

Report of the Family Violence Reform Implementation Monitor

As at 1 November 2020



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Family violence services and support

If you have experienced violence or sexual assault and require immediate or ongoing assistance, contact **1800 RESPECT (1800 737 732)** to talk to a counsellor from the National Sexual Assault and Domestic Violence hotline. For confidential support and information, contact Safe Steps' 24/7 family violence response line on **1800 015 188**. If you are concerned for your safety or that of someone else, please contact the police in your state or territory, or call **Triple Zero (000)** for emergency assistance.

Aboriginal Acknowledgment

The Victorian Government proudly acknowledges Victorian Aboriginal people as the first peoples and Traditional Owners and custodians of the land and water on which we rely. We acknowledge and respect that Aboriginal communities are steeped in traditions and customs built on an incredibly disciplined social and cultural order. This social and cultural order has sustained up to 60,000 years of existence. We acknowledge the ongoing leadership role of the Aboriginal community in addressing and preventing family violence and join with our First Peoples to eliminate family violence from all communities.

*Ordered to be published
Victorian Government Printer
May 2021*

PP No 218, Session 2018–2021

Foreword



Jan Shuard PSM
Family Violence Reform
Implementation Monitor

It goes without saying that this has been an extraordinary year – one that has tested the resilience and agility of the family violence service system and all its parts. The response to this crisis has been impressive. It has highlighted the ability, depth and dedication of the service sector and agencies to ensure the needs of victim survivors remained at the centre of their work and that perpetrators were kept in view. We have seen a rapid reorientation of services and creative approaches deployed in record time, enabled by a willingness of government agencies and sector organisations to work together to get things done. It has also underlined the limitations in data systems to fully understand and measure change, service requirements and availability.

The restrictions that have been in place and the demands on agencies and my staff have had some impact on our monitoring work. However, the support and engagement we have experienced has been humbling within the context of the enormous pressures on agencies and the sector. While we have not been able to visit the services and see them in operation since March 2020, and we have sorely missed this aspect of our work, our activities have continued in the virtual world and the commitment of our stakeholders has not waned. The continuing dedication to the ongoing reform agenda during these difficult times has been significant.

Over the past 12 months, in preparing for this final implementation report, we have taken a broader perspective by looking back over the years since the Victorian Royal Commission into Family Violence handed down its findings in March 2016. We have therefore featured in this final report under the legislation, the major accomplishments that form the foundations of systemic change.

While there has been substantial progress since the Royal Commission and during this past unpredictable year, this report also draws attention to areas where more effort and consideration is needed. Data must be improved to better understand the impact of the reform and the effect investments are having on outcomes. There must be more focus on children and young people as specific victims of family violence and adolescents who use violence in the

home. But again, this is an area where the absence of sound data makes it difficult to quantify and understand what is available and if services are meeting demand.

It has taken more than four years to develop a perpetrator accountability framework and, while the whole of Victorian government perpetrator accountability work program is welcome, it now requires urgent action. To truly hold those who use violence within the family to account, programs and services to address this behaviour must be readily available. There are lost opportunities where perpetrators do not have early and prompt access to behaviour change programs, and these undermine perpetrator accountability.

Our report stresses the need for ongoing expansion of safe housing options for women fleeing family violence. For example, there has not been enough emphasis on supporting women who choose to remain in the family home where it is safe to do so. Housing responses to family violence remain an underdeveloped area, noting the significant investment in public housing in the 2020/21 Victorian Budget as a positive step.

In this report, when discussing reform activity for this monitoring period, we have been mindful to only cite the progress of implementation and actions completed between 1 November 2019 and 1 November 2020. Naturally, this can be difficult for agencies that share work that is planned or in progress and would no doubt like to see this acknowledged. Nonetheless, it is only proper for our reporting to focus on activities where there is evidence of implementation action.

However, given the impacts of the coronavirus (COVID-19) pandemic, there are two exceptions to this rule. The first is that we have included relevant information from the 2020/21 Victorian Budget delivered on 24 November 2020. The second is that reference to the new Rolling Action Plan published on 10 December 2020 is included in the report as development of the plan was undertaken during the monitoring period. The delayed delivery of both the State Budget and the Rolling Action Plan are understandable in the context of the emergency environment.

We have seen an important shift this year towards a greater focus on the systemic drivers of gender inequality with the infrastructure to support implementation of the *Gender Equality Act 2020*. This is a signal that the government is committed to addressing the underlying causes of family violence. This, the education campaigns on the different forms of family violence and the further expansion of the Respectful Relationships program in schools, are all critical to changing behaviours and ending family violence.

Although so many of our interactions are impressive and would warrant mentions, there are special moments that have particularly touched me throughout our consultations that I want to share:

- > speaking with the inspiring young people from Berry Street's Y-Change Team who are victim survivors of family violence and presented with such eloquence
- > feeling the commitment and passion of Family Violence Regional Integration Committees in driving change for their local and regional communities and being responsive and flexible in their approach
- > the resilience and innovation of the Dhelk Dja Partnership Forums where our Aboriginal community leaders strive to make real and lasting change for their people
- > the passion and impressive work undertaken at Hume Central Secondary College embedding a whole of school Respectful Relationships model
- > the Court Services Victoria approach that fully integrates the lived experience of a victim survivor of family violence in the design and delivery of court services at every level.

An important input into our monitoring this year were the 125 responses we gratefully received to my call for submissions in July 2020. A huge thank you goes to every individual and organisation who took the time to share their experiences, expertise and suggestions. We owe a debt of gratitude to all who contributed during the time when agencies and the sector had so much to do, but still found time to prepare a submission. Our report has not been able to do justice to the breadth and depth of insights provided in submissions and I urge readers to read these on our website for themselves: www.fvrim.vic.gov.au.

These submissions, along with my team's deep analysis on targeted topics, have helped form a systemic view of progress since the Royal Commission and have guided us in determining the areas that require more effort and will be the focus of future monitoring.

I must acknowledge the amazing work of the Family Violence Reform Implementation Monitor staff and their tireless efforts and support of me in doing justice to our important task. Like others, they have had to juggle family responsibilities, working from home and reduced staffing so we too could contribute to the coronavirus (COVID-19) pandemic response. I hope the effort and quality of their work is valued by the readers of this report.

We are delighted that the function of the Family Violence Reform Implementation Monitor has been extended for another 18 months, as announced in the 2020/21 Victorian Budget. It will now be our task to decide what form this new phase of independent monitoring and reporting should take so it continues to add a perspective that is valued and ensures the lived experience of victim survivors is heard.

I thank those in the Department of Premier and Cabinet's (then) Family Violence Branch and Family Safety Victoria for their assistance, transparency and collaboration. Without these strong relationships and their support, we would not be able to deliver a report to parliament and the public that makes a meaningful contribution to this reform.

We are also grateful to all those across the service sector and government for their cooperation, sharing of information and insights on the family violence reform program. This combination of views and access to documents and expertise has allowed us to form an independent perspective on the progress of implementation of the reform agenda.



Jan Shuard PSM

Family Violence Reform Implementation Monitor

Introduction

This is the fourth report of the Family Violence Reform Implementation Monitor and the final report tabled in parliament as specified in section 23(1) of the *Family Violence Reform Implementation Monitor Act 2016*. The report covers reform implementation for the period 1 November 2019 to 1 November 2020.

As the final report under the current monitoring arrangements, the report also looks back over the nearly five years since the Royal Commission into Family Violence to highlight the major achievements in implementing the reform to date, as well as the areas that require more effort and should be the focus of future monitoring.

In taking a systemic view, the report considers the overall progress of implementation against the 11 ‘system limitations’ described in the Royal Commission’s report to assess the extent to which these constraints have been addressed nearly five years into the 10-year reform program.

With this broader focus, a different monitoring approach was adopted than in previous years. In addition to deep dives into specific topics, the Monitor called for submissions from the sector and other stakeholders on the questions of ‘What has changed since the Royal Commission?’ and ‘What remains to be done?’. An implementation science model was also applied to three areas of the reform to assess the implementation approaches against the evidence base on effective implementation to identify strengths and opportunities for improvement. A full description of the monitoring approach is provided in Appendix 1.

Given the significant disruption of the coronavirus (COVID-19) pandemic to government and the service sector, this report specifically examines the government’s COVID-19 response in the family violence context.

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Chapter 1

What has changed since the Royal Commission into Family Violence?

The Royal Commission into Family Violence handed down its report and recommendations at the end of March 2016. The Victorian Government committed to implementing all 227 of the recommendations and subsequently released its 10-year reform plan, Ending Family Violence: Victoria's Plan for Change, in November 2016 and the first Family Violence Rolling Action Plan 2017–2020 in May 2017.¹ These documents comprise the government's implementation plans for the reform. The 10-year reform plan sets out a vision for the future 'where all Victorians are safe, thriving and living free from family violence'.²

There has been substantial progress since the Royal Commission

Much has changed since the Royal Commission handed down its report and recommendations. The Monitor's consultations throughout 2020 and submissions from government and non-government organisations and individuals have highlighted these key areas of progress. Selected quotes from submissions are presented throughout this section to illustrate stakeholder perspectives, while changes in funding, demand and service delivery over the past five years across different areas of the reform are also illustrated in Figure 1.1.

Funding as a foundation of the reform

The Victorian Government has made an unprecedented investment in family violence since the Royal Commission, with \$2.9 billion allocated across successive budgets. The funding allocation not only reflects the government's commitment to addressing family violence but is a key foundation supporting the transformation of the system to meet the needs of victim survivors and prevent family violence.

"...the \$2.9 billion investment in development and services in the five years that followed represents a significant step forward in addressing unmet need for services and making the systemic changes that will underpin the achievement of better outcomes."
– Victorian Council of Social Service

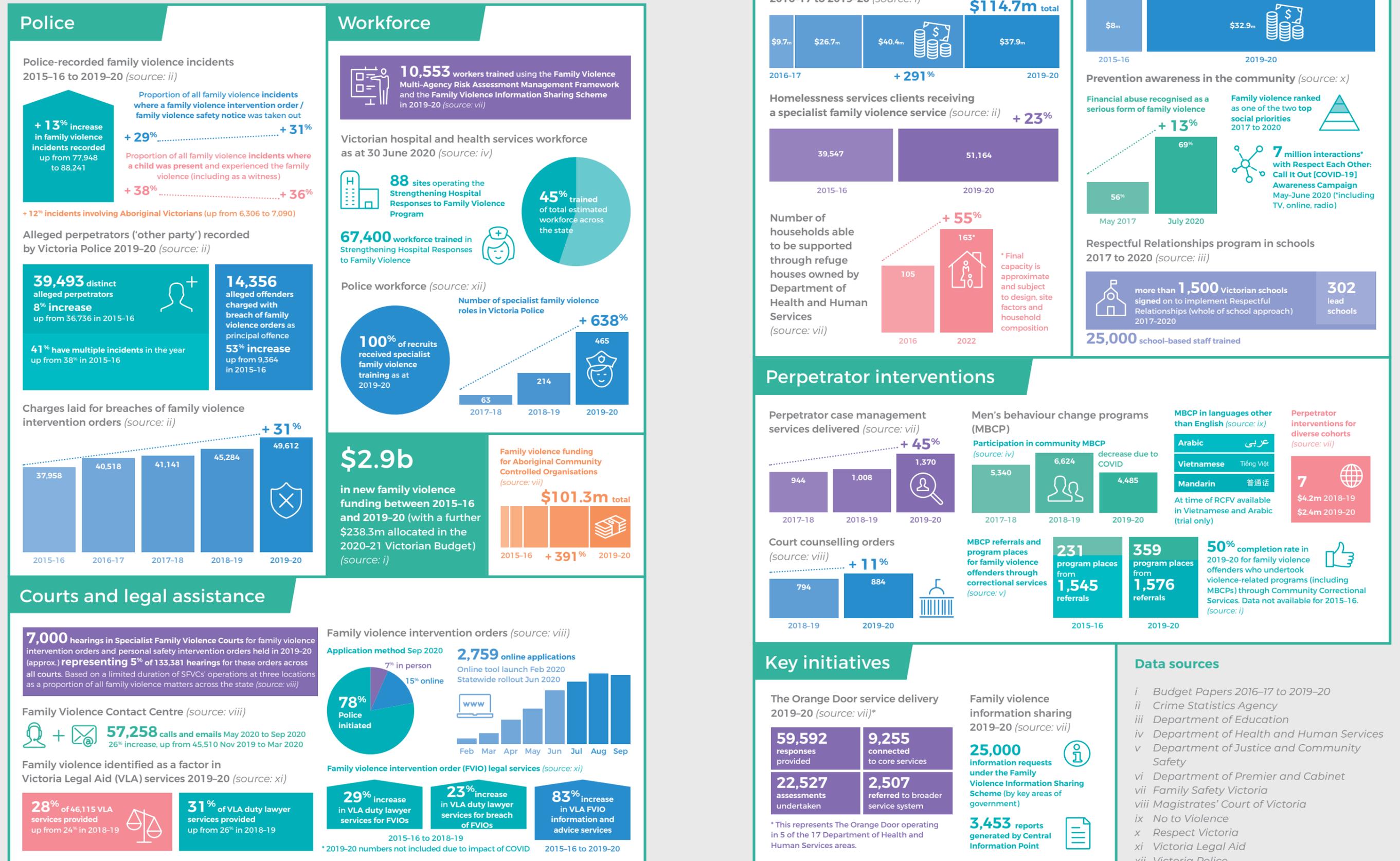
The 2020/21 Victorian Budget provided a further \$238 million for family violence and gender equality initiatives including:

- > family violence service delivery
 - therapeutic interventions – \$87.3 million
 - perpetrator accountability – \$10.7 million
 - Central Information Point – \$7.9 million
 - family violence refuge responses – \$18.2 million
 - court responses to family violence – \$1.9 million
- > primary prevention
 - continuation of Respectful Relationships in schools and early childhood settings – \$37.5 million
 - prevention and early intervention with culturally diverse communities – \$9.7 million
- > gender equality programs – \$16.9 million
- > employment pathways for women, including building the family violence and sexual assault workforces – \$16.6 million
- > continued implementation of the Family Violence Multi-Agency Risk Assessment and Management (MARAM) Framework and information-sharing scheme – \$2.7 million
- > responding to elder abuse and addressing social connections – \$6.7 million
- > further family violence measures to respond to the coronavirus (COVID-19) pandemic – \$20.4 million
- > Family Violence Reform Implementation Monitor – \$1.6 million.

An additional Specialist Family Violence Court has also been funded as part of the Wyndham Law Courts development.

The 2020/21 Victorian Budget also included significant investment in housing, mental health services, childcare, maternal and child health services, and women's employment initiatives, which will benefit Victorians who are experiencing, or at risk of experiencing, family violence.

Figure 1.1
What has changed since the Royal Commission into Family Violence 2016–2020



Legislation as architecture of the reform

Substantial law reform has been undertaken in Victoria since the Royal Commission, spanning technical amendments to procedures and offences through to creating new public entities and frameworks. Some highlights include:

- > establishing the Family Violence Information Sharing Scheme and MARAM Framework under the *Family Violence Protection Act 2008*
- > amending the *Public Health and Wellbeing Act 2008* to require local councils to specify measures to prevent family violence and respond to the needs of victims of family violence in the local community in their municipal public health and wellbeing plans
- > amending the *Magistrates' Court Act 1989* to include the Specialist Family Violence Court Division
- > amending the *Family Violence Protection Act* to enable and enhance access to online intervention order applications
- > creating the Family Violence Scheme under the *Fines Reform Act 2014* and amending the *Infringements Act 2006* to include family violence as a 'special circumstance' to have fines reviewed
- > introducing the *Prevention of Family Violence Act 2018*, establishing Respect Victoria as a statutory entity
- > amending the *Residential Tenancies Act 1997*, which, for example, prevented tenants from being 'blacklisted' for breaking a lease due to family violence
- > introducing the *Gender Equality Act 2020*, which requires defined public entities to promote gender equity in the workplace when developing policies and programs and delivering services to the public.

The Gender Equality Act 2020 provides "a strong policy platform, clear vision and leadership in Victoria." – Respect Victoria

The MARAM framework is expected to *"make an enormous difference to the safety and well-being of victim survivors."* – Barwon Area Integrated Family Violence Committee

"Maternal and Child Health services across local government are implementing MARAM and Information Sharing into policies and practice; including identification and screening for family violence risk assessment and management." – Municipal Association of Victoria

"The implementation of the [Family Violence Scheme] in 2017... has made a real difference for family violence victim-survivors. In particular, the [scheme] has provided a mechanism for eligible victim-survivors to exit the fines system safely and more efficiently." – Unpublished submission, Infringements Working Group³

"...the Family Violence Information Sharing Scheme and [Child] Information Sharing Scheme came up repeatedly as positive changes that have made a real difference to the work being done to support victim survivors." – Australian Services Union Victorian and Tasmanian Authorities Services Branch

Submissions to the Monitor highlighted the impact of law reforms on the operation of the family violence and justice systems, particularly in relation to improved information sharing, which is leading to better risk assessment and perpetrator accountability.⁴

Working in tandem with the Family Violence Information Sharing Scheme and MARAM Framework is the Child Information Sharing Scheme, established under the *Child Wellbeing and Safety Act 2005*. The Child Information Sharing Scheme allows authorised organisations to share information to support child wellbeing or safety. While the objectives of the Child Information Sharing Scheme are broader than family violence, the information sharing schemes work alongside each other to ensure that professionals working with children can gain a complete view of the children they work with, making it easier to identify wellbeing or safety needs earlier, and to act on them sooner.

Dedicated agencies to drive change

A critical mechanism for driving change has been establishing government agencies dedicated to keeping Victorians safe from family violence and progressing primary prevention and gender equality in Victoria, including Family Safety Victoria, Respect Victoria and the Commission for Gender Equality in the Public Sector. Governance has also been refined and strengthened, with relevant government departments having specific branches responsible for overseeing reform delivery and cross-government coordination through the Family Violence Reform Interdepartmental Committee. The establishment of Family Violence Principal Practitioner roles within key departments is also strengthening workforce development and practice transformation.

"Respect Victoria...provides for the first time an institutionalised, research centric framework for planning, implementing and monitoring primary prevention." – AustralAsian Centre for Human Rights and Health

The creation of specific departmental branches for family violence strategy, policy and implementation has *"resulted in a strengthening of laws and cultural change within mainstream government services."* – Gender Equity Victoria

Transforming practice within public sector agencies

There have been significant practice changes within public sector agencies since the Royal Commission, driven through a growing acknowledgement that family violence prevention and early intervention is ‘everybody’s business’. The MARAM Framework has been instrumental in supporting this transformation and was given substantial attention in submissions to the Monitor, with inTouch Multicultural Centre Against Family Violence describing the framework and information sharing as ‘incredible developments’.⁵

Practice transformations are happening in universal services such as education, health and mental health, even in advance of rolling out the MARAM Framework in these sectors. For example, since the Royal Commission, screening for family violence in public antenatal settings has increased,⁶ and the Strengthening Hospital Responses to Family Violence model is changing how hospitals and health services address family violence. In schools and early childhood settings, the Respectful Relationships program is building a culture of gender equality and respect and providing teachers with the skills and capacity to respond to disclosures of family violence.

