

FAMILY VIOLENCE REFORM IMPLEMENTATION MONITOR

By your side



Australian Services Union Submission

20 July 2020

Introduction

The Australian Services Union Victorian and Tasmanian Authorities & Services Branch (the ASU) has a proud history of achievements improving the working lives of our members and the industries they work in. ASU members were the first in the world to achieve paid family violence leave, and do vital work across Victoria in family violence prevention and response.

The ASU surveyed and consulted with our members working in family violence response, prevention and related roles across the community sector in preparing this submission. We received responses from workers across a wide range of organisations and settings, including The Orange Door, specialist family violence agencies, peak bodies, women's health services, specialist legal services, children and family services, indigenous services and main-stream community sector organisations. Members worked in a range of roles including family violence response (including specialist response and counselling, crisis response and help lines, intake, brokerage, men's behaviour change/perpetrator intervention, FV lawyer); prevention of family violence and violence against women; children's specialist and family services workers; financial counselling and alcohol and/or drug support.

This submission is informed both by the responses received to this survey, and the knowledge and experience of our organisers and branch leadership who have worked with members and organisations across the sector for many years. The ASU has also had participation in a stakeholder capacity as a member of governance groups of the Royal Commission into Family Violence (RCFV) implementation, particularly in the area of workforce. We appreciate the recent opportunity to meet with the Implementation Monitor to share our views on this key area into realising the goals of the RCFV report.

Where the ASU refers to 'sector' in this submission, unless otherwise specified, this means the family violence response and prevention sectors, and related sub-sectors, for instance women's health services.

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

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

A clear result of the RCFV is the attitudinal shift that workers have begun to see in both public and institutional understanding of family violence. While there is more to be achieved statewide (and nationally) attitudinally in the prevention of family violence and violence against women (PVAW), this shift in the overall prioritisation of family violence issues has clearly been important and meaningful for the workforce. As one respondent put it - "Women are believed more." The ASU tempers this hope with a cautionary tone in relation to the sufficiency and methods of funding, which directly impact on workforce and service delivery, elaborated on further later.

This increase in general understanding around family violence (FV) matters, for example recognition that family violence goes beyond physical violence, has been particularly important for family violence sector workers in collaborating with mainstream services. Respondents indicated a greater willingness in mainstream services to upskill around FV, and better access to these other services. In addition respondents noted the creation of more educational opportunities within the FV sector, though there was feedback that this could be expanded further across mainstream services - "all community services providers need to ensure team leaders and managers access regular, compulsory family violence training".

Another key positive change has been increased collaboration across parts of the sector responding to family violence and sharing of information. Throughout workers' responses the Family Violence Information Sharing Scheme and Children's Information Sharing Scheme came up repeatedly as positive changes that have made a real difference to the work being done to support victim survivors. Respondents described these schemes as having been extremely beneficial for risk and safety assessments and planning, and having resulted in better outcomes for clients.

Other respondents provided examples of support being provided that would never have been possible prior to the Royal Commission - "Examples: CCTV systems. Payment of debts. New appliances and furniture for their homes. I have purchased a car for one client. Helped other clients to relocate interstate. This was not possible before the Royal Commission." with another noting "Flexible Support Package Funding has made an enormous difference."

That said, while the majority of respondents to the ASU survey readily acknowledged that there have been positive changes to the system since the Royal Commission, 48.08% of participants said it had not changed as much as they had hoped. One respondent stated that while the establishment and the intent of the Royal Commission had been great, in practice they were concerned that things had not improved. They provided the example of a woman they had dealt with who was very clearly being stalked and took 5 days to get a call back from crisis response services, to highlight the work still to be done.

"We were all excited by the establishment of the Royal Commission but there seems to be a consensus among workers and many clients I have encountered in my work that share disappointment - it has meant a "dismantling" rather than "adding to/improving" the existing systems in place."

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

The introduction of The Orange Door as a "one stop shop" has altered the experience of accessing support for victim survivors. Some reports indicated that the hub model has given victim survivors a clear entry point into accessing family violence services, however it is clear that there are improvements required. Survey respondent's descriptions of The Orange Door included, variously, "a mess", "does not even come near providing a good service for women", "more about stats", "rude", "dismissive", "does not serve the community", "I have heard multiple stories of women not being able to get a response" and "workers not able to get through to relevant staff".

