safety, accountability and recovery. The agency should draw on contemporary evidence and good practice in performing its work.

The board of directors should include a person with broad experience in government, a senior member of the academic staff of a university who has broad expertise in family violence policies and systems, a person who has been a victim of family violence or represents victims of family violence, and the Commissioners for Children and Young People and Aboriginal Children and Young People.
The independent Family Violence Agency should also have power to appoint an advisory committee of people involved in systems advocacy, either through service provision to people affected by family violence or through their experience of family violence. The advisory committee should include a representative of Victoria Police and a magistrate.

The independent Family Violence Agency should establish stakeholder engagement processes to help guide its monitoring and evaluation of the Statewide Family Violence Action Plan, as well as to ensure its advisory function is able to meet contemporary challenges and opportunities.

The board of directors should reach early agreement with the Victorian Government on the nature of the agency’s engagement with government policy development, planning and consultation processes in ways that both preserve the agency’s independence and ensure it is involved in government processes in a timely manner.

The independence of the agency will be crucial to maintaining bipartisan support for its function.

The future role of family violence regional integration committees

In consultation with the Statewide Family Violence Advisory Committee, the Victorian Secretaries Board should determine the core roles and responsibilities of regional family violence governance committees in implementing the Statewide Family Violence Action Plan. The role of these family violence regional integration committees should include developing supporting regional systems architecture to:

- guide, implement and report on workforce development at the regional level
- support and report on implementation of data system reforms and data collection and analysis
- create common platforms to support the integration of the Support and Safety Hubs into the regional family violence systems, as well as implementation of the Risk Assessment and Management Panels, and engagement with services associated with other risk factors—such as alcohol and drug services, disability services, and universal services
- extend engagement with systems advocates to all forms of family violence
- provide feedback to government on regional implementation of the Statewide Family Violence Action Plan to support intended systems outcomes
- ensure mutually supportive working relationships with regional primary prevention leaders and collaboratively determine appropriate regional governance arrangements.

The Commission was advised of different responses to family violence in different regions; it was also told about the particular challenges people face in obtaining services in regional, rural and remote Victoria. In defining the primary role of family violence regional integration committees, it is important that these committees promote consistent systems practices throughout the state, so that people experiencing family violence can expect consistent justice and service responses that are applicable to their needs, regardless of where they live. This does not preclude regional family violence governance committees from identifying matters of regional interest to pursue.

Regional governance overseeing both prevention and responses to family violence should be guided by and accountable to the proposed Family Violence Unit within the Department of Premier and Cabinet. The aim here is to ensure that regional family violence governance committees maintain a strong systems focus. Service delivery, as a subset of this, requires integration and seamless service delivery alongside justice and universal service processes. The engagement of the justice portfolio and the courts in the regional context is crucial.
A further consideration is that the ongoing role and funding of family violence regional integration committees should be independent of service funding. To support this focus, the role of the family violence Regional Integration Coordinator should be elevated. The coordinator should have expertise in family violence and strong strategic and stakeholder engagement skills and be funded on a continuing basis.

Regular consultation should be established between the Family Violence Unit and family violence regional integration committees to support implementation of the recommended system improvements. The objectives of the consultation process will be to define and monitor the role of regional family violence governance committees to achieve statewide consistency, to share experience and best practice, and to guide policy development, priorities and work sequencing.

Within the regions, the role of the regional family violence governance committees should be clearly recognised as the regional governance structure for matters relating to family violence at both the state and regional levels. The chairs of the committees should also be members of regional partnerships (the contemplated successor arrangements to the regional management forums) to support aligned and complementary regional efforts. Chairs should be resourced to reflect the level of involvement required for them to influence and effect the changes needed in their regions in order to implement the family violence system as intended.

**Aboriginal and Torres Strait governance**

The existing governance structure of the Indigenous Family Violence Partnership Forum should be retained. The forum should continue to oversee the Indigenous Family Violence Strategy, and the Indigenous Family Violence Regional Action Groups should continue to report to the forum. In order to ensure consistency and integration with the broader framework, representatives of the Indigenous Family Violence Partnership Forum should be members of the Statewide Family Violence Advisory Committee, continuing their current role on the Violence Against Women and Children Forum.

At the regional level, the Commission supports and encourages the collaborative relationships between the family violence regional integration committees and the Indigenous Family Violence Regional Action Groups to pursue projects to support prevention and responses to family violence in Aboriginal and Torres Strait Islander communities.

In Chapter 26, the Commission endorses the recommendations of the mid-term evaluation of the Indigenous Family Violence 10 year plan. Central to these recommendations is the need for the Victorian Government to commit to providing high-level oversight of implementation of the plan’s objectives and reporting on achievements annually to the Cabinet Sub-committee on Family Violence.

**Alignment with other regional place-based initiatives**

Whole-of-government leadership is required to ensure that place-based initiatives take into account the risk assessment and management processes associated with family violence—and consult to ensure that their work does not generate unintended consequences. Such leadership should also ensure that place-based initiatives are supported to engage with implementation of the Statewide Family Violence Action Plan through suitable policy frameworks, guidance and capacity development.
Evaluation and oversight

It will be necessary to examine the entire area of family violence and assess the effectiveness of different interventions. Regular evaluation of the operation of systems-level mechanisms should be undertaken to ensure that processes for integrating systems, such as risk assessment and management and information sharing, are having the intended effect on the system as a whole and contribute to intended safety, accountability and recovery outcomes.

At the state level there is a lack of sufficiently robust and consistent data with which to assess current and future service needs and systems bottlenecks and to show the quality of service and system interventions. Reliable data is required, so that government knows whether primary prevention and response programs are working and to determine any necessary modifications and so there can be robust planning for future levels of service demand. These things are interrelated: for example, the success of an early intervention program might reduce pressure on Integrated Family Services or child protection programs and demand for police and courts in responding to family violence incidents.

Changes are necessary to ensure that the data required for evaluation or planning purposes can be effectively collected by the relevant department or agency and shared as required. Databases held by different parts of government need to be changed to make information more accessible across different systems, subject to privacy protection. We make recommendations about these matters in Chapter 7.

Consultative arrangements

A Statewide Family Violence Advisory Committee

Non-government community organisations are the main source of support for women and children affected by family violence. The Commission was greatly assisted by submissions from specialist family violence service providers and their peak bodies. It is vital that the community organisations that are the repositories of expertise on family violence policy and practice continue to participate in advocacy and policy development and have the opportunity to bring gaps and weaknesses in service provision and possible solutions to the attention of government.

Revitalisation of a Statewide Family Violence Advisory Committee is necessary. It should be underpinned by genuine consultation and co-design principles and should have functions similar to those of the previous Statewide Steering Committee. The previous Statewide Steering Committee focused on improving responses to family violence against women and children and supporting these groups of victims. As with previous advisory structures, the new Statewide Family Violence Advisory Committee should have a wider role: it should deal with all forms of family violence and have a focus on enhancing perpetrator accountability and supporting men to change their behaviour, as well as including perspectives from victims of family violence whose needs have not been recognised or adequately responded to in the past.

In addition, the Statewide Family Violence Advisory Committee should include representation from experts, systems advocates and victims of family violence. It should reflect different perspectives to ensure that government is receiving the benefit of input from experts in a variety of disciplines. The committee should assist with the evaluation and implementation of the Statewide Family Violence Action Plan. In developing the working arrangements for the Statewide Family Violence Advisory Committee, the Victorian Government should ensure that processes allow for comprehensive engagement with stakeholders engaged in both response and primary prevention work.

In relation to implementation, representation on the Statewide Family Violence Advisory Committee should continue to include representatives of regional governance committees; as noted, the committee should be accountable to the new dedicated Family Violence Unit in the Department of Premier and Cabinet.

The Commission also notes that the current Violence Against Women and Children Advisory Forum also considers other forms of violence against women such as sex trafficking and sexual assault (which may or may not be family violence). We contemplate that the Statewide Family Violence Advisory Committee would continue to do this work.
The government should also examine how it manages continuing governance and advisory structures for non–family violence forms of violence against women, such as sex trafficking, that are beyond the scope of the Commission’s work.

**Victims’ voices**

One of the main themes to emerge from the Commission’s public hearings concerned the importance of involving victims of family violence in the design and review of systems and services, to ensure that their voices are heard and that their experiences help guide the system response. Effective family violence governance arrangements count for little if they fail to support a system that responds effectively to the needs of the victims—the very people the entire governance system is intended to serve. It is therefore important that governance arrangements for policy setting and service provision build in mechanisms for gathering the views and experiences of victims and use these to inform decision-making.

Providing opportunities for victims to talk about their experiences is important for other reasons too. First, for many, speaking about their experiences in a safe forum is important to their process of recovery. Secondly, victims need to feel that they have been heard and acknowledged in their interactions with police, courts and service providers. These two aspects of victims’ voices are discussed in Chapter 20.

It is for these reasons that victims should be represented on the board of the proposed independent Family Violence Agency and on the Statewide Family Violence Advisory Committee.

As noted, organisations representing victims of family violence already play a vital role in making sure that victims’ stories and experiences are reflected in their advocacy. This was certainly the case during the Commission’s inquiry; a considerable number of submissions we received from organisations incorporated case studies and quotes from people who had experienced family violence and had subsequently had to navigate the various systems and processes. The Commission also heard about a range of ways in which victims might participate in policy development and system improvement—including the ‘listening post’ model and the Speaking Out program.

Other ways of giving government and service providers insight into the experience of victims might be through membership of statewide, regional and agency advisory committees, involving victims in professional development and training programs for people working in agencies that respond to family violence, and better monitoring and evaluation of clients’ experiences of services such as the police, the courts and specialist family violence services. In addition, contracts for service providers could require organisations to specify how they will obtain feedback from victims. Agencies such as Victoria Police and the courts should introduce victim feedback mechanisms. Such mechanisms are to some extent currently in use on an ad hoc basis in the family violence system, but there is scope for developing them in a more coordinated and systemic way.

It is important that any such avenues for victim participation are safe, constructive and meaningful and that they are accessible to victims from diverse groups—including Aboriginal and Torres Strait Islander people, people from culturally and linguistically diverse communities, people who identify as lesbian, gay, bisexual, transgender and intersex, older people, people with disabilities and young people.
## Table 38.1 Proposed governance architecture

<table>
<thead>
<tr>
<th>Entity</th>
<th>Role</th>
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| Bipartisan parliamentary committee               | ▶ Maintain parliamentary commitment to address family violence  
▶ Inquire into and report on relevant legislative and policy proposals  
▶ Examine and report on bills introduced                                                                                                                                                   |
| Cabinet family violence sub-committee            | ▶ Oversee development of Statewide Family Violence Action Plan  
▶ Propose expenditure priorities, including facilitating joint budget submissions  
▶ Assess the impact of Cabinet submissions on family violence                                                                                                                              |
| Victorian ministers                              | ▶ Report on risks and opportunities within their portfolios relevant to family violence                                                                                                              |
| Victorian Secretaries Board (including through sub-committee) | ▶ Oversee whole-of-government family violence prevention and response  
▶ Develop, implement and coordinate the Statewide Family Violence Action Plan, including developing the performance framework and reporting on milestones. Prepare family violence industry plan  
▶ Coordinate budget bids and develop methodologies for reporting on family violence expenditure  
▶ Coordinate common tools (for example, information sharing and IT systems)                                                                                                                                 |
| Department of Premier & Cabinet Family Violence Unit | ▶ Support the Cabinet sub-committee, Victorian Secretaries Board and Statewide Family Violence Advisory Committee  
▶ Coordinate and advise on whole-of-government work  
▶ Manage regional governance structures  
▶ Ensure Victoria meets its National Plan obligations                                                                                                                                           |
| Family Violence Agency (supported by an Advisory Committee) | ▶ Monitor and report the implementation of this report’s recommendations and the Statewide Family Violence Action Plan, in order to advise on overall performance of systems responding to family violence  
▶ Provide policy advice  
▶ Undertake and commission research  
▶ Liaise with Commonwealth Government and national agencies  
▶ Liaise with the Crime Statistics Agency and other agencies to coordinate data collection and sharing  
▶ Report annually to the Victorian Parliament                                                                                                                                 |
| Statewide Family Violence Advisory Committee      | ▶ Engage with experts, victims and systems advocates with perspectives on both prevention of and responses to family violence  
▶ Facilitate codesign  
▶ Inform evolution and implementation of Statewide Family Violence Action Plan                                                                                                               |
| Indigenous Family Violence Partnership Forum      | ▶ Oversee Indigenous Family Violence Strategy                                                                                                                                                      |
| Family Violence regional integration committees   | ▶ Chair serves as member of Regional Partnerships (successors to Regional Management Forums)                                                                                                                                                       |
| Indigenous Family Violence Regional Action Groups (IFVRAGs) | ▶ Members of or input to Family Violence regional integration committees  
▶ Report to Indigenous Family Violence Partnership Forum                                                                                                                                                                                                      |
Figure 38.2 Proposed governance architecture

Parliament

Bipartisan Family Violence Committee

Government

Cabinet Family Violence Sub-Committee (Chaired by Premier)

Victorian Secretaries Board

VSB Family Violence Sub-Committee (Chaired by Secretary of DPC)

Family Violence Agency
- Monitors implementation
- Advises Premier and Cabinet
- Advises Secretaries Board

Government Departments

Family Violence Unit DPC

Indigenous Family Violence Partnership Forum

Statewide Family Violence Advisory Committee

Regional Management Forums

IFVRAGs

Family violence Regional Integration Committees

Regional Prevention Approaches

→ Lines of accountability  ← Information flow and/or cross membership
Although the intention is that these changes, combined with clear leadership, will provide the guidance, oversight and accountability that has sometimes been lacking, the Commission is aware that these structures will be effective only if those who work within the system—in all its manifestations and at all levels—are open to new ideas and solutions. We are confident that this is the case.

The sound foundations of Victoria’s family violence system, and the examples of best practice to be found in different settings around the state have evolved as a result of people working together in the face of pressing demand. Their efforts and the efforts of other parts of the community who are ready to play a greater role in tackling family violence, must be harnessed and supported through the provision of guidance, resources and infrastructure support and the dissemination of practice knowledge.

Extending responsibility for tackling family violence will require each sector or component of the system to re-inforce the work of the other, to collaborate with and trust others, and to understand the experience of family violence in all its manifestations and look outwardly. At present different sectors and service systems operate according to distinct underlying principles, service delivery models and ideological frameworks; this can create barriers to service integration, collaboration and innovation.

Our approach to family violence today has come a long way from the days when family violence was ignored and invisible. This has come about as a result of trust gradually built between women’s services and agencies such as the police and the courts, which saw them overcome scepticism about each other’s roles and objectives and forge a partnership that made family violence a priority for the justice system. This next step will build on that strong history in strengthening dialogue and partnership among the sectors, supported by a stable, independent system of governance.

Recommendations

Recommendation 193

The Victorian Government establish a governance structure for implementing the Commission’s recommendations and overseeing systemic improvements in family violence policy [within two years]. The structure should consist of:

- a bipartisan standing parliamentary committee on family violence
- a Cabinet standing sub-committee chaired by the Premier of Victoria
- a family violence unit located in the Department of Premier and Cabinet
- a Statewide Family Violence Advisory Committee
- Family Violence Regional Integration Committees, supported by Regional Integration Coordinators
- an independent Family Violence Agency established by statute.
**Recommendation 194**

The Cabinet Family Violence Sub-committee advise Cabinet on the Statewide Family Violence Action Plan based on the Commission’s recommendations and be responsible for:

- specifying outcomes for achievement relating to prevention, early intervention and responses to family violence, supporting victims (including in their long-term recovery), and holding perpetrators to account
- proposing priorities for expenditure
- setting performance targets.

The sub-committee should report regularly to Cabinet on progress in implementing the plan [within 18 months].

**Recommendation 195**

The Victorian Government require all ministers to report regularly on the risks and opportunities in their portfolio relevant to family violence. The charter letters of all ministers should require them to consider the effect of proposed policies or legislation in their portfolios on the Statewide Family Violence Action Plan and family violence [within 12 months].

**Recommendation 196**

The Victorian Secretaries Board institute working arrangements—for example, the establishment of a sub-committee—to support effective oversight of family violence prevention and responses. Membership of the sub-committee should include, the Secretaries of Treasury and Finance, Justice and Regulation, Health and Human Services, and Education and Training, the Chief Commissioner of Police and the Chief Executive Officer of Court Services Victoria. The sub-committee should be chaired by the Secretary of the Department of Premier and Cabinet [within 12 months].
Recommendation 197

The Victorian Secretaries Board advise the government [within 12 months] on all measures to be taken to develop, implement and coordinate the Statewide Family Violence Action Plan (including any adaptations that should be made to the plan in the future), among them:

- preparation of a 10-year industry plan for family violence prevention and response
- areas where joint budget bids should be made in order to give effect to new proposals
- collection, sharing and use of information to enhance system performance
- means of ensuring aligned policy development and implementation, as well as avoiding gaps and overlaps in departmental service provision
- oversight, development and adaptation of regional structures to give effect to the Statewide Family Violence Action Plan
- development of processes for identifying Commonwealth and state and territory funding expended on matters relevant to family violence—including funding expended on universal services that are relevant to family and the cost of grants made for family violence–related projects
- a strategy for purchasing or modifying data collection systems relevant to family violence—including systems used by Victoria Police, the Magistrates’ Court of Victoria, the Children’s Court of Victoria and the Department of Health and Human Services—to ensure there is capability to link information relevant to the safety of victims of family violence and their children.

Recommendation 198

The Victorian Government establish a family violence unit within the Department of Premier and Cabinet to support the work of the Cabinet Family Violence Sub-committee, the Victorian Secretaries Board, and the Statewide Family Violence Advisory Committee. The unit will lead whole-of-government work with other departments and policy units with family violence responsibilities (including the Office for Women) and should be responsible for ensuring that Victoria meets its obligations under the National Plan to Reduce Violence against Women and their Children [within 12 months].
Recommendation 199

The Victorian Government establish an independent statutory Family Violence Agency [by 1 July 2017] to:

- monitor and report on the implementation of the Commission's recommendations and of the Statewide Family Violence Action Plan
- provide expert policy advice on family violence at the request of Cabinet, the Premier or the Victorian Secretaries Board
- undertake and commission applied research, policy and evidence reviews and conduct own-motion inquiries into the operation of the family violence system
- liaise with relevant Commonwealth government and national agencies in developing policy and practice to enhance primary prevention efforts and improve responses to family violence
- establish a means by which service providers can share information about programs
- liaise with the Crime Statistics Agency and other agencies to coordinate data collection and sharing for the purposes of assessing the overall performance of systems that respond to family violence.

Recommendation 200

The Victorian Government re-establish the Violence against Women and Children Forum as the Statewide Family Violence Advisory Committee to advise the government on family violence policy and service provision [within 12 months]. The committee should include representation from experts, victims of family violence and system advocates with perspectives on both prevention of and support for victims of family violence. Consultation with the committee should inform the evolution and implementation of the Statewide Family Violence Action Plan.

Recommendation 201

The Victorian Government and agencies that respond to family violence identify and develop safe and constructive ways to ensure that the voices of victims are heard and inform policy development and service delivery [within two years]

Recommendation 202

With the advice of the Family Violence Agency, the Victorian Secretaries Board Family Violence Sub-committee consider how to ensure that local council performance measures are used to encourage local council activities designed to prevent family violence and to assess the outcomes of any services they provide to victims and perpetrators of family violence [by 1 July 2018].
Endnotes

2 Transcript of Cumberland, 13 July 2015, 40 [25]–41 [8].
3 Statement of Steendam, 9 July 2015, 7 [26].
4 Statewide Steering Committee to Reduce Family Violence, ‘Reforming the Family Violence System in Victoria’ (Department for Victorian Communities, 2005).
5 Ibid 8.
6 Ibid 5.
7 Ibid.
8 Ibid 18.
9 Ibid 8.
10 Ibid 18.
11 Ibid 8.
12 Ibid.
13 Ibid 22–3.
15 Statewide Steering Committee to Reduce Family Violence, above n 4.
16 Aboriginal Affairs Victoria, Department of Planning and Community Development, ‘Strong Culture, Strong Peoples, Strong Families: Towards a Safer Future for Indigenous Families and Communities—10 Year Plan’ (October 2008).
17 State of Victoria, Submission 717, 31.
18 Ibid.
19 Ibid.
20 Ibid 32.
21 Ibid.
22 Transcript of Eccles, 16 October 2015, 3882 [29]–[31], 3883 [1]–[12].
23 Ibid 3883 [19]–[22].
25 Department of Health and Human Services, ‘Regional Family Violence Integration Governance Model’ 7–9, produced by the State of Victoria in response to the Commission’s Notice to Produce dated 5 June 2015.
26 State of Victoria, Submission 717, 31.
27 Department of Health and Human Services, above n 25.
28 State of Victoria, Submission 717, 31.
30 Court Network, Submission 927, 16.
31 Ibid.
32 Transcript of Cumberland, 13 July 2015, 69 [28]–70 [8].
33 Transcript of Campbell, 15 October 2015, 3724 [21]–[26].
34 Transcript of McCormack, 15 October 2015, 3739 [22]–[27].
35 Good Shepherd Australia New Zealand, Submission 836, 13.
36 Transcript of Heatley, 15 October 2015, 3782 [26]–3783 [1].
37 Good Shepherd Australia New Zealand, Submission 836, 12.
38 Anonymous, Submission 677, 3.
39 Transcript of Callister, 16 October 2015, 3855 [18]–3856 [7].
41 Transcript of McCormack, 15 October 2015, 3740 [6]–[13].
42 Transcript of Campbell, 15 October 2015, 3738 [20]–[21]; Transcript of Smith, 15 October 2015, 3737 [15]–[24].
43 Gippsland Integrated Family Violence Service Reform Steering Committee, Submission 691, 3.
44 Transcript of Smith, 15 October 2015, 3737 [15]–[24].
45 Transcript of Peake, 16 October 2015, 3874 [11]–[18].
46 See, eg, Transcript of Smith, 15 October 2015, 3734 [18]–3735 [3] and 3737 [20]–3738 [4]; Transcript of Campbell, 15 October 2015, 3738 [9]–[27].
47 Transcript of Peake, 16 October 2015, 3872 [13]–3873 [8].
48 Transcript of Smith, 15 October 2015, 3756 [1]–3756 [6].
50 Transcript of Peake, 16 October 2015, 3876 [14]–[19].
51 Ibid 3876 [29]–3877 [2].
52 Ibid 3880 [19]–[26].
53 Ibid 3879 [19]–[10].
54 Ibid 3879 [26]–[27].
55 Transcript of Eccles, 16 October 2015, 3880 [13]–[16].
57 Ibid 18.
58 Ibid 15.
59 Ibid 18.
60 Transcript of Cumberland, 13 July 2015, 71 [7]–[25].
61 Transcript of Lay, 15 October 2015, 3706 [9]–[19].
62 Ibid 3707 [20]–[22].
63 Federation of Community Legal Centres, Submission 958, 54.
64 Women’s Legal Service Victoria—01, Submission 940, 5.
Our Work


See, eg, South Australian Social Inclusion Initiative Board and Social Inclusion Initiative Chair, which is to advise the Premier and Cabinet to the Commission, 30 December 2015.

See as a useful reference the composition of the board of directors for the Sentencing Advisory Council, Sentencing Act 1991 (Vic) ss 108F.

See, eg, the functions of the Emergency Management Commissioner, Emergency Management Act 2013 (Vic) s 32.

Department of Premier and Cabinet, Governance of the Coordinating Entity—Shared Ministerial Accountability, provided by the Department of Premier and Cabinet to the Commission, 18 February 2016.

See, eg, National Health and Medical Research Council, How NHMRC Develops its Guidelines

See, eg, National Health and Medical Research Council, How NHMRC Develops its Guidelines

See, eg, National Health and Medical Research Council, National Health Reform Act 2011 (Cth) ss 9(1)(e)–(f).


39 Data, research and evaluation

Introduction

The Commission's terms of reference require it to 'provide recommendations on how best to evaluate and measure the success of strategies, frameworks, policies, programs and services put in place to stop family violence'. The Commission was invited to consider 'systems and mechanisms to identify and appropriately prevent and respond to family violence, including information sharing and data systems'.

Many examples of data-collection and research practices relevant to family violence have been canvassed throughout this report. Gaps in family violence data and in systems for comprehensively capturing and assessing data were consistently raised with the Commission by service providers and stakeholders.

The Victorian Government’s submission to the Commission identifies 10 gaps in the current family violence system. The first is 'poor measurability of the scale and breadth of family violence in Victoria'. The government notes that 'not all aspects of the ... system are evidence based, monitored or evaluated', which undermines a 'system wide understanding of the size of the family violence problem' and the capacity of the system 'to innovate or reduce the incidence or severity of violent incidents'.¹ In this chapter, the Commission considers how measuring family violence could be improved.

The Commission notes that some forms of family violence, particularly intimate partner violence, are increasingly well understood and that knowledge of family violence is constantly developing as new research emerges, new lines of inquiry arise and populations grow and change. In addition, the completeness of current data collections and research is a matter of degree. There is excellent research in areas that remain generally poorly understood, and gaps even in well-researched areas.

The first part of this chapter considers the aims of data collection and provides an overview of established principles relevant to data collection, including what data should be collected and how. The Commission is concerned with data collection for the purposes of better understanding family violence and what responses to it are most effective, to inform research and funding priorities.

The second part of this chapter considers common gaps in data and research relevant to individuals and population groups. These gaps include poor recording of demographic information, a lack of focus on children, limited data on perpetrators, and limitations on tracking individual pathways through the system. These gaps make it difficult to accurately assess the extent of family violence in the community. The third part of this chapter considers common gaps in data and research relevant to measuring the system’s response to family violence. The Commission heard that there is a focus on measuring service outputs or activities, rather than evaluating whether a program makes a positive contribution to meeting the goals of the system. Collectively, these issues make it difficult for government and service providers to assess how people experiencing family violence can best be helped.

In the final part of this chapter, the Commission recommends a way forward to improve family violence data collection and research, including by developing a statewide data framework informed by relevant Commonwealth standards that adopt shared data definitions, and improving evaluation standards for those delivering family violence services.

The purpose of these recommendations is not to supplant current efforts to improve collective knowledge of family violence. Rather, the Victorian Government should work with existing bodies, including ANROWS (Australia’s National Research Organisation for Women’s Safety), VicHealth (the Victorian Health Promotion Foundation) and the Australian Bureau of Statistics, and in addressing our recommendations, should be informed by the work these bodies have done to date. The Commission’s expectation is that our recommendations will complement the efforts of these and other groups.

**Data-collection principles**

The Australian Bureau of Statistics’ 2013 report *Defining the Data Challenge for Family, Domestic and Sexual Violence* (Defining the Data Challenge) was developed to support the *National Plan to Reduce Violence Against Women and Their Children 2010–2022* (the ‘National Plan’) in particular, the National Plan’s goal of developing a sound evidence base in family violence.\(^4\)

Defining the Data Challenge was conceived as a step towards developing a national family violence data-collection and reporting framework, and explains some of the aims of a successful framework. These aims provide an indication of what a more robust data-collection framework in Victoria might look like.\(^5\) They include establishing a shared understanding of data priorities and needs, including shared priorities about where to invest effort and resources, and common indicators and variables within data sets. This in turn will facilitate:

- improved data quality (data which is timely, accessible, coherent, relevant, accurate and interpretable)
- a strong, collaborative network of data custodians in family violence and related areas
- improved statistical data integration to meet needs not satisfied in single data sets
- improved description and presentation of the family violence evidence base—including appropriate metadata and definitions to ensure the data is used in an informed and appropriate way
- ethical collection, storage and presentation of information relating to those affected by family violence.\(^6\)

**Collecting the right data**

There is distinction between collecting ‘point-in-time’ data for performance monitoring or case-management purposes, and collecting data for analytical or evaluative purposes. For example, a specialist family violence service may collect information on the characteristics of a particular case (sometimes referred to as ‘administrative by-product’ data). That information will help them manage that case appropriately, and may be shared with other organisations managing the same case. In addition, that data may also be provided to the department funding the service’s activities; or to consultants evaluating the organisation’s performance; or to bodies like the Crime Statistics Agency, which undertakes and publishes research on crime and criminal justice issues in Victoria.

In this chapter, the Commission’s focus is on the collection and use of data for the latter purpose—that is, the use of data to improve understanding of the incidence, prevalence and nature of family violence, how well it is responded to and which responses are most effective and efficient. Collecting and sharing data for case-management purposes raises distinct questions of law and policy, which are discussed in Chapter 7.

Defining the Data Challenge sets out six elements of data collection. For each element, the optimal data sources, and the obstacles to data collection, will vary. However, most deficiencies in data collection relate to one or more of these elements:

- the *context* or ‘setting’ within which family violence is taking place, either at a population level or in a particular case—this includes situational (e.g. socio-economic, geographical) and psychosocial (e.g. beliefs, attitudes, mental/physical health) circumstances within which family violence is taking place, either at a population level or in a particular case\(^7\)
- the actual or perceived *risk* of a person being a victim of family violence—both population-level risk factors, including prevalence rates, and individual risk factors\(^8\)
the incident itself, including whether it was short-term or sustained, the type of family relationship, and the setting in which violence took place

responses to the incident, both formal and informal, from individuals, families, the community, institutions and services

impacts and outcomes of the violence for the individual, their family and the community

research and evaluation into family violence and responses to it.

On the ABS’ analysis, sufficient information in respect of these elements will allow us to:

- analyse the current state of affairs in family violence
- measure the activity and performance of systems and services responding to family violence
- measure changes over time.

Further to Defining the Data Challenge, the Australian Bureau of Statistics released the Foundation for a National Data Collection and Reporting Framework for family, domestic and sexual violence. This document provides the basis for consistent collection of administrative data by organisations working in family violence. It sets out data items in relation to persons, events and transactions. These include:

- key individual characteristics, such as sex, date of birth, address, cultural and linguistic diversity characteristics, Aboriginal and Torres Strait Islander status, disability status, mental health, and indicators relating to pregnancy and children, housing and income
- the date, location, type of relationship and type of violence applicable to episodes of family violence
- the date, organisation and outputs relating to the service provided.

**How data should be collected**

The 2009 Australian Bureau of Statistics’ Data Quality Framework sets out seven dimensions of quality—institutional environment, accuracy, timeliness, relevance, coherence, interpretability and accessibility—and key aspects within each. For our purposes, some key points of this framework are useful. ‘Quality’ is understood as ‘fitness for purpose’. Accordingly, good quality data will match its intended use.

Data quality is partly determined by the organisational environment in which it is produced. High-quality data is more likely to be produced if collected and maintained in a transparent and impartial setting, and if the resources and authorising environment exist to allow data to be collected and its quality to be maintained.

The data itself should be accurate, relevant and timely. Accuracy may be compromised if, for example, the target group is small, poorly selected or incompletely surveyed, or the questions asked or responses provided are incomplete or misleading.

Relevance is the capacity of the data source to meet the needs of those using it. This means, for example, aligning the reference period, target population, level of detail and standards and classifications used with the data’s intended use.

Data is timely if it is released within a reasonable period after it is collected, and according to plan.

The data set should also be coherent, interpretable and accessible. Coherent data is internally consistent and comparable with other data sources, over time and in a particular field of inquiry.

A data set is best able to be interpreted when there is information available—including metadata about methods of calculation, variables and limitations—to explain the data, and when the data is presented and summarised in a clear way. Accessible data is easily available to the public and researchers.
Measuring individuals, population groups and communities: common gaps

Prioritising individuals

The Commission heard that some important data sets report and measure service-based metrics, such as the number of ‘episodes of service’ provided by their organisation, rather than identifying unique clients, or how many individuals and families received the relevant service/s. Further, where individuals are identified within a particular data set, in many cases they are not identified in consistent ways between data sets (such as by a unique client number).

In such cases, it may be unclear:

- how many individuals account for the overall volume of family violence dealt with by a service or system, or across the system
- what proportion of individuals have multiple engagements with a service or system, and how many they have
- what range of services and systems are accessed by someone in relation to family violence.

It follows that significant correlations—for example, between specific relationships, risk factors, population groups or manifestations of family violence on the one hand, and multiple contacts with a given service or system, or engagements with a particular set of services and systems, on the other—may be indiscernible.19

An example within a particular area of the system is in Victoria’s state courts, and the Magistrates’ Court in particular. As noted in Chapter 16, significant efforts have been made to increase the links between the Victoria Police and the Magistrates’ Court databases. However, there is no common identifier for individuals involved in court proceedings which would allow, for example, a magistrate to readily discern whether a person involved in a magistrates’ court proceeding also had active proceedings in other jurisdictions (for example, the County Court, the Supreme Court, the Children’s Court, the federal courts or the Victims of Crime Assistance Tribunal).20 Yet as is noted in Chapter 16, it is not uncommon for an individual or family to be involved in parallel legal proceedings in relation to the same family violence circumstances.

Similarly, the unit of purchase for services funded through the homelessness program (which is the funding source for the majority of specialist family violence services for women, including refuges and support), is ‘episodes of support’. This represents an occasion of providing assistance. One person may receive many episodes of support over a year, with each provider’s assistance for the same person recorded as a different episode of support.21

Ms Lisa Dunlop, Executive Director of Clinical Operations at the Royal Women’s Hospital, gave evidence that within hospitals, there are three data sets—emergency department, outpatients and inpatient—and that:

one of the problems is that the systems don’t necessarily gel at a patient level.
So we have data from emergency presentations, we have data about inpatient episodes, but it’s not necessarily linked to an individual patient.22
More broadly, as part of its work for the Commission, the Crime Statistics Agency analysed gaps and opportunities in the Victorian Family Violence Database, which is comprised of data sets from a range of sources across health and human services, homelessness services, legal services, courts and policing. Regarding the absence of a common identifier used in these data sets, the authors note:

One of the key drawbacks of the current database is its inability to use the same identifiers across the datasets to determine whether individuals are held in common across the datasets. This makes it difficult at present to use the various datasets together to better understand how an individual comes into contact, and interacts, with and across services in Victoria. With the exception of LEAP and Courtlink which share common identifiers in some cases, each of the other datasets contain identifiers that are specific to that dataset. This means that it is currently difficult, for example, to identify through the data which individuals have come into contact with police, homelessness services and victims assistance programs and which service they first contacted.

The Commission notes the evidence of Ms Kym Peake, Acting Secretary of the Department of Health and Human Services (now Secretary), who stated that the Department of Health and Human Services was seeking to work towards the development of a ‘single client view’, linking DHHS’ databases to feed into a single electronic file for each client.

The inability to track an individual’s ‘journey’ through the system has particular implications for family violence perpetrators, which are discussed below. This issue is also considered in Chapter 38.

**Prioritising children**

One of the key deficiencies in current data collection relates to children. Domestic Violence Victoria noted that there is no single source of national or state level data collected on children and young people affected by family violence. Therefore measuring the extent to which Victorian children are impacted by violence is difficult. The submission went on to note that the data system for most specialist family violence services (the Specialist Homelessness Information Platform) quantifies children:

As ‘add-ons’ to their mothers but do not capture their individual support and counselling needs, rendering them invisible in case for funding children-specific services.

Domestic Violence Victoria proposed that the platform consider children as clients in their own right, recognising that they have a distinct experience and distinct needs.


> Do not provide the basis for a comprehensive assessment of the performance of child protection, out-of-home care and family services, in particular regarding the critical measure of their effect on the incidence and impact of child abuse and neglect.

The Victorian Auditor General’s review of the Early Intervention Services for Vulnerable Children noted that the Department of Health and Human Services does not know whether Child FIRST and Family Services (that it funds to assist vulnerable children and families) are effective, due to ‘significant data limitations and a lack of outcomes monitoring at the system level’.

The Commission makes recommendations below for the inclusion of more child-specific information in the Victorian Family Violence Database.
Demographic information

The Commission heard and observed evidence of deficits in the completeness and reliability of demographic information collected by agencies, departments, specialist family violence services and others responding to family violence.

The State of Victoria submitted that there was a need for improvement in the measurability and data capture of family violence incidents in high-risk groups and specific cohorts.30

Basic demographics (age, sex, location) are maintained with reasonable consistency.31 However, population group information such as lesbian, gay, bisexual, transgender and intersex (LGBTI) status, mental health, Aboriginal and Torres Strait Islander status, disability and culturally and linguistically diverse (CALD) status may:

- not be provided for on forms and databases
- if provided for, may not be mandatory
- be reliant on unsolicited self-identification by individuals
- be reliant on a service provider’s judgment that this data is required in the circumstances, or on a service provider’s (untested) perceptions or assumptions (e.g. that someone is an Aboriginal and/or Torres Strait Islander person or has a disability)32
- if collected, not be cross-correlated with other demographic data.

Ms Fiona Dowsley, Chief Statistician at the Crime Statistics Agency, noted in her evidence:

> When it comes to core identifiers about individuals—age, sex, the really basic building blocks—those are very well recorded. We have got good quality there. The areas where it tends to be a little bit more patchy … [are] around the slightly more peripheral socio-demographic variables, which maybe aren’t as tied to the core business of the agency doing the recording. Unfortunately, they tend to be areas of very high policy interest. So our Aboriginal identification is not always as we would like it to be. It’s quite often of reasonably poor quality. Recording of disability is generally fairly poor and also difficult to define. So operationally there are challenges there as well. Similarly, CALD is an area of high interest but where there’s very limited information available, and I would suspect a lack of agreement about what’s really required there as well. So, depending on how far you move from the really core variables, the quality tends to get … diminished.34

In its report for the Commission, the CSA identifies Aboriginal and Torres Strait Islander status, culturally and linguistically diverse indicators and health and disability indicators as ‘data items with varying quality’, which are ‘of a high priority for decision-makers’.35

In relation to Aboriginal and Torres Strait Islander status the CSA noted:

> Understanding the experience of family violence as it relates to those who identify as Aboriginal and/or Torres Strait Islander is highly desirable information for policy making that informs operations …

> … [T]here is significant room to improve the quality of Aboriginal and Torres Strait Islander data before coverage will be sufficient to enable robust statistical and research use across datasets …36

The CSA notes that agencies, departments and service providers do not uniformly use the Australian Bureau of Statistics’ standards on the collection of an individual’s Aboriginal and Torres Strait Islander status.37

In particular, an individual’s identification as an Aboriginal and/or Torres Strait Islander person should be confirmed by that person, not simply assumed by others.38
In relation to CALD communities, the CSA notes that information about family violence experiences of people from culturally and linguistically diverse communities ‘varies, and collection methodologies differ amongst data sources’. In particular:

... some agencies collect information about an individual’s country of birth or main language spoken at home, while others use operational information to estimate the number of people who come into contact with a service from CALD backgrounds. Most often this information relates to incidents or events where an interpreter is required, where the use of an interpreter is used as a proxy CALD indicator. As a result, there is an opportunity to increase the consistency of CALD data item collection across datasets ...

The CSA proposes standardising CALD data items as part of improving the governance of family violence data in Victoria. It recommends that health and disability indicators ‘be collected with careful consideration and appropriate sensitivity’, but that this should not preclude efforts to improve data collection in relation to people with disabilities.

The CSA also identifies LGBTI indicators as an area of less reliable data across the Victorian Family Violence Database.

These and similar concerns were reiterated in submissions to the Commission, which draw attention to a range of technical and practical barriers to collecting data on particular population groups.

Many organisations pointed out that agencies, departments and researchers who collect data often fail to record (at all, or accurately) the cultural, linguistic or ethnic status of individuals and families. For example, the Multicultural Centre for Women’s Health submitted that:

There has been very little comprehensive research that investigates the specific experiences of violence of immigrant and refugee women as a group in Australia. The majority of research that is conducted about women’s experiences of violence excludes immigrant and refugee women due to methodological limitations: web-based and/or written surveys that only enable participation of research subjects who are English speaking, highly literate and web-savvy; or verbal interviews conducted in English only.

Similarly, several organisations that work with Aboriginal and Torres Strait Islander peoples note deficiencies in data collection. For instance, the Victorian Aboriginal Legal Service stated:

... data issues are significant—at mid-term evaluation meeting of Indigenous Family Violence Ten Year Plan, almost 50% of [Victoria Police] Family Incident Reports have an unknown Aboriginal status. Unless we fully understand the data we can’t be confident our service responses are hitting the mark.

With respect to people with disabilities, the Melbourne Research Alliance to end violence against women and their children, submitted that:

Most [women with disabilities] live in the community and not in disability or aged-care settings; for example, one per cent of Victorian people with disabilities live in a non-private dwelling such as a group home or other cared-accommodation ... The living arrangements of people with disability, disaggregated by ability, age, gender, Aboriginality, cultural and linguistic background, age and state/territory is difficult to access publicly, or it is limited, or perhaps may not exist ...

Disaggregated, quantitative data relating to violence against people with disabilities is similarly lacking; for example, neither the Australian Bureau of Statistics’ Personal Safety Survey (2012) nor the Survey of Disability, Ageing and Carers (2012) provides data that would help us understand the nature or extent of the problem of violence against [women with disabilities]. We rely, instead, on small-scale studies, often qualitative in nature, or on quantitative data generated in other countries where data disaggregation includes disability status.
Similar concerns were raised on behalf of lesbian, gay, bisexual, transgender and intersex people. For example, the joint submission of No To Violence and Safe Steps Family Violence Response Centre stated that:

At a time when more research needs to be done, and specific needs within the LGBTIQ spectrum need to be identified, there is a lack of services available to collect any data on LGBTIQ people ...

Much of the Australian police crime data and larger scale surveys on sexual violence also [do] not take into account sexuality or that gender identity does not necessarily fit within a woman and man binary, nor the distinction between current gender and experience of having lived in another gender during one’s lifetime ...

The submission’s authors suggest this means there are few available indicators of ‘gay, bisexual or lesbian people (transgendered or cisgendered) who experience violence’. They also note that measuring family violence in LGBTI communities is hindered by limitations in collections not specific to family violence, such as the Australian Census. This makes it difficult, for example, to compare reports of family violence involving LGBTI people with total populations of LGBTI people. In some cases, survey questions may not be posed in a way that corresponds with how LGBTI people describe themselves; the authors suggested:

... most LGBTIQ people in Australia do not describe themselves using the identity labels in this acronym, yet people’s own ways of describing these life experiences are legitimate; such as ‘queer’, or a transgender woman who identifies as a ‘woman’ rather than a ‘transwoman’.

Finally, the submission notes that the majority of research on community attitudes to violence is conducted from a heterosexual perspective, and that further research on LGBTI community attitudes to family violence would be beneficial.

Although many submissions raise concerns on behalf of population groups and communities that tend to be vulnerable to discrimination and disadvantage, it is worth considering that data sets and data-collection practices may also obscure the nature and incidence of family violence in more mainstream groups. One submission notes that administrative by-product data sets tend to under-represent the number of middle- to high-income families who may be experiencing family violence. This may be because people with greater wealth or more established social networks may not engage with the support services reflected in these data sets.

Issues specific to the communities and population groups mentioned in this section are discussed further in Chapters 10, 26, 27, 28, 30 and 33.

Survey data
The Commission notes the limitations of survey data in capturing the experience of particular population groups. The ABS Personal Safety Survey (PSS), is the foremost indicator of family violence prevalence, and is of critical value for departments, agencies and funded services engaged with family violence.

The PSS seeks information from respondents that includes their age, sex, country of birth, first language and language spoken at home, education level, employment status, income level and disability status. However, it does not publish other demographic categories—including LGBTI status and Aboriginal and Torres Strait Islander status. The published PSS data also has limited cross-correlations with existing demographic factors.
The 2012 PSS has other limitations:

- It only conducted interviews directly with the people surveyed. Family members, interpreters or other proxies were not used. A small number of interviewers with skills in languages other than English conducted interviews, but if an interviewer did not speak the respondent’s language, no interview was conducted. The authors of the 2012 PSS concede it is ‘likely that the PSS will under represent those with a profound or severe communication disability’ (which includes many people with disabilities), and ‘possible that the PSS may under represent those from a non-English speaking background’.