Police responses to family violence have also changed considerably. In particular, the way in which ‘female victims are treated by police’ was seen to have improved⁷ because of better training and the introduction of specialist Family Violence Investigation Units.⁸ Specialist Family Violence Courts, with their focus on early engagement and holistic responses – supported by purpose-built facilities, local service integration and a specialist workforce – have also been welcomed by stakeholders.

Since the Royal Commission, there has been increased collaboration between public sector agencies and community-based organisations. No

“...one area that has improved since the reforms began is **police responses...** and how family violence investigations occur. This is having positive effects in terms of how victim-survivors **interact with police.**” – Victorian Council of Social Service

“...the introduction of the [Family Violence Investigation Units] into most Victorian Police stations has been great. Having a specific unit monitoring high-risk incidents, [affected family members] and respondents has meant more understanding of the complexities and nuances of [family violence] and risk leading to **a more appropriate response from the officers...**” – Individual, Grampians Community Health

“...Central Information Point is providing access to valuable risk information on perpetrators which has **improved risk assessment and safety planning** for women and their children.” – Barwon Area Integrated Family Violence Committee

“Greater collaboration between services has been noted since the implementation of the Commission’s recommendation, which has seen a higher rate of referrals into specialised supports, and hopefully **a more cohesive and safe experience for clients** who use multiple service systems.” – Peninsula Health

to Violence⁹ noted that the family violence reform ‘provided an urgency for greater collaboration between services, Peak bodies and government departments’, while the Victorian Council of Social Service identified that ‘improved relationships and stronger collaboration within organisations is starting to occur’.¹⁰ The coronavirus (COVID-19) pandemic in particular necessitated much closer collaboration between government and the sector in order to redesign service delivery to respond to the increased risk of family violence and limitations created by the public health restrictions imposed to control the spread of the virus.

Increased collaboration and the progressive transformation of practice are resulting in improved identification of family violence, earlier intervention, more sensitive interactions with victim survivors and greater visibility of perpetrators.

Increased awareness and changing community attitudes

The government’s public and visible commitment to addressing gender inequality and family violence, and the considerable work of the sector and government in the years since the Royal Commission, is progressively improving community awareness of both as broad social problems.

Increased funding for research was identified as integral to improved understanding about family violence,¹¹ while the effectiveness of prevention campaigns and programs have been credited with helping change community attitudes. Work undertaken by Respect Victoria to evaluate its community campaigns (illustrated in Figure 1.1) shows that family violence is consistently ranked first or second as Victorians’ top priority social issue, and community understanding of the more nuanced aspects of family violence, such as financial control, are improving.

Government has developed Safe and Strong: A Victorian Gender Equality Strategy, a five-year plan to drive attitudinal and behaviour change in order

“In [Specialist Family Violence Courts] taking a holistic approach... our members are reporting **marked improvements for their clients, both complainants and perpetrators.**” – Law Institute of Victoria

“...the **safety of children** is being considered in **family violence assessment more routinely.** In hospitals this means that children are being considered even if the adult is the patient.” – Monash Health

“...community attitudes about family violence **appear to be shifting,** with a greater understanding that violence is never acceptable and that addressing it is a whole of community responsibility.” – cohealth

“There is also **greater discussion about the causes of family violence** and challenging of myths and victim-blaming attitudes.” – Victorian Council of Social Service

“The advertisements on television, radio and newspapers are important. **Raw, real and for all to see** and think about. As a viewer the issue is brought **straight into our living rooms.**” – Individual, Victim Survivors’ Advisory Council

to achieve gender equality and prevent violence against women. The mid-term achievement report, released in December 2019, identifies progress across a broad range of areas including women's representation in leadership, education, sports and industry participation, and public sector reforms. The first Gender Equality Baseline Report was released in November 2019 and provides a baseline measure of gender equality that will allow the Victorian Government to measure progress on key gender equality priorities.

A strong focus on the diverse needs of victim survivors and perpetrators

From the outset, victim survivors' voices and diversity have been strong features of the reform. Efforts to improve the systematic inclusion of victim survivors' voices, including the establishment of the Victim Survivors' Advisory Council in 2016, are discussed in chapter 8 of this report.

There have been concerted efforts to reorient towards more diverse and tailored approaches to family violence prevention and response, including through developing new services for specific communities and expanding existing services to make them more inclusive. Some examples of this work include:

- > incorporating intersectionality across the MARAM Framework, including the Foundation Knowledge Guide and victim survivor-focused practice guides
- > trialling initiatives that test tailored primary prevention approaches in multicultural and diverse communities, including the Safer and Stronger Communities Pilot, the Capacity Building and Participation Program and the LGBTIQ Family Violence Primary Prevention Project
- > funding of prevention projects for Aboriginal communities, including through the Preventing the Cycle of Violence Aboriginal Fund and the Aboriginal Family Violence Primary Prevention Innovation Fund

“Stronger support for vulnerable communities through focus on intersectionality in the MARAM.”
– Goulburn Family Violence Executive

“Efforts have been made to respond to a more diverse group of survivors who have had difficulty accessing therapeutic supports such as...members of the LGBTIQ community.” – Eastern Metropolitan Family Violence Partnership

“The Royal Commission has provided more holistic, culturally safe, trauma informed, therapeutic services for Aboriginal women, children, young people and men.”
– Victorian Aboriginal Child Care Agency

“A genuine commitment to listening to victim survivors has been considerably strengthened since the Royal Commission.”
– Eastern Metropolitan Regional Family Violence Partnership

“I found it affirming and empowering to have my voice heard and to use my experience to help others. I felt that at least all the trauma I went through could be used to help others and that made it more bearable.” – Experts by Experience, Domestic Violence Victoria

- > establishing the 'With Respect' LGBTIQ specialist family violence service model – comprising Thorne Harbour Health, Switchboard Victoria, Transgender Victoria and Drummond Street Services (Queerspace) – to provide appropriate and safe responses for LGBTIQ communities
- > expanding inTouch Multicultural Centre Against Family Violence's service into regional Victoria
- > creating a Statewide Disability Inclusion Advisor position at Domestic Violence Victoria, in partnership with Women with Disabilities Victoria, to focus on upskilling the specialist sector
- > developing intersectionality capacity building resources to equip specialist family violence and universal services workforces to apply an intersectional approach to service provision
- > trialling LGBTIQ family violence practitioners at the Neighbourhood Justice Centre and Heidelberg and Melbourne Magistrates' Courts
- > providing dedicated Koori men's and women's family violence practitioner services through the Umalek Balit program at the Shepparton and Ballarat Specialist Family Violence Courts and the Mildura and Melbourne Magistrates' Courts
- > developing the Nargneit Birrang: Aboriginal Holistic Healing Framework for Family Violence.

This effort has been welcomed by communities and their advocacy groups. Stakeholders also acknowledge the collaborative approach taken by government, with a range of working groups and forums established to engage them in developing diverse and intersectional approaches and initiatives.

Reform of the scale envisioned by the Royal Commission requires sustained and long-term change. Despite the substantial progress to date, there remains much to be done to realise the vision set out in the government's 10-year reform plan. The remaining chapters in this report provide an in-depth examination of key areas of the reform, with a focus on systemic issues that have the potential to inhibit

“The Integrated Model of Care elder abuse pilots have seen good success in raising awareness and understanding of elder abuse as a form of family violence.” – Peninsula Health

“Our bilingual and multilingual case managers provide more support to clients than ever before.” – inTouch Multicultural Centre Against Family Violence

“We see [Umalek Balit] as a significant step forward for Victorian courts in recognising and responding to the unique cultural and safety needs of Victorian Aboriginal communities and improving Victorian Aboriginal communities confidence in the courts and justice system.” – Djirra

its effectiveness and to assess the overall progress against the system limitations identified by the Royal Commission to identify the most pressing areas of focus for the next stage of the reform.

Implementation activity to 1 November 2020

Acquitting the Royal Commission's recommendations

As of 1 November 2020, 166 of the Royal Commission's 227 recommendations have been acquitted and 61 recommendations remain in progress, all of which are expected to be implemented by mid-2022 (Figure 1.2).

During the monitoring period from 1 November 2019 to 1 November 2020, 23 recommendations were implemented, with seven of these implemented earlier than their approved timeline for completion.¹²

Extensions to implementation timelines were sought for a further 15 recommendations that were due to be implemented during the monitoring period.¹³ These included establishing the secure Central Information Point, extending the Adolescent Family Violence Program across Victoria and the work to ensure refuge and crisis accommodation can meet the needs of children. The impact of the coronavirus (COVID-19) pandemic on implementation progress was cited by agencies in seven of the 15 recommendation extension requests. Impacts identified included an inability to engage with the required stakeholders, staffing being redirected to the crisis response, and the delayed 2020/21 Victorian Budget.

Major achievements during the monitoring period

The understandable diversion of government effort and staff to support the crisis response to the coronavirus (COVID-19) pandemic posed a challenge for maintaining reform momentum in 2020. This, along with the delayed State Budget and inability to progress some elements of the reform program during restrictions, have had an

impact on reform delivery timeframes. Nevertheless, there has been progress on planned reform initiatives, with a number of significant initiatives – including the opening of the Loddon and Central Highlands sites of The Orange Door (previously Support and Safety Hubs) – delivered during the monitoring period.

Figure 1.3 provides an overview of the more significant achievements between 1 November 2019 and 1 November 2020. Not all the substantial reform activity undertaken during this period, which includes the continued delivery and refinement of existing initiatives, is detailed here. Further information on progress in implementing the reform agenda is outlined throughout this report and in the government's second Family Violence Reform Rolling Action Plan 2020–2023.

Figure 1.2: Recommendations implemented and in progress



Figure 1.3: Major achievements during the monitoring period

– 1 November 2019 to 1 November 2020

The government identified four outcomes for the reform in Ending Family Violence: Victoria's Plan for Change and outlined its implementation approach in the first Family Violence Rolling Action Plan 2017–2020. A selection of major achievements and milestones during the monitoring period aligned to the outcome areas are detailed here.

Family violence and gender inequality are not tolerated

- Extension of Victoria's existing seven-year partnership with Our Watch to 10 years in June 2020, through a further \$3 million in core funding over the next three years to support national primary prevention efforts and the delivery of Victoria's Free from Violence prevention strategy and action plans.
- Delivery of primary prevention campaigns:
 - Respect Women: 'Call It Out' (Public Transport) – November 2019
 - Respect Each Other: 'Call It Out' (COVID-19) – May 2020
 - Respect Older People: 'Call It Out' – June 2020
 - Respect Each Other: Connection Keeps Us Strong – September 2020
 - Sexism and Sport: 'Call It Out' – October 2020
 - Release of the first Gender Equality Baseline Report in November 2019.

Preventing and responding to family violence is systemic and enduring

- Release of Strengthening the Foundations: First Rolling Action Plan 2019–22 – the first implementation plan resulting from Building from Strength: 10-Year Industry Plan for Family Violence Prevention and Response in November 2019.
- Release of the Family Violence Data Collection Framework in December 2019.
- Launch of the 'So, what do you do?' campaign promoting awareness of the family violence sector, and the family violence Jobs Hub, a dedicated recruitment website for the sector in May 2020.
- Incorporation of public sector family violence leave into all public sector enterprise agreements in June 2020.
- Enactment of the Gender Equality Act in February 2020 to address gender inequality and the gendered drivers of violence in the public sector, and establishment of the Public Sector Gender Equality Commissioner.

Victim survivors, vulnerable children and families are safe and supported to recover and thrive

- \$21 million in new funding in November 2019 for therapeutic interventions for victim survivors, including \$5 million dedicated for Aboriginal communities, with 40 per cent of the funding directed to support children and young people.
- Release of Nargneit Birrang: Aboriginal Holistic Healing Framework for Family Violence in December 2019.
- Statewide rollout of the Family Violence Intervention Order online application form in the Magistrates' Court of Victoria in June 2020.
- Opening of the Ballarat Specialist Family Violence Court in November 2019 and commencement of Moorabbin Magistrates' Court as a Specialist Family Violence Court in March 2020.
- Opening of The Orange Door in the Central Highlands and Loddon areas in October 2020.
- Distribution of 250,000 wallet cards and posters containing information about family violence and support services through supermarkets, hotels accommodating homeless people, public housing, rooming houses and residential services in October 2020.

Perpetrators are held to account, engaged and connected

- Start of the new Court Mandated Counselling Order Program in January 2020 at Specialist Family Violence Courts.
- Introduction of legislation in June 2020 amending the Family Violence Protection Act and the *Sheriff Act 2009* to enable sheriff officers to trial the service of low-risk applications for family violence intervention orders.
- Articulation of a whole of Victorian Government perpetrator accountability work program in October 2020, including a redeveloped perpetrator outcome domain of the Family Violence Outcomes Framework.

A plan for responding to the coronavirus (COVID-19) pandemic was developed

In addition to planned reform implementation activity outlined here, significant government effort has gone into the response to the coronavirus (COVID-19) pandemic during the monitoring period. This activity is described in Chapter 9 of this report.

References

- 1 The Victorian Government released the second Family Violence Rolling Action Plan 2020–2023 in December 2020.
- 2 Victorian Government (2016): Ending Family Violence: Victoria's Plan for Change, p. 9. Available at: vic.gov.au/ending-family-violence-victorias-10-year-plan-change (accessed 4 December 2020).
- 3 The Infringements Working Group is a Victorian alliance of 38 organisations from the legal assistance, financial counselling and community-service sectors, which is convened by Justice Connect, WEstjustice and Uniting ReGen.
- 4 No to Violence, submission 33.
- 5 inTouch Multicultural Centre Against FV, submission 85, p. 2.
- 6 Royal Women's Hospital, submission 76.
- 7 Individual – Cardijn Community of Australia, submission 19, p. 1.
- 8 cohealth, submission 71.
- 9 No to Violence, submission 33, p. 1.
- 10 Victorian Council of Social Service, submission 44, p. 26.
- 11 AustralAsian Centre for Human Rights and Health, submission 107.
- 12 Noting that for most of these the original timeframes provided by the Royal Commission had previously been extended.
- 13 Extensions to implementation timelines were sought for a further 11 recommendations that were due for completion after 1 November 2020.

Chapter 2

Implementation reviews

Implementation science methods have been applied to review three programs within the family violence reform: Respectful Relationships education in schools; Specialist Family Violence Courts; and The Orange Door – Central Highlands.

The reviews sought to provide:

- > a high-level description of the implementation process, with a view to understanding the pace, duration and key activities undertaken to date
- > insights into the implementation barriers and enablers encountered for each program
- > recommendations for how to enhance implementation processes for future initiatives, including strategies for addressing the known barriers.

To achieve the above, two key frameworks – an integrated staged implementation framework¹⁴ and the Consolidated Framework for Implementation Research framework¹⁵ – were applied to the three areas of the reform. More about the frameworks and implementation review methodology can be found in Appendix 1.

Application of implementation frameworks to the reform

Implementation stages

The reviews considered implementation across four stages that are commonly recognised by implementation scientists:

1. **Engage and explore:** Key activities in this stage include deciding what needs to change, and for whom; engaging stakeholders; establishing teaming structures and preparing implementation champions; and exploring the readiness of the organisation(s) or systems(s).
2. **Plan and prepare:** Key activities in this stage include developing an explicit plan for implementation and enhancing readiness to initiate (e.g. recruiting and training staff, policy development).
3. **Initiate and refine:** The program or practice starts being used; data are used to drive decision making for continuous quality improvement.
4. **Sustain and scale:** The initiative is sustained, embedded as ‘business as usual’; the initiative is expanded or scaled up. A new implementation cycle may begin.

This staged implementation framework was used to guide high-level descriptions of the program implementation processes, including the progress to date, implementation pace and key activities undertaken (or skipped) in each stage.

Due to common implementation barriers (e.g. short timelines, funding deadlines), the process is rarely linear through the four stages. Back-and-forth movement between stages is common.

Enablers and barriers to implementation

The reviews also considered barriers and enablers to effective implementation according to five domains from the Consolidated Framework for Implementation Research.

1. **Individual characteristics:** Characteristics of the people involved in implementing the initiative.
2. **Program/policy characteristics:** Characteristics of the initiative itself.
3. **Inner setting:** Characteristics of the organisation or system within which the initiative is being implemented.
4. **Outer setting:** Characteristics of the surrounding context or environment.
5. **Implementation process:** Characteristics of the implementation process itself.

Within each of these domains, there are specific influencing factors that can act as barriers or enablers to implementation. For brevity, these domains have been simplified in the review diagrams (Figures 2.1 to 2.3) and use the terms ‘program’, ‘people’, ‘organisation’, ‘system’ and ‘process’.