It also seems that there is clarity lacking for clients as to what supports The Orange Door can provide. One worker described confusion with clients about "the scope and depth of the work we can do with them, as [organisation] staff also receive conflicting info and direction about how much support we can offer clients".

While this is a relatively new service and it is expected that there would be teething problems in its implementation, the reports both of clients not being able to access services and of the unfair expectations placed on workers highlight for the ASU the importance of governmental expectations for publicly funded services, and of the need for more long term funding. Members' responses resonate with ASU officials' experience of seeking timely clarity on the service model/s being established, role and responsibility clarity across different teams and implementation issues at earlier rollout sites being replicated in sites later rolled out. Specific issues reported by workers in the Orange Door include the homogenisation of work roles and lack of a gendered lens, leading to an absence of appropriate FV response at times. One ASU member described concern that it had "taken the feminism out of family violence response."

Expectations have been placed on specialist FV response workers to backfill other roles in the Orange Door, in contradiction to recognising specialisation of roles with the Hub. For example, FV workers have been expected to backfill extended planned leave of

Child First roles. This is not the understood intent of the Orange Door model, staff are not to be treated as generalist and interchangeable, but rather should make up a multi-disciplinary team with a range of specialist and complementary skill sets.

Case studies provided to the ASU regarding the Orange Door included one victim survivor with a long history of interaction with family violence services, who contacted her local Orange Door service and had them contact both the police and child protection without her knowledge or consent. This resulted in the removal of her husband from the home by police, and she believes contributed to his eventual death by suicide. She had reached out just to talk to someone and her agency around her situation was removed.

Another case study reported was that of a woman who had an interaction with police due to a malicious report by her ex, which she was supported through by other family violence workers, only to be contacted by the Orange Door regarding the police referral for the first time nearly 5 months after the incident, causing distress and confusion.

These reports are indicative of issues that ASU members have shared with the branch more broadly regarding the whole sector. The Royal Commission has undoubtedly brought greater attention and welcome investment to address issues of family violence, and there has been a clear drive to attract and recruit staff to the sector, but without sufficient support for these workers and clear guidelines for employers, services will be fundamentally undermined. Descriptions of workers in The Orange Door being bullied for not closing cases quickly enough, for example, indicate a general insecurity, and a focus on short term statistics at the expense of quality service provision.

The ASU has noted higher than average turnover in some Orange Door sites, particularly in specialist family violence roles. This is despite these roles generally being classified and remunerated at a higher rate than like roles based in community sector organisations. Workers, team leaders and managers in

Hubs have reported high degrees of stress, frustration, unrealistic workload, inadequate and confusing systems, and lack of collaboration between agencies in some instances, without an overall operating framework that takes into account the various organisations involved. Overall the ASU has observed an ongoing general lack of job satisfaction at various Hubs as a result of the factors.

“The response to family violence has been increased and that has been good. The problem I have encountered is the lack of coordination between services. The power play of organisations which is more predominant in Frankston at Orange Door with competing funding.”

“Lots of changes to work style and processes but not convinced the level of change has led to equal improvements in change for service users and frontline staff”

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

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

Throughout all survey responses, and in the experience of ASU organisers the key gaps highlighted in available services were:

- access to/supply of crisis housing and safe affordable long term housing options (particularly public housing), and
- attitudes and processes in the justice system.

In the experience of one worker trying to help a victim survivor access crisis housing - "I had a mum desperate for support due to stalking and ongoing family violence. She was told by an agency that she wasn't enough of an emergency to get support. She felt completely abandoned and that he had to have a knife at her neck for her to get help."

Another respondent described a similar situation - "CALD woman was an active client of local FV service, did not receive any support after the recent incident of violence... The woman was refused FV crisis accommodation... despite significant risk namely threats to kill and recent physical assault." The ASU notes the concern for this worker as this presentation is a key sign of escalated risk for the woman.

When asked to indicate what one key change would ease the pressure on services responding to family violence, 34.62% of respondents selected long term safe housing options, the most popular response. In the words of other respondents -

"Without adequate long term housing and welfare options, people experiencing violence have nowhere to go, and no way to escape relationships, and short-term, stop-gap solutions won't solve the problem or benefit the people who need it most."