- It only surveyed residents in private dwellings. Motels, rooming houses and other non-private dwellings were excluded, as were ‘people who usually reside in non-private dwellings’.

- It did not survey people living in ‘very remote parts of Australia’ or in discrete Aboriginal and Torres Strait Islander communities.

- It did not survey households where all residents were less than 18 years old.

- It did not survey overseas visitors intending to stay in Australia for less than 12 months, and members of non-Australian defence forces stationed in Australia and their dependants.

- The survey definitions do not clearly delineate some forms of violence. For example, women are asked about experiences of emotional abuse, defined by reference to a range of experiences that include some forms of economic abuse, but the survey does not capture the prevalence of economic abuse.

- The response rate was 57 per cent, which the authors describe as ‘relatively low’.

The Commission notes that the Senate Standing Committee on Finance and Public Administration’s 2015 report on domestic violence in Australia calls for the Australian Bureau of Statistics to address, before the next PSS, deficiencies in ‘the adequacy of sampling sizes of particular subgroups … such as women with a disability, women from culturally and linguistically diverse backgrounds, immigrant and refugee women, and Indigenous communities’.

### Perpetrators

The Commission looks in more detail at some of the difficulties in evaluating programs for perpetrators, together with the improvement of perpetrator risk factors, in Chapters 6 and 18. In relation to data collection and research, the Commission notes that numerous organisations and individuals gave evidence about gaps in the understanding of characteristics of, or outcomes for, perpetrators.

Dr Kristin Diemer, Senior Research Fellow, Department of Social Work, University of Melbourne, commenting on how to design a better system, told the Commission that:

> The primary gap is we have very little data on perpetrators. There just isn’t a body collecting much information. There is police data, but it is also limited on what you can get on perpetrators through the police dataset. The Corrections data is quite difficult to get access to. … the police data and the Corrections data don’t necessarily synchronise ...

This point was also made in a number of submissions. For example, Caraniche, a psychological consulting firm whose services include providing drug, alcohol, violence prevention and rehabilitation services within adult prisons, juvenile justice and community corrections systems, noted that there is poor data on the prevalence of family violence in criminal offender populations, and little systematic study in areas such as the role of exposure to family violence in the development of offending, family violence as a component of general criminal offending, and the design and assessment of family violence perpetrator programs.
Perpetrators in the justice system

The Commission understands there are ongoing difficulties, both with establishing how many family violence–related matters are heard in Victoria’s courts, and with linking data between police, courts and Corrections Victoria in order to chart a perpetrator’s trajectory through the law enforcement and justice systems. The difficulty in tracing a perpetrator’s journey through the justice system is part of the wider challenge of linking data sets to clarify an individual’s engagement with different parts of the system.

Both Victoria Police and the courts (and associated authorities) drew attention to these issues. In relation to courts data, Court Services Victoria (CSV) noted difficulties identifying family violence matters:

There are significant gaps in data collection and quality in relation to family violence across almost all jurisdictions. This limits CSV’s ability to identify, analyse, report and forecast in relation to family violence matters. This means that evidence driven optimisation of service delivery, funding and staffing levels and skill sets is limited.

Data is generally collected from case management systems. Each jurisdiction has a different case management system ... Cases are generally categorised on these systems according to objectively ascertainable information on the face of the legal documents charged (i.e. the offence charge, the nature of the applications made) rather than the underlying circumstances (family violence). This contributes to the gaps in available data on the number and nature of family violence matters currently being addressed across the jurisdictions.

The Magistrates’ and Children’s Court joint submission noted that ‘other than charges for contraventions for an intervention order, the court cannot collect accurate data on criminal offences, which take place in a family violence context’.

The County Court also reported:

Current County Court processes and systems do not record when a criminal law proceeding involves family violence ... Without this information it is difficult for the County Court to identify, report, plan and manage family violence matters before the court. In addition, poor data means that the court lacks evidence to drive service delivery improvements related to family violence matters.

The Judicial College of Victoria noted that:

In preparing this submission, we have been unable to access data on the number of family violence proceedings in the County Court. Information on the number of offences involving circumstances of family violence and the number of ... appeals is not publicly available. Measuring family violence-related cases is an important step in identifying the scale of family violence ...

Importantly, the College pointed out that:

Family violence can also manifest in civil litigation, such as property or contract disputes, testator family maintenance, guardianship and residential tenancy disputes. The prevalence and increasing awareness of family violence mean these issues appear more frequently in civil courts ...

Obstacles to data collection in the courts and in corrections are discussed further in Chapters 16, 17 and 18.

A 2013 Australian Bureau of Statistics report on addressing gaps in family violence data states this is a nationwide issue, and argues that ‘a key limitation of police data are a lack of integration with other justice data sets which is where perpetrator outcomes are often determined’.

In addition, general criminal offences (assault, burglary, etc.) are not automatically classified in a way which discloses a relationship with family violence.
The Commission heard that difficulties also arise because of the range of intervening steps and the number of different institutions and agencies involved in charging, prosecuting, trying, sentencing and administering the sentence. For example, the police might lay multiple charges in relation to a single course of conduct. Some may be subsequently altered or withdrawn because the prosecutor decides before trial that this is the best course, or the courts refuse to permit some charges to proceed. The matter may be transferred from police prosecutors to the Office of Public Prosecutions if it is to be tried in the higher courts. This means transferring between different organisations, and between different courts—and some data will be lost in that process.

If the defendant pleads or is found guilty and sentenced, the sentence will be administered by Corrections Victoria. The Commission heard from Commissioner Jan Shuard, Corrections Victoria, that detecting a relationship between an offence and family violence is not ‘automatic’, and there are generally three ways it is discovered:

One will be either by self-disclosure through our assessment process in terms of the nature of the offence that the offender will self-disclose or that we will be able to glean that information. We will seek out the police summaries so that we ourselves or our staff can read the details of the offence and then know it was in the context of family violence, or in the higher courts obviously we will get access to the judge’s sentencing comments.79

Issues relating to Corrections are discussed further in Chapter 18. In Chapter 17, the Commission looks at ways to resolve this issue through ‘flagging’ the relationship between an offence and family violence. As noted in Chapter 17 there has been recent work between the Magistrates’ Court of Victoria and Victoria Police on identifying the relationship between criminal matters and family violence, which ensures that the relationship between an offence and family violence is ‘flagged’ in Courtlink, and some individuals are identifiable in common between Victoria Police and the Magistrates’ Court records. However, given the complexities outlined above, this does not inevitably occur. Nor does it ensure that the individual will be identified through other courts and systems. The Commission also notes that $2.5 million has been allocated by the Victorian Government to the Department of Justice and Regulation to scope IT-based solutions to address current information-sharing barriers and needs in the family violence justice system in Victoria.

The Commission also notes Ms Dowsley’s comments that the CSA has been able to use a ‘statistical linkage key’ to join information from different data sets.80 The Commission returns to this issue below. The CSA’s analysis of recidivism, conducted on the Commission’s behalf, used recorded police data only, but suggested that the incorporation of data from Corrections Victoria and courts would enable the development of a more comprehensive recidivism model.81

**Recidivism**

The CSA has undertaken research on recidivist perpetrators of family violence, based on a cohort identified in police family violence incident reports. The CSA explained:

Publicly available information about levels of recidivism and the characteristics and behaviours of perpetrators over time in Victoria could not be located by the CSA. A key component of the work undertaken by the CSA to support the Royal Commission into Family Violence (RCFV) sought to begin to address this gap in the existing evidence ...82

As ‘begin to’ suggests, the CSA research did not aim to provide a comprehensive picture of family violence recidivism in Victoria. It is limited to family violence incidents recorded by police, and even where these incidents come to the attention of police, much information about victims and perpetrators is not recorded.83 In addition, recidivism in this context may not be entirely negative; as the CSA explained:

While recidivism incidents are an adverse outcome to the extent that they indicate repetition of violent behaviour towards victims, they can also be interpreted as an indicator of increased victim willingness to contact police and/or police follow-up and involvement where there are ongoing concerns for victims’ safety.84
The Commission acknowledges recent efforts to address gaps in understanding recidivism, including Victoria Legal Aid’s ‘Characteristics of respondents charged with breach of family violence intervention orders’ and the forthcoming Sentencing Advisory Council report on prior offending and reoffending among offenders sentenced for contravening a family violence intervention order or safety notice.

### Hidden reporting and under-recording

Many of the issues identified above are exacerbated by under-reporting. The problem of under-reporting of family violence is well known and noted elsewhere in this report (see Chapter 3). Two dimensions of under-reporting are worth noting in this context:

- **hidden reporting**, where an incident is reported, but in a way that conceals its links to family violence
- **under-recording**, where the extent or nature of offending is incompletely or inaccurately recorded through ‘process and procedural variations in recording incidents by authorities or services’ or incidents being ‘classified incorrectly, such as when a victim presents as a general assault victim and a judgment is made by the individual making the record about the nature of the incident’.

Hidden reporting and under-recording are made more likely by the complexity of family violence, and distinct responses to it. Family violence can be constituted by a complex pattern of behaviour. Different parts of that pattern will correspond with contact with different systems and services. People affected by family violence may characterise their experience differently, and it may be recorded differently, in each of these settings. They may also not appreciate which parts of their experience are relevant to which setting. As the Australian Bureau of Statistics notes in *Defining the Data Challenge for Family, Domestic and Sexual Violence*:

> Incidents of family, domestic and sexual violence are varied in nature and treated differently depending upon the disclosure of the incident. Disclosure may be made to authorities and classified as criminal under state or territory legislation. The incident may be disclosed to health personnel or other support services and, depending on the circumstances and the details of disclosure, the incident may or may not be perceived as family or domestic violence by the victim and/or perpetrator and/or support worker…

Similarly, the report notes that because family violence may be ‘ongoing’ and constituted by a ‘pattern of behaviour’, difficulties arise in classification and measurement:

> … there may be a long history of incidents between the persons involved, incorporating different categories of family and domestic violence. Some of these may or may not be classified as criminal, be detected by the criminal or civil justice system or handled through a service agency.

> Despite the ongoing pattern of behaviour and number of prior incidents, a civil or criminal justice system response may also be triggered by a single incident of assault. This one incident may be classified as family or domestic violence, recorded, processed and prosecuted in isolation. As a result the recorded incident may not clearly represent all that has occurred.

Under-recording may be more likely in departments, agencies and services which are not primarily focused on family violence (even though a significant number of their clients may be experiencing family violence), and may arise simply because databases do not make sufficient provision for the collection of family violence–related information. A specific example is the Housing Establishment Fund, which among other things is the source of funding for ad hoc emergency accommodation for women who need alternative accommodation and for whom a refuge is not available. The Fund does not collect or record information about the expenditure where family violence is an issue. Similarly, Corrections Victoria advised that data is not collected on the family violence victim status of prisoners or offenders.

The Royal Women’s Hospital drew attention in its submission to the risks of hidden reporting and under-recording in the health system:
Core inpatient, outpatient and emergency data systems in Victoria's hospitals are not mandated to capture and report the rate of disclosures of family violence, to capture social issues as a co-morbidity or to track outcomes for women and children. This renders family violence-related presentations and activity invisible in hospitals, with consequences for funding and service planning.94

Melbourne Research Alliance to end violence against women and their children corroborated these problems, noting that:

The limited research into disclosure to health practitioners (HPs) and inquiry by HPs reveals low rates of either with around one third of abused women ever disclosing and an inquiry rate of around 1 in 10. However, research suggests that women want to be asked directly about abuse by supportive HPs. Women suffering the effects of FV typically make 7-8 visits to health professionals before disclosure. Unfortunately, if women do disclose FV to their HP, there is evidence of an inappropriate, poor quality response.95

Dr Diemer drew attention to under-recording and hidden reporting, using the example of housing and homelessness service providers:

... there is a lot of data that's missing, and it's not just because ... it's not filled in for the client but the client may not actually be recorded as a family violence client because of the way that the person entering the data is either asking the questions or what's available on their data screen ... they might not have the option of family violence appearing.

So even when people are seeking assistance we may be missing a whole lot of people who have family violence issues or are seeking a service for family violence–related matters. An example would be the housing data, homelessness data, where clients are asked for their main reason for seeking support or seeking housing support and that particular day it might be related to 'I can't afford my rent', so that goes in as their main reason, and then there might be other reasons that lead to that. Depending on how busy the worker is, they may or may not ask for the other reasons. They may not ask those questions well. The person may not want to disclose that there is family violence behind the reason that they can't afford their rent, for example. Through asking the rest of the questions the worker may determine that there is family violence issues but they may never go back and change that original data field for the main reason for seeking support.96

Some of the above data gaps are associated with periods of high risk. Knowledge and practice in relation to heightened risk of experiencing and/or perpetrating family violence are discussed in Chapters 2, 6 and 18.

A number of initiatives seeking to improve hospital and health responses to women experiencing family violence are described in Chapter 19. For example, the Strengthening Hospitals Responses to Family Violence Initiative is a continuing, DHHS-funded project involving the Royal Women's and the Bendigo Hospitals, to improve hospital responses to women experiencing family violence. Part of the project involves mapping current data–collection processes, and reporting on options to develop a 'consistent, efficient and reliable system and process for data capture, retrieval and reporting'.97

The Commission also acknowledges the launch of the Victorian Women's Health Atlas, an interactive database developed by Women's Health Victoria in collaboration with statewide and regional women's health services. The Atlas provides extensive health data, including data relating to family violence, and allows area-based comparisons in order to enhance evidence-based decision making about service design, program planning and priorities for health services.98
Measuring the system’s response to family violence: common gaps

The following section examines how current data–collection approaches lead to gaps in our knowledge about the nature and effectiveness of responses to family violence.

Outputs and outcomes

The Commission has observed how a range of departments, agencies and government-funded services measure and record service activities related to family violence—for example, number of hours of support, number of family violence incidents attended, number of referrals, number of applications and orders, and so on.

This is, of course, a necessary aspect of performance monitoring and evaluation. However, measures focused on goals—such as whether a victim of family violence remained safe, returned to work, experienced improved mental and physical health, and so on—are scarcer. As the State of Victoria’s submission notes, ‘Some departmental collections are focused on service outputs only and may not assist with measuring outcomes’.99 Further, because the data collected by different organisations and sectors may be incommensurable—in particular, because they use different measures and definitions—there is limited capacity to aggregate data and measure our overall progress towards family violence–related outcomes.100

This scarcity of outcome-based metrics is part of a broader problem with how government and government-funded service providers measure what they do. Mr Peter Shergold’s 2013 report on service sector reform concludes that outcome measurement and accountability for outcomes are underdeveloped, and proposes that government be held jointly accountable with providers for the achievement of outcomes.101 Mr Shergold recommends that government and community service organisations work together to develop an outcomes framework that focuses on beneficial social impacts. This framework would establish metrics that can be used to monitor, audit, measure and report on programs.102 The report also suggests ‘individual government departments should clearly articulate the outcomes sought from government investment in the services they fund and, wherever possible, link funding to the achievement of those outcomes’.103

Domestic Violence Victoria has suggested specific outcomes relating to women’s and children’s safety as service targets: these include a reduction in the number of women and children having to leave home and live in refuges; a reduction in the number of children going into out-of-home care; a reduction in family violence deaths of women and children; increased feelings of safety; increased satisfaction with parenting arrangements; and reduced educational disruption for children due to having to change schools.104

Ms Peake noted that one of the reasons that there had not been a decisive shift towards outcomes away from outputs is because they require both good definition of those outcomes and good data sources to measure progress against when managing contracts with external providers, and this is a work in progress.105

The lack of a system-wide measure of success was a significant prompt for plans to develop a Family Violence Index. These plans are considered further below.

Evaluation

Two further issues that the Commission is aware of are that many services do not undertake evaluations regularly and that the quality of evaluations is inconsistent.

The Victorian Strategic Management Framework of 2011 notes that the role of public sector evaluation is to:

... objectively review and evaluate the success of the policy, program or project in achieving the stated goals, including their impact on achieving outcomes, and recommend appropriate actions.106
Evaluation helps to answer critical questions, such as whether and why a program or approach is producing the intended (and any unintended) outcomes; whether there are better ways of achieving intended outcomes; whether the program might work in other settings; and so on.

Concerns were raised about a lack of time, resources and know-how to collect and provide data to support evaluation, to embed regular evaluation into service delivery, and to design programs, strategies and processes with evaluation in mind. Dr Diemer, referring to programs with which she has been involved, told the Commission that:

... a program might be funded ... for a short period of time ... usually a maximum of three years. Then they are requested to provide an evaluation so they can apply for additional funding when that expires.

That process is flawed both in terms of the time frame and the fact that you are asking service providers to do an evaluation who are not trained evaluators and who often don’t have the data systems in place to be able to do an effective evaluation. If they have to purchase evaluation contractors to come in, they are often purchasing them mid-way through the program or towards the end and there’s little scope to actually improve the data collection from the beginning. So the evaluation can be really flawed in terms of what they feasibly can evaluate. If there were better systems put in place where you had an evaluation component built into the program from the beginning and you had informed guidance on how that could proceed, then I think you would have much better evaluations coming out in this space.107

Subject to consultation with funders and stakeholders, Dr Diemer suggested:

... you could fund a program for six years with an in-between three-year review so it gives you time to get a program running, have the evaluation with the expectation that the funding is going to continue, but if there is a real problem with the evaluation they might review the funding in that fourth year ...108

Dr Diemer further added that funders:

... tend to fund for the program but they don’t fund for the evaluation but expect an evaluation to happen ... funding also needs to include a component for evaluation so a proper evaluation can be done.109

Ms Dowsley at the CSA offered an evaluator’s perspective, noting:

It is often a challenge for particularly smaller organisations to handle evaluation. As someone who is often asked for information to try to support these things after the fact ... I would definitely support [evaluation being] part of the initial planning. It’s very hard for us to find data about things well after they have happened. But if we know at the time we can provide assistance ... 110

Evaluation also relies on having a clear and articulated understanding of what the program or strategy being evaluated is meant to achieve, and sharing that understanding with evaluators.111
Several submissions reiterate these and similar concerns. For example, the Federation of Community Legal Centres submitted:

In order to assess the efficacy of the system and to improve strategies, accurate, timely and thorough data collection and independent evaluation are essential. However, data related to specific justice and legal assistance aspects of the family violence system is often not available or even not collected, making it hard to assess ‘what works’.

... 

Perhaps most importantly, it would be invaluable not to simply have access to a snapshot picture of CLC legal assistance in family violence, but to be able to gain a sense of how victims/survivors and perpetrators track over time, and the associated interventions that might make the most difference to safety and accountability.112

The Darebin Community Legal Centre noted:

All Darebin’s family violence funding goes to providing the duty lawyer legal service. It has been stretched to encompass expanding needs of family violence clients. In the process of advising and representing clients Darebin collects a great deal of valuable information about where, when and how family violence is occurring, how it is perceived and responded to by those who perpetrate and endure it, and how the support services and institutions that have the responsibility to address it do so. Darebin, like many others in the community legal sector, does not have the resources to properly utilize this information for the purposes of research, policy development and law reform to address some of the underlying causes of family violence.113

The National Aboriginal and Torres Strait Islander Women’s Alliance writes:

Limited research and data on interventions – successful or otherwise – impedes effective and meaningful work with service users. While efforts to build the evidence base are vital, one must be mindful that such efforts can represent a significant impost on services, particularly smaller organisations. Research and evaluation comes at a cost and agencies need to be resourced to collect accurate and timely data, undertake evaluations and contribute to research. While national research conducted by large-scale bodies exists, Aboriginal and Torres Strait Islander data is deficient in accurate and timely data about the effectiveness of the services it provides, largely because of a lack of time, skills and resources to enable those providing services to undertake follow up, and other data collection activities that enhances research and analysis.114

Effective evaluations for some family violence interventions rely on accessibility of data across multiple service systems and data sets. Mr Rodney Vlais, Manager, No To Violence, in explaining the lack of an evidence base for men’s behaviour change programs, noted that evaluations were limited due to several factors including cost and access to data:

We need to triangulate data from police, Corrections, from women’s own reports. As a result of that, there have been very few high quality evaluations being done.115

Dr Diemer expressed the view that an independent body could be set up to conduct evaluations, or provide tools and guidance for evaluations.116

Time for Action, The National Councils’ Plan for Australia to Reduce Violence against Women and their Children (2009–2021), highlights that ‘data relating to violence against women and their children in Australia is poor’, and that adequate data and evaluation to understand what works, what works best and why are consistently lacking.117
ANROWS (Australia’s National Research Organisation for Women’s Safety) submitted to the Commission that without robust longitudinal evaluative studies, it is difficult to ascertain the effectiveness of interventions in responding to violence against women. This means that the evidence base required by governments to draw upon when making resource allocation decisions is effectively reduced. The Commission heard that there is a need for strategic investment to support the research field of domestic and family violence response evaluation and to support services to embed a culture of evaluation in their work. This need is particularly acute in programs and services working with Aboriginal and Torres Strait Islander communities.118

Further to the need for evaluations of particular programs is the need for wider evaluations of the system and its parts. The Commission acknowledges the work that ANROWS has undertaken in this area, including a meta-evaluation of interagency partnerships, collaboration, coordination and integrated interventions and service responses to violence against women, and a meta-evaluation of the key features of effective ‘safe at home’ programs.119

This issue is explored further in Chapter 38. In Chapter 41, the Commission makes recommendations about the duration of funding periods.

Measuring the impacts of change

Forecasting and responding to levels of and changes in demand requires analysis of the influence of different drivers of demand, including policy changes and population shifts. The Commission heard that, to date, there have been only limited efforts to conduct such analyses, and that existing data sets are not robust enough to support them. In commenting on the limits of the existing Victorian Family Violence Database, Ms Dowsley suggested:

We see new things come into the system, but we have not been watching it at such a close grained level that we are actually effectively mapping what those impacts are … if we can work on some of the quality and standardisation we have a much better evidence base through which we can then analyse what are the impacts and what are we seeing.120

The Commission considers the issue of forecasting demand in greater detail in Chapter 41, and recommends the development of a robust demand-modelling tool or set of indicators so that government can better plan how departments and agencies respond to family violence. The effectiveness of this process will depend on access to high-quality data.

The Grampians Integrated Family Violence Committee noted that the lack of system-wide data impacted on its capacity to plan and identify priorities:

There is plenty of ‘data’ in the system: funded agencies, non-funded agencies, Victoria Police, and the Court system all gather, collect and to varying degrees communicate data and information about family violence. However there is no common system of data collection. This limits GIFVC’s ability to understand and act upon priority issues and trends as they arise.

For instance, all agencies have reported growing demand following recent increase in profile of family violence as a community-wide issue. However there is currently no way of effectively monitoring the system-wide impact of these increases. The current service system makes it hard to adequately shift service resources while meeting increasing demand.

The current system means that the results and impacts of interventions are limited in their relevance, and at times limited to only one organisation.121

The Commission acknowledges that past efforts have been made to measure the impacts of reform.
For example, from 2007 to 2009 the Victorian Government initiated the Family Violence Benchmark Data Project, which collected two weeks of data biannually from the Magistrates’ Court, Victoria Police, the Department of Health and Human Services and specialist services who volunteered to participate. The aim was to measure the outcomes of the reforms that had occurred from 2005 onwards. The project arose from the Victorian Government’s recognition that information and data to support and evaluate those reforms was ‘partial and systemically fragmented,’ and more information was necessary ‘to be able to understand better, and measure more effectively, the impacts of the new system’. The project provided previously unavailable information relevant to the outcomes of the reforms, including the impacts on children and the capacity of women to remain safely at home and the use of the Family Violence Risk Assessment and Risk Management Framework (also known as the Common Risk Assessment Framework or the CRAF).

In 2007, an Australian Research Council Linkage grant was provided for a five year research program to a partnership between the University of Melbourne and Monash University, the (then) Department of Planning and Community Development, the (then) Department of Justice, Victoria Police and the (then) Department of Human Services. The research program was known as SAFER (Safety and Accountability in Families: Evidence and Research), and was provided to research Victoria’s integrated family violence service system reforms.

The broad goal of the SAFER project was to gain an understanding of how Victorian family violence reforms are impacting on the safety and wellbeing of women and children and the accountability and responsibility of men who use violence. Three different strands of research were chosen: a ‘safe at home’ strand, examining women’s experiences and the decisions they make about how to remain safe from family violence in the home; the ‘Men who use violence’ project; and a governance stream of research, examining the translation of Victorian Government policy into service delivery practice.

Outcomes from this research have informed Victorian policy and practice development. The final year of the project was dedicated to a review of the implementation of the Victoria Police Code of Practice for the Investigation of Family Violence that the Commission understands is being used to inform the ongoing development of policing family violence in Victoria.

Measuring unmet demand for services

The Commission notes the difficulties in measuring unmet demand, which can be defined in different ways to include:

- people who seek or are referred to assistance but are not able to access it
- people who seek or are referred to assistance for a range of needs, only some of which can be or are attended to
- people who, for various reasons, do not seek assistance although they need or are eligible for it.

The administrative by-product data currently produced is not particularly useful for measuring unmet demand, because it focuses on what services do rather than what they do not, or are not able to do. As the CSA noted in commenting on the limitations of the Victorian Family Violence Database:

In order for a record to be made in the recording systems of the various agencies which can then be forwarded to the Database, a report or call for service must first be made ... As a result, statistics held in this Database will not contain information relating to all incidences of family violence which may be experienced ...

Proxy measures can be used to provide an indication of unmet demand. However, the reliability of these measures varies depending on the measure used and the context. For example, accommodation waiting lists may be used as a proxy measure for unmet demand for housing, even though the fact that a person is on a waiting list is not always a reliable indication of their current or ongoing level of need. Notably, the Australian Institute of Health and Welfare, via the Specialist Homelessness Services Collection, does collect information from housing and homelessness services (including specialist family violence services such as Safe Steps) that includes unmet requests for assistance as well as needs recognised by service providers that were not met.

Some individuals not captured in administrative by-product data sets may be captured in survey data: the PSS, for example, records people who experienced family violence but did not report it.
Measuring the effectiveness of prevention programs

Measuring the effect of family violence prevention programs is also difficult, not least because the target of the program or campaign may be broad—a whole community, workplace or school—and its influence may be gradual, and mediated by a range of other variables. It may require a long time to pass before some programs have any effect.

VicHealth advocates for robust data-collection systems to support prevention and early intervention, and for the adoption of shared standards and definitions to enable standardised data collection nationwide. The Commission acknowledges the value of the National Community Attitudes towards Violence Against Women Survey in providing a measure of community attitudes among different population groups and over time.

These issues are explored further in Chapter 36.

The way forward

Despite extensive efforts and areas of excellent practice, there are serious gaps in our knowledge about the characteristics of victims and perpetrators of family violence, and about how the systems that respond to family violence are working. Limited linkage between data sets, and inconsistent practices and definitions in collecting data, inhibit a holistic evaluation of the family violence problem. Currently, the system captures insufficient information about, for example:

- particular demographics and population groups that may experience higher levels of unmet need for services
- the number of people affected by family violence who access various support systems, including Child FIRST, Integrated Family Services, homelessness services, courts, and police
- the extent of recidivism, which would allow a measure of the extent of the problem and patterns of demand for services
- the experience of perpetrators, including their trajectory through the justice system and use of other services
- family violence other than heterosexual intimate partner violence.

These gaps restrict the Victorian Government’s ability to respond to family violence effectively or to plan for the future. They can result in some individuals or groups being overlooked, and others double-counted or overemphasised; overlapping data collection and service provision, rather than a coordinated response; poorly targeted prevention and early intervention strategies; ineffective expenditure on some responses to violence; and insufficient expenditure on others. Ultimately they can contribute to the continuation of family violence.

The evaluation of family violence-related programs and initiatives delivered by departments, agencies and funded services is often poorly planned and poorly resourced. The Commission heard that there is a tendency to measure system performance by using output-based metrics (for example, number of clients and episodes of service provision) rather than outcome-based metrics (that is, how effective particular programs, approaches or services are in addressing family violence or its effects). Evaluation is not, as a matter of course, undertaken during the life of a program to allow ongoing reflection and adaption.

The Commission’s recommendations are directed to addressing these issues to facilitate a more informed and effective approach to reducing family violence.

Addressing gaps in data collection and analysis

The Commission accepts that using a unique identifier system-wide to record each individual user of different systems and services would help to discern, among other things:

- the range of services that particular individuals (including children) and families use
- how many individuals and families account for the overall volume of family violence in particular systems and services, and in the system as a whole.
This information could inform resource allocation and case-management decisions. The development of linkages between data sets is likely to be a valuable shorter-term measure to address this gap.

The Commission accepts that there are serious difficulties associated with collecting some types of demographic information. Demographic gaps are of concern not only because they obscure the experience of particular groups and communities, but because they may also point to deficient training or practices: if a question is not being asked about a particular characteristic of someone’s identity, it may reflect the fact that a service provider is not attuned to this characteristic, and to the specific needs that might arise in connection with it. Continued efforts to close these gaps are urgently needed, precisely because the circumstances that make family violence more difficult to detect in general population surveys (geographical isolation, homelessness, social and cultural isolation), also tend to heighten the risk of family violence.

In relation to survey data, it is important to emphasise the extraordinary efforts that are made to ensure that the Personal Safety Survey is as comprehensive as possible. Its limitations are largely the product of design, cost constraints or practicalities. The fact that no proxy interviews are conducted, for example, is intended to ensure participants’ safety (as the respondent may live in the same household as the perpetrator) and the reliability of data (where a respondent may not be comfortable revealing information through a third party, particularly a family member or interpreter). Effective surveys of Aboriginal and Torres Strait Islander peoples will need culturally specific approaches. Some Australian Bureau of Statistics surveys use such approaches.

Nonetheless, the Commission’s central concern is that some population groups at heightened risk of family violence are likely to be under-represented in family violence data collections. These groups include Aboriginal and Torres Strait Islander peoples, people living in remote communities, people with disabilities, people from CALD backgrounds (including those with an insecure migration status) and people who, because of homelessness, live in non-private dwellings not covered by the Personal Safety Survey. The fact that these limitations exist even in a survey of such exceptional breadth and depth demonstrates the complexity and challenge of collecting comprehensive data about particular population groups.

There are also shortcomings in our collection of perpetrator information. These issues are explored further in Chapter 18. The Commission notes that some advances have been made: for example, the initiatives between police and courts (noted above) offer a partial solution to some areas of information loss.

However, substantial improvements still need to be made to data sets and how they interact. The CSA’s commissioned research on recidivism is first-rate: it is careful, thorough and informative, but its necessarily limited scope has highlighted the insufficiencies of existing data. The research was limited to police data, which tells us only so much about the characteristics of family violence. For example, the fact that police have not recorded repeated family violence incidents at a given address does not indicate that none have occurred; and where such incidents are recorded, police data does not capture the features of repeated violence that are relevant to understanding recidivism. More generally, there is a need for more departments and agencies to contribute to the Victorian Family Violence Database, improved quality within data sets, and improved links between data sets to gain a complete picture.

The Commission reiterates the importance of evaluative criteria that allow funders and service providers to determine whether services have been delivered in compliance with funding agreements and broader policy goals, and whether their delivery has been cost-effective and efficient. The way data is collected should reflect and inform the aims of a given initiative: what the program is, what it seeks to achieve, and how it will be measured against its objectives. The design and evaluation of programs and initiatives should be underpinned by a clear understanding of the program’s medium and long-term goals, which should in turn reflect system-wide goals. The issue of clear and shared goals is discussed further below.

Funding arrangements also contribute to shortcomings in outcome measurement and evaluation. Data collection is shaped by how the Victorian Government defines the activities it funds, and the accountability and and reporting requirements attached to funding. A focus on system-specific outputs (number of episodes of support and so on) can lead to siloed data collection that has little potential to improve our understanding of family violence or the effectiveness of our response to it.
The Commission accepts Dr Diemer’s evidence that in some cases, programs are not designed or resourced to be comprehensively evaluated. Funding tends to be directed towards service delivery, which leaves limited resources for evaluation and research activities. We examine this issue in more detail in Chapter 41, and make recommendations there for changes to funding arrangements.

Effective evaluation requires funders to anticipate the need for evaluation and build it into the program design from the outset. This maximises the collection of data to assess the program against agreed objectives and performance criteria. The Commission expects that funders will involve service providers in the design. Further, government and agencies should make provision for adequately resourcing the evaluation component at the time of establishing new programs as well as making resources available for periodically evaluating longstanding programs to help programs adapt to emerging issues. They should also fund programs to operate for a long enough period to allow meaningful evaluation. Resourcing evaluation across government departments and agencies and applying it to both internally and externally delivered services will enrich decision making by both the funder and the service provider.

Where appropriate, evaluation should be conducted in parallel with a program’s activities, rather than being restricted to a retrospective analysis of a period of operation. In the early stages of a program, there will be unforeseen complexities and areas of uncertainty. Particularly in such cases, evaluation should incorporate a variety of methodologies, including stakeholder reflection and ‘action research’—that is, research conducted during the life of a program and feeding back into program design. This will enable continuing, ‘on the ground’ assessment of program delivery, and allow for periodic adaptations during the life of a program in response to findings. Monitoring and reflection that continue during the implementation of a program have the capacity to foster:

- confirmation that collection of required data is under way and effective
- management of unforeseen or unintended consequences
- mapping of, and adjustment for, changes in the external environment (beyond the direct control of the initiative)
- deeper qualitative understandings of the initiative, which can validate or challenge the design and theory behind the initiative
- confirmation of readiness for a further evaluation based on outcomes and value for money
- the development of a ‘community of practice’ among practitioners.

Equally, the Commission accepts the crucial role of demand forecasting, and the need to better capture unmet demand data and improved measurement of prevention programs.

Recommendation 203

The Victorian Government work with organisations it funds to provide family violence services, to improve evaluation standards [within 12 months] by, among other things:

- ensuring that where an evaluation is anticipated or expected, resources are provided to allow for the evaluation, including funding for the evaluation itself and for the design and/or implementation of processes and systems to support data collection
- ensuring that the initial period for which a program is funded contains a period of service delivery that is long enough to support a thorough evaluation of the program
- resourcing those delivering initiatives to conduct ‘action research’ during the life of the program, so that adaptations can be made to improve data collection and service delivery
- publishing evaluation outcomes where appropriate.
The need for a coordinated response

Over and above the gaps and inconsistencies outlined above, there is a lack of common purpose, accountability and leadership around family violence data collection. Different services, departments and sectors largely operate according to their own priorities and constraints. Data-collection systems have developed over years to enable services to measure their own performance and outputs. There are areas of excellent practice, but their value is limited by a lack of system-wide coordination.\(^\text{142}\)

A coordinated response to data collection is essential because of the diverse and diffuse nature of family violence. As is emphasised throughout this report, family violence is often characterised by complex patterns of behaviours perpetrated over time. Different aspects of the patterns register in different ways in different services and systems. To understand family violence—both in individual cases and as a continuing problem—there must be a clear view across different parts of the system and over time. Limitations in data, and in the aggregation of data sets, mean that family violence is not reported or recorded in a way that reflects its full extent.

The Commission acknowledges the challenges of a coordinated approach to data collection. Such an approach requires a clear and shared understanding of what family violence is, agreement about the objectives of family violence data collection, and the procedures and infrastructure to support it.

Departments, agencies and funded services sometimes use different definitions of family violence, as well as different definitions of the data items used to measure and respond to it. This can produce data sets that:

- are inconsistent and incommensurate with each other
- are of limited use for wider purposes, including policy development
- lead to divergent conclusions about family violence.

The use of incommensurate data items partly reflects the variety of forms that family violence may take, and the disparate settings in which responses to it are made. Definitions are shaped ‘by the context of enquiry and informed by the strategies, perspectives and agendas of individuals and organisations’, including ‘specific legal, policy, service provider or research perspectives’.\(^\text{143}\) ‘Units’ of service provision vary enormously between contexts: one service may measure the number of counselling sessions; another, referrals; another, attendances at family violence incidents. Meaningful comparisons between these figures are difficult. Equally, each case of family violence is unique, involving as it does individuals with their own history, needs, capabilities and vulnerabilities.

The use of incommensurate data items and data-collection practices may also reflect disparate, program-specific goals: data items might suit those goals within a particular program but be unsuitable for wider purposes.\(^\text{144}\) This often applies to administrative by-product data, collected by service providers in the context of routine service delivery and case management. Yet those who collect data in these contexts are often well positioned to seek more accurate or precise information than can be captured in surveys.\(^\text{145}\) There could be advantages in expanding the categories of data collected in these situations to make it more useful for general purposes. This is more likely to happen if the agencies and departments collecting the data have shared goals, and a sense of how their data-collection activities might contribute to a wider body of knowledge.

Finally, incommensurate data items and practice may reflect different values: about family violence, and about data collection.\(^\text{146}\) Recent research shows that one’s definition of family violence can influence what data is selected for analysis and how it is analysed.\(^\text{147}\) In addition, data collection itself is value-laden: the body of evidence reflects judgments about the relative value of different data items and different sources of knowledge.\(^\text{148}\) This is exemplified by recent debates about the validity and weight of quantitative information compared to qualitative information or ‘practice wisdom’.

It is not the Commission’s role to adjudicate these disputes. Our purpose in raising them is to emphasise, first, that decisions about what data should be collected and how, are far-reaching. They affect evaluation and funding criteria, and practice standards, guidelines and protocols, and shape how services and systems understand and do their work. In this sense, the way the system is measured affects the system itself.
Secondly, shared data-collection practices and standards must be underpinned by shared goals and a shared understanding of family violence and the importance of data collection in family violence. Developing this framework requires continuing cooperation and governance.

As well as producing an update of the Victorian Family Violence Database, the CSA has considered ways to improve the database in the future. Some of these recommendations are of more general relevance for data collection in Victoria.

In particular, the CSA stresses the importance of governance to ensure the overall management of the availability, usability, integrity and security of data, and to provide consistent standards, goals, strategic direction and an authorising environment for data management.

Currently, the Victorian Family Violence Database is managed by the CSA and the Department of Justice and Regulation. The CSA and the Community Operations and Victims Support Agency at the Department of Justice and Regulation have established two working groups to provide advice, comment and feedback on data outputs and data quality issues. The CSA notes, however, the absence of a broader system for data governance:

... a high level steering committee whose role is to set strategic directions for coordinated family violence data activities across the state does not currently exist. High level leadership can be influential in ensuring coordination and alignment with cross-government needs. It is important for garnering commitment across government and helps to ensure efforts to improve Databases are afforded appropriate levels of authority and priority.149

Further, noting that data sets included in the database operate in parallel and are of variable quality, the CSA recommend establishing a statewide data framework to ‘consolidate data activities under an overarching strategic plan that guides the collection, provision and output of timely and relevant family violence information’.150 This would also include prioritising key data gaps, and providing a structured set of activities to address these gaps.

The CSA suggest that ABS frameworks such as Defining the Data Challenge, and Bridging the Data Gaps, as well as the principles and concepts outlined in the National Data Collection and Reporting Framework, could serve as a basis for the Victorian framework.151

In relation to priority gaps, the CSA notes in particular that information gaps around Aboriginal and Torres Strait Islander status, CALD status and health and disability indicators inhibit the capacity of the database to contribute to policy and programs tailored towards these groups. In the Commission’s view, this is true of gaps in Victorian data sets generally.

In terms of guiding the collection of data, the CSA recommends adopting practices to address variations in data quality and improve quality assurance practices. For example, the Victorian Emergency Minimum Dataset incorporates a systematic audit of each hospital that contributes data every three years, to help maintain consistency and quality. Ensuring that similar practices are adopted across the family violence system is a priority.152

The Commission endorses the CSA’s observations. The Commission recommends that the Victorian Government, in consultation with the new Family Violence Agency discussed in Chapter 38 and the CSA, perform an ongoing governance role in relation to statewide data collection, including by implementing a statewide data framework.

The Commission notes that the new Statewide Family Violence Action Plan proposed in Chapter 38 could include progress towards shared objectives.
The Commission acknowledges previous efforts to devise shared standards. In addition to the Family Violence Benchmark project described above, work commenced in 2011 under the Family Violence Interdepartmental Committee to develop an optimum and minimum family violence data set. The project reviewed current data collection, articulated what was available within data sets, and provided recommendations as to potential indicators that could support improved measuring of policies and programs.

The Melbourne Research Alliance to end violence against women and their children recommends renewed efforts to introduce a family violence minimum and optimal data set. Their submission includes a table of items that might be included in the data set. For example, the minimum data set should include demographic characteristics and unique identifiers for victims and perpetrators; characteristics of the incident (including the presence of children, police involvement, the need for immediate protection); records of referrals and follow-ups; and characteristics of the violence, both in general and with respect to the perpetrator and victim specifically. A model such as this may be a valuable component of the shared standards set by the Victorian Government.

The Commission also notes that the Senate Standing Committee on Finance and Public Administration has called for the ABS and other relevant organisations to investigate the feasibility of developing systems and tools to enable ‘survey questions, delivery and data analysis developed pursuant to’ the National Framework to ‘be modified and made available for organisations to use on a local level’. This system-wide approach to family violence data collection and research will need to be supported by individual improvements to particular data sets, and consideration should be given to developing a system-wide platform for communication between data sets. Recommendations for the improvement of IT infrastructure, and for improved integration of IT platforms, are made elsewhere in this report (see, for example Chapters 7 and 16).

**Developing shared outcomes**

To support the above, there is a need to develop shared, specific outcomes against which the efforts of organisations and systems working in family violence can be evaluated.

The Commission recommends that the Victorian Government develop these shared outcomes in consultation with the Family Violence Agency (and potentially in consultation with the CSA and other relevant parties). The outcomes should align with other family violence objectives that Victoria supports, such as those in the National Plan to Reduce Violence Against Women and Their Children 2010–22 and Victoria’s Action Plan to Address Violence against Women and Children, Everyone Has a Responsibility to Act 2012–2015.

The shared outcomes should be specific enough to be applied to the efforts of particular departments, agencies and funded services, and to design data-collection platforms used by these bodies to measure progress towards those outcomes.

As an example of broad but measurable goals, the Closing the Gap targets developed by the Council of Australian Governments to tackle disadvantage in Aboriginal and Torres Strait Islander communities include:

- halving the gap in life expectancy by 2031
- halving the gap in reading, writing and numeracy achievements for children by 2018
- halving the gap in Year 12 attainment rates by 2020.

As noted above, Domestic Violence Victoria has suggested shared outcomes relating to women’s safety. Without seeking to pre-empt the task of framing shared outcomes, we suggest they might be usefully informed by Domestic Violence Victoria’s suggestions. We note that they should be consistent with the principles for the statewide response proposed in Chapter 38.
Recommendation 204

The Victorian Government work with the recommended Family Violence Agency and the Crime Statistics Agency to improve statewide family violence data collection and research [by 1 July 2018], including through:

- setting a strategic direction and addressing recurrent data gaps
- developing a statewide data framework, informed by relevant Commonwealth standards—for example, relevant Australian Bureau of Statistics frameworks such as the National Data Collection and Reporting Framework guidelines and ANROWS (Australia’s National Research Organisation for Women’s Safety) guidance. This should include shared data definitions and performance indicators, guidelines on the collection of demographic information—in particular, on older people, people with disabilities and people from Aboriginal and Torres Strait Islander, culturally and linguistically diverse, and lesbian, gay, bisexual, transgender and intersex communities—and shared best-practice and auditing standards and procedures to foster consistency and quality among Victorian data sets
- exploring opportunities for data linkage between existing data sets and other enhancements to increase the relevance and accessibility of existing data
- holding regular stakeholder meetings to review the function and quality of the Victorian Family Violence Database.

Building on existing data and research

Our understanding of family violence and the response to it could be improved by better use of existing resources. In particular, the Commission recommends making existing data sets and research efforts more accessible, conducting further analysis of existing data, increasing links between data sets, and where necessary, augmenting existing efforts.

Improving the Victorian Family Violence Database

The Commission has already noted above the CSA’s recommendations for improving the database through general governance. They also propose the following means to improve the database.160

Add more data sets to the Database

Additional data sets could include call and dispatch data relating to ambulance callouts, and Ambulance Victoria data, as well as data from Child Protection and Child FIRST–Integrated Family Services, the criminal courts (including the County and Supreme Courts), Corrections Victoria and the youth justice system, community legal services and some health services. It may also be valuable to include data or data sets that shed light on non-physical (for example, economic, emotional) violence. In the Commission’s view, the addition of Integrated Family Services and Child Protection data should be a priority.