Figure 2.1

Stages of implementation: Respectful Relationships

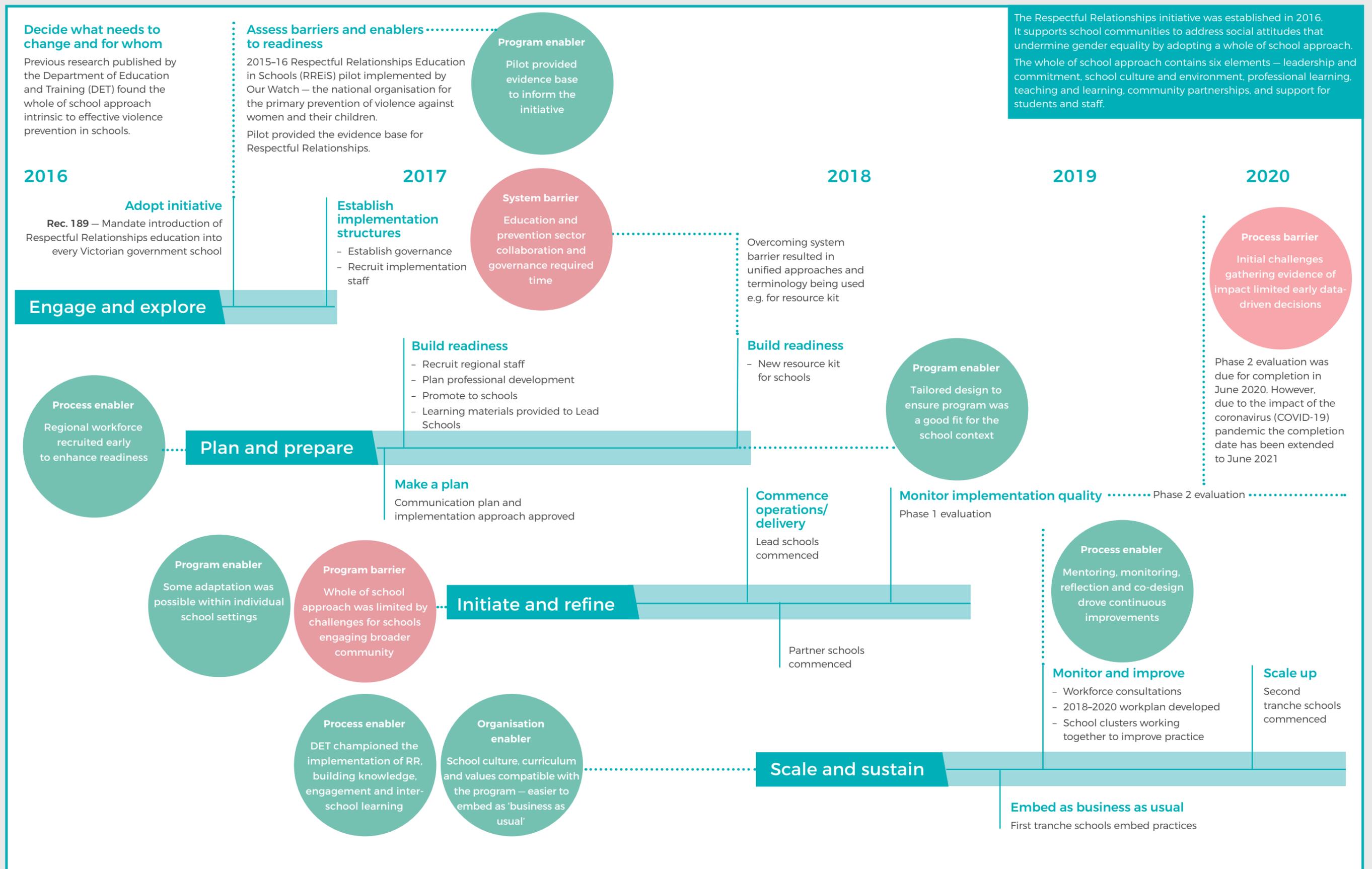


Figure 2.2

Stages of implementation: Specialist Family Violence Courts

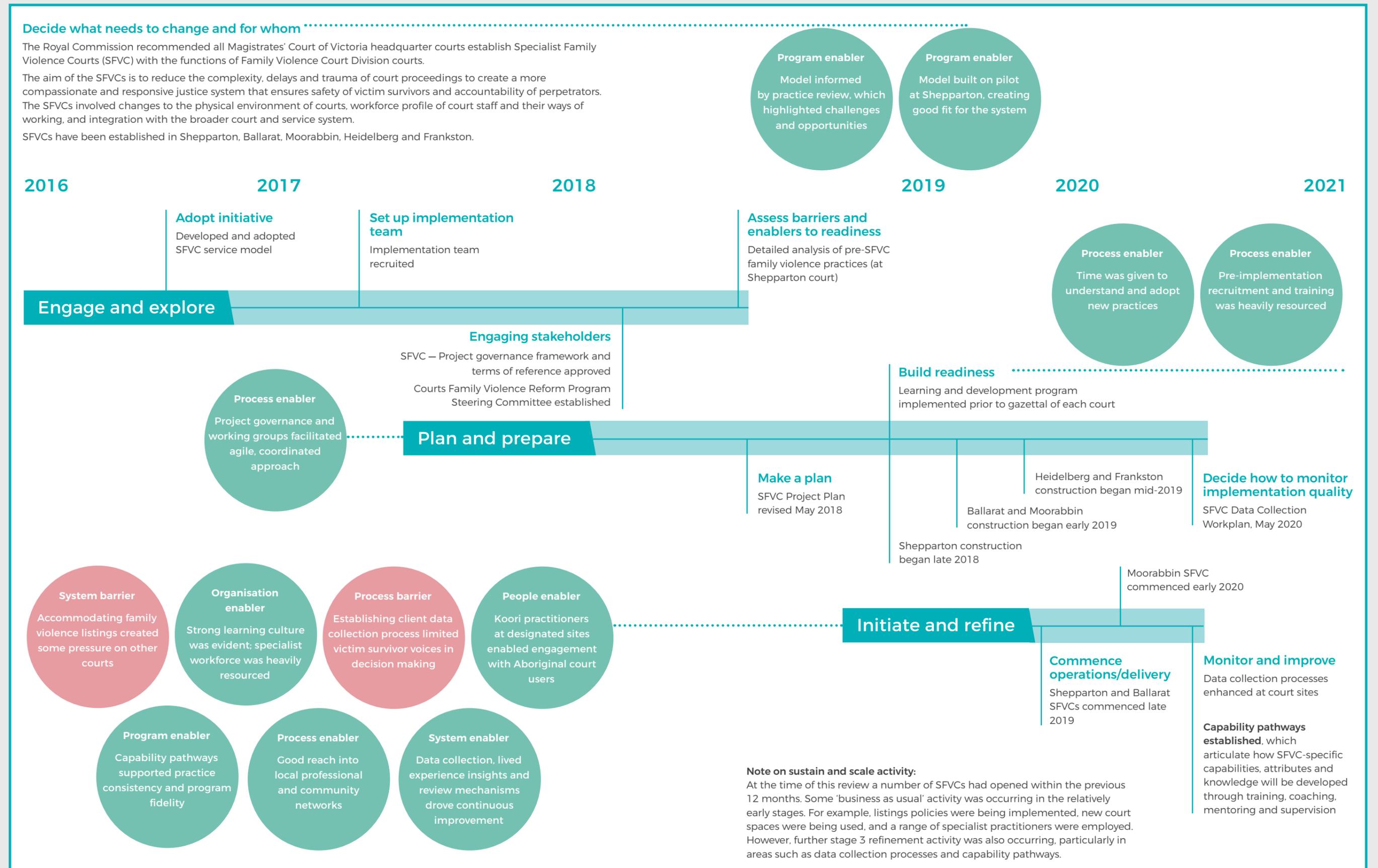
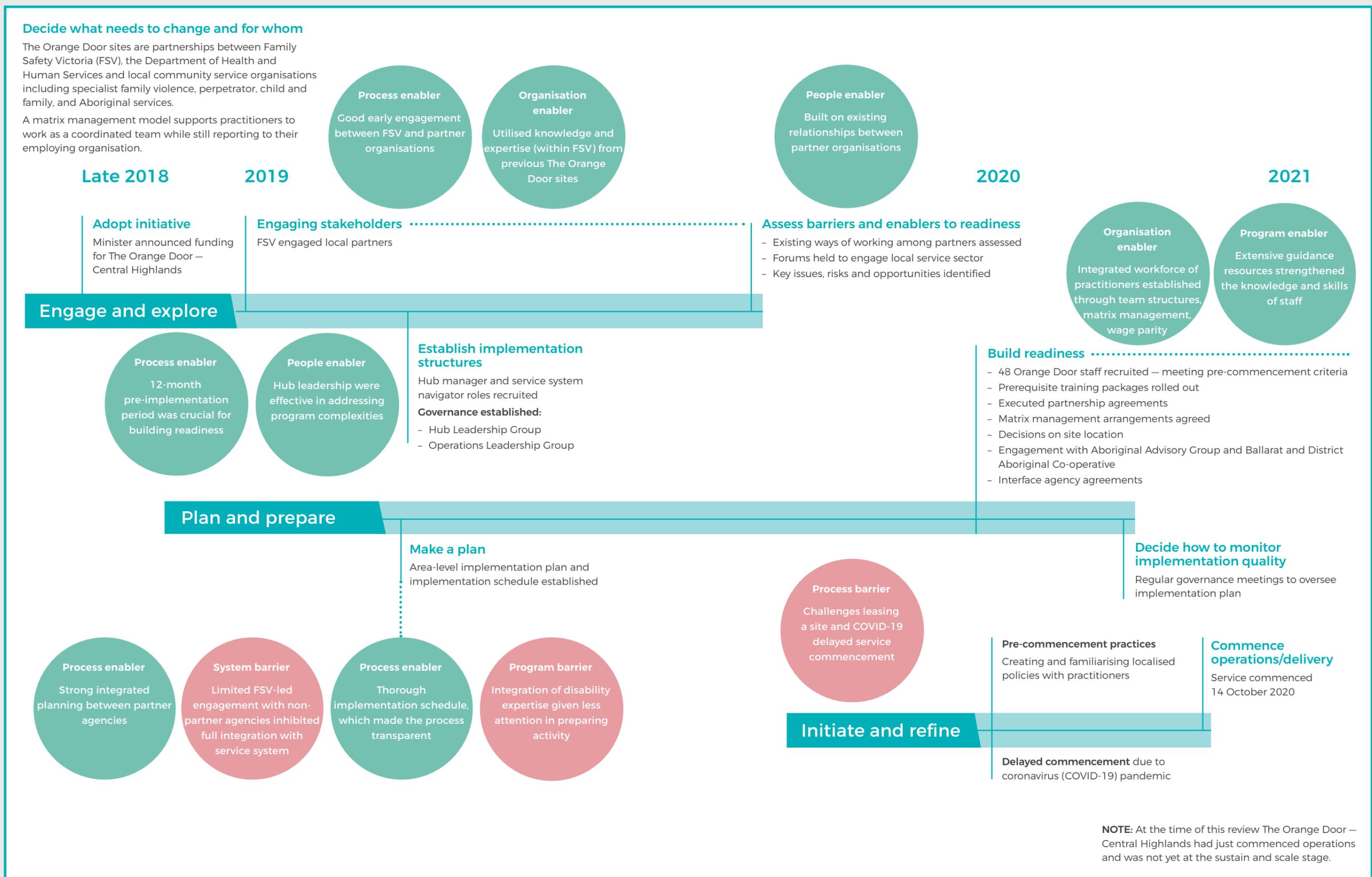


Figure 2.3

Stages of implementation: The Orange Door – Central Highlands



Overview of the reform areas

Respectful Relationships education in schools

The Royal Commission into Family Violence recommended introducing Respectful Relationships education into every government school from Prep to Year 12, and delivering it through a whole of school approach, by March 2021. In 2016, Respectful Relationships education became a core component of the Victorian curriculum. Respectful Relationships education develops students' social, emotional and positive relationship skills. The Department of Education and Training supports schools to deliver this curriculum through the optional Resilience, Rights and Respectful Relationships teaching and learning materials, developed by education experts.

The whole of school approach to Respectful Relationships supports schools to embed a culture of respect and equality across the school community. The model is supported by 34 Respectful Relationships regional staff across the state and a lead and partner school model, where lead schools mentor partner schools and schools share learnings and innovations through area-based clusters. The first tranche of 151 lead schools began in March 2017, and 864 partner schools were brought on between July 2017 and May 2018. A second tranche of schools started in Term 1 2020, bringing the total to more than 1,500 government, Catholic and independent schools. This represents around 75 per cent of Victorian government schools.

Specialist Family Violence Courts

The Royal Commission recommended all Magistrates' Court of Victoria headquarter courts and Specialist Family Violence Courts have the functions of Family Violence Court Division courts. The aim of the Specialist Family Violence Courts is to reduce the trauma, delay and complexity associated with court proceedings to create a more compassionate and responsive justice system that ensures safety of victim survivors and accountability of perpetrators. Establishing the Specialist Family Violence Courts involved changes to the physical environment of courts, recruitment of a specialist workforce, rollout of an intensive learning and development program to court staff, and integration with the broader court and service system. The Specialist Family Violence Court operating model is victim survivor-centred in its design and provides victim survivors with options on how they want to engage with their court hearing. Three Specialist Family Violence Courts have been established to date (Shepparton, Ballarat, Moorabbin), with four more specialist courts to be delivered.¹⁶

The Orange Door – Central Highlands

The Orange Door (previously Support and Safety Hubs) is an 'iconic initiative' from Ending Family Violence: Victoria's Plan for Change, delivering key recommendations from the Royal Commission. The Orange Door creates a single area-based intake point for specialist family violence, perpetrator and child and family services to improve the response for people experiencing family violence and children and families in need of support. The first five sites in The Orange Door network had been established in Victoria at the time of this review. The Minister for Prevention of Family Violence announced funding for Central Highlands¹⁷ (The Orange Door network's sixth site) in October 2018 and it opened in October 2020. The Orange Door network's seventh site opened in Loddon in October 2020, with the remaining 10 sites to be delivered by the end of 2022.

Review findings and areas for further attention

The review findings point to six key lessons that we recommend be carefully considered in future reform implementation efforts. All are supported by evidence from implementation science.

1. Allocate ample time and resources to pre-commencement implementation activities

The three implementation reviews clearly demonstrate a planned and staged approach to driving change across complex reform areas.

The reviews highlighted the benefits of heavy investment into the pre-commencement implementation stages (stages 1 and 2). Dedicating substantial time, budget and personnel to pre-commencement activities was a key enabler of implementation success. For example, The Orange Door – Central Highlands had an extended planned preparation period of 14 months (slightly longer than the standard 12-month implementation outlined in the statewide implementation approach in order to avoid opening during the Christmas holiday period) and longer than for previous The Orange Door sites. This enabled effective partnerships and governance models to be established. While the site experienced delays due to the leasing of site and building condition issues – a challenge identified in the Victorian Auditor-General's Managing Support and Safety Hubs report¹⁸ – there was evidence of effective planning in response, with key guidance and systems developed and workforces fully recruited prior to the revised opening date, addressing another of the Auditor-General's concerns in relation to 'recruiting the hub workforce'¹⁹ before opening.

Opening of the Central Highlands site was then further delayed for around five months due to the coronavirus (COVID-19) pandemic. This afforded an extended preparation period with the near-full staffing cohort in place, during which practice and service delivery readiness was substantially enhanced. In this time, local policies were developed and familiarised with the workforce. More time was also available for the Ballarat and District Aboriginal Cooperative to engage with the local Aboriginal community to recruit Aboriginal practitioners. The Auditor-General found that practice guidance and training was underdeveloped in the initial The Orange Door sites.²⁰ In comparison, the longer implementation time for the Central Highlands site enabled staff to work collaboratively with partner agencies to review, update and embed practice guidance, using the lessons learnt from the early five sites. However, this pre-commencement readiness was only enabled due to delays caused by the coronavirus (COVID-19) pandemic, with these activities intended for the post-commencement phase in the formal The Orange Door implementation approach.

A longer pre-commencement phase to complete key stage 2 activities before initiation, which includes local policy and practice development, would strengthen implementation of future sites. However, any extension to preparation phases also needs to be balanced with maintaining momentum because service commencement becomes more pressing once practitioners are recruited and ready to work together.

This lesson could be helpfully generalised to other major reform initiatives. Even with substantial resources and lead time, a feature of all three initiatives was that concurrent activity occurred across two (or even three) implementation stages. When implementation activities are not optimally sequenced it creates the potential to negatively affect implementation quality because key activities may be rushed or skipped.

2. Stakeholder engagement needs to extend throughout the whole system

All programs had strong evidence of key stakeholder engagement. This was particularly strong in the early stages of implementation (as is appropriate).

Area for further focus

Delays due to coronavirus (COVID-19) pandemic allowed local policies to be developed and stronger practice development to occur pre-commencement. This was an implementation strength that better prepared The Orange Door – Central Highlands for service commencement. Consideration should be given to extending the pre-commencement phase to include these features for remaining The Orange Door sites.

For The Orange Door – Central Highlands and Respectful Relationships, stakeholder engagement had a stronger focus on building relationships and generating a shared understanding of what was required between government agencies (e.g. the Department of Education and Training, Family Safety Victoria) and the organisations implementing the initiative (e.g. schools and partner organisations delivering services through The Orange Door).

Relatively less attention was paid to stakeholders who were not directly involved in implementation but were still active and relevant in the broader system surrounding the reform. These stakeholders also have an important role to play in change efforts – for example, primary prevention services that interact and support schools in implementing Respectful Relationships and Domestic Violence Victoria, the peak body for and key point for integration of The Orange Door with the specialist family violence sector. While these broader services may not be involved in formal governance and may not be allocated resources, their role in aiding reform should not be underestimated. For example, Gender Equity Victoria's submission to the Monitor pointed out that prevention and family violence agencies are not resourced to support Respectful Relationships:

GENVIC members are often called on by schools to provide support for respectful relationships 'incursions', providing workshops, training and other curriculum support...often, requests for support from schools are made without any funding being allocated to members.²¹

While there is evidence of partnership and engagement work between agencies directly involved in implementation and those in the broader system who are also affected by the initiatives, this could be strengthened. Without this, an integrated service response is unlikely to be achieved.

The reviews found that system-level stakeholder engagement was a key enabler for implementing the Specialist Family Violence Courts. The operating model recognised the role of other services involved with victim survivors and perpetrators. Local governance groups undertook community engagement pre-commencement, led by Local Implementation Managers and Senior Registrars. Koori practitioners also strengthened engagement, enabling Umalek Balit and Dhelk Dja strategic priorities to be prioritised at relevant Specialist Family Violence Court sites. Other stakeholder activity included inductions into the new court spaces and

Area for further focus

While the whole of school approach remains a clear objective of Respectful Relationships, evaluation findings suggest the initiative's focus has been on building internal school capability, with less activity on community partnerships. In building on work undertaken since the evaluation, further consideration should be given to effective engagement with parents and the broader community to strengthen program outcomes.

localised communication materials, which helped to engage local professional and community networks. Victim survivors were consulted in the design and implementation of the Specialist Family Violence Court operating model.

3. Develop planning documentation that provides a clear roadmap

The reviews highlighted the importance of a clear, detailed and transparent implementation plan. For example, The Orange Door – Central Highlands implementation schedule was the product of strong, integrated planning between partner organisations and provided transparency and differentiation between lead and partner organisations' responsibilities.

The Central Highlands implementation schedule was actively used to guide change processes. There was shared ownership and buy-in over the plan, and oversight was clearly linked to governance. The Specialist Family Violence Courts also provided clear documentation that differentiated operational (service model) and assets activity (building works).

Respectful Relationships differed slightly from the other reforms because it was based on a prior pilot. This meant the rationale and model were already firmly agreed, and the Royal Commission provided the mandate to expand the initiative statewide. The relatively short time it took for Respectful Relationships to move to stage 3 initiation (around six months) demonstrates how conducting and evaluating pilot programs before beginning large reforms might bring implementation efficiencies in the form of shorter stage 1 and 2 timeframes.

4. Implementation champions and dedicated leadership are essential

The importance of implementation leadership and clear governance structures cannot be underestimated. The reviews showed that all programs had governance groups or steering committees established during stages 1 or 2. However, the presence of leaders and champions who can bridge the gap between governance and frontline change is also crucial. Such roles help cast the local vision for change, set expectations, champion new approaches and take responsibility for driving change.

All programs hired staff for dedicated implementation roles. Notably, The Orange Door model includes substantial senior roles of this kind – a regional implementation manager, local hub manager and service system navigator roles. The Specialist Family Violence Court implementation project is centrally coordinated but locally driven, with dedicated central implementation support and local leadership roles.

Respectful Relationships includes 34 regional roles, two for each of the 17 regions. These roles provide leadership to guide schools and the local family violence prevention sector embedding the initiative. The implementation of Respectful Relationships offers a good example of active implementation leadership. The Department of Education and Training championed the program to schools using a variety of communication materials, delivery of training and facilitation of professional networking. In doing so, they made substantial investments to establish a strong understanding of the program rationale and build specific knowledge about the program content among schools. The Department of Education and Training also connected clusters of participating schools through mechanisms such as communities of practice. This aided iterative learning, empowered schools to share innovations, and improved implementation consistency across schools statewide.

