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Call for Submissions: Monitoring the Family Violence Reforms

Due 20 July 2020

The Family Violence Reform Implementation Monitor's Call for Submissions is open from 1 June 2020 – 20 July 2020 through [Engage](#)

Organisational submissions

Family Life Ltd

Executive Summary

As a community services organisation delivering family violence services and other specialised child and family services, Family Life welcomes this opportunity to make a submission regarding the implementation of the Family Violence Reforms in Victoria.

Our submission highlights the necessity for reform and emphasises that reform needs to be ongoing, far reaching and collaborative. We identify the key gains of the reforms to date, particularly in relation to greater system accountability, perpetrator accountability and victim survivor safety, with an increased focus on partnering with and empowering victim survivors. We commend the establishment of specific service responses such as Support and Safety Hubs (The Orange Door), and the identification of the specific implications of family violence for particular groups, such as children and people from diverse backgrounds. We also affirm the importance and value of understanding intersectionality.

Family Life welcomes the increased focus on trauma informed theory and its integration into family violence practice and the growing recognition of the need for robust evaluation of programs and models of service delivery. Trauma informed services across the sector would be further bolstered by a stronger commitment to trauma informed and systemic interventions, including adoption by organisation and network leadership groups.

As an organisation providing services in the areas of family law and family relationships, we identify ongoing challenges where family violence and child protection concerns intersect with family law cases, particularly in relation to child protection closing cases prematurely on the basis that the matter is a family law matter. The trend towards hearing specialist family violence cases in the Federal Circuit Court is identified as problematic and we advocate for more training for judges in relation to the impact of family violence on children. We also recognise the need for improvements in the Support and Safety Hubs model design and implementation, particularly in the consistent integration of service responses and the capture of data to enable reliable evaluation of the performance of the Hubs to measure the effectiveness of services.

Our contribution identifies specific challenges in relation to the COVID-19 pandemic, particularly the lack of visibility of victim/survivors, including children, limited access to data for clients to maintain safe contact with support services and disruptions to men's behaviour change groups and other face to face service delivery which has supported visibility and accountability of perpetrators.

Our Organisation:

Family Life is a specialised child and family services organisation with a well-established footprint across the south eastern suburbs of Melbourne through fifty years of service delivery. To achieve our vision of capable communities, strong families and thriving children, we provide holistic, therapeutic and practical services, support and community connections. Family Life provides the following family violence services:

- Men's behaviour change programs for voluntary and court mandated participants and clients of Corrections Victoria;
- Dads In Focus: a program for fathers using family violence;
- Counselling for women and children experiencing family violence;
- Strength2Strength: a client-led therapeutic program for children and their parents, who are survivors of family violence;
- Reboot: a program for young people using family violence and their parents/carers.

Family Life carry the Integrated Practice Lead and a team of intake positions in the Bayside Peninsula Support and Safety Hub, leading practice and collaborating with a diverse range of service providers to offer a holistic response to child well being and family violence concerns. Our other services comprise Integrated Family Services, early intervention mental health services and family law, including family relationship services. All programs are cognisant of and operate within key frameworks such as the MARAM framework.

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

Introduction:

ROSIE BATTY: "Things happen in such a fragmented fashion. They seem like isolated events. Each statement you make to the police is a separate statement, each policeman you meet is a different policeman, each organisation is doing their own job with their own focus. No one's taking an overarching look at everything that's going on together. No one's looking at the complete picture".

(Four Corners. ABC TV. 2014)

The above statement by a well known family violence victim survivor reflects key flaws in the family violence service system prior to the Royal Commission. The statement is included here to privilege the voice and experience of family violence victim survivors and to acknowledge the post Royal Commission emphasis on client participation and consultation.

In broad terms, other key changes include greater system accountability, perpetrator accountability and victim survivor safety, with an increased focus on partnering with and empowering victim survivors.

