

A woman with dark, curly hair is shown from the chest up, wearing a light grey V-neck t-shirt and a thin necklace with a small pendant. She is looking off to the side with a thoughtful expression. The background is a blurred brick building.

# Blueprint for the domestic and family violence response in NSW

Response to public  
consultation paper

# It Stops Here: Blueprint

## Mission Australia Response to Public Consultation Paper

Mission Australia is an experienced provider of Domestic and Family Violence (DFV) services. We work across the whole DFV spectrum and provide early intervention and prevention, crisis accommodation and specialist services as well as sector advocacy. Mission Australia places clients at the centre of our integrated service responses to provide support to individuals, families and at a community level. Through these supports, we address the immediate impacts of violence including the impact of trauma, its underlying issues and causes and also treat the longer-term impacts of DFV.

To support people experiencing DFV, Mission Australia uses a strengths-based approach that recognises the resilience of individuals and families and focuses on their potential, strengths, interests, abilities, knowledge and capacity. We encourage people to access support before problems escalate to increase their strengths and offset future difficulties. We do this through both targeted support and services that act as soft entry platforms.

Reducing DFV requires a combination of universal, targeted early intervention, education and intensive responses. Responses to DFV should facilitate the involvement of the community and promote shared responsibility for preventing and addressing violence.

Responses to DFV should be informed by evidence and build on learning. It is critical that coordination and leadership continues at both the national and state levels of government. Ensuring programs are evaluated and evidence is translated into practice, and that practice informs research; will be important to improving and preventing DFV.

We would like to note that DFV affects men as well as women and includes violence within same sex relationships and sibling, elder or parental violence. Nevertheless, victims are overwhelmingly female and services are structured to reflect this. In this submission, we generally refer to victims/survivors as women and perpetrators as men, but we recognise the diversity of DFV experiences and our comments generally apply to all circumstances.

## Key Recommendations

We are supportive of the sector priorities identified through the SHS forum facilitated by Homelessness NSW and Domestic Violence NSW as follows:

### Funding

1. **Adequate long term funding for specialist DFV services**, including women's refuges, and specialist responses within mainstream services. Resource allocation must be transparent in its distribution and allocation and linked to outcome measures based on best practice prioritising the safety and recovery of survivors of DFV. This will require a significant investment from both Federal and NSW Governments in order to meet current and future demand for DFV services.

### Service Model

2. A **service model** in each district that includes adequate 24/7 services responses, early intervention and prevention programs and a range of flexible options for clients so that services can genuinely be client-centred in case management approaches (e.g. each district would have a range of safe accommodation and support options for women and children escaping DFV such as specialist women's refuges, as well as Staying Home Leaving Violence programs, specialist legal support and strong trauma informed case management services). The service model would include specialised support such as specialist DFV child workers, specialist disability workers and Aboriginal family violence and culturally and linguistically diverse responses. Allocation of services, models and programs should be designed according to needs determined by local specialists, communities and agencies and based on evidence of best practice responses.

### Coordination

3. **An integrated and coordinated service system** whereby justice, education, family and community services and health systems communicate clearly and work collaboratively to respond to DFV. Common policies, safety and risk assessments and procedures around domestic and family violence should to be adopted nationally in order to address this issue.

### Workforce

4. **A qualified, specialised, well-resourced, valued workforce**. The DFV service system needs to include accredited quality service standards and highly skilled, well trained DFV workers. All services need to receive ongoing training on domestic and family violence, the impacts of trauma and to work from an intersectional, gendered analysis model of practice.

### Affordable Housing

5. **A range of safe and affordable housing options**. Domestic and family violence cannot be adequately addressed without appropriate housing – more crisis, transitional and long term affordable housing is required for survivors of violence, families and perpetrators.

## Other recommendations

In addition we would add the following recommendations:

- Improving gender equality is essential, including boosting women's economic security;
- Public discussions and media coverage around issues of DFV need to continue;
- Respectful relationships education and emotional regulation skills training should be delivered through all NSW schools;
- Early intervention and individual case management for clients can make a real difference. Further investment in programs such as Brighter Futures, Youth Hope and other family early intervention programs is needed;
- Trauma counselling for children is also important, even where children may not have directly experienced DFV but have witnessed it in the home;
- Targeted early intervention is required for over-represented groups including women with a disability and Aboriginal and Torres Strait Islander women;
- A range of supports is necessary to respond to the immediate needs of victims of violence, including access to rapid re-housing, access to counselling, trauma counselling and crisis payments from Centrelink;
- A range of interventions are required to reduce homelessness including those which allow women and children to stay in their homes and perpetrators to be removed, as well as rapid rehousing programs and crisis accommodation. Start Safely and Staying Home Leaving Violence are good examples of such programs;
- To improve the referral process, more information is needed about the services in each location, services need to have capacity to respond and the administrative burden needs to be reduced;
- Adequate funding should be provided for specialist DFV workers within services;
- Community based men's behaviour change programs need to be funded to meet growing demand, evaluated to build a strong evidence base for effective practice and integrated with services for women and children;
- More training for Magistrates is required so that DFV matters are dealt with in an appropriate manner. There is also room to consider specialist DFV courts based on evidence from the Gold Coast;
- Efforts should be made to overcome barriers to programs and services for people experiencing DFV including broadening the requirements for evidence required;
- Other community members need to play a role in combatting DFV including businesses, banks, real estate agents and medical personnel.

## Part One – Questions for Everyone

### Prevention

It is imperative that more is done to prevent DFV. A continued effort to educate and promote the discussion of DFV by the Government, community, education system and other organisations is critical.

### Reducing stigma and promoting discussion of DFV

There is still a lot that happens behind closed doors that women do not tell their friends or family about and ultimately do not press police charges. Further, many do not know of the services that are available. We need to continue to talk about this issue, make women aware of their options and help them to understand that no one deserves to put up with violent and abusive behaviour. There is still an enormous stigma associated with DFV, with many women feeling ashamed that it is happening to them and reluctant to seek help.

There was substantial focus on DFV in 2015 with Rosie Batty engaging the community as Australian of the Year, strong media coverage, government responses at the national and state levels and tireless campaigning by many not-for-profit groups. This momentum needs to be sustained into the future to keep DFV on the agenda and ensure lasting changes.