While these reviews were not able to examine the quality or characteristics of implementation leadership, the reforms demonstrate that leadership and accountability structures are broader than governance and operational planning. Future reform should include an explicit mandate for resourcing of both central and local implementation leadership roles. Further, just creating the leadership roles is rarely enough. There needs to be explicit support for leaders to champion the initiative, to be prepared and supported to be knowledgeable about the initiative, and to be proactive, supportive and perseverant in their efforts. Implementation competency can be grown when prioritised and invested in.

5. Commit to using data monitoring and review to drive continuous improvement

The reviews showed it was often challenging to generate or access rigorous data to inform decision making. Challenges included short evaluation timelines that did not allow for a thorough assessment of program impact (e.g. the phase 1 Respectful Relationships evaluation experienced such limitations but will be built on for further evaluation phases) and delays in establishing new data collection processes (e.g. this occurred in relation to enhancing legacy data systems and collecting court user and victim survivor feedback within Specialist Family Violence Courts, and to processes for collecting client experience data in The Orange Door network).

Area for further focus

Ensuring a therapeutic experience for victim survivors is at the heart of the Specialist Family Violence Court operational model. To achieve this intention requires continued priority being given to seeking the views of court users to understand whether they are benefiting from the model and to identify improvements. An explicit approach to capturing and using court user experience in an ongoing manner is required.

Despite the challenges, data collection and review mechanisms for the Specialist Family Violence Courts implementation were notable strengths. A commitment to using different forms of evidence drove continuous quality improvement, including a comprehensive process and outcome evaluation that had begun at the time of the review and includes court user experience. These activities were key implementation enablers. For example, early on there was an explicit use of lived experience insights to inform the Specialist Family Violence Courts program design. Post-service commencement meetings at court sites provided opportunities to improve operations in areas such as family violence intervention order processes, service responses and hearing processes. Local data was also collected through various court databases, and reporting capacity and oversight was progressively improved.

Collecting, reviewing and responding to data (in all its forms) is a key driver of implementation quality, and resources should be dedicated to these continuous quality improvement processes for all complex reform initiatives. In particular, there needs to be a dedicated approach to capturing user experience as an ongoing improvement mechanism. Drawing on user experience in the design phase is vital, but to prevent programs drifting from their original intent requires feedback mechanisms being in place. Wherever possible, this should be planned from the outset, with clear specifications about what data will be useful, who is responsible for collecting it and how and when it will be reviewed.

6. Context is paramount, so focus efforts on maximising fit

A key goal of active implementation work is to maximise the fit between the reform and the setting within which it is implemented, including the broader system it interacts with. To illustrate, the implementation of Respectful Relationships demonstrated clear efforts to maximise the fit between the program and the school setting. Attention was given to ensuring alignment between the program content and style, and the school curriculum and values.

Family violence reform work has the explicit goal of systems change, and the reviews showed that efforts were made across the board to create a system that enabled and supported change at the setting level (e.g. schools, courts, specialist family violence services) so the intervention or service could be implemented and delivered.

Continued monitoring of and attendance to the combined factors of intervention–setting–system alignment is strongly recommended. Characteristics of interventions, their settings and the systems they operate within can shift and change. Monitoring and adaptation should be made the explicit remit of implementation leadership teams.

References

- 14 Informed by the work of Metz, Naoom, Halle & Bartley (2015): An integrated stage-based framework for implementation of early childhood programs and systems. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, US Department of Health and Human Services.
- 15 Damschroder, Aron, Keith, Kirsh, Alexander & Lowery (2009): Fostering implementation of health services research findings into practice: a consolidated framework for advancing implementation science. *Implement Science* 4(50).
- 16 Specialist Family Violence Courts were under construction in Heidelberg and Frankston at the time of the review, with two further specialist courts to be delivered as part of the Bendigo Law Courts redevelopment and the new Wyndham Law Courts development. Construction of the courts in Heidelberg and Frankston was completed in late 2020.
- 17 Central Highlands comprises six municipalities across central Victoria. These are the Rural City of Ararat, Pyrenees Shire, Hepburn Shire, City of Ballarat, Moorabool Shire and Golden Plains Shire.
- 18 Victorian Auditor-General's Office (2020): *Managing Support and Safety Hubs*, p. 37. Available at: audit.vic.gov.au/report/managing-support-and-safety-hubs (accessed 14 October 2020).
- 19 Ibid., p. 36.
- 20 Ibid., p. 37.
- 21 Gender Equity Victoria, submission 118, p. 21.

Chapter 3

Workforce

Background

In exploring this topic, we sought to establish the extent to which government and its agencies have:

- > designed strategic directions for developing the workforce to realise the planned family violence reform
- > established robust and effective governance arrangements to oversee implementation of the workforce strategic directions
- > achieved progress in implementing the workforce strategic directions.

Royal Commission findings

The Royal Commission into Family Violence found there has never been a comprehensive assessment of the workforce required for the specialist family violence system and the implications for workforces in intersecting systems. It made numerous recommendations relating to workforce, including the need for the government to develop and implement a 10-year industry plan to address ongoing shortcomings. Considered workforce planning was to be central to the family violence reform to ensure workforce needs could be met over the next decade.

What is the family violence workforce?

The Royal Commission adopted a four-tier classification originally developed by the Domestic Violence Resource Centre Victoria that is reflected in Building from Strength: 10-Year Industry Plan for Family Violence Prevention and Response (the 10-Year Industry Plan) (Figure 3.1).

Figure 3.1: Four workforce tiers that intersect with family violence



Source: Adapted from Victorian Government (2017): Building from Strength: 10-Year Industry Plan for Family Violence Prevention and Response.

Workforce strategic directions

The government's strategy for developing the workforce for the family violence system is primarily articulated through the 10-year Industry Plan and the associated Strengthening the Foundations: First Rolling Action Plan 2019–22, which contains the following seven focus areas to support achievement of the long-term vision:

1. Building workforce capability
2. Enhancing training architecture
3. Recruiting and retaining specialist workforces
4. Strengthening leadership in the specialist sectors
5. Prioritising health, safety and wellbeing
6. Building sector and organisational capability
7. Working in a connected and cohesive system.

Stakeholders applauded Family Safety Victoria for being open to testing new approaches throughout the industry planning process and for its commitment to building the evidence base. But there were also criticisms of the workforce planning process, including a lack of sequencing of the Rolling Action Plan's 61 actions. While a draft implementation plan for the Rolling Action Plan (provided to the Monitor in September 2020) included high-level information about the status of and linkages between each action, future iterations could more clearly depict sequencing and its underpinning logic.

As well as the 10-year Industry Plan and the Rolling Action Plan, there are other strategies that contribute to the comprehensive suite of workforce strategic directions (Figure 3.2).

In particular, the following directions and strategic documents also apply to workforce:

- > Embedding the Multi-Agency Risk Assessment and Management and information sharing in workforce practice [the Family Violence Multi-Agency Risk Assessment and Management (MARAM) Framework; Family Violence Information Sharing Scheme Guidelines]
- > Supporting workforces to deliver integrated services through The Orange Door model [Workforce Strategy for The Orange Door]

- > Building a safe, capable police workforce that understands and effectively responds to family violence [Victoria Police Strategy for Family Violence, Sexual Offences and Child Abuse]
- > Ensuring we have the community services sector workforce of the future [Community Services Industry Plan]
- > Building a professional identity [Child Protection Workforce Strategy]
- > Building capacity and capability in intersectionality [Everybody Matters: Inclusion and Equity Statement].

Figure 3.2: Timeline of key strategic documents



Government investment

The Victorian Government allocated \$95.4 million for family violence industry planning through the 2017/18 Victorian Budget. The 10-Year Industry Plan and Rolling Action Plan budgets are complex, with numerous funding sources and destinations. Some activities have ongoing funding, others are one-off, and others still are not funded. Family Safety Victoria is managing this complexity internally, but further consideration should be given to tracking funding information in a clear, accessible and centralised way.

The 2020/21 Victorian Budget included a further \$8.1 million over three years for supported traineeships in the family violence and sexual assault sector and \$0.167 million in 2020-21 to help establish the Family Violence Graduate Program.

Robust and effective governance arrangements

Governance structures brought together expertise from across government and the community service sector to develop, implement and monitor the workforce plans and strategies.

Industry Taskforce

The government set up the Industry Taskforce in late 2016 as the key advisory and consultation body for developing the 10-Year Industry Plan and associated workforce and sector reforms. It brought together 52 expert members spanning the social services, health, justice, corrections and education sectors. Industry Taskforce stakeholders advised that while Family Safety Victoria had good intentions to involve a broad range of stakeholders and capture their views through the Industry Taskforce, this proved challenging given the size of the meetings. The Industry Taskforce's two major subgroups²² continue to meet regularly.

Family Safety Victoria advised that while the Industry Taskforce has not met since 4 July 2019, subgroups and small project groups have come together to progress selected pieces of work. Not all stakeholders have been aware of these arrangements, and many indicated to us that they observed a lack of governance clarity and central coordination across workforce activities. The refreshed governance arrangements (discussed below) and Family Safety Victoria's monitoring and evaluation framework for the 10-Year Industry Plan provide an opportunity to clarify governance and coordination arrangements.

Family Violence Regional Integration Committees

Family Violence Regional Integration Committees were established in each of the then 14 Department of Human Services' areas in 2006. Their purpose is to improve the integration of services that respond to family violence at the local level, drive workforce development, and act as a conduit between specialist family violence and other providers in local areas. Representatives include a range of government and community organisations across the prevention, early intervention and response systems. The committees are led by Family Violence Principal Strategic Advisors, which are now funded by the Department of Health and Human Services and administered by Family Safety Victoria.²³

Our consultations and analysis identified that the role of Family Violence Regional Integration Committees in workforce development, and the reform as a whole, has never been clearly articulated by government. It also appears that the committees are not being used as well as they could be as a mechanism for implementing the reform, particularly when it comes to coordinating workforce development initiatives in regions.

The recently announced governance refresh flags a commitment to building stronger connections with Family Violence Regional Integration Committees. This is a timely opportunity to clarify the committees' role and how they can be better utilised in workforce planning and development, and the local implementation and monitoring of the reforms more broadly.

Governance changes in progress

Acknowledging the challenges posed by the size of the Industry Taskforce, Family Safety Victoria has reviewed governance and advisory structures and is establishing a new Family Violence Reform Advisory Group. The new model will replace the Industry Taskforce, the Family Violence Steering Committee and the Ministerial Taskforce for the Prevention of Family Violence. Family Safety Victoria advises that the 'governance refresh' will allow workforce development to be considered in the context of the overall reform.

A cross-government Reform Board is also being created to deliver streamlined decision making and endorsement processes, and to help achieve the reform objectives. It will consolidate the Industry Plan Project Steering Committee, The Orange Door Steering Committee, the Central Information Point Steering Committee and the Information Sharing and Family Violence Multi-Agency Risk Assessment and Management Steering Committee.

These changes have the potential to clarify and streamline governance arrangements if communicated and managed effectively.

Progress in implementing the workforce strategic directions

Progress in building the workforce required to implement the family violence reform has been significant, with some highlights described here across the following categories:

- > understanding the workforce through a workforce census
- > specialist family violence workforce pathways
- > specialist family violence workforce wellbeing and retention
- > major initiatives supporting practice improvement
- > capability building across non-specialist government workforces.

Understanding the workforce through a workforce census

The Census of Workforces that Intersect with Family Violence was conducted in 2017 and 2019. It is a vitally important information source for the sector about the specialist family violence workforce and related workforces. Family Safety Victoria improved the methodology of the second census based on findings from the first, including attempts to identify and respond to barriers to participation, and stronger promotion of the census. For example, the second census was open for an extended period, consisted of three different surveys tailored to three different role categories, and peak bodies were engaged and funded to promote it.

Nevertheless, we heard through our consultations that the second census did not adequately take on board the lessons learnt from the first census, including the need for more time to socialise the survey before its release, to shorten the survey length, and to maximise response rates through strategies such as incorporating the survey into existing workforce sector surveys. The 2019 census was open between 18 November 2019 and 28 February 2020. Response numbers and rates are outlined in Table 3.1.

These results suggest a strong response from the specialist family violence sector (prevention and response). However, the fact that the number of prevention workforce respondents was greater than the estimated size of the workforce suggests that some respondents may have misidentified themselves as being in scope for this survey. Further investigation is required to identify strategies for ensuring workforce estimates and responses better align in future surveys.

Table 3.1: Responses to the second workforce census

Workforce	Population size (approx.)	Number of responses	Response rate
Specialist family violence response	2,491	1,575	63%
Primary prevention of family violence	352	517	147%
Broader workforce that intersects with family violence	222,070	2,929	1%
Total	224,913	5,021	2%

Source: Family Safety Victoria

Continuing to improve the census in future years – including by further engaging with stakeholder feedback and the review of the first census conducted by the Victorian Council of Social Service and Domestic Violence Victoria – will be important in ensuring this vital source of information is as accurate and useful as possible. For example, the 2020 MARAM Reforms process evaluation report suggested using future iterations of the census to determine the level of awareness, understanding and use of the MARAM Framework. Census data also supports planning for accredited training provision through providing information on the requirements of specialist job roles to determine the demand for particular accredited qualifications.

Specialist family violence workforce pathways

The 10-Year Industry Plan acknowledges the need for ‘a strong pipeline of dedicated, skilled and diverse workers for the specialist family violence and primary prevention sectors’.²⁴ To support this, there has been a focus on improving the qualifications of future family violence practitioners by developing new accredited family violence and primary prevention courses, the first of which is the Course in Identifying and Responding to Family Violence Risk, which was accredited in 2019. Family violence content has also been added into the core curriculum of all social work undergraduate degrees, and work to introduce mandatory qualifications for specialist family violence practitioners is well underway.

Ensuring there are enough experienced teachers to train family violence prevention and response practitioners is an ongoing challenge: however, some attention has been given to this issue – for example, through Gender Equity Victoria’s Building the Pool of Qualified Trainers Experienced in the Prevention of Violence Against Women project. The Department of Education and Training also delivered a professional development program to more than 700 family violence

teachers during 2020, indicating strong engagement by family violence teachers to update their skills and knowledge to be able to deliver accredited training. We encourage ongoing support for these efforts.

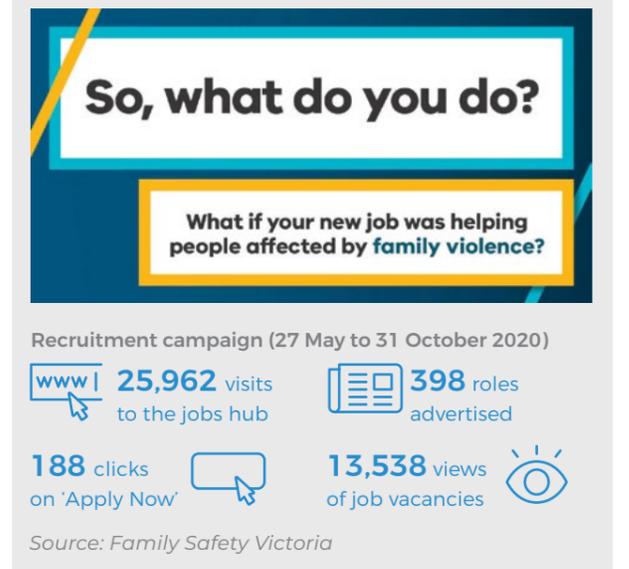
The ‘So, what do you do?’ attraction and recruitment campaign included launching the Victorian Government’s dedicated family violence jobs hub in May 2020 (Figure 3.3). The hub includes a Family Violence Jobs Portal where jobseekers can search and apply for family violence sector roles and employers can advertise and recruit for family violence roles. It will be important to track the effectiveness of the campaign and use of the portal.

The Enhanced Pathways to Family Violence Work Program is also attracting new workforce entrants to the sector. In its third year, the program provides funding to selected organisations to support student placements, build staff and organisational capability in hosting student placements and support MARAM alignment.

Efforts are also being made to build a strong leadership pipeline within the specialist workforce:

- > The Future Social Services Institute is funded to deliver the Leadership Intensives program, which has been completed by more than 320 senior leaders from family violence and related sectors across Victoria.
- > Family Safety Victoria funds the Domestic Violence Resource Centre Victoria to deliver the FastTrack Professional Development Program – piloted in 2019 to ‘fast track the supply of knowledgeable and skilled Tier 1 senior level practitioners to take up urgently needed specialist family violence management and leadership roles’.²⁵

Figure 3.3: ‘So, what do you do?’ recruitment campaign results



Source: Family Safety Victoria

Specialist family violence workforce wellbeing and retention

Research commissioned by Family Safety Victoria acknowledged factors associated with family violence sector roles that are often barriers to recruitment or retention such as relatively low pay, short-term contracts and a lack of support for workers. It described the risk of a 'revolving door' where 'people will enter the sector, only to leave through disappointment in workforce resourcing and burn out.'²⁶ The nature of family violence work also creates the potential for vicarious trauma, as well as issues for workforce health, wellbeing and retention. Although the Royal Commission, the 10-Year Industry Plan and the Rolling Action Plan all raised these issues, progress in this area is in its early stages. This includes establishing a Health, Safety and Wellbeing Working Group, drafting the Health Safety and Wellbeing Framework, and delivering Health, Safety and Wellbeing content as part of the Leadership Intensives.

These issues were raised in many submissions to the Monitor by stakeholders such as Gender Equity Victoria, Australian Services Union, Domestic Violence Victoria and the Victorian Council of Social Service. The Victorian Council of Social Service explained that '(w)here organisations continue to lose good quality staff to other community services sectors, this means that Victoria is not building the prevention and response sector workforce that is needed',²⁷ thereby undermining attraction and recruitment efforts and the reforms more broadly.²⁸

These issues were also highlighted as key challenges through the findings of the second workforce census, with 40 per cent of respondents from the specialist family violence response workforce and 48 per cent of respondents from the primary prevention workforce²⁹ indicating they had plans to leave their current role in the next 12 months.³⁰

Retention and wellbeing challenges are particularly pronounced for new workforces that have been developed to cater to the needs of Aboriginal, multicultural and faith communities, where short-term funding has made it difficult to develop and sustain the necessary service responses for these communities.

Major initiatives supporting practice improvement

The Family Violence Multi-Agency Risk Assessment and Management Framework and information-sharing schemes

A clear objective of workforce-related activities is creating a system that works with a shared understanding of family violence. The MARAM Framework and information-sharing schemes provide some of the core tools to enable this and to ensure practice consistency. The Family Violence Information Sharing Scheme, the MARAM Framework and the Child Information Sharing Scheme are interrelated, and their success relies on effectively equipping the workforce to understand and implement the reforms in practice.³¹ Significant capacity-building activity to support these reforms is occurring across government departments and community organisations.

During 2020, a process evaluation of the MARAM reforms and a review of the Family Violence Information Sharing Scheme were released,³² providing important findings to inform the phase 2 rollout to broader workforces and recommendations for improving training content and delivery including:

- > building workforce capability to engage effectively with clients from diverse communities, many of whom are said to be more fearful of information sharing
- > ensuring phase 1 workforce training is completed to make way for the approximately 370,000 additional people who will need to be trained under phase 2.