- **What are the major changes in the family violence service system since the Royal Commission into Family Violence made its final report and recommendations in 2016?**

The establishment of Support and Safety Hubs (The Orange Door) supports the aim of moving towards integrated service to support family centred practice, rather than siloed individualised

services. Family Life has a presence in the Bayside Peninsula Orange Door with two Integrated Practice Lead positions, 1 Team Leader and 4.5 EFT for Orange Door Practitioners.

The introduction of the Central Information Point (CIP) and its implementation alongside key initiatives such as RAMP and information sharing legislation allows for more holistic risk assessment and response. The CIP process enables access by the Orange Door to information regarding past perpetrator patterns which is a significant factor in determining and managing family violence risk.

The introduction of the Child Information Sharing Scheme (CISS) and the Family Violence Information Sharing Scheme (FVISS) has facilitated the exchange of critical information to support decision making in relation to family violence intervention. Training and guidance provided to staff in relation to sharing information mitigates workplace stress, encouraging network responses to risk management. Family Life has developed online and face to face training modules, as well as specific procedural guidance, to ensure that staff understand the provisions and apply them appropriately in their practice.

The Multi-Agency Risk Assessment and Management Framework (MARAM), with the inclusion of Tools for Risk Assessment and Management (TRAM) supports a shared understanding of FV assessment across the family services system. Practitioners at Family Life have integrated this framework, along with the Best Interests Framework for Vulnerable Children and Youth and an overarching trauma-informed approach to practice to ensure best practice with those who have experienced family violence.

Family Life welcomes the stronger emphasis on intersectionality and family violence, where the needs of different groups such as Aboriginal and Torres Strait Islander people, people with disability, people from culturally and linguistically diverse backgrounds and LGBTIQ people are recognised. This is important as these groups often have additional experiences of marginalisation and discrimination, including specific barriers to accessing services.

Increased emphasis on and funding for therapeutic services has enabled greater support for healing and recovery from family violence. Family Life has established the Strength to Strength Program, (initially funded as a therapeutic demonstration pilot) which provides support to women and children to initially establish safety and stability, and then embark on therapeutic intervention. This multidisciplinary program includes an Occupational Therapist, Sexual Assault Counsellor, Psychologists and a Family Therapist.

Other key changes include greater recognition of the impact of family violence on children and young people, with particular impacts at different stages of the life cycle. This has been supported by the development of evidence informed practice. The Safe and Together and Duluth models underpin Family Life's men's behaviour change practice along with other modalities such as psychoeducation, cognitive behavioural therapy and motivational interviewing. Above all, a trauma informed approach has emerged as critical to safe and effective practice with the aims of avoiding further harm, establishing safety on all levels and providing voice and choice for victim/survivors. Greater adoption of evidence informed practice, in a move away from strict evidence based and manualized programs, has enabled stronger client centred and trauma informed interventions that can better account for intersectionality. This requires the development of ongoing evidence and integration with confirmed best practice approaches.

Increased emphasis on family violence as a "parenting choice", legislative provisions to exclude perpetrators from the family home and increased information sharing provisions provide valuable mechanisms for reinforcing perpetrator accountability.

There has also been an increase in cross jurisdictional collaboration within the Family Law space. Family Advocacy and Support Services also supports visibility, accountability and an understanding of the needs of children impacted by family violence. Family Life have successfully colocated its Federal Family Law services with The Orange Door and actively partner in secondary consultation.

- **How has the experience of accessing services and support changed since the Royal Commission for victim survivors, including children, and perpetrators of family violence?**

Increased community awareness through strong public messaging campaigns has contributed to increased referrals to support services. Some victim survivors using Family Life services have reported that this increased awareness has reduced some of the stigma associated with family violence, increased their knowledge and awareness of support available and prompted them to reach out for help.

In responding to police L17 reports, the Orange Door is provided with respondent, affected family member and children's detail in order to determine appropriate, coordinated interventions. Prior to the Orange Door, individual community service organisations would receive only those details relevant to the service provided to the individual, making a coordinated response more difficult to achieve. At this time Family Life coordinated triaging of L17s and coordinated responses between womens and childrens services and the police. This example of effective triage and response continues to provide learnings for the current system.