The CSA notes that family violence–related events need to be able to be differentiated from the general data in these data sets. This could be achieved by ‘flagging’ family violence episodes or linkage with other data sets. The CSA also proposes some preliminary work by family violence database custodians to ensure these data sets are commensurate with the database standards and definitions.
Statistical linkage
As already noted, there is an absence of unique identifiers for individuals across different data sets.

The CSA recommends that, given the immediate absence of IT and information-sharing systems and processes to support a system-wide identifier, more work could be done to create statistical linkages between data sets.

Statistical linkage is a process by which a person’s identifiable details (such as name, date of birth, sex, and so on) are combined to create a de-identified unique key, which can be used across multiple data sets. The CSA describes this as ‘a way of connecting disparate datasets to create a more useful source of information without significant investments in system upgrades or significant data manipulation’.161

The Commission notes that the Melbourne Research Alliance to end violence against women and their children also advised establishing a confidential data linkage to ‘enable better understanding of help seeking and service system pathways’.162

Information sharing
The CSA notes a lack of clear information-sharing protocols across government, which makes the negotiation of content and time frames for the database more protracted. Information-sharing issues are discussed further in Chapter 7.

The Commission concurs with these recommendations and considers that the CSA is well-placed to maintain and develop the Victorian Family Violence Database.

**Recommendation 205**

The Crime Statistics Agency maintain and develop the Victorian Family Violence Database and consider what additional data sets should be incorporated in the database, how links between all relevant data sets can be created, and how the database can otherwise be developed [within 18 months].

Enhancement of existing information
As part of its 2014–16 research agenda, ANROWS is already making a valuable contribution to improving the state of our knowledge in relation to family violence. For example, in October 2015 they produced an analysis of the 2012 Personal Safety Survey. This included several hundred new statistical items related to violence against women, almost all of which had not been previously published or generated from the survey results.163 ANROWS is currently conducting a further study on the burden of disease (including death and disability) of intimate partner violence.164

This is very valuable work. The Commission notes that organisations designing policy or programs, or making a case for particular approaches, are poorly resourced to undertake research or extract relevant data from existing data sets. ANROWS helps perform that role, analysing existing data sources to provide accessible, selective, pertinent information that can inform and advance both the practice of service providers and their capacity to demonstrate their continuing value to funders.

The submission from ANROWS noted that its funding commenced on 1 July 2013 for a three-year period until 30 June 2016, and that the National Plan extends until 2022.165

The Commission recommends that the Victorian Government continue to resource ANROWS for its work.
The Specialist Homelessness Services collection is another useful database that could be used. The collection is comprised of data provided to the Australian Institute of Health and Welfare by homelessness service providers. It utilises a unique identifier and includes information about, for example, the number of clients supported, the demographic characteristics of clients and the type of support provided. Each year, the AIHW produces reports on the collection.

The Commission heard that the collection of family violence–related information (including relevant risk factors) by homelessness service providers in Victoria was variable, that there was room for a greater focus on family violence, and that data collection relevant to family violence was in part constrained by the reporting platforms.166 Domestic Violence Victoria submitted that because the SHIP database is a homelessness platform, data collected by agencies in this format ‘wildly underrepresents the work that they are doing’ in family violence.167 To the extent that Specialist Homelessness Services collection is comprised of data supplied via these platforms, it will reflect these limitations. In the Commission's view the AIHW should consider amending the collection to increase the focus on family violence, given the nexus between family violence and homelessness.

In addition, though the AIHW produces an annual Specialist Homelessness Services collection report and provides selected data for inclusion in the Victorian Family Violence Database, the Commission believes that the data could be more thoroughly used and interrogated by the Victorian Government.168

**Recommendation 206**

The Victorian Government continue to fund ANROWS (Australia’s National Organisation for Women’s Safety) to do research in relation to preventing and responding to family violence.

**Uptake of existing knowledge**

The Commission also advises strengthening the processes by which research and current knowledge are translated into policy and practice.

ANROWS conducted a recent scoping paper on 'knowledge translation and exchange' (KTE).169 KTE is an area of research concerned with the ‘science on how to more effectively promote and support the use of evidence, thereby building the research to policy and practice gap’.170 ANROWS reviewed the results of 24 studies, 20 relating to ‘domestic violence or intimate partner violence’ and four to sexual assault.

There are different models of KTE. In some models, knowledge is translated into practice best when research questions are developed by those who will use the knowledge in a practical or policy setting; or if researchers build an intention to share the research with the target audience into their work strategies; or if the researchers’ empirical knowledge and the users’ tacit knowledge are both part of the research. Within these models there are specific strategies. The ANROWS review is explicitly preliminary and calls for further research, but it identifies a range of promising strategies, including:

- working with informal opinion leaders (competent, influential people within fields who can influence practitioners and policy makers)
- audit and feedback mechanisms that measure clinical performance (in a health setting, for example, medical records and patient observations may serve this purpose)
- educational interventions (such as continuing professional development), refresher training, and interventions that are multi-faceted and tailored to specific sectors.171
The Commission notes that factors that inhibited practitioners in applying their learning included discomfort in discussing violence or a fear of offending people, a lack of time and a lack of privacy. This underscores the fact that effective data collection is also about preparing those delivering services and collecting data to comfortably approach sometimes sensitive and difficult questions. In Chapter 40 we consider family violence training more broadly.

It is the Commission's view that practitioners, researchers, and those designing and funding research and policy programs need to consider appropriate KTE strategies—as well as factors that inhibit the ability of practitioners to apply their knowledge—and to include these considerations in their practice, design and funding models. Generally, it is important for data collectors to consider not just what data is for, but whom it is for.

Establishing an expert panel

One promising strategy is to establish an expert panel to assist service providers. The Commission notes the Australian Institute of Family Studies has recently been commissioned by the Commonwealth Department of Social Services (DSS) to establish an expert panel to support, strengthen and evaluate the department’s Families and Children Activity. The expert panel is comprised of experts with a variety of relevant specialisations and backgrounds across service delivering research, training, academic and service support. Members of the panel provide expertise and tools to improve the service delivery of DSS-funded providers. For example, members of the panel assist with:

- implementation support and training in using evidence-based programs and practice
- developing outcome measures for evaluating services and programs
- training and support in developing, trialling and evaluating new programs and approaches
- research and evaluation activities.

The panel's work was referred to by Professor Leah Bromfield, Deputy Director of the Australian Centre for Child Protection at the University of South Australia and Professorial Fellow at the Royal Commission into Institutional Responses into Child Sexual Abuse. Professor Bromfield noted in evidence that the panel’s functions included assisting services to ‘use the best available evidence in selecting programs and in developing programs’; assisting organisations providing services to ‘set up good evaluation parameters so that they can be developing the evidence base’; and providing ‘implementation support’, to overcome divergence between program selection and design and ‘on the ground’ program implementation.

The Commission also notes the relatively recent formation of the Melbourne Research Alliance to end violence against women and their children. The alliance draws together experts on family violence in Australia, with a variety of experience and specialisations across social work, primary care, public policy and education. It encourages interdisciplinary research to end violence against women and children.

In the Commission's view, the Victorian Government might consider establishing an expert panel (or potentially multiple panels) to assist organisations and institutions in developing and delivering family violence initiatives. The Alliance may be a viable candidate for performing this role.
The Family Violence Index

The Victorian Government has announced its intention to produce an aggregate indicator of family violence, similar to the Consumer Price Index or the Housing Affordability Index, which will incorporate a range of metrics such as:

- numbers of perpetrator convictions
- rates of reporting to police
- rates of police referrals to family violence services
- the number of working days lost by employees affected by family violence
- the number of presentations to hospitals and the justice system connected with family violence.

The Victorian Government has commissioned ANROWS to advise on the scope and content of the project, including what indicators should form part of the proposed Victorian Family Violence Index (FVI).

The FVI could contribute to the improved measurement of family violence, as well as better coordination of the data sets that will underpin this process. The Commission endorses this initiative (as have a number of our stakeholders in submissions to the Commission).

The Commission notes that if the FVI is to be a single aggregated measure of multiple, disparate data sets, an appropriate methodology will need to be devised. Many measures related to family violence are, on their face, incommensurate, and their relationships complex and contestable. Producing an aggregate figure that reflects Victoria’s performance in responding to family violence is likely to be challenging. Assessing what a change represents can also be challenging. For example, an increase in a demand indicator may be interpreted as a positive (greater willingness to report, better responsiveness by services such as police) or as a negative (a proxy for an increase in prevalence and incidence).

The FVI may nevertheless have a valuable role, particularly in maintaining community awareness of family violence and the need to continuously improve our responses to it.

The Commission understands that the FVI would build on existing research and data-collection efforts in Victoria. We commend that objective, and advise the Victorian Government to liaise with the Crime Statistics Agency to explore means of developing the FVI in a way that complements and builds on the Victorian Family Violence Database.

It is crucial that the Family Violence FVI include measures that reflect experiences of family violence in particular groups and communities, including Aboriginal and Torres Strait Islander peoples, people with disabilities, children and young people, older people, LGBTI communities, people in rural and regional Victoria, and people from culturally and linguistically diverse backgrounds.

The Commission notes that at date of writing, the development of the FVI is under way, and that a recent review of international literature confirms it is a world first.
Endnotes

1 State of Victoria. Submission 717, 39.
2 A copy of the CSA report is in Volume VII.
6 Ibid 4.
7 See, eg, ibid 23–6.
8 See, eg, ibid 29–32.
9 See, eg, ibid 35–8.
10 See, eg, ibid 39–46.
11 See, eg, ibid 49–53.
12 See, eg, ibid 55–58.
15 Ibid Institutional Environment.
16 Ibid Timeliness.
17 Ibid Coherence.
18 Ibid Interpretability, Accessibility.
19 We do not seek to suggest, of course, that multiple contacts with services carries negative implications. Often, a victim’s path to safety will involve multiple interactions with service providers, and this is entirely appropriate. Equally, multiple interactions may signify that a service provider is prioritising and monitoring a family violence situation.
20 Magistrates’ Court of Victoria and Children’s Court of Victoria, Submission 978, 53.
22 Transcript of Dunlop, 12 August 2015, 2776 [8]–[25], 2778 [1]–[5].
24 Transcript of Peake, 14 October 2015, 3921 [24]–3922 [10].
25 Domestic Violence Victoria—04, Submission 943, 4, 10.
26 Ibid 10–11.
30 State of Victoria, Submission 717, 43.
31 Transcript of Dowsley, 14 October 2015, 3581 [30]–3582 [2].
32 Ibid 3582 [2]–[17].
34 Transcript of Dowsley, 14 October 2015, 3581 [30]–3582 [17].
36 Ibid.
37 Ibid.
38 For example, the ABS recommends that a person’s Aboriginal and Torres Strait Islander status be sought each time they come into contact with a service provider (as their understanding of it, or their willingness to report it, may change), and that they be asked to specify whether they are Aboriginal, Torres Strait Islander, both Aboriginal and Torres Strait Islander or neither Aboriginal nor Torres Strait Islander. See ibid.
39 Ibid 145.
40 Ibid.
41 Ibid.
42 Ibid.
43 Ibid 139.
44 Victorian Refugee Health Network, Submission 939, 5; Centre for Multicultural Youth, Submission 452, 1; National Aboriginal and Torres Strait Islander Women’s Alliance, Submission 912, 6; Koorie Youth Council, Submission 906, 5–6; Victorian Gay and Lesbian Rights Lobby, Submission 684, 2.
45 See, eg, Centre for Multicultural Youth, Submission 452, 1; Multicultural Centre for Women’s Health, Submission 616, 8; Shakti Migrant and Refugee Women’s Support Group Melbourne Inc., Submission 500, 5; Australian Muslim Women’s Centre for Human Rights, Submission 728, 19; Victorian Refugee Health Network, Submission 939, 5; Australian Greek Welfare Society, Submission 578, 2.
46 Multicultural Centre for Women’s Health, Submission 616, 8.
47 See, eg, National Aboriginal and Torres Strait Islander Women’s Alliance, Submission 912, 6; Victorian Aboriginal Legal Service, Submission 826, 7; Northern Metropolitan Region Indigenous Family Violence Action Group, Submission 934, 5; Koorie Youth Council, Submission 905, 5–6; Aboriginal Family Violence Prevention and Legal Service Victoria, Submission 941, 6; Victorian Aboriginal Child Care Agency, Submission 947, 29.
48 Victorian Aboriginal Legal Service, Submission 826, 7.
49 Melbourne Research Alliance to end violence against women and their children (Prof. Cathy Humphreys et al)—02, Submission 840, Briefing Paper 8, 6.
50 See, eg, Gay and Lesbian Health Victoria: Australian Research Centre in Sex, Health and Society—La Trobe University, Submission 821, 3–4; Victorian Gay & Lesbian Rights Lobby, Submission 684, 2; No To Violence: Safe Steps Family Violence Response Centre, Submission 933, 21–22.
51 Ibid 22.
52 Ibid.
53 Ibid.
54 Ibid.
111 Federation of Community Legal Centres, Submission 958, 55; Darebin Community Legal Centre, Submission 931, 16–17.

109 Ibid 3598 [26]–[30].

108 Ibid 3598 [6]–[12].

105 Transcript of Peake, 16 October 2015, 3954 [12]–[16]; see also Transcript of Peake, 16 October 2015, 3909 [3]–[12].

103 Ibid.

102 Ibid 25.

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79 Ibid 10.

76 Judicial College of Victoria, Submission 536, 9.

75 County Court of Victoria, Submission 835, 9.

74 Magistrates’ Court of Victoria and Children’s Court of Victoria, Submission 978, 21.

73 Court Services Victoria, Submission 646, 17–18.

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113 Darebin Community Legal Centre, Submission 931, 16–17.
114 National Aboriginal and Torres Strait Islander Women’s Alliance, Submission 912, 6.
115 Transcript of Vials, 24 July 2015, 1443 [28]–1444 [1].
116 Transcript of Diemer, 14 October 2015, 3598 [22]–[25].
118 Australia’s National Research Organisation for Women’s Safety, Submission 626, 12.
120 Transcript of Dowlsley, 14 October 2015, 3592 [13]–[19].
121 Grampians Integrated Family Violence Committee, Submission 399, 4.
122 Department of Premier and Cabinet, ‘Development of a Benchmark evidence base for the family violence service system, project plan’ (June 2007), produced by the State of Victoria in response to the Commission’s Notice to Produce dated 5 June 2015.
123 Department of Premier and Cabinet, ‘Release of the Family Violence Benchmark Data Report’ (September 2008), 2, 6, produced by the State of Victoria in response to the Commission’s Notice to Produce dated 5 June 2015.
125 Department of Premier and Cabinet, above n 123, 4.
127 Ibid 7.
130 Ibid 2.
134 The Commission notes the publication of VicHealth’s ‘Evaluating Victorian projects for the primary prevention of violence against women: A concise guide’ (2015). We also note evidence of individual initiatives in this area, such as the development of an evaluation framework by Inner North West Primary Care Partnerships with the University of Melbourne: see Victorian Primary Care Partnerships, Submission 248, 25; and the Identifying and responding to family violence project: Transcript of Fitzsimson, 12 October 2015, 3210, 17.
135 See Transcript of Eccles, 16 October 2015, 3918 [19]–[20].
141 See, eg, Transcript of Frederico and Brown, 14 October 2015, 3647 [1]–[20], 3747 [23]–3650 [14].
142 See Statement of Peake, 14 October 2015, 33 [137]–35 [144].
143 Australian Bureau of Statistics, above n 78, 9.
144 Ibid 33.
145 Ibid 31.
146 This issue is also considered in Chapter 38,
150 Ibid 140.
151 Ibid 141.
152 Ibid 142.
154 Ibid 14.
155 Melbourne Research Alliance to end violence against women and their children, Submission 840 (Prof Cathy Humphreys et al)—02, Briefing Paper No 7, 4, 6.
156 Parliament of Australia, above n 67, 64.
159 Domestic Violence Victoria—02, Submission 943, 24-25. See also the work of Community Indicators Victoria, Community Indicators Victoria <http://www.communityindicators.net.au/>.
161 Ibid 141.
162 Melbourne Research Alliance to end violence against women and their children, Submission 840 (Prof Cathy Humphreys et al)—02, Briefing Paper No 7, 4.


Australia’s National Research Organisation for Women’s Safety, Submission 626, 17.


Domestic Violence Victoria—02, Submission 943, 8.


Kate Spalding et al, ‘Review of the Evidence on Knowledge Translation and Exchange in the Violence Against Women Field: Key Findings and Future Directions’ (Compass: Research to Policy and Practice, April 2015) 2.

Ibid.

Ibid 6.

Ibid 4.


Ibid 7.


40 Industry planning

Introduction

In consultations across Victoria, the Commission was struck by the commitment, knowledge and expertise of hundreds of practitioners in a range of different roles who assist people affected by family violence—police, specialist family violence workers and integrated family service case workers and outreach workers, crisis workers, lawyers, magistrates, court-based support workers, prevention practitioners and policy experts. Despite working under enormous pressure, and facing unprecedented demand, these practitioners demonstrated their dedication to those they supported, and to ending family violence. In making recommendations to improve responses to family violence across all sectors that assist people affected by family violence, the Commission aims to build on the work of these dedicated practitioners.

While workforce issues are discussed in other chapters throughout this report, this chapter provides a comprehensive focus on the major workforce issues facing those who work in the area of family violence. Some issues are common across workforces, but each workforce also has unique needs. There is a particular focus in this chapter on specialist family violence services. Domestic Violence Victoria highlighted for the Commission the many skills that specialist family violence practitioners possess, and the first section of this chapter examines the capabilities a specialist family violence worker, or someone working in the specialist area of family violence prevention, must bring to their daily work. Workforce issues raised with the Commission regarding this sector are then discussed.

The next section of this chapter summarises the evidence the Commission received on workforce issues with regard to the police, the courts and legal practitioners. Since these matters are discussed in Chapters 14 and 16, this section of the present chapter is brief. Workforce issues in non–family violence specific services, such as health, education, Child Protection and other government departments are also discussed.

In the final section of this chapter, after considering the range of workforce issues across these sectors, the Commission proposes a way forward. The Commission recommends a comprehensive 10-year industry plan to ensure the right mix of highly skilled, appropriately renumerated family violence prevention and response specialists, as well as the police, and justice system workforces needed to meet the challenge of what is a highly complex problem as well as a high volume crime.

Given the pervasive nature of family violence, all service systems and professionals must be able to recognise family violence and respond safely and sensitively. Therefore the industry plan should also deliver family violence–literate health, welfare, children’s and education workforces.

To achieve this, the Victorian Government should work with specialist family violence services, other government and non-government stakeholders, Victoria Police, business, unions, tertiary institutions, professional associations and community leaders to produce and implement the industry plan.

Careful, considered industry planning is essential in developing an effective response to family violence. This will take time, yet we know that family violence is an issue that demands an urgent response. In the final part of the discussion on the way forward, the Commission makes a number of recommendations about important actions that can be taken in the short term to forge stronger relationships; build capability across legal, family violence, universal services and non–family violence specific services; and improve service delivery for both victims and perpetrators.
Overview of the family violence workforce

There are many ways victims of family violence seek help. There are specialist family violence services with expertise in assessing and managing risks and providing support to victims during crisis and beyond. Police and courts respond to immediate safety needs. Universal services that are available to all Victorians—for example, schools, hospitals, health, ambulance and other emergency services—as well as specialist systems such as Child Protection and Integrated Family Services, also work with victims and perpetrators.

While all services have a role in responding to or preventing family violence, the nature of their involvement differs and, therefore, so do the issues in workforce training and industry planning. For victims of family violence the distinctions between universal and specialist services are irrelevant. What they need is a quick, informed and sensitive response to the situation that has resulted in them seeking help.

Specialist family violence services are never going to be able to support every single woman and child who is experiencing violence and nor support every man to change his behaviour who is perpetrating violence. That is just not a realistic expectation of the service, and nor do women always want to go to specialist services. But the focus on managing medium- to high-level risk is the particular and unique role ... ¹

Whilst those other services do want to be able to identify and respond to that woman who is sitting in front of them, they don’t want to be in control of managing that risk. It’s too much for them to do, it’s not their professional expertise and they have no desire to manage those high-risk cases where women are at risk of being murdered, and there are particular times and contexts within which it is really important to have a specialist family violence response.²

In evidence, Ms Emily Maguire, Chief Executive Officer of Domestic Violence Resource Centre Victoria, described a tiered approach to mapping roles and competencies in family violence risk assessment.³ Although, her model relates specifically to risk assessment and management it also provides a good starting point for thinking about the competencies each part of the system needs to possess. Ms Maguire identified four tiers of service.

- Tier 1: specialist family violence and sexual assault services. These are agencies that spend 90 per cent or more of their time responding to women and children who are victims of violence. They have sole responsibility for dealing with medium to high-risk cases on an ongoing basis.⁴ This tier would also include those who work with perpetrators, for example, in men’s behaviour change programs. Specialist family violence practitioners and teams may form part of larger organisations that provide a range of services, or they may be stand-alone services. What they have in common as practitioners is that their sole or major focus is on family violence (and/or sexual assault).

- Tier 2: core support or intervention agencies. These are agencies whose core business is not directly related to family violence but who spend a significant proportion of their time responding to victims or perpetrators of violence. This includes Victoria Police, courts, legal agencies and court services, Corrections Victoria and Child Protection. Child FIRST and Integrated Family Services might also be included in this tier since a significant proportion of the families they work with may be at risk of or are experiencing family violence.⁵

- Tier 3: mainstream services and non–family violence specific support or intervention agencies. These are agencies whose core business is not family violence but which work in sectors that respond to the impacts of family violence (such as homelessness and the health effects of depression and anxiety) or in sectors where disclosures of violence are more likely to occur. These services are also likely to come into contact with perpetrators, although responding to perpetrators is not their primary function.

Tier 3 services include the health-care system (GPs, community health, hospitals and so on.), drug and alcohol services, housing/accommodation/homelessness services, mental health services, agencies that support financial security (for example, Centrelink), and individuals providing therapeutic services (psychiatrists, psychologists, social workers, counsellors, family therapists, and so on.).⁶
Tier 4: general organisations. A range of organisations in the community can support victims of family violence with whom they have regular and extended contact. They may also be able to respond to perpetrators of violence.7

Ms Maguire noted that each of these tiers has required competencies and skills. Some of these are common, for example all tiers need to be able to identify early warning signs or indicators of family violence.8 However responsibility for action is different in each tier. For example, a specialist family violence practitioner needs to be able to assess and manage risk, including high-risk9 and complex needs. In contrast, a health practitioner should have the ability to assess basic family violence risk, know how to get specialist support to help the victim to safety plan and manage risk, and then fulfil their usual role of responding to the health needs of the victim.

The specialist family violence workforce

Specialist family violence services are considered in detail in Chapter 8. This chapter focuses on workforce issues relevant to specialist family violence services.

Specialist family violence services are the services that respond to women and children experiencing family violence. A small number of services also respond to male perpetrators.

As noted, specialist family violence practitioners work primarily with the victims of family violence at medium to high-risk. To do this they need to be able to assess and manage ongoing risk.10 This is complex and demanding work, which requires a detailed knowledge of the dynamics of family violence, what risk looks like, how to communicate with victims without causing more trauma, and how to help victims develop a detailed plan for their ongoing safety.11

There is a wide range of practice specialties in family violence services. These include legal specialists (such as Women’s Legal Service Victoria and the Aboriginal Family Violence Prevention and Legal Service Victoria), children’s specialists, bi-cultural specialists and multi-disciplinary services that combine functions. This means that people who work in specialist family violence services are likely to come from a wide range of professions, including law, social work, health promotion, counselling, psychology and other ‘helping’ professions.

The family violence workforce is predominantly female (98 per cent).12 This is probably because of the major role women’s organisations played in establishing safe places for women, because the majority of services are for women and their children, and because most women who experience family violence are likely to be more comfortable talking to other women, rather than men.13 Some specialist family violence services have obtained exemptions under Victoria’s equal opportunity legislation to employ only women.14

A 2007 workforce survey of 845 employees in the community-managed housing and support sector found that, compared with other parts of the sector, specialist family violence workers are substantially older, with almost a third of workers between 45 and 54 years of age. Of the 115 specialist family violence workers surveyed, only 26 per cent were under 35 years.15 Over half of the family violence workers worked part time (56 per cent).16
Capabilities and competencies of specialist family violence practitioners

Domestic Violence Victoria drew the Commission’s attention to the diversity of skills that specialist family violence practitioners require. While the skills vary between response and prevention work, and between different agencies and services, workers generally need technical expertise in the area in which they work, and a complex set of high-level communication, organisation and management skills.

Family violence workers need to respond appropriately to clients who are traumatised; work with children who have witnessed and/or experienced violence; cooperate with other agencies to integrate their responses across regions or coordinate the package of services available to a victim; engage and develop protocols with a broad range of stakeholders outside the sector, including the health-care system, courts and police; network and cooperate with partner agencies, including those providing secondary consultation; support women through the court system with a working knowledge of relevant legislation and judicial processes; and, occasionally give evidence in court.

It was submitted that relevant competencies are likely to include empathy, listening and communication skills, negotiation and advocacy. Many practitioners also contribute to policy making and practice reform in partnership with courts, police and other agencies. Because funds are scarce many also have marketing, promotion and fundraising skills, and the budget and financial acumen needed to plan resources, account for and acquit funding, and run a service. Managing a service also requires good people management skills.

Prevention specialisation

The Commission heard that family violence prevention work is also highly skilled and may draw on some of these competencies. Prevention practitioners, however, have specific expertise that differs from that of those who work in family violence response, and their practice is therefore specialist in its own distinct way.

The Commission heard that much of the Victorian prevention specialisation has been developed using a public health lens. Prevention practitioners such as women’s health services promote organisation and systems change and conduct health promotion and public health initiatives. “This is because effective primary prevention strategy relies upon influencing public and organisational policy, targeting community engagement and action, and reorienting systems.”

Challenges

This section examines challenges faced by specialist family violence services. The Commission notes that some of these challenges—for example vicarious trauma and workplace stress—are also concerns for other workers who respond to family violence, among them police, magistrates and court staff and child protection workers.

A number of major workforce issues emerged in evidence. First, there may be gaps in the training and skills of people entering the specialist family violence sector. Secondly, the Commission consistently heard that services face major problems attracting and retaining staff because of:

- low remuneration
- the part-time nature of much of the work
- instability in employment due to short-term contracts and funding insecurity
- limited career development opportunities
- a lack of ongoing professional development
- vicarious trauma and stress.

Thirdly, there was concern that these problems are not being addressed through any systematic process of workforce planning and development for the sector.
Workforce skills

Information about the qualifications profile of the specialist family violence sector is not centrally collected. A 2007 KPMG report, however, identified higher rates of non-graduate qualifications in family violence services compared with other community-managed housing and support services.23

At the time of the KPMG report, of 115 specialist family violence workers surveyed, 68 per cent held a university degree, 12 per cent had a vocational certificate and 20 per cent had secondary school completion as their highest qualification. The most common disciplines of higher education were welfare (27 per cent), social work and community development (both 24 per cent). Thirteen per cent had a management qualification.24

There are no mandatory qualifications for employees who provide specialist family violence services to victims. It is typical for advertised positions to require a relevant tertiary or vocational qualification. This is consistent with the 2007 KPMG findings on qualification profiles.25

The Chisholm Institute is concerned that the national vocational training competencies for family violence work are inadequate.26

Primarily what you will find in the specialist sector is that you need a certificate in community development or community services, some will be social work trained, but there are also agencies who are willing to accept, given the history of this work and given there used to be in the ’70s a significant focus on ensuring that the women who were working in this space were victims/survivors themselves, which is not so much the case now, but that was very much where it came from. Given that previous history, there are also services who are willing to accept history of work in the sector as the qualification for working. But there is no kind of consistent standard or framework, which is a significant gap.27

As noted elsewhere in this report, the Commission heard evidence that family violence services do not always have the understanding and sensitivity necessary to respond to the diverse range of people who need their assistance. This can include older people, women with disabilities, lesbian, gay, bisexual, transgender and intersex Victorians, those from culturally and linguistically diverse communities, children and young people, and Aboriginal and Torres Strait Islander peoples.28 These communities also face significant barriers accessing other parts of the family violence system, including police and the courts, as described in Chapters 14 and 16.

Similarly, building capability to deliver culturally appropriate services to Aboriginal and Torres Strait Islander peoples who choose to access mainstream services was a strong theme in submissions,29 along with calls for strategic investment to develop the Aboriginal and Torres Strait Islander workforce in family violence, including in leadership positions.30

Domestic Violence Victoria reported its members’ concerns that new social work graduates are inadequately prepared for work in the family violence sector.31 The Chisholm Institute noted that the tertiary education sector’s approach to family violence qualifications was emerging and inconsistent. Only one institution offers a family violence–specific qualification in Victoria (and it focuses solely on perpetrator programs).32

Other family violence–related subjects are dispersed through courses such as social work, public health, politics and law.33 Only some social work degrees have family violence as a mandatory subject.34 Deakin University, for example, offers a unit, Addressing Violence and Abuse, as part of its Master of Social Work professionally qualifying program. RMIT University has a similar elective unit as part of its Bachelor of Social Work program, and since 2014, Berry Street’s Family Violence Service and Take Two program have been providing an elective to the La Trobe University Social Work program, providing specialist contemporary knowledge on family violence and trauma.35 The University of Melbourne has postgraduate social work subjects in Assessing Risk and Vulnerability and Legal and Ethical Contexts of Practice.36

Attracting and retaining staff

Domestic Violence Victoria reported that its member agencies are ‘having increasing difficulty recruiting and retaining staff’ and that services are ‘now considering candidates for positions who would not have been deemed appropriately qualified or skilled as recently as three years ago’.27

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Similarly the peak body for men’s behaviour change programs, No To Violence, has identified major problems recruiting and keeping quality staff. In 2010 it surveyed male family violence workers anonymously on issues related to pay and conditions. The survey found a ‘sheer lack of suitably qualified applicants’ for facilitator positions—largely due to poor pay, particularly since most of the group work is conducted at night.

Another provider, Bethany Community Support, noted that current program funding ‘does not acknowledge the highly specialist work that is required to work with men who use violence and the need for staff to be equipped, trained and highly supported to do this work’.

The Commission heard that these workforce challenges are acute in Aboriginal organisations and as a result the Aboriginal community controlled sector ‘is quite variable in terms of the capacity across the state’.

Retention and turnover

Retention and turnover was a common theme in submissions. As noted earlier, there is a higher proportion of older employees in the family violence workforce than in the general workforce. The Australian Services Union noted that this ageing workforce ‘coupled with young women coming into the sector and then leaving after relatively short periods of time due to high cost of living, low pay, poor conditions and workplace stress is leading to significant brain drain in this highly specialised sector’.

A 2014 Australian Services Union survey found that 33 per cent of managers in family violence services reported a problem in retaining high-quality staff ‘all the time’, compared with other parts of community services where the rate was 17 per cent.

In 2007 the average turnover rate for the community-managed housing and support workforce (which includes specialist family violence services) was 25 per cent. Staff working in the family violence sector were most likely to leave their existing workplace in the following two years, with 39 per cent of the 115 workers surveyed indicating that this was their intention. Some of these workers intended to move to another employer in the sector, but 26 per cent intended to leave the sector in the next two years.

Problems in retaining staff were echoed by men’s behaviour change program providers, who submitted that working with men who use violence is challenging and demanding and there is high staff ‘burnout’ and turnover. Family Life Service Centre indicated that staff would extend themselves to meet demand and this contributed to ‘workforce burn out and churn, irrespective of the workplace management and supervision support’. It added, ‘turning people in need away is not something which sits comfortably with our vocationally dedicated people. This pressure of demand, in turn [affects] service system stability’.

Remuneration

In 2012 Fair Work Australia (now the Fair Work Commission) made an Equal Remuneration Order for the social, community and disability services industry throughout Australia. This order resulted in wage increases of between 23 and 45 per cent to be phased in over eight years. While this change has been welcomed by the specialist family violence sector, adequate remuneration remains a significant issue. The Australian Services Union submitted:

> Since the equal remuneration order, the ASU has seen many instances of employers re-classifying roles in the family violence sector in order to avoid paying higher wages that the order requires. The outcome has been a de-skilling of the work such that lower qualified staff with less experience are delivering work, or employees are continuing to work at higher levels but “accepting” lower levels of pay for it.

Information on the workforce and remuneration profile of the specialist family violence sector is not centrally collected and the Commission found it difficult to assess current remuneration patterns. Details of each service provider’s cost structure, workforce profile and operating expenses are not collected by the Department of Health and Human Services.
Organisations are funded for the ‘delivery of specific activity output targets’. These refer to the episodes of support to be delivered rather than specifying the number of staff at particular grades or employee classifications. According to the Department of Health and Human Services, funding represents a reasonable cost of delivering services ‘across a mix of agency sizes, structures and locations’. For example, specialist family violence outreach and crisis support accommodation programs use a fixed funding base that increases annually through the application of non-government organisation indexation and increases ordered through the equal remuneration case just mentioned.

DHHS was, however, able to provide funding model workforce profiles for the Family Violence Counselling Services Program. Using this information the Commission compared the salary assumptions that inform funding levels for family violence counselling services with other human services working with families. This analysis is, however, based on only one of the program categories the department has for family violence and ‘the actual mix of resources applied by agencies to deliver their agreed targets varies across service providers for the provision of an identical activity target, and could cover a diverse range of costs at the discretion of each service provider’.

The analysis showed that there are anomalies between the salary assumptions built into funding models between specialist family violence services and Integrated Family Services. Broadly, the funding model assumes that family violence counselling caseworkers are paid at least one award classification level below the majority of family services caseworkers (where there is a range of salaries).

Similarly, team leaders in family violence counselling services are assumed to be two employee classification levels below team leaders in family services. Anomalies also exist between assumed salary grades in the funding model and remuneration of child protection practitioners.

Trade unions told the Commission that most specialist family violence workforce members are paid at the award rate rather than above award. The 2007 KPMG report noted that most specialist family violence services provide salary packaging to employees.

In a survey of 515 members across 106 workplaces, the Australian Services Union also found that 58 per cent of employees regularly worked more than their contracted hours (unpaid), with 88 per cent of these working up to an additional six hours a week. This is consistent with the KPMG survey which found that over 30 per cent of the 115 specialist family violence workers surveyed reported working more than 15 per cent of their paid hours as unpaid work each week.

Workers in men’s behaviour change programs face similar workforce members issues as those women’s family violence services. A survey of 28 men’s behaviour change providers conducted by No To Violence in 2010 found that:

▷ The average hourly rate paid to workers within standard business hours was $28.35.
▷ The rate for out-of-hours work—which is when most group sessions are held—was $31.28 for non-casual workers and $33.12 for casual workers. No To Violence found that some casual out-of-hours workers were paid below the Social and Community Service Award (now the Social, Community, Home Care and Disability Services Industry Award 2010).
▷ Part-time positions are not attractive to potential facilitators, not all applicants are able to work nights and an ‘exceptionally high commitment’ was required of staff to do male family violence work well.

**Career paths and professional development**

The Commission heard evidence that professional development in the sector appears piecemeal and fragmented, with no requirement for continuing professional development to maintain registration or accreditation. An exception to this is men’s behaviour change contact workers and facilitators, who are required to attend at least four professional development activities each year.

Access to training was described as ad hoc, typically consisting of brief, one-off programs. The Commission was told that agencies are not given adequate funding for training and because agencies do not have the funding and staff to backfill positions, training is very likely to be deferred by agencies dealing with a crisis.
There are specific barriers for rural and regional practitioners. Women's Health Loddon Mallee noted that ‘it is vitally important for workers from small communities and small organisations to be actively supported to attend conferences, forums and professional development’ since these ‘build, knowledge, commitment and collaboration’.

In its submission, Domestic Violence Resource Centre Victoria noted that while there is an increased demand for training there is no sustainable strategy for ongoing delivery. DVRCV recommended the development of a strategy that incorporates capability benchmarks, targets participants’ skills and experiences and allocates sufficient training time, stating that ongoing and consistent funding is essential. Ms Maguire, stated:

> I think supporting practice is the particular key. I think delivering training is one useful function, and I think it is a function—that is something that [DVRCV] has been playing a role in for a number of years now. But training is not the only component of workforce development, and I think ongoing practice support and having a well-resourced system that allows professionals to have that time away from case management and to do that level of support is very useful.

The concept of mentoring and supervision, as part of professional development, was a consistent theme in evidence. Ms Ilana Jaffe, Project Coordinator at Inner North West Primary Care Partnership noted:

> The main thing I would talk about would be supervision, because it's great just to send a worker off to training, but if that's not then incorporated into your day-to-day practice and monitored and critical feedback provided if it is not managed well, then there's no point in training, to be honest. The policies and procedures of organisations and the frameworks of organisations need to incorporate all of those elements.

The Australia Services Union submitted that giving people opportunities to lead is very important:

> There are limited opportunities for leadership roles in a non-management capacity in this sector. This leads to low morale and highly experienced employees leaving the sector.

In other areas of specialist expertise there are more programs to support front-line workers—for example, in the Department of Health and Human Services, the Office of Professional Practice supports the child protection workforce. Ms Tracy Beaton, Chief Practitioner and Director of the Office of Professional Practice, DHHS, gave some examples of their work:

> We do a number of things which is about supporting front-line practitioners. So we might do complex case reviews. We might be called in to have a look at something. There might be some themes happening in a division and they might want the office to develop some resource and work alongside people to look at that. We do a lot of reflective practice, so where it is that we are trying to critically analyse what it is that's happened. For example, we might put a genogram up, have a look back through the family, how people understand that, is there anything missing, what else could we have looked at, where else might we consider we need to go with this family, what are the options for this family and so on, to large-scale trainings ...

The Child Protection Operating Model, which significantly restructured the child protection workforce, commenced on 5 November 2012. It saw the introduction of advanced practice roles at the divisional level, with divisional teams comprising child protection practitioners, advanced child protection practitioners, senior child protection practitioners, team managers, practice leaders and principal practitioners.

The principle applied was that 'more experienced practitioners were given carriage of the most complex cases and increased support was made available in each team for less experienced practitioners'.

The Commission was told that the benefits of divisional roles that are aligned to differing levels of experience include that they provide for a 'systemic understanding of the workforce needs to support improved practice'. The advanced practice roles have been credited with increasing retention rates among child/ protection practitioners.
Workplace stress and vicarious trauma

Domestic Violence Victoria noted that family violence work is stressful, emotional and fatiguing. This stress is exacerbated by difficulties accessing services and resources for their clients, lack of time to respond to the complexities of client needs, and limited access to supervision.

The majority of people working in this sector do so because of their personal commitment to address violence against women and this increases their personal investment in the work they do with individual women. This increases the risk of vicarious trauma for specialist family violence workers and the need for organisational support and professional supervision.

These views are consistent with previous studies that found that personal commitment to helping others and human rights are prime motivators for seeking employment in family violence services. The Commission was told increasing workloads, limited resources and marginalisation by other systems demotivate workers in the sector. The impact of these constraints on employee wellbeing and organisational health was also highlighted in submissions:

There is a huge demand on our system, continually and with very little or no reprieve ...
Our intake workers are faced with the decision every day to triage the 2 most serious cases out of the 15 calls that we could work with which [we] receive every week. Additionally, we receive many calls each day which don't make it past the Intake desk and either have to be refused any service or receive a minimum service due to 'not being serious enough' ...
The workers feel they can't do the job properly ... The workers constantly listen to stories of horrific trauma and this translates into compassion fatigue ... They are constantly frustrated due to broken systems, and feel hopeless and helpless in their role. Managers continually feel over burdened by inability to support staff adequately.

Vicarious trauma was a consistent theme in evidence across both family violence services and justice responses, including courts and police. This was echoed by providers of men’s behaviour change programs. For example, Bethany Community Care reported that staff were predisposed to suffer from vicarious trauma as a result of working with men who use violence.

It was recognised that providing ‘counselling, debriefing and other support programs builds resilience, improves emotional wellbeing and can address secondary or vicarious trauma’. Workers in other fields such as sexual assault, social work and counselling often receive regular clinical supervision and debriefing. It was submitted, however, that this is not the case in family violence services. Gippsland Centre Against Sexual Assault noted this contrast:

We notice burnout as a significant factor in the Family Violence sector, this impacts service delivery. In contrast sexual assault support services (CASA's) have relatively high retention rates whilst managing material that correlates to the most violent end of the violence continuum (Braaf, 2011; Australian Women’s Coalition, 2010). I believe the CASA's have needed to develop strong clinical governance and structures that support staff wellbeing as trauma is the core business. Over time CASAs have experienced and develop strategies for prevention and management of vicarious trauma and organisational trauma.

The Magistrates’ Court of Victoria also submitted that ‘consideration needs to be given to the cumulative impact of family violence on those who work in this area and how to manage this on an ongoing basis’. In addition to external counselling and support through the Employee Assistance Program and critical incident debriefing, Court Services Victoria has started a vicarious trauma project, involving representatives from across the jurisdictions.
Other workplace safety issues relate to the nature of the work. It was reported that family violence outreach workers generally work alone, particularly in rural and regional settings. Services reported that family violence workers are often subject to abuse and aggression in the course of their work, including when supporting women and children at court.92 The Australian Services Union reported that among its members:

Limited resources means that employees are forced to "choose" unsafe work practices due to resource shortages such as driving their own cars, on their own, to out-postings which are often dangerous. They may be faced by threats or actual violence by the perpetrator of the client they are supporting.93

**Workforce planning and development**

Industry and employee bodies argued that a comprehensive workforce strategy for the family violence sector is needed to address workforce concerns. The lack of a workforce strategy was lamented by Barwon Area Integrated Family Violence Committee, for example. The committee reflected that a key plank of the mid-2000 family violence reforms was specialisation as a strategy for achieving best practice. However, this was not accompanied by adequate investment or a comprehensive workforce development strategy, so 'the intended benefits of a specialist response have not been fully realised'.94

Domestic Violence Victoria and others similarly called for a workforce strategy.95 No To Violence stated that "the lack of a workforce development strategy for specialist men's family violence practitioners, including bicultural workers, constrains the scope and confidence that stakeholders have in this work".96

Domestic Violence Resource Centre Victoria raised concerns about the lack of training requirements and minimum standards of competency for different professionals responding to family violence.97 It also recommended that the Victorian Government develop a comprehensive workforce strategy to improve consistency in Victoria's family violence service system.98

The supporters of such a strategy argued that it should be comprehensive and inclusive. For example, the Australian Services Union—Victorian and Tasmanian Authorities and Services Branch recommended that the strategy be facilitated and supported by the Victorian Government and include:

(a) Training and development, including strategies to address current barriers faced by employees to participate in training and development.
(b) Strategies to improve attraction, recruitment and selection of staff.
(c) Developing case studies for best practice conditions of employment.
(d) Resources and frameworks for improved support and supervision.
(e) Retention strategies for existing experienced staff.
(f) Career development and pathways.99

Among other elements of a comprehensive workforce strategy that were identified in submissions were:

▶ mandatory units on understanding violence against women and family violence as part of the core curriculum for social work, psychology, education, nursing and other relevant degrees transferring existing professional development and training courses to meet certificate, diploma and bachelor level qualification requirements

▶ attraction and recruitment of suitably qualified graduates and identifying strategies to ensure that working in the family violence sector is seen as a desirable career choice

▶ peer support and mentoring structures

▶ evaluation to assess the effect of workforce development strategies on work practice and service outcomes.100
Domestic Violence Resource Centre Victoria stated that a workforce strategy needs to incorporate and review the Family Violence Risk Assessment and Risk Management Framework (also known as the Common Risk Assessment Framework or the CRAF), including developing family violence risk assessment competency benchmarks to ‘identify core vocational competencies required across sectors in relation to the operation of risk assessment, detailing the levels of capability required depending on service or sectors involved, or the nature of service delivery.’ In addition to family violence specialist services DVRCV identified statutory agencies; courts, judiciary and legal services; and other sectors that regularly work with clients experiencing family violence (such as maternal and child health, homelessness, mental health and hospital staff) as target groups for such benchmarking.

