

**The Benevolent Society submission to
Discussion paper on NSW Domestic and Family Violence
Strategic Framework**

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1. Introduction

This submission details The Benevolent Society's response to the Discussion Paper on a NSW Domestic and Family Violence Strategic Framework. It draws on our experience of delivering services to women and children affected by domestic and family violence, as well as our own research, and Australian and international literature.

The Benevolent Society is Australia's oldest charity. Since 1813, we have identified major social challenges and worked to meet them head on. A secular organisation, we aim to tackle social inequality by building caring and inclusive communities. We deliver leading edge programs and services, find innovative solutions to complex social challenges and call for a more just society. Our strength lies in our expertise across the lifespan, delivering services for women, children and families, older people, community based and respite care, community development and social leadership programs.

We have provided services directly to women and children affected by domestic and family violence for many years through such programs as Women's Health, Scarba Child Protection Services, Early Intervention and Brighter Futures. Our Centre for Women's Health in Campbelltown, NSW has provided a range of specialist services to women affected by domestic and family violence for the past 14 years. We have worked with thousands of women and are widely recognised for our expertise in providing high quality holistic services to women experiencing domestic violence, Aboriginal women and women in their mid to older years. The Centre for Women's Health is accredited through Quality Management Services and our services are based on best practice and are evidence-informed.

The Benevolent Society believes that when women are safe, confident and connected, the entire community is a healthier one. We work with women to expand their choices and we provide opportunities for women to connect with other women. We support women to create positive futures for themselves, their families and communities by: listening to what women say they need and working with them to explore options and make informed choices about their health; helping women gain the confidence, skills and resources they need to create fulfilling futures; and supporting women to build caring and inclusive communities.

We undertake extensive research and evaluation and have published resources in partnership with other community organisations. For example we released "Putting the Pieces back Together" in November 2008 which is a resource for women experiencing domestic and family violence. The Benevolent Society also has a formal partnership as well as informal links with the Education Centre Against Violence (ECAV) NSW Health.

Note on terminology: As the Discussion paper outlines, domestic and family violence are distinct terms and should not be used interchangeably. Domestic violence refers to intimate partner violence between adults. Family violence refers to violence in Indigenous communities where kinship systems can add a layer of complexity.

NSW Health¹ policy defines domestic violence as: '*violent, abusive or intimidating behaviour carried out by an adult against a partner or former partner to control and dominate that*

¹ NSW Health (2003), *Policy & Procedures for Identifying and Responding to Domestic Violence*, Canberra.

person. Domestic violence causes fear, physical and/or psychological harm. It is most often violent, abusive or intimidating behaviour by a man against a woman. Living with domestic violence has a profound effect upon children and young people and constitutes a form of child abuse.'

Women are the overwhelming majority of victims of domestic violence. In 2002-03 it was estimated that 87% of victims of domestic violence in Australia were women while 98% of perpetrators were male².

2. Key principles to guide the NSW Strategic Framework on Domestic and Family Violence

The NSW Strategic Framework on Domestic and Family Violence (the Framework) must be grounded in **human rights**, emphasising liberty, security, participation and access to services³. A human rights-based approach to preventing and responding to domestic and family violence means that:

- domestic and family violence is recognised as gender based violence that violates women's fundamental human rights;
- perpetrators of violence and abuse are held accountable and responsible for their use of violence against women and their children;
- women are not blamed for being victims of violence and are not responsible for stopping the violence and abuse perpetrated against them;
- domestic and family violence is recognised as a social issue rather than a private matter;
- and women are active partners in shaping the services which respond to them.

The Framework must acknowledge that domestic and family violence is a result of **gender inequality** in social and power relationships, and is rooted in structural inequity rather than individual pathology⁴. This gendered approach ensures that responses to domestic and family violence address structural inequality and community attitudes as well as service delivery for individuals. It also emphasises that domestic and family violence affects all women across the life span, from younger women, single women, women with children and older women, and cuts across all socio-economic and cultural groups.

The Framework must emphasise that **domestic and family violence is never acceptable and will not be tolerated**, and that perpetrators will be held accountable and responsible to end their use of violence and abuse against women and children. This will act to change community attitudes and challenge commonly held myths about the 'causes' of domestic and family violence, including stress, unemployment, drug and alcohol issues, mental health issues. It can also assist in increasing reporting, prosecutions and convictions for domestic and family violence if women feel confident that their reports will be taken seriously.