Communications will need to be tailored to different audiences with messages for younger and older people, men and women, witnesses and bystanders, those experiencing domestic and family violence and the various professionals involved. It should also be delivered through a variety of approaches to have the broadest reach including respectful relationship programs in schools, engagement with sporting teams, in conjunction with Aboriginal and Torres Strait Islander people, working with culturally and linguistically diverse communities, in rural and regional areas, and with health and justice sector professionals as well as the community services sector.

‘Change the story: A shared framework for the primary prevention of violence’ produced by Our Watch provides a strong foundation for messages that prevent domestic and family violence. Various actions are set out to promote and normalise gender equality in public and private life including: challenging the condoning of violence against women; promoting women’s independence and decision-making; challenging gender stereotypes and roles; and strengthening positive, equal and respectful relationships.<sup>1</sup>

### Addressing gender inequality and entrenched gender norms

Domestic and family violence is underpinned by gender inequality as well as entrenched gender roles and this needs to be recognised as a social problem.<sup>2</sup> Research and evidence show that the key drivers of violence against women are low support for gender equality and adherence to rigid gender roles and stereotypes.<sup>3</sup>

Studies have shown that the unequal position of women within particular relationships, and the normative use of violence in a conflict were the necessary factors for violence against women. These factors are enhanced by societal norms about gender roles and male superiority. Other factors, such as alcohol, race and women’s poverty are interconnected. A VicHealth study also found that

---

<sup>1</sup> Our Watch (2015) *Let’s change the story: A shared framework for the primary prevention of violence against women and their children in Australia*, accessed at: [http://www.ourwatch.org.au/What-We-Do-\(1\)/National-Primary-Prevention-Framework](http://www.ourwatch.org.au/What-We-Do-(1)/National-Primary-Prevention-Framework)

<sup>2</sup> Murray and Theobald (2014) ‘Domestic and family violence’ In Chamberlain, Johnson and Robinson ed *Homelessness in Australia: An Introduction*, UNSW Press, Sydney.

<sup>3</sup> Our Watch (2015) *Understanding violence*, accessed at <http://www.ourwatch.org.au/Understanding-Violence/FAQs-about-the-issue>

“attitudes to violence against women are inextricably grounded in and intertwined with attitudes towards women, gender and sexuality.”<sup>4</sup>

Financial dependence can contribute to women deciding to stay in violent relationships. The pay gap between women and men of 24.7%<sup>5</sup> and the predominance of women having primary responsibility for child care, increases the risk of financial dependence on their partner. Financial abuse is often an aspect of DFV, in which the partner restricts access to money as a means of control. This has an emotional and psychological impact on women, and can undermine their sense of worth and self-efficacy, as well as restricting their accommodation options.

Lifting women’s economic security is important to ending DFV. Financial dependence can contribute to women deciding to stay in violent relationships. Financial abuse is often an aspect of DFV, in which the partner restricts access to money as a means of control. This has an emotional and psychological impact on women, and can undermine their sense of worth and self-efficacy. On top of leaving their home, women feel unable to provide for themselves and are thus trapped in their relationship, and this can be used as a means of control even after leaving. Neglecting child payments or repeatedly dragging the woman back through costly court cases, are all cases of financial DFV.

As long as the pay gap between women and men remains significant, and while women have primary responsibility for caring for children, there is a risk of financial dependence on their partner. Financial security, or some level of financial dependence, is identified as a key factor in women’s decision to stay in violent relationships. Concerns around ability to support and care for children exacerbate this pressure on victims to stay with an abusive partner. While it may appear beyond the scope of a DFV strategy, ongoing efforts to improve financial security and opportunities for women are needed if some of the underlying causes of DFV are to be addressed.

It is important to recognise that a woman experiencing DFV is by definition disadvantaged, even though they may be from a socio-economically advantaged background. DFV knows no social, cultural or economic barriers and if a partner controls the finances a higher income woman can be just as likely to find she is homeless as one from a lower socioeconomic background. Wealthy abusive partners have even more financial ability – and often familiarity with the legal system – to continuously bring nuisance litigation.

One of the pillars of economic security is education. Many women have spent much of their working life in a relationship, often eschewing further education and employment opportunities to serve as their children’s primary caregiver or because of their partner’s preference. This is especially the case for women from CALD backgrounds, who may additionally have a language or cultural barrier to accessing these opportunities.

Older women leaving abusive relationships are particularly vulnerable to poverty and homelessness. In many cases they will have endured an abusive partner for years, leaving only when children have grown up and left home or an unexpected life event forces them into crisis.<sup>6</sup>

---

<sup>4</sup> Wall L (June 2014) Gender equality and violence against women: what is the connection? ACCSA, accessed at <http://www3.aifs.gov.au/acssa/pubs/researchsummary/ressum7/ressum7.pdf>

<sup>5</sup> Full-time total remuneration: WGEA (2014). *Australia’s gender equality scorecard: Key results from the Workplace Gender Equality Agency’s 2013-14 reporting data, November 2014*. Available at: [https://www.wgea.gov.au/sites/default/files/2013-14\\_summary\\_report\\_website.pdf](https://www.wgea.gov.au/sites/default/files/2013-14_summary_report_website.pdf).

<sup>6</sup> McFerran, L. (2010). *It could be you: female, single, older and homeless*, Sydney: Homelessness NSW & Older Women’s Network NSW Inc. Available at: <http://www.adfvc.unsw.edu.au/PDF%20files/It%20could%20be%20you%20Final.pdf>.

## Education programs

The NSW curriculum needs to include age appropriate lessons on healthy and respectful relationships throughout the school years. Nationally, the 'Love Bites' and 'Respectful Relationships' programs in schools have been found to improve attitudes of both boys and girls towards domestic violence.<sup>7</sup>

Young women are twice as likely to experience physical or sexual violence as older women<sup>8</sup> and there is a need for education at an early age around domestic violence and gender equality as well as addressing community attitudes around gender and violence. The Youth Action and White Ribbon survey of young people's attitudes in 2014 concerningly found that less than half of young people got information about domestic violence at school and that young men were more likely than young women to agree with statements supporting gender stereotypes and attitudes supporting violence.<sup>9</sup>

For adults, information should be widely available in doctor's offices, childcare centres, and other places women are likely to visit.<sup>10</sup> Ensuring education programs address cultural contexts and environments will be important to addressing issues of violence in a range of communities and geographies.