The MARAM reforms process evaluation report found that departments needed more autonomy in how to deliver the MARAM reforms and information sharing to their workforces. Equally, we suggest a robust, central coordination role to bring everyone together, oversee progress and flag any implementation progress issues is required.

The Orange Door

The Orange Door (previously Support and Safety Hubs) is a major initiative that is transforming the workforce. It involves staff from at least three organisations working together in an integrated way but maintaining their employment arrangements, including formal line management, with their respective organisations.

The Victorian Auditor-General's Office's May 2020 performance audit of the Support and Safety Hubs³³ identified significant areas for improvement relating to staffing levels, training and resources to support the delivery of integrated services. Family Safety Victoria accepted all recommendations. Prompt action will help address workforce challenges and will most likely improve implementation at new The Orange Door sites.

Capability building across non-specialist government workforces

The 10-Year Industry Plan includes a vision whereby:

...workers across the family violence, prevention, children's services, broader community services, health, justice and education sectors are family violence and gender literate and equipped for their particular role in preventing, identifying and responding to family violence, working with victim survivors including their children to maximise their safety and recovery, and engaging people who choose to use violence towards being accountable.³⁴

The MARAM Framework and information-sharing schemes support the consistency and quality of practice across relevant workforces, as do the appointment of Principal Practitioners at the Department of Health and Human Services, the Department of Education and Training and the Department of Justice and Community Safety to lead capability building within their respective departments. The release of 'Prevention' and 'Response' capability frameworks in 2017 are also being used to shape training and recruitment activities across departments and agencies.

Victoria Police

Victoria Police's workforce development efforts are supported by a government investment of approximately \$30 million over four years under the 2017 Community Safety Statement.

In addition to developing family violence practice guides and other resources for police, Victoria Police has also established the Centre of Learning for Family Violence with educators at the Victoria Police Academy and training officers embedded in each division across the state. The entire police workforce is now being trained to understand the dynamics of family violence. As at 30 June 2020:

- > 83 per cent of the target workforce have received introductory training on the use of the new Victoria Police risk assessment tool, the Family Violence Report
- > 74 per cent of the target workforce have received face-to-face training in assessing family violence risk using the Family Violence Report.

Victoria Police conducted reviews of its progress against its implemented Royal Commission recommendations in both 2019 and 2020, documenting this work to generate ongoing improvement. This is a strong example of embedding knowledge and practice change.

Justice and community safety workforces

Perpetrators and victim survivors potentially have numerous points of contact with Department of Justice and Community Safety workforces, including through the justice and corrections system, and victim and consumer support services. For example, evidence presented to the Royal Commission suggested that a significant proportion of female offenders have been exposed to family violence,³⁵ with one survey revealing nearly two-thirds of women prisoners have experienced family violence at some point.³⁶

Foundational family violence training is being rolled out to the entire Department of Justice and Community Safety workforce, which consists of approximately 9,000 employees across areas including youth justice, prisons, community corrections, the sheriff's office and staff in central office and justice service centres.³⁷ As of 30 June 2020, approximately 26 per cent of the current Department of Justice and Community Safety workforce had been trained. Evaluation surveys suggest the training is achieving its aims of supporting staff to understand family violence and develop skills to sensitively recognise, respond to and refer colleagues experiencing or perpetrating family violence.

Targeted training is also being offered to subsets of the justice workforce, including staff working on the Victims of Crime Helpline, financial counsellors and Community Correctional Services case managers.

Corrections Victoria has developed multiple family violence resources for practitioners working in Community Correctional Services. It has also developed a training and workforce development plan for Community Correctional Services to meet its MARAM alignment obligations.

At women's prisons, family violence identification procedures have been incorporated into risk assessment, case management and transition planning processes; however, this occurred before the release of the MARAM Framework. We did not see an explicit plan for MARAM alignment in the prison system, with Corrections Victoria advising that alignment within Community Correctional Services is the initial priority due to the critical importance of family violence risk management for offenders in the community, and greater degree of family violence capability among the Community Correctional Services workforce. We understand that alignment activity for prisons has focused on foundational activities such as mapping the diverse custodial and non-custodial workforce, and building a shared understanding and awareness of family violence. Given the high rates of victimisation among women in prison and the Royal Commission's specific focus on this group, aligning policy and practice in the women's prison system with the MARAM Framework should be given greater priority within this work program.

Education and training workforces

When children and young people attend early childhood, school or further education settings, there is an opportunity to actively prevent family violence through education and to identify possible instances of family violence early. This requires workforces to be trained accordingly.

Capability building around gender equity and family violence prevention throughout the school workforce has occurred through the rollout of Respectful Relationships in all Victorian schools. A total of 3,044 early childhood educators in government-funded kindergarten programs have also been trained to promote respectful relationships, positive attitudes and behaviours within their integrated teaching approach.³⁸

To proactively identify the training and development needs of its varied workforces, the Department of Education and Training engaged PricewaterhouseCoopers to map the current levels of understanding of family violence and child wellbeing against the MARAM Framework and information-sharing requirements across its varied workforces. The way this workforce mapping is informing capability-building activities may provide useful lessons for other departments and agencies.

Health and human services workforces

Health and human services such as hospitals, general practitioners, mental health services and housing services interact with people experiencing family violence. However, unless staff are adequately trained, these interactions can remain missed opportunities to intervene and offer support to these people.³⁹ Since the Royal Commission, various activities have occurred across the health system to build family violence capability, including for maternal and child health nurses, Victoria's disability workforce, the mental health workforce and the entire child protection workforce, who have engaged in the Tilting Our Practice program.

Some mental health and alcohol and other drug services are appointing Specialist Family Violence Advisors. These roles are designed to increase access to specialist family violence expertise. During our consultation, one of these services mentioned the need for further connections between the mental health and family violence systems, a finding reiterated by the Royal Commission into Victoria's Mental Health System. This will be an important area of future work.

Hospital staff are being trained to identify and support victims of family violence through the Strengthening Hospital Responses to Family Violence program, for which dedicated funding will lapse during 2021.⁴⁰ As at 30 June 2020, 67,400 staff had received this training since the program began, representing nearly 50 per cent of the estimated 150,000 staff in hospitals and health settings across the state. The program's forthcoming evaluation findings will provide direction to

strengthen future family violence capability-building activities; however, some key challenges and risks have already been identified based on feedback provided to the Department of Health and Human Services by hospitals and health services, including:

- > year-to-year funding leading to short-term staff contracts
- > engaging and training a resource-constrained, 24-hour clinical workforce
- > data collection and measuring practice change.

Key issues

Governance structures and whole of government coordination could be clearer and more effective

Multiple stakeholders acknowledged Family Safety Victoria's ambitious intentions in bringing together the many and varied stakeholders to contribute to developing and implementing the 10-Year Industry Plan. However, stakeholders have expressed a lack of clarity about the governance of workforce activities over the past year as well as coordination of their implementation given the Industry Taskforce has not met since July 2019 and the Rolling Action Plan implementation is now underway. This uncertainty suggests the need for stronger communication from Family Safety Victoria about how workforce activities are being coordinated and governed across the family violence reform, including the role of Victoria's 14 Family Violence Regional Integration Committees.

While Family Safety Victoria holds responsibility for a range of cross-government activities such as the 10-Year Industry Plan, its Rolling Action Plan, the MARAM Framework and information-sharing policies and guidance, stakeholders shared the view that there needs to be stronger central coordination of the many workforce-related activities underway across government. For example, while departments and agencies are responsible for implementing the MARAM reforms in their own settings, and there are various governance groups for the MARAM reforms implementation, there is an opportunity for improved oversight to ensure coordination of effort, stronger management of issues and monitoring of implementation progress. Additionally, while not discussed in this chapter, there is dispersed responsibility for family violence prevention across Family Safety Victoria, the Office for Women (in the Department of Premier and Cabinet) and Respect Victoria. Machinery of government changes announced just after the end of the monitoring period may help, as these areas will be brought together under the one department. However, there is still an opportunity to strengthen whole of government coordination for prevention and non-specialist workforce development.

The revised whole of reform governance arrangements are an active attempt to address the known governance issues. It will be important to clarify oversight and coordination of the Rolling Action Plan's implementation under the new arrangements. It will also be vital to clarify the allocation of, and ongoing accountability for, the substantial funds for capacity-building initiatives across workforces that the Department of Health and Human Services and Family Safety Victoria have received to date. The revised arrangements also have the potential to facilitate improved coordination with the broader service system, including coordination of family violence workforce development with other community services workforce initiatives. This will be challenging but crucial given the intersections at the service delivery level (such as family violence, alcohol and other drugs, mental health and housing) and the movement of staff between sectors.

Planning and monitoring processes need strengthening

The 10-Year Industry Plan and its Rolling Action Plan are valuable frameworks, but some strategic elements are missing. For example, actions were not initially prioritised or sequenced in any detailed way, and they were not linked to outcomes or a monitoring framework. We suggest future planning should include these elements.

The importance of strong workforce data and modelling in shaping and driving workforce strategies has been raised. While we have not seen evidence that the 10-Year Industry Plan or the Rolling Action Plan and its associated activities were informed by a clear picture of the future workforce required to support the reform, the Rolling Action Plan commits to developing a workforce forecasting model and we have seen some early forecasting work as part of the Job Role Redesign Project. It will be important for this work to drive future planning so activities are specifically designed to achieve the required workforce. The workforce census will be a key input into this work, provided feedback on the first two censuses is taken up to ensure a more complete picture of the workforce to inform modelling and planning.

Monitoring of progress in implementing Rolling Action Plan workforce activities appears to be limited. The impact of the 10-Year Industry Plan was to be aligned with the family violence outcomes frameworks; however, there has not been any outcomes reporting for the reform to date. An implementation plan and monitoring and evaluation framework for the Rolling Action Plan have been drafted. There is an important opportunity to ensure oversight of the impact and outcomes of workforce activities is embedded in the new governance arrangements and communicated regularly to stakeholders.

Greater funding certainty could improve workforce retention and reform implementation

Across diverse organisations and settings, from hospitals to community service providers and others, the dominance of 12-month funding agreements is raised as a significant barrier to workforce retention, which in turn impedes efforts to implement the reform and embed the new ways of working that the reform requires.

At the strategic level, the requested level of funding to implement the 10-Year Industry Plan was not secured in the 2018/19 and 2019/20 Victorian Budgets. Some stakeholders perceived that the funding allocations to workforce are an indication it is not a priority within the reform.

At the service level, funding uncertainty was said to include short-term funding agreements and late notice of funding being provided or renewed, and that this directly led to staff attrition due to job insecurity. In one example provided to the Monitor, all staff for a new program had to be let go before the funding was actually renewed at the 11th hour and the agency then had to recruit, orientate and capacity-build the program workforce again. Service providers told us that 12-month funding agreements remain common, even where programs are no longer in the trial stage. One organisation said that although there had been major investment into family violence reform, 12-month funding is a 'significant failure of implementation'. Service providers reported repeatedly losing highly valued staff due to an inability to provide job security.

As the reform is now beginning to progress beyond the initial trialling and piloting of new approaches, and the evidence base is building around what works, there is an important opportunity to explore ways to achieve longer term funding agreements with service providers. This would have many and varied benefits, from reducing the administrative burden on government and providers, to enabling a skilled and experienced workforce to be built and retained.

Workforce health, safety, wellbeing and retention needs further attention

'Prioritising health, safety and wellbeing' is one of seven focus areas in the Rolling Action Plan, but implementation progress in this area has been limited. Perhaps understandably, efforts to date have focused on attracting and recruiting people to the specialist family violence workforce to ensure services have the staff they need.

Increasing the focus on specialist workforce health, safety and wellbeing, as well as other areas that contribute to workforce retention, will help reduce the rate of people leaving the workforce and maximise the value of attraction and recruitment efforts.

One area requiring further focus is how to more effectively support workforces in dealing with the trauma they are exposed to on the job.

Looking forward

The far-reaching family violence reform enacted since the Royal Commission has required enormous efforts to develop the range of workforces that intersect with family violence. Based on our monitoring and analysis of the key implementation issues, we suggest the following are priorities for future action:

- > Actively work to clarify and improve communication about governance and coordination, including being clear about the role of Family Violence Regional Integration Committees in coordinating workforce development initiatives in regions.
- > Continue to improve the workforce census, including by using it to test the level of use and understanding of the MARAM Framework, and working to more accurately capture the primary prevention workforce and broader workforces that intersect with family violence.
- > Balance the autonomous delivery of MARAM across departments with more robust, central coordination and oversight of this foundational part of the reform.
- > Urgently progress work to improve the wellbeing and retention of specialist family violence prevention and response workforces.
- > Prioritise process and practice alignment with the MARAM Framework in the women's prison system.
- > Ensure future workforce planning prioritises and sequences actions, and strengthen reporting of the implementation and impact of workforce activities.
- > Identify opportunities for longer term funding agreements with service providers, where appropriate.

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Chapter 4

Children as primary victims of family violence

Background

The purpose of this analysis was to establish the extent to which government and agencies have reoriented policies and practice to recognise children as victims of family violence in their own right. It also sought to examine the capacity of targeted child- and youth-centred family violence services. We considered the extent to which this critical cohort is served through:

- > key foundations in legislation and government strategy
- > risk management and information-sharing reform and its effectiveness
- > policies and practice across key government service settings
- > targeted services
- > child protection practice.

Scope

This chapter focuses specifically on children, legally defined as those under the age of 18 years. We acknowledge that the Royal Commission into Family Violence and the Victorian Family Violence Data Collection Framework talk about 'children and young people' comprising individuals aged up to 25 years old. We suggest that the needs of this cohort of young adults be considered an area for future attention.

Royal Commission findings

The Royal Commission found that, historically, children and young people have been the 'silent victims' of family violence. Despite the profoundly detrimental impacts of family violence on this group and the intergenerational cycles of violence it creates, there remains a lack of targeted resources to meet the specific needs of children who have experienced family violence.

The year the Royal Commission's findings were handed down, the Commission for Children and Young People released its findings from its inquiry into cases where children who were known to child protection services had died. It confirmed that family violence can have serious and sometimes fatal consequences for children and called for stronger integration across the child protection and family violence systems.⁴¹

Foundations for recognising children as primary victims

The Children, Youth and Families Act 2005 provides a legislative foundation for establishing the rights of children to have their best interests prioritised. It highlights the importance of giving weight to the child's views and wishes, and the need to consider 'the effects of cumulative patterns of harm on a child's safety and development'.⁴² The 'best interests principles' provide a foundation upon which other legislation, policy and practice can acknowledge and support children as primary victims of family violence. Section 5A of the *Family Violence Protection Act 2008* defines family violence for children as including being caused to hear, witness or otherwise be exposed to family violence or its impacts.

Ending Family Violence: Victoria's Plan for Change set the scene for the government's commitment to the family violence reform required by the Royal Commission. It recognised the deep impacts of family violence on children and committed to meeting their specific needs and to intervening earlier to prevent harm, particularly through reform initiatives such as Support and Safety Hubs (now known as The Orange Door).

Historically there has been limited data on children affected by family violence. The Royal Commission noted that information on children was one of the key deficiencies in family violence data collection. It suggested that the addition of Integrated Family Services and Child Protection data should be prioritised in developing the Victorian Family Violence Database.⁴³ The Victorian Family Violence Data Collection Framework also acknowledged the lack of both administrative and survey data about experiences of children as victims of family violence.⁴⁴ It encouraged services and agencies to record children as unique victims rather than 'secondary victims' or 'indirect victims',⁴⁵ but this work does not appear to have occurred, with no evidence sighted of the framework being implemented.

Information sharing and risk assessment

The Family Violence Multi-Agency Risk Assessment and Management (MARAM) Framework and information-sharing guidelines are explicit about the need for children experiencing family violence to be recognised as victim survivors in their own right.

The Child Information Sharing Scheme and the Family Violence Information Sharing Scheme intend to provide a comprehensive understanding of children at risk and their unique circumstances. The safety and wellbeing of children is explicitly given precedence over any individual's right to privacy.

Through our consultations, we were advised that many staff were not yet confident in using these schemes or in some cases were unwilling to use them as intended. For example, some staff were reluctant 'to seek or share information relating to children on the grounds that it could put at risk the privacy and confidentiality of the mother who is a victim survivor'.⁴⁶ Despite there being resources to explain how the two schemes work together, the Centre for Excellence in Child and Family Welfare advised us that understanding of the schemes is inconsistent.⁴⁷ The Family Violence Information Sharing Scheme evaluation recommended that 'all training and training materials need to emphasise the circumstances in which it is appropriate to use either the Family Violence Information Sharing Scheme or the Child Information Sharing Scheme'.⁴⁸ We suggest there is a need to monitor whether the schemes are being used as expected, and to identify areas where workforces may require further support.

There is also a strong desire to build capacity around the use of the MARAM Framework with children. While training to date appears effective, some people want further support to build confidence. For example, 88 per cent of MARAM training participants reported an improvement in their knowledge and ability to use the Child Assessment Tool; 60 per cent of these considered themselves highly capable of using the tool.⁴⁹ The Census of Workforces that Intersect with Family Violence found that 36 per cent of the specialist workforce and 45 per cent of the broader workforce would like more training on working with children exposed to family violence.⁵⁰

The MARAM victim-survivor focused practice guides provide guidance on identifying and screening for family violence risk with children, including deciding when and how to talk to a child directly. The guides include a Child Victim Survivor Assessment Tool and a risk management tool specifically for older children and young people. Risk screening and management tools for adults also include risk screening and safety planning for children. An important area for improvement in further developing guidance and training for staff is including the voices and perspectives of children and young people when designing tools and guidance about how to work with this cohort, and in their own risk assessment and safety planning, including how to engage with and assess very young children.⁵¹

Policies and practice across key government service settings

There has been significant strategic work across departments and agencies to ensure family violence and related systems are set up to acknowledge children as victim survivors. However, stakeholders consistently advised that there has not yet been the systemic reorientation to consider children as primary victims with their own needs, including the required increase in dedicated services. They have also advised that a stronger system approach to prevention and early intervention is required. For example, Respect Victoria highlighted that 'there needs to be a further focus on the "early" end of early intervention, particularly for children and young people who are at risk or displaying concerning behaviours, including children in out-of-home care, and victims of family violence'.⁵²

Family Safety Victoria provided us with a thorough analysis of its own activities relating to children's needs and engagement with children, including adolescents using violence in the home. It showed some inconsistency across projects, including in the language used about children and the degree to which their needs were actively considered, highlighting that inconsistencies can exist even within one entity. This suggests the need for a more considered approach within and across organisations to improve consistency.

While much of the evidence we reviewed was clear about children and young people being primary victims of family violence, there was minimal evidence that the perspectives of young victim survivors were being sought as standard practice. Berry Street's Y-Change team of young people with lived experience of family violence shared that 'the voices of children and young people are still overwhelmingly missing from the family violence narrative'.⁵³ Finding ways to safely and effectively hear the voices of these otherwise 'silent' victims of family violence is an important area for future efforts.