² Access Economics, *The Cost of Domestic Violence to the Australian Economy: Part 1*, 2004

³As recognised in international human rights law, International Covenants on Economic, Social and Cultural Rights; Civil and Political Rights; Convention on the Elimination of All forms of Discrimination Against Women

⁴Laing, L. 2001. *Working with women: Individual and group work approaches*, Australian Domestic and Family Violence Clearinghouse, Issues paper 4

The Framework should also embed a **holistic and multidimensional approach** to ensuring the safety of women experiencing or escaping domestic and family violence. Thus, the Framework needs to recognise the complexity, tactics and dynamics of domestic and family violence and its impact on every aspect of a woman's life and relationships. It is now well understood and documented⁵ that domestic and family violence has serious long term consequences for a woman's physical, mental and emotional health and this is compounded by insecure housing, poverty and social isolation. This has implications for government policy, service provision and practice. Firstly, government and non-government agencies must be well resourced to work more collaboratively to meet the needs of women and children seeking help to address domestic and family violence. Secondly, those working with women experiencing domestic and family violence must recognise the complexity, the multiple layers of impact and the longer term effects that domestic and family violence has on all aspects of a woman's life and relationships.

The Framework must recognise **children are also primary victims** of domestic and family violence. The ABS Social Trends survey found that 60% of women who experienced partner violence had children in their care, with 68% of those women reporting that their children witnessed the violence⁶. Domestic and family violence was an issue in almost half of all child deaths in NSW in 2006⁷. Domestic and family violence affects the ability of mother and child to form a secure attachment and disrupts the development of a positive and nurturing relationship between mother and child. Domestic and family violence impacts on children's physical and mental health, self-esteem and social competence⁸. The Framework must reflect this and be meaningfully integrated with the child protection framework.

Women's participation must be a guiding principle in the Framework. Their experiences, voices and needs must be central to the planning, delivery and evaluation of all services responding to domestic and family violence. This submission includes direct quotes from women who have been victims of domestic and family violence. Direct quotes are used with permission and come from The Benevolent Society's research conducted in 2008⁹.

Recommendations

2.1 The Framework should be based on the following principles:

- Women's fundamental human rights to safety and equality
- Perpetrators must be held accountable for their violence
- Domestic violence is never acceptable and will not be tolerated
- Redressing gender power relations and inequality
- An holistic approach to women and services
- Children are also primary victims of domestic violence.

⁵VicHealth 2004, *The Health Costs of Violence: Measuring the Burden of Disease Caused by Intimate Partner Violence*, A summary of findings, Victorian Health Promotion Foundation, Melbourne.

⁶Australian Bureau of Statistics. (1997) *Social Trends Survey: Women's Experience of Partner Violence*. ABS Catalogue No. 4102.0

⁷The Hon James Wood AO QC, *Report of the Special Commission of Inquiry into Child Protection Services in NSW*, 2008

⁸Evans, I. (2007). *Battle scars: Long-term effects of prior domestic violence*. Centre for Women's Studies and Gender Research, Monash University.

⁹The Benevolent Society, *Moving forward: Women's journeys after leaving an abusive relationship*, 2008 <http://www.bensoc.org.au/uploads/documents/moving-forward-mar2009.pdf>

3. Key areas needing improvement in the current service response to domestic and family violence

NSW Police Force

Domestic and family violence related assaults make up 30% of all assaults reported to police¹⁰ and 21% of all homicides¹¹. Domestic and family violence therefore is core business of the NSW Police Force. While there have been some good initiatives in recent years, the standard of police responses to domestic and family violence must improve.

There is anecdotal evidence that the recent pro-arrest policy in domestic and family violence situations has led to women who have called the police for help being arrested themselves. Australian statistics support international findings that victims of domestic and family violence are overwhelmingly female. In 2002-03 it was estimated that 87% of victims of domestic and family violence in Australia were women while 98% of perpetrators were male¹². This woman's experience illustrates weaknesses in the ability of police to respond appropriately:

I was taken away in a paddy wagon and I think that's when everything just happened. That's when I was not able to return, not able to go 100 metres near my house. So for five and a half months I lived everywhere with a bag on wheels... Wherever I went he came wherever I went. But he was the victim, I wasn't. So I'd probably last probably two weeks wherever I was and then I'd leave and I'd go somewhere else [but] he'd still come. And the verbal [abuse] and screaming and carrying on. So I'd have to leave there to give the people who I was staying with a bit of peace of mind... Then he'd follow and then people would say why don't you ring the police and I go 'get real'. There was no way I was going to ring the police... There was no support¹³.

All police should receive up to date training in domestic and family violence responses, including the skills to be able to identify the primary aggressor. Domestic Violence Liaison Officers (DVLOs) are essential but the responsibility of dealing effectively with domestic and family violence must be shared among all police. There should be DVLOs in every command and the position should be accorded greater seniority and support from the Police Force.

Legislative responses

The New South Wales Government's recent enactment of new domestic violence legislation and announcement of a domestic homicide review are both positive steps. However, the review should not occur as a once only project but needs to be repeated regularly. Further, consideration should be given to the formation of local domestic homicide reviews on the occasion of each homicide to enable local input into contributory factors and preventive strategies.