## Early Intervention

The objective should be to intervene early with vulnerable families, prior to DFV occurring. This requires services that assist families at risk of DFV to have a secure home and manage relationships. Organisations and individuals who provide client support and advocacy can make a real difference at the prevention and early intervention end of the spectrum. This would be significantly advanced by expanding the coverage of existing programs and strategies that have been shown to work to improve relationships and identify risks of violence, such as Brighter Futures.<sup>11</sup>

Mission Australia has found that families often refrain from using services or wait until their situation becomes dire before they make any request for support. Programs and education that improve the identification of risk factors are necessary to prevent this 'lag' from happening. This includes providing education and counselling to men in high risk circumstances, for example where there is drug and alcohol abuse, a history of violence and other risk factors. We know that if we intervene and provide support to women and children early, we can help reduce the risk of violence and its flow on effects, including homelessness.

---

<sup>7</sup> Flood, M. G. & Kendrick, V. (2012). *LOVEBiTES: An evaluation of the LOVEBiTES and Respectful Relationships programs in a Sydney school*, Wollongong: University of Wollongong. Available at: <http://ro.uow.edu.au/cgi/viewcontent.cgi?article=2969&context=artspapers>.

<sup>8</sup> Allison, S & McGaurr, L. 'Violence against young women in Australia: Snapshot', Face the Facts, n.d., accessed via <http://acys.info/resources/face-facts/violence-against-youngwomen/violence-against-young-women-snapshot/>

<sup>9</sup> Youth Action and White ribbon Australia (2015) *Young people's Attitudes to domestic, family and teen dating violence*, accessed at: <http://youthaction.org.au/dv-attitudes-2015>

<sup>10</sup> Cameron, P. (2014). *Relationship Problems and Money: Women talk about financial abuse*, West Melbourne: WIRE Women's Information, p. viii. Available at: <http://www.wire.org.au/wp-content/uploads/2014/08/WIRE-Research-Report-Relationship-Problems-and-Money-Women-talk-about-financial-abuse-August2014.pdf>.

<sup>11</sup> Hilferty, F., Mullan, K., Van Gool, K., Chan, S., Eastman, C., Reeve, R., Heese, K., Haas, M., Newton, B.J., Griffiths, M. and Katz, I. (2010). *The Evaluation of Brighter Futures, NSW Community Services' Early Intervention Program: Final Report*. Social Policy Research Centre, University of New South Wales. Available at: [http://www.community.nsw.gov.au/docswr/\\_assets/main/documents/brighter\\_futures\\_evaluation4.pdf](http://www.community.nsw.gov.au/docswr/_assets/main/documents/brighter_futures_evaluation4.pdf).

### Targeted Early Intervention

Particular groups of women are at greater risk of experiencing DFV including Aboriginal and Torres Strait Islander women and women with disability. Aboriginal and Torres Strait Islander women are 35 times more likely to be hospitalised due to family violence than non-Indigenous women.<sup>12</sup> Early intervention programs should be tailored to the needs of these groups to reduce the increased levels of risk in socially and culturally appropriate ways.

## Supporting the safety and recovery of victims

### Crisis support

Through our experience delivering DFV services we have found that a range of supports are necessary to respond to the immediate needs of victims of violence, including assistance to prevent homelessness as discussed below.

Access to counselling is also needed, often before the point that victims leave a violent situation. Counselling is necessary to build self-confidence, and helps women to realise that the way they are being treated is wrong.

Trauma counselling for children is also important. One in 12 people have experienced physical abuse by a family member as a child; one in every 28 people had also experienced sexual abuse by a family member as a child.<sup>13</sup> Additionally, children's 'witnessing' or exposure to domestic violence has been increasingly recognised as a form of child abuse, both in Australia and internationally. Although it is difficult to accurately assess the scope of the problem, research has demonstrated that a substantial amount of domestic violence is witnessed by children.<sup>14</sup> Even in cases where those who have personally experienced violence think their children have been sheltered from the violence, being in an environment where violence exists can have a profound effect on them.

When a victim of violence tries to leave a violent partner, immediate, practical help is required. Crisis payments available from Centrelink are necessary, but are often inadequate to meet immediate needs. Schemes to provide bond payments and the first few weeks of rent in advance are examples of practical help. It is also necessary for workplaces to offer domestic violence leave, as Mission Australia does for its own workers.

### Preventing Homelessness

DFV continues to be a major driver of homelessness.<sup>15</sup> It was the main reason for seeking assistance for nearly one quarter of specialist homelessness services (SHS) clients in 2013-14.<sup>16</sup> The number of people seeking help from SHS for DFV has increased including a rise in the number of children

---

<sup>12</sup> Murray and Theobald (2014) 'Domestic and family violence' In Chamberlain, Johnson and Robinson ed *Homelessness in Australia: An Introduction*, UNSW Press, Sydney.

<sup>13</sup> Australian Human Rights Commission (2015) *Children's Rights Report 2015*, accessed at

<https://www.humanrights.gov.au/our-work/childrens-rights/publications/childrens-rights-report-2015>

<sup>14</sup> Richards, K. (2011) Children's exposure to domestic violence in Australia

<sup>15</sup> Australian Government (2008) *The Road Home: A national approach to reducing homelessness*, the white paper.

<sup>16</sup> AIHW (2014) *Specialist homelessness services 2013–14*. Cat. no. HOU 276. Canberra: AIHW

affected.<sup>17</sup> DFV clients also received more days of support on average than other SHS clients and the complexity of these cases requires longer support periods.<sup>18</sup>

Mission Australia considers a range of interventions and programs as critical to preventing homelessness in cases of DFV. Some programs are being implemented to remove violent men from the home, enabling women and any children to prevent homelessness and stay safely where they are connected to social networks, community support and schooling. This includes Safe at Home in Tasmania and Victoria and 'Staying Home Leaving Violence' in New South Wales. Research on these programs by AHURI recommended continuation and expansion and we strongly support such expanded support.