Aboriginal children and families

A holistic, children and family-centred approach is at the heart of strategies and frameworks preventing family violence and to promoting healing for Aboriginal communities. The 2018 Wungurilwil Gapgapduir: Aboriginal Children and Families Agreement between the Aboriginal community, Victorian Government and community service organisations aims to 'reduce the number of Aboriginal children in out-of-home care by building their connection to culture, Country and community'.⁵⁴ The agreement focuses on intervening earlier through family support, acknowledging the Taskforce 1000 findings⁵⁵ that described family violence and substance misuse as presenting issues for the overwhelming majority

of Aboriginal children in out-of-home care.⁵⁶ The Aboriginal Children's Forum works to implement and monitor the agreement. A similar partnership approach may be worth considering for vulnerable Victorian children more broadly.

Police

A child was present at approximately 36 per cent of family violence incidents that police attended in 2019–20.⁵⁷ All of Victoria Police's strategies, operational policies and practice guides are clear about children and young people being recognised as victim survivors whose needs should be considered and addressed independently of their parents'. The documentation we reviewed was clear about the specific harm to children and young people that is caused by family violence and explicitly acknowledged that a child doesn't need to be physically present when violence occurs to experience this harm.⁵⁸

Child-specific training is mandatory for relevant staff, and processes have been redesigned to better acknowledge children as primary victims of family violence. For example, all family violence safety notices and applications for family violence intervention orders list children as separate parties.

Courts

Parents accessing the courts for family violence matters will often have to bring their children with them. Consideration of ways to ensure courts can accommodate children is therefore essential.

The Specialist Family Violence Court model, developed by the Magistrates' Court, explicitly acknowledges children and young people who have experienced family violence as victim survivors.⁵⁹ For example, the court's physical design features include safe and child-friendly waiting areas, separate and secure entrances and exits, and security escorts for affected family members and their children who are at heightened risk at court.

We also saw evidence of a range of other initiatives operating at the Magistrates' Court of Victoria and Children's Court of Victoria to improve understanding and responsiveness to the needs of children, including through family violence practitioners.

The Court Support for Kids program is offered at the Melbourne Children's Court and selected Magistrates' Courts. The program allows a trained children's worker to engage in onsite support, creative play and distraction for children, enabling their mothers to focus on their legal proceedings. It also allows children to explore their thoughts, feelings and emotions and has exposed incidents of family violence experienced directly by the children.⁶⁰ Funding for the program has been

uncertain, based on a number of one-off government grants and philanthropic funding.⁶¹ Court Services Victoria has, however, funded Court Support for Kids for an additional 12 months to 30 June 2021.

Australian family law

Although not within Victoria's jurisdiction, the Australian family law context appears to create a point of tension with Victoria's efforts to acknowledge children and young people as primary victims.

Only 3 per cent of cases heard by the Family Court lead to orders for no contact with one parent being made, despite the fact that most cases where parents use the courts to make parenting arrangements involve family violence, child safety concerns and other complex issues.⁶² While we cannot comment on the appropriateness of the family law system, several submissions we received outlined significant concerns and suggested that children's safety and wellbeing are not being adequately considered when deciding custody and access arrangements.⁶³ Police may 'make an application to the Magistrates' Court to exercise its jurisdiction to vary, discharge or suspend the operation of the *Family Law Act* order'⁶⁴ where they find it is inconsistent with the safety needs of a child, but the extent to which this happens is not known.

Youth justice

There is evidence that many adolescents who use violence in the home have been exposed to family violence themselves.⁶⁵ Therefore it is vital for the justice system, as well as police and support services, to understand the impacts of family violence on young people and to use a trauma-informed, child development approach.

Consistent with this, Youth Justice developed practice guidance for its staff that outlines requirements for family violence screening for all young people upon intake, risk assessment and risk management, to be used throughout a young person's involvement with the youth justice system.

Similarly, the Youth Parole Board requires that all young people before the board are screened for family violence risk using the MARAM Framework and that a risk management plan is developed for all young people who have been a victim of, or who have used, family violence. The board can refer cases to the Youth Justice High Risk Panel chaired by the Commissioner of Youth Justice to strengthen planning for parole and safety for young people who are victims or use violence.

The Orange Door

The Orange Door's service model includes numerous elements that demonstrate a strategic shift to ensure children and young people are seen as primary victims. It recognises that 'each child has unique needs that will be assessed individually' and that safety plans and broader supports will be tailored for children.⁶⁶ It acknowledges the importance of listening to the voices of children and provides guidance on specific questions to ask children about family violence. Figure 4.1 shows the number of children provided with a response at The Orange Door in 2019–20.

In 2018, Family Safety Victoria released its Client Experience Toolkit, which includes high-level consideration of children and young people's journeys through The Orange Door and identifies children and young people as a priority group (Figure 4.2).

Figure 4.1: Number of children provided with a response at The Orange Door



In practice, child and family services practitioners feel there is insufficient focus on child wellbeing,⁶⁷ while the family violence sector reportedly considers that family violence expertise and specialist interventions are being marginalised in The Orange Door model.⁶⁸

An internal Family Safety Victoria review reported that, of the 9,597 children identified at The Orange Door as victim survivors of family violence in 2019–20, only 943 comprehensive child family violence assessments were conducted. While a comprehensive assessment is not required if a rapid response is provided,⁶⁹ the appropriateness of only approximately 10 per cent of child victim survivors receiving a comprehensive assessment warrants further exploration.

Reflecting the broader issues around the availability of data on children and young people, the Centre for Excellence in Child and Family Welfare,⁷⁰ the Commission for Children and Young People⁷¹ and the Victorian Auditor-General's Office⁷² have all raised the need to improve the data collected at The Orange Door. This will require enhancements to the client management system and ongoing workforce support to maximise data quality.

Sufficiently available targeted services

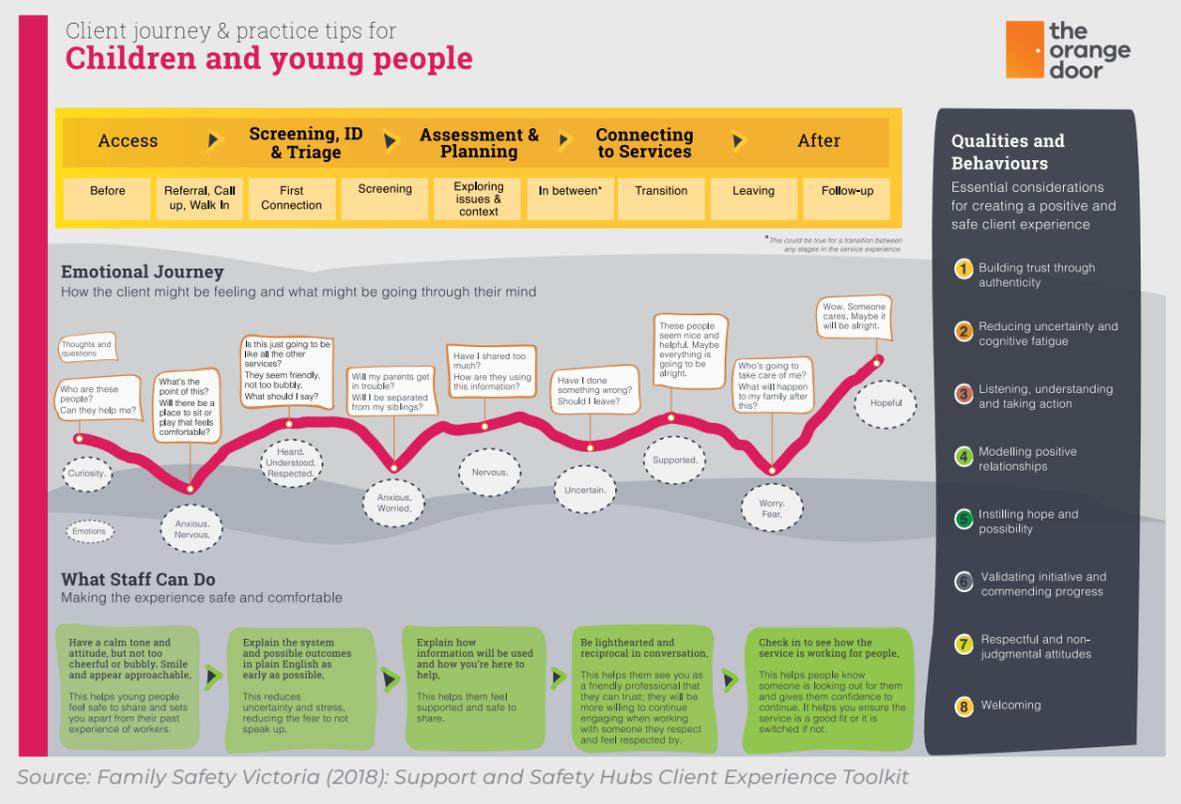
The MARAM Framework describes that appropriate responses for children experiencing family violence should be therapeutic interventions, including counselling and early intervention programs, as well as youth-appropriate accommodation if required.⁷³ The Royal Commission highlighted the need to increase the availability of such services.⁷⁴

Therapeutic interventions

There has been a substantial increase in funding for therapeutic interventions for victims of family violence, predominantly women and children, as shown in Table 4.1. This represents an increase of 366 per cent in investment in therapeutic interventions for victims of family violence since the Royal Commission. Of therapeutic interventions funding, 40 per cent must be targeted to children. An organisation in each of the 17 Department of Health and Human Services areas is funded to deliver a suite of programs in partnership with one or more organisations, and these agencies report monthly to the Department of Health and Human Services. We are advised that from September 2019 to June 2020, 32 per cent of therapeutic services were provided to children (Figure 4.3).

Despite this significant investment, stakeholders such as the Centre for Excellence in Child and Family Welfare, the Commission for Children and Young People, Berry Street, the Salvation Army and Victoria Police have all advised that the currently

Figure 4.2: Excerpt from The Orange Door's Client Experience Toolkit for staff



Source: Family Safety Victoria (2018): Support and Safety Hubs Client Experience Toolkit

Table 4.1: Funding for community therapeutic interventions for victim survivors of family violence (including children)

2014-15		2019-20	
Family violence support services	\$6,860,000	Family violence counselling	\$11,276,042
		Family violence therapeutic interventions	\$16,290,824
		Aboriginal demonstration projects	\$4,413,217
Total	\$6,860,000	Total	\$31,980,084

Source: Family Safety Victoria

available therapeutic services for children are unable to meet demand – that there are long waiting lists and significant service gaps. It is unfortunate that in the absence of reliable data it is not possible to validate the extent of service gaps. This requires urgent attention.

Stakeholders also noted a lack of clarity about the type of services that are available for children. There appears to be a need for clear referral pathways that a range of different workforces can use to determine which service will be appropriate for which child under which circumstances. A list of mainstream and Aboriginal therapeutic service providers is now available online⁷⁵ and this is a positive step, especially while we wait for The Orange Door to be rolled out across the state.

Crisis accommodation

The Royal Commission found that the capacity of refuges and crisis accommodation services needed to improve to meet children's needs.

One-off funding of \$3.5 million for child-related resources was provided to refuges in August 2018. Family Safety Victoria was due to report on the impacts on children's wellbeing as a result of the funding by June 2019, but this has not occurred.

Through the Learning and Development Project, the Domestic Violence Resource Centre Victoria is developing a set of minimum practice and operational requirements for supporting children in refuge and crisis accommodation. To date, the project has included the Children in Refuge Guiding Document (released in 2019) and in-person training for managers and practitioners.

Figure 4.3: Percentage of responses at The Orange Door and therapeutic services directed to children

Children represented **39%** of people provided with a response at The Orange Door in 2019-20.

while **32%** of therapeutic services were provided to children from September 2019 to June 2020

Source: Family Safety Victoria

One stakeholder described to us the practical barriers to delivering services to children when working with whole families in refuge. For example, case managers often work with 12 families at a time, some very large, with up to seven children. Meeting each family member's immediate needs such as food, clothing and shelter subsumes most of the initial effort, and funding for a family in refuge only covers a period of up to six weeks. Acknowledging these challenges will be essential as workforce development activities continue.

Services for Aboriginal children

Through our consultations we heard about the need for holistic family responses to Aboriginal families, including children, experiencing family violence. There is also a strong need for sexual assault therapeutic services for Aboriginal people, including for children, that are both trauma and culturally informed.⁷⁶

As part of the government's response to the Royal Commission's recommendation about the need for adequate funding to Aboriginal community-controlled organisations for culturally appropriate service delivery, the Dhelk Dja Family Violence Fund has been created. The fund is a flexible pool of funds targeted to Aboriginal organisations and communities to enable a range of tailored, Aboriginal-led responses and initiatives for Aboriginal families, including children. We look forward to hearing about the funded initiatives, including how they will address the specific needs of children.

Child protection practice – building family violence capability

Child protection services are designed, by their very nature, to prioritise the needs of children. The Best Interests Case Practice Model, based on the principles in the Children, Youth and Families Act, guides practice in family services, child protection, placement and support services and places the best interests of the child at the centre of all actions and decisions. Roadmap for Reform: Strong Families, Safe Children, the 2016 reform strategy for the children, youth and families service systems, emphasised the importance of intervening earlier to protect children from harm.

Policies, procedures and advice relating to family violence are published in the Child Protection Manual, and there are some key family violence capability-building initiatives that have occurred over recent years, including Tilting Our Practice for the entire child protection workforce and the co-location of family violence workers in Victoria's child protection offices.⁷⁷ Positively, 94 per cent of Tilting Our Practice participants agree that 'they have the knowledge, skills

and confidence to work effectively with families experiencing family violence after participating in the training'.⁷⁸ MARAM training and support for the whole workforce is now underway and is an ongoing priority.

However, the Commission for Children and Young People advised in its submission to the Monitor that 'family violence continues to be a persistent and pervasive theme in the Commission's child death inquiries'.⁷⁹ The Commission has concerns about poor practice by services, whereby Child Protection is viewed as failing to adequately consider family violence and that 'despite repeated and often early reports to Child Protection, many cases were successively closed and critical opportunities for support missed'.⁸⁰ Similarly, the legislated review of the Family Violence Information Sharing Scheme found that 'Child Protection did not always appear to fully recognise or effectively respond to family violence risk'.⁸¹ Similarly, Risk Assessment and Management Panel coordinators from across the state have advised the Monitor that this issue is regularly discussed at their meetings.

The Commission also highlighted that the service system was fragmented and referrals to other support services were often lost and led nowhere,⁸² and that there was often a lack of direct engagement with children and young people, despite the fact that they are generally in the best position to talk about their needs.

This is a crucial workforce known to have high levels of turnover. Ongoing efforts to support child protection workers to identify and respond to family violence risk should be prioritised.

Key issues

Clear need for improved availability of support services that meet children's needs

During our consultations there was universal agreement that services specifically designed to work with children as victim survivors of family violence are, frequently, not available. Many services are only available in limited areas and demand often exceeds supply, leading to long waiting lists – while the nature of family violence means timely support at the time of crisis is crucial. Stakeholders are unanimously calling for more investment in this area.

There appears to be a need for a comprehensive analysis of referral pathways that explores the services that are and that should be available for children under various circumstances. A system-wide analysis could help identify service gaps and could inform referral pathways for all workforces that may be needing to refer

children to targeted family violence support services. This work needs to consider that The Orange Door does not yet exist in many areas and include resourcing for all workforces.

There is also a need for explicit monitoring of the services that are being delivered specifically to children, to enable understanding of whether access, and early access, is increasing.

Quality data about children remains a significant gap

Four years on from the Royal Commission it is troubling that a robust data collection framework doesn't appear to exist. This lack of data creates a significant gap in the ability of services to meet the needs of children and makes it impossible to determine whether the supply of services is meeting demand.

If children are truly to be acknowledged as victim survivors of family violence, it is essential that there is quality data on which to base the design, funding and delivery of services, and to effectively understand demand for services. The Royal Commission and the subsequent Victorian Family Violence Data Collection Framework highlighted the lack of available data about children experiencing family violence, and this issue appears to remain. For example, Integrated Family Services and Child Protection datasets have not been added to the Victorian Family Violence Database, despite the Royal Commission listing them as priority areas for inclusion. A lack of information about children's journeys through The Orange Door has also been raised.

There is an important opportunity now to consider the additional data that should be collected at The Orange Door and elsewhere that could make a significant difference to better understanding the needs of children and the extent to which these are being met.

Workforce capability-building in working with and for children must be a continued focus

Although we saw evidence of practice guidance and training, there appears to remain a lack of confidence in working directly with children among some crucial workforces, including The Orange Door workforce. Significant proportions of the specialist family violence and broader workforces would like more MARAM training on working with children who are exposed to family violence. There is also a need for further guidance on both information-sharing schemes, especially willingness to share information under the Child Information Sharing Scheme.

There is an opportunity to consider lessons from the learning and development strategy for responding to children in refuge and the capability-building activities at The Orange Door. Promptly sharing the lessons from these initiatives will make an important contribution to the reform. It would also be beneficial for Family Safety Victoria to revisit the significant piece of work it undertook to review its own capability around children and young people in 2019 and to consider the recommendations.

A system-wide approach to early intervention is required

Beginning with the Royal Commission's report, and flowing down to other policies and guidelines, there is clear recognition of the need for different parts of the system to work together to intervene earlier to prevent harm to children from family violence. A range of universal and targeted services have a role to play in preventing family violence escalation and keeping children safe.

Notwithstanding the role of broader services, Child Protection and child and family services have the opportunity to initiate interventions to support children in situations where family violence has escalated or has persisted over time. Yet, the Commission for Children and Young People continues to observe, and raise concerns about, the inability of these services to intervene early, in relation to when a child first comes to their attention.

It is reported by some that service integration is proving difficult within The Orange Door, with tensions between different workforces relating to different views on how much of a focus there should be on child welfare.

This suggests there may be benefit in clearly articulating how different parts of the system should work together to address the independent needs of children, including being explicit about the importance of intervening early rather than being crisis-focused.

Voices of children and young people should be actively sought

Berry Street's Y-Change team told us that 'voices of children and young people are still overwhelmingly missing' – they articulated this with regard to both the reform and service development, and in-service delivery and practice with individual victim survivors. They suggested that children and young people with lived experience of family violence should be ongoing partners in design and implementation, with their voices sought, listened to and acted upon. This is an important area of improvement to ensure systems and services are designed in a way that directly considers the needs of children and young people.

In relation to individual cases, the Children, Youth and Families Act is clear about the importance of listening to the child's views and wishes, and the Commission for Children and Young People has described how children are often best placed to identify what they need. Given what we have discovered about the lack of confidence among workforces in working directly with children, there is an opportunity to develop further guidance and capability around actively seeking the independent voices of children in both designing and delivering services and responses for children.