With greater knowledge and acceptance of the importance of victim survivor self assessment, particularly in relation to risk, victim survivors have expressed that they are now more readily believed and listened to, and this has contributed to a reduction in systemic victim blaming.

There are some indications of reductions in systemic collusion with perpetrators of family violence in the Family Law system, for example, through an increased role for child focussed Independent Children's Lawyers, the establishment of specialist Family Violence courts and police based Family Violence task forces that partner with social work services.

Family Life has provided more evidence informed services, more therapeutic services and we have effectively utilised brokerage for multi-disciplinary therapeutic responses. Our child focussed work has contributed to a stronger understanding of intergenerational trauma which is more consistently built into assessment and case planning. This child focused approach incorporates the inclusion of the child in the assessment process.

The increased understanding of family violence towards a child's mother as an attack on the parent-child relationship has seen increased consideration of this in decisions regarding high conflict post separation arrangements, however there are still many cases where children continue to be traumatised through interaction with family violence perpetrators.

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

- **What are the most critical changes to the family violence service system that still need to occur?**

Family Life strongly recommends:

- Continued co-design around system reform with victim survivors of family violence; for example family violence and community services organisations establishing client advisory groups and processes;
- Further analysis of how well the system accounts for intersectionality, including the identification of gaps and review of strategies for addressing the gaps; for example organisations establishing diversity and inclusion working groups, policies and processes at workplaces and holding sector meetings on this topic;
- Increased focus on child development and traumatisation as a result of family violence in the Orange Door; for example organisational and sector wide learning and development strategies which focus on evidence informed practice in this area. This would be enabled through stronger integration of child focussed practice;
- Sector wide commitment to integrated practice complemented by tailored implementation plans that enable consistent (within the long term) transition of practice approaches;

- Further integration in service responses post intake and triage to mitigate the need for clients to repeat their stories;
- Further investment in and expansion of the breadth/ innovation of Men’s Behaviour Change Programs alongside continued investment in core perpetrator services (MBCP, case management). This should include scope for tailored services; for example trauma informed programs, programs for men who are fathers, men with disabilities, men with harmful substance use and/or mental health concerns;
- Stronger standardised outcomes measurement and evaluation of FV services. The Victorian Auditor General’s Report into the Orange Door found that currently, Family Safety Victoria is not collecting the right data to understand its clients’ experiences within and beyond a Hub¹. Without reliable evidence to support whether services being provided are resulting in improvements in responding to Family Violence, continuous improvements cannot be based on strong system data analysis and tends to rely more heavily on data sets collected by individual organisations. Establishing consistent and targeted data collection and developing reliable measures of service effectiveness should be prioritised and standardised across the Hubs and throughout referred services; this could include utilising theory of change and program logic and developing evaluation frameworks for family violence programs and services;
- Further education for private law networks in relation to the impact of family violence to reduce systemic collusion;
- Further investment in Child Protection systems including a review of legislation to enable CP to remain involved with families for longer periods;
- Limiting the hearing of Specialist Family Court cases in the Federal Circuit Court until there is specific and targeted training of the Judiciary in understanding the nature of Family Violence and its impacts, particularly on children. Adverse outcomes on children have increased with the practice of hearing these cases by Federal Circuit Court judges with limited experience of Family Violence;
- Stronger engagement with grass roots community services to respond to whole of community attitude and behaviour change. This would ideally be established through common agenda and collaborative community action;
- Increased resources for case management in men's services, including increased, trauma-informed service delivery options for perpetrators ;
- Family Safety contact is still framed as a component of MBCP and without specific funding - there should be increased scope for intensive family safety support (regardless of whether the perpetrator remains engaged in the intervention);
- Greater collaboration across services in responding to working with men.