Importantly, the AIHW recently found that it is possible to make significant inroads into homelessness for women experiencing DFV through prevention or early intervention approaches. The research states that homelessness can be prevented in nearly 9 out of 10 cases of domestic violence:

*"The majority of clients who were housed on presentation did not become homeless with the support of homelessness services. This was the highest for those with mental health issues (92% retaining housing) and for women experiencing domestic violence (87%)."*<sup>19</sup>

The AIHW results suggest that women whose housing was sustained – either by removing violent partners so they can stay in the family home or through rapid rehousing – received half the length of support than if they became homeless. The average length of support for women who were homeless and were provided support to gain housing was 54 days – more than twice the 24 support days for women who maintained housing.<sup>20</sup>

This finding highlights the need for early intervention and supports to prevent women and families from entering homelessness. This is not only critical to an effective response but it is also a more cost-effective approach to preventing homelessness, and supporting individuals and families experiencing or at risk of violence.

However, such programs are not appropriate in all circumstances and resources are still needed for those women who need to leave home to be safe including crisis accommodation, rapid-rehousing and longer term affordable housing.<sup>21</sup>

Further investment is required to ensure that no woman and/or child is turned away from supported accommodation in any area across the state.

Of those women forced to leave their homes, those with less income and resources are more likely to require homelessness services.

Recognising the housing needs of people experiencing and at risk of DFV should be an integral part of responses to DFV more generally. Homelessness and housing service providers need to be part of

---

<sup>17</sup> AIHW (2014) *Specialist homelessness services 2013–14*. Cat. no. HOU 276. Canberra: AIHW.

<sup>18</sup> AIHW (2015) *Domestic and family violence and homelessness 2011-12 to 2013-14*, accessed at <http://www.aihw.gov.au/homelessness/domestic-violence-and-homelessness>

<sup>19</sup> AIHW (2014). *Housing outcomes for groups vulnerable to homelessness: 1 July 2011 to 31 December 2013*, p. 12. Available at: <http://www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=60129548949>.

<sup>20</sup> AIHW (2014). *Housing outcomes for groups vulnerable to homelessness: 1 July 2011 to 31 December 2013*, p. 12. Available at: <http://www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=60129548949>.

<sup>21</sup> Murray and Theobald (2014) 'Domestic and family violence' In Chamberlain, Johnson and Robinson ed *Homelessness in Australia: An Introduction*, UNSW Press, Sydney.

discussions to address DFV, especially because they are often the first place to which people escaping DFV will turn.

The lack of long term affordable housing is a significant impediment to assisting women and children experiencing domestic and family violence. Housing affordability issues were a contributing reason for seeking SHS assistance for 1 in 5 young women presenting alone, 1 in 5 Indigenous women and almost 3 in 10 men experiencing domestic and family violence.<sup>22</sup> Further, over 90% of requests by domestic and family violence clients for long term accommodation were unable to be met by SHS services.<sup>23</sup>

SHS clients who were couch surfing or rough sleeping at the start of support were less likely to be housed in private rental or social housing at the end of the support period, reflecting the greater difficulty in moving from the least stable housing situations to stable housing.<sup>24</sup> This points to the need for assistance in retaining tenancies and the frequent need for a period of ongoing support when clients leave SHS.

### Males and housing

While 9 in 10 adult clients seeking SHS assistance for domestic and family violence were female, males experiencing DFV displayed a different profile. Of such men, 3 in 10 identified personal mental health issues as a reason for seeking assistance and 1 in 5 identified their own problematic drug and/or alcohol use as a reason, which is significantly higher than for females.<sup>25</sup> Adult male domestic and family violence clients were the most likely to be sleeping rough on presentation.<sup>26</sup>

Homelessness also increases the risk of DFV perpetrators reoffending. Offenders without a home are less likely to engage with support services, more likely to be isolated, may be permitted to return to the home by the victim or be more difficult to track down by the police.

Providing housing for men who use violence enables them to engage with services to address their issues and reduce the risk of future offending. This includes both crisis and longer term affordable housing options. More accommodation options for men also reduces the burden on women to leave the family home when violence occurs. Obviously, this is in addition to the necessary housing supports required for women and children fleeing domestic and family violence where necessary.

### Housing needs

Mission Australia is concerned at the inadequacy of options for individuals and families on low and moderate incomes experiencing or at risk of DFV and facing homelessness, due to: inadequate availability of social housing; the lack of affordable private rental that is accessible to such people; and the insufficient support services to assist them with finding and maintaining a tenancy.

---

<sup>22</sup> AIHW (2015) *Domestic and family violence and homelessness 2011-12 to 2013-14*, accessed at <http://www.aihw.gov.au/homelessness/domestic-violence-and-homelessness>

<sup>23</sup> AIHW (2015) *Domestic and family violence and homelessness 2011-12 to 2013-14*, accessed at <http://www.aihw.gov.au/homelessness/domestic-violence-and-homelessness>

<sup>24</sup> AIHW (2015) *Domestic and family violence and homelessness 2011-12 to 2013-14*, accessed at <http://www.aihw.gov.au/homelessness/domestic-violence-and-homelessness>

<sup>25</sup> AIHW (2015) *Domestic and family violence and homelessness 2011-12 to 2013-14*, accessed at <http://www.aihw.gov.au/homelessness/domestic-violence-and-homelessness>

<sup>26</sup> AIHW (2015) *Domestic and family violence and homelessness 2011-12 to 2013-14*, accessed at <http://www.aihw.gov.au/homelessness/domestic-violence-and-homelessness>

Social housing is increasingly difficult to secure, with some 60,000 households on the social housing waiting list in NSW.<sup>27</sup> Mission Australia has welcomed the NSW Government's \$1 billion Social and Affordable Housing Fund and its Strategy, which will transfer more public housing to community housing, attract private investment in new supply and facilitate more tenant-cantered services. However, the failure of social housing to meet demand and tenants' needs is a national problem. Mission Australia looks to the Commonwealth Government to take leadership and building on local examples of best practice to develop nation-wide approaches.