Looking forward

This analysis has shown that a great deal of work to better acknowledge children as victim survivors of family violence in their own right has been undertaken, but more is needed. We suggest the following actions should be prioritised to help bring about the systemic shift required to ensure widespread understanding of children's experiences as victims of family violence and tailored responses to meet their unique needs:

- > Improve the availability of data about children's family violence-related experiences, including data about demand and wait times for services and outcomes for children following a service response.
- > Continue to invest in and refine capacity-building activities, including supporting workforces to engage directly with children as appropriate to determine their needs and wishes, applying the MARAM Framework and information-sharing schemes to children, and supporting child and family services practitioners to identify and respond to family violence risk.
- > Clearly articulate and support the roles and responsibilities of all parties (family violence prevention and response systems and beyond) in supporting early intervention for children to keep them safe from family violence.
- > Work to incorporate the voices of children and young people in the design of policies, tools, guidance and training for staff about working with child victim survivors.
- > Further investigate stakeholders' concerns about the application of Australian family law in Victorian cases where family violence is a factor, including consideration of the rate at which police apply to change a Family Law Act order and the outcomes in these cases.
- > Map services and referral pathways to support workforces to identify appropriate services for children requiring support and to identify and respond to, where possible, service gaps for children requiring family violence-related support.

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Chapter 5

Safe housing

Background

In investigating the matter of safe housing, we sought to establish the extent to which government and agencies have demonstrated adequate progress in improving access to housing across the spectrum for victim survivors and their families, including:

- > developing a clear plan for expanding and funding housing pathways
- > enabling more women and children to remain safely in the family home
- > addressing demand for crisis accommodation
- > increasing the long-term and affordable social housing stock.

Royal Commission findings

The Royal Commission into Family Violence heard consistent evidence about problems with the housing response to family violence. There was clear evidence that housing pathways were 'blocked up' and not flowing as intended, with a lack of viable long-term housing options to allow people to 'exit' the system and get on with their lives. There was found to be a shortage of both short- and long-term accommodation options across metropolitan and regional Victoria. The Royal Commission highlighted that a lack of housing options can exacerbate the trauma and dislocation of family violence, disrupting social and economic participation and education, and adversely affecting health and wellbeing. And that, in some cases, forces women to choose to return to a violent partner.

Planning and funding for housing pathways

There have been some promising housing strategies and investments since the Royal Commission that have aimed to improve access at different points along the housing spectrum. However, we have not seen evidence of any relevant analysis or strategies that seek to understand the system-level housing requirements at each stage in of a victim survivor's journey.

The Women's Housing Alliance has identified a 'chronic housing shortage' across the spectrum of crisis, transitional and long-term affordable housing, and it appears that the bottlenecks have intensified since the Royal Commission. The Department of Health and Human Services' Director of Housing has also

acknowledged these system challenges, which include: an acute lack of supply and diversity of affordable housing options; support that is often time-limited and inflexible; and a focus on outputs rather than outcomes.⁸³

Victoria's Homelessness and Rough Sleeping Action Plan

Victoria's Homelessness and Rough Sleeping Action Plan (2018) represents the first phase of reforming the specialist homelessness service system.⁸⁴ The strategy acknowledges family violence as a driver of homelessness, and it identifies system challenges relating to pathways into and out of homelessness and ways to intervene at each stage to address housing needs. However, the Victorian Auditor-General's Office found that despite the action plan's stated objective being to reduce homelessness, the 'Department of Health and Human Services has no baseline from which to measure performance. Therefore, from the outset Department of Health and Human Services had no way to measure the achievement of the objective'.⁸⁵ This is consistent with our analysis that there is a lack of clear data to quantify demand and the impact of major investments in meeting this demand.

Homes for Victorians and the Family Violence Blitz Package

The Homes for Victorians strategy aimed to make it easier for all Victorians to find a home and included a broad suite of initiatives across five themes, one of which was 'improving housing services for Victorians in need'.⁸⁶ Many activities under this theme were funded through the 2016 Family Violence Housing Blitz Package, which acknowledged the need for large-scale investment across the housing spectrum. The \$152 million package funded support for victim survivors to:⁸⁷

- > remain in their homes
- > access crisis accommodation
- > access social housing
- > receive short-term rental assistance.

An evaluation of the package, which focused on Flexible Support Packages, Rapid Housing Assistance and the Private Rental Assistance Program, noted positive outcomes in several areas including a reduction in financial hardship, an increase in housing stability and an increase in self-reported health.⁸⁸ It also suggested

areas for improvement such as adopting a more client-centric, outcomes-focused approach including targeting services to high-risk transition periods for clients, and enhancing data collection and monitoring.

Enabling more women and children to remain at home

There is no single ‘Safe at Home’ approach; rather, it refers to a variety of different interventions aimed at helping women and children to remain safely at home.⁸⁹ In Victoria this approach is primarily enacted through Flexible Support Packages and the associated Personal Safety Initiative. We have not been able to obtain data about the number of victim survivors who are able to stay at home or return home with the support of the Personal Safety Initiative and Flexible Support Packages, nor how long they were able to remain at home. These are important system issues to monitor.

The Personal Safety Initiative supports victim survivors to access appropriate and effective personal safety, security and technology responses that allow them to remain safely in their own homes and communities or to relocate safely to a new property. Through the initiative, eligible victim survivors receive a safety and security audit completed by a suitably qualified security provider, coordination of personal safety, security and technology responses, and a Flexible Support Package to fund personal safety and security measures.⁹⁰

Flexible Support Packages of up to \$10,000 can be provided to eligible victim survivors; these can be used for suitable and stable housing and technological safety support, among other things.⁹¹ Flexible Support Packages are highly regarded by clients and the sector, and demand for the packages is high (Figure 5.1). In 2018–19, the Department of Health and Human Services’ target of 6,662 packages was exceeded by 30 per cent, with 8,635 packages delivered. The 2020/21 Victorian Budget included funding for 5,700 packages per year for the next four years.

Many providers are managing demand by capping applications at \$3,000 and reserving higher value packages for extreme cases.⁹² Concurrently, the average funding for a Flexible Support Package is also \$3,000,⁹³ which suggests the capping could be program-wide and

Figure 5.1: Housing-related expenditure from Flexible Support Packages in 2019–20



Source: Family Safety Victoria

potentially undermining the program’s intended flexibility. The fact that agencies are having to introduce value caps for packages locally to meet demand suggests there is a need for a consistent and system-wide demand management approach.

The Safe at Home approach is not just a housing matter. The Royal Commission identified that it requires a holistic government response that includes a strong focus on perpetrators. A recent separation is a significant risk factor for escalating violence or for a victim being killed,⁹⁴ so it is vital that perpetrators be actively monitored. However, there continues to be concern about the effectiveness of family violence intervention orders, with several submissions to the Monitor indicating that many victim survivors and service providers are not confident in the Safe at Home option due to the high rates of family violence intervention order breaches and a perceived lack of consequences for these breaches. Domestic Violence Victoria advised that enforcement of these orders continues to be ‘inconsistent and unreliable’.⁹⁵ This matter is discussed in further detail in the next chapter.

Demand for crisis accommodation

Of all clients seeking specialist homelessness services in Victoria in 2019–20, 34.9 per cent (40,021 clients) cited ‘family and domestic violence’ as their main reason for seeking assistance.⁹⁶ This was also the most frequently cited reason.

Excess demand for crisis accommodation

In 2019–20, Safe Steps Family Violence Response Centre accommodated on average 100 women and children in some form of family violence crisis accommodation every night.⁹⁷ Demand for crisis accommodation is unable to be met by the available beds, leading family violence crisis support services and homelessness services to often resort to placing victim survivors in motels and similar ad hoc accommodation (Figure 5.2). Ninety-six per cent of Safe Steps clients accommodated in 2019–20 were placed in motels (including those who later accessed supported accommodation).⁹⁸ Family Safety Victoria has worked closely with Safe Steps to monitor demand for crisis brokerage and provide sufficient funding over the past two years. An additional \$4.07 million has been provided in 2019–20 and 2020–21 to enable the Safe Steps statewide service to place more victim survivors in crisis accommodation and cover associated motel costs, particularly during the coronavirus (COVID-19) pandemic response. However, long-term demand and funding remain a concern.

Figure 5.2: Nights of refuge accommodation provided, 2017–18 to 2019–20



Source: Family Safety Victoria

When staying in motels, victim survivors may be exposed to other human service sector clients such as perpetrators, mental health clients and drug and alcohol clients, who are also often housed in motels as crisis accommodation,⁹⁹ and this is unlikely to be conducive to healing from the trauma of family violence. There have recently been efforts to clarify roles and responsibilities in emergency accommodation, including in arranging appropriate outreach support for victim survivors in motels. Much work has been undertaken by Safe Steps to develop service agreements with motels where an understanding of family violence risk and trauma responses inform their engagement with victim survivors. This is important work that could make a real difference to those families who find themselves in emergency motel accommodation.

“cohealth’s family violence counsellors describe the experiences of women and children escaping family violence being placed in a motel with limited support from workers. These women talk about being very isolated, in unfamiliar areas, with children also experiencing trauma, grief and loss, with few resources or contact with family violence workers. While addressing risk and assuring safety is paramount, and practical case management is vital, these interventions need to be accompanied by counselling support to enable victims...to attend to the trauma and emotional experience of the situation.” – cohealth

Investments in crisis accommodation

The Royal Commission recommended increasing the number and range of crisis and emergency accommodation beds, using a wider range of service models.

This is occurring most significantly through the refuge redevelopment program and the ‘accommodation for the homeless’ investment. These investments are broadly supported by stakeholders. However, there are concerns about progress delays, and it is unclear how the additional beds promised are accounted for. For example, \$25 million over two years was announced as part of the Family Violence Housing Blitz package in 2016 to support construction of 180 new units of crisis accommodation and upgrades to existing accommodation.¹⁰⁰ Some facilities have been upgraded or newly built in working towards this target. However, it is not clear from evidence provided to the Monitor whether the 180 new beds were delivered as planned, nor whether regional, rural and remote areas were prioritised as recommended.

Funding for the refuge redevelopment program, which is replacing communal-style refuges with ‘core and cluster’ refuges, has totalled nearly \$80 million since the Royal Commission. The ‘core and cluster model’ is widely supported; it provides onsite support services in a ‘core’ building and a ‘cluster’ of independent living units on one parcel of land, offering greater privacy and accessibility. Through submissions, we heard examples of the design features of new refuges not being realised and suggest careful and ongoing project management to ensure the intent of the refuge redesigns is achieved.

We also suggest further analysis is required to determine if investments are improving access for cohorts including adolescents and victim survivors on temporary visas.

Disconnect between family violence crisis response and homelessness systems

Stakeholders are concerned about the disconnect between family violence crisis services and generalist homelessness services, identifying this as a key weakness in the housing pathways for victim survivors of family violence. These two services are commonly, and administratively, considered part of the one service, known as ‘specialist homelessness services’, yet the two streams are quite different and do not appear to connect well. Additionally, the criteria for different services are said to be narrow and inflexible.¹⁰¹ This creates a disruptive and uncertain crisis accommodation experience for victim survivors, who are often forced to navigate their way across disconnected systems.

Availability of long-term and affordable social housing stock

For many victim survivors escaping family violence, independently maintaining a mortgage or private rental arrangement is unaffordable and social housing is critical for providing long-term, stable housing.

Victoria’s Social Housing Supply Requirements to 2036, released in 2017, showed that at least 1,600 new long-term social housing dwellings were required each year for the subsequent two decades to allow social housing levels to keep pace with overall housing growth. Yet, the Council to Homeless Persons calculated that with investments up to the 2020/21 Victorian Budget, stock has only grown on average by 776 per year since 2015–16,¹⁰² remaining ‘grossly inadequate to meet demand’.¹⁰³ This is also clear from the growing number of people on the Victorian Housing Register waiting list for social housing and the shrinking number of people being allocated to social housing (Figure 5.3 and Table 5.1).

In 2018–19, Victoria had the lowest per capita expenditure on social housing nationally.¹⁰⁴ Social housing represents 3.2 per cent of all households in Victoria, compared with the national average of

What is social housing?

Social housing is available to disadvantaged Victorians. It is an umbrella term that includes:

- > public housing – housing owned and managed by the state government
- > community housing – housing owned or managed by not-for-profit organisations.

Source: State of Victoria (2017): Homes for Victorians

4.5 per cent.¹⁰⁵ To account for the growing gap between supply and demand, 3,500 new social housing units would need to be built every year over the next 10 years simply to maintain the current level of social housing. But there are also calls to match the national average level of social housing, which would require 6,000 new social housing homes every year for the next 10 years.¹⁰⁶ Domestic Violence Victoria powerfully stated in its submission that without very significant increases in the level of investment in social housing, the full scale of the family violence reform will not be achieved.¹⁰⁷ The Women’s Housing Alliance is similarly calling for major government investment and innovative solutions in this area, including changing planning regulations to ensure the private development sector is required to contribute to closing the gap.¹⁰⁸

Table 5.1: New social housing allocations, including family violence cases

	New allocations (all)	New allocations (family violence)	FV allocations as % of all new allocations
2015-16	3,848	15	0.4%
2016-17	3,540	360	10%
2017-18	2,812	385	14%
2018-19	2,770	439	16%
2019-20	2,378	331	14%

Source: FVRIM analysis of Department of Health and Human Services allocations data

Figure 5.3: Social housing waiting list



Source: Victorian Housing Register and transfer list

The 2020/21 Victorian Budget included \$5.3 billion to build more than 12,000 new homes for Victorians in need. The Big Housing Build will deliver a safe home for as many as 1,000 victim survivors of family violence across Victoria. This is a welcome and very significant investment, and we are pleased to note that it is accompanied by an announcement about the planned development of 10-year strategy for social and affordable housing. However, the Inquiry into homelessness in Victoria found that this investment ‘will still not ensure that Victoria will meet the national average of social housing as a percentage of total dwellings, at 4.5%’.¹⁰⁹ We suggest this strategy be underpinned by a precise social housing target and outline a clear plan to achieve it. We also suggest the need for a clearer picture of family violence-driven demand for social housing that is effectively monitored.

Private Rental Assistance Program

Another way victim survivors are supported into longer term housing is through private rental assistance via the Private Rental Assistance Program, which supports 6,000 households each year, including those affected by family violence.¹¹⁰ However, the proportion of these households that are affected by family violence, and the proportion that is able to sustain their rent after the 12-month support is over, is not currently known. Stakeholders have argued that this is not a sustainable option for those on low incomes in the long term.¹¹¹ The Australian Housing and Urban Research Institute’s inquiry into integrated housing support for vulnerable families discussed the limitations of a subsidised rental approach, finding:

While the rental market is an important part of the domestic and family violence policy response, a policy reliance on this form of housing tenure will be less effective than investment in social and affordable housing.¹¹²

Implications for housing pathways

A lack of social housing or other affordable and appropriate long-term housing creates a major roadblock for victim survivors moving on from crisis and transitional accommodation, which in turn contributes to bottlenecks for those seeking crisis accommodation, ‘driving the need for services to place women and children escaping family violence in inappropriate accommodation such as motels’.¹¹³ Of Victorians who fled family violence into homelessness, 62 per cent were unable to get the housing they needed and remained homeless after receiving support in 2018-19.¹¹⁴

Key issues

Need for a whole of housing spectrum strategic approach

It has been difficult to obtain an understanding of the family violence-driven demand for housing across the spectrum of housing (crisis/homelessness, transitional, social housing, support to stay safely at home), and it appears that there is not a clear understanding of this demand. Service providers, however, are clear and consistent in their assertions that the housing shortage across the spectrum is a significant impediment to reforming the family violence system. There have been a range of substantial investments and housing strategies to date, but none have taken a whole of housing spectrum approach, whereby demand is clearly mapped out at each stage, gaps identified, and targeted initiatives and investments set out that specifically aim to meet demand.

Given the interdependencies between different stages of the housing system and other related systems, there appears to be a need for an overarching strategy that considers a range of housing pathways for diverse priority cohorts, including victim survivors, and that works to ensure each pathway leads to positive long-term housing outcomes.

There is an opportunity to better integrate family violence and homelessness services to create a process for clients that is easier to navigate. There is also an opportunity to clarify the role of The Orange Door in facilitating access to housing as it develops and expands, which is flagged as one of many future areas of work.

Lack of clear data and monitoring

There is a lack of clear data on demand, supply and housing needs and outcomes for victim survivors. We received some relevant data – such as social housing allocation numbers, Victorian Housing Register demand for social housing and the average number of clients supported via Safe Steps in crisis accommodation – but data availability appeared inconsistent and was not presented in a way that provided a whole of system picture. Data issues were also raised in the Auditor-General's audit of Victoria's homelessness response, which found that the Department of Health and Human Services has no baseline from which to measure performance and has limited performance monitoring in place. The Housing Blitz evaluation also identified 'enhancing data collection and monitoring' as a key area for improvement.

There is no clear understanding of many critical elements of the housing system including the:

- > uptake or reach of Safe at Home initiatives
- > demand for perpetrator accommodation
- > demand for crisis accommodation (including entry point and length of stay)
- > supply of, and placements into, crisis accommodation (through a more effective Family Violence Accommodation Register)
- > precise accounting for crisis accommodation or homelessness beds
- > family violence-driven demand for social housing
- > proportion of social housing units that are unusable.

Introducing a stronger outcomes focus could help to inform future efforts. For example, there would be great benefit in tracking: outcomes for victim survivors who take the Safe at Home approach; the proportion of victim survivors supported through the Private Rental Assistance Program who cannot sustain their rent after the support is over; and the extent to which accessible refuge design elements are contributing to improved access for diverse cohorts.

Chronic shortage of social housing and other long-term affordable housing

While private rental assistance has a role in supporting victim survivors to maintain long-term housing, and should continue, it is only a short-term solution. Some victim survivors require longer term support including social housing. However, looking at social housing demand and allocations data alone, there is a chronic shortage of social housing in Victoria, with more than 20,000 'high priority' Victorians, including victim survivors, currently on the waiting list. Without addressing this broader housing issue, many victim survivors will continue to face challenges and barriers to securing long-term housing, which will increase the already high demand for crisis accommodation.

The investment in social housing announced as part of the 2020/21 Victorian Budget is significant. The planned 10-year strategy for social and affordable housing provides an opportunity to communicate a precise social housing target and a clear plan for achieving it. This should consider the modelling of social housing requirements carried out in 2017 and further up-to-date modelling, matching Victoria's proportion of social housing stock to the national average proportion (conducted by the community sector). It will also be important to work closely with the sector to develop innovative approaches to reaching the social housing target.

Need to strengthen the Safe at Home approach

While remaining in an existing home will not be desirable or appropriate in all cases, there are clear benefits to this approach that centre on maintaining stability and minimising disruption for victim survivors and their families. Commitments have been made to reorient the system to prioritise this approach of helping victim survivors to stay safely in their homes (rather than having to flee), but stakeholders are clear that there is no systemic approach to improving the viability of the Safe at Home option. There is room to make this a truly viable option for more victim survivors, but this will require a more holistic response.

Shifting the focus to exclude perpetrators from the home with appropriate support to keep them in view is another important part of enabling a Safe at Home approach. A very strong message in submissions to the Monitor was that many women and family violence workers will not consider the Safe at Home option due to a lack of confidence in police and the justice system being able to prevent and adequately respond to the high rates of family violence intervention order breaches. There is a call for action in this area, and there is a role for all parts of the system in supporting perpetrators to comply with family violence intervention orders. Consideration of the outcomes from the coronavirus (COVID-19) pandemic investment in rehousing perpetrators to inform future initiatives will be of benefit.