- **Are there any parts of the family violence reforms that have not yet progressed enough and require more attention?**

Family Life identify that the following reforms are not yet progressed sufficiently and should be given greater attention:

- Greater access to CIP information for the full range of Risk Assessment entities (eg a Men's Behaviour Change service cannot currently access the CIP directly);
- Progress on the application of the Information Sharing Schemes through to universal services (delayed until 2021);
- Implementation of cross border legislation to broaden the application of Information Sharing Schemes to services in different Australian states;

¹ Managing Support and Safety Hubs, Victorian Auditor General’s Office (27 May 2020).

- Widening of the application of Information Sharing Schemes to Federally funded Family Violence and family and childrens' services currently not included in the Information Sharing Schemes;
 - Improvements to the Support and Safety Hub model design and implementation, particularly in the consistent integration of service responses and the capture of data to enable reliable evaluation of the performance of the Hubs to measure the effectiveness of services. Further, greater clarification of the integrated model that the Hubs are aiming towards and an emphasis on striving toward this integration may be required, including a focus on referral pathways through the Hub not being replaced by specialist services being provided from within it;
 - Elevating the Quality Management and compliance requirements of the Support and Safety Hubs (the Orange Door) to at a minimum match those required of funded Family Violence Services, and recognising the operation of the Orange Door as a defined entity when applying the Human Services Standards and Quality Management standards. This may be assisted by improving Family Safety Victoria's performance monitoring, evaluation and governance methodologies to ensure consistency between Hubs, as well as providing a consistent Quality Management System across all Hubs that is centrally designed to support consistent access and service across Victoria;
 - A targeted, potentially short term, surge capacity increase with requisite funding to reduce backlog issues in existing Support and Safety Hubs, to address the present and future risk of not meeting demand within reasonable timeframes - in turn increasing community confidence in timely support able to be provided through the Hubs;
 - Providing financial support in a planned and coordinated way to all funded specialist Family Violence providers for the implementation of Royal Commission Finding 167 such that all services are inclusive of the LGBTIQ community and there is equitable access to the funding required to implement inclusivity measures;
 - Recommendation 170 in the findings of the Royal Commission was to adopt a consistent and comprehensive approach to data collection for people with disabilities. Although the implementation of this recommendation was reported as having been completed in December 2019, no observable change in data collection or service standards to people with a disability is noticeable from within the family violence service sector. As this was to be an initial step in improvement of services to people with a disability, the delay in completion of this recommendation would have a further impact on improvements to services for people with a disability;
 - More focussed and evidence based responses addressing the use of violence in the home by adolescents;
 - Consideration of the integration of support for adult male victim survivors who are currently siloed through the victim support agency, which may not reflect a response allowing for the complexity of family dynamics where multiple family members may be both victim/survivors and using family violence.
- **Are there any improvements that could be made to the implementation approach of the family violence reforms?**
 - Ensuring that remaining stages of reform implementation are planned in detail, and are referenced to a clearly articulated vision of reform that has the support of the various stakeholders (complemented by strong evidence informed direction), and remains client focussed in all respects;
 - Ensuring that consultation mechanisms are respected and anchored in the agreed vision;

- Stages of implementation do not progress where bottlenecks and backlogs have been identified that require resolution so as not to cause increased issues in the future (for example, the clearance of case backlog in all currently operational Support and Safety Hubs prior to commencing the operation of new ones);
- Ensuring that the stakeholders (including sector Peak Bodies) involved in the Support and Safety Hubs are able to achieve broad agreement on what an integrated model of service delivery is comprised, in order to achieve Hub consistency before continuing the rollout of the model in other regions;
- Undertaking an analysis of the relative benefits of implementing system improvements prior to progressing the Hub model, that have an impact on the community service organisations (CSOs) receiving referrals - for example, the inability of the client records management system in the Hub to interface with the DHHS IRIS system and systems used by CSOs (at significant additional and unfunded costs to the CSOs).
- Implementation requires continued commitment to integrated practice such that core intake and response services have a generalised response. This means consistent and evidence informed responses regardless of the practitioner specific skills who undertake the intervention. Continued investment in practice specialisation/ expertise, reflective practice and supervision would enhance this response.