The Victorian Government has recognised the need for such a strategy in the past. The 2007 KPMG survey of the community-managed housing and support sector, including family violence services, was commissioned by the (then) Department of Human Services as the first step in the ‘development of a workforce strategy to improve the qualifications, skills and career pathways of workers in the sector.’ The KPMG survey was part of an ‘overall strategy to develop an industry plan for the community-managed housing and support sector,’ which received $2.1 million in funding over three years. To the Commission’s knowledge, however, the workforce strategy and associated plan were not produced.

Supporters of a comprehensive workforce strategy also argued that efforts to do with workforce planning and development must address current and future requirements of workforce sectors such as prevention practitioners. The submission from nine leading organisations noted:

The current ‘demand’ for initiatives to prevent violence against women – from sporting clubs, schools, workplaces, local governments and other sectors – greatly exceeds ‘supply’ of an adequately skilled workforce that is capable of designing, delivering and monitoring effective and safe interventions. Significant investment in workforce and organisational development and capacity building is required to meet existing demand safely and effectively, and essential if we are to expand the reach of current primary prevention activities across Victoria.

Specific client groups identified included older people; women with disabilities; lesbian, gay, bisexual, transgender and intersex Victorians; those from culturally and linguistically diverse communities; children and young people; and Aboriginal and Torres Strait Islander peoples. Drummond Street Services recommended:

A defined and specific workforce training and capacity building strategy for LGBTIQ sensitivity practices which includes; the legal profession, counselling professionals, family dispute resolution practitioners, women’s refuge staff and the homelessness sector. These professional groups are the most likely to intersect with families experiencing family violence as a result they need to improve their ability to respond to the emotional, psychological and physical needs of families at immediate risk of family violence.

The importance of any future workforce development strategy incorporating the specific needs of rural, regional and remote Victoria was also stressed.
Police, courts and legal services

Victoria Police

Specialised education and training are essential for effective police responses to family violence. The evidence the Commission received on recent advancements in police training and current education and training arrangements is discussed in Chapter 14. Briefly, many submissions and participants in community consultations called for improved family violence training for police in relation to:

- understanding the nature and types of family violence and the harms it causes
- identifying the primary aggressor
- understanding and sensitively responding to the needs of all population groups including:
  - people experiencing elder abuse
  - culturally and linguistically diverse populations
  - people with mental health or other disabilities
  - the lesbian, gay, bisexual, transgender and intersex communities.

The 2013 Review of the Victoria Police Code of Practice for the Investigation of Family Violence noted that ‘only a limited amount of police practice can be taught through desk-based or formal learning’ and that ‘on-the-job, practical application is by far the most important element to build member confidence in attending incidents’. It further noted that supervision is critical to consistent and quality police practice.

Courts

Courts are considered in detail in Chapter 16. The present chapter focuses on workforce issues relevant to the Magistrates’ Court of Victoria.

In Chapter 16, the Commission described the role of the courts, and the practitioners who work in that setting. Submissions and consultations also discussed the training available to people working in the courts system; some of the initiatives to improve knowledge and practice around family violence by judicial members and court staff; and victims’ perspectives on their experiences with that system. This is described below.

The Commission notes that, although family violence accounts for a sizeable proportion of court workloads, the majority of magistrates, registrars and court support staff are not specialised and work across all of the Magistrates’ Court’s jurisdictions. There are, however, some specialist positions in the Family Violence Court Division (at Ballarat and Heidelberg courts) and the Specialist Family Violence Services courts.

Experiences with the Magistrates’ Court

Differing views were expressed about the attitudes, knowledge and skills of magistrates in relation to family violence. Women’s Legal Service Victoria noted:

Magistrate interaction with victims can have a real impact on whether victims feel empowered or disempowered in the court process. Consistency in court craft and decision-making varies across the state.
The Commission was told that, while some magistrates understand the dynamics of family violence, others either do not have sufficient experience in family violence matters or appear not to understand its features or its impact on victims.\textsuperscript{119} Research has referred to a ‘diversity deficit’ among Victorian magistrates and suggested that ‘greater diversity in the magistracy is necessary to maintain community confidence’.\textsuperscript{120} Submissions also noted that family violence specialisation and training for magistrates has had a positive impact:

There has been a notable shift in our region of late in the practice and commentary or reasons provided by Magistrates. Some have cited family violence training they have been provided with. Examples are Magistrate’s [sic] increased sensitivity to women who may be being coerced into revoking orders, or respondents citing lack of contact with their children as to motivation of an applicant despite no efforts being made by a respondent to obtain contact by consent or court order.\textsuperscript{121}

A number of submissions raised concerns about the ability of magistrates to understand and respond to diverse applicants and respondents in family violence matters, such as Aboriginal and Torres Strait Islander peoples, lesbian, gay, bisexual, transgender and intersex people, older people and people with disabilities.\textsuperscript{122} This issue has gained increasing prominence internationally and in Australia as the value of education to make the judiciary more aware of the barriers faced by victims from these groups is acknowledged.\textsuperscript{123}

In the ANROWS (Australia’s National Research Organisation for Women’s Safety) survey described shortly, the majority of judicial officers felt they understood the dynamics of family violence, including its impact on people of different cultures.\textsuperscript{124}

**Judicial education**

The need for judicial education on family violence was a theme in submissions and has been highlighted in recent Australian reports. For example, the joint Australian and New South Wales Law Reform Commissions’ report *Family Violence—A National Legal Response* included recommendations for the family court system and magistrates’ courts.\textsuperscript{125}

These issues were also explored in a state-of-knowledge paper prepared by ANROWS.\textsuperscript{126} This included a voluntary survey of Queensland and Victorian magistrates. Thirty-eight participants were from Victoria. Across all participants 48.5 per cent said their primary work was family violence matters.\textsuperscript{127} The survey found that, of the 47 participants in Queensland and Victoria:

- 96 per cent agreed or strongly agreed that they understood the dynamics of domestic and family violence
- 74.5 per cent agreed or strongly agreed that they were confident that they were able to engage and convey key messages to perpetrators in their courtrooms
- 72 per cent agreed or strongly agreed that they felt confident their decisions in court help make children safer
- 77 per cent agreed or strongly agreed that they understood family violence impacts for people from different cultures.\textsuperscript{128}

Of the 40 participants who responded to the relevant question, almost one in three agreed or strongly agreed that magistrates in their jurisdictions receive sufficient training in domestic and family violence to make informed decisions. Approximately 38 per cent had not had any family violence training in the previous year. Eleven participants had one session and 14 had between two and five sessions. Of the 39 participants who responded to questions on the constraints to taking up training, 28.5 per cent agreed or strongly agreed that time constraints prevented them from participating in domestic and family violence training, and 23 per cent agreed or strongly agreed that location was a constraint.\textsuperscript{129}
The Judicial College of Victoria has published and periodically updates the *Family Violence Bench Book*, a dedicated resource for magistrates and other judicial officers on family violence–related issues. In its submission JCV recommended that funding be made available to update this resource. During this Commission the Commonwealth Government also announced funding for a national Family Violence Bench Book for judges across Australia, as recommended by the Australian Law Reform Commission and the NSW Law Reform Commission. This online resource will cover civil and criminal laws in federal, state and territory jurisdictions. It is being developed by the Australasian Institute of Judicial Administration and the University of Queensland and is expected to be available in June 2017.

In 2014 JCV began a specialised education project with the Magistrates’ Court of Victoria to enhance magistrates’ professional development. The program aims to deliver best practice education for Victorian magistrates in the hearing, determining and sentencing of family violence matters. In that year the JCV conducted a family violence program for magistrates, which included a specific session on the CRAF. Eighty-four magistrates attended, including six magistrates who sit exclusively in the Children’s Court.

The Judicial College Victoria 2016 prospectus includes programs on family violence, such as a two-day program examining ‘the challenges for magistrates confronting family violence matters in court’. The program will cover causes of violence against women; how to increase the safety of women and children (in-depth risk assessment skills training); perpetrator accountability in the courtroom; men’s behaviour change programs; cultural issues confronting people from immigrant and refugee backgrounds, family violence in Aboriginal communities; women with disabilities; and the victim’s response to trauma (mental health outcomes, courtroom presentation). Other programs include a specific focus on Aboriginal peoples and family violence in the Koori Twilight Series.

In addition, the Magistrates’ Court’s internal professional development consists of initial one-on-one induction and mentoring for all new magistrates, based on that person’s professional experience—followed by regular whole-of-court professional development days on ‘aspects of family violence theory, practice, legislative and legal developments’.

The Magistrates’ Court of Victoria and Children’s Court of Victoria submission explained the role of specialist family violence magistrates noting that ‘having specially trained and assigned magistrates has strengthened the leadership across the MCV in the management of family violence matters’.

**Qualifications and training for other magistrates’ court staff**

In its submission the Judicial College of Victoria proposed that a ‘core’ family violence curriculum relevant to judicial officers from all courts, supplemented by jurisdiction-specific education on the issues particular to each court, be developed. In addition, it proposed a Judicial Research Hub to support court-led research into family violence issues across the courts system—to support ‘ongoing judicial education on family violence and contribute to public policy responses to family violence’. The Magistrates’ and Children’s Courts endorsed these recommendations.

The Magistrates’ and Children’s Courts also recommended funding to continue the development of a comprehensive family violence learning and development package, targeted to match the roles and functions of court registry and support staff, and support the professional development of state judicial officers, court registry and support staff in family law, particularly in the context of family violence and child protection. Statewide access to counselling, debriefing and support to ensure the wellbeing of judicial officers and court staff were recommended.

**Registrars**

Registrars of the Magistrates’ Court perform a wide range of tasks. These include in-court (bench clerk) duties, client inquiries (telephone and counter), and back-of-office administrative responsibilities. When a person attends the court to make a family violence intervention order application the registrar can assist them with completing the application form. In specialist courts, family violence registrars are employed and work ‘alongside the judiciary, court registrars, support workers, police, legal services and other support services to effectively manage cases involving victims and perpetrators of family violence’.
The 2015 Landscapes of Violence report found positive and negative experiences with registrars and noted with concern wide variations in practice because the ‘encounter with the registrar can shape women’s subsequent experiences of court, particularly if the registrar is the first stranger with whom they discuss their abuse’.146

In the Commission’s community consultations, registrars were described as ‘a critical point where a lot of extra support could be added’.147 The Commission also heard about the value of professional support and debriefing for registrars including due to the risk of vicarious trauma that can affect staff across the family violence system described above. Ms Karen Field, Specialist Family Violence Service Registrar at Sunshine Magistrates’ Court stated:

> I think that better support services (such as more supervision and debriefing) for registrars should be implemented. This professional support is given to (for example) applicant support workers, but nothing is provided to the registry staff ... I think there is a risk that staff can suffer vicarious trauma if they are not properly supported, with less experienced staff members particularly at risk.148

Dedicated family violence registrars work at the specialist family violence service and family violence division courts. They were described as the ‘linchpin’ of these courts and specialised induction programs are provided for these staff.149 Many submissions focused on the benefits of specialist family violence registrars and recommended they be expanded to more magistrates’ courts.150

Registrars are recruited and trained through the Magistrates’ Court Trainee Court Registrar program, which is open to people who ‘have VCE/HSC (or equivalent), tertiary course or work experience in a relevant field’.151 Participants complete a Certificate in Court Services, which is delivered in-house by Court Services Victoria.152 Approximately 40 to 50 trainee court registrars complete the certificate each year.153

CRAF training was provided to all magistrate court registrars on the commencement of the Family Violence Protection Act 2008 (Vic).154 The current Certificate in Court Services includes a specific family violence subject on providing crisis intervention and support for those experiencing domestic and family violence, which is inclusive of the CRAF.155 There are also family violence components in the workplace-based subjects for staff working in the family violence intervention order registry—which includes bench clerking in intervention order proceedings, processing court orders, making appointments for intervention orders, observing the serving of documents, processing notices, providing advice to parties and observing interviews between an applicant and a registrar.156

After completing this two-year program, trainees may be appointed as Qualified Court Registrars.157 Non-specialist registrars are Victoria Public Service grade 3 positions.158 Specialist family violence registrars are Victorian Public Service grade 4 positions.159 In Chapter 16 the Commission makes recommendations regarding the role and qualifications of court staff.

**Applicant and respondent workers**

At the time of writing there are nine applicant support workers and seven respondent support workers in magistrates’ courts. These roles are VPS 3 positions. They are being extended to every headquarter court and Moorabbin Magistrates’ Court.160 Workers in these roles must have ‘relevant qualifications in welfare, social work, psychology, behavioural sciences, or other related field, and experience working with people who have perpetrated family violence’.161 However, no specific qualification is mandated.

All support workers are required to complete Domestic Violence Resource Centre Victoria’s CRAF training when they commence their roles.162

The Magistrates’ Court of Victoria advised the Commission that they are finalising a comprehensive induction program for these positions. Applicant support workers will be also trained in conducting risk assessments and advocacy. Respondent support workers training will include engaging respondents in conversation, conducting eligibility assessments and explaining the consequences of breaching a family violence intervention order.163
The Family Violence Programs and Initiatives Unit at the William Cooper Justice Centre (part of the Magistrates’ Court of Victoria) is developing best practice standards and guidelines for the expansion of applicant and respondent workers, including a training schedule and plan for family violence registrars and support workers. Other staff at all the magistrates’ courts (such as administrative and support staff, and coordinators/listing staff) receive information about the definition of family violence, purpose of the Family Violence Protection Act, common terms, relationships covered by the Act, nature of intervention orders and the court’s response to family violence as part of their induction. The Magistrates’ Court of Victoria’s Family Violence Unit is working together with its Learning and Development Unit to develop a general training package for all staff across the court, including refresher training.

**Legal practitioners**

Legal practitioners are considered in detail in Chapter 16. This chapter focuses on workforce issues relevant to them.

**Experiences with legal practitioners**

Victims of family violence frequently described having negative experiences when dealing with the legal profession. The Commission was told that many lawyers displayed a limited understanding of the dynamics of family violence, which compounded victim trauma. Victims said:

> I have been humiliated, degraded and been in tears all because of a solicitor that does not understand what family violence is and a system that hasn’t even got any common sense.

> He was a bully. He was ignorant of family violence and gave me misinformation and bad, bad, bad advice ... I felt like he didn’t listen or understand my concerns ... 

The Commission heard that:

- processes and procedures were not adequately explained to victims
- lawyers questioned the veracity of their client’s allegations against perpetrators
- women were encouraged by their lawyers to accept terms that were not in their best interests

There were however good experiences:

> This lawyer provided a range of assistance which helped my daughter feel much more confident and safer. She referred her for some property law assistance, to counselling, made [an] application for victims of crime compensation and compiled a case (which was successful) to argue for a 5 year intervention order.

**The need for family violence training**

The need for lawyers to have family violence training was identified by the Law Institute of Victoria as important, particularly for lawyers in family law and child protection. It was also suggested by Victoria Legal Aid that training more broadly would assist to change cultural in the profession:

> Just as in the sexual assault space, training that also addresses cultural change and an understanding of the broader context of family violence offending will ensure all lawyers are sensitive to the complex and varied presentation of family violence victims and accused.
The Federation of Community Legal Centres raised concerns about the expertise of private lawyers who may be engaged in rural areas where there is greater potential for the body that provides duty lawyer services (a community legal centre or Victoria Legal Aid) to have a conflict in representing a particular person so that the person cannot be assisted by them.\(^\text{175}\) It recommended that specialist family violence legal services be funded to train private lawyers, including in risk assessment and in legal issues arising from family violence such as family law, credit and debt and homelessness.\(^\text{176}\)

The Commission heard that family violence ‘has not featured as part of the formal training of lawyers at all’.\(^\text{177}\) The Commission heard that family violence is not widely offered as a stand-alone subject in law schools and is not mandatory for practising lawyers. Instead the topic is likely to be dispersed across a number of subjects such as family law, criminal law and children and the law. Some law schools offer specific subjects—for example Monash University offers an externship in a family violence legal clinic and RMIT Law has a postgraduate course unit on working with family violence contexts within justice environments.\(^\text{178}\)

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### Practical Legal Training

In Victoria, once a person has graduated from university with either a Bachelor of Law or Juris Doctor they are required to undertake a Graduate Diploma of Legal Practice or legal traineeship, to enable them to apply for a legal practising certificate.\(^\text{179}\) Legal traineeships or graduate programs are offered by private firms across the state where graduates are exposed to different areas of the law prior to specialising in a particular practice area.\(^\text{180}\) The primary providers of the GDLP in Victoria are Australian National University, Leo Cussen Centre for Law and College of Law.

The College of Law program is a Graduate Diploma in Practical Legal Training and includes as electives family law and criminal practice.\(^\text{181}\) However, there is no specific training provided to law graduates about family violence either in terms of underlying causes of family violence, how it may affect people, the interrelation of the different courts, fields of law and jurisdiction that as a whole constitutes the current family violence system in Victoria, skills about how to engage with people who have experienced or are at risk of experiencing family violence or how to develop skills as a lawyer to limit the extent to which lawyers suffer from vicarious trauma.

The Leo Cussen program consists of the Practical Training Course (Graduate Diploma in Legal Practice).\(^\text{182}\) As with the College of Law, there is no specific training provided about family violence.

The Australian National University also offers a Graduate Diploma in Legal Practice.\(^\text{183}\) There does not appear to be any specific training provided in relation to family violence.

Source: Law Institute of Victoria.

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### Continuing professional development

The Law Institute of Victoria provided a summary to the Commission of some of the professional development opportunities available, noting that at the time of preparing its submission most of the training that was available focused on particular aspects of family violence (for example, the process of applying for or responding to family violence intervention orders; parenting cases with family violence or child protection proceedings) and was aimed at practitioners who predominantly worked in the Magistrates’ Court and/or with clients who were applying or responding to a family violence intervention order.\(^\text{184}\)

The LIV advised that it intends to include further training sessions around family violence in its 2016 program, including cross-jurisdictional education seminars.\(^\text{185}\) Topics being considered include CRAFT training, financial and economic abuse, effects of family violence on a witnesses giving evidence, technology-perpetrated family violence and effects on children from being exposed to family violence, including suitable parenting orders and the child’s best interests.\(^\text{186}\)
Some practitioners also develop particular knowledge and awareness of family violence dynamics during the course of their work: ‘... it’s been something that’s evolved, if you will, organically lawyer by lawyer, but it’s not systemic and we certainly are not required to do it’.187

The Commission heard that one of the challenges in providing continuing professional development on family violence is engaging legal practitioners when the topic does not appear to cover their area of practice specifically. However, ‘[l]ike the broader community, the legal community is increasingly aware of the impact of family violence’.188 The Law Institute of Victoria is working with practitioners to highlight the connection between family violence and their day-to-day practice.189

Victoria Legal Aid Family Violence Panel requirements
Practitioners who wish to be on the Family Violence Panel to receive work from Victoria Legal Aid have to meet requirements of specialisation. They must have:

- two years’ recent experience predominantly practising in at least one of VLA’s relevant practice areas (which include family violence, family law and child protection among others)
- had personal carriage of at least 10 intervention order matters in the Magistrates’ Court within the last 24 months and submitted a written outline of how the practitioner prepared one of these intervention order matters for contested hearing
- submitted a written outline of one family violence intervention order matter that the practitioner has had personal carriage of within the last 24 months, that has impacted on, or been relevant within, a family law or child protection matter that the client was also involved in
- completed at least three continuous professional development points covering child-related family law topics, within the last twelve months, or have completed CRAF training within the last 36 months.190

Family violence duty lawyer training initiatives
Training packages are available for community legal centre and legal aid lawyers who act as family violence duty lawyers at magistrates’ courts. Victoria Legal Aid offers in-house training to their duty lawyers, delivered in collaboration with No To Violence. It includes content on working with respondents in a way that does not collude with or condone violence-supporting attitudes.191

Victoria Legal Aid also provides family violence training to its criminal law team.192 There is also a detailed family violence sub-program in the VLA Practice Essentials course and in the New Lawyers Program.193 Continuing professional development courses delivered by VLA also include specific content on family violence.194

Women’s Legal Service Victoria trains its staff and other community legal service lawyers working as duty lawyers.195 It has two training packages on family violence. The first package is on working with women who have experienced trauma.196 The second package is training for community legal centre lawyers called ‘Safer-Families’. It includes three-day training for family violence lawyers who act for applicants.197

Family law practitioners
The Law Institute of Victoria told the Commission that in preparing its submission it identified:

… a lack of training available that was tailored to private family law practitioners or those who practice exclusively in the family courts. There was also limited training available about the family violence system as a whole as most focused on one aspect of a family violence matter and few training programs explored how the different courts and jurisdictions interact with each other as a whole.198
It stated that the limited training on the interaction among courts was particularly concerning since many clients have concurrent matters in more than one court, including: family violence intervention orders in the Magistrates’ Court; parenting and/or property orders in the family courts; child protection proceedings in the Children’s Court where a child is at risk if a parent cannot protect them because of family violence; and the criminal courts, because of a criminal charge arising from a police family violence incident or a family violence intervention order being breached.299

The LIV offers an Accredited Specialist program for family lawyers twice yearly. It is also considering introducing family violence awareness (in particular risk screening) as a required assessment area for accredited family law specialists for its next program in 2017. It submitted that ‘[t]his would be an important step to establish a level of family violence knowledge that the profession can use as a benchmark to work towards as they progress through their career’.200

Family violence–related training and education is available to family lawyers through the Family Law Section of the Law Council of Australia. These include sessions at the Biennial National Family Law Conference; workshops as part of the Independent Children’s Lawyer Training Program; National Family Law Intensives that examine significant decisions by the Family Court, including the Federal Circuit Court; a section on family violence in the Best Practice Guidelines for Lawyers Doing Family Law Work; and a specific project on the Family Court risk assessment tool for the separating families—the Detection of Overall Risks Screen.201

Training aimed at disciplines that work in family law is also offered though the online Avert Family Violence training program. This training was developed by the Australian Institute of Social Relations, a division of Relationships Australia South Australia. The training aims to provide workers at all levels in the family law system ‘with a sound and practical understanding of family violence and to promote a stronger capacity within the family law system for multidisciplinary collaboration’.202 The package targets lawyers, judicial officers, counsellors, psychologists, social workers, legal advisers, court staff (including family report writers), family consultants, family dispute-resolution practitioners and child contact service workers. The training has a general intensive program and specific programs for these groups.203

Locally, the Law Institute of Victoria advised the Commission that as well as developing information to assist family lawyers to advise their clients on how to navigate the family violence system as whole, it is also looking at ‘introducing family violence awareness (in particular risk screening) as a required training area for accredited family law specialists for its next program in 2017’.204 It considers this is ‘an important step to establish a level of family violence knowledge that the profession can use as a benchmark to work towards as they progress through their career’.205

Family law practice is discussed further in Chapter 24.

**Workers in non–family violence specific services**

Workers in areas such as health, education, youth, drug and alcohol, corrections and child protection services may have disclosures of family violence made to them by victims. Perpetrators may also disclose their use of violence or practitioners may become aware of the violence and need to respond appropriately.

The Commission heard that psychologists, social workers, psychotherapists and generalist casework counsellors receive very little training in family violence in the course of obtaining foundational qualifications. No To Violence submitted that ‘As a result, the potential for one-to-one interventions with family violence perpetrators to cause harm and accentuate risk is significant’. It was concerned that ‘the vast majority of this one-to-one work is being conducted without any associated partner support, is devoid of interagency risk assessment and risk management contexts, and without great care is likely to be collusive with perpetrators’ violence-supporting narratives’.206
Health workforce

The health system is considered in detail in Chapter 19. This section summarises workforce issues relevant to the health system.

Chapter 19 discusses the role of the universal health service system and the pivotal role that health professionals play in identifying family violence and getting victims and perpetrators plugged into the services they need. Health professionals are often a first point of disclosure, have the trust of patients and have a wide geographic reach. They may also have to respond to injuries caused by family violence, for example a dentist may have to treat a woman who has lost teeth in a violent assault.

The Commission heard, however, that there is little education provided in undergraduate or other courses for the health professions that directly speaks to family violence and ‘so clinicians are not trained to manage this complex issue’. For example, The Royal Women’s Hospital submitted:

> Family violence is a common but invisible issue in health care in Victoria ... This pattern of invisibility begins in the undergraduate education of health professionals. As far as the Women’s is aware, family violence is not part of core curriculum in the undergraduate training of health professionals or social workers in any university in Australia. Australian trained doctors, nurses, midwives, social workers and other allied health professionals therefore begin providing clinical care without being sensitised to the prevalence and dynamics of family violence, informed about its health impacts, trained to recognise the signs or to respond safely and effectively to a disclosure.

The Melbourne Research Alliance to end violence against women and their children cited a review of Australian medical schools that shows that some have no specific content, some provide three hours and others do up to 12 hours of training on family violence issues. The Royal Women’s Hospital told the Commission that in its role as a training hospital it includes violence against women in its orientation for nurse and midwife clinical placement, and submitted that something similar should be considered for other training hospitals, including training for junior doctors.

After graduation, the Royal Australian and New Zealand College of Obstetricians and Gynaecologists offers doctors a training module on sexual assault, titled Medical Responses to Adults Who Have Experienced Sexual Assault. This module informs doctors about the health outcomes experienced by adults who have been sexually assaulted; scenarios to assist doctors to become familiar with signs alerting them to the possibility that sexual assault has occurred; self-learning tasks to explore responses to disclosure of sexual assault; a section on self-care for doctors; a list of contacts for referrals to sexual assault services; and a list of further resources and additional reading in specialist areas. This module does not have an external assessment component. There does not appear to be a similar resource specifically for family violence.

The Royal Australian College of General Practitioners sets the curriculum which forms the basis for assessing GPs’ competence to practice in the Australian community. They submitted that ‘the knowledge, skills and attributes of GPs recognized by the RACGP as fundamental to responding to and managing family and domestic violence are reflected throughout the Curriculum’.

The Royal College produces a resource called Abuse and Violence: Working with our Patients in General Practice (sometimes called the ‘white book’) and provides an online active learning module for GPs. The College is also developing a decision-making pathway for working with perpetrators as an adjunct resource to the white book; it identified this as an area ‘needing more attention across the sector’. The College stated that:

> Domestic and family violence can test a GP’s professional skills to the limit, as there are often life threatening, physical, emotional and complex family and legal issues that require a high level of professionalism in order to successfully assist patients. GPs are expected to reflect on their own attitudes towards family and domestic violence in their training, and how these might impact and influence their management strategies.
The College also recommended increased funding to enable more accessible training for GPs in identifying and managing family violence; a greater emphasis on training for psychologists, social workers and psychiatrists, particularly in family violence counselling; expanding its active learning module to a wider group of health professionals; extending its focus to men, including those who use violence and to men and boys who have been exposed to family violence; and additional training in safeguarding children.\(^{217}\)

The Royal Australian College of Surgeons submitted that it ‘supports programs that help to identify and support family violence victims, including training programs that improve the confidence and competency of health professionals to identify and care for people experiencing family violence’.\(^{218}\)

The Royal Australian and New Zealand College of Psychiatrists Victorian Branch noted that mental health professionals are not required to obtain specialist family violence training through the curriculum of medical undergraduates, postgraduate training for psychiatry trainees or continuous professional development.\(^{219}\) They submitted that it should be mandatory for all mental health professionals to be trained in family violence.\(^{220}\)

**Education workforce**

Ongoing learning and development on family violence also appears limited for the education workforce. Ms Gill Callister, Secretary, Department of Education and Training, gave evidence that the main training for teachers on family violence is through an online training module on teachers’ mandatory reporting obligations to Child Protection.\(^ {221}\) The training module must be undertaken every year by all teachers and principals registered by the Victorian Institute of Teaching, and includes how to identify child abuse, family violence and neglect, how to manage disclosures and how to make a report.\(^ {222}\) The training module includes an explanation of family violence and of some of the physical and behavioural indicators of family violence.\(^ {223}\)

Primary school welfare officers, primary school nurses, secondary school nurses, student welfare coordinators, student support officers, chaplains and other pastoral care staff who are DET employees also have access to this module. It must be completed annually by all principals, teachers and staff registered to teach.\(^ {224}\)

Ms Callister noted that primary school nurses in two regions have been trained in the Common Risk Assessment Framework.\(^ {225}\)

The Commission did not hear any specific evidence on whether or not pre-service teacher training (the training teachers receive before they are qualified to teach) includes a component on family violence. After broadly reviewing publicly available materials, the Commission found that most tertiary courses in education did not mention family violence as a component of the course.

**Child Protection and family services**

Child Protection is considered in detail in Chapter 11. This section summarises the workforce issues relevant to Child Protection.

Improving child protection practitioners’ understanding of family violence was a consistent theme in evidence.\(^ {226}\) Family violence victims were often afraid of Child Protection and did not always report the violence because they were afraid they would lose their children.\(^ {227}\) This was particularly so for Aboriginal and Torres Strait Islander women.\(^ {228}\)

People spoke of the need for more collaboration between Child Protection, Child FIRST–Integrated Family Services and the specialist family violence sector, and said that this requires all these services to change.\(^ {229}\) Cultural change could be encouraged by cross-sector training for workers in all the systems which come into contact with children affected by family violence and integrated practice models that focus on the perpetrator and shift the burden away from the mother as the ‘protective parent’.\(^ {230}\)
The Department of Health and Human Services described several initiatives that are discussed in Chapter 11. In summary these are:

- Training to improve understanding of family violence among child protection practitioners—for example, as part of the compulsory induction program known as ‘Beginning Practice’. Family violence is also included in the Best Interest Case Practice Series for child protection staff.

- In June 2014, senior child protection practitioners statewide were trained on effective responses to family violence by No To Violence and the Office of Professional Practice within DHHS. In June 2014, the specialist practice resource, ‘Working With Families Where an Adult is Violent’ was published.

- Ms Beaton stated that Cumulative Harm Specialist Practice Resource also provides practical advice to workers in the area of child protection.

- The introduction in 2012 of advanced practitioner roles in Child Protection (See the discussion earlier in this chapter on career path and professional development).

- Co-location of family violence specialists in child protection offices (under the 2015–16 budget commitment of $3.9 million for ‘child protection flexible responses’).

### Office of Professional Practice

The position of Principal Practitioner, now the Chief Practitioner, was established in 2006 to support the legislative reforms associated with new child protection legislation—the Children, Youth and Families Act 2005 (Vic). The role of the chief practitioner is to act as the principal clinician and adviser on child protection practice in DHHS, set and monitor service delivery standards, and ‘develop modes of service delivery and to lead and promote a strong learning culture’.

In 2009 and 2010, two additional statewide principal practitioners were employed to embed these reforms and to assist the principal practitioner. In 2010 the Office of the Principal Practitioner was also created to support these functions.

The Office of Professional Practice was established in 2012 by the amalgamation of the Office of Senior Practitioner (Disability) and the Office of the Principal Practitioner. Its purpose is to create an environment that continually improves workforce capability to meet the needs of the Department of Health and Human Services’ clients. The office is now made up of a chief practitioner and director, a senior practitioner—disability, an assistant director and two statewide principal practitioners. The principal practitioners are responsible for practice leadership, which includes supporting front-line practitioners and programs, monitoring and reviewing practice; practice research and evaluation; promoting professional development and training; being the expert spokesperson on professional practice; and influencing policy and program design.

The office supports a workforce of about 7330 people, including 1410 Child Protection staff, 417 Secure Services staff and 5500 Disability Services staff. Child protection practitioners, for example, can contact the office for advice and support on a case they are working on. This is in addition to the support practitioners receive from the principal practitioners and other professionals in their divisional teams. In some cases the office provides direct practice leadership to external services that work with departmental clients, for example Integrated Family Services or out-of-home care providers.

There is no specific principal practitioner for family violence. However as noted above family violence is a critical component of practice leadership given the intersections between child protection and family violence.
Other sectors

Family violence units within relevant departments

In the Department of Justice and Regulation, the Family Violence and Sexual Assault Unit leads the development and implementation of family violence and sexual assault policy. This team is in the Community Operations and Victims Support Agency—Criminal Justice, and comprises nearly seven full-time equivalent staff. Additionally, there is a legal policy officer in the Criminal Law Policy Unit who works on family violence (0.8 FTE), and three staff in Corrections Victoria who are dedicated to family violence work. DJR noted that while there are no staff in the Koori Justice Unit specifically dedicated to family violence, staff spend a significant amount of time on family violence matters, equivalent to a 0.3–0.4 FTE role.247

There is a specialist family violence unit in the Department of Health and Human Services, known as the Family Violence and Sexual Assault Team. Its functions relate to the design and delivery of family violence and sexual assault services. It comprises nearly eight full-time equivalent staff and an additional four temporary staff members, to respond to the Commission and delivery of the Victorian Government’s election commitments. DHHS also analyses data and develops and coordinates policy, advice and strategy on family violence. These roles are spread across multiple areas of DHHS, centrally and at the divisional and local area levels.248

There is no specialist family violence unit, or staff dedicated to family violence, in the Department of Education and Training.249

The Commission heard that other service systems—each with their own specialisation—such as youth justice, drug and alcohol, disability, aged care, homelessness, mental health and the corrections system—need to enhance their capability to recognise family violence and work more effectively with victims and perpetrators.250 Three areas of issues were identified:

- Family violence skill development and guidance has been piecemeal across sectors.
- Knowledge transfer is hindered by ad hoc relationships across other specialist and family violence services.
- Different practice methodologies and philosophies (‘it’s not part of my work’) create barriers to engaging with family violence.

Family violence skill development and guidance across sectors

Several submissions described a piecemeal approach to family violence skill development and guidance in their sectors. For example, the Victorian Alcohol and Drug Association noted variability in the confidence and skill levels of alcohol and drug treatment clinicians who seek to explore family violence issues with clients.251 It is not mandatory to assess family violence issues in the drug treatment sector. However recent reforms have standardised assessment tools.252 Optional modules in the new assessment tool include one to identify and record family violence and one that explores the impact of alcohol and drug use on family members.253

Concerns were also raised that mental health workers are not being trained to identify and respond appropriately to family violence.254 Cobaw Community Health submitted that ‘Mental Health workers have a tendency to focus on the presenting symptoms and do not always apply a lens of systematic issues such as [f]amily [v]iolence’.255

The Department of Health and Human Services advised the Commission that while the department does not specifically fund family violence education or training activities, funding is provided for training priorities determined by local workforce training needs analysis and delivered through department-funded mental health and alcohol and drug training providers. Examples, included a number of courses delivered by the Bouverie Centre on topics such as trauma informed sensitive family practice; gender sensitivity in Victoria’s mental health services and working systematically with sexual abuse. Other courses included addressing male perpetrated domestic violence (delivered by No To Violence) and domestic violence and childhood trauma.256
The Commission requested information from the Victorian Government about professional development regarding family violence for practitioners in human services, aside from that contained in the CRAF training undertaken between 2008 and 2010, and from 2011 to 2013. Documentation indicates that family violence is identified in a number of foundational courses for DHHS, for example, it is listed as an important practice consideration in the Introduction to Disability Practice course. The Ready4work Disability Support Work Induction Resource Kit—which is available to government and non-government disability workers—also considers family violence. The Beginning Practice in Youth Justice course materials also includes content on family violence, including the Family Violence Protection Act 2008.

**Ad hoc relationships hinder knowledge transfer**

Victorian Council of Social Service submitted that workers’ limited understanding of the interconnection between drugs, alcohol, and mental health, and family violence, and organisations’ capacity to build workforce understanding and clinical skill is a barrier to responding to family violence. Workers in each sector needed to understand the others’ role better, through targeted training and workforce development. Although there are many local relationships between services these are not systematised and are largely dependent on individuals or where there have been sustained efforts to integrate services. Some formal multi-agency service partnerships were described in evidence, for example in justice/legal partnerships supported by funding from the Legal Services Board.

**Barriers created by different practice methodologies and philosophies**

The Commission heard that family violence is not seen as a priority by all crisis homelessness and transitional housing providers. Similarly, within family violence services ‘there is a need for an understanding of the kind of theoretical frameworks used’ in child protection, drug and alcohol and mental health.

The importance of interdisciplinary and shared approaches to learning was a key theme that arose from the evidence with some examples given of successful initiatives that had been short term. In 2008, for example, Swinburne University and Domestic Violence Resource Centre Victoria developed and delivered joint training for staff from disability and family violence services ‘designed to implement cross-program and cross-sectoral learning’ so that women with disabilities experiencing family violence received greater support from both disciplines. Approximately 20 sessions were held across Victoria but the training was discontinued.

The inadequacies of focusing solely on short course training for those from disciplines other than family violence was identified in evidence. For example, Ms Lorna McNamara, Director of the Education Centre Against Violence in NSW, stated that:

> … one-off training is fine if you are getting training in an area of expertise that you know and it’s actually providing additional information. That can be quite useful. But, if you are training a workforce in an area that they are completely unfamiliar with, one-off training tends not to be held over time because the dynamics within their own workplaces will take precedence and it will lose its influence over time.

On health and other workforce training, Ms McNamara criticised the train the trainer approach, which she described as ‘another very flawed model, particularly where the content of the training is so vastly different to what is being delivered within the service stream’. Her experience was that ‘Usually, a worker attends a two or three day training session, and is then expected to deliver and answer complex questions in an area where they have almost no expertise. This too often results in incorrect ideas and beliefs being reinforced instead of challenged’. 
Workforce education across sectors

The Education Centre Against Violence is a unit in New South Wales Health. It is responsible for developing the statewide workforce and providing training in how to identify and respond to adults, young people and children who have experienced sexual assault, domestic violence, Aboriginal family violence, and childhood physical and emotional abuse and neglect. ECAV trains government and non-government providers, for example non-government drug and alcohol services.

Ms McNamara explained that ECAV is funded to:

... provide training, undertake research, run pilot programs, develop resources, provide clinical supervision and run training programs for both governmental agencies and non-governmental organisations (NGOs) with the aim to provide a whole of system response, not just a departmental or organisational response.

Ms McNamara told the Commission that many courses are provided to specific target groups for free and other services are provided at a subsidised rate. ECAV has approximately 24 full-time employees (including its administrative workforce) and engages around 50 contractors.

On family violence training, Ms McNamara said that ECAV:

... would train nurses, social workers, psychologists. We would have doctors attending - that includes medical doctors, GPs, psychiatrists, forensic specialists ... We have also provided training to Victims Services, which is part of the justice department, the Department of Public Prosecutions. We have shared training with Family and Community services, so delivered with them; and then broadly the NGO sector.

Specialist family violence courses are provided by ECAV and it has developed and maintains a comprehensive suite of materials to support the family violence training modules. In its training a co-facilitation model is commonly used.

ECAV also provides introductory and advanced courses on child-focused and therapeutic approaches to working with children. A four-day foundation course around domestic violence, which includes training about its effects on children, is offered and used by non-government organisations to train new workers. The ECAV is also developing qualification pathways ‘to support an Aboriginal workforce skilled in case management and counselling in the areas of sexual assault, family violence and child abuse.’

It was put to the Commission that the ECAV’s experience in training government and non-government agencies puts it in a unique position, providing a broad perspective across these different organisations. Ms McNamara stated that this has

... allowed us to see where the gaps are across the whole system and where inter-agency processes do not function optimally. We are then able to advise on that and develop broad reaching training solutions to address the gaps. Without this line of sight, gaps in service provision would result in further isolation and silencing of victims.

In comparison, the Victorian Government model is not centralised. Ms Frances Diver, Deputy Secretary, Health Service Performance and Programs, Department of Health and Human Services stated that the department funds health services, registered training organisations and other organisations to deliver professional development. 'The department does not, however, directly deliver or mandate professional development initiatives for the health workforce.'
Noting Ms McNamara’s evidence that the ECAV can influence policy because it is in the NSW health department, Ms Diver reflected:

That’s interesting, and I guess that’s also about how the department interacts with the sector in terms of where they get their policy advice from to inform what policies would occur. So there’s a little bit about working with the sector to make sure that the policies that government are going to put together are informed by best practice. Does that mean that we have to have training units sitting in the Department of Health and Human Services? I’m not sure that’s the only way. It’s working for New South Wales. Could it work for us? Possibly. But there are other ways of doing it as well. Probably a distributed model fits more with the model of service delivery in Victoria where the department holds a kind of planning, policy, funding role and the sector holds much more of a delivery role.\textsuperscript{281}

In Victoria, Domestic Violence Resource Centre Victoria (a registered training organisation that receives funding from the Department of Health and Human Services) plays a somewhat similar role to ECAV.\textsuperscript{282} It provides training and workforce development and produces resources to assist in the response to family violence. It does not, however, have designated status as a whole-of-government provider of family violence education. Instead it has been contracted by government to deliver specific training programs and initiatives including, for example, the training of the maternal and child health nurse workforce on the CRAF.\textsuperscript{283}

\textbf{The Domestic Violence Resource Centre Victoria and training provision}

Domestic Violence Resource Centre Victoria is the major provider of family violence training programs to the government and non-government sectors in Victoria.\textsuperscript{284} It also collaborates with organisations such as No To Violence, Women’s Legal Service Victoria, Centres Against Sexual Assault, Victoria Police and the Aboriginal Family Violence Prevention and Legal Service Victoria.\textsuperscript{285}

In 2008, the Victorian Government contracted DVRCV and Swinburne University to design and deliver training for the CRAF.\textsuperscript{286}

Over the years, this training has been contracted by various government departments and supported through non-government grants. Further sessions have been funded by DHHS in 2015–16.\textsuperscript{286}

Currently, three different training packages are available reflecting different professional roles and the levels of risk assessment outlined in the CRAF.\textsuperscript{287} Workers from a broad range of disciplines have participated, including practitioners from Child FIRST and Integrated Family Services, Child Protection, health services (including drug and alcohol and mental health), homelessness services, disability services, youth services, counsellors, Aboriginal services and those services working with people from culturally and linguistically diverse backgrounds.\textsuperscript{288}

In addition to CRAF training, DVRCV provides training on working with children experiencing family violence, strengthening hospital responses to family violence and supporting women with disabilities experiencing family violence. It also provides nationally accredited training units that can be credited towards qualifications in vocational education training courses.\textsuperscript{289} Recently, DVRCV and Domestic Violence Victoria developed online eCRAF training programs.\textsuperscript{290}
Family violence affects the lives of tens of thousands of Victorians. Yet we have never had a comprehensive industry plan considering the workforce needs of the various systems that work with family violence or the implications for workers in other systems who have contact with victims and perpetrators, or who work in the area of primary prevention.

Family violence work is a human service and, like all human services, it is complex. However, as the rest of this report makes plain, for too long it has been treated as a marginal addition to our human services system. We must invest in the people who work directly with victims and perpetrators. They are fundamental to our success in stopping family violence.

In relation to specialist family violence services, the evidence shows that the sector has not had the benefit of a workforce development strategy or a comprehensive government approach. As a result the sector:

- involves multiple and diverse employers
- has difficulties recruiting and retaining people because of insecurity of employment (due to short-term funding), low remuneration, large workloads and vicarious trauma
- lacks clarity on the core competencies of its workforce as it has tried to adapt to the vagaries of funding and deal with excessive demand
- does not have consistent, clearly articulated and up-to-date professional standards or mandatory qualifications for practice
- does not have a consistent approach to workforce training, professional development and career progression because this activity is not sufficiently resourced in existing funding models
- relies on training sessions or courses as its principal method of learning and development. While opportunities to critically review and reflect on practice may exist in individual organisations delivering family violence services, there does not appear to be a sector-wide approach
- needs to build capability in the employment of— and service delivery to— diverse groups including women with disabilities, lesbian, gay, bisexual, transgender and intersex Victorians, older people, children and young people, Aboriginal and Torres Strait Islander peoples and people from culturally and linguistically diverse communities
- has a workforce that experiences high rates of burn-out and vicarious trauma because of the nature of the work, pressures created by heavy demand, and frustration due to external factors that stop the client’s needs from being met. Vicarious trauma is also experienced by others working with family violence victims and perpetrators, including police and court staff.