There is considerable concern around the impact of federal Family Law on the safety of women and children who have experienced domestic and family violence. For many women, the experience of domestic and family violence does not stop once they have left the violent

¹⁰ Pollard, R. *Shameful secret of our family murder epidemic*, Sydney Morning Herald, 28 November 2008

¹¹ Mouzos, J & Davies, M (2007), *Homicide in Australia : 2005-2006 National Homicide Monitoring Program (NHMP) annual report*, Australian Institute of Criminology, Canberra

¹² Access Economics, *The Cost of Domestic Violence to the Australian Economy: Part 1*, 2004

¹³ The Benevolent Society, 2008

relationship¹⁴. In 2005, 25% of women who had temporarily separated from a violent partner reported experiencing violence during the separation¹⁵. Many women experience ongoing abuse through shared responsibility for or contact with children. The new laws make some women feel pressured to engage in mediation with their violent ex-partner. This can mean they agree to arrangements under pressure and later fear that their own safety, and the safety of their children is compromised. Post-separation violence is common at handover time between visits¹⁶.

Women must be able to choose not to engage in mediation without being labelled 'non-compliant'. Women must be able to engage in safe and supportive legal processes which protect the rights and safety of themselves and their children, both during the hearing and in the months and years to come. Under New South Wales law, a child who lives in a house where domestic and family violence occurs can be the subject of a child protection report. However, federal Family Law only prevents contact between child and parent when the child has themselves been abused and this abuse has been substantiated by DoCS. This conflict between federal Family Law and state child protection laws is potentially dangerous for women and children:

I was terrified, absolutely terrified. He wanted the boys on the weekend and DoCS had said to me don't let him have them¹⁷.

The State Government should raise these legislative issues with the Federal Government and with the Council of Australian Governments.

New South Wales' recently weakened gun control laws also present a significant threat to the safety of women in this state and should be reviewed urgently. The ability of men who have previously been subject to AVOs to have the orders revoked so they can regain gun licenses presents an unacceptable risk to women.

Judicial responses

Many women speak of not being believed by legal representatives and experiencing dismissive or patronising attitudes from judicial officers presiding over court matters. As this woman put it:

I didn't want to do it again and I finally worked out why. Because I remember the judge, like he had glasses on him and he leaned over [and] he said "oh, he's broken your jaw". He said "they're very serious allegations there missy", like he didn't believe me... So that was the process [that] scared me off¹⁸.

¹⁴Evans, I. (2007). *Battle scars: Long-term effects of prior domestic violence*. Centre for Women's Studies and Gender Research, Monash University.

¹⁵ Australian Bureau of Statistics, 2007

¹⁶Bagshaw, D., Chung, D., Couch, M., Lilburn, S., & Wadham, B. (2000). *Reshaping responses to domestic violence: Final report*. University of South Australia

¹⁷ The Benevolent Society, 2008

¹⁸ The Benevolent Society, 2008

There is a need for greater training and specialisation of magistrates dealing with domestic and family violence matters in courts. This includes magistrates presiding over AVO hearings, as well as criminal charges.

Housing

The housing options available to women and their children who have left domestic and family violence are limited. Refuges provide essential crisis accommodation but are not suitable for all women (for instance, women with boys over 12 and older women) and are stretched to capacity. Secure, adequate and affordable housing for women and children leaving domestic and family violence is imperative for their immediate safety needs and crucial for their longer term recovery in overcoming the effects of domestic and family violence. Wherever women go, they need to feel safe:

Because one of the things in moving is that I think you need to alert neighbours that you're not in a very safe position. I moved to a street that was just flat and I could see both ends of the street and there was a street light every second house¹⁹.

For many women, the experience of leaving the family home and everything in it is an emotional as well as financial burden.

When I moved in here I had no photos of my children. I felt like I had no children because I had no baby photos...[My friends] couldn't understand that I didn't want furniture...but I wanted...my cards I got when I was 21, things the kids had done in kindergarten, things that you can't replace²⁰.

Initiatives like Staying Home, Leaving Violence are potentially helpful. However, their success relies on the cooperation and commitment of all services involved, especially police. A complication in women being able to remain safely in the family home is the issue of where perpetrators will live, indicative of a larger problem with the availability of crisis housing and affordable housing.

Lack of long-term therapeutic services

There is also a lack of knowledge, services and resources for women coping with the long term effects of domestic and family violence as they rebuild their life. Women report feeling forgotten once the crisis stage of actual separation is over and are clear about their need for continuing support²¹. Some women continue to suffer the trauma of their experiences many years after their separation from the violence. For others it may mean that they return to the violent relationship because of the lack of resources and appropriate support²². In NSW follow-up resources specialising in support for women who have left violent relationships are rare, particularly when those women have not accessed a refuge.

¹⁹ The Benevolent Society, 2008

²⁰ The Benevolent Society, 2008

²¹Victorian Government Department of Human Services. (2004) *Women's journey away from family violence: Framework and summary*. Community Care Division, Victorian Government Department of Human Services: Melbourne, Victoria.