Support required for those using motels for crisis accommodation

The Royal Commission recommended that the practice of using motels as a source of crisis accommodation be phased out. It is apparent that progress in this area has been limited due to growing demand for crisis accommodation. Many stakeholder submissions to the Monitor raised concerns about the intractable nature of this issue, alongside the considerable risks and issues it brings for vulnerable victim survivors.

While efforts to reduce the reliance on motel accommodation continue through growth in refuges and other options, there is a need for short-term measures to improve the experiences of victim survivors who must still be housed in motels while numerous system blockages remain. Such measures include improving the consistency of crisis outreach support provided to those housed in motels to reduce their isolation and rapid access to therapeutic support, including outside of business hours.

Looking forward

There has been significant investment in housing since the Royal Commission; however, many systemic issues remain, and demand continues to outstrip supply. Our suggested priority actions focus on family violence-specific activity. However, we note that housing challenges for many victim survivors are inextricably linked to broader housing system issues, and the following actions alone cannot bring about the systemic change needed:

- > Conduct an analysis of the system-level housing requirements at each stage of a victim survivor's journey and identify client-centred solutions.
- > Strengthen perpetrator accountability systems to support more victim survivors to be able to confidently remain in their own homes.
- > Urgently work to improve data on housing supply and demand, and movement through the housing system for victim survivors of family violence, to support more informed monitoring and decision making based on a real understanding of client experiences.
- > Monitor a range of housing outcomes — for example, the number of victim survivors who are able to stay at home or return home, and for how long, through Safe at Home approaches and outcomes for particular cohorts such as adolescents, male victim survivors and victim survivors on temporary visas.
- > Put in place short-term measures to improve the experiences of victim survivors who must still be housed in motels as crisis accommodation and continue to seek more appropriate and sustainable options.

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Chapter 6

Perpetrator accountability

Background

This chapter outlines progress since the Royal Commission into Family Violence towards more effectively and systemically holding perpetrators to account, across the following themes:

- > police and justice system responses
- > perpetrator risk assessment and management
- > perpetrator interventions
- > working towards a 'web of accountability'.

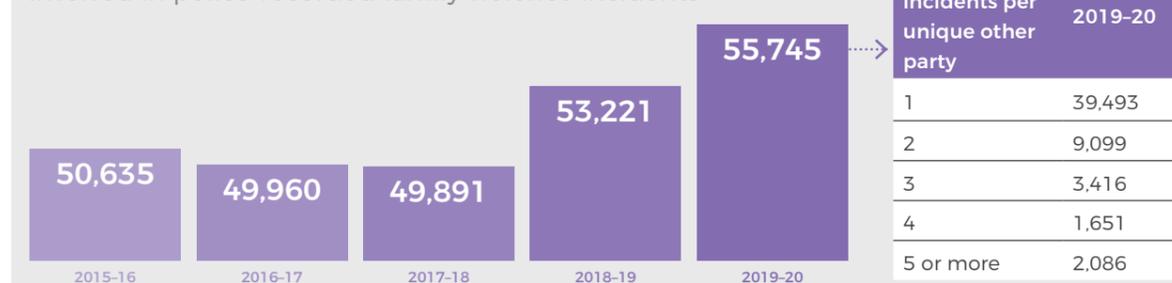
Royal Commission findings

The Royal Commission found an insufficient breadth and diversity of perpetrator interventions and too few interventions to meet demand. It suggested program quality needed improvement, program completion should be monitored, and that there needed to be a more integrated approach among government and non-government agencies to overcome the 'fragmented and episodic response to perpetrators'. The Royal Commission also noted that holding perpetrators to account is a basic function of the family violence and justice systems and that this 'entails keeping the perpetrator in view and responding appropriately and consistently to their conduct'.¹¹⁵

Perpetrators in Victoria

A substantial number of people perpetrate family violence in Victoria each year. The number of distinct family violence perpetrators recorded by Victoria Police has increased by 10 per cent between 2015–16 and 2019–20.¹¹⁶ The number of perpetrators involved in five or more incidents has increased from 1,687 in 2015–16 to 2,086 in 2019–20 (Figure 6.1).

Figure 6.1: Number of distinct 'other parties' (perpetrators) involved in police-recorded family violence incidents



Source: Crime Statistics Agency, Family Violence Data Portal, November 2020. Available: crimestatistics.vic.gov.au/family-violence-data-portal/family-violence-data-dashboard/victoria-police, table 20

Police and justice system responses

The Royal Commission recognised the significant role that police and the courts play in responding to family violence and in ensuring perpetrator accountability. The Expert Advisory Committee on Perpetrator Interventions also identified Victoria Police's efforts to improve the supervision of family violence intervention order compliance and the rollout of case management trials by the Magistrates' Court as critical to improving the management and monitoring of high-risk perpetrators.¹¹⁷

Victoria Police

Victoria Police has substantially changed its family violence response model since the Royal Commission. This has included introducing Family Violence Investigation Units in each police division and a Case Prioritisation and Response Model to guide allocation of the most serious and highest-risk cases to Family Violence Investigation Units, ensuring consistency of practice across units. While acknowledging that organisational change is a long-term process, and there is more work to be done, submissions to the Monitor highlighted the work Victoria Police has undertaken and the improvements being seen, particularly as a result of introducing Family Violence Investigation Units.¹¹⁸

Victoria Police can issue family violence safety notices to a perpetrator to offer immediate protection to a victim survivor and can apply to the Magistrates' Court for a family violence intervention order. Victoria Police practice guidance is clear that such notices and orders 'must be strictly enforced...and police must lay

charges for any contravention'.¹¹⁹ It acknowledges that 'a lack of attention conveys to the [perpetrator] and the [victim survivor] that the order is not taken seriously' and could risk the family's safety.

There were 48,071 family violence-related breaches of orders in 2019–20.¹²⁰ Between 2008 and 2020, the number of breaches of family violence orders increased from 8,261 to 48,071, demonstrating an increased willingness to report and for police to record breaches. However, stakeholders report continued concern that enforcement of these orders continues to be 'inconsistent and unreliable'¹²¹ and that 'perpetrators are still allowed to conduct horrific violence and continually breach [family violence intervention orders] with often very little response from the justice system'.¹²² This suggests that policing and justice system responses to breaches may be a specific topic where further attention is required. For example, a 2015 examination of sentencing outcomes for family violence intervention order and family violence safety notice breaches found, and expressed concern about, an overwhelming reliance on fines.¹²³ More up-to-date data on outcomes would be helpful.

Stakeholders raise two complex issues:

- > Victims are continuing to be misidentified as perpetrators,¹²⁴ and there are difficulties with remedying this in official Victoria Police records. More attention to this issue may be required between Victoria Police and the family violence and legal assistance sector, who have a role in identifying and raising misidentification for rectification.
- > Some victim survivors face extremely difficult circumstances where the perpetrator is a police officer. Victoria Police explicitly acknowledged this issue in its submission to the Monitor and has committed to undertaking further work to strengthen its response as part of the next phase of the reform.¹²⁵ The Monitor looks forward to seeing the progress of Victoria Police's work to address this issue.

Magistrates' Court response

A range of expert practitioners are working with perpetrators to provide advice on court processes, connect perpetrators with relevant services, and improve accountability. For example, there are Family Violence Applicant and Respondent practitioners at all headquarter courts, as well as the Specialist Family Violence Courts, including practitioners for Aboriginal perpetrators through the Umalek Balit program, and LGBTIQ family violence practitioners have been trialled at selected courts and the Neighbourhood Justice Centre. A number of submissions to the Monitor raised concerns about perpetrators' understanding of the conditions of family violence intervention orders,¹²⁶ contributing to breaches

of orders and further family violence offending. Respondent practitioners, in communicating the process and outcome of court proceedings, represent an important contribution to perpetrator accountability.

The Law Institute of Victoria¹²⁷ noted in its submission that its members are reporting that the 'holistic' Specialist Family Violence Court model is having 'marked improvements' for their clients – both for perpetrators and victim survivors.

The Magistrates' Court of Victoria has been able to issue counselling orders to perpetrators of family violence under section 130 of the *Family Violence Protection Act 2008* for some time. For example, magistrates at Specialist Family Violence Courts can order a respondent to attend a men's behaviour change program.¹²⁸ Court Services Victoria partnered with the Centre for Innovative Justice¹²⁹ to develop the Court Mandated Counselling Order Program to replace the two previous counselling order programs. The Court Mandated Counselling Order Program began operating in January 2020 and is available at five Specialist Family Violence Court sites. In 2019–20 the Magistrates' Court made 884 counselling orders, representing only a fraction of cases involving family violence perpetrators. Stakeholders have expressed concern¹³⁰ at the limited use of mandated men's behaviour change programs by the Specialist Family Violence Courts and insufficient monitoring of program attendance. Continued implementation of the new program and integrated model will substantially strengthen the court response to perpetrators.

Perpetrators in the corrections system

The then Department of Justice and Regulation's 2018–2021 family violence strategy for the Victorian corrections system highlighted that 63 per cent of male and 51 per cent of female prisoners and offenders had been recorded as perpetrators by Victoria Police at some point in the last ten years, and acknowledged that the 'corrections system has a unique opportunity to provide interventions to change perpetrator behaviour'.¹³¹ Principle 3 of the strategy is that 'perpetrators are held to account, engaged and connected'. The two objectives associated with this principle are: identifying family violence perpetrators; and delivering targeted family violence programs and services to perpetrators.

In community correctional services, a new service model was introduced in 2017, offering more intensive case management and greater access to targeted rehabilitation and support services to help reduce reoffending.¹³² For the prison system, the Responding to Family Violence in Prisons Guideline was released on 1 July 2018, along with three new incident categories on the Prisoner Information Management System. In prisons and community correctional services, perpetrators can be referred to a range of programs based on their criminogenic needs and

specific circumstances, including men's behaviour change programs. Given the high prevalence of family violence among offenders, the number participating in behaviour change programs as part of their community corrections order remains low at only 359 in 2019–20, compared with 1,576 referrals in that year (see also Figure 1.1 in Chapter 1).¹³³ Demand for these programs exceeds the available places, and further investment in the service sector is required to increase capacity and sustainability.

Perpetrator risk assessment and management

Central Information Point and information sharing

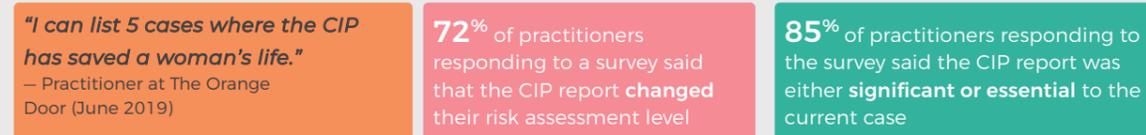
Stakeholders have described the Family Violence Information Sharing Scheme and Central Information Point as 'game changers' in improving access to information to understand and manage risk and to improve the visibility of perpetrators within the system.¹³⁴

The Family Violence Information Sharing Scheme ministerial guidelines include specific guidance on 'sharing information about perpetrators and alleged perpetrators of family violence' and the 2020 Family Violence Information Sharing Scheme review found clear evidence of 'increased sharing of perpetrator information which in turn has led to an increase in the extent to which perpetrators are kept in view'.¹³⁵

The Central Information Point, launched in April 2018, was established by Family Safety Victoria in partnership with Victoria Police, the Magistrates' Court of Victoria, Corrections Victoria and the Department of Health and Human Services. Staff from all these agencies are working together to provide consolidated reports of information about perpetrators and alleged perpetrators for the purpose of risk assessment and management.¹³⁶ The Central Information Point is also available to Berry Street Northern Region as a pilot. There is evidence of the positive impacts of the Central Information Point, as highlighted in Figure 6.2.

The Monitor understands there are challenges associated with the ongoing implementation of the Central Information Point, including budget uncertainty, but that Family Safety Victoria and partner agencies are leading work to refine the Central Information Point operating model to improve efficiency and respond to increasing demand. Central Information Point reports are currently only available to practitioners at The Orange Door (previously Support and Safety Hubs) and to some Risk Assessment and Management Panels; however, it will be important to consider how access can be expanded to Safe Steps and the Men's Referral Service, as suggested by the Royal Commission.

Figure 6.2: Positive impacts of the Central Information Point (CIP)



Family Safety Victoria CIP Survey, 30 September – 8 November

Source: Adapted from Family Safety Victoria (December 2019): PowerPoint presentation: Central Information Point, Case study demonstration

The Family Violence Multi-Agency Risk Assessment and Management (MARAM) Framework

One of the MARAM Framework's objectives is to 'keep perpetrators in view and hold them accountable for their actions and behaviours'.¹³⁷ Principle 9 in the framework is that:

*Perpetrators should be encouraged to acknowledge and take responsibility to end their violent, controlling and coercive behaviour, and service responses to perpetrators should be collaborative and coordinated through a system-wide approach that collectively and systematically creates opportunities for perpetrator accountability.*¹³⁸

While perpetrator practice guides and risk assessment tools were still being developed and finalised during the monitoring period, the MARAM Framework legislative instrument and policy document provides high-level guidance around perpetrator risk assessment and management. The training and support provided to workforces to understand and operationalise the guidelines, once released – particularly among universal and justice workforces (hospitals, alcohol and other drug, mental health services and custodial workforces) – will be critical to their successful implementation.

The Orange Door

Where The Orange Door is operational, it is designed as the entry point to perpetrator services.¹³⁹ A practice guide, developed in consultation with a range of key stakeholders, was released in 2018 to outline how The Orange Door would manage perpetrators. It outlines their responsibility for keeping perpetrators in view and holding them to account by 'challenging them to take responsibility for, and support them to choose to end, their violent behaviours and attitudes'.¹⁴⁰ However, the Victorian Auditor-General's Office's finding that 'there is a lack of agreed understanding among hub practitioners on what it means to hold perpetrators accountable for their violence'¹⁴¹ must be addressed. Robust data on

the number of perpetrators receiving a service through The Orange Door is not currently available. However, in 2019–20, 39 per cent of adult clients referred to The Orange Door were identified as perpetrators (noting that this data includes a small number of victim survivors who were misidentified as perpetrators through the referral process to The Orange Door).

Risk Assessment and Management Panels

Risk Assessment and Management Panels are formally and regularly convened meetings of key agencies and organisations in local service areas for the very highest risk family violence cases. They ‘develop coordinated action plans across participating agencies to lessen or prevent serious and imminent threat to an individual’s life, health, safety or welfare’.¹⁴² In October 2020, the Monitor met with a group of panel coordinators and chairpersons who described the panels as maturing significantly over the past four years, with an increased focus on perpetrators while keeping victim survivor safety as the central goal. They see opportunities for further improvements including:

- > a need for additional responses outside of the justice system that can engage men early in taking responsibility for their behaviour, including stronger visibility and risk assessment of perpetrators in the child protection system
- > a need for system-level monitoring and case management for higher risk perpetrators
- > greater integration between the panels and the police Family Violence Investigation Units.

The Monitor will be keen to watch the progression of these improvement opportunities in 2021, particularly as part of the implementation of the whole of Victorian Government work program to strengthen perpetrator accountability articulated in the Rolling Action Plan 2020–23.

Approaches to perpetrator intervention

Men’s behaviour change programs

The primary intervention for perpetrators of family violence is engagement in men’s behaviour change programs. These programs focus on improving victim survivor safety by addressing the drivers of perpetrators’ use of violence and abuse and through regular contact with affected family members to monitor risk. While the Victorian Government has made a series of investments since the Royal Commission to improve access, waiting lists have continued to be an issue, and this became even more challenging during the coronavirus (COVID-19)

pandemic (as discussed in Chapter 9). The Department of Justice and Community Safety advised that there can be upwards of 500 offenders on the waiting list for men’s behaviour change programs in the community and it is not uncommon for some men to have their Community Corrections Order expire before being able to complete a program. No to Violence’s survey of 16 Victorian member organisations in August 2020 found there were 1,100 clients on waiting lists, with an average wait time of more than 13 weeks, and the longest wait time 40 weeks. The need for more perpetrator programs was raised in a number of submissions to the Monitor.

Revised minimum standards for men’s behaviour change programs were released in 2017, with key changes including compliance with the Family Violence Information Sharing Scheme, higher level of facilitator qualification, increased program duration (from 10 to 20 weeks), and new reporting requirements including keeping records of attendance, referrals to other services and risk assessment. Additional funding was provided to support the delivery of 20-week programs and to maintain access levels.

Completion rates for voluntary men’s behaviour change programs in the community are not currently available but they represent an important program metric that should be monitored and reported.

Trial interventions

Other interventions, including some targeted to diverse communities, are being trialled, with funding initially provided through a dedicated perpetrator intervention package in the 2017/18 Victorian Budget, and subsequent funding allocated through the 2019/20 Victorian Budget. For example, the Living Free From Violence 15-week group program has been delivered at Dame Phyllis Frost Centre by Drummond Street Services and is designed for women, trans and gender diverse people who have caused harm or used violence in their relationships. It also offers individual support before and after the group program.

A perpetrator case management trial began in 2018, offering an average of 20 hours of tailored, individualised support, including through referrals to appropriate services and brokerage funding of up to \$2,000 to purchase products or services to stabilise perpetrators so they can engage in programs. An evaluation of the two-year trial was completed in November 2019, finding that ‘providing one-on-one support that is tailored has reportedly assisted in meeting the needs of people using violence, particularly those who have more complex needs’ and that it was improving perpetrators’ readiness for group programs.¹⁴³ Perpetrator case management will continue to operate and should draw on lessons from the trial evaluation, which made a series of recommendations for ongoing case management.¹⁴⁴

Consideration of the evaluation findings of these trials will help build important evidence about which interventions work for which perpetrators, and under what circumstances.

Accommodation

Providing accommodation to perpetrators is an important development, given the significant disruption experienced by victim survivors when they are forced to relocate for their own safety. A lack of stable housing for perpetrators is often used as an excuse for breaches of intervention orders (thereby increasing risk to victim survivors) and is recognised as a barrier to behaviour change and a factor that increases the likelihood of reoffending.¹⁴⁵ In August 2020 the Premier announced a \$20 million investment in a range of perpetrator initiatives, including perpetrator accommodation. We understand that of this funding, \$1.67 million was allocated to No to Violence to deliver the Perpetrator Accommodation and Support Service for 12 months. No to Violence is partnering with the Salvation Army’s Crisis Support Service to find accommodation for perpetrators and to ensure perpetrators receive tailored support based on an assessment of their risk and needs. The package also includes funding for longer term perpetrator accommodation options. The implementation of and outcomes from this work will provide important lessons for future strategies around removing perpetrators from the home into alternative accommodation.

Working towards a web of accountability

Expert Advisory Committee on Perpetrator Interventions

The Expert Advisory Committee on Perpetrator Interventions was established in November 2016 to advise government on the suite of family violence perpetrator interventions that should be available in Victoria to ensure the safety of women and children. Its report was delivered to government in October 2018 and released publicly in October 2019. The report acknowledged the significant reform underway in Victoria but found that many challenges remain. It made 22 recommendations, ideally to be implemented within two years. The committee’s report has been used in various ways; for example, its principles informed the revised minimum standards for men’s behaviour change programs and guided development of the perpetrator case management model.