It is difficult to profile the current qualifications or salaries of the specialist family violence workforce as this information is not centrally collected. This is itself a barrier to effective workforce planning.

The Commission looked at the capabilities needed by specialist family violence practitioners, and other people who respond to victims or perpetrators of family violence, or work in areas in which disclosures of violence are more likely to occur. It considered how the capacity of each of these sectors can be strengthened.

The Commission also considered the capabilities needed by prevention practitioners. There are distinct competencies required for this group, who are using the lessons of successful public health promotion initiatives to inform and change behaviours. Their challenge is not simply to educate, but use evidence to change hearts and minds. The demand for their expertise is also growing and this cannot be met without a corresponding focus on developing this workforce.
This will all require planning. A comprehensive industry plan is essential. That plan needs to cover the specialist family violence sector and related services, including prevention practitioners. It should address ongoing issues that include capability, qualifications and associated remuneration, with a focus on building practice that is sensitive to diversity and rewards collaboration across sectors (not just services). As such a plan will take time to develop, some interim steps should be taken to promote better career paths in the specialist family violence sector.

Action cannot be confined to the specialist sector. The industry plan must also address family violence capability in key justice, health, education and human services areas in recognition that all these professions have a role to play.

**Capability requirements of specialists**

In considering workforce capability it is essential to first define the competencies and skills each practitioner needs. In Victoria there is no agreed understanding of what the core vocational competencies are in family violence work, or for associated professions that have contact with family violence victims and perpetrators.

Many different people are involved in responding to family violence—each with their own role and skill set. Investing in the capability of each requires a clear focus on who does what, how and when.

For most victims their experience of family violence is not just one-off; while some leave after the first instance of violence, most do not act immediately. We heard of women experiencing violence for months, years, and even decades before seeking assistance, with some never seeking assistance. The reasons for this are complex and mean that supporting women experiencing violence takes time and skill.

As described throughout this report, specialist family violence services work primarily with victims of family violence at medium to high-risk. This is their unique role.

Staff carrying out these functions need to be confident about discussing a victim’s experience. They need to understand how the violence affects a victim’s thinking and how it affects children, and know that the risk posed by the perpetrator is not static—it can escalate quickly. Comprehensive risk assessment and management is in itself a complex task with a high degree of responsibility. For some victims the circumstances are literally about life or death.

Some victims may require assistance over time, particularly if they do not want to leave the relationship. The challenge of this work is to balance a desire and duty of care to offer assistance that will keep the victim and her children safe, while respecting her choices.

Acting to safeguard someone’s safety is common in the helping professions. In some cases (such as in Child Protection) this can occur without consent. However, in family violence this does not apply (nor do we recommend that it should). This means that workers need to deliver support that works towards safety without the power of enforcement. This is delicate and skilled. Getting this process wrong has consequences, including putting the victim and children’s life at risk. It can also result in victims being exposed to violence for longer than they would have been had they been listened to and offered appropriate support.

Similarly, work with perpetrators requires an ability to assist the perpetrator to recognise their use of violence and work to change their behaviour, as well as making sure the victim is safe through partner contact work. This also requires nuance and sophistication in working with men from all walks of life who have differing levels of motivation, insight and trust.
Family violence practitioners also need to have a good working knowledge of the law, be able to navigate multiple systems and secure resources for their client in the face of demand pressures across other systems. They need to look beyond their own service—including providing secondary consultation or advice to non-family violence practitioners. As closer links are built between services this work will become even more complex.

In the past, the system responded to family violence through a particular and specialised workforce located within family violence services. While some specialist family violence services have worked well across some sectors, this has relied on individual relationships rather than being a feature of the way things work. While this workforce has established deep and specialised skills, the disadvantage is that other systems have not developed some of the skills needed to contribute to the overall response. This needs to change.

The recommendations below aim to deliver the workforce needed to ensure that people experiencing family violence receive all the supports required to keep women and children safe and assist recovery from family violence—from both inside and outside the family violence system.

**An industry plan for family violence prevention and response over the next ten years**

There is widespread agreement that a comprehensive workforce development strategy is required. The evidence before the Commission was that attracting and retaining enough suitable people is becoming increasingly difficult in the face of relatively poor remuneration, job insecurity and workplace safety risks including vicarious trauma.

The Commission has had regard to the clear evidence from universal and other specialist systems that gaining confidence and literacy in family violence is increasingly seen as core business. This is a welcome acknowledgement of the scale and effect of family violence across all parts of our community and the role all service systems have in meeting that challenge.

We were also struck by the interest that professional bodies in health care, social work and legal practice had in progressing pre-service and post-qualification learning around family violence. This reflects the reality that in every classroom, GP’s office, hospital and courtroom in Victoria there will be a person that has been affected by family violence. Every teacher, doctor, nurse, ambulance officer, child protection or family service worker, lawyer, magistrate and registrar needs to be able to recognise family violence and know what to do next.

In making recommendations on workforce development and planning, the Commission could propose that the Victorian Government work with the specialist family violence sector to develop a strategy to address the substantial challenges the sector faces in attracting and retaining well-qualified staff. There is no doubt that this is required.

However, we consider that while the specialist family violence workforce needs to be a primary focus, a much more ambitious and strategic approach needs to be taken: the strategy must be one that addresses the size and skillset of the direct family violence workforce (across response and prevention) as well as planning for the police, justice, health, family services and associated workers who are required for a truly intersectoral approach. This would involve workforces that respond effectively within their field of expertise and also collaborate with agencies in other sectors.
The Commission proposes that the Victorian Government work with specialist family violence services, other
government and non-government stakeholders, Victoria Police, business, unions, the courts, community
leaders, professional bodies and the tertiary education sector to develop a ten-year industry plan. This will
form a key component of the Statewide Family Violence Action Plan set out in Chapter 38. This should
include an assessment of workforce requirements in metropolitan, regional and rural areas regarding:

- specialist family violence services
- perpetrator interventions including, but not limited to, men's behaviour change programs
- family services, sexual assault, health services, drug and alcohol, mental health and counselling services,
  maternal and child health services, Child Protection and other workforces in contact with victims and
  perpetrators of family violence
- justice services including Corrections Victoria, community legal services, Victoria Legal Aid, and
court-based supports
- prevention work, including through local government, schools, women's health services and
  community initiatives
- community services for people with disabilities, lesbian, gay, bisexual, transgender and intersex Victorians,
  older people, children and young people, Aboriginal and Torres Strait Islander peoples and people from
culturally and linguistically diverse communities.

Once developed, the actions from the industry plan will need to be funded, so demand can be met over the
medium term. Accordingly, the industry plan needs to be delivered by 31 December 2017 and include costed
recommendations and actions on:

- workforce size requirements for each sector
- capability and skill requirements
- mechanisms to develop and deliver a family violence professional workforce that reflects the diversity
  of the Victorian community, including bi-cultural workers, Aboriginal and Torres Strait Islander workers
  and workers with lived experience of disability
- remuneration and career development for family violence professionals
- workforce development and learning in each sector, based on leading practice internationally
- intersections with tertiary and vocational training—including opportunities to mandate family violence
  subjects in key professions including social work, medical practice, nursing and law
- practice to ensure non-discrimination, including culturally appropriate service provision and provision
  of services to people with disabilities, children and young people, older people, lesbian, gay, bisexual,
  transgender and intersex people, people from culturally and linguistically diverse communities, and other
  marginalised groups
- actions to support the wellbeing and health and safety of the workforce including preventative actions
  and responses to vicarious trauma.

This is a substantial endeavour. The Royal Commission considers an industry plan to be a central plank in the
program of change. The plan is required to take Victoria's approach to family violence to its next logical step,
consistent with the principles of shared responsibility and integration and so clearly put in evidence to
the Commission.
Recommendation 207

The Victorian Government develop or commission the development of a 10-year industry plan for family violence prevention and response in Victoria, to be delivered by 31 December 2017 with commensurate funding for workforce transition and enhancement to begin from that date. The plan should cover:

- the workforce requirements of all government and non-government agencies and services that have or will have responsibility for preventing or responding to family violence—among them specialist family violence services, perpetrator interventions, police, legal and justice services, and universal and secondary service systems
- remuneration, capability and qualifications, workforce diversity, professional development needs, career development and workforce health.

Key issues for the industry plan

While the Commission considers that the details of the industry plan need to be developed through consultation with stakeholders, it has identified three issues that need to be included:

- establishing the qualifications and mandatory knowledge for those who work with people experiencing family violence
- building practice that is aware and sensitive to diversity and is delivered by a workforce that reflects the needs of the people they work with
- facilitating integration of family violence and family services, including through the establishment of Support and Safety Hubs (see Chapter 13).

This list is not exclusive. As noted above, the plan will also need to cover issues that include remuneration and workforce health, including responding to vicarious trauma.

Qualifications and mandatory knowledge

Currently, family violence is not a mandatory subject in social work degrees, or equivalent professional qualifications in psychology, nursing, drug and alcohol practice or other caring professions. Nor is it a mandatory stand-alone subject in legal qualifications or medicine, even though many health and legal practitioners deal with family violence frequently in their day-to-day work.

The Commission considers that work needs to start now to improve the skill base and professional standing of people working in the family violence sector. This will require an increase in the available training and encouragement for people to take up the training.

Mandating family violence as a required subject in a social work qualification

One option would be to require family violence to be a core subject in relevant degrees and professional qualifications, for example in a social work qualification. With this reform social workers would, over time, have consistent exposure to family violence knowledge and contemporary practice principles, regardless of where they studied or worked. It may also encourage some to enter the specialist family violence field having been exposed to the issues in their pre-service training.

The practical effect of including family violence as a mandatory subject would still be limited unless key competencies such as risk assessment and management were also undertaken. Despite this, the Commission’s view is that family violence should be made a mandatory subject in social work.
The Australian Association of Social Workers stated in its submission:

The AASW has over 8500 members and regulates the profession by setting the standards for accreditation of university programs across Australia in regards to the entry-level professional training of social workers. These standards are set through the Australian Social Work Education and Accreditation Standards. During the upcoming review of these standards, the AASW will look to establish a ‘working with family violence’ subject as a component of the core curriculum in all social work education across Australia.292

Our recommendation supports this approach.

Requiring an appropriate tertiary qualification to work as a family violence practitioner

Requiring an appropriate tertiary qualification to practice in a government-funded family violence service would potentially enhance the professional standing of family violence practitioners, reflect the range and complexity of their work and lead to improved remuneration. This would be consistent with minimum qualifications for counsellor/advocates in sexual assault services where a degree in social work, behavioural sciences or psychology, or relevant postgraduate qualification, is a requirement.293

Services may wish to have a range of practice skills within their team and so equivalent qualifications should also be recognised. There is great value in bringing people from different backgrounds and disciplines into organisations, and employers will want to maintain flexibility in the skill base they deploy.

The Commission recognises that new requirements for practitioners to be qualified will require a period of transition and a realistic time frame would need to be set.

There are a number of options that could be considered by government in developing the industry plan and moving towards a minimum qualification system. One would be to include a ‘grandfather clause’ for all existing workers so that only new practitioners employed from a certain date require the qualification. Another would be to require existing workers to have a competency-based assessment that recognises prior on-the-job learning. This would enable them to have their skills and competencies accredited rather than having to complete a degree. This option combines respect for practitioners’ experience and the need for consistency.

Other options would also need to be considered in moving towards a fully tertiary-qualified specialist family violence workforce. These will be important questions for the industry plan.

Regardless of how this is achieved, a transition period will be required to enable the current workforce to gain the requisite qualification, or have their existing qualification or skills and competencies recognised as equivalent. It is highly likely that many, if not most practitioners already have tertiary qualifications, but without comprehensive data on the workforce profile it is difficult to determine how many people in the current workforce this would affect.

... if we are talking about putting standards onto an existing system what that will do is place an additional undue burden on the services who are already trying to meet and struggling and not actually able to meet demand. So if we say that everyone from now on needs to be social worked trained or qualified, whatever that is, I think it is important to consider the realities of that and have a kind of extensive and a longer term strategy for supporting that. But I think in principle it is absolutely necessary.294

The Commission heard evidence about the ‘grassroots culture’ and practice wisdom that exists in the specialist family violence sector.295 This is of value and should be rewarded—including by utilising this skill in the delivery of family violence–related subjects in tertiary and vocational courses, as well as by providing advance standing in such courses when practitioners seek a formal qualification.

Encouraging talent—attracting the best and the brightest into family violence practice

The remaining question is how to encourage existing workers to seek a formal qualification or competency-based assessment equivalent where this is required and how to attract new people into the family violence workforce.
One way of encouraging talented people to specialise in family violence would be to establish a scheme under which graduates receive an amnesty from HECS-HELP repayments if they enter employment in a specialist family violence service within two years of completing their degree, and stay within the community family violence sector for a defined period of time. Potentially this could also apply to lawyers working in family violence legal services.

Examples of this approach already exist for some professions internationally and domestically. For example, in the United States various loan forgiveness schemes operate, including the ‘Public Service Loan Forgiveness’ scheme for employees of government or not-for-profit organisations.296 There is also a loan forgiveness program that is specific to teachers. Under this program, where the graduate teaches full-time for five complete and consecutive academic years in certain low income primary and secondary schools (and educational service agencies that serve low-income families), and meets certain other criteria, they may be eligible for forgiveness of up to a combined total of US$17,500 on their student loans.297

An analogous program exists here in Australia: the HECS-HELP Benefit, under which graduates of particular courses receive a reduction in their compulsory HELP repayments if they take up related occupations or work in specified locations. However, this scheme is less generous and applies to a limited range of professions and courses, including graduates in mathematics, statistics, science, education, early childhood, nursing or midwifery.298 The person can apply each financial year (for a maximum of 260 weeks or five years) for a reduction in their HECS-HELP repayments, to a maximum (for the 2015–16 financial year) of $1,918.39 for early childhood workers and $1,798.48 for mathematics, statistics or science or education, nursing or midwifery graduates.299

It should also be remembered that education costs and entry level remuneration are only one part of the picture. Specialist family violence services will continue to struggle to attract and retain staff unless the issues with greater remuneration, professional development, career pathways and action around vicarious trauma, workplace stress and reducing demand are addressed.

**Recommendation 208**

The Australian Association of Social Workers amend the Australian Social Work Education and Accreditation Standards to require that a ‘working with family violence’ subject be required as a component of the core curriculum in all social work undergraduate degrees [within two years].

**Recommendation 209**

The Victorian Government include in the 10-year industry plan for family violence prevention and response a staged process for the introduction of mandatory qualifications for specialist family violence practitioners, so that no later than 31 December 2020 all funded services must require family violence practitioners to hold a social work or equivalent degree [within five years].
Recommendation 210

The Victorian Government encourage the Commonwealth Government to extend the HECS–HELP benefit scheme to graduates employed in specialist family violence services and associated services (such as community legal services that provide legal services to victims of family violence) [within 12 months].

Working with diversity

The industry plan should ensure that the workforce understands how race, age, gender, disability and sexual and gender diversity intersect with family violence, and knows how to respond accordingly. The workforce should be diverse, including Aboriginal people and people with disabilities in leadership positions and be skilled in working with different cohorts. This applies equally to specialist family violence practitioners, those working with perpetrators, police, magistrates, lawyers, court staff and workers in universal services. Other specialists (including drug and alcohol, mental health, family services, Child Protection) also need to improve their practice with diverse clients who are at risk of, are experiencing or are using violence.

Chapter 26 discusses the over-representation of Aboriginal and Torres Strait Islander people as victims of family violence, and how family violence intersects with a history of dispossession and trauma in those communities. On the basis of that evidence, and the strong arguments made on the importance of those communities leading the response and prevention efforts locally, we believe that attracting, retaining and developing Aboriginal and Torres Strait Islander practitioners needs particular attention. This applies for Aboriginal community controlled organisations and also non-Aboriginal family violence service providers who should also be employing Aboriginal people, along with the courts and Victoria Police.

Accordingly we recommend that a long-term strategy to increase the Aboriginal workforce in the family violence service system—including in front-line and leadership positions in the public and community sectors—should be a central feature of the family violence industry plan. This should build on existing effort in the public sector, for example the Koori Tertiary Scholarship Program, Indigenous Cadetship Program, Koori Graduate Recruitment and Development Scheme under the Department of Justice and Regulation Koori Employment Strategy. The Commission also notes that a Certificate IV in Aboriginal Family Violence Work was available at Swinburne University from 2009–2011 and in 2012–13.

The Commission also notes positive work by the Department of Justice and Regulation in offering a small number of university scholarships for people with disabilities to facilitate pathways into working in justice-related fields. Potentially such schemes could be extended across government departments and to areas of family violence specialisation, including social work, psychology and counselling and working with children affected by family violence. These need not be large-scale programs but could assist to diversify the range of people working as specialist family violence practitioners across disciplines.

Facilitating integration of family violence and family services

The plan to deliver on family violence workforce needs over the next ten years will need to accommodate the Commission’s recommendations in Chapter 13. That chapter noted that a significant proportion of Integrated Family Services clients are affected by family violence.

For this and other reasons described in that chapter the Commission considers that the family violence sector and Child FIRST—Integrated Family Services need to work together as effectively as possible, so that the full range of a family’s needs can be addressed. In other words, family violence needs to be core business of family services. This does not mean that family services would replace specialist family violence services as each service does different work. We do believe, that however, they can and should collaborate in responding to women and children affected by family violence.

To achieve this, in Chapter 13 we recommend establishing Support and Safety Hubs in the 17 local Department of Health and Human Services areas by 1 July 2018. The hubs would provide:
These hubs would create a new, consolidated intake into family violence services and Integrated Family Services, consolidating the current L17 police referral points and the Child FIRST intake.

Transitioning to the hubs with a combined intake system has implications for workforce planning. As such, the transition and the revised service model for the hubs must be a primary consideration in the industry plan.

The Commission noted earlier in this chapter that there are anomalies between funding and assumed remuneration rates between the specialist family violence and integrated family services workforces. It is unreasonable that colleagues in one setting, with the same level of responsibility, should be paid different amounts. These inequities will need to be resolved in the new funding arrangements for the hubs, and across the two sectors more broadly.

**Short-term actions while the industry plan is finalised**

Developing an effective plan will take time. In the meantime there are important actions that could be implemented in the short term to forge stronger relationships; build capability across legal, family violence, universal services and other specialisations; and align service delivery in a more seamless way for victims and perpetrators. These can form part of the industry plan but do not need to be delayed. We discuss these below.

**Promoting a career pathway, leading practice and supporting secondary consultation**

In the Commission’s recommendations to establish Support and Safety Hubs, we also recommended that the minimum resource requirements for each hub include funding new positions for advanced family violence practitioners. This role would include providing secondary consultation to local GPs and health practitioners, schools and other service providers who have clients experiencing or at risk of family violence. They would also assist their colleagues at the hubs on complex cases and provide a point of additional expertise.

The Commission recognises that many family violence workers already undertake these activities. The differences would be that:

- the role is formalised and funded to a level commensurate with the knowledge and practice experience necessary to undertake this advanced level of practice
- there is a defined role of secondary consultation and capability building with non-family violence services
- it would provide a career pathway for specialist family violence practitioners who do not wish to be people managers.

In considering this recommendation, the Commission was persuaded by evidence across human services in Australia and internationally that a career pathway for those who wish to focus on advanced practice is an effective way to attract and retain quality practitioners. In larger organisations such pathways may already exist. But for smaller specialist family violence providers this may not be possible with current funding models that assume a relatively low level of remuneration.
One option for government would be to establish these advanced practitioner roles across specialist family violence services as part of a more realistic funding formula and increased allocation. At a minimum, however, we consider that having an advanced practitioner is a necessary pre-requisite for the success of the Support and Safety Hubs and so must be incorporated in that reform.

Given that it will take some time to establish the hubs, roles should be funded, until the hubs are established, in current L17 referral points and given the responsibility to articulate and strengthen secondary consultation with universal services. This function would transfer to the hubs once they are in operation.

**Recommendation 211**

The Victorian Government ensure advanced family violence practitioner positions are established at each of the 17 recommended Support and Safety Hubs [by 1 July 2018]. As an immediate measure additional resources should be provided to existing services, so that they can provide additional secondary consultation to universal services until the practitioner positions are established.

**Ensuring family violence literacy across universal and other specialist systems**

An effective response to family violence will depend on a cohesive coordinated approach across diverse disciplines. Victims of family violence may report family violence to, or prefer to be supported by, any number of services, or they or the perpetrator may have co-existing problems. When victims choose not to access specialist services, services assisting with other issues may be in the best position to provide support.

At the very least those delivering the other services need to understand how family violence interacts with their service. This requires a significant increase in capability across various service systems, such as education and health (including community health staff, GPs, hospital staff, ambulance and paramedics, maternal and child health nurses, midwives and dentists), family lawyers and others, so they are better able to identify family violence risk and respond accordingly. Equally, specialist family violence services need to understand the practice of other service systems and some of the other issues their clients may present with that affect their safety and wellbeing.

It is clear that professional responses to family violence for those working in universal and other specialist service systems need to be consistent, informed by a strong understanding of the nature and dynamics of family violence and reflective of its multi-dimensional nature.

We propose three key actions to facilitate this approach. These are:

- establishing a delivery mechanism for comprehensive workforce development and inter-sectoral learning (discussed below)
- creating family violence principal practitioner roles in the major service delivery departments—that is the Department of Health and Human Services, the Department of Justice and Regulation and the Department of Education and Training (discussed below)
- establishing specialist family violence advisors in major mental health and drug and alcohol services (as recommended in Chapter 19).

**Family violence education**

Victoria has made important attempts to educate workers in relevant areas about family violence. These include the training of maternal and child health nurses on family violence risk assessment (CRAF training), work in some hospitals, the introduction of family violence content into child protection professional development and efforts by the professional college and others to guide and support GPs. In other cases, family violence content is offered to clinicians as part of broader learning around working with trauma or vulnerable clients, or as part of induction training for service delivery roles.
However, the approach to date has been piecemeal and largely left to champions inside and outside government to drive the learning agenda about family violence. There has not been a system-wide approach for specialist family violence practitioners to learn and collaborate with their colleagues in other service systems. This is a lost opportunity.

The next step for Victoria, therefore, is to enhance family violence learning in universal and specialist systems and create greater opportunities for collaboration and co-learning.

One option would be to expand the family violence education and training that Domestic Violence Resource Centre Victoria is contracted to deliver, to make it more comprehensive and achieve greater reach. At present most education is provided through short courses, which are unlikely to meet the ongoing learning needs of most practitioners.

Although this would go some way towards improving understanding of family violence it would be unlikely to deliver the scale of workforce learning required.

Another option would be to establish a unit in government to oversee the delivery of education on family violence across departments, agencies and funded community service organisations. Domestic Violence Resource Centre Victoria or other organisations could be contracted to provide some or all of that education. A unit of this kind would be similar to the Education Centre Against Violence in NSW and could interact with and support the work of the family violence principal practitioner (described below) in the Department of Health and Human Services.

The unit could take a consolidated view of family violence education, and as in NSW, also coordinate learning on child abuse and sexual assault alongside family violence.

The advantage of this approach is that the unit could encourage and, in the case of employees, require participation in such training across the health and human services systems. It could also support other government departments and agencies including Corrections Victoria, emergency services and others, to achieve family violence literacy in their key workforces.

This would overcome the current piecemeal approach and provide a set of consistent learning and development resources and training courses, which a range of practitioners, including clinicians, could access without having to do the development work themselves. This would not duplicate effort at a hospital or other service level but would support practitioners to learn across disciplines by linking family violence with other areas of clinician learning.

Although this might require greater expenditure than simply boosting funding for existing programs, the Commission considers it is likely to deliver a more robust and comprehensive approach. For example, it could support a whole of health system approach to family violence from inside, rather than outside government, and engage a broad range of registered training providers, tertiary bodies and others with family violence practice knowledge.

The Commission found the insights of the NSW Education Centre Against Violence enlightening. In particular Ms McNamara’s evidence that:

> Any education program which seeks to improve industry wide, long-term change needs to be accompanied by embedded systems change, supported by policy and funding commitments. If there is a real intention to change the culture and practice of a service sector then a range of tools are required to ensure that this is delivered, and maintained, over time.302

The Commission notes that while some of ECAV’s functions are mirrored in Victoria, Victoria does not have an equivalent unit in government. Ms McNamara stated that the location of ECAV within the NSW Department of Health ECAV provides it with the ‘necessary influence, perspective and funding to identify and close capability gaps across the system’.303 Such a unit could also identify and have conversations about limitations and problems across agencies and services; and participate in policy development.304
Such a unit could potentially be in the Department of Health and Human Services as this department has either direct or funding responsibility for the key service systems that intersect with family violence including sexual assault, Child Protection and Integrated Family Services and health.

The Commission recognises, however, that the Victorian Government will wish to consider where these functions are best placed. As a result, rather than being prescriptive about how this should be done, we recommend that the Victorian Government should consider the best means of delivering these functions, in doing so it should take account of the expertise and participation of non-government family violence practitioners and Domestic Violence Resource Centre Victoria in delivering learning across disciplines.

**Recommendation 212**

The Victorian Government determine the best means of delivering comprehensive workforce development and interdisciplinary learning about family violence across the health, human services and justice sectors. This should include consideration of the New South Wales Education Centre Against Violence model [within two years].

Family Violence Principal Practitioners in key departments

The Commission notes the positive gains made in child protection practice since the role of Principal Practitioner in the Children, Youth and Families Division of the Department of Health and Human Services was created and subsequently incorporated into the Office of Professional Practice. This role has provided statewide practice leadership, working in front-line practice with the most complex families, and leading policy and service development in child protection and associated areas, including family violence.

There are now a total of 12 clinically trained and experienced principal practitioners in Child Protection in Victoria. They are placed in all divisions of DHHS and have a regular presence in every office around the state. This welcome development reflects the value of practice leadership at all points of the child protection system.

There are valuable lessons to learn from this experience, as enhancing practice and leadership across a major department is also key issue in family violence. While the principal practitioners have promoted positive child protection practice and helped improved family violence knowledge generally, it is clear that further work is required. Improved clinical and professional practice when family violence is present needs to be embedded across other areas in the department, such as mental health, housing and youth justice. This would also help the department to shift its focus from viewing family violence mainly through the prism of child protection.

Family violence is different from Child Protection as family violence services are delivered by non-government organisations, rather than solely by statutory services. We note, however, that disability services are similarly provided by a mix of departmental and non-government providers and that the regulatory and advice functions of the Senior Practitioner—Disability straddle both sectors.

We further note Ms Beaton’s evidence that in some cases the Office of Professional Practice has worked cooperatively with non-government providers of out-of-home care and Integrated Family Services where they have shared clients. This suggests that while the principal practitioner role is correctly focused on departmental staff, opportunities exist for effective collaboration and partnerships with non-statutory providers.

We are therefore of the view that a Principal Practitioner—Family Violence with a department-wide brief would be of substantial benefit. Whilst DHHS will wish to determine the appropriate location of this role within the departmental structure, such a position could potentially sit alongside the existing Principal Practitioner and the Senior Practitioner—Disability in the Office of Professional Practice. Their role would be to advise on family violence practice issues across the department, including in health services and in consultation with the Chief Psychiatrist. Liaison with the Family Violence and Sexual Assault Team would also be required.
The key functions of the family violence principal practitioners would be to:

- support the work of DHHS practitioners and programs in areas that intersect with family violence, including on complex casework
- monitor and review practice
- provide practice research and evaluation on intersections of family violence and departmental service delivery
- promote professional development and training on family violence
- be the expert spokesperson on professional practice on intersections between family violence in the casework and policy undertaken by DHHS.

Two other departments where establishing these positions would be of substantial benefit, are the Department of Education and Training and the Department of Justice and Regulation.

In the justice area, practice leadership is particularly important within Corrections Victoria, because community corrections is relevant to many perpetrators of family violence. It is also important to focus on perpetrators who are serving prison sentences. These would be key areas of focus for a principal practitioner.

The Department of Justice and Regulation has a dedicated policy unit for sexual and family violence. This is very positive and should continue to do its valuable work. The family violence principal practitioners should be attached to, or work closely with, that unit. The Commission also notes that Corrections Victoria has positions known as principal practitioners (parole) however these appear to be operational supervisory roles rather than a exercising a whole-of-organisation practice leadership function.

The Department of Education and Training does not have a family violence unit. We consider that practice leadership and resource development for government schools, early childhood education and vocational and higher education are both necessary and strategic. In the case of schools, having such practice leadership would reinforce and support the roll-out of respectful relationship education, which we recommend elsewhere. The success of this program depends on a whole-of-school approach, including responding to disclosures of family violence by students and staff. Supportive practice leadership from the department on these and other family violence issues is vital for success.

**Recommendation 213**

The Victorian Government establish family violence principal practitioner positions in the Department of Health and Human Services, the Department of Education and Training and the Department of Justice and Regulation [by 31 December 2016].

Supporting police work in family violence

As noted in Chapter 14, the Commission supports the Victoria Police proposal to establish a faculty-style Centre for Learning for Family Violence in People Development Command. The centre, together with Family Violence Command, should complete a family violence education and training needs assessment across Victoria Police. The needs assessment should be used to develop and deliver a comprehensive education and training strategy with a mix of classroom-based, flexible and on-the-job training.

This strategy should cover all ranks and include a focus on training for promotion, investigative training and leadership training. It should also cover learning and development for police in the early stages of their career, who carry out the bulk of the daily response to family violence. In developing content, supporting materials and delivery mechanisms for the training strategy, Victoria Police should work closely with the specialist family violence sector and use co-design and delivery approaches as much as possible.

Recommendations on this are made in Chapter 14.
A clear focus on judicial and legal sector capability

Because family violence is a core part of the magistrates’ court jurisdiction, it is essential that the magistracy has the skills and aptitude to preside over matters involving family violence. The people the Commission consulted emphasised how critical a magistrate’s skill and approach are to the outcome of a hearing, the victim’s safety, and a perpetrator’s level of accountability.

While many magistrates hearing family violence matters are highly experienced at this type of work, some are not. Given the demand of family violence work on magistrates’ courts in Victoria, the Commission believes that aptitude for undertaking family violence work should be a core part of all magistrates’ skill sets. Although it will continue to be important for some magistrates to be highly specialised in family violence work, it is not feasible to expect that family violence matters can or should always be allocated to those particular magistrates.

In addition to ongoing training, therefore, the Commission recommends that, when appointments to the magistracy are recommended to Cabinet, the Attorney-General should consider the knowledge, experience and aptitude of candidates in relation to family violence, including aspects of federal family law. Magistrates are drawn from a pool of people with different practice and professional backgrounds, and not all appointees will have worked directly in the area of family violence. The expression of interest form for judicial appointments could be amended to invite applicants to provide information about their legal practice experience in the area of family violence.

The Judicial College of Victoria could also publish information about the skill set required to undertake family violence matters—for example, to complement the existing Framework of Judicial Abilities and Qualities published by the College.

It is clear that judicial officers, court staff, legal representatives, police and non-legal family violence support workers need ongoing training and professional development to foster expertise and specialisation in family violence, including knowledge and experience of family law and child protection. This includes training on identifying family violence risk factors and responding appropriately.

To support judicial members we recommend that the Judicial College of Victoria should continue offering regular programs on family violence to magistrates and include material on the dynamics and complexities of family violence in appropriate programs offered to judicial officers or Victorian Civil and Administrative Tribunal members. Examples could include sexual assault in the family violence context, family violence in lesbian, gay, bisexual, transgender and intersex communities and older people and family violence. We further consider that the National Judicial College’s orientation program for newly appointed judges should include material to educate judicial officers on the dynamics and complexities of family violence.

We also support the development of comprehensive family violence learning and development for court staff, the development and delivery of which should be supported by the Victorian Government.

The Australian Law Reform Commission and the New South Wales Law Reform Commission recommended that tertiary institutions offering legal qualifications should review their curriculums to ensure that legal issues concerning family violence are appropriately addressed, and that legal professional bodies should do the same for their ongoing professional development requirements. The Law Institute of Victoria and the Victorian Bar should show leadership by working with their colleagues in other jurisdictions and the university sector to develop curriculums on family violence as part of undergraduate qualifications in law.

The Victorian legal profession would also show national leadership by working with professional bodies in other Australian jurisdictions, the Law Council, legal aid authorities and state and Commonwealth Attorneys-General to pursue opportunities for an amnesty scheme for HECS repayments for lawyers who, upon graduating in law, enter practice as a family violence specialist in a community legal centre or legal aid body. This is consistent with our recommendation above for a HECS-HELP amnesty for social work and other graduates in specialist family violence services.
Finally, we noted above that the Commonwealth Government has asked the Australasian Institute of Judicial Administration to work with the University of Queensland TC Beirne School of Law to develop a National Family Violence Bench Book. This is a welcome development and an excellent opportunity to improve the quality and consistency of the approach of judicial officers in each state and territory to family violence matters. Given that Victoria has already developed a Family Violence Bench Book, we assume that the views of the Judicial College of Victoria and other stakeholders, and the substance of the Victorian Bench Book, will be considered in the course of developing the Commonwealth Bench Book. Correspondingly, the Judicial College of Victoria should consider whether the Victorian Family Violence Bench Book needs to be revised in light of the development of the Commonwealth Bench Book.

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<th>Recommendation 214</th>
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<td>The Victorian Attorney-General consider, when recommending appointments to the magistracy, potential appointees' knowledge, experience, skills and aptitude for hearing cases involving family violence, including their knowledge of relevant aspects of federal family law [within 12 months].</td>
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<td>The Judicial College of Victoria include material on the dynamics and complexities of family violence in other general programs offered to all judicial officers and Victorian Civil and Administrative Tribunal members, in addition to the specific family violence programs and resources provided to date [within 12 months].</td>
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<tr>
<td>The Victorian Government provide funding to continue the development of comprehensive family violence learning and development training covering family violence, family law and child protection for court staff and judicial officers [within 12 months].</td>
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Endnotes

1 Transcript of Maguire, 13 October 2015, 3405 [22]–[30].
2 Ibid 3406 [3]–[11].
3 Ibid 3397 [12]–3398 [18].
4 Ibid 3397 [14]–[20].
5 Ibid 3397 [21]–[28].
6 Ibid 3397 [21]–3398 [8].
7 Ibid 3398 [9]–[13].
8 Ibid 3411 [27]–3412 [3].
9 Ibid 3405 [28]–[30].
10 Ibid 3406 [11]–[14].
11 Domestic Violence Victoria—02, Submission 943, 43.
13 Transcript of Maguire, 13 October 2015, 3427 [13]–[16].
14 Transcript of Jenkins, 13 October 2015, 3532 [16]–3534 [5]. Exceptions are contained in the Equal Opportunity Act 2010 (Vic) s 60. The Victorian Equal Opportunity and Human Rights Commission advises that based on existing jurisprudence it appears unlikely that a family violence service established for women would be considered a ‘special measure’ under section 12 of the Act, citing Georgina Martina Inc (Anti-Discrimination Exemption) 2012 VCAT 1384. See letter from Kate Jenkins, Commissioner, Victorian Equal Opportunity and Human Rights Commission to The Hon Marcia Neave AO, Commissioner, Royal Commission into Family Violence, 1 December 2015, 2.
15 KPMG Management Consulting, above n 12, 9–10, 79.
16 Ibid 17–18.
17 Domestic Violence Victoria—02, Submission 943, 43.
18 Ibid.
19 Ibid 17–18.
20 See, eg, Aboriginal Family Violence Prevention and Legal Service Victoria, Submission 941, 40–41.
21 Ibid.
22 Knox City Council, Submission 227, 15.
23 KPMG Management Consulting, above n 12, i.
25 Ibid 32–33.
26 Chisholm Institute, Submission 803, 1, 9.
27 Transcript of Maguire, 13 October 2015, 3399 [10]–[22]. See also Domestic Violence Resource Centre Victoria, Submission 945, 24.
28 For example, the Youth Affairs Council of Victoria recommended that the Victorian Government Develop a Victorian Government workforce strategy that ensures all workers supporting young people, including DHS Services Connect case management staff, are familiar with the Victorian Code of Ethical Practice and undertake training in cultural competence in working with Aboriginal, refugee and migrant young people and their families. The Council submitted that ‘[i]t is now also important to undertake disability competence training, including planning for accessibility, working directly with young people with a disability, and involving young people with disabilities in decision making. (Cultural competence training has been embraced by many workers in the out-of-home care and family services sector, but should be more comprehensively available to all workers with young people.)’ Youth Affairs Council of Victoria Inc, Submission 938, 37.
29 Ibid.
30 Transcript of Turfrey, 20 July 2015, 880 [16]–[27]. See also Commission for Children and Young People, Submission 790, 20.
31 Domestic Violence Prevention and Legal Service Victoria—02, Submission 943, 43.
32 Chisholm Institute, Submission 803, 3. The Graduate Certificate of Social Science: Male Family Violence course is convened by No To Violence, a Multicultural and Indigenous Program in conjunction with Swinburne University of Technology. There is also a course titled ‘In Telephone Counselling: Male Family Violence’ which is run by No To Violence, in conjunction with Swinburne University of Technology: No To Violence: Men’s Referral Service, Submission 944, 8–9.
33 Chisholm Institute, Submission 803, 3.
34 Transcript of Robinson, 13 October 2015, 3413 [10]–[24].
35 Berry Street. Submission 834, 21.
36 Chisholm Institute, Submission 803, Appendix 4.
37 Domestic Violence Victoria—02, Submission 943, 43.
38 The survey collected data from those programs that receive a mix of voluntary and mandated referrals. Of 34 locations, fully or nearly completed surveys were provided by 28 locations: No To Violence Male Family Violence Prevention Association Inc, ‘Men’s Behaviour Change Programs in Victoria—a Sector Snapshot’ (April 2011) 14.
39 Ibid 36.
40 Bethany Community Support, Submission 434, 8.
41 Transcript of Turfrey, 20 July 2015, 884 [19]–[27].
42 Australian Services Union—Victorian and Tasmanian Authorities and Services Branch, Submission 482, 22. See also Domestic Violence Victoria—02, Submission 943, 43.
43 Australian Services Union—Victorian and Tasmanian Authorities and Services Branch, Submission 482, 9, 20. The submission states that overall 515 employees participated in the survey. The number of managers who participated, and who answered this question, is not provided.
44 KPMG Management Consulting, above n 12, 48–49, 79.
45 Bethany Community Support, Submission 434, 8.
46 Family Life, Submission 758, 6.
47 Ibid.
48 Equal Remuneration Case—Australian Municipal, Administrative, Clerical and Services Union and others (2012) FWAFB 5184 (22 June 2012) 8; Equal Remuneration Case—Australian Municipal, Administrative, Clerical and Services Union and others, Order PR525485 (22 June 2012).
49 Equal Remuneration Case—Australian Municipal, Administrative, Clerical and Services Union and others, Order PR525485 (22 June 2012).
50 Australian Services Union—Victorian and Tasmanian Authorities and Services Branch, Submission 482, 20; Domestic Violence Victoria—02, Submission 943, 42.
51 Australian Services Union—Victorian and Tasmanian Authorities and Services Branch, Submission 482, 22.
The assumed family violence caseworker salary is set at employee classification level 5, pay point 3 of the Social, Community, Home Care and Disability Services Industry Award 2010 and the majority of the assumed family service caseworker salaries are set at employee classification level 6, pay point 2 of the Social, Community, Home Care and Disability Services Industry Award 2010: Department of Health and Human Services, above n 52. 6. As at 1 December 2015, the assumed family violence caseworker’s hourly rate (in accordance with the funding model) was $32.98 (which on a standard 38 hour week would be approximately $65,168 per annum) compared to $34.91 per hour for family services caseworkers (which on a standard 38 hour week would be approximately $68,982 per annum): Fair Work Ombudsman, Pay Guide: Social, Community, Home Care and Disability Services Industry Award 2010 [MA0001000] and Social and Community Services—Victoria—Award 2000 [AP796561] (30 November 2015) 15 and 18 <https://www.fairwork.gov.au/ArticleDocuments/872/social-and-community-services-victoria-award-ap796561-pay-guide.pdf.aspx>.

The assumed team leader salary for family services is set at employee classification level 8, pay point 2 of the Social, Community, Home Care and Disability Services Industry Award 2010: Department of Health and Human Services, above n 57. 6. As at 1 December 2015, the assumed team leader’s hourly rate for family services (in accordance with the funding model) was $39.51 (which on a standard 38 hour week would be approximately $78,071 per annum) and the hourly rate for a family violence counselling service team leader was $35.72 (which on a standard 38 hour week would be approximately $70,582): Fair Work Ombudsman, above n 57. This equates to a lesser salary of approximately $7489 per annum for family violence counselling services.

The assumed salary for a family violence counselling service program manager, who runs the service, is set at employee classification level 8, pay point 2 of the Social, Community, Home Care and Disability Services Industry Award 2010: Department of Health and Human Services, above n 57. As at 1 December 2015, the hourly rate applicable to that classification and pay point was $39.51 (which on a standard 38 hour week would be approximately $78,071 per annum): Fair Work Ombudsman, above n 57. This is between $6422 and $26,579 less than the salary of a team leader or senior practitioner in child protection: Department of Health and Human Services, Position Description—Child Protection Team Manager <http://childprotectionjobs.dhs vic.gov.au/CPP5_Team_Manager.pdf>.

Australian Services Union—Victorian and Tasmanian Authorities and Services Branch, Submission 482, 9, 20.

The sector-wide benefit which is most frequently offered is salary packaging: KPMG Management Consulting, above n 12, 35.

Australian Services Union—Victorian and Tasmanian Authorities and Services Branch, Submission 482, 20.

KPMG Management Consulting, above n 12, 18, 79.

No To Violence, above n 38, 14, 54–55.

Transcript of Jaffe, 13 October 2015, 3414 [9]–[16].

At least two of these activities must be seminars or forums run by No To Violence: No To Violence, ‘Men’s Behaviour Change Group Work: Minimum Standards and Quality Practice’ (February 2005) 51.

See, eg, Community consultation, Geelong 2, 28 April 2015; Chisholm Institute, Submission 803, 9; Domestic Violence Resource Centre Victoria, Submission 945, 24; Transcript of Jaffe, 13 October 2015, 3400 [3]–[10].

Women’s Health Loddon Mallee, Submission 772, 3.

Domestic Violence Resource Centre Victoria, Submission 945, 29.

Ibid 39–41.

Transcript of Maguire, 13 October 2015, 3405 [3]–[12].

Transcript of Jaffe, 13 October 2015, 3427 [1]–[9]. See also Community consultation, Maryborough 2, 21 April 2015; Gippsland Integrated Family Violence Service Reform Steering Committee, Submission 691, 7; Kara House Inc, Submission 618, 5.

Australian Services Union—Victorian and Tasmanian Authorities and Services Branch, Submission 482, 22.

Transcript of Beaton, 13 October 2015, 3402 [19]–[303] [1].

Statement of Miller, 14 July 2015, 25 [93]; Statement of Beaton, 12 October 2015, 9 [35], 10–11 [38].

Statement of Miller, 14 July 2015, 25 [93].

Statement of Beaton, 12 October 2015, 12 [42].

Ibid 9 [35], 10 [37].

Domestic Violence Victoria—02, Submission 943, 43.

Ibid.

Ibid.

KPMG Management Consulting, above n 12.

Ibid 24, 58, 66.

WRSC Family Violence Support, Submission 260, 6–7.

See, eg, Community consultation, Melbourne, 30 April 2015; Australian Services Union—Victorian and Tasmanian Authorities and Services Branch, Submission 482, 22; Bethany Community Support, Submission 434, 8; Gippsland Centre Against Sexual Assault, Submission 638, 10; Victorian Council of Social Service, Submission 467, 44; Safe Futures Foundation, Submission 228, 80; The Police Association of Victoria, Submission 636, 26.

Bethany Community Support, Submission 434, 8.

Court Services Victoria, Submission 643, 13.