²²McInnes, E. (2001). *Single mothers, social policy and gendered violence*. Paper presented to 'Seeking Solutions' Domestic Violence and Sexual Assault Conference

Women who have left domestic and family violence need easier and more affordable access to long-term counselling and other therapeutic interventions. Our research shows that for services to be readily accessible for women who have left domestic and family violence, they need to be free, anonymous and flexible in the hours of their availability ²³.

Recommendations

- 3.1** Establishment of the Domestic Homicide Review Teams
- 3.2** Quality training for police in domestic violence responses, especially in identifying the primary aggressor
- 3.3** Domestic Violence Liaison Officers to be assigned to every command; accorded more seniority and support
- 3.4** NSW Government to communicate with Federal Government regarding amendments to Family Law Act and availability of appropriate services through the Family Relationship Services Program to better protect the safety of women and children
- 3.5** NSW Government to repeal 2008 amendments which weakened gun laws
- 3.6** Local courts to employ specialist domestic violence magistrates
- 3.7** Framework to mandate integration and collaboration between mainstream and targeted services to protect women, whether or not they remain in the family home
- 3.8** NSW Government to work with Federal Government and non-profit service providers to ensure that women have access to free, anonymous and flexible services, and long-term therapeutic counselling.

4. Effective elements of the current service response which could be built upon or expanded

Domestic and family violence screening

Screening of women for domestic and family violence in NSW Health services has been a valuable strategy which has enabled a greater proportion of women experiencing abuse to be identified and assisted in relation to their abuse. General Practitioners should be encouraged to adopt routine screening for domestic and family violence, for example during annual health checks with female patients. Further, the mandatory training on screening provided to mental health and substance abuse workers should be extended in length, with two yearly updates required, to ensure that the responses of these service providers are appropriate when women disclose abuse. There is a need to establish specialist counselling/ social work positions within hospitals to ensure that women who are identified as abuse victims by screening services or in emergency departments receive prompt responses. Where such services are offered within the hospital setting, victim safety, rapid responses and high uptake of referrals can be established.

Service coordination and cooperation

As addressed in section 2, women experiencing domestic and family violence need to be provided with a holistic service response. Service coordination and cooperation should be mandated and supported in the Framework. All mainstream services such as health and

²³The Benevolent Society's own research has reinforced the need for free, anonymous and flexible services for women who have experienced domestic violence. The Benevolent Society, *Moving forward: Women's journeys after leaving an abusive relationship*, 2008

public housing, and specialist services such as those responding to child protection concerns need to be trained to identify domestic and family violence and to refer women to appropriate services accordingly. Similarly, domestic and family violence services must work concurrently to address other issues women are experiencing such as mental health problems or drug and alcohol abuse.

Domestic and family violence and child protection responses overlap and intersect at many points. When services can address both issues or work in partnership with complementary services, the needs of women and children are better met. However, differences in legislative frameworks, theoretical foundations and funding arrangements can mean that harmonisation between domestic and family violence and child protection services does not happen. Many workers in domestic and family violence services express concern that men who perpetrate domestic and family violence can be “invisible” in child protection services, with the mother, who is a victim of domestic and family violence herself, becoming the focus of the child protection intervention. There is a concern that women are further victimised by services which fail to recognise and identify the behaviours, tactics and dynamics of domestic and family violence and how these translate to child protection concerns.

Domestic and family violence seriously impacts on a woman’s capacity to parent effectively when struggling to protect herself and her children. It needs to be recognised that a child’s safety is often directly linked to the safety of the abused parent. Fundamental to this Framework must be a commitment by statutory agencies to ensure that the safety of women and their children experiencing domestic and family violence is paramount, and that women are not held responsible for stopping the violence perpetrated against them and their children.

Greater collaboration between services can be led by a Framework which promotes an integrated service model and the structures to support this such as networks of practice and shared training between domestic and family violence and child protection workers. The *Keep Them Safe* action plan for child protection lays the foundations for a more integrated approach to service delivery and the Domestic and Family Violence Framework must be connected with this plan.

One of The Benevolent Society’s Brighter Futures services in a regional area has reported the benefits for women of effective and productive cooperation between different services in the area. The manager cites good case management as being central to clear communication and effective referral pathways. Through cooperation with DoCS, NSW Health, the local school, family support services and the women’s refuge, women and children exposed to domestic and family violence access counselling, health services and assistance with mental health and substance abuse issues.

Client-centred services

Client-centred services are non-judgemental and respectful. They also approach women holistically and attend to different aspects of their lives and interests.

There is continuing evidence of some professionals in mainstream services responding to women who disclose domestic and family violence with judgement or disbelief. For instance, this woman spoke about the reaction she received from a doctor:

Believe people when they're telling you that, you know, I just told you that he wouldn't buy tampons, I used to have to use toilet paper. Believe me because that's true. Believe people when they tell you things. He didn't, the doctor that I saw, I don't think he took me seriously...[the abusive partner] gets away with everything. They have spent years getting away with things. That's their focus on life is to get away with it and they will get away with it²⁴.