The severe lack of private rental properties in most areas of NSW also affects people experiencing or at risk of DFV on low and moderate incomes. Australia has a shortfall of over 500,000 rental dwellings which are both affordable and available to the lowest income households.<sup>28</sup>

Addressing the shortages of social and affordable housing requires a coordinated approach across all governments which covers the full continuum of housing policy including tax, welfare and planning settings. In its *Homelessness Policy*, Mission Australia has called on:

- all governments to commit to a net year-on-year increase in social and affordable housing in each state and territory, a common target of 200,000 net new social homes by 2025, and a capital works programs to update existing social housing infrastructure;
- all Australian Governments through COAG to use the tax reform process and the Reform of Federation process to stimulate supply of supportive, social and affordable housing;
- the Commonwealth Government to implement mechanisms to facilitate and kick start investment by other partners – including institutional investors, the not-for-profit sector and the community;
- State and Territory Governments to introduce inclusionary zoning for supportive, social and affordable housing in key development sites.

### Coordinated support

Many of the women we work alongside are not only experiencing domestic violence but could be dealing with the associated issues of mental illness (including anxiety and depression) and substance misuse. Support is needed to deal with these comorbid issues, as well as secure housing.

Ensuring services that address complex and chronic needs are coordinated is important to an effective response to victims of DFV. Mission Australia uses an integrated service model, removing barriers between traditional service silos, both within our own operations and through partnerships with other service providers and agencies.

---

<sup>27</sup> NSW Government (2016), *Future Directions for Social Housing in NSW*, accessed at [http://www.socialhousing.nsw.gov.au/\\_data/assets/pdf\\_file/0007/348442/Future-Directions-for-Social-Housing-in-NSW-2016.pdf](http://www.socialhousing.nsw.gov.au/_data/assets/pdf_file/0007/348442/Future-Directions-for-Social-Housing-in-NSW-2016.pdf)

<sup>28</sup> 2011 data, from Hulse, K., Reynolds, M. and Yates, J. (2014) *Changes in the supply of affordable housing in the private rental sector for lower income households, 2006–11*, AHURI Final Report No.235. Melbourne: Australian Housing and Urban Research Institute. [http://www.ahuri.edu.au/downloads/publications/EvRevReports/AHURI\\_Final\\_Report\\_No235\\_Changes\\_in\\_the\\_supply\\_of\\_affordable\\_housing\\_in\\_the\\_private\\_rental\\_sector\\_for\\_lower\\_income\\_households\\_2006\\_11.pdf](http://www.ahuri.edu.au/downloads/publications/EvRevReports/AHURI_Final_Report_No235_Changes_in_the_supply_of_affordable_housing_in_the_private_rental_sector_for_lower_income_households_2006_11.pdf)

Building on this model, we support mechanisms to further promote collaboration between organisations involved in assisting women experiencing DFV. More coordinated service delivery between specialised workers and services that women experiencing domestic and family violence need to access such as counsellors, lawyers, financial counsellors, doctors, child support workers etc. would be beneficial. Better coordination between government departments including law enforcement, courts, community services, health, Centrelink and housing is also required to ensure a holistic response.

This coordinated support is paramount. Given the complex issues that can be involved in relationships where DFV exist, designing and delivering programs and services to identify and support victims of DFV is essential, regardless of whether it is a specific DFV service. Training client-facing staff and workers who are the 'first to know' to ensure they are sufficiently informed and supported to take action is an important area for further investment.

Support for those at risk of or experiencing DFV also needs to be timely. The need to ensure early intervention, rapid response and lasting supports means a comprehensive strategy to address and prevent DFV will require financial investments in a range of effective programs. Tailored programs are also required, such as models suitable for women in remote Indigenous communities.<sup>29</sup>

For some women, assistance needs to continue for some time after finding a new home, including trauma informed support and rental assistance (such as through the Start Safely program in NSW), until they can become fully independent. There are real and significant risks to the lives of women leaving DFV: according to one analysis of British women murdered by their partners, over a third occurred after they had separated.<sup>30</sup> More flexibility is therefore required around length of support.

### Policing and justice responses

High demands on police resources means that damage is often done by the time they can respond to domestic violence incidents. Continuing the emphasis on the importance of quick responses to reports of DFV is important. The NSW Police Force's efforts to embed domestic violence education as part of the training for new police recruits, as well as re-training currently serving police officers, is a welcome development to increase effectiveness and build community confidence in the management and response to DFV. The court system also needs to understand the complexities and sensitivities of DFV, including training for Magistrates.

There is an essential role for Legal Aid and Community Services Legal Program providers, as those leaving DFV need immediate and affordable legal advice and support. It is important that adequate and sustainable funding is provided to community legal centres.

The importance of ensuring that legal responses to DFV are well coordinated cannot be underestimated, and the NSW program 'Staying Home Leaving Violence' may provide some vital lessons for this. Providers funded under the program coordinate legal and service providers to assist women and their children to remain in the home and not be displaced by the offender. The service covers everything including brokerage funds to increase home security, working with police and local

---

<sup>29</sup> Murray and Theobald (2014) 'Domestic and family violence' In Chamberlain, Johnson and Robinson ed *Homelessness in Australia: An Introduction*, UNSW Press, Sydney.

<sup>30</sup> Dobash R. E. & Dobash R. P. (2009). 'The Murder in Britain Study: Broadening the analysis of men who murder an intimate woman partner' in Australian Institute of Criminology. *Domestic-related homicide: keynote papers from the 2008 international conference on homicide* (AIC Reports Research and Public Policy Series 104), Canberra: AIC, p. 16. Available at: [http://www.aic.gov.au/documents/C/C/3/%7bCC334155-D9E6-4635-84FB-32A81C3A3C69%7drpp104\\_003.pdf](http://www.aic.gov.au/documents/C/C/3/%7bCC334155-D9E6-4635-84FB-32A81C3A3C69%7drpp104_003.pdf).

courts to ensure the offender is removed, and assisting women to navigate legal, financial and tenancy issues.<sup>31</sup>

The *It Stops Here Safer Pathway* reforms are also an important advancement for the safety and protection of victims and their children and we look forward to the roll out of further sites across the state.