‘Clinical supervision is one of the major self-care strategies used by counsellors. It is also known to improve job performance and satisfaction’: South Eastern Centre Against Sexual Assault and Family Violence, Professional services <http://www.secasacom.au/services/professional-services/>.

Gippsland Centre Against Sexual Assault, Submission 638, 10.

Magistrates’ Court of Victoria and Children’s Court of Victoria, Submission 978, 55.

Court Services Victoria, Submission 646, 13.

Cobaw Community Health, Submission 396, 5; Women’s Health West Inc, Submission 239, 37. See also Centre for Rural Regional Law and Justice—Deakin University, Submission 511, 11–12.

Australian Services Union—Victorian and Tasmanian Authorities and Services Branch, Submission 482, 21.


Domestic Violence Resource Centre Victoria, Submission 945, 24.

No To Violence; Men’s Referral Service, Submission 944, 17.

Domestic Violence Resource Centre Victoria, Submission 945, 19.

Ibid 24.
Australian Services Union—Victorian and Tasmanian Authorities and Services Branch, Submission 482, 24. See also Bethany Community Support, Submission 434, 16; Domestic Violence Victoria—02, Submission 943, 44; Domestic Violence Resource Centre Victoria, Submission 945, 27.

Domestic Violence Victoria—02, Submission 943, 44.

Domestic Violence Resource Centre Victoria, Submission 945, 31.

Ibid.

Ibid. 1

Nine Signatory Organisations, Submission 351, 9.

The nine organisations are: CASA Forum (Victorian Centres Against Sexual Assault); Domestic Violence Victoria; Multicultural Centre for Women's Health; No To Violence; Our Watch: Victorian Equal Opportunity and Human Rights Commission; Women with Disabilities Victoria; Women's Health Association of Victoria; Women's Health Victoria: Nine Signatory Organisations, Submission 351, 9. See also CASA Forum, Submission 828, 4; Domestic Violence Victoria—02, Submission 943, 42; Centre for Multicultural Youth, Submission 452, 9; No To Violence; Men's Referral Service, Submission 944, 29; Our Watch—02, Submission 922, 32–33; Women with Disabilities Victoria, Submission 924, 9–10; Women's Health Association of Victoria, Submission 509, 5.

Drummond Street Services, Submission 685, 14.

Loddon Campaspe Integrated Family Violence Services Consortium, Submission 914, 3.


Seniors Rights Victoria, Submission 915, 31; Law Institute of Victoria, Submission 832, 6; Eastern Elder Abuse Network, Submission 379, 9.

InTouch Multicultural Centre Against Family Violence, Submission 612, 45; Victorian Arab Social Services, Submission 474, 9; Women's Legal Service Victoria—01, Submission 940, 59; Whittlesea Community Connections, Submission 375, 22; JK Diversity Consultants, Submission 890, 11.

Women's Mental Health Network Victoria Inc, Submission 417, 10.

Victorian Gay & Lesbian Rights Lobby, Submission 684, 6; No To Violence; Safe Steps Family Violence Response Centre, Submission 933, 24.

Diemer et al, above n 109, 15.

Ibid.

Women's Legal Service Victoria—01, Submission 940, 38. See also Centre for Rural Regional Law and Justice—Deakin University, Submission 511, Attachment 1, 89–90; Mallee Family Violence Executive, Submission 617, 2.

See, eg, Community consultation, Werribee 2, 11 May 2015; Christine Craik, Submission 437, 6–7; Women's Legal Service Victoria—01, Submission 940, 38; Anonymous, Submission 373, 1–3; Nexus Primary Health, Submission 781, 4; Community consultation, Melbourne, 30 April 2015; Community consultation, Bendigo 1, 5 May 2015; Community consultation, Echuca 2, 7 May 2015; Peninsula Community Legal Centre, Submission 447, 18; Centre for Rural Regional Law and Justice—Deakin University, Submission 511, Attachment 1, 90, Attachment 2, 24–26; Statement of Field, 31 July 2015, 10 [40].

Centre for Rural Regional Law and Justice—Deakin University, Submission 511, 19 citing Amanda George and Bridget Harris, 'Landscapes of Violence: Women Surviving Violence in Regional and Rural Victoria' (Deakin University School of Law Centre for Regional Law and Justice, 2014) 92–96.

Loddon Campaspe Community Legal Centre, Submission 236, 9 [20.16].

Gay and Lesbian Health Victoria; Australian Research Centre in Sex, Health & Society—La Trobe University, Submission 821, 19; Opportunity Knocks—EDVOS; Safe Futures Foundation; Safe Steps; WISHIN; Victorian Women's Trust, Submission 898, 25–26; Aboriginal Family Violence Prevention and Legal Service Victoria, Submission 941, 60–61; Seniors Rights Victoria, Submission 915, 42. See also InTouch Multicultural Centre Against Family Violence, Submission 612, 37.


Wakefield and Taylor, above n 123, 22.

Australian Law Reform Commission and NSW Law Reform Commission, above n 110, 46–47.

Wakefield and Taylor, above n 123.

Ibid 38.

Ibid 22–23.


Judicial College of Victoria, Family Violence Bench Book (11 November 2014) <http://www.judicialcollege.vic.edu.au/publications/family-violence-resources>. See also Judicial College of Victoria, Submission 536, 11; Magistrates’ Court of Victoria and Children’s Court of Victoria, Submission 978, 55.

Judicial College of Victoria, Submission 536, 5.


Senator The Hon George Brandis QC and Senator The Hon Michaelia Cash, above n 132.

Ibid.

Judicial College of Victoria, Submission 536, 11.
Law Institute of Victoria, ‘Family Violence Education for Family Lawyers’ (19 January 2016), 1, provided by the Law Institute of Victoria to the Transcript of Matthews, 7 August 2015, 2320 [23]–[24].

Federation of Community Legal Centres, Submission 958, 32.

Statement of Fatouros, 6 August 2015, 7 [31].

Law Institute of Victoria, Submission 832, 5.

Anonymous, Submission 583, 2.


Anonymous, Submission 100, 2.

Magistrates’ Court of Victoria and Children’s Court of Victoria, Submission 978, 9.

Magistrates’ Court of Victoria, ‘Court Services Victoria, Position Description: Registrar—Magistrates’ Court’, 1, produced in response to the Commission’s request for information dated 5 June 2015.

Anonymous, Submission 144, 1.

Magistrates’ Court of Victoria, ‘Court Services Victoria, Position Description: Family Violence Registrar—Magistrates’ Court’, 1, produced in response to the Commission’s request for information dated 5 June 2015.

Magistrates’ Court of Victoria, Submission 978, 29 [6.1.2]–[6.1.3].

See, eg, Magistrates’ Court of Victoria and Children’s Court of Victoria, Submission 978, vi; Ovens Murray Goulburn Integrated Family Violence Services, Submission 444, 4; Goulburn Valley Community Legal Centre, Submission 495, 7 [19.10]. See also Transcript of Hawkins, 4 August 2015, 1857 [19]–1858 [17].


This qualification replaces the Certificate IV in Government (Court Services) which was delivered by several Registered Training Organisations between 2003 and 2015: Magistrates’ Court of Victoria, ‘General Induction For All New Staff’, 1, produced by the Magistrates’ Court of Victoria in response to the Commission’s request for information dated 5 June 2015.

Ibid 2.

Magistrates’ Court of Victoria and Children’s Court of Victoria, above n 136, 9.

Magistrates’ Court of Victoria, above n 152, 2. See also ibid.

Magistrates’ Court of Victoria, above n 152, 2; Magistrates’ Court of Victoria and Children’s Court of Victoria, Submission 978, 30.


Magistrates’ Court of Victoria, above n 144, 1.

Magistrates’ Court of Victoria, ‘Court Services Victoria, Position Description: Family Violence Registrar—Magistrates’ Court’, 1, produced in response to the Commission’s request for information dated 5 June 2015.

Magistrates’ Court of Victoria and Children’s Court of Victoria, Submission 978, 9.

Magistrates’ Court of Victoria, above n 159, 2; Magistrates’ Court of Victoria, ‘Court Services Victoria, Position Description: Family Violence Respondent Support Worker—Frankston Magistrates’ Court’, 2, produced in response to the Commission’s request for information dated 5 June 2015. See also Statement of Davies, 29 July 2015, 1 [2]; 2 [8].

Magistrates’ Court of Victoria and Children’s Court of Victoria, above n 136, 9.

Magistrates’ Court of Victoria and Children’s Court of Victoria, Submission 978, 29.

Statement of Newman, 28 July 2015, 1 [3].

Magistrates’ Court of Victoria, above n 152, 1. See also Statement of Newman, 28 July 2015, 1 [3].

Magistrates’ Court of Victoria, above n 152, 2.

Anonymous, Submission 100, 2.

Anonymous, Submission 264, 3.

See, eg, Community consultation, Benalla 1, 19 May 2015; Community consultation, Melbourne 3, 24 April 2015; Anonymous, Submission 414, 3.

Anonymous, Submission 583, 2.

Law Institute of Victoria, Submission 832, 5.

Statement of Fatouros, 6 August 2015, 7 [31].

Federation of Community Legal Centres, Submission 958, 32.

Ibid 7.

Transcript of Matthews, 7 August 2015, 2320 [23]–[24].

Chisholm Institute, Submission 803, Appendix 4.


Ibid.


Leo Cussen Centre for Law, Course Structure of the Practical Training Course (Graduate Diploma in Legal Practice) <http://www.leocussen.edu.au/cb_pages/ptc_course_structure.php>.

Australian National University, Graduate Diploma of Legal Practice <https://legalworkshop.law.anu.edu.au/gdlp>.

Law Institute of Victoria, above n 179, 1–2.

As part of the 2015 program, the LIV hosted sessions with panellists having expertise in family violence, children, police and criminal law: Law Institute of Victoria, above n 179, 3.

Ibid 4.

Transcript of Counsel, 7 August 2015, 2320 [17]–[19].

Law Institute of Victoria, above n 179, 4.

Anonymous, Submission 739, 2.

Anonymous, Submission 263, 3.

Anonymous, Submission 583, 2.

Law Institute of Victoria, Submission 832, 3.

Statement of Field, 31 July 2015, 9–10 [38].

Magistrates’ Court of Victoria and Children’s Court of Victoria, Submission 978, 29 [6.1.2]–[6.1.3].

Magistrates’ Court of Victoria, above n 144, 1.

Magistrates’ Court of Victoria, above n 159, 2; Magistrates’ Court of Victoria, ‘Court Services Victoria, Position Description: Family Violence Registrar—Magistrates’ Court’, 2, produced in response to the Commission’s request for information dated 5 June 2015. See also Statement of Davies, 29 July 2015, 1 [2]; 2 [8].

Magistrates’ Court of Victoria, above n 152, 2; Magistrates’ Court of Victoria and Children’s Court of Victoria, Submission 978, 30.


Magistrates’ Court of Victoria, above n 144, 1.

Magistrates’ Court of Victoria, ‘Court Services Victoria, Position Description: Family Violence Registrar—Magistrates’ Court’, 1, produced in response to the Commission’s request for information dated 5 June 2015.

Magistrates’ Court of Victoria and Children’s Court of Victoria, Submission 978, 9.

Magistrates’ Court of Victoria, above n 159, 2; Magistrates’ Court of Victoria, ‘Court Services Victoria, Position Description: Family Violence Registrar—Magistrates’ Court’, 2, produced in response to the Commission’s request for information dated 5 June 2015. See also Statement of Davies, 29 July 2015, 1 [2]; 2 [8].

Magistrates’ Court of Victoria and Children’s Court of Victoria, above n 136, 9.

Magistrates’ Court of Victoria and Children’s Court of Victoria, Submission 978, 29.

Statement of Newman, 28 July 2015, 1 [3].

Magistrates’ Court of Victoria, above n 152, 1. See also Statement of Newman, 28 July 2015, 1 [3].

Magistrates’ Court of Victoria, above n 152, 2.

Anonymous, Submission 100, 2.

Anonymous, Submission 264, 3.

See, eg, Community consultation, Benalla 1, 19 May 2015; Community consultation, Melbourne 3, 24 April 2015; Anonymous, Submission 414, 3.

See, eg, Anonymous, Submission 739, 2.


Anonymous, Submission 583, 2.

Law Institute of Victoria, Submission 832, 3.

Statement of Fatouros, 6 August 2015, 7 [31].

Federation of Community Legal Centres, Submission 958, 32.

Ibid 7.

Transcript of Matthews, 7 August 2015, 2320 [23]–[24].

Chisholm Institute, Submission 803, Appendix 4.


Ibid.


Leo Cussen Centre for Law, Course Structure of the Practical Training Course (Graduate Diploma in Legal Practice) <http://www.leocussen.edu.au/cb_pages/ptc_course_structure.php>.

Australian National University, Graduate Diploma of Legal Practice <https://legalworkshop.law.anu.edu.au/gdlp>.

Law Institute of Victoria, above n 179, 1–2.

As part of the 2015 program, the LIV hosted sessions with panellists having expertise in family violence, children, police and criminal law: Law Institute of Victoria, above n 179, 3.

Ibid 4.

Transcript of Counsel, 7 August 2015, 2320 [17]–[19].

Law Institute of Victoria, above n 179, 4.

Ibid.


Statement of Sinclair, 3 August 2015, 2 [9].

Victoria Legal Aid, ‘VLA Practice Essentials’, provided by Victoria Legal Aid in response to the Commission’s Notice to Produce dated 5 June 2015; Victoria Legal Aid, ‘New Lawyers Program’ (2014), provided by Victoria Legal Aid in response to the Commission’s Notice to Produce dated 5 June 2015.


Transcript of Matthews, 7 August 2015, 2320 [30]–2321 [12].


Women’s Legal Service Victoria, ‘Safer Families Program Description’, 1, provided by Women’s Legal Service Victoria, 11 February 2016. See also, Emma Pritchard, ‘Safer Families Program Evaluation’ (September 2014) provided by Victoria Legal Aid in response to the Commission’s Notice to Produce dated 5 June 2015.

Law Institute of Victoria, above n 179, 3.

Ibid.

Ibid 4.


Ibid.

Law Institute of Victoria, above n 179, 4.

Ibid.

No To Violence; Men’s Referral Service, Submission 944, 40.

The Royal Women’s Hospital, Submission 356, 2.

Ibid 7.

Melbourne Research Alliance to end violence against women and their children (Prof Kelsey Hegarty et al), Submission 885, Briefing Paper 1, 3.

The Royal Women’s Hospital, Submission 356, 7.


Royal Australian College of General Practitioners, Submission 486, 2.

Ibid.

Ibid 3.

Ibid.

Ibid.

Ibid 4.

Ibid 3.

Royal Australian and New Zealand College of Psychiatrists, Submission 395, 11–12.


Transcript of Callister, 10 August 2015, 2459 [13]–[16]. The module is entitled ‘Protecting Children—Mandatory Reporting and other Obligations’: Department of Premier and Cabinet, ‘Table of items where no relevant documents or data identified/available under Notice to Produce dated 5 June 2015’ (21 October 2015), 8–11, produced by the State of Victoria in response to the Commission’s Notice to Produce dated 5 June 2015.

Statement of Callister, 4 August 2015, 39 [168], Attachment 16. Ms Callister also gave evidence that an adapted version of the module will be developed for early childhood teachers who were required to be registered with the Victorian Institute of Teaching from 30 September 2015 and who will therefore also become ‘mandatory reporters’: Statement of Callister, 4 August 2015, 39 [168].

Ibid Attachment 16, screen [21].

Department of Premier and Cabinet, above n 221, 8–11.

Transcript of Callister, 10 August 2015, 2458 [28]–[30].

Victorian Council of Social Service, Submission 467, 10; Melbourne Research Alliance to end violence against women and their children (Prof Cathy Humphreys et al)—01, Submission 840, Briefing Paper 4, 7; Federation of Community Legal Centres, Submission 958, 8; Australian Association of Social Workers, Submission 388, 4. See also Community consultation, Bendigo 2, 5 May 2015.

Confidential transcript of ‘Ryan’, 23 July 2015, C66 [1]–[8], C68 [15]–[17]; Confidential, Submission 38, 4; Confidential, Submission 883, 4; Anonymous, Submission 534, 21.

See, eg, Victorian Aboriginal Child Care Agency, Submission 947, 12; Aboriginal Family Violence Prevention and Legal Service Victoria, Submission 941, 23.


Melbourne Research Alliance to end violence against women and their children (Prof Cathy Humphreys et al)—01, Submission 840, 7; Federation of Community Legal Centres, Submission 958, 8–9.

Statement of Allen, 13 July 2015, 25 [125]–[126].


Statement of Beaton, 12 October 2015, 6 [26]–[27].

Jenny Dwyer and Robyn Miller, ‘Working with Families Where an Adult is Violent: Best Interests Case Practice Model’ (Specialist Practice Resource, Department of Human Services, 2014).

Statement of Beaton, 12 October 2015, 8–9 [33].

Ibid 9 [35], 10 [37].


Statement of Beaton, 12 October 2015, 2–3 [14].

Ibid 3 [15]–[16]. By October 2013 there were principal practitioners placed in every DHHS division across Victoria and they had a regular presence in every Child Protection office across the state: Statement of Miller, 14 July 2015, 25 [93].

Statement of Beaton, 12 October 2015, 3 [17].

Ibid 4 [20].

Ibid 4 [21].

Ibid 5 [23].

Ibid 3 [19].

Ibid 6 [24]–[25].
246 ‘As Chief Practitioner, I was very focussed on the knowledge from family violence services being well understood by child protection practitioners and trying to share the knowledge from child protection with the family violence sector and the family support sector’: Statement of Miller, 14 July 2015, 22 [84].
247 Department of Justice and Regulation, ‘Request #161’; produced by the State of Victoria in response to the Commission’s Notice to Produce dated 5 June 2015.
248 Department of Premier and Cabinet, above n 221, 20.
250 See, eg, Domestic Violence Resource Centre Victoria, Submission 945, 22; Seniors Rights Victoria, Submission 915, 31; Victorian Council of Social Service, Submission 467, 68. Family violence training, including risk assessment by Correction Victoria staff, is discussed in Chapters 18 and 34.
251 Victorian Alcohol and Drug Association, Submission 581, 18. See also Victorian Council of Social Service, Submission 467, 69.
253 Statement of Abbott, 14 July 2015, 19 [73,3].
254 See, eg, Gippsland Integrated Family Violence Service Reform Steering Committee, Submission 691, 12.
255 Cobaw Community Health, Submission 396, 3.
256 Department of Health and Human Services, ‘Request for information for the Royal Commission into Family Violence’, 1, produced by the State of Victoria in response to the Commission’s Notice to Produce dated 5 June 2015.
257 Department of Health and Human Services, ‘Introduction to Disability Practice’ (28 April 2015), 74, produced by the State of Victoria in response to the Commission’s Notice to Produce dated 5 June 2015.
261 See, eg, NorthWestern Mental Health, Submission 993, 2.
262 The Royal Women’s Hospital, Submission 356, 12; InTouch Multicultural Centre Against Family Violence, Submission 612, 20.
263 Grampians Community Health, Submission 520, 8. In regard to training required, see Justice Connect Homeless Law, Submission 889, 6, 40–41.
264 Transcript of Maguire, 13 October 2015, 3407 [15]–[28].
265 Domestic Violence Resource Centre Victoria, Submission 945, 22.
266 Ibid.
267 Transcript of McNamara, 12 August 2015, 2828 [2]–[9]. See also Statement of McNamara, 12 August 2015, 8–9 [44].
268 Statement of McNamara, 12 August 2015, 8–9 [45].
269 Ibid 3–4 [23].
270 Ibid 4 [25].
271 Ibid 3 [21].
272 Ibid 18 [88].
273 Transcript of McNamara, 12 August 2015, 2825 [7]–[9].
274 Ibid 2826 [7]–[15].
275 Statement of McNamara, 12 August 2015, 10 [52]–[53].
276 ‘For example a ‘highly skilled and experienced domestic violence employee might co-facilitate with someone who is highly skilled and experienced in working with drug and alcohol issues’: ibid 6 [34].
277 Ibid 17–18 [87].
278 Ibid 2 [9].
279 Ibid 18 [90].
280 Statement of Diver, 3 August 2015, 22 [85].
281 Transcript of Diver, 12 August 2015, 2868 [23]–2869 [6].
283 Domestic Violence Resource Centre Victoria, Submission 945.
286 Ibid 20–1.
287 Ibid 29.
289 Domestic Violence Resource Centre Victoria, Submission 945, 22.
291 In 2007 the then Department of Human Services allocated $2.1 million over three years as part of a strategy to develop an industry plan for the community managed housing and support sector, of which specialist family violence services form a part. The Commission understands the workforce strategy and industry plan did not proceed, however a workforce survey was conducted. This survey is referred to throughout this chapter: see KPMG Management Consulting, above n 12, 17–18.
292 Australian Association of Social Workers, Submission 388, 2.
293 Department of Health and Human Services, ‘Victorian Centres Against Sexual Assault: Standards of Practice’ (2008), 109, produced by the State of Victoria in response to the Commission’s Notice to Produce dated 5 June 2015.
294 Transcript of Maguire, 13 October 2015, 3404 [18]–[27].
295 Transcript of Jaffe, 13 October 2015, 3399 [28]–[31].
300 The maximum amount will be indexed for later years.
Industry planning


302 Statement of McNamara, 12 August 2015, 8 [42].

303 Ibid 3 [22].

304 Transcript of McNamara, 12 August 2015, 2833 [25]–2834 [8].

305 Statement of Miller, 14 July 2015, 25 [93].

41 Investment

Introduction

This chapter considers current funding levels for programs aimed at preventing and responding to family violence. The Commission heard that funding is inadequate to meet existing demand and that further investment will be required to meet increasing levels of demand in the future.

We know that family violence affects physical health, mental wellbeing and financial security. Beyond the personal harm that family violence causes, it also has a significant economic cost at a societal level. This arises from the direct costs of preventing and responding to family violence (for example, policing, courts and crisis services) and also the indirect costs associated with its effects (for example, health costs or work absences).

Identifying the economic costs of family violence to individuals, government and the community as a whole is important when considering arguments for increasing government investment to prevent such violence and reduce its long-term impact on victims.

In this chapter, we outline recent efforts to estimate the overall economic cost of family violence. Different reports have different assumptions underpinning their estimates; however, all studies suggest that family violence imposes a large economic burden on individuals, government and the whole community. The most recent report estimates the cost of violence against women in Australia in 2014–15 at $21.6 billion.

The Victorian Government estimated that it spent $80.6 million in 2014–15 on family violence initiatives; however, this figure does not capture broader justice and health and human services costs and does not represent total family violence expenditure. Current state government budget structures and departmental funding processes make it difficult to quantify expenditure on family violence. This restricts the Victorian Government’s capacity to determine the costs and benefits of particular interventions and plan for the future.

The Commission was told that existing funding arrangements obscure family violence costs—with homelessness funding highlighted as a key example. In addition, funding is currently heavily weighted to crisis responses, with prevention, early intervention and long-term recovery receiving only modest funding. The inadequacy of funding to keep pace with significant spikes in demand, compounded by funding fragmentation and a lack of statewide coordination, is placing significant pressure on service providers and failing to meet the needs of those experiencing family violence.

The Commission recommends additional investment to meet the significant costs associated with family violence. Increased investment in prevention and early intervention initiatives is critical to reducing these costs in the long term. Other proposed changes (including defining specific family violence–related performance measures) will help make family violence expenditure more transparent and make it easier to forecast demand, gauge the success of government policies and measure the performance of service providers and the system as a whole.

A more coordinated and strategic investment framework, that places victims’ needs at its centre, is required to meet the enormous challenges of this serious social problem.
Context and current practice

Understanding the economic costs of family violence on society as a whole is an important starting point when considering further investment in policies and systems to prevent and respond to family violence. It assists in determining the appropriate level of investment, as well as demonstrating the economic benefits of investing to reduce rates of violence. In its submission, Good Shepherd Australia New Zealand observed:

"Family violence comes at a financial cost to every Australian citizen … Not discounting the fact that the prevention of family violence may well be a financially costly endeavour, without such investments, family violence will continue to erode our community and diminish the lives, security and independence, of thousands within it."\(^1\)

This section examines how both the economic cost on family violence and current government expenditure are measured. Three recent reports that seek to measure the societal costs of family violence and other violence against women are described. The most recent report by PwC found that the cost of violence against women in Australia in 2014–15 was $21.6 billion.

The discussion on government expenditure highlights the fact that the Victorian Government does not currently measure the full cost of family violence on its budget. The figure provided to the Commission of $80.6 million relates only to funding for specialist family violence services and does not take into account the many other services accessed by people experiencing family violence. These include Victoria Police, the court system and universal services, such as health services, as well as Child Protection and associated family services expenditure. The Commission requested that the Victorian Government undertake the process of measuring this total cost for 2013–14 and 2014–15. The result shows that while the overall expenditure by the Victorian Government cannot be precisely quantified, it is substantial.

Measuring the overall economic costs of family violence

The approach to estimating the economic burden imposed by family violence is similar to epidemiological approaches that model the economic costs of particular diseases in order to demonstrate the case for public health interventions. Researchers in New Zealand, Canada, the United Kingdom, the United States\(^2\) and Australia\(^3\) have tried to measure the costs in this way.

Since the early 2000s three Australian reports on the economic costs of intimate partner violence have been commissioned by government and non-government organisations. The estimates they contain are based on assumptions about the prevalence of family violence and the particular effects such violence is likely to have on individual victims (including children) and perpetrators.\(^4\)

Access Economics study

The federal Office of the Status of Women (now the Office for Women) commissioned Access Economics to conduct a study in order to raise community awareness of the costs of domestic violence and assist government policy makers in the allocation of resources.\(^5\) The study was based on 2002–03 data and estimated the economic costs of all forms of intimate partner violence—including violence in same-sex relationships. Domestic violence covered physical and sexual violence, threats and intimidation, and emotional and social abuse.\(^6\)

In its report Access Economics cautioned that there are severe problems associated with 'obtaining accurate estimates of many of the detailed components of costs' and stated that 'a considerable margin of uncertainty surrounded [the] estimates, many of which were based on limited data and parameters reflecting a large element of judgement. The study team was particularly cautious about estimating the cost of a victim’s pain and suffering.'\(^7\) Nevertheless, Access Economics estimated that in Australia in 2002–03 the total annual cost of domestic violence (as defined) was $8.1 billion,\(^8\) of which $3.5 billion was said to relate to pain, suffering and premature death.\(^9\)
KPMG study

In 2009, the National Council to Reduce Violence against Women and their Children prepared a study to guide the development of the National Plan to Reduce Violence against Women and their Children 2010–2022.10 The study, undertaken by KPMG, provided an estimate of the costs of violence by 2021–22 and the costs that could be avoided by reducing the levels of violence. Unlike the Access Economics study, the KPMG study included violence that is outside the scope of the Commission’s work, for example, assault by strangers.11

The KPMG study was a desk-top analysis that focused mainly on updating the Access Economics study. In contrast with the Access Economics study, it did not include the economic costs of violence by women against men. Using a methodology similar to that used by Access Economics, KPMG estimated the total cost of violence against women in 2008–09 in Australia (including violence by strangers) to be $13.6 billion.12

The KPMG report said:

Without appropriate action to address violence against women and their children, an estimated three-quarters of a million Australian women will experience and report violence in the period 2021–22, costing the Australian economy an estimated $15.6 billion.13

The study referred to the proposed plan to reduce violence against women and children and said its ‘estimates of cost savings were not based on specific proposals’ in the National Plan to Reduce Violence against Women and their Children but that these ‘could be considered as part of a detailed business case for investment’.14

PwC Australia report

The most recent examination of the economic costs of family violence to the Australian community was conducted by PwC Australia under a contract with Our Watch and VicHealth.15 Its report was published in November 2015 (PwC report). Like the KPMG study, it covers both intimate partner violence against women and violence by strangers.16

The PwC report arrives at an economic cost of violence against Australian women by updating the Access Economics estimates and using more recent Australian Bureau of Statistics data on the prevalence of this violence.17 It estimates that the 2014–15 cost of all violence against Australian women18 was $21.7 billion, of which $12.6 billion was related to violence by a partner.19

The PwC report takes account of the costs borne by children in the care of a woman when violence was inflicted, but it does not estimate the cost of the long-term effects that children might suffer as a result of family violence against their mother.20 It tries to measure the benefits of preventing violence against women through community mobilisation and individual and group participation programs directed at helping people ‘sustain equal, respectful, non-violent relationships’.21 Using assumptions about the reductions that would be achieved by implementing these programs, it produced various estimates of the costs that would be avoided. The estimates of cost savings in both the KPMG and the PwC reports do not relate to savings in government expenditure: they are estimated reductions in the overall cost of family violence.

As noted, the scope of the Access Economics, KPMG and PwC studies differs, although each uses the same categories to estimate costs and allocate the proportion of the costs borne by victims, perpetrators, children, employers and government. Table 41.1 summarises the findings of each of the studies.
Table 41.1 Australian studies' estimates of the costs of reported violence against women and family violence

<table>
<thead>
<tr>
<th>Study</th>
<th>Scope</th>
<th>Year</th>
<th>Estimate (A$)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access Economics</td>
<td>Domestic violence (male and female victims)</td>
<td>2002–03</td>
<td>8.1 billion</td>
</tr>
<tr>
<td>KPMG</td>
<td>Domestic violence against women and children (excludes male victims) and non-domestic sexual assault (excludes male victims)</td>
<td>2007–08</td>
<td>13.6 billion</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2021–22</td>
<td>15.6 billion (forecast)</td>
</tr>
<tr>
<td>PwC</td>
<td>Partner violence—physical violence, sexual violence or emotional abuse by current or previous partner perpetrated against women (excludes male victims)</td>
<td>2014–15</td>
<td>12.6 billion</td>
</tr>
<tr>
<td></td>
<td>All violence against women—physical violence, sexual violence, emotional abuse (by a partner) or stalking by any person perpetrated against women (excludes male victims)</td>
<td>2014–15</td>
<td>21.6 billion</td>
</tr>
</tbody>
</table>

Like the previous studies, the PwC report found that victims bear the greatest proportion of the overall cost: PwC's estimate was 31 per cent.22 The proportion of costs allocated to others includes 26 per cent to the Commonwealth Government, 14 per cent to society and the community, and 10 per cent to state and territory governments. Children accounted for seven per cent of the costs and perpetrators six per cent.23 Appendix H provides the estimates and definitions for each of the cost categories in the study.

The PwC report found that pain, suffering and premature mortality accounted for about 48 per cent ($10.4 billion) of the cost associated with all violence against women (and 38 per cent of partner violence costs).24 It stated, 'It [pain, suffering and premature mortality] represents a conceptual (rather than direct or indirect) cost of violence associated with the loss in quality of life either due to morbidity or premature death following violence'.25 Excluding the cost of pain and suffering, the largest category of costs is described as 'consumption-related' costs, which the PwC report defines as 'the cost to repair or replace damaged or destroyed property and lost economies of scale when women separate from violent partners and maintain separate households.26

Application of estimates to Victoria

All three reports produce Australia-wide estimates.27 The Victorian Government's submission arrived at a figure of $3.4 billion for Victoria.28 This is derived from the KPMG report's Australia-wide estimate for 2007–08 and is calculated by reference to the proportion of the Australian population living in Victoria. Like the KPMG report, it includes violence committed against women by strangers, as well as intimate partners.

Differences in victims' circumstances—for example, higher Aboriginal and Torres Strait Islander populations in some states—and in state-based responses to family violence, may affect the accuracy of the calculations. Assuming, however, that a calculation based on the population of Victoria is appropriate, that amount should now reflect the more recent Australia-wide figure calculated by PwC.

Applying the same methodology to apportion the cost estimate on a population-share basis of the PwC estimates indicates that the cost of intimate partner violence in Victoria was $3.1 billion in 2014–15.29

Measuring government expenditure on family violence

The output budgeting process

The Commission heard that the Victorian Government uses ‘output’ budgeting processes. Under this process the government allocates a budget for each of a number of outputs, each of which is comprised of many programs and services.30

A budget output consists of programs, initiatives and services designed to deliver a set of common objectives. Examples of budget outputs are policing services, child protection and family services, housing assistance, and mental health community support services.
Ms Melissa Skilbeck, Deputy Secretary of the Department of Treasury and Finance, told the Commission:

Outputs are the final products, or goods and services produced or delivered by, or on behalf of, a Department or public body and include products and services delivered to the community (e.g. education, health services), or products and services provided to other Departments (e.g. services provided by the Victorian Public Sector Commission to support the public sector).

Through this process, responsibility is devolved to individual portfolio ministers and departments that manage a global budget to deliver agreed outputs, in line with departmental objectives.

The annual state budget shows the government’s allocation of funding and the performance measures for each output. A department’s budget is made up of the funding allocated to each of its outputs.

The Commission was informed:

Output performance measures specify a Department’s expected service delivery performance. They are used to demonstrate the efficiency and effectiveness of output delivery (quantity, quality and timeliness) and the achievement of value for money (cost). As such they must be selected on the basis of their capacity to measure the extent and standard of output delivery.

The following are examples of output performance measures:

- the number of clients receiving case-management services—the Disability output
- the number of family services cases provided to Aboriginal families—the Child Protection and Family Services output
- the number of households assisted with crisis and transitional accommodation—the Housing Assistance output
- the case clearance rate (for example, Family Division matters disposed of in the Children’s Court)—the Courts output.

Budget papers include both the target for each output performance measure for that budget year and performance against each measure’s target. They also include the expected result for the year preceding the budget year and the actual result for the year before that.

The Commission was told that the main purpose of outputs and associated performance measures is to make state budget commitments visible to the public and to ensure that government is held financially accountable to Parliament each year.

There is no family violence output in the budget. Instead, family violence–related programs and activities form part of several outputs. For example, crisis (including refuge) accommodation and specialist family violence case-management and outreach services, which are important components of the specialist family violence service system, come within the housing assistance output, while family violence counselling services are part of the child protection and family services output.

Of the estimated 1000 performance measures applicable to all outputs delivered by government, only three relate to family violence. Two of these are in the policing services output. There are no output performance measures relevant to family violence in the housing assistance or child protection and family services outputs, or any of the numerous health-related outputs.

**Victorian government expenditure on family violence**

The Victorian Government’s submission advised the Commission that the total budget for Victorian government–funded family violence services and programs was $80.6 million in 2014–15, consisting of $77.6 million for family violence–specific initiatives and $3 million for two non-specialist programs that have a significant family violence component.
Appendix J shows a full list of the programs that make up the $80.6 million total. The government’s submission did not define family violence–specific initiatives, and the breakdown provided did not always make it clear what is covered. It appears, however, that this expenditure relates largely to specialist family violence services and includes some prevention costs. Because of the overlap between family violence and sexual assault, some of the $40 million provided for sexual assault services is also relevant to family violence. These figures are shown in Table 41.2.

Table 41.2 The Victorian Government’s budget for family violence, 2014–15

<table>
<thead>
<tr>
<th>Service/program</th>
<th>Funding ($ million)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programs with significant family violence componenta</td>
<td>3.0</td>
</tr>
<tr>
<td>Family violence–specific services</td>
<td>77.6</td>
</tr>
<tr>
<td><strong>Total family violence services</strong></td>
<td>80.6</td>
</tr>
</tbody>
</table>

- This comprises two initiatives—the Homelessness Innovation Action Project (Family Violence), called Families at Home ($1 million), and Reducing Violence against Women and Their Children grants ($2 million).
- Note: Subtotals do not add to total due to rounding.
- Source: Based on State of Victoria, Submission 717, Appendix B.

The submission advises that a further $35.3 million is allocated for sexual assault programs services.46

The figure of $80.6 million does not capture all expenditure on family violence–specific programs.47 For example, it omits some programs delivered through Corrections Victoria and the cost of responding to male victims, which is delivered as part of the Victims Support Agency program administered by the Department of Justice and Regulation.48

Table 41.3 shows how the $80.6 million is allocated between departments. The majority of the funded programs are administered through the Department of Health and Human Services, accounting for 88 per cent of all such funding.

Table 41.3 The Victorian Government’s budget for family violence–specific services, by department, 2014–15

<table>
<thead>
<tr>
<th>Government department/agency</th>
<th>Funding ($ million)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department of Health and Human Services</td>
<td>71.6</td>
<td>88.8</td>
</tr>
<tr>
<td>Court Services Victoria</td>
<td>5.4</td>
<td>6.7</td>
</tr>
<tr>
<td>Department of Justice and Regulation</td>
<td>2.2</td>
<td>2.7</td>
</tr>
<tr>
<td>Department of Premier and Cabinet—Office for Women’s Policy</td>
<td>1.4</td>
<td>1.7</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>80.6</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

- Note: Percentages do not add to 100 due to rounding.
- Source: Based on State of Victoria, Submission 717, Appendix B.

### Additional funding for family violence services in 2015–16

Both the previous and the current Victorian governments have committed considerable additional funding to dealing with family violence.49

The 2015–16 Victorian State Budget allocated an additional $81.3 million over five years for measures related to family violence.50 A full list of the programs and services is provided in Appendix J. The Commonwealth Government also allocated additional funding in late 2015 for a range of measures. At the time of writing the exact allocation to Victoria had not been finalised.51

As far as the Commission can determine, the 2015–16 Victorian State Budget allocated an additional $15.7 million for 2015–16 for specialist family violence services. This is shown in Table 41.4.52 Assuming that the $80.6 million related to specialist family violence services in 2014–15 was maintained into 2015–16, this would result in the total Victorian government allocation to specialist family violence services growing to $96.3 million for 2015–16.
The state budget also allocated a further $9 million in 2015–16 to programs and services that, although not specific to family violence, would nonetheless contribute to the response to people experiencing family violence, for example, legal assistance.53

Table 41.4 Additional investment in specialist family violence services and services that contribute towards addressing family violence funded from the 2015–16 Victorian State Budget54

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Specialist family violence services</td>
<td>15.7</td>
<td>2.4</td>
<td>0.4</td>
<td>0.4</td>
</tr>
<tr>
<td>Services that contribute to family violence response (e.g. legal assistance)</td>
<td>9.0</td>
<td>1.4</td>
<td>0.4</td>
<td>0.4</td>
</tr>
</tbody>
</table>

Source: See Appendix J. This sets out a full list of initiatives that comprises the categories.

Note: Includes $2 million for the Family Violence Access Workers initiative, which provides additional staff to specialist family violence services to respond to L17 referrals and which was reported in the Budget as funded from the Family Violence Fund. State of Victoria, ‘2015–16 Budget Paper No 3: Service Delivery’ (Department of Treasury and Finance, 2015), 6

As Table 41.4 shows, the majority of the additional investment is for one year only (2015–16). Considerable additional funding would need to be allocated from 2016–17 onwards to maintain this level of investment. The Commission understands that the Victorian Government will consider the recommendations made in this report as part of the 2016–17 budget process.

The importance of homelessness funding

Most specialist family violence services, including women’s refuges and outreach services, are funded from homelessness funding as part of the housing assistance output in the state budget.55 Homelessness funding was the main source of funding for the embryonic family violence service that began in the late 1970s with the establishment of women's refuges.56 Homelessness funding was later extended to fund other specialist family violence support services.57

The Housing Assistance output

Budget Paper No. 3 describes the Housing Assistance output as follows:

The Housing Assistance output, through the provision of homelessness services, crisis and transitional accommodation and long-term adequate, affordable and accessible housing assistance, coordinated with support services where required, home renovation assistance and the management of the home loan portfolio, aims to make a positive difference for Victorians experiencing disadvantage by providing excellent housing and community services to meet clients' needs.

This output provides:

- housing assistance for low-income families, older people, singles, young people and other households. It responds to the needs of clients through the provision of appropriate accommodation, including short-term and long-term properties that assist in reducing and preventing homelessness;
- housing support services to people who are homeless or at risk of homelessness and are in short-term housing or crisis situations. Support will assist clients in accessing and maintaining tenancies in appropriate accommodation. Services provided will assist in the prevention and overall reduction of homelessness and decrease demand for social housing.

This output supports the Department of Health and Human Services’ immediate support and quality-of-life objectives.58
Homelessness funding is administered by the Victorian Government, although both the Victorian and Commonwealth governments provide funds for this purpose. There are two main sources of funding:

- the National Affordable Housing Agreement (NAHA), under which the Commonwealth provides funding to states and territories as a contribution towards the provision of affordable, safe and sustainable housing. The funds are directed towards both social housing and homelessness assistance programs. The Victorian Government also contributes funding.

- the National Partnership Agreement on Homelessness (NPAH), which is a joint Commonwealth–state agreement focusing on people who are experiencing homelessness or are at risk of homelessness. NPAH includes prevention and early intervention services, and women escaping family violence are a primary target group. In 2015–16 the total value of the NPAH in Victoria was $53.2 million, comprising $22.8 million from the Commonwealth and $30.4 million from the Victorian Government.

The contributions made under these agreements, as well as the State’s funding of social housing and homelessness programs that assist women and their children experiencing family violence, come under the housing assistance output.

The NPAH was initially a four-year agreement (from July 2009 to June 2013) but it has been extended a number of times. At this stage, the Victorian Government has made its commitment under the NPAH until 2018. The Commonwealth commitment expires in June 2017.

Although NPAH-funded services are not restricted to family violence, $9.7 million from this source went to support the family violence programs that are set out in Table 41.5 in 2014–15.

Table 41.5 Family violence programs funded through the National Partnership Agreement on Homelessness which lapse in June 2017, 2014–15

<table>
<thead>
<tr>
<th>Program</th>
<th>Funds ($ million)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safe at Home</td>
<td>1.8</td>
</tr>
<tr>
<td>Extended after-hours response</td>
<td>1.9</td>
</tr>
<tr>
<td>Indigenous family violence support responses (including two Indigenous refuge facilities, in Mallee and Inner Gippsland)</td>
<td>2.5</td>
</tr>
<tr>
<td>Aboriginal legal assistance</td>
<td>0.2</td>
</tr>
<tr>
<td>Men’s case management (mainstream)</td>
<td>0.5</td>
</tr>
<tr>
<td>Men’s case management (Indigenous)</td>
<td>0.6</td>
</tr>
<tr>
<td>Intensive case management</td>
<td>2.2</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>9.7</strong></td>
</tr>
</tbody>
</table>

Note: The value of the NPAH-funded initiatives shown here is an estimate at 2014–15 funding levels.
Source: Based on Department of Health and Human Services, ‘Department of Health and Human Services—Response to Notice to Produce 20 August 2015 items 2(a)(ii) and 2(a)(iii)’ produced by the State of Victoria in response to the Commission’s Notice to Produce dated 14 August 2015 (as varied on 20 August and 20 October 2015).

Funding for these family violence services will lapse in June 2017 (Commonwealth contribution) or June 2018 (Victorian contribution) unless the current financial commitments under the NPAH are extended. This uncertainty makes it difficult for providers to plan services for people experiencing family violence.

**Overall government expenditure on family violence**

As noted, the Victorian Government submitted a figure of $80.6 million as the budget for specialist family violence services in 2014–15. This figure does not, however, include many other services relevant to family violence.

The costs incurred by the police and the courts in dealing with family violence are high (as discussed later) and should be included in the overall cost. They can be described as follows:

- **Victoria Police costs.** These are costs incurred in responding to family violence—for attending incidents and processing police-initiated intervention orders, for criminal investigations and prosecutions, and for specialist staffing resources dedicated to redressing family violence.
Court costs. These are the costs arising from hearing:

- family violence intervention order applications in the Magistrates’ Court
- family violence–related family, youth and child protection matters in the Magistrates’ and Children’s Courts
- criminal matters arising from contraventions (breaches) of family violence intervention orders and family violence that constitutes criminal offending (for example, physical and sexual assault and homicide).

Also included are court services such as the Victims of Crime Assistance Tribunal, the Coroners Court, and the Victorian Civil and Administrative Tribunal.

Additionally, the $80.6 million does not include the cost of Child Protection, including out-of-home care and the cost of Integrated Family Services that offer parenting assistance and early intervention for families, to the extent that these services are relevant to children affected by family violence.