On the other hand, services with properly trained professionals can make all the difference for women:

[The most useful things were] the knowledge and understanding, the constant discussions. Sometimes you need to talk, you do need the reassurance... [the domestic violence worker] was the first [person] that told me about the cycle of domestic violence. About the signs, what he's done to you. And when you sit in conversation and when they talk you think, 'oh my God, did they know my husband'? So basically the knowledge then of what is happening, helped a little bit²⁵.

All those who come into contact with women who have experienced domestic and family violence must be adequately trained to greet women without judgement, with respect and to make appropriate referrals.

Client-centred services also take a holistic approach to women, working with them in the context of their physical, social and emotional needs, and respecting their individual and unique experiences. The Benevolent Society's Centre for Women's Health provides a range of specialist services, from crisis to longer term counselling, complementary therapies, groups and advocacy. The Centre's approach is successful because women choose which services they need to access, and when they need support. They can attend just for a massage, or gain support with anxiety, and develop trust and self-confidence over time.

Building social networks

Building and maintaining a social support network is particularly challenging for women who have experienced domestic and family violence. Most women find that their social network declines significantly as a result of domestic and family violence, due to embarrassment, fear of seeking help, and deliberate isolation tactics used by the perpetrator of violence²⁶. This is compounded by leaving the family home which often entails moving away from the local community and nearby friends.

An evaluation of The Domestic Violence Intervention Project in the UK found that of the range of support offered to women, support groups were the most effective in reducing self-

²⁴ The Benevolent Society, 2008

²⁵ The Benevolent Society, 2008

²⁶ Evans, 2007

blame and shame and increased self-esteem²⁷. The Benevolent Society's Centre for Women's Health actively builds women's social networks as a key strategy in developing their self-confidence, their social support and their capacity to survive and leave a violent relationship.

Domestic and family violence services for children

Children are primary victims of domestic and family violence. The Discussion Paper outlines the detrimental impact witnessing or experiencing violence can have on children so there is a clear need for therapeutic services for children. These services can assist children to heal after trauma, and have the potential to stop intergenerational cycles of violence.

Services for women which also provide child care make the service more accessible for women. They can also perform an important role in assisting children's own healing, and intervening early if early childhood workers pick up any issues in children's social, emotional and cognitive development.

The Benevolent Society offers a service whereby women and their children engage in shared counselling to recover from the trauma of domestic and family violence. Our staff find this process effective in helping women listen to their children, understand the impact of violence on their children, and to repair damage done to their relationship while they were subjected to domestic or family violence. Strengths-based, practical resources for parents of children who have experienced domestic and family violence are lacking and would be welcomed by workers.

Recommendations

4.1 General Practitioners should be encouraged to adopt routine screening for domestic and family violence at annual health checks with female patients

4.2 More comprehensive and regular training on screening should be provided to mental health and substance abuse workers

4.3 Hospitals should establish specialist domestic and family violence counselling / social work positions

4.4 Any integrated service model must complement the child protection framework outlined in *Keep Them Safe*

4.5 Domestic and family violence workers and child protection workers to undertake shared training and professional development

4.6 Strategy of building women's social networks should be incorporated into service models for women's long-term recovery

4.7 Services for children affected by domestic and family violence to be funded, including therapeutic services, children's groups while women are receiving services and resources for parents to use with children

²⁷Joseph Rowntree Foundation. (1998). *Lessons from the Domestic Violence Intervention Project*. Joseph Rowntree Foundation

5. Responses to certain groups of women

Domestic and family violence can happen to women from all backgrounds. While their life circumstances may differ, the intent of the perpetrator and tactics of control are shared. At the same time, there are some groups of women who, due to other circumstances in their life may find domestic and family violence services less accessible. It is the role of government policy and programs to adapt and provide effective services to all women.

The Victorian Government Department of Human Services²⁸ found that women from culturally and linguistically diverse backgrounds and Indigenous women, amongst others, face specific obstacles that intensify the difficulty of their journey. The report suggests that these obstacles include prejudice, ill-informed and inappropriate responses, and ignorance of the context of women's lives.

Aboriginal women

Evidence from community consultations²⁹ suggests that tackling family violence in Aboriginal communities requires community-driven programs including both men and women; partnerships between community and government agencies; and holistic approaches to tackling community violence. Criminal justice responses need to be culturally appropriate and rehabilitation of offenders must be a priority. Importantly, there are many existing community initiatives to tackle family violence like night patrols and identity programs which should be supported and funded. A regional approach to coordination could ensure that these initiatives remain community-driven and responsive while still receiving adequate high-level support and resources.