### MA Approach

#### Yaralla Cottages

Yaralla in Central Sydney provides 23 one bedroom units in the Dame Edith Majestic Gardens in Concord. The property is owned and funded by Perpetual Trustees. Tenancies are managed by Mission Australia Housing, and Mission Australia provides case management support. The program caters for women over 35 who have generally been homeless for more than 12 months. Presenting issues include: DFV; untreated co-morbid health issues (such as poor physical health, mental illness, diabetes); alcohol, other drug and gambling addictions; and family breakdown. Women stay for six months or more until they can be supported into long term housing options. The property operates with support from case workers Monday to Friday during business hours and the program manager is on call after hours, however they are rarely called as the tenants generally self-manage and look after each other.

#### Women's Safe Houses – Western NSW

Mission Australia runs three safe houses located in Western New South Wales, at Lightning Ridge, Walgett and Brewarrina. These Safe Houses operate as crisis centres and have a focus on assisting women and children escaping DFV and homelessness with a focus on Aboriginal women. Transitional accommodation assists women and families who have been through the Safe House program and cannot return home. While a woman or family is in transitional housing, staff assist them with living skills programs, financial stability, tenancy supports, children's educational engagement, liaising with health providers and progressing into more permanent stable housing. Group-based parenting and behavioural programs are also offered such as Seasons for Healing, Aboriginal Triple P, Incredible Years, Circle of Security, 123 Magic, Keeping Children Safe, LoveBites, Through Young Black Eyes, Rage (Anger Management), Managing the Bull and Act Now Stronger Together. Community outreach including intensive case management is provided for clients in the community with complex needs.

### Perpetrator Accountability

While support for people at risk of or experiencing DFV is clearly the primary concern, programs targeting offenders to reduce rates of recidivism are also necessary. Men's behaviour change programs need to be funded and evaluated to build a strong evidence base for effective practice.

Men's behaviour change programs (MBCP) are aimed at reducing the rates of recidivism by addressing the causes of domestic and family violence. Currently recorded rates of recidivism are alarmingly high and there are also high levels of unreported domestic and family violence that are not being addressed by the justice system.

---

<sup>31</sup> NSW Family and Community Services (n.d.) *Staying Home Leaving Violence*. Available at: [http://www.community.nsw.gov.au/docs\\_menu/for\\_agencies\\_that\\_work\\_with\\_us/our\\_funding\\_programs/shlv.html](http://www.community.nsw.gov.au/docs_menu/for_agencies_that_work_with_us/our_funding_programs/shlv.html).

Our services already work closely with police and justice agencies with the aim of making perpetrators accountable for their actions and minimising risk. However, service delivery staff report that a cycle of rolling admissions is still common, where violence is repeated causing affected family members to re-present for assistance multiple times.

It is important that new approaches are implemented across the state, under which men recognise their behaviours, identify triggers, acknowledge damage caused and are taught effective strategies to adopt long-term change. Such approaches are essential complements to other preventative strategies (such as education campaigns and gender equity measures) to stop further violence and harm to women and children.

While evidence on the effectiveness of men's behaviour change programs has been mixed, there have been some promising results, including that of Project Mirabal in Britain where violence was demonstrably reduced through accredited longer term perpetrator programs.

In addition to reduced recidivism, MBCPs offer opportunities for increased monitoring, improving the safety of women and children during participation. The broad range of factors considered in MBCP risk assessments goes beyond what is known to the justice system. These are often the benefits women find most immediately valuable and this monitoring effect should be factored into evaluations in addition to evidence of reduced recidivism.

On this basis, Mission Australia has initiated the preparatory steps for men's behaviour change programs in Western and Southern NSW. The proposed models would work with low risk and higher risk offenders on both a voluntary and mandatory basis although program delivery will vary based on offenders' risk and readiness. There has been a strong indication of demand for these programs even before they have become available, and communities have been supportive of their introduction.

Nevertheless, it is crucially important that support services for women, children and other family members remain a key part of the suite of responses to domestic and family violence, including associated resource allocation, and that men's behaviour change programs are designed and operated in an integrated way that focuses on making women and families safer.

Mission Australia recommends that models for higher risk offenders need to have significant connection to services aimed to support women and children. Evidence indicates that men who do not complete programs often go on to offend more frequently and more severely.

### **Integration with other services**

It is important that MBCPs are integrated with programs for women and families experiencing domestic and family violence. This approach is critical for the MBCP to ensure that the voice and experiences of women and children are privileged in informing intervention and service design.

An integrated services approach also mitigates safety risks to women and families. Engaging family services to provide partner and family support can facilitate alerts to them of any changes in risk level, so they can remain as safe as possible. It enables shared risk assessment and improved risk and safety planning. Women and children are provided with a more in-depth assessment of risk at various times including in preparation for court ordered child contact. An important part of our programs will be to provide information to women and children experiencing DFV about how to maintain their safety.

Integration of services also provides better support for the partner and other family members, through case management, complex case co-ordination and support to access specialist services.

Mission Australia is proposing to nest its MBCPs within existing services for women and children including homelessness, early intervention and child protection programs. As a large provider of community services, Mission Australia has the breadth to integrate MBCPs with not only women's domestic violence and men's and women's homelessness services, but also alcohol and drug and mental health services and case management programs such as Life on Track. In addition, we have well-established referral pathways to other specialist services provided by other organisations such as detoxification services and housing providers. Our integrated service delivery model can provide continuity of support and a holistic wrap-around approach for family members.

This is an innovative approach with substantial promise for wrap-around service provision, greater sharing of information, breaking the cycle of violence and keeping women safe.

### **Tailoring program elements to community contexts**

Design and delivery of MBCPs should not be a one-size-fits-all exercise. A program must reflect the particular circumstances of the community/ies in which it will operate, especially in relation to: prevalence of participants of different levels of offending; local community dynamics; matters raised through consultation with Aboriginal or ethnic communities; considerations of age, language, ethnicity. The program design needs to be flexible to respond to changing circumstances. Deep and ongoing understanding of the community context is essential.