An accurate estimate of expenditure should also account for the costs to government of other mainstream services used by victims of family violence, among them the following:

- hospitals and maternal and child health services
- mental health services provided to victims (and possibly perpetrators)
- generalist homelessness services—both accommodation and associated support
- sexual assault services, to the extent that the assaults occur in the context of family violence
- drug and alcohol services for victims or perpetrators, or both
- legal assistance provided through Victoria Legal Aid and community legal centre services
- corrections—both custodial and community-based services
- education services relating to prevention of family violence.

In August 2015 the Commission served a notice to produce asking that the Victorian Government provide information about the overall cost of family violence. On 7 October 2015 the Commission met with representatives of the Departments of Premier and Cabinet, Treasury and Finance, Health and Human Services, Justice and Regulation and Education and Training and Victoria Police to discuss ways in which that information could be provided in comparable form.

The Victorian Government provided detailed spreadsheets outlining the total annual expenditure for a range of programs and the proportion of that expenditure estimated to be attributable to family violence—for example, hospital emergency department services. This material is summarised in Table 41.6. The government was not, however, able to provide an overall cost.

The Department of Premier and Cabinet provided information relating to costs incurred by particular programs prepared by several departments and agencies. It prefaced the information with the following remarks:

In preparing this information for the Commission the State has multiple challenges in compiling the data. Whilst the State provides services to people who experience or use family violence across a wide range of portfolios, there is no accepted and universal manner in which the information about this use is captured.

The difficulty in capturing this information is for a number of reasons. Primary amongst these is the way that data is captured and used by various services, programs or areas of Government. These difficulties include that some services do not inquire into the presence of family violence; others may inquire into the presence of family violence, but do not have a mechanism for flagging its existence in their data collection system; and others again do record the presence of family violence, but have case management systems which do not allow the mining of that data.
Ultimately, the State has compiled the attached information on the cost to the Government of family violence. However, there are strong reasons why this information should not be aggregated and presented as the total cost to the Government of family violence. These include:

- the different methodologies of the departments and agencies in collating this data, and associated costs;
- the clear gaps in the data provided; and
- the strong caveats attached to this information.

In addition, departments and agencies have applied [different] approaches to the cost of service provision including, the inclusion in some instance of ‘back of house’ support.

This exercise has served to reinforce what the Commission has heard through evidence and submissions, that the State does not currently have a way of collecting and using data on its service users consistently across services, programs and areas. The Government is pursuing reforms to change the way that data is captured, stored and used across agencies and departments. In particular, it anticipates that the Commission will make recommendations on the necessity of flagging the presence of family violence across the databases of services that assist people who experience and use family violence.

Further, scoping work is currently being undertaken, led by the Department of Premier and Cabinet, on information sharing in response to recommendations from the findings of the Coroner into the death of Luke Batty. Part of this work will look at how that information is gathered and stored, as well as shared.66

Table 41.6 shows the individual estimates provided to the Commission. In the case of Victoria Police, which gave a range, the lowest cost is included. The cost estimates attributed to family violence are likely to be underestimates because some databases do not record, or under-record, whether the case is family violence–related.

A full list of the cost estimates and methodologies, caveats and qualifications can be found at www.rcfv.com.au.

Table 41.6 Estimates of the cost of family violence for programs funded or delivered by the Victorian Government, by department or agency, 2013–14 and 2014–15

<table>
<thead>
<tr>
<th>Department/agency</th>
<th>2013–14</th>
<th>2014–15</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total budget</td>
<td>Attributable to family violence</td>
</tr>
<tr>
<td><strong>Department of Education and Training</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Schools</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student Support Officers—social workers and psychologists</td>
<td>19.3</td>
<td>n.p.</td>
</tr>
<tr>
<td>Primary School Nursing Program</td>
<td>6.7</td>
<td>0.2</td>
</tr>
<tr>
<td>Secondary School Nursing Program</td>
<td>9.2</td>
<td>n.a.</td>
</tr>
<tr>
<td>Early childhood</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maternal and Child Health—universal (state government share of budget)</td>
<td>35.0</td>
<td>1.8</td>
</tr>
<tr>
<td>Maternal and Child Health—enhanced</td>
<td>13.0</td>
<td>0.1</td>
</tr>
<tr>
<td><strong>Department of Health and Human Services</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child FIRST</td>
<td>9.7</td>
<td>3.9</td>
</tr>
<tr>
<td>Family Services</td>
<td>78.7</td>
<td>26.6</td>
</tr>
<tr>
<td>Department/agency</td>
<td>Total budget</td>
<td>2013–14</td>
</tr>
<tr>
<td>------------------</td>
<td>-------------</td>
<td>---------</td>
</tr>
<tr>
<td>Sexual assault support services</td>
<td>24.5</td>
<td>0.9</td>
</tr>
<tr>
<td>Child Protection</td>
<td>n.p.</td>
<td>84.9</td>
</tr>
<tr>
<td>Out-of-home Care</td>
<td>283.7</td>
<td>136.4</td>
</tr>
<tr>
<td>Housing and Homelessness</td>
<td>843.3</td>
<td>58.4</td>
</tr>
<tr>
<td>Homelessness</td>
<td>n.a.</td>
<td>n.a.</td>
</tr>
<tr>
<td>Public housing</td>
<td>n.p.</td>
<td>3.3</td>
</tr>
<tr>
<td>Hospitals—in-patient</td>
<td>n.p.</td>
<td>0.3</td>
</tr>
<tr>
<td>Hospitals—emergency</td>
<td>n.p.</td>
<td>0.1</td>
</tr>
<tr>
<td>Community Health Services—general counselling and casework</td>
<td>n.p.</td>
<td>0.0</td>
</tr>
<tr>
<td>Community Health—community nursing, primary health and allied health</td>
<td>n.p.</td>
<td>7.8</td>
</tr>
<tr>
<td>Drug and alcohol treatment services</td>
<td>136.0</td>
<td>27.0</td>
</tr>
<tr>
<td>Mental Health—clinical services, community care</td>
<td>364.5</td>
<td>19.7</td>
</tr>
<tr>
<td>Mental Health—community support services</td>
<td>114.0</td>
<td>6.2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Department of Justice and Regulation</th>
<th>Total budget</th>
<th>2013–14</th>
<th>Attributable to family violence</th>
<th>Total budget</th>
<th>2014–15</th>
<th>Attributable to family violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Witness Service</td>
<td>n.p.</td>
<td>n.p.</td>
<td>0.8</td>
<td>0.4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Victims Assistance Program</td>
<td>8.5</td>
<td>2.9</td>
<td>9.4</td>
<td>3.8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Magistrates’ Court of Victoria</td>
<td>n.p.</td>
<td>126.1</td>
<td>43.5</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Corrections Victoria</th>
<th>Total budget</th>
<th>2013–14</th>
<th>Attributable to family violence</th>
<th>Total budget</th>
<th>2014–15</th>
<th>Attributable to family violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community-based</td>
<td>n.p.</td>
<td>9.2</td>
<td>n.p.</td>
<td>10.5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Custodial</td>
<td>n.p.</td>
<td>27.9</td>
<td>n.p.</td>
<td>39.5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Office of Public Prosecutions</td>
<td>57.8</td>
<td>7.1</td>
<td>60.0</td>
<td>8.4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Victoria Police</td>
<td>2.3 billion</td>
<td>704.4</td>
<td>2.5 billion</td>
<td>779.0</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

n.p. Not provided.

n.a. Not available.

All figures rounded to one decimal place.

Source: Based on data provided by the State of Victoria.67

There is no other public information showing how much the Victorian Government spends on services relevant to family violence.68
**Challenges and opportunities**

Many submissions argued that it is necessary to make changes to the funding levels and arrangements that guide family violence expenditure. Comments and criticisms related to the following:

- the absence of a discrete funding stream for family violence in the state budget
- the lack of transparency in relation to overall state expenditure on family violence
- the failure to ensure that funding arrangements are suitable for family violence.

Various proposals for resolving this situation were advanced. There was some support for the establishment of a specific family violence funding stream. There was also support for funding arrangements that are tailored to respond to family violence.

**Budget structures emphasise homelessness funding**

Some submissions argued that reliance on housing and homelessness funding limits the development of family violence–related policy:

- 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 Department of Health and Human Services funds homelessness services, including refuges and outreach family violence services, delivered by non-government agencies. These agencies receive funding to provide ‘episodes of support’. The primary performance measure is ‘[t]he number of new support periods provided to address and prevent homelessness’. This emphasises accommodation needs, or ‘shelter’, rather than safety. Some criticised this approach:

- Most specialist family violence organisations are funded through homelessness funding streams. The focus of this funding is naturally on reducing homelessness and supporting people into secure accommodation. However this focus on accommodation does not adequately recognise the importance of safety for victims of family violence.

- The key challenge ... that it presents is that all of the emphasis is on finding accommodation for women and not on providing safety to women. So the focus of safety is not central to the targeted funding that is available. It’s all about providing beds and accommodation for women.

Some submissions also argued that the focus on the Housing Assistance output affects the visibility and costs of specialist family violence services:

- The funding for family violence services – the ‘system’ is funded as though family violence is incidental and temporary, primarily buried within state homelessness budget programs and other community service funding streams.

The Commission was informed that relying on this funding source might also not take into account children’s unique needs:

- The current funding model for family violence services based on the prevention of homelessness rather than comprehensive family violence support services ensures that children are not considered as service clients in their own right.
Domestic Violence Victoria submitted:

Funding through budget programs that are not family violence-specific results in funding agreements on outputs – and therefore, most importantly, collected data – does not match the work family violence specialist services actually do. Funding and service agreements based on homelessness measure outcomes against preventing women and children from becoming homeless but do not address the range of other resource-intensive service supports women and children experiencing family violence need. Failure to adequately capture this need through the data results in the continuation of inadequate funding and system overload.79

Some submissions supported the idea of a separate funding stream solely for family violence programs:

A new funding channel for family violence services is required to proactively drive a holistic approach, enable comprehensive data collection, and set out clear outcome measures, about a range of family violence interventions.80

DHHS delink domestic/family violence funding model from the homelessness sector because their outcomes do not focus on safety, education and domestic violence support or perpetrator accountability.81

The Royal Commission [should] investigate the benefits of a separate funding stream for specialist family violence services that is focused on safety and support as well as accommodation outcomes.82

The Commission heard that South Australia considered separating funding for homelessness from family violence funding but decided not to do so. Instead, South Australia decided to establish performance indicators that were more sensitive to the goals of preventing family violence, keeping victims safe and providing necessary support:

It was recognised that there were some real limitations for domestic violence services being funded under the homelessness banner, however it was decided that would not be changed. Instead we focused on shifting the Key Performance Indicators ... for the sector. We noted, for example, that under homelessness, a repeat user is seen as a negative outcome, whereas for domestic violence, that is actually a good outcome. It means that the woman is connecting with us and it gives us the opportunity to work with them to develop safety plans, to conduct risk assessments and to ensure that the appropriate services are wrapped around that family.83

In response to questions from the Commission during hearings, departmental secretaries addressed the option of establishing a separate family violence output in each of the relevant departments.84 For example, funding for Victoria Police could include an output that captured the full range of activities, services and programs and the cost of responding to family violence.

The Commission has also considered the possibility of retaining the existing output structure but adding output performance measures that reflected various aspects of family violence to relevant outputs—particularly Housing Assistance, Child Protection and Family Services, and Policing Services. For example, these could include measures relating to the proportion of women seeking refuge accommodation who are admitted within a specific period or women's and children’s waiting times for family violence counselling. Ms Kym Peake, Acting Secretary of the Department of Health and Human Services (now Secretary), said ‘it would signal very strongly the priority that is given to family violence to have clear performance measures in the budget papers’.85 Such measures would then guide departmental contracting arrangements with service providers.

Another option put forward by Mr Chris Eccles, Secretary of the Department of Premier and Cabinet, involves funding being structured to support a whole-of-system outcomes model.86 While noting benefits such as ‘build[ing] coalitions that are motivated by a shared purpose’,87 he acknowledged that robust data would be required and this approach would be inhibited by data limitations. He cautioned that there were risks associated with moving to an outcomes approach without assurance mechanisms that provided assurance to ensure funding was properly and efficiently expended.88
A focus on crisis response

The bulk of Victorian government funding is directed towards meeting the needs of family violence victims when they are in crisis. In comparison, relatively small amounts are directed towards prevention, early intervention or the longer term recovery of victims. Figure 41.1 shows how the $80.6 million the Victorian Government spent on specialist family violence services in 2014–15 is split between prevention, early intervention, crisis and post-crisis support, and perpetrator accountability. Seventy-six per cent is allocated to services classified in the Victorian Government’s submission as ‘Crisis response and post-crisis support’. The Commission assumes these support services are largely directed towards victims, since the Victorian Government’s submission identifies perpetrator accountability as a separate service category.

Prevention and early intervention account for four per cent and six per cent respectively. This imbalance would be even greater if the resources expended on the police and courts were taken into account. This is consistent with evidence the Commission received suggesting that prevention and the longer-term recovery of victims are poorly funded.

A similar pattern was evident in the New Zealand examination of government expenditure on family violence. The New Zealand situation is further examined later in this chapter, under the heading ‘The way forward’.

Demand exceeding supply

Submissions demonstrated that current funding levels for services for victims, perpetrators and children are inadequate to meet demand. The Victorian Government submission acknowledged there is ‘significant unmet demand’ in the family violence system:

Despite recent investment, there is still significant unmet demand for family violence service response for victims. This is particularly the case for early intervention and crisis responses (including services handling referrals from Victoria Police), but it has also been raised in relation to prevention and perpetrator accountability initiatives, too.
A number of specialist family violence services informed the Commission they have difficulty balancing their response to police L17 referrals with the need to provide support to victims who seek it. The Commission was also told that few women who need refuge accommodation are able to secure it immediately. Instead, they are placed in ad hoc interim accommodation such as motels and boarding houses. The Commission was told by Safe Steps that every night about 35 per cent of beds available remain empty because women and families do not ‘match’ the provider’s criteria.

Perpetrators of violence against their female partners also have to wait for access to behaviour change programs. In addition, these programs are designed mainly for men responsible for intimate partner violence, so there is little support for people who are responsible for other forms of family violence.

Figures 41.2 and 41.3 illustrate the relationship between the demand for services and funding for services. They use formal police referrals for female victims and perpetrators as indicators of demand for family violence services. They plot the growth in these referrals against the primary specialist family violence services provided to female victims and men’s services.

Figure 41.2 Cumulative percentage increase in formal police referrals for female affected family members and funding for specialist family violence services for women and their children, 2009–10 to 2013–14

It is evident that supply has not kept pace with demand. Formal police referrals for female victims rose by 317 per cent between 2009–10 and 2013–14, while funding for specialist family violence services for women and their children increased by only 17 per cent during the period.

Funding for men’s family violence services—including voluntary men’s behaviour change programs—grew by 34 per cent (not including funding allocated by the Magistrates’ Court of Victoria for mandated men’s behaviour change programs), while formal police referrals for perpetrators grew by 592 per cent between 2009–10 and 2013–14.
Formal police referrals have an impact on services as they require an action, including triaging and follow-up. However, the Commission notes that referrals require the services that receive L17s to attempt to contact victims and perpetrators and advise them they can seek support. The Commission was unable to ascertain the proportion of victims and perpetrators who actually sought and received further help from the service that received the L17. Some people decline offers of assistance or cannot be contacted. Nevertheless, the scale of the growth in demand is significant, and may well have had a sizeable flow on effect in terms of the number of people requiring assistance.

Additional funding for core services was provided in the 2015–16 State Budget, but it was for that year alone. As Table 41.4 shows, the amounts allocated in forward estimates for the ensuing years are very small.

**Inadequate planning to meet demand**

The Commission heard that there is no whole-of-government process for systematically and regularly forecasting the demand and resource requirements for family violence services. Individual departments and agencies generally measure the growth and, in many cases, seek to anticipate the future growth as part of considering how best to respond.

Both Victoria Police and DHHS prepare forecasts of police family violence incidents using the crime statistics produced by the Crime Statistics Agency, which are compiled from information recorded in the Victorian Police Law Enforcement Assistance Program, or LEAP, database. DHHS advised the Commission that its forecasts do not make any assumptions about specific demand drivers—the purpose is to accurately predict the volume of family violence incidents into the future based on the trends and patterns evident in the time series data. The methodology involves a number of forecast models.

At the request of the Commission, DHHS updated its forecasts using the most recent data until June 2015.
Figure 41.4 shows the forecast until 2017–18, including the upper and lower confidence levels at 95 per cent. The graph predicts a steadily increasing number of incidents in the three years from 2015–16 to 2017–18. The number of incidents is predicted to rise to 88,347 by 2017–18; a 25 per cent increase on 2014–15.104

Figure 41.4 Family violence incidents attended by Victoria Police: 2005–06 to 2014–15 and forecast to 2017–18

<table>
<thead>
<tr>
<th>Year</th>
<th>Total family violence incidents</th>
<th>Lower confidence limit</th>
<th>Upper confidence limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>05–06</td>
<td>10,000</td>
<td>10,000</td>
<td>10,000</td>
</tr>
<tr>
<td>06–07</td>
<td>20,000</td>
<td>20,000</td>
<td>20,000</td>
</tr>
<tr>
<td>07–08</td>
<td>30,000</td>
<td>30,000</td>
<td>30,000</td>
</tr>
<tr>
<td>08–09</td>
<td>40,000</td>
<td>40,000</td>
<td>40,000</td>
</tr>
<tr>
<td>09–10</td>
<td>50,000</td>
<td>50,000</td>
<td>50,000</td>
</tr>
<tr>
<td>10–11</td>
<td>60,000</td>
<td>60,000</td>
<td>60,000</td>
</tr>
<tr>
<td>11–12</td>
<td>70,000</td>
<td>70,000</td>
<td>70,000</td>
</tr>
<tr>
<td>12–13</td>
<td>80,000</td>
<td>80,000</td>
<td>80,000</td>
</tr>
<tr>
<td>13–14</td>
<td>90,000</td>
<td>90,000</td>
<td>90,000</td>
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<tr>
<td>14–15</td>
<td>100,000</td>
<td>100,000</td>
<td>100,000</td>
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<tr>
<td>15–16</td>
<td>110,000</td>
<td>110,000</td>
<td>110,000</td>
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<tr>
<td>16–17</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17–18</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: Figure includes lower and upper 95 per cent confidence limits.

**Funding arrangements for family violence services**

The Commission also heard criticisms of administrative arrangements that determine the way departments and agencies purchase services and oversee the performance of contractual requirements relating to family violence services. Because the budget structure and processes influence internal departmental practices, these criticisms are discussed here.

The main concerns expressed relate to the following:

- the lack of funding for coordination between services
- fragmentation of service delivery
- a lack of focus on outcomes for victims and perpetrators
- a short term rather than strategic focus
- the need for better measurement of what is delivered.

The Commission notes that a number of these criticisms are not confined to responses to family violence but instead apply more broadly to human services. They have often been the subject of earlier studies and attempted reforms.105
Lack of funding for coordination activities
The Commission was told of the need for collaboration and coordination between services to achieve the best results for victims of family violence. Many submissions noted that this requires staff specifically funded for such activities:

Government expects these services and their employees to be able to work in an integrated way – within and across sectors – on complex solutions for vulnerable people yet fails to adequately resource programs or recognise the obstacles such as limited time, opportunity and sometimes goodwill for this to be effectively achieved.

Any initiative to coordinate, collaborate or co-deliver with other agencies must therefore come from a re-prioritisation of agency funds (i.e. taking people, time and resources from one activity to give to another).

In the development of the Go Goldfields Project, there have been barriers to implementation due to insufficient resources and capacity to promote integration and co-ordination.

The Commission was also told that a lack of diversity among service providers in rural communities can severely hamper the responsiveness and effectiveness of services. This is discussed in Chapter 33.

Fragmentation of service delivery
As discussed in Chapter 8 and 13, there are a large number of service providers offering various combinations of programs but few providers who deliver a full suite of services. Ms Peake remarked, ‘It is absolutely the case currently that we have a proliferation of small programs that have very prescriptive description of what is to be delivered’.

Ms Peake told the Commission that funding at the departmental or program level has been shaped by historical arrangements that hinder the holistic delivery of services for people with complex needs:

We have a system which is really devised according to historical programmatic interventions. If I just give you a bit of a picture of that, within child and family and community services there are over 5,000 activity level service agreements across more than 200 programs. Each of those programs is designed around historical groupings of clients and doesn’t reflect, as this report highlights, the complex needs of both disadvantaged people and their communities, and doesn’t really enable there to be service responses that cross over program boundaries.

Multiple discrete allocations mean that service providers need to go to considerable lengths to bring together multiple different funding sources in order to construct a service response that is viable.

The Commission was also informed that this approach results in uneven service provision—adversely affecting service users and posing difficulties for service providers—which must often meet multiple reporting requirements. This creates a heavy administrative burden associated with reporting and accounting for multiple disparate sets of funding. For example, Mr Rudolph Kirby, Chief Executive Officer of Mallee District Aboriginal Services, said that up to 30 per cent of funded time is spent on reporting and accounting for funding.

Similar weaknesses were identified in the New Zealand social service system in a recent review by the New Zealand Productivity Commission. Mr David Heatley from the New Zealand Productivity Commission demonstrated how multiple funding lines can result in fragmentation:

This was a case study of one provider that received – the numbers are from memory but they are approximately right – had approximately 12 funders, ran about 30 programs, and for them when faced with a client their problem was how to match the client to the programs they were funded for. They represented it as 30 jam jars and each jam jar has a sticker on it with a bunch of eligibility criteria and they are trying to work out which pot they can dip into to get some funding and resources to apply to that client.
The rules around spending from each jam jar were different. The reporting requirements around each jam jar were different. They estimated they spent around 25 per cent of their total time just on reporting and contract management. So that’s a pretty high administrative load.\textsuperscript{115}

The Commission’s research shows that, of the 28 agencies that provide specialist family violence support services, nine receive funding for between 10 and 13 different programs—such as outreach case management, Safe at Home, private rental brokerage, crisis accommodation and court support—and a further 10 provide between five and nine programs. The details of this are in Appendix K.

As a consequence of these arrangements, people affected by family violence cannot expect to receive the same services or the same level of services in different parts of Victoria. The situation has other consequences too:

- Service users must contact many different service providers in order to receive the combination of services that best meets their needs.
- People must tell their story repeatedly.
- Services might not be delivered in the right combination or sequence because each service provider has different offerings and priorities.

The level of fragmentation is even greater among Aboriginal community controlled organisations. Unlike mainstream services, most Aboriginal agencies receive funding for only one or two programs and there are only two such agencies funded to deliver three programs from eight funding streams.\textsuperscript{116}

In Chapter 38 the Commission recommends that the Victorian Secretaries Board oversee the implementation of the proposed Statewide Family Violence Action Plan, to facilitate development of a whole-of-government response to family violence. In the Commission’s view, this plan should explore ways of consolidating service provision, ensuring more even access to services throughout Victoria and reducing the need for service providers to account for expenditure in many different funding streams.

**Contractual arrangements not focusing on outcomes**

The Department of Health and Human Services purchases specialist family violence services, such as refuges and men’s behaviour change programs from community service organisations.\textsuperscript{117} The Victorian Government argued that departmental arrangements should place more emphasis on outcome monitoring:

> Current performance-monitoring arrangements encourage community service organisations to deliver against agreed target outputs. There is a requirement that community service providers funded by government will adhere to documented standards. Monitoring service delivery outcomes is limited within existing frameworks. This has been affirmed by the recent VAGO audit of early intervention services for vulnerable children and families which concluded that Child FIRST and Integrated Family Services had limitations in service performance data and a lack of outcomes monitoring at the system level.\textsuperscript{118}

Many agreed that current processes do not focus on the outcomes.\textsuperscript{119} Submissions to the Commission suggested that the outcomes should capture the goal for the client, rather than measuring what is provided by the service.\textsuperscript{119} It was noted by Safe Steps, however, that outcomes-focused funding requires agreed objectives as the basis of performance measurement.\textsuperscript{117} Chapter 38 notes that currently there are no cohesive and agreed whole-of-government objectives to guide the prevention of and responses to family violence.

The focus of submissions on outputs rather than outcomes largely relates to services funded by DHHS, which is the department responsible for a high proportion of the funded services delivered to people affected by family violence. Comments generally related to contractual agreements with funded providers. Some of the comments discussed here are, however, also relevant to services delivered directly by the Victorian Government, such as police and court services.
**Poor measurement of what is purchased**

The Victorian Government provided the Commission with data about the level of services it had purchased across a range of programs as well as the level of services actually delivered. However, it told the Commission it was not able to provide actual performance data against the level of service purchased for those family violence services funded through the homelessness stream, which takes in refuges and specialist family violence services such as support for women, Stay at Home, Private Rental Brokerage and Intensive Case Management. This is because the way the Victorian Government buys its services does not align with the data-collection system.

A national data-collection system exists for all homelessness-funded services, including those for women experiencing family violence. The Australian Institute of Health and Welfare administers this system, which produces annual reports on service activity that includes both national and jurisdictional data. It is not clear what, if any, data is provided directly by the AIHW to the Victorian Government to enable it to measure and monitor performance at either an individual provider level or across particular sectors such as specialist family violence services funded through homelessness.

**Short-term funding**

The Commission heard that family violence funding is often allocated on a short-term basis, and it was submitted that this approach inhibits effective responses to family violence:

> Funding uncertainty means that services divert limited time and staff resources to chasing funding through tenders and philanthropy. Programs are often short-term and project-based with insufficient time for proper evaluation or the capacity of successful programs to be continued, frustrating and demoralising both clients and workers.

Some argued that uncertainty associated with short-term funding inhibits recruitment and retention of staff, makes it difficult to build relationships with clients over time, and affects planning for the future. This was a strong message from the Indigenous Family Violence Regional Action Groups:

> In the northern region the IFVRAG receive $59,000 for small Aboriginal family violence projects such as [W]hite [R]ibbon promotions, educational programs for youth and women/men’s camps. Limitations of both the amount of funding and the one off projects funded through the IFVRAGS pose real risks for sustainable change in the Aboriginal community.

> Short funding windows means that [the] community are regularly engaged with a project and then disengaged with when funding runs out. This can leave communities disenchanted.

This issue is considered further in Chapter 26.

It was also argued that short-term funding prevents effective evaluation:

> Much energy, time and resource is spent by organisations navigating funding opportunities to complement base SHS [Specialist Homelessness Service] funding with bizarre partnership tendering for ‘one of’ [sic] projects that include a natural sunset clause as they are only funded for a [a] limited period. Rarely are they long enough to collect any real research and evidence and before long they end and the money dries up.

> The long term nature of prevention activities means that organisations such as ANROWS and Our Watch need to know that they have access to funding over many years if they are going to achieve the results we anticipate they can. Such funding would also enable the development of a dedicated and skilled workforce of practitioners who can lead this work over the next decades and the development of appropriate evidence and resources to drive this work.
Additionally, the Commission was informed that this approach limits the Victorian Government’s ability to move towards funding and measuring outcomes, rather than outputs and inputs:

> [F]unding acquittals are increasingly focussing on the notion of ‘outcomes’ that are inherently difficult, if not impossible, to demonstrate in the current funding model. Essentially, MonashLink is being asked to prove its service’s efficacy without the capacity to do so.131

**The way forward**

The Royal Commission’s terms of reference emphasise the importance of establishing a culture of non-violence. This culture needs to be promoted both within families and throughout the broader community.

The Commission considers that further investment is necessary to prevent family violence and to improve early intervention to support families where there is a risk of violence occurring. Investment is also required to keep victims safe, to help them recover from the emotional and economic effects of past violence and, wherever possible, to help perpetrators stop using violence.

The current economic costs of and state expenditure on family violence are substantial. Reforms that meet the objectives just stated should, in the long term, reduce violence and enable former victims and perpetrators to become productive members of society. It is the Commission’s view that the Victorian community would support increased Victorian government expenditure on family violence in order to achieve these purposes.

Later in this chapter we recommend that the Victorian Government should identify revenue sources to support that investment. Alterations to funding processes should be made to help to bring about these changes. These include the following:

- making the costs associated with family violence more transparent
- introducing family violence performance measures in the state budget
- giving greater emphasis to prevention, early intervention (including family support) and recovery
- stabilising the service system
- forecasting service demand
- changing the way departments and agencies fund and monitor service provision
- investigating the possibility of partnership agreements with the Commonwealth.

**Making family violence expenditure more transparent**

Although it is not possible to ascertain the overall costs family violence imposes on the community, there is no doubt that they are substantial. Using the PwC report’s estimate of the cost of intimate partner violence in Australia, the overall cost in Victoria would have been $3.1 billion in 2014–15.132

The three studies discussed earlier in the chapter—the Access Economics, KPMG and PwC reports—also demonstrate that a major portion of these costs is borne by individual victims, particularly when pain and suffering are included.

Because of the caveats on the accuracy and usefulness of the figures provided to it, the Commission did not attempt to estimate total Victorian government expenditure on family violence. Nevertheless, all the evidence suggests that both the overall economic costs of family violence and Victorian government expenditure on responding to it are likely to increase in the absence of adequate government funding for programs to prevent violence, support victims and hold perpetrators to account. In the Commission’s view, the Victorian community could reasonably accept the argument that further government investment in this area is necessary and would support such an investment.
Unfortunately, however, the fact that there is inadequate information on family violence expenditure inhibits the development of whole-of-government policies aimed at preventing such violence and helping those who are affected by it. At present it is difficult, if not impossible, for the Victorian Government to do a number of things:

- consider areas in which services could be provided more effectively and efficiently. For example, a better understanding of the costs of policing related to family violence could result in the development of more effective models for policing that make victims safer by preventing an escalation of family violence
- compare the cost–benefits of particular interventions, especially those delivered by a mainstream service such as a hospital
- ascertain the resources that could be released for other purposes if there was a reduction in the prevalence of family violence or an increase in the effectiveness and efficiency of services
- identify particular areas where expenditure is inadequate to meet the needs of people affected by family violence, so as to allow decisions to be made about whether additional funding is needed
- set a baseline against which changes over time could be measured
- identify areas where workforce increases are required in order to support workforce planning.

Having faced a similar situation in 2014, the New Zealand Government embarked on an exercise to determine its expenditure on family violence, child abuse and sexual violence services—including courts, police and support services. It concluded that annual expenditure is about NZ$1.4 billion a year. Because New Zealand is a unitary state rather than a federation, the NZ$1.4 billion estimate includes costs that would be met by the Commonwealth Government in the Australian system.

The New Zealand exercise found that most government expenditure is for services delivered to respond to the immediate impact of a violent incident, going to generalist services—specifically prisons for perpetrators and hospitals and general practitioner services for victims. Only a small proportion of total spending is directed to specialist services, with those responding to child abuse and neglect accounting for the largest proportion in this category. Similarly, only a small proportion of the funding is spent on primary prevention and screening.

The fact that generalist services absorbed the largest proportion of government expenditure on family violence in New Zealand reinforces the case that Victoria needs to understand how much family violence costs all service systems. It is important that this includes expenditure on family violence–related child abuse and neglect. The New Zealand Government demonstrated that it is possible to conduct an exercise of this kind.

The Victorian Government acknowledges that family violence makes up much of the work of mainstream services. When the Victorian Government knows how much it spends on family violence, it will be easier to determine the value of particular interventions. The Commission considers it imperative for Victoria to embark on this process. It might not be possible or appropriate to replicate the New Zealand methodology, but lessons can be learnt from the experience there. There is a need to establish a system for continuing identification of family violence–related costs within Victorian government departments. This will significantly assist with evaluating the costs and benefits of particular programs.

The Commission believes that the Victorian Government should know the explicit cost of family violence to its budget, beyond the funding it provides for specialist family violence services. To put this beyond doubt, we propose that the Victorian Government develop a methodology for measuring the cost of family violence across services and programs that respond to family violence—for example, the costs of policing-related responses to family violence, or the cost of hospital emergency departments in treating victims of family violence. We propose that the Victorian Government publicly report data pertaining to the cost of family violence regularly.

The Commission agrees that a reduction in the incidence of family violence through greater expenditure on prevention and early intervention will, in time, reduce costs to government (both state and federal) and to the community as a whole. However, robust research is required, so that we know which programs, services and interventions achieve their objectives. Cost–benefit analyses could help determine whether the value of the benefits outweighs the costs incurred to achieve the desired results. This information could contribute to policy and funding decision makers’ deliberations about which interventions, programs and services provide the best return on investment.
Although there is emerging evidence that governments can intervene in ways that will generate social and economic benefits, further research is needed in order to understand what works. ANROWS (the Australian National Research Organisation for Women’s Safety) has noted the need for such research. In Chapter 38 the Commission proposes the establishment of an independent Family Violence Agency. Such an agency could provide advice to the Victorian Government on how to cost the impacts of family violence across government and the effect of initiatives to reduce or prevent family violence.

Family violence–related performance measures

As explained, the lack of performance measures in budget outputs relevant to family violence makes it difficult for the Victorian Government to assess whether current expenditure is being suitably directed.

The Commission agrees with the argument that the provision of a significant proportion of family violence funding under the aegis of homelessness contributes to the lack of transparency about the funding of family violence services. But, despite the possible symbolic value of providing a separate stream of family violence funding for specialist family violence services, it is doubtful that this approach would make it easier to identify family violence expenditure throughout the Victorian Government. There are ways of resolving this problem without altering the existing budget output structure.

The Commission also rejects the approach of creating a family violence output for each relevant department. One risk of doing this would be that departments without such an output would not consider they had a role in relation to family violence, and this would be inconsistent with the Commission’s view that there should be a whole-of-government approach to preventing and responding to family violence. We also note the warning in the evidence of Ms Peake about the possible unintended effects of such an approach:

… pulling out the specialist services to have a particular output would just be the risk of sending a signal that for all the rest of the services that are funded—health services, the rest of the child protection—the whole of the child protection system, the whole of the housing system—that there is a suggestion that it’s only the small part that is specifically funded for specialist family services that is relevant to tackling family violence.

Instead, the Commission favours the introduction of additional output performance measures in the budget so as to capture all aspects of the Victorian Government’s response to family violence. This would increase the visibility of family violence in the budget papers and demonstrate how various outputs, such as indications of performance over time, contribute to resolving the problem of family violence. Introducing more output performance measures will also reflect the priority government attaches to the area. As Ms Skilbeck told the Commission:

[Performance measures] should reflect the priorities of the government and the department of the day. They are able to be adjusted to those changed priorities, and certainly additional output performance measures can be added too. With the focus on family violence I would expect that that would change accordingly.

The Commission understands that the inclusion of family violence performance measures in existing budget outputs would be administratively straightforward and could be accomplished as part of an ongoing review process. Ministers are able to propose changes before publication of the budget. The Commission heeds, however, the advice given in evidence by Ms Skilbeck—that new output performance measures will need to ensure they are meaningful and the data exists so that reporting performance is possible within the cycle of budget publication. Further, we expect that the new performance measures will be informed by the proposed Statewide Family Violence Action Plan. For this reason the Commission suggests that the measures should be introduced in the 2017–18 budget.
The Commission expects that the introduction of family violence–related performance measures in the budget will influence the way departments and agencies allocate resources so that investment is sufficient in particular programs to meet the targets attached to any new performance measures, for example, timeliness of access to crisis accommodation by women escaping family violence. Departments and agencies’ contracts with service providers may also need to be amended so that the performance expected from funded providers aligns with any new family violence-related performance measures in the budget, although at the contract level there may be further measures that are specific to the type of service being funded. Measuring achievement of performance measures at both the budget and service contract levels will necessitate appropriate data collection. This is discussed further in Chapter 39.

Recommendation 217

The Victorian Government introduce in the 2017–18 State Budget additional output performance measures relating to the prevention of family violence and the assistance provided to victims and perpetrators in order to increase the visibility of family violence in budgetary processes.

Recommendation 218

The Victorian Government, in preparing the Statewide Family Violence Action Plan, consider whether further changes should be made to budget systems to better reflect the central role of government in preventing and responding to family violence [within 12 months].

Recommendation 219

The Victorian Government [within 12 months]:

- commission or itself perform rigorous and consistent measurement of the cost of family violence to government, the community and individuals

- require departments and agencies to establish consistent methods of collecting data—including data on costs incurred by generalist services—on activities relating to family violence prevention and response and include that information in their annual reports.

Greater emphasis on prevention, early intervention and recovery

There should be greater emphasis on prevention and early intervention. There should also be greater investment in helping victims recover from family violence, so that their need for long-term services is reduced and they can enjoy good health, genuine safety, connection with their community and full social and economic participation.

Prevention is discussed in Chapter 36; it deals with community awareness activities conducted at the general and local levels, respectful relationship education in schools, and support programs for individuals and families—for example, programs designed to support families after the birth of a child. Policies aimed at supporting the emotional and economic recovery of victims are discussed in Chapters 9, 20 and 21; this includes the provision of individualised packages to provide support in obtaining employment and housing.
A focus on prevention, early intervention and recovery could in the long term reduce the costs borne by individuals, as well as future budgetary costs—including costs associated with children’s experience of family violence.

Although the Commission supports greater investment in these activities, this is not an argument for redirecting funds currently allocated to crisis intervention. For the reasons explained below, expenditure on prevention should not come at the expense of providing adequate funding to services so that they can support victims at a time of crisis and help perpetrators change their behaviour.

**Recommendation 220**

The Victorian Government ensure that the recommended Statewide Family Violence Action Plan emphasises prevention, early intervention and supporting the long-term recovery of victims. It should also identify the funding that will be required to pursue these goals [within 18 months].

**Resolving immediate pressures and stabilising the service system**

The demand for family violence services is high and increasing and cannot be met from existing resources. Some organisations provide services to a level beyond that for which they are funded, but this cannot be sustained indefinitely. The lack of reliable data makes it difficult to determine the overall extent of the shortfall in service funding.

Specialist family violence services, homelessness services, the police and the courts are struggling to deal with the increasing number of victims seeking help. Recent publicity about the pervasiveness of family violence and its long-term effects on families will probably lead to increased reporting and might well have done so already.

In order to maintain existing service delivery levels, the additional investment in family violence provided for in the 2015–16 State Budget needs to be extended since most of it was for one year only. As part of maintaining current service levels, the Victorian Government must urgently pursue the extension of the National Partnership Agreement on Homelessness with the Commonwealth Government, so that the funding continues beyond June 2017.

Reforms such as the proposed integrated intake system (discussed in Chapter 13) will require additional funding for extra capacity to make safety and needs assessments and ensure that referrals can flow properly. In the longer term, this system should reduce costs by giving priority to early intervention with perpetrators and helping victims recover.

The recommendations the Commission makes will, however, be undermined if service systems lack the capacity to do the work asked of them. This justifies an injection of additional funds to stabilise the system and ensure that it can meet the increased demand that has arisen in the past five years. The opacity of current funding arrangements and the limited time available to the Commission make it impossible to estimate the precise amount required. In future, determining the level of investment will be guided by the modelling work discussed in the next section.
Recommendation 221

In the 2016–17 State Budget the Victorian Government give priority to:

- providing an immediate funding boost to increase the capacity of specialist family violence services and Integrated Family Services to respond to existing demand
- implementation of the Commission’s recommendations that relate to that budget period.

Recommendation 222

The Victorian Government treat the extension of the National Partnership Agreement on Homelessness as a matter of urgency and pursue it immediately with the Commonwealth Government [within 12 months].

Demand forecasting

The lack of resources to meet demand is in part a consequence of inadequate planning. The Commission understands that Victorian government agencies do not systematically forecast demand for family violence services in various parts of the service system or use such forecasts to determine whether funding needs to be increased to respond to anticipated demand.

The Commission notes that both Victoria Police and DHHS prepare forecasts of family violence incidents using the crime statistics produced by the Crime Statistics Agency. Although the Commission welcomes the forecast as a step in the right direction, the forecast remains focused on the projected number of Victoria Police family violence incidents. There is limited systematic forecasting of demand for family violence response services that individual departments and agencies deliver or fund, or for determining the impact of growth in demand for future funding requirements.

DHHS advised the Commission that its family violence forecasts have been used to guide policy and strategy development as well as assist area managements as ‘internal business intelligence’. However, forecasts of family violence incidents do not appear to be used in forecasting the demand for family violence specialist services. For example, a recent forecast of future demand of homelessness, commissioned by DHHS, factored in Victoria Police family violence incident data as one of four key drivers of homelessness demand, yet the projections regarding the number of people experiencing homelessness were not disaggregated in terms of family violence.

Without an agreed methodology for forecasting demand for family violence services that applies across the entire government, the Victorian Government cannot effectively plan for and respond to future needs. It is unable to anticipate the scale and nature of demand. It cannot know what level of resourcing is likely to be required.

In the Commission’s view, the Victorian Government should develop a robust demand-modelling tool or set of indicators so that it can better plan how departments and agencies respond to family violence and predict any associated funding requirements. This modelling tool or set of indicators should take into account the interdependencies between various parts of the service system; for example, it should consider the effect of increased police activity on the demand for legal assistance and court services.
Furthermore, such a model must capture the dynamic nature of the family violence service system, particularly in view of the fact that the Commission recommends a number of reforms. Some of the proposed reforms should reduce demand; for example, a stronger focus on prevention and on recovery might reduce the number of victims who need support in the future. Other reforms might lead to increased demand for support services—for example, by providing referrals from the proposed Support and Safety Hubs.

In Chapter 38, the Commission recommends the development of a Statewide Family Violence Action Plan to guide government efforts in responding to family violence. Modelling future demand will be an important element of the plan.

**Recommendation 223**

The Victorian Government develop a demand-modelling tool or set of indicators to be used for planning how government as a whole and relevant departments and agencies themselves (including those providing or funding universal services) respond to family violence [within two years]. Budget processes should take account of the cost of forecast demand.

**Funding and monitoring service provision**

In this section the discussion moves away from budget-level decision making to briefly discuss the administrative processes that affect the way departments and agencies fund and monitor service provision.

In broad terms, the Commission agrees with the following remark:

Uncertain, inadequate and short-term funding promotes fragmented, localised service responses rather than a consistent, comprehensive and best practice response that supports statewide system integration.142

Such criticism is not specific to family violence: it is voiced about funding processes for community-based services generally. The Commission accepts that there are problems with current arrangements relating to the following:

- lack of funding for coordination between services
- fragmentation of service delivery
- a short-term rather than strategic focus
- a lack of focus on outcomes for victims
- measuring results of perpetrator interventions.

The Commission is persuaded that there is a need for reform of the contractual arrangements departments make with service providers and how they measure their performance.

Further work should be done in this regard. The Commission expects that this would be done by a sub-committee of the Victorian Secretaries Board, the creation of which would be expected to consult with the Statewide Advisory Committee on Family Violence which is recommended in Chapter 38.

In the meantime, however, the Commission considers the Victorian Government should require departments to make contractual arrangements that encourage the building of links between service providers, including funding the work done to improve these links.
Reform of contractual arrangements should extend to putting in place performance measures that are tailored to the requirements of family violence victims and perpetrators. In the Commission’s view, performance measures should include a focus on reducing and managing risks to victims. Earlier the Commission recommended the inclusion of additional family violence-specific budget output performance measures in the budget papers. We would expect that measures in service providers’ contracts for the delivery of services relevant to family violence would align with these output budget-level measures and include further measures that reflect that purpose of the funding.

**Lack of support for collaborative activities**

An effective family violence system requires collaboration and coordination between services. Elsewhere in this report the Commission makes recommendations aimed at ensuring that, as far as possible, victims and perpetrators can approach a single source for assistance and receive warm referrals to other services. One of the important roles of workers in the proposed Support and Safety Hubs will be to help people find their way through the service system.

There is also a need to encourage liaison between services in order to resolve problems beyond the needs of particular clients. When services struggle to meet increasing demand, they can be forced to choose between responding to immediate client needs and liaising with other services. Funding should take account of the costs incurred in service planning and the collaboration required for that purpose.

Further, the Victorian Government should foster collaboration between potential providers when contracting for service provision, emphasising consultation and collaborative relationships rather than competition.