Culturally and linguistically diverse (CALD) women

Women from culturally and linguistically diverse backgrounds, especially those who have come to Australia as migrants and refugees, can face additional barriers to accessing domestic and family violence services and receiving community support. The quotes from women below reflect the isolation from family networks overseas as well as the lack of local support.

I mean other women, I felt jealous about them, they have families here and they have friends.... Only three people know where I live, but no-one else³⁰.

I didn't know anything. I didn't know even how to catch the train.... I was scared to go outside. I had fear for everything. I had no idea how the country is organised. I had no idea about [anything]³¹.

When I divorced, I lost touch with everything because I was not – he was the one who contacted everybody and write to everybody. I was not allowed to contact anybody. I lost contact with everybody³².

²⁸ Victorian Government Department of Human Services, 2004

²⁹ Aboriginal and Torres Strait Islander Social Justice Commissioner, *Social Justice Report*, Human Rights and Equal Opportunity Commission, 2006

³⁰ The Benevolent Society, 2008

³¹ The Benevolent Society, 2008

³² The Benevolent Society, 2008

In an Australian study³³, women from CALD backgrounds reported a lack of confidence that mainstream services would understand or be responsive to their situation. Their fears of an unhelpful response and being placed in danger in their own community also led to CALD women not using crisis services. Phoenix Projects³⁴ found that CALD women were concerned that mainstream services would encourage them to leave their relationship.

Culturally competent services can and do overcome some of these barriers and the Framework should prioritise equitable access for all women. This can be assisted by adequate funding for trained interpreters, services which are non-judgemental, and effective soft entry points to domestic and family violence services through mainstream services.

Women from rural and remote communities

A 2006 report showed that domestic and family violence rates were highest in very remote Australia, followed by remote and outer regional localities³⁵. Women experiencing domestic and family violence who live in rural regions face different and additional challenges compared with those in urban areas. There is a lack of anonymity and privacy, with many women reluctant to bring shame or embarrassment on their family³⁶. Fewer support services are available, and a lack of transport increases women's sense of isolation³⁷.

Support with transportation is crucial for women in rural and remote areas so they can access services that do exist in surrounding towns³⁸. Reliable phone and internet counselling services can also be helpful. However, women need to know about these services in order to use them, so initiatives which make information more accessible to women in a non-stigmatising way are essential. For instance, one initiative involved training hairdressers and beauticians in country towns to respond appropriately to women disclosing domestic violence and pass on information about support services.

Older women

Domestic violence involving intimate partners does not cease in older age. Moreover, the prevalence and incidence of violence against older women can be expected to increase in future in line with the ageing of the population. However, as noted in the Discussion Paper, at present older women are less likely to report violence, for a range of reasons, and are low users of support services. Programs and services with a primary focus on women who have experienced domestic violence have developed separately from those with a primary focus on aged care or elder abuse. As a result, services have tended not to be accessible by or appropriate for the needs of older women who have experienced domestic violence.

³³ Keys Young, 1988a, as cited in Bonar, M., & Roberts, D. (2006). *A review of literature relating to family and domestic violence in culturally and linguistically diverse communities in Australia*. WA Department of Community Development

³⁴ Phoenix Projects. (2000). *Attitudes to Domestic and Family Violence in the Diverse Australian Community: Cultural Perspectives*. Partnerships Against Domestic Violence, Canberra, Australian Capital Territory

³⁵ Parliamentary Library, *Domestic Violence in Australia: An Overview of the Issues*, 2007

³⁶ Bagshaw et al., 2000

³⁷ Bagshaw et al., 2000

³⁸ Wuest, J., & Merritt-Gray, M. (1999). Not going back: Sustaining the separation in the process of leaving abusive relationships. *Violence Against Women*, 5, 110-133

As recommended by the Older Women's Network NSW³⁹, policy makers and service providers need to be sensitive to the complex and difficult choices faced by older women. Service responses must be flexible, sensitive and designed for the needs of older women. They must provide a range of support options, enabling older women to improve their safety and quality of life if they remain in their home, or access to safe and affordable housing alternatives. General practitioners have a particularly important potential role in identifying women who have experienced domestic violence and in offering referrals to sources of support. It is vital that GPs are properly equipped to play this role.

A collaborative service system response needs to be developed across all the key agencies in the areas of health, legal, aged and community care services, financial services, housing and family violence. The introduction of the *NSW Interagency Protocol for Responding to Abuse of Older People* (NSW Department of Ageing, Disability and Home Care 2007) has been a positive step and should be built upon. The Benevolent Society would support the development a specific strategy to address violence against older women.

