

Jan Shuard PSM
Family Violence Reform Implementation Monitor

Re: Submission: Monitoring the Family Violence Reform – Jewish Care Victoria

Background

As the largest provider of ethno-specific services to the Victorian Jewish community, Jewish Care welcomes the opportunity to present a submission to the Family Violence Reform Implementation Monitor.

Jewish Care is an active member of the Bayside Peninsula Integrated Family Violence Partnership and a partner agency of the Bayside Peninsula Family Services Alliance. We work in close collaboration with, and receive referrals from, a range of Jewish community and mainstream organisations.

We deliver family violence services to the community through:

- **Targeted family violence awareness, primary prevention and early intervention services.** This work is informed by a deep understanding of the history, experiences and challenges faced by a culturally and religiously diverse minority community, as well as through learnings from the women and children that we support. The efficacy and reach of this work is enhanced through the development of ongoing relationships with community leaders and organisations. These initiatives range from community campaigns on gender equity, to secondary consultation and resource development, to targeted training of faith and community leaders. Historically this work has been funded exclusively by community donations, however in recent years has been supplemented through the receipt of a government grant.
- **Community-focused intervention services.** Jewish Care provides a range of services for individuals and families affected by family violence, including: risk assessment and safety planning; case management; supportive and financial counselling; housing support; financial aid; and links to pro-bono lawyers, all delivered through a lens of cultural and religious safety. Ongoing engagement with key sites within the Jewish community, including schools, synagogues and early childhood services, enables a 'community gaze' which is key to supporting safety. Embedding the principles of the MARAM framework has been a key component of our practice. Jewish Care's direct service work receives no government funding and is solely reliant on community donations.

Questions

1. **How has the family violence service system changed since the Royal Commission?**

דרך ארץ
derech erez
respect

קהילה
kehilla
community

הכללה
hachlala
inclusion

אחריות חברתית
achrayoot chevratit
social responsibility

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- The establishment of the Orange Door has been the single most significant change in the Bayside Peninsula region and has enabled a range of benefits, including streamlined access to support for vulnerable families and greater integration and cohesion of family violence service provision. While the vision for single-entry points highlighted the benefits of ‘one-stop-shops’, our experience since the implementation of the Orange Door reflects the importance of maintaining ethno-specific entry points; though the Orange Door has been well-advertised in the Bayside Peninsula, our community overwhelmingly continues to prefer to seek support for family violence via Jewish Care. For some that choice is driven by language; for others, culture or religion. For some it simply reflects the familiarity or comfort of a well-established community organisation; whatever the reason, this pattern is unlikely to change and it is our strong belief that choice should be available for all minority communities. Help-seeking in CALD communities is notoriously difficult and known to take place over a much longer period of time compared to the broader community; to further narrow that choice is deeply problematic.
- Since the Royal Commission there has been a significant emphasis on the importance of gathering information around risk. The increased identification of factors that convey greater risk or urgency within a framework that places a high priority upon safety planning is undoubtedly a vital outcome – however, anecdotally, this appears to have contributed to a de-emphasis of the role of early intervention. The work has shifted to focus predominantly on those who are at greatest risk – and rightly so, when each week yet more women are killed by intimate partners – however the reforms must not lose sight of the importance of early intervention. Activities that aim to prevent further violence, shift attitudes and beliefs around the role and value of women, and support healthy relationships – in conjunction with the delivery of supports to affected family members - are key to the broader vision to eradicate family violence.

The current narrative, with its focus on risk and safety, also includes comparatively little about what comes next: the need to support the recovery of the woman and her children post- the experience of family violence has been largely absent from the conversation. Provision of services for children is further complicated for those from minority backgrounds, with the availability of culturally-safe and trauma-informed services generally lacking – the majority of individual providers are still strongly church-based, which can act as a significant barrier; in the words of a client, *“An Orthodox Jewish family isn’t going to send their kids to the Salvos.”*

- The increased acknowledgement that family violence prevention activities for culturally and linguistically diverse and/or faith-based communities must ideally be led *by* those communities is a significant shift. The willingness to commit funding to ethno-specific primary prevention and early intervention work has been most welcome – however, to date funding has been largely piecemeal or short-term, which acts as an obstacle to both the momentum and sustainability of change in these communities. The impact of prevention

work thus far has been promising, with an increasing willingness for secondary consultation, community dialogue and connection to support services, however a much more long-term approach is required in order to embed and grow these changes.