"Clients who access the complete suite of FV services can do really well. Sometimes services can be a bit fragmented or piecemeal. HOUSING is still a huge issue, probably the biggest."

"Adequate and secure housing remains a serious obstacle for women and their families in enabling a safe exit from FV, and a secure medium term while in recovery. Public housing options can be as insecure as remaining in the FV home."

The second most popular response to this question, with 17.31% of responses, was better legal options to hold perpetrators accountable. A number of respondents described ongoing institutional issues in dealing with both police and the courts. While the Royal Commission may have led to shifts in

community attitudes towards family violence, this is insufficient if it has not been properly recognised by those bodies with the most power to provide protection.

"We are doing so much repair and restoration work of broken mothers and their children, while fathers have next to zero accountability."

Respondents described a justice system that does not hold perpetrators to account in a manner that reflects the seriousness of their offending, and that puts insufficient onus on perpetrators. There was also general scepticism around the protection provided by IVOs, and reluctance of victim survivors to even approach police due to prior experiences remains an ongoing issue.

"The courts and law need to change to stop seeing family violence or violence towards women as domestic and not what it actually is. Violence and assault. IVO are still worth nothing and do not prevent serious attacks"

"There has not been enough changes in perpetrator accountability. The process around women reporting breaches and Vic Pol members taking these reports seriously and holding perpetrators to account has not improved. There have been no changes within the court system that have supported victims survivors of family violence. Federal and State courts are not sharing important information to protect women and children."

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

The lack of back end support and ongoing support services were key issues raised here by ASU respondents. Some of the issues with The Orange Door were attributed to these issues - "Orange Door aims to provide referral, however, there are very limited number of services to refer to - i.e., insufficient case management, housing, legal supports etc."

The need for more case management services was tied to this, with a call to make case managers available to all victim survivors to help them to navigate the service system. "Women who are working, speak English and do not have a significant disability are viewed as competent and not requiring case management support. This does not take into account how the trauma has affected their decision making skills or how much their confidence has been eroded."

Respondents also pointed to the need for supports that deal with more specialised cases, such as understanding of family violence that incorporate LGBTQIA+ experiences, and to the need for greater value to be placed on men's services in the system, with a concern that these services have been devalued and inadequate training and support provided. This includes more specialised supports for men experiencing family violence, and more perpetrator specific programs. The responses to the survey exhibited tensions existing in the sector, with some highlighting the need for a continued focus on women's rights and gender equality in the family violence support sector, and particularly the justice system, while one respondent focused on what they saw as a devaluation of men's services and a lack of support for or understanding of men's service workers. There were also concerns raised about the co-location of women's and men's services in the Orange Door hubs, including perpetrator services.

Further suggestions on possible future changes from members included:

Support for Children:

"We hoped for more specialist FV funding for children and adolescents in our region."

"Not enough practical recognition of children as victim survivors in their own right. Not enough of a system change in working directly with men/dads who use violence. Not enough perpetrator specific programs. Not enough "whole of family" approaches."

Financial Counselling:

"Financial counselling remains underused in family violence situation"

"Clinical supervision is essential for Financial Counselling practitioners but is not a specifically funded activity, however the peak, FCVic is exploring and adapting work arounds. This needs specific funding."

Case Management and Service Models:

"The Hubs should not be run by Family Safety Victoria. There should be a return to making the Family Violence Practitioners "specialists" - as they were - and not providing a diluted Family Violence Response by incorporating other services into the Family Violence Response. There is a need for collaboration; the idea of a "one-stop-shop" is great: but this does not even come near providing a good service for women."

"there have been many forms of dealing with family violence, in the 80-90s the model at least provided crisis intervention 7 days a week in person. the woman was responded to immediately and accommodated. the funding is all good for 9-5 but there needs to be a 24 hour service that can react and respond state-wide not just city."

"big promises of increased case management staff for FV agencies. Still waiting, it's become a joke, give agencies the money for the needs of the client but none for staff to manage the increased client loads."