Material deprivation

The Australian component of the International Violence Against Women Survey found that women's experience of violence did not vary by educational attainment, labour force status or household income⁴⁰. As noted in the Discussion Paper, women who leave domestic and family violence are often faced with poverty, housing instability and sometimes homelessness. This woman discussed the stress that financial hardships created:

It was really tight. When I say it's really tight, for three years I haven't bought a coffee outside... When I moved [to my new place], if it wasn't for [my refuge] to give me a voucher for food, I wouldn't be able to have electricity because I had to put a bond, a hundred and something dollars, which I didn't have at that time to get my electricity connected... You don't have a job, you don't have a life, you don't have money. You struggle with the daily expenses... I've been working all my life. All my life I've had my own money, and suddenly you can't work, you don't have money, and you have to look after your child – and you're mental⁴¹.

The Benevolent Society delivers services in disadvantaged communities. As a result, the women and families we work with are often experiencing material deprivation, housing stress and other issues related to social exclusion. Poverty has an impact on children's outcomes such as poor health, lower cognitive test scores and behavioural difficulties. The impact of domestic and family violence combined with these stresses on women and children clearly needs to be addressed.

Crisis services are essential. So are initiatives which make it safe for women to stay in the family home, causing less disruption to work, children's schooling, supportive informal networks and reducing financial strain. In the longer term, programs developing financial

³⁹Older Women's Network NSW (2008) *The disappearing age: a strategy to address violence against older women*, report submitted to the Office for Women in December 2008

⁴⁰Mouzos, J. & Makkai, T., *Women's Experiences of Male Violence: Findings from the Australian Component of the International Violence Against Women Survey (IVAWS)*, 2004

⁴¹The Benevolent Society, 2008

literacy (such as Saver Plus and Money Minded programs) and work skills can help women develop confidence and increased capacity to support themselves and their children.

Recommendations

5.1 Family violence in Aboriginal communities should be addressed through community-driven programs including both men and women; partnerships between community and government agencies; holistic approaches to tackling community violence; culturally appropriate criminal justice and rehabilitation of offenders; a regional approach to coordination.

5.2 Culturally appropriate services for CALD women to be accessible through soft-entry points; provide interpreters; non-judgemental service

5.3 Services in regional and rural areas need to be funded to provide transport, telephone and internet assistance and innovative approaches to providing information to women about services

5.4 Women experiencing material deprivation should have access to financial literacy and skills development programs

5.5 The development a specific strategy to address violence against older women.

6. Effective primary prevention

Addressing gender inequality

Any response to domestic and family violence must prioritise preventing violence happening in the first place. The first step in preventing violence against women is to eliminate the structural barriers which continue to reinforce gender inequality, including unequal pay, the lack of a national paid parental leave scheme, and the shortage of affordable, quality childcare. While these are federal issues, the Framework should acknowledge gender inequity in New South Wales and state a commitment to working with the Federal Government to break down these barriers.

Community awareness

We know that many women do not report domestic and family violence or access services due to fear, shame and lack of community support. All levels of our community must unite to condemn violence against women and raise future generations knowing that violence is not tolerated. This process is aided by government support for national and international awareness raising days, advertising campaigns and education programs in schools. These sorts of community awareness raising processes educate and enable all individuals and communities to play a part in preventing domestic and family violence happening in the first place. They also assist in creating a safe, understanding space for victims of domestic and family violence to disclose their experience and move forward with community support, thereby preventing violence recurring.

This woman felt that she would not be believed by other people:

I never told anyone about that you know... because I didn't feel there was support out there. Would someone believe me? Would they say "well you burnt his meal, it's your

fault?" You know what I mean? All those things go through your mind when you're in a situation like that⁴².

Community awareness campaigns can be more explicit in spelling out the impacts of domestic and family violence on women and children. Advertising campaigns which only focus on physical abuse do not communicate the relentless fear, control and isolation experienced by women, or the devastating effect violence and witnessing violence can have on infants' and children's brain development and behaviour.

Initiatives like White Ribbon Day which give an opportunity for non-violent men to speak out are very important. These events offer a platform for media attention as well as local engagement such as under-14s football team wearing white ribbons on the field.

Education needs to start early, with discussion in schools about communication skills, dispute resolution and safe relationships. Initiatives like Love Bites should be included in school curricula as part of personal development, health and physical education classes. The anecdotal evidence of increasing violence in young people's relationships is concerning so these kinds of programs can be an important tool in intervening early.

Responding to perpetrators

Services for perpetrators of domestic and family violence have been a controversial area. However, working with men who have been violent can be preventative if it means that they do not move on to a new partner and have more children who are then impacted by his violence. However, current approaches to working with perpetrators which focus only on anger-management are unlikely to break the cycle of violence. If violent men are assisted to face their past actions and their consequences and deal with the reasons for this violence, this may prevent future domestic and family violence. However, any services for perpetrators must be funded in addition to, and not at the expense of, services for women.

The way communities respond to perpetrators can shape how young people view domestic and family violence. Community initiatives like stopping violent men from playing football and shaming circles send out a clear message that domestic and family violence is not tolerated, potentially preventing violence being committed by men and accepted by women.