For example, the design of our MBCP for Western NSW incorporates feedback from consultations with local Aboriginal communities and will continue to adapt in response to input from ongoing governance mechanisms. For instance, trained Aboriginal workers will provide MBCP facilitation and partner support services in culturally appropriate ways. Mission Australia intends to offer this program to participants who are Aboriginal and Torres Strait Islander as well as those who are not, based on the central notion that there is no justification for the use of violence against women in any culture. The design allows for culturally specific issues to be worked through where they arise as part of the process.

### **Points of Intervention**

Referrals for men's behaviour change programs could come from police, magistrates, parole, family, self-referral, community services or from other sources. However, it is preferable that interventions occur prior to a court hearing, as there is a possibility that violence could escalate between the time of the incident that is reported to police and the court date, in the absence of further intervention and risk management.

Further, as domestic and family violence is under-reported (even more so in Aboriginal communities), it is essential not to restrict MBCP referrals to court processes, in order to address the bulk of offenders. Referrals through child protection reports, early intervention programs and women's programs provide earlier points of response.

There should be consideration and opportunities for risk assessment to be shared between agencies including non-government organisations, the NSW Police Force and the Department of Family and Community Services.

While community perceptions may identify prison as the place for rehabilitation, this is not always realistic. Community support can be much more effective in giving people the tools to operate in their environment and to address their criminogenic needs. However while community based behaviour change programs can be successful, completion should not be relied on as proof of rehabilitation by the Courts.

## Part Three – Questions for Service Providers

The following feedback was provided from MA frontline workers and program managers in various locations across NSW.

### Referrals

Frontline staff reported that while a no wrong door approach is ideal in theory, in practice organisations can struggle to implement it effectively without clear processes and accountability and with a lack of referral options. Clear information is required around what DFV services are available in what areas and what they are funded to do. There is also a need to ensure services are available that are appropriate points of referral.

*“Alcohol and drug counsellors are not always available in the region, but there is a high level of need for these services from clients experiencing DFV.”*

Program Manager, Western NSW

Streamlining referral processes usually occurs at a local level and effectiveness is patchy across the state. Accordingly, people continue to fall through the cracks and more work is needed to ease the administrative burden of referrals. More connection between services and better coordination across a broad area would be an improvement. The sector strengthening program was beneficial, but an ongoing coordinating role is required.

*“As advocates to Housing and Centrelink we can help clients navigate some of the barriers to getting assistance. We can also assist with brokerage.”*

Staff member, SW Sydney

Soft referral points are also required when women can access information about DFV without being seen. This includes neighbourhood centres and places that work with culturally and linguistically diverse communities.

The recommendation for an integrated and coordinated service system including common policies, assessments and procedures seeks to address these concerns.

### What Works

Service delivery staff reported that increased awareness around domestic and family violence issues has increased help seeking. More focus on DFV also means generalist SHS and other services are better able to provide tailored services to women experiencing DFV. Staff in homelessness services have received training to assist women experiencing domestic and family violence including staff in generalist and youth homelessness services. Police have also become a lot more responsive to domestic and family violence cases and generally work well with service providers.

Services are assisting large numbers of people and working well together to provide wrap around supports. Having specialist domestic and family violence officers within SHS means we can respond quickly and effectively to support those most at risk. These specialist DFV officers create links to other DFV services across a large geographic area. They can also hold forums and reach a broader

audience in raising awareness around DFV. Adequate funding needs to be provided for these important specialist roles.

The *Start Safely* program offered by FACS received positive feedback from MA staff in our South West Sydney homelessness services. Through *Start Safely*, eligible clients who are escaping domestic and family violence are provided with medium-term financial assistance to access appropriate housing in the private rental market. As part of the program, clients also receive referrals to a range of support services. The *Start Safely* program works well in providing referrals to appropriate wrap around services. The program has been evaluated with positive results showing it provides an immediate housing option, choice of location, financial support for victims to leave the perpetrator and that with the right support clients can sustain independent housing once they leave the program. Mission Australia welcomes the recent announcement in the NSW Social Housing Strategy that *Start Safely* will be expanded, to increase the number of families getting assistance from approximately 2000 to 3500 each year.

*Staying Home Leaving Violence* has also been a good model, but more could be done to remove the onus on women to leave the violence, including providing safe and therapeutic spaces for men to go when angry or under the influence of alcohol and at risk of committing violence.

The recommendation for a place-based flexible service model will allow best practice elements including specialist DFV workers and *Staying Home Leaving Violence* to continue in a needs based and client centred way while making improvements where needed.

## What needs improving

### Funding

Frontline staff continue to report a lack of available services compared to demand, particularly in rural and regional areas despite higher rates of DFV in rural and regional areas.

We welcome the increased investment in preventing and addressing domestic and family violence from all levels of government, but unfortunately service delivery gaps remain.

Flexibility of funding models allows providers to be more innovative. The funding needs to cover infrastructure and the employment of skilled workers and be flexible around length of support. Funding should be need based.

To address this issue we recommend adequate long term funding for DFV services and transparent resource allocation, including a significant investment from both Federal and NSW Governments to meet current and future demand.

### Accommodation

Of central importance is a need for more suitable and affordable accommodation both in the short and long term, for women experiencing domestic and family violence. The shortage of crisis, transitional and long-term housing means that many women in crisis have no other option than to stay in motels and caravan parks where they do not feel secure. Temporary accommodation such as motels is also an expensive option and more affordable accommodation options would make it easier for women to leave violence.

There is also a lack of accommodation options for men experiencing domestic and family violence, including men accompanied by children, and for men who are perpetrators of DFV in order to keep women safer.

There are also issues for some women with male children over 14 in accessing women's refuges which makes leaving violence difficult. While this has been recognised through policy reforms, in

circumstances where it is not appropriate to house young males in women's safe refuges, alternative accommodation can be difficult to access and expensive.

*“There is nowhere for men to go who experience domestic and family violence”*

Program Manager, Western NSW

Long-term accommodation is not only unaffordable in large cities like Sydney, but also in areas where there are a high number of holiday rentals such as Cooma and Merimbula, which increases rents at certain points of the year for those without secure tenure.