"Need more case managers- all women experiencing family violence who have recently separated should have access to a case manager to support them in a practical way to navigate the service system and to also offer emotional support whilst they are rebuilding their confidence and reestablishing their agency and control of their life. "

“More funding needs to be put into staffing case management services so that women accessing intake points such as Orange Doors, can then be referred out to case management support in a timely manner. Funding for extra staff in Orange Door is required so that people accessing the service can receive support in a timely manner. More funding for staff in services that women and children experience a lot of impact in regarding their experience of family violence. For example, a huge issue for women and children gaining safety and leaving abusive relationships is housing. More funding needs to be put into housing services for staff and actual housing, to meet the needs of women and children experiencing family violence. Further example, the impacts of family violence have a huge effect on people's wellbeing and mental health. More support services for mental health are required. Similar to AOD etc. Reduce the restrictions on people being able to access financial support through Flexible Support packages. A lot of women aren't able to leave abusive situations because of financial control and experience high levels of this in the relationship. Women may not be in a position to leave straight away but are trying to increase their independence to be able to do this, whilst still in the home with a perpetrator, and need to be able to access funding to do this.”

Prevention:

“...Too many non specialist services have received funding... continued poor investment in primary prevention.”

“More focus on prevention.”

“Funding needs to flow to actual prevention measures, instead of stop gaps that encourage violence in different forms”

“Again, there is a push for more policing measures, not as greater push for systemic and cultural change to prevent violence and seek to early intervene”

Are there any improvements that could be made to the implementation approach of the family violence reforms?

The ASU believes that there is a fundamental mismatch between the publicly stated importance of family violence as a priority issue for government and funding models and the amount of long term funding being provided. That is to say, while there has clearly been much work done to bring public attention to this issue, without addressing the longevity issues in the workforce all these current efforts will be fatally undermined. Attention on attracting and recruiting new staff to the workforce without dealing with existing workplace issues creates a time bomb for the system. To drive the sorts of change needed, a highly skilled prevention and response workforce is required.

These longevity issues relate to both funding models and funding conditions. In order to not only attract, but maintain, a highly skilled and qualified workforce, employers need to be able to offer both professional pay and job security. Professional pay and job security tangibly reinforce that the workforce is genuinely valued by the state, as policy setter and funder, and employers. This cannot be achieved while organisations are provided only with short term funding packages, and are being asked to do more with less. Funding insecurity, and a short term funding model, undermines any capacity for the sector to address workforce issues or to retain talent in any serious way. This has flow-on effects for victim survivors being able to access both quality services and qualified, helpful, support from workers.

The ASU notes the funding cliff of RCFV initiatives, current budget uncertainties held by employers in the sector and the flawed short term funding model applied to the sector prior to and since the RCFV report. Workers cycle around FV and related sub-sectors without job security, losing continuity of entitlements and in some instances on rolling short term contracts with the same employer. We note the recent achievement of portable long service leave as very welcome to the ASU and our members. A range of industrial concerns related to insecure work remain unaddressed including use of short term contracts as unofficial performance / job termination tools, lack of

access and eligibility to paid parental leave, loss of accrued personal leave. As a predominantly female workforce, true even more so than the broader community sector, these factors have amplified impact due to unequal distribution of caring responsibilities.

It is not just the amount or time period of funding provision that should be addressed, but the requirements placed on organisations in their role as employers if they are to be in receipt of public funds. This includes both requirements to offer secure work and decent conditions, but also to provide adequate health, safety and wellbeing support. Workers are at huge risk of experiencing vicarious trauma, and have a higher likelihood of having experienced family violence themselves, both because this is a female dominated sector and the community incidence of FV, and because of the kinds of people attracted to this work.

The onus for providing adequate wellbeing support cannot be carried by individual workers, it must be met by employers (and the state as funder), if the quality of the services available to victim survivors is to be maintained. It should include funded opportunities to receive quality external debriefing and supervision, as separate from line management supervision, specialist support (not generic EAP) need to be integrated into the sector as a standard.

On a broader systemic level, organisations in receipt of public funds should be required to meet criteria of having adequate workplace health and safety practices and systems that meet legislative requirements. Whilst the ASU holds this view broadly of the funded community sector, in this instance it is imperative due to current and ongoing risk levels to the FV and related workforce and the critical social change that this sector has been tasked to achieve.