Impact of the COVID-19 pandemic

- **What has been the biggest impact of the COVID-19 pandemic on your organisation or sector? How have the services that your organisation or sector provides had to change?**

The COVID 19 pandemic has resulted in increased pressure on the workforce to deliver services within challenging conditions. This has been exacerbated in key workforce areas, e.g. recruitment. Staff have expressed concern about reduced visibility of families where family violence is an issue. Our capacity to provide student placements and other staff professional development opportunities has been greatly reduced.

Impacts have also been identified in:

- the ability to deliver groups with restrictions on face to face services and funder reluctance to adopt an online group model;
- ability to deliver services safely to victim/survivors who are living in the home with perpetrators or other family members;
- increases in the risk profile of new referrals, but with a decrease in the overall level of referrals.

- **Has the COVID-19 pandemic highlighted any strengths or weaknesses in the family violence service system?**

The pandemic has contributed to a reduction in service hours (especially in face to face services) which has created a backlog of cases. Reduction in face to face contact has impacted visibility on families and impacted effectiveness of risk assessment. This is exacerbated in certain hard to engage cohorts, for example CALD communities. Group service delivery has been severely impacted with much service delivery occurring via the phone or using IT platforms such as CoviU or Zoom.

We are concerned at the higher severity of violence but initial lower overall reporting. It is suspected that this relates to under reporting due to perceptions of reduced capacity in the service system to respond to referrals (or a need to hold).

Our Childrens' Contact Services have been heavily impacted with a reduction in opportunities for children to have access with parents.

- **Are there any changes resulting from the COVID-10 pandemic that you think should be continued?**

Family Life has developed specific strategies to support our organisation to adapt to the service delivery challenges of the COVID-19 pandemic including:

- Developing a COVID-19 practice framework, integrating current practice frameworks, including MARAM and the Best Interest Principles;
- Producing a safety planning guideline to assist staff to identify and manage risk where client visibility is limited and client stress levels and isolation have increased;
- Weekly practice review meetings with senior practitioners and managers;
- Reflective practice sessions with senior practitioners and managers with mechanisms to disseminate key information to practitioners to utilise in day to day practice. Examples include sessions on personality disorders, case closure and adapting practice to the COVID-19 context;
- Adapting service delivery to digital platforms and considering issues related to safety, confidentiality and therapeutic approach.

Family Life encourages all services to explore mechanisms for increasing digital capacity to deliver services (including ability of people to contact the Orange Door), to access safe, timely and responsive support.

General Comments

- **The Monitor invites you to make any final general comments around the family violence service system reform.**

Family violence service system reform has progressed significantly since the Royal Commission with considerable gains in ensuring a collaborative service system response, access to pertinent information to inform risk assessment, partnering with victim survivors and emphasising perpetrator accountability. Family Life's contribution to this submission highlights the key gains and identifies further opportunities for reform in relation to greater understanding and collaboration between judicial, family law and child protection systems, more robust and uniform data collection, research and service evaluation and the potential for utilising digital technology to enhance service provision.

This response identifies the gains made and the requirement for renewed commitment to long term systems change, the greatest risk is ceasing ongoing implementation of better practice.

Family Life welcomes any and all further opportunity to provide consultation around ongoing implementation of reform recommendations.

I/we submit this response to The Family Violence Reform Implementation Monitor calls for submissions.

Authorised Representative	
Name	Allison Wainwright
Title	Chief Executive Officer
Email	awainwright@familylife.com.au
Telephone	03-8599 5433
Date	20 July 2020
Signature	

Sandringham

197 Bluff Road Sandringham
VIC Australia 3191
T +61 3 8599 5433
F +61 3 9770 2906

Frankston

60-64 Wells Street
Frankston VIC Australia 3199
T +61 3 9784 0650
F +61 3 9770 2906

Cheltenham

Level 2, 11 Chesterville Road
Cheltenham VIC Australia 3192
T +61 3 8599 5433
F +61 3 9770 2906

www.familylife.com.au
info@familylife.com.au

Family Life Limited
ABN 37 712 782 209