Further, the limited accommodation that is available often has a prescribed use. For example in Western NSW transitional units are for the exclusive use of Aboriginal women and there is no transitional housing available for other people in need.

We recommend priority investment in a range of safe and affordable housing options. This includes more crisis, transitional and long term affordable housing for survivors of violence, families and perpetrators.

### Justice

When DFV cases make it to court, the response of Magistrates is key. Generally matters reach court when women have genuine fears of losing their life and a response that does not recognise the seriousness of the offences can cause violence to escalate. There is also a need for more consistency, with our staff reporting that some Magistrates are dismissive of DFV and there are too many grey areas in the law making outcomes unpredictable. More training for Magistrates is required so that DFV matters are dealt with in an appropriate manner. There is also room to consider specialist DV courts based on evidence from the Gold Coast.

### Perpetrator accountability

Service staff also noted reluctance among perpetrators to admit fault and seek help when it is offered. Perpetrators often prioritise housing and dismiss other interventions like counselling. It is difficult to engage and build rapport in the short time frame available. Referrals are given but are rarely acted on. Better access to men's behaviour change programs is required and mandatory attendance through the justice system should be considered where appropriate.

### Workforce

While DFV training opportunities have expanded, more intensive training about the indicators of DFV is required for generalist staff (in a range of support services) to have the skills to identify DFV issues and risks when clients present in different contexts.

Clinical supervision for specialist DFV workers should be mandated considering the complex nature of the clients' issues which often include not only DFV but also alcohol and drugs and homelessness. Without proper support and debriefing, staff can be over-burdened impacting their own lives and that of their families.

Training for public housing and community housing staff in how best to respond to domestic and family violence and make appropriate decisions is recommended to avoid loss of tenancies.

It is important that the workforce reflect the client group to the greatest extent possible including workers from both genders, Indigenous and non-Indigenous staff and workers from culturally and linguistically diverse groups where appropriate.

We recommend that investment is made in specialist DFV workers as well as ongoing training about the indicators of DFV and the impacts of trauma for all community service workers as well as supervision.

### **Barriers to programs and services**

Problems have arisen with women needing to provide evidence of DFV to access programs such as *Start Safely*. Many women don't want to report DFV to the police and this creates barriers to accessing programs where proof is required. Evidence can also be difficult in cases of emotional abuse. Other forms of evidence should be accepted including a report from professional or manager-level staff at community services agencies.

There is also a problem with women's access to crisis payments when they do not have their own bank account after leaving a relationship. In such cases banks should accept written proof of identity from a solicitor as a temporary measure.

In addition to women's only services, there need for safe spaces for women to work with their male partners on relationship issues where this is the woman's choice. Men's access is restricted at women's safe houses and accessing these areas can also trigger a breach of their AVOs. A safe space to allow partner work may reduce the need for policing and allow more productive relationship counselling.

In designing much needed programs and services, it is important that service providers, including frontline staff are consulted on proposed ideas so that unintended consequences can be identified early and good intentions are implemented into workable program models. It is also important that the voices of clients are heard and programs are modelled and adapted in response to feedback received from clients either formally or informally.

### **Early identification and action**

Service delivery staff believe more work could be done with students and young people to change attitudes and stop the violence before it commences through schools, universities, workplaces and other organisations.

Education programs in schools and talks for the general public are useful to raise awareness about domestic and family violence, risks and supports and provide points of early referral for clients. Mission Australia has arranged such talks which have been followed by a large number of disclosures and follow ups with entry points for early support.

Mission Australia also works with many young people who have experienced significant trauma through domestic and family violence and may also be at risk of perpetration due to this poor modelling and the embedding of core beliefs around violence as an appropriate path to solving problems. There is a lack of programs for adolescents who have experienced domestic and family violence to both address trauma and prevent future offending through cognitive behaviour change models and specialist counselling.

*“It is estimated that 89-95% of young people in our juvenile justice programs such as MAC River have experienced domestic and family violence. “*

Program Manager, Western NSW

In addition to respectful relationship education, instruction in emotional regulation and anger management could be usefully provided through schools in some communities where there has been intergenerational trauma and poor parental modelling.

Referrals to DFV community services including homelessness services are generally made at crisis point. Other alerts such as child protection notifications could be used to intervene early in cases of domestic and family violence.

### **Community involvement**

Responses from frontline staff indicate there is a role for the media to raise awareness and provide useful information to the public. Not only to people experiencing domestic and family violence, but also to potential bystanders about effective interventions that they could take. More could be done to enable bystanders to have the knowledge and skills to appropriately intervene.

Growing awareness of DFV within the community has given people a greater awareness of their rights and responsibilities. It has also made it easier to access services and to know which services are available. Media coverage has started to assist more victims to speak out and needs to continue.

Other parts of the community also need to be involved such as ensuring all medical centres, doctors' surgeries and hospitals have information available for DFV victims in different languages. While sporting codes and clubs have initiated some awareness programs, these are only effective where actions meet intentions and have been undermined where not followed through.

There is also a role for businesses such as banks to provide greater flexibility when providing services to people experiencing domestic and family violence when issues arise such as proof of identity in a time of crisis. Private real estate agents and landlords can also play a role in minimising the risk of homelessness for victims of domestic and family violence through better awareness, understanding and responses.

Partnerships with real estate agencies such as the *Macarthur Real Estate Engagement Program* can provide an early point of intervention when people go into rental arrears and more could be done with regards to earlier identification of DFV in this context. Cooperation with real agents also offers the opportunity to provide an avenue for priority housing for clients experiencing DFV and needing a safe place to exit. There are plans to set up similar real estate engagement programs in Liverpool-Fairfield and Bankstown which will allow caseworkers to refer clients to housing in other areas which is particularly useful when women would feel safer in a different neighbourhood.

For Aboriginal communities, the NSW Government's local decision-making framework under OCHRE should be supported as a means of consultation on DFV responses.

Mission Australia has worked with businesses, schools, councils and other to raise awareness about the cycle of violence and the impact of that violence on the whole family.