- The efforts by Victoria Police to respond more effectively and appropriately to affected family members are commendable. Implementation of the new L-17 tool and the availability of family violence liaison officers have been particularly impactful, and there appears to have been an overall cultural shift that legitimises and gives language to the impact of family violence. Anecdotal reports from clients reflect a positive experience where the individual feels believed and validated; their experience is taken seriously; and they have the option to choose to engage with a dedicated family violence officer. However, these experiences have not been universal, with many clients reporting an inconsistent, unhelpful or dismissive response when reporting breaches of intervention orders. In order to feel confident encouraging clients to report to police, our staff members have resorted to ‘screening’ multiple stations, both in and out of area, to identify those with the most appropriate response. A more consistent approach across Victoria Police, where family violence liaison officers are widely available, affected family members have the choice to see a female staff member and breaches are responded to appropriately, would further build on the promising changes that have been made thus far.

2. Looking forward – what is still required in the family violence system?

- While the needs of multicultural and minority communities have been increasingly recognised both by government and mainstream service providers, there remains a way to go before the support of CALD communities moves from a well-intentioned agenda item to a genuinely meaningful, integrated and intersectional service response. Acknowledgement of the legitimacy and expertise of ethno-specific services and greater secondary consultation of such services by the mainstream sector would support safe and appropriate service delivery for individuals from minority communities. Where clients are receiving services from multiple agencies, our experience has overwhelmingly been that the onus has been on us to engage with the other provider; mainstream services have rarely sought to connect with Jewish Care to seek guidance around the provision of culturally appropriate support. In an era that advocates for an integrated system, CALD services are notably absent.
- There exists a significant gap with respect to the availability of appropriate affordable or social housing in the Bayside Peninsula region, where the majority of the Jewish community – including relevant community infrastructure such as Jewish schools, synagogues and kosher grocers – resides. For Orthodox families who are often larger than average, there is currently no access to appropriately-sized family homes, nor is there any foreseen future access in this region. Jewish Care, despite receiving no funding, provides housing for smaller family units as part of our family violence response and while the use of limited brokerage funds can enable us to accommodate large families in the short term, there are no longer-term

options. We have had direct experience with a number of affected family members who have remained in very unsafe environments because there is no choice of alternate housing within proximity to the Jewish community – effectively leaving them with the choice of being safe or being Jewish. We contend that this approach, as a government position, is unacceptable.

- The building of evidence is an essential component of all reform agendas. Data is one source of that basis. There has been some increase in the exploration of cultural affiliations through questions that relate to country or birth or if a language other than English is the primary language spoken. While these are helpful pieces of data they do not tell the full picture. Many people from religious minorities may have English as their first language and be second or third generation Australian, yet still have significant need with respect to the provision of culturally-safe service. Without specific enquiry into religious affiliation this data will be missed and as a consequence, consideration of religious needs that may impact on intervention can be lost.

3. Impact of the COVID-19 pandemic

- The onset of the COVID-19 pandemic necessitated a rapid shift from face-to-face support to the delivery of virtual and remote services. A substantial proportion of the work has been telephone-based, with the increased community need arising from COVID resulting in the establishment of a dedicated helpline. The use of virtual platforms has replaced most in-person contact. While a lack of technological resource has acted as a barrier at times, the increased flexibility in responding to clients has been a welcome innovation and there is significant scope to incorporate hybrid models of delivery into our post-COVID service offering.

The reliance on virtual modes of engagement, however, presented a number of issues – for instance, the risks around use of technology and the ways in which this can be accessed or exploited by perpetrators. Help-seeking during COVID has been particularly problematic. Like other family violence service providers, the rate of referrals for family violence during lockdown periods has decreased, likely reflecting a reduced ability to help-seek safely.

The reliance on virtual platforms also highlighted that not all service users have access to appropriate technology or hold adequate e-literacy skills, due to a range of factors such as age and affordability. This is particularly true for the Haredi or ‘Ultra-Orthodox’ community, for whom access to technology is virtually non-existent due to religious and cultural values. With opportunities to help-seek in less direct ways inaccessible at this time, an isolated community has become even further isolated. For those who had sought service prior to the onset of COVID, the ability to maintain that contact was lost, which is a significant concern. Initial conversations with affected family members in this community suggest that, faced with the inability to safely help-seek, many were forced to acquiesce to demands made by the perpetrator in order to preserve safety.

General comment

As an unfunded service, the implementation of the findings of the Royal Commission has had relatively little impact on our organisation and community. The needs of ethno-specific providers are consistently overlooked in the provision of funding, which - particularly in a post-COVID climate when the capacity of community donors is constrained - presents a significant obstacle to the sustainability of our work, and our ability to support women and children affected by family violence.