Recommendations

6.1 The NSW Government to work with the Commonwealth Government and COAG on reducing structural gender inequality through addressing pay parity, paid parental leave and affordable child care

6.2 Community awareness raising campaigns to highlight non-physical aspects of domestic and family violence, children's experiences, role of non-violent men in community education

6.3 Department of Education and Training to incorporate age appropriate education about respectful relationships in school curricula

6.4 Consider therapeutic services for perpetrators

⁴² The Benevolent Society, 2008

7. Improved data collection

Recommendation

7.1 The Benevolent Society recommends promoting the use of existing data including the annual NSW Health Routine Screening for Domestic Violence snapshot report.

8. Priorities for a domestic and family violence research agenda

The Benevolent Society supports evidence-based practice and would welcome investment in research which assists governments and non-profit organisations to better prevent and respond to domestic and family violence.

Our practice experience and own research have revealed the following gaps in our knowledge which could be filled by further research. This research could explore:

- what women want and need to recover from the long-term impacts of domestic and family violence after leaving the violent relationship
- how domestic and family violence services could better respond to the needs of women from culturally and linguistically diverse backgrounds
- what works in terms of translating research into practice in domestic and family violence service and mainstream services which work with women affected by domestic and family violence
- world's best practice in terms of raising community awareness about domestic and family violence and community prevention strategies
- world's best practice in working with men to prevent and respond to violent behaviour
- prevailing judicial attitudes to domestic and family and family violence victims as expressed across different hearings including ADVO hearings, local court hearings, district and appeal courts through a content analysis of their decisions and directions
- best practice interventions in assisting children to recover from living in households with domestic and family violence.

The Benevolent Society, in partnership with ECAV and the Attorney General's department, is currently seeking funding for a research project *Strong Aboriginal Women, Strong Communities: Building community capacity to reduce violence against women and children* which aims to:

- produce new knowledge and participative/ inclusive models for reducing family and domestic violence, sexual assault and child abuse in NSW Aboriginal communities;
- develop a repertoire of measurement tools to assess the impacts of community capacity building in Aboriginal communities in urban, rural and remote areas of NSW;
- identify strategies that increase Aboriginal women's access to the justice system.

9. Recommendations summary

2.1	The Framework should be based on the following principles: -Women's fundamental human rights to safety and equality -Perpetrators must be held accountable for their violence -Domestic violence is never acceptable and will not be tolerated -Redressing gender power relations and inequality -An holistic approach to women and services -Children are also primary victims of domestic violence.
3.1	Establishment of the Domestic Homicide Review Teams
3.2	Quality training for police in domestic violence responses, especially in identifying the primary aggressor
3.3	Domestic Violence Liaison Officers to be assigned to every command; accorded more seniority and support
3.4	NSW Government to communicate with Federal Government regarding amendments to Family Law Act and availability of appropriate services through the Family Relationship Services Program to better protect the safety of women and children
3.5	NSW Government to repeal 2008 amendments which weakened gun laws
3.6	Local courts to employ specialist domestic violence magistrates
3.7	Framework to mandate integration and collaboration between mainstream and targeted services to protect women, whether or not they remain in the family home
3.8	NSW Government to work with Federal Government and non-profit service providers to ensure that women have access to free, anonymous and flexible services, outreach services and long-term therapeutic counselling
4.1	General Practitioners should be encouraged to adopt routine screening for domestic and family violence at annual health checks with female patients
4.2	More comprehensive and regular training on screening provided to GPs, mental health and substance abuse workers
4.3	Hospitals to establish specialist domestic and family violence counselling / social work positions
4.4	Any integrated service model must complement the child protection framework outlined in <i>Keep Them Safe</i>
4.5	Domestic and family violence workers and child protection workers to undertake shared training and professional development
4.6	Strategy of building women's social networks should be incorporated into service models for women's long-term recovery
4.7	Services for children affected by domestic and family violence to be funded, including therapeutic services, children's groups while women are receiving services and resources for parents to use with children
5.1	Family violence in Aboriginal communities should be addressed through community-driven programs including both men and women; partnerships between community and government agencies; holistic approaches to tackling community violence; culturally appropriate criminal justice and rehabilitation of offenders; a regional approach to coordination.

5.2	Culturally appropriate services for CALD women to be accessible through soft-entry points; provide interpreters; non-judgemental service
5.3	Services in regional and rural areas need to be funded to provide transport, telephone and internet assistance and innovative approaches to providing information to women about services
5.4	Women experiencing material deprivation should have access to financial literacy and skills development programs
5.5	The development a specific strategy to address violence against older women.
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6.3	Department of Education and Training to incorporate age appropriate education about respectful relationships in school curricula
6.4	Consider therapeutic services for perpetrators
7.1	The Benevolent Society recommends promoting the use of existing data including the annual NSW Health Routine Screening for Domestic Violence snapshot report.