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 sensitivity and difficulty of the work performed by the family violence sector has made the transition to working from home during the COVID-19 pandemic a challenge for much of the workforce. ASU members in the sector reported quite varied levels of support from their organisations in adapting to the pandemic, and described difficulties in adaptation. Service delivery has had to move away from face to face meetings to phone and online services, which for workers means bringing these difficult conversations into their home environment, while also trying to support victims often stuck in the same place as perpetrators. In the words of one respondent - "It is very difficult to have conversations with mothers when the perpetrators or children have been in the home. It is also difficult to accurately assess risk."

Only 40% of respondents indicated that they had felt totally supported and able to continue to provide effective services during the pandemic. While some respondents described receiving technological and other support from their organisations in transitioning to working from home, others reported significant gaps. Some staff have been expected to provide all their own technology and equipment, for example. One worker described costs of over \$1000, including an increase of over \$200 in their phone bill, with no reimbursement from their organisation.

As with technology, peer support measures have varied significantly across the sector. Some organisations have been more proactive than others in setting up debriefing sessions with staff, including team check ins and buddy systems. There is a clear need to standardise the expectations placed on employers across the sector, including measures such as work from home allowances and support systems put in place for staff during this time. The ASU notes the supports provided to funded agencies during this period, such as changes and relaxation of agency

monitoring, flexible funding and Working For Victoria initiatives. It appears these have not been uniformly adopted or in some cases not implemented to the benefit of existing workforce.

Workers have reported increased impact of vicarious trauma during the pandemic as 'working from home' has evolved into 'always being at work'. To meet confidentiality requirements of their jobs, some workers report being stuck in their bedroom for whole shifts day and/or night, responding to and absorbing traumatic content, having to sleep in the same space and unprecedented stress compounding as a result.

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

The measures put in place to deal with the pandemic have served to place pressure on existing problem areas in the system. Namely, access to housing, and the continuing challenges of supporting victim survivors through the legal system.

When asked what key changes would ease the pressure on services during the pandemic 28.3% of ASU respondents pointed to increases in safe long term housing options, and another 18.87% said increases in short term housing. Being stuck at home for longer periods of time with perpetrators, and with fewer excuses to leave, highlights what workers in the sector have been saying for a long time regarding the importance of safe housing options in moving victim survivors safely from family violence situations.

Regarding the operation of the justice system, in the words of one respondent - "The Magistrates' Court have done a TERRIBLE job. No phone or video appearances have been allowed, which essentially means FV victims have had to self-represent against the perpetrators." Another ASU member described the consequences of the same issue, namely that the lack of support in court hearings for IVO's or Family Law Matters has led to women consenting to orders that put their and their children's safety at risk.

Are there any changes resulting from the COVID-19 pandemic that you think should be continued?

The flexibility to work from home has been a positive for some, though we should stress this is absolutely not universal feedback. Having some measures in place for workers across the sector to continue to do this in future, so long as it was not obligatory, could be a positive step.

General Comments

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

Many of the issues noted by the union and our members seem to be fixable and symptomatic of broad scale change needing more reform, but also sufficient time and resourcing for implementation. We acknowledge the magnitude of undertaking to implement the recommendations of the RCFV, and the both relative and absolute inadequacy of the Commonwealth's commitment.

"The feds need to get on board"

"More realistic options to escape family violence have been created, but the ability to obtain an adequate income through crisis and recovery remains a significant obstacle. Parenting Payment and an option for single adults escaping FV need substantial reform."

We have provided other feedback directly to the Implementation Monitor, and acknowledge the time provided to discuss some of the workforce initiatives. The ASU would welcome an ongoing role to be performed by the Implementation Monitor to ensure that the critical work being undertaken by our members and others can be implemented in the manner intended by the RCFV.

The ASU acknowledges the generous input of the members who contributed to this submission. We note the current increased challenges of working

during the pandemic, and suspect that this has inhibited input from some of our most negatively impacted members. We further note that the FV sector is subject to frequent surveys from a range of sources. This was noted by some respondents, and others, for instance when we publicised this submission process via social media. The workforce is seeking to be heard, and for workers to have their input acted upon, their union is in a unique position to facilitate this message. This submission has tried to reflect some of these experiences from other sources, member meetings, feedback from ASU delegates and health and safety representatives in workplaces to reflect a broader picture. The ASU appreciates the opportunity to submit on the behalf of, and reflecting the experience of our members.