**Short-term funding**

The Commission was alerted to the difficulties caused by short-term funding of projects. Projects should be funded for a period that provides some stability for service providers and allows sufficient time for evaluation and adaptation based on experience.

When funding is provided for a service innovation, it should include some funding for determining whether the project has achieved its goals. The Commission does not want to set an arbitrary time limit, but it considers it would normally be difficult to justify funding for periods shorter than three years. It is also important that departments and agencies have mechanisms for identifying projects and services that are not performing well, so that a decision can be made about whether an initiative should be withdrawn or supported in making changes.

As part of that work, the Victorian Secretaries Board should establish a set of principles to guide contractual arrangements for the provision of family violence–related services. The purpose of these principles would be to ensure that funding for service providers:

- covers costs related to coordination between services and, where relevant, evaluation of programs
- encourages the collapsing of multiple small allocations where appropriate, to enable clients to receive a broader range of services
- simplifies accountability and reporting requirements
- is based on best-practice research into the duration and intensity of services, so that assistance achieves sustainable outcomes
- is accompanied by a robust data-allocation and performance-management regime
- lasts for a period sufficient to enable pilot programs to be evaluated and, if necessary, to adapt during the course of the program.
This approach is in keeping with evidence provided about the need to aggregate some programs and increase the funding certainty for providers:

... moving to a model where there are fewer programs, so some broadening of programs, with more certainty in the duration of the funding agreement and clearer ... definition of the outcomes that are to be achieved and the evidence-based interventions that will achieve them is certainly where we need to go.143

The Commission also proposes that departments establish processes for regular overview and evaluation of services and programs—both departmental programs and funded services—based on the principles adopted by the Victorian Secretaries Board. That process should involve independent experts, including academics, as well as departmental staff.

A focus on outcomes for victims and perpetrators

The Commission has already recommended that budget outputs include performance measures relevant to family violence.

Similarly, service contracts should include requirements that are tailored to meeting the needs of victims and perpetrators such as safety planning and moves towards stability. Elsewhere we also recommend updating guidance material that will be reflected in service contracts, better guiding the practice and focus of services.

Beyond better measuring the work of contracted services through improved performance measures, the Commission agrees that there should also be a greater focus on outcomes for victims (including children) and perpetrators of family violence. This needs to be across the range of services that respond to family violence, both funded services and those delivered by government departments and agencies. This would require both a clear idea of what outcomes are to be pursued and how these will be measured, noting that we make recommendations about the need to address the current data limitations in Chapter 39. The proposed Statewide Family Violence Action Plan will be a good starting point as it will specify the specialist family violence service system’s goals and inform the development of appropriate outcomes. The Commission urges the Victorian Government, in partnership with the service sector, to explore the design of funding arrangements, including contracts with providers, so that working towards such outcomes is encouraged and measurement of performance is possible.

**Recommendation 224**

The Victorian Secretaries Board develop and promulgate principles for purchasing services that will contribute to achieving the goals of the Statewide Family Violence Action Plan [within 18 months]. These principles should include:

- measures to encourage service providers to collaborate in order to enable clients to receive a broader range of services
- ways of simplifying pathways of support
- ensuring victims and their children have access to a comprehensive range of services, regardless of where they live in Victoria
- allowing sufficient time for piloting, evaluation and adaptive management of new programs.
Investment

Recommendation 225

The Victorian Government require departments and agencies to introduce measures of contractual performance by service providers that more accurately reflect the objectives of ensuring victims’ safety, preventing family violence and supporting those affected by it, and keeping perpetrators accountable [within 12 months].

Recommendation 226

Victorian government departments and agencies establish processes for regular overview and evaluation of funded services and programs, based on the recommended principles adopted by the Victorian Secretaries Board. The processes should involve independent experts as well as departmental staff [within 12 months].

Funding options

In the Commission’s view, investing in family violence prevention and earlier intervention and improving services that respond to victims and perpetrators could well reduce demands on the state budget in the long term. At least in the short to medium term, however, some increase in funding will be required to support family violence prevention and the delivery of services for victims and perpetrators.

The pervasive and damaging effects of family violence require prevention and support to be assigned high priority. It is encouraging that this has been accepted by the Victorian Government.

It is for the Victorian Government to determine how finite resources should be allocated between areas of competing need. Arguably, it is beyond the Commission’s terms of reference to nominate specific sources of revenue or possible savings in other non-family violence related programs that could be used to fund family violence programs and services. Even if that is not the case, making such recommendations would require a detailed analysis of the viability of creating new sources of tax revenue and of the amounts that could be raised by doing so or by relying on existing revenue sources. The Commission is not in a position to undertake the tasks necessary to make such judgments.

Some new funding sources were proposed to the Commission as potential options for funding family violence services. One was to establish a Family Violence Tenancy Fund funded through the interest earned on tenants’ bond monies held by the Residential Tenancies Bond Authority to finance the economic costs of losses sustained as a result of family violence, such as the cost of property damage.144 Another, suggested by the Chief Commissioner of Victoria Police, Graham Ashton AM APM, was the opportunity to use proceeds of crime funds for some family violence initiatives, such as preventative and research work.145

In the Commission’s view it is likely that these sources alone would be insufficient to meet the urgent demand for additional funding required for investment in family violence prevention and support. Another option, which the Commission has not considered in detail, would be to identify new sources of revenue, including a broad-based tax or levy, to fund all or part of the family violence system. The community may well support tangible actions that recognise the urgent need to address the serious social problem of family violence, including the possibility of introducing a new revenue source. Any new revenue source would have to be sufficiently broad based to meet the funding demand, sustainable over time to give certainty to funders and service providers and structured to distribute its impact fairly across the community.
A partnership agreement with the Commonwealth

Another possibility is to seek funding through Commonwealth–state agreements. In recent years the Commonwealth and state and territory governments have reached multilateral and bilateral agreements for reform in circumstances where greater quality and efficiency can be achieved through partnerships in such areas as health, disability and education. The National Partnership Agreement on Homelessness is an example. As noted, however, Commonwealth involvement in that program is uncertain beyond June 2017.

Agreements of this kind are intended to deliver nationally significant reforms and are supported by the adoption of mutually agreed objectives, outcomes and performance measures. In the case of family violence, the following are some of the areas that could be covered by such agreements:

- rapid rehousing initiatives through rental subsidies for victims who have to leave their home because of family violence
- expansion of individualised funding to support recovery
- provision of increased support for people involved in family law disputes—for example, increased funding of child contact centres
- funding for magistrates’ courts to exercise their jurisdiction under the Family Law Act 1975 (Cth) (see Chapter 16)
- Centrelink changes that take account of the need for people leaving a violent relationship to receive support quickly
- establishment of systems for recording information relevant to both Commonwealth and state and territory bodies—for example, court orders
- co-location of specialist family violence or child protection workers in family courts and of Family Court registrars in some magistrates’ courts (see Chapter 24)
- sharing of data—for example, funding the Australian Institute of Health and Welfare to provide more detailed and informative data from the specialist homelessness data collection to assist in planning services for family violence victims and to assess the effectiveness of those services.

Agreements of this nature could enable cost sharing in some areas and also increase collaboration between relevant state and territory and federal bodies in areas where previously suggested reforms have not been implemented—for example, the interaction between family law courts and state courts. However, such agreements also have their risks. They should not detract from the need for the Victorian Government to increase investment to prevent and respond to family violence. It would also be important to ensure that the possibility of making such agreements does not delay the changes that should be made immediately and that such agreements last for a reasonable period.

The Commission considers that Victoria should explore opportunities to work with the Commonwealth Government to improve collaboration between systems.

**Recommendation 227**

The Victorian Government investigate options for increasing its capacity to invest in preventing and responding to family violence, including by:

- redirecting existing revenue sources towards family violence expenditure
- identifying new revenue sources
- exploring the possibility of entering into a partnership agreement with the Commonwealth Government in areas of overlapping responsibility.
Endnotes

1. Good Shepherd Australia New Zealand, Submission 836, 25.


The Commission notes that these estimates do not include the long-term effects on children.

5. Access Economics, above n 3, VI.

6. Ibid 3.
7. Ibid VI-VIII.
8. Ibid VI-VII.
9. Ibid.
10. At the request of the then federal Department of Families, Housing, Community Services and Indigenous Affairs (now the Department of Social Security); National Council to Reduce Violence Against Women (Cth), 'The Cost of Violence Against Women and their Children' (Department of Families, Housing, Community Services and Indigenous Affairs (Cth), March 2009) ('KPMG study').

11. Ibid 65.
13. Ibid.
16. Ibid 5.
17. Ibid 9.
18. Although the report refers to violence against women it also took account of the indirect effects of violence on children. It did not include direct abuse of children.
19. PricewaterhouseCoopers Australia, above n 15, 11.
21. Ibid 24. It looked at the effects of three programs: one, Stepping Stones, was a South African Study that has been evaluated. This was considered relevant because the South African experience was 'relatively the most applicable to Australia' (see Appendix 57); the other two were in Uganda and India.
22. PricewaterhouseCoopers Australia, above n 15, 13.
23. Ibid.
24. In the health context pain, suffering and mortality is typically measured using Disability Adjusted Life Years (DALY) which is a measure of overall disease burden expressed as the number of years lost due to ill-health, disability or early death.
25. PricewaterhouseCoopers Australia, above n 15, 12.
26. Ibid.
27. PwC did include a Victorian figure for costs avoided by individual or group participation programs.

Statement of Skilbeck, 12 October 2015, 4 [12], [15], 5 [20], [22].
31. Ibid 4 [15].
32. Ibid 4 [12].
33. Ibid 5 [16].
35. Ibid 253.
36. Ibid 260.
37. Ibid 347.
38. Ibid 113.
39. Statement of Skilbeck, 12 October 2015, 5 [18].
43. The three output measures are: Crimes against property – excluding family violence–related crime (rate per 100,000 population); and Crimes against property – family violence–related crime (rate per 100,000 population); and Women and the Prevention of Family Violence projects and programs which support the prevention of family violence and the social and economic participation of women are delivered on time (Women and Equality Policy and Programs Output). Refer to Statement of Victoria, above n 34, 271, 272 and 304.
44. Key health-related outputs include: Admitted Services, Non Admitted Services, Emergency Services, Ambulance Emergency Services, Ambulance Non Emergency Services, Community Health, Clinical Care (Mental Health) and Mental Health Community Support Services. Refer to ibid 225-228; 230-234.
45. State of Victoria, Submission 717, Appendix B.
46. Ibid Appendix B, 3.
The government submission noted that the $80.6 million does not include the following: Addressing Family Violence in Acute Health program ($0.25 million in 2014–15); lapsed programs funded by the Office for Women for which funding was allocated in 2013–14 but implementation delayed until 2014–15; Victoria Police, Legal Aid or Koori and CALD support agency funding; funding for Magistrates’ Court of Victoria’s Koori Family Support program which is funded internally by the Magistrates’ Court of Victoria and does not have specific funding; funding for Forensicare Problem Behaviour Program which provides treatment for people with problem behaviours associated with offending such as physical violence, sexual offending and stalking. Ibid Appendix B, 15.

The cost of these programs was not provided to the Commission.

Funding of $109.8 million for services and programs between 2014–15 and 2017–18, and $8.3 million for capital projects was allocated in Pre-Election Budget Update, November 2014. The Commission understands that some of this funding was replaced by the subsequent Government’s election commitments related to family violence, while other funding continued to be implemented as committed. State of Victoria, ‘2014 Pre-Election Budget Update’ (Department of Treasury and Finance, November 2014) 77, 88.

State of Victoria, above n 34, 5. This includes $36 million for the Commission.


This figure represents the additional funding allocated to specialist family services that were comparable to those included in the State Government’s submission which comprised the $80.6 million budget for 2014–15. Appendix K contains the full list of the funded initiatives and the attribution as specialist family violence services or other programs contributing to addressing family violence. To ensure consistency with the 2014–15 figures we have not added amounts for purposes not included in the $80.6 million figure.

See Table 41.4. The $9 million was not included in the aggregate figure since the purpose was to compare the funding for specialist family violence services in 2014–15 ($80.6 million) and the impact of additional funding provided for these services in 2015–16; the $80.6 million did not include broader programs that contributed towards addressing family violence, so inclusion would nullify the value of the comparison between years.

Excludes funding allocated for the Royal Commission into Family Violence and for the State Government’s engagement with the Commission.

Domestic Violence Victoria—02, Submission 943, 7.


State of Victoria, above n 34, 260.


State of Victoria, above n 60. 31.

Council of Australian Governments, above n 60, 3.

State of Victoria, above n 34, Appendix B, 4.

Commission’s Notice to Produce dated 14 August 2015 (as varied on 20 August 2015 and 20 October 2015).

Department of Premier and Cabinet, ‘Narrative for Cost to Government of Family Violence’, 1, produced by the State of Victoria in response to the Commission’s Notice to Produce dated 20 August 2015.

Department of Education and Training data based on Department of Education and Training, ‘Table 1: Apportionment of the cost of key services and programs to family violence’ (17 December 2015) 1–2; Department of Health and Human Services data based on Department of Health and Human Services, ‘Table 1: Apportionment of the cost of key services to family violence, Tranche 1, 2013–14’ (17 December 2015), 1, Department of Health and Human Services, ‘Table 2: Apportionment of the cost of key services to family violence, Tranche 1, 2014–15’ (17 December 2015), 1, Department of Health and Human Services, ‘Table 1: Apportionment of the cost of key services to family violence: Extended Information’ (18 November 2015); Department of Justice and Regulation data based on Department of Justice and Regulation, ‘Table 1: Apportionment of the cost of key services to family violence’ (Victims Assistance Program) (1 December 2015), 1, ‘Table 1. Apportionment of the cost of key services to family violence’ (Department of Justice and Regulation, ‘Family Violence Related Effort Summary Magistrates’ Court’), 1; Corrections Victoria data based on Department of Justice and Regulation, ‘Cost of Family Violence to the corrections system – indicative estimate’ (22 October 2015), 1–2; Office of Public Prosecution data based on Department of Justice and Regulation, ‘Office of the Public Prosecutions - costs of family violence’ (29 October 2015), 1; Victoria Police data based on Victoria Police, ‘Modelling of Victoria Police Global expenditure for Family Violence 2013-14 and 2014-15’ (1 December 2015) 1–4; Victoria Police, ‘Modelling of Costs’ (1 December 2015), 1, produced by the State of Victoria in response to the Commission’s Notice to Produce dated 14 August 2015 (as varied on 20 August 2015 and 20 October 2015).


Barwon Area Integrated Family Violence Committee, Submission 893, 25; Transcript of Smith, 15 October 2015, 3750 [21]–[26]; Safe Steps Family Violence Response Centre, Submission 942, i; Domestic Violence Victoria—02, Submission 943, 8. This submission proposed there should be a designated Commonwealth budget stream.

Australian Women Against Violence Alliance, Submission 838, 5.

See, eg, Transcript of Cumberland, 13 July 2015, 59 [8]–[15]; Domestic Violence Victoria—02, Submission 943, 7; Statement of Gillespie, 10 July 2015, 6 [29]–[31].

Safe Steps Family Violence Response Centre, Submission 942, 10.

Transcript of Rogers, 21 July 2015, 1050 [18]–[19]. An ‘episode of support’ also known as a ‘support period’ is the period of time during which a client receives assistance from a service. A support period starts on the day the client first receives a service and ends when the relationship with the service end, the client has reached the maximum amount of support that the service can offer, or the client has not received any services for a whole calendar month and there is no ongoing relationship: Australian Institute of Health and Welfare, Specialist Homelessness Services Collection manual (July 2013) 10 <www.aihw.gov.au/shsc-resources/>.

Safe Steps Family Violence Response Centre, Submission 942, 10.

Victorian Council of Social Service, Submission 467, 53.

Transcript of Gillespie, 21 July 2015, 967 [1]–[6].

Australian Women Against Violence Alliance, Submission 838, 20.

Domestic Violence Victoria—04, Submission 943, 10.

Domestic Violence Victoria—02, Submission 943, 7.

Good Shepherd Australia New Zealand, Submission 836, 44.

Deborah McCormick Consulting, Submission 496, 5.


Statement of Hagias, 7 July 2015, 9 [34].


Transcript of Peak, 16 October 2015, 3939 [1]–[3].

Transcript of Eccles, 16 October 2015, 3955 [2]–[24].

Ibid 3955 [18].

Ibid 3956 [5]–[8].

See State of Victoria, Submission 717, 10.

See, eg, ibid 39; Transcript of Gregory, 12 October 2015, 3226 [6]–[22], 3247 [1]–[8]; Barwon Area Integrated Family Violence Committee, Submission 893, 13, 20.


See, eg, Berry Street, Submission 834, 11; Barwon Area Integrated Family Violence Committee, Submission 893, 9, 15; Opportunity Knocks—EDVOS; Safe Futures Foundation; Safe Steps; WISHIN; Victorian Women’s Trust, Submission 898, 23; Women’s Health West Inc., Submission 239, 16–17, 18; Whitehorse Community Health Service, trading as Carrington Health, Submission 777, 2; WRISC Family Violence Support, Submission 260, 6–7.

State of Victoria, Submission 717, 42.

See, eg, Berry Street, Submission 834, 27–30; Opportunity Knocks—EDVOS; Safe Futures Foundation; Safe Steps; WISHIN; Victorian Women’s Trust, Submission 898, 23; Women’s Health West Inc., Submission 239, 16–17, 18, 19.

See, eg, Opportunity Knocks—EDVOS; Safe Futures Foundation; Safe Steps; WISHIN; Victorian Women’s Trust, Submission 898, 14, 15, 23; WISHIN, Submission 446, 5; Berry Street, Submission 834, 42; Transcript of Smith, 21 July 2015, 901 [6]–[18].

Transcript of Gillespie, 21 July 2015, 969 [27]–[29].


Transcript of Vlais, 24 July 2015, 1440 [1]–[23].

During that same period the number of Victoria Police Family Violence incidents increased from 35,666 (2009–10) to 65,154 (2013–14), an increase of 83 per cent: Crime Statistics Agency, ‘An Overview of Family Violence in Victoria: Findings from the Victorian Family Violence Database 2009-10 to 2013-14’ (January 2016), Victoria Police data source, Tab 1, Table 1: Family Incidents recorded and family incident rate per 100,000 population, July 2009 to June 2014, provided to the Commission by the Crime Statistics Agency, 30 September 2015..

State of Victoria, above n 34, 5.

State of Victoria, Submission 717, 10.


Department of Health and Human Services, above n 101, 1.


Ibid.


Domestic Violence Victoria—02, Submission 943, 32–38.

EACH Social and Community Health, Submission 569, 53.

Victoria Police, Submission 923, 30.

Loddon Campaspe Integrated Family Violence Services Consortium, Submission 914, 27.

Community consultation, Traralgon, 13 May 2015; Community consultation, Maryborough 1, 21 April 2015.

Transcript of Peak, 16 October 2015, 3952 [14]–[16].

Ibid 3853 [29]–3854 [8].

Domestic Violence Victoria—02, Submission 943, 7.

Transcript of Kirby, 13 August 2015, 2915 [12]–[22].

Transcript of Heatley, 15 October 2015, 3771 [21]–3772 [5].

See Appendix K.

Domestic Violence Victoria—02, Submission 943, 51.

State of Victoria, Submission 717, 28.

Domestic Violence Victoria—02, Submission 943, 52.

Domestic Violence Victoria—03, Submission 943, 7, 9; Grampians Integrated Family Violence Committee, Submission 399, 4.

Safe Steps Family Violence Response Centre, Submission 942, 11.

Department of Health and Human Services, DHHS Response to Request Items 2–9, 1, produced by the State of Victoria in response to the Commission’s Notice to Produce dated 15 October 2015.

Ibid.


Domestic Violence Victoria—02, Submission 943, 8.

Domestic Violence Victoria—02, Submission 943, 14; Domestic Violence Victoria—02, Submission 943, 8, 43–44.

Domestic Violence Victoria—02, Submission 943, 5.

Mallee Family Violence Executive, Submission 617, 20.

Anonymous, Submission 195, 1.

Young Men’s Christian Association of Victoria, Submission 196, 9.

MonashLink Community Health Services Ltd, Submission 121, 11.

Based on Victoria’s population being 24.9 per cent of Australia’s population at the end of the 2015 June quarter: see Australian Bureau of Statistics, ‘Australian Demographic Statistics, June 2015’ (Catalogue no. 3101.0, Australian Bureau of Statistics, December 2015). This was applied to PWC’s report estimate of $12.6 billion cost of violence against women in intimate relationships nationally: PricewaterhouseCoopers Australia, above n 15, 11. Using the same methodology, the cost of all violence against women in Victoria would be $5.4 billion. 

Cabinet Social Policy Committee, above n 91, 2 [7], Attachment 2.

Transcript of Peak, 16 October 2015, 3939 [1]–[3].

Transcript of Skilbeck, 16 October 2015, 3938 [23]–[29].

Ibid 3945 [20]–[26].
139 Ibid 3946 [14]–[18].
140 Department of Health and Human Services, above n 101, 1.
141 Department of Health and Human Services, ‘VHAP System Reform Project—Projecting the Demand for Services by People Experiencing Homelessness in Victoria—Final Report’, 13, produced by the State of Victoria in response to the Commission’s Notice to Produce dated 14 August 2015 (as varied on 20 August 2015 and 20 October 2015). In relation to this report, the Department of Health and Human Services notes that while regression analysis undertaken as part of the study demonstrated a link between the increase in reports of family violence incidents and experiences of homelessness, the methodology and base data did not allow forecasts of the number of people who will experience homelessness as a direct result of family violence.
142 Domestic Violence Victoria—02, Submission 943, 7.
143 Transcript of Peake, 16 October 2015, 3952 [17]–[23].
145 Transcript of Ashton, 16 October 2015, 3969 [16]–3970 [15].
**Appendix H Cost categories of PwC report**

The table below shows the annual cost to the Australian economy of violence against women, 2014–15, by cost category and stakeholders incurring the costs according to PwC.

<table>
<thead>
<tr>
<th>Cost category</th>
<th>Cost ($ million)</th>
<th>Description</th>
<th>Stakeholder(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pain, suffering and premature mortality</td>
<td>4,783.3</td>
<td>Lost quality of life.</td>
<td>Women, Children, Perpetrators</td>
</tr>
<tr>
<td></td>
<td>10,405.6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health costs</td>
<td>617.2</td>
<td>Costs to deliver health services to victims. Covers the costs associated</td>
<td>Women, Commonwealth Government, State and territory governments, Society/community, Private insurance providers, Perpetrators</td>
</tr>
<tr>
<td></td>
<td>1,355.6</td>
<td>with the extended health effects of violence, not just the treatment of the initial trauma—for example, costs associated with the treatment of depression and anxiety.</td>
<td></td>
</tr>
<tr>
<td>Production-related costs</td>
<td>926.1</td>
<td>Lost productivity through absenteeism, being late or attending court. Includes lost productivity from unpaid/voluntary work.</td>
<td>Women, Employers, Society/community, Perpetrators</td>
</tr>
<tr>
<td></td>
<td>2,031.9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consumption-related costs</td>
<td>4,316.9</td>
<td>In the immediate short-term, costs cover the damage to property and belongings but this also covers the lost economies of scale that victims of domestic violence would experience due to being less likely to be in further relationships in the future. In calculating costs for non-partner violence, it was assumed that this cost is not applicable.</td>
<td>Women, Children, Society/community, Perpetrators</td>
</tr>
<tr>
<td></td>
<td>4,316.9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Second-generation costs</td>
<td>883.9</td>
<td>For children who were in households experiencing violence but are not necessarily the target of violence themselves, there would be costs associated with their care or government intervention. It was also assumed that this cost will not be incurred by those experiencing violence by non-partners.</td>
<td>Women, State and territory governments</td>
</tr>
<tr>
<td></td>
<td>1,721.8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administrative and other costs</td>
<td>300.7</td>
<td>This category largely consists of the criminal justice costs for police, the courts, and incarceration of indicted perpetrators. Also includes the costs of other services such as interpreters, funerals and temporary accommodation.</td>
<td>Women, Friends/family, State and territory governments, Commonwealth Government, Society and community, Perpetrators</td>
</tr>
<tr>
<td></td>
<td>300.7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cost category</td>
<td>Partner violence</td>
<td>All violence against women</td>
<td>Description</td>
</tr>
<tr>
<td>-----------------------</td>
<td>------------------</td>
<td>----------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Transfer costs</td>
<td>811.9</td>
<td>1,515.6</td>
<td>Costs such as income support, victim compensation and lost taxes are not lost costs to society per se but are instead shifts in the economic powers of consumption from one part of society to another. Following violence against women this results in a loss of economic efficiency, which is known as a deadweight loss. It can also be thought of as the cost of the excess burden of taxation.</td>
</tr>
<tr>
<td>Total</td>
<td>12,595.0</td>
<td>21,648.0</td>
<td></td>
</tr>
</tbody>
</table>

Notes: To enable comparison, the cost categories are the same as those used in previous costings of violence against women, those being Access Economics’ *The Cost of Domestic Violence to the Australian Economy: Parts I and II* (2004) and KPMG’s *The Cost of Violence against Women and their Children* (2009).

The PwC report assumed that consumption costs and second-generation costs are not applicable to nonpartner violence, which is the same approach used in the KPMG report.

Source: PricewaterhouseCoopers Australia, ‘*A High Price to Pay: The Economic Case for Preventing Violence Against Women*’ (prepared for Our Watch and VicHealth, November 2015).
## Appendix I: The Victorian Government’s budget for specialist family violence services, 2014–15

<table>
<thead>
<tr>
<th>Government-funded program or service</th>
<th>2014–15 funding ($ million)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crisis response and post-crisis support</td>
<td>61.0</td>
</tr>
<tr>
<td>Crisis support and accommodation</td>
<td>13.4</td>
</tr>
<tr>
<td>Family Violence Regional Service Integration</td>
<td>2.0</td>
</tr>
<tr>
<td>Family violence support</td>
<td>5.8</td>
</tr>
<tr>
<td>High-risk family violence response</td>
<td>8.6</td>
</tr>
<tr>
<td>Homeless services support (peak organisations)</td>
<td>0.7</td>
</tr>
<tr>
<td>Indigenous Family Violence</td>
<td>3.3</td>
</tr>
<tr>
<td>National Partnership Agreement on Homelessness—family violence initiatives</td>
<td>7.5</td>
</tr>
<tr>
<td>National Partnership Agreement on Homelessness—family violence stage 2</td>
<td>2.2</td>
</tr>
<tr>
<td>Seniors Rights Victoria</td>
<td>0.6</td>
</tr>
<tr>
<td>Telephone information and referral</td>
<td>1.7</td>
</tr>
<tr>
<td>Transition support</td>
<td>15.1</td>
</tr>
<tr>
<td><strong>Early intervention response</strong></td>
<td>4.8</td>
</tr>
<tr>
<td>Addressing family violence and sexual assault in acute health</td>
<td>0.5</td>
</tr>
<tr>
<td>Adolescent family violence</td>
<td>0.6</td>
</tr>
<tr>
<td>Family Violence Risk Assessment and Risk Management Framework</td>
<td>0.8</td>
</tr>
<tr>
<td>Homelessness Innovation Action Project (Family Violence)—Families at Home</td>
<td>1.0</td>
</tr>
<tr>
<td>Strengthening Hospitals Responses to Family Violence Project—Our Watch</td>
<td>0.3</td>
</tr>
<tr>
<td>The Identifying and Responding to Family Violence project</td>
<td>0.9</td>
</tr>
<tr>
<td>Women’s Information and Referral Exchange</td>
<td>0.7</td>
</tr>
<tr>
<td><strong>Perpetrator accountability</strong></td>
<td>11.2</td>
</tr>
<tr>
<td>Expansion of specialist family violence response to all headquarter courts</td>
<td>2.1</td>
</tr>
<tr>
<td>Family Violence Counselling Orders Program—men’s behaviour change programs at Moorabbin and Frankston</td>
<td>0.8</td>
</tr>
<tr>
<td>Magistrates’ Court, Family Violence Court Intervention program—men’s behaviour change programs at Heidelberg and Ballarat</td>
<td>0.8</td>
</tr>
<tr>
<td>Magistrates’ Court, Family Violence Court Divisions</td>
<td>1.1</td>
</tr>
<tr>
<td>Magistrates’ Court, Specialist Family Violence Services</td>
<td>0.7</td>
</tr>
<tr>
<td>Men’s Family Violence—including men’s behaviour change programs, Men’s Referrals Service</td>
<td>5.6</td>
</tr>
<tr>
<td>No To Violence</td>
<td>0.1</td>
</tr>
<tr>
<td><strong>Prevention</strong></td>
<td>3.6</td>
</tr>
<tr>
<td>Community of Practice—reducing violence against women and their children</td>
<td>0.04</td>
</tr>
<tr>
<td>Elder Abuse Prevention Online—professional education training</td>
<td>0.1</td>
</tr>
<tr>
<td>Engaging local government in the prevention of violence against women</td>
<td>0.2</td>
</tr>
<tr>
<td>Prevention of Violence against Women and Children in CALD communities—Our Watch</td>
<td>0.6</td>
</tr>
<tr>
<td>Raising Awareness of Elder Abuse in CALD communities</td>
<td>0.2</td>
</tr>
<tr>
<td>Respectful Relationships Education in Schools—Our Watch</td>
<td>0.6</td>
</tr>
<tr>
<td>Reducing violence against women and their children grants</td>
<td>2.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>80.6</td>
</tr>
</tbody>
</table>

*These programs were shown as broader initiatives with a significant family violence component.*

*Note: Totals may not add due to rounding.*

*Source: Based on State of Victoria, Submission 717, Appendix B.*
Appendix J Funding in the Victorian Government 2015–16 Budget for family violence initiatives

The following table reflects the initiatives funded in the 2015–16 Budget for 2015–16 to 2018–19 and the amounts in each of those years as applicable. The key purpose of this table is to establish an update on the Victorian Government submission’s advice of what it allocated in 2014–15. As such, the Commission undertook the task of attributing each initiative to one of the following categories:

- Specialist family violence initiatives comparable to those in the Victorian Government submission’s budget estimate for 2014–15 (to ensure comparability with the 2014–15 figure)
- Initiatives that contribute towards responding to family violence
- Royal Commission into Family Violence.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Specialist family violence initiatives comparable to those in the Victorian Government submission’s budget estimate for 2014–15</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Boost to Domestic Violence Victoria</td>
<td>0.4</td>
<td>0.4</td>
<td>0.4</td>
<td>0.4</td>
</tr>
<tr>
<td>Crisis support and transport for women and children</td>
<td>2.5</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Counselling services for women and children</td>
<td>2.5</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Culturally and linguistically diverse family violence response</td>
<td>1</td>
<td>1</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Men’s behaviour change programs—Corrections Victoria</td>
<td>1</td>
<td>1</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Men’s behaviour change programs—Courts</td>
<td>0.5</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Men’s family violence services</td>
<td>1</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Personal safety</td>
<td>0.9</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Pet welfarea</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Prevention of violence against women and children</td>
<td>2</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Reducing Aboriginal family violence</td>
<td>1.3</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Responses for Aboriginal people</td>
<td>0.6</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Family violence access workersb</td>
<td>2.0</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Subtotal</td>
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Notes:
- = zero.
a. Funding is $25,000 each year but does not show due to rounding.
b. This initiative was funded from the Family Violence Fund.
c. Funding of $16 million was allocated in 2014–15 to the Royal Commission into Family Violence.
d. The Family Violence Fund, created to deal with urgent and unforeseen demand for services arising from the Royal Commission, was allocated $16 million in 2015–16 but $2 million was for family violence access workers, which is included in the list of specialist family violence initiatives.

Appendix K List of the activities and activity sub-elements for family violence service providers who receive funding

Table begins on next page.
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<tr>
<th>Activity</th>
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262 Appendix K List of the activities and activity sub-elements for family violence service providers who receive funding
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<th>Aboriginal and Torres Strait Islander–specific</th>
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<th>Information And Referral</th>
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### Aboriginal and Torres Strait Islander—specific Regional Coordination

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<td>Refuge re-establishment</td>
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#### Activity Element

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#### Gippsland Lakes Community Health
(Auspicing Yoowinna Wurranulong Healing and Time Out Service)

#### Gippsland Women’s Health Service

#### Good Shepherd Youth and Family Service

#### Gooloom-Gooloom Aboriginal Co-operative

#### Goulburn Valley Aboriginal Education Consultative Inc.

#### Goulburn Valley Health

#### Grampians Community Health

#### Gunditjmara Aboriginal Co-operative

#### Hanover Welfare Services

#### Haven

#### HomeGround Services

#### Inner South Community Health Service

#### InTouch

#### Junction Support Services

#### Kara House

#### Kildonan UnitingCare

#### Lake Tyers Health and Childrens Services Association Inc.

#### Latrobe Community Health Service
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### Appendix K

List of the activities and activity sub-elements for family violence service providers who receive funding

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<tr>
<th>Activity</th>
<th>Refuges</th>
<th>Outreach/ Specialist Family Violence Services</th>
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#### Activity Element

- **Lifeworks Relationship Counselling and Education Services**
- **Loddon Mallee Housing Services Limited**
- **Loddon-Campaspe CASA**
- **Mallee Family Care**
- **Mallee Sexual Assault Unit**
- **Mallee District Aboriginal Service**
- **McAuley Community Services for Women**
- **Mens’ Referral Service**
- **Migrant Information Centre (Eastern Melbourne) Ltd.**
- **Mildura Aboriginal Corporation**
- **Minerva Community Services**
- **Mitchum Community House Inc.**
- **Monash Health**
- **MonashLink Community Health Service Ltd.**
- **Mungabareena Aboriginal Cooperation**
- **Murray Valley Aboriginal Cooperative**
- **Nexus Primary Health**
- **Ngwala Willumbong Co-operative Ltd.**
- **Njernda Aboriginal Corporation**
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</table>

Appendix K List of the activities and activity sub-elements for family violence service providers who receive funding

Peninsula Health Community Health

Plenty Valley Community Health

Primary Care Connect

Quantum Support Services

Ramahyuck

Ranges Community Health

Relationships Australia (Victoria)

Rights Information and Advocacy Centre

Royal Women’s Hospital

Rumbalara Aboriginal Co-operative Ltd.

Rural Housing Network Limited

Safe Futures Foundation

Safe Steps Family Violence Response Centre (Statewide Service Response)

Salvation Army (Victoria) Property Trust - Barwon Region

Salvation Army (Victoria) Property Trust

Salvation Army (Victoria) Property Trust – Gippsland Region (Gippscare)

Salvation Army (Victoria) Property Trust – Western (Mary Anderson Family Violence Service)
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National Partnership Agreement on Homelessness—Family Violence Stage 2

High risk family violence response

National Partnership Agreement on Homelessness—Family Violence initiatives

Family violence support

Aboriginal legal assistance

Healing and Time Out

Men’s Resource Advocacy Service

Men’s groups program

Regional Action Groups

Community Initiative Fund

Men’s case management (Indigenous)

National Partnership Agreement on Homelessness—family violence initiatives

Family Violence Regional Service Integration

Regional Coordination

Information And Referral

Telephone Information and referral

Women’s Information and referral exchange

Men’s Programs

Aboriginal and Torres Strait Islander—specific

Information and Referral
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Based on: Department of Health and Human Services, ‘Attached Mapping of FV providers by funded activity DHHS comments’, Sheet 1, produced by the State of Victoria in response to the Commission’s Notice to Produce dated 21 September 2015.

* Funded through NPAH in 2014-15 but did not specify which element of NPAH

** From Bumbalara Aboriginal Co-operative Ltd.

^ The Male Centre
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<td>West Gippsland Healthcare Group</td>
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<td>Whitehorse Community Health Service Ltd.</td>
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<td>Winda-Mara Aboriginal Corporation Ltd.</td>
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<td>Women's Health Goulburn North-East</td>
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<td>Women's Health Loddon Mallee Inc.</td>
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<td>Royal Commission into Family Violence: Report and recommendations</td>
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### Glossary

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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<tr>
<td>Affected family member</td>
<td>A person who is to be protected by a family violence intervention order. This terminology is also used by Victoria Police to describe victims of family violence.</td>
</tr>
<tr>
<td>Affidavit</td>
<td>A written statement made under oath or affirmation.</td>
</tr>
<tr>
<td>Applicant</td>
<td>A person who applies for a family violence intervention order (or other court process). This can be the affected family member or a Victoria Police member acting on behalf of the affected family member.</td>
</tr>
<tr>
<td>Applicant support worker</td>
<td>A worker at some magistrates’ courts who advises and assists an applicant with court procedures (for example, applying for a family violence intervention order).</td>
</tr>
<tr>
<td>Bail</td>
<td>The release of a person from legal custody into the community on condition that they promise to re-appear later for a court hearing to answer the charges. The person may have to agree to certain conditions, such as reporting to the police or living at a particular place.</td>
</tr>
<tr>
<td>Breach</td>
<td>A failure to comply with a legal obligation, for example the conditions of a family violence safety notice or family violence intervention order. Breaching a notice or order is a criminal offence. In this report the terms ‘breach’ and ‘contravention’ are used interchangeably.</td>
</tr>
<tr>
<td>Brokerage</td>
<td>A pool of funds allocated to a service provider to purchase goods and/or services for its clients according to relevant guidelines. For example, brokerage funds could be used to pay for rental accommodation, health services and other community services.</td>
</tr>
<tr>
<td>Child</td>
<td>A person under the age of 18 years.</td>
</tr>
<tr>
<td>CISP</td>
<td>The Court Integrated Services Program is a case-management and referral service operating in certain magistrates’ courts for people who are on bail or summons and are accused of criminal offences.</td>
</tr>
<tr>
<td>Cold referral</td>
<td>A referral to a service where it is up to the client to make contact, rather than a third party. For example, where a phone number or address is provided to a victim.</td>
</tr>
<tr>
<td>Committal proceeding</td>
<td>A hearing in the Magistrates’ Court of Victoria, to determine if there is sufficient evidence for a person charged with a crime to be required to stand trial.</td>
</tr>
<tr>
<td>Contravention</td>
<td>A breach, as defined above. In this report, the terms ‘breach’ and ‘contravention’ are used interchangeably.</td>
</tr>
<tr>
<td>Crimonogenic</td>
<td>Producing or leading to crime or criminality.</td>
</tr>
<tr>
<td>Culturally and linguistically diverse</td>
<td>People from a range of different countries or ethnic and cultural groups. Includes people from non–English speaking backgrounds as well as those born outside Australia whose first language is English. In the context of this report, CALD includes migrants, refugees and humanitarian entrants, international students, unaccompanied minors, ‘trafficked’ women and tourists. Far from suggesting a homogenous group, it encompasses a wide range of experiences and needs.</td>
</tr>
<tr>
<td>Culturally safe</td>
<td>An approach to service delivery that is respectful of a person’s culture and beliefs, is free from discrimination and does not question their cultural identity. Cultural safety is often used in relation to Aboriginal and Torres Strait Islander peoples.</td>
</tr>
<tr>
<td>Directions hearing</td>
<td>A court hearing to resolve procedural matters before a substantive hearing.</td>
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<tr>
<td>Term</td>
<td>Definition</td>
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<tr>
<td>Duty lawyer</td>
<td>A lawyer who advises and assists people who do not have their own lawyer on the day of their court hearing and can represent them for free in court.</td>
</tr>
<tr>
<td>Ex parte hearing</td>
<td>A court hearing conducted in the absence of one of the parties.</td>
</tr>
<tr>
<td>Expert witness</td>
<td>A witness who is an expert or has special knowledge on a particular topic.</td>
</tr>
<tr>
<td>Family violence intervention order</td>
<td>An order made by either the Magistrates’ Court of Victoria or the Children’s Court of Victoria, to protect an affected family member from family violence.</td>
</tr>
<tr>
<td>Family violence safety notice</td>
<td>A notice issued by Victoria Police to protect a family member from violence. It is valid for a maximum of five working days. A notice constitutes an application by the relevant police officer for a family violence intervention order.</td>
</tr>
<tr>
<td>Federal Circuit Court</td>
<td>A lower level federal court (formerly known as the Federal Magistrates’ Court). The court’s jurisdiction includes family law and child support, administrative law, admiralty law, bankruptcy, copyright, human rights, industrial law, migration, privacy and trade practices. The court shares those jurisdictions with the Family Court of Australia and the Federal Court of Australia.</td>
</tr>
<tr>
<td>First mention</td>
<td>The first court hearing date on which a matter is listed before a court.</td>
</tr>
<tr>
<td>Genograms</td>
<td>A graphic representation of a family tree that includes information about the history of, and relationship between, different family members. It goes beyond a traditional family tree by allowing repetitive patterns to be analysed.</td>
</tr>
<tr>
<td>Headquarter court</td>
<td>In the Magistrates’ Court of Victoria, there is a headquarter court for each of its 12 regions at which most, if not all, of the court’s important functions are performed. All Magistrates’ Court headquarter courts have family violence intervention order lists.</td>
</tr>
<tr>
<td>Heteronormative/heteronormatism</td>
<td>The assumption or belief that heterosexuality is the only normal sexual orientation.</td>
</tr>
<tr>
<td>Indictable offence</td>
<td>A serious offence heard before a judge in a higher court. Some indictable offences may be triable summarily.</td>
</tr>
<tr>
<td>Informant</td>
<td>The Victoria Police officer who prepares the information in respect of a criminal charge. The informant may be called to give evidence in the court hearing about what they did, heard or saw.</td>
</tr>
<tr>
<td>Intake</td>
<td>A point of entry or ‘doorway’ into a service or set of services.</td>
</tr>
<tr>
<td>Interim order</td>
<td>A temporary order made pending a final order.</td>
</tr>
<tr>
<td>L17</td>
<td>The Victoria Police family violence risk assessment and risk management report. The L17 form records risks identified at family violence incidents and is completed when a report of family violence is made. It also forms the basis for referrals to specialist family violence services.</td>
</tr>
<tr>
<td>Lay witness</td>
<td>A witness who does not testify as an expert witness.</td>
</tr>
<tr>
<td>Mandatory sentence</td>
<td>A sentence set by legislation (for example, a minimum penalty) which does not permit the court to exercise its discretion to impose a different sentence.</td>
</tr>
<tr>
<td>Other party</td>
<td>A term used by Victoria Police to describe the person against whom an allegation of family violence has been made (the alleged perpetrator).</td>
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</tbody>
</table>
Prescribed organisation  
An organisation empowered to share information relevant to risk assessment and risk management under the Commission’s recommended information-sharing regime to be established under the *Family Violence Protection Act 2008* (Vic). Such organisations could include, for example, Support and Safety Hubs, specialist family violence services, drug and alcohol services, mental health services, courts, general practitioners and nurses. The proposed regime is discussed in Chapter 7.

Protected person  
A person who is protected by a family violence intervention order or a family violence safety notice.

Recidivist  
A repeat offender who continues to commit crimes despite previous findings of guilt and punishment. In this report this term is also used to describe perpetrators against whom more than one report of family violence has been made to Victoria Police, including where no criminal charge has been brought.

Registrar  
An administrative court official.

Respondent  
A person who responds to an application for a family violence intervention orders (or other court process). This includes a person against whom a family violence safety notice has been issued.

Respondent support worker  
A worker based at some magistrates’ courts who advises and assists respondents with court procedures, (for example, a family violence intervention order proceeding).

Risk assessment and risk management report  
A Victoria Police referral L17 form, completed for every family violence incident reported to police.

Risk Assessment and Management Panels  
Also known as RAMPs, these are multi-agency partnerships that manage high-risk cases where victims are at risk of serious injury or death. These are described in Chapter 6.

Summary offence  
A less serious offence than an indictable offence, which is usually heard by a magistrate.

Summons  
A document issued by a court requiring a person to attend a hearing at a particular time and place.

Triable summarily  
Specific indictable offences that can be prosecuted in the Magistrates’ Court of Victoria, subject to the consent of the accused and the magistrate.

Universal services  
A service provider to the entire community, such as health services in public hospitals or education in public schools.

Warm referral  
A referral to a service where the person making the referral facilitates the contact—for example, by introducing and making an appointment for the client.

Young person  
A person up to the age of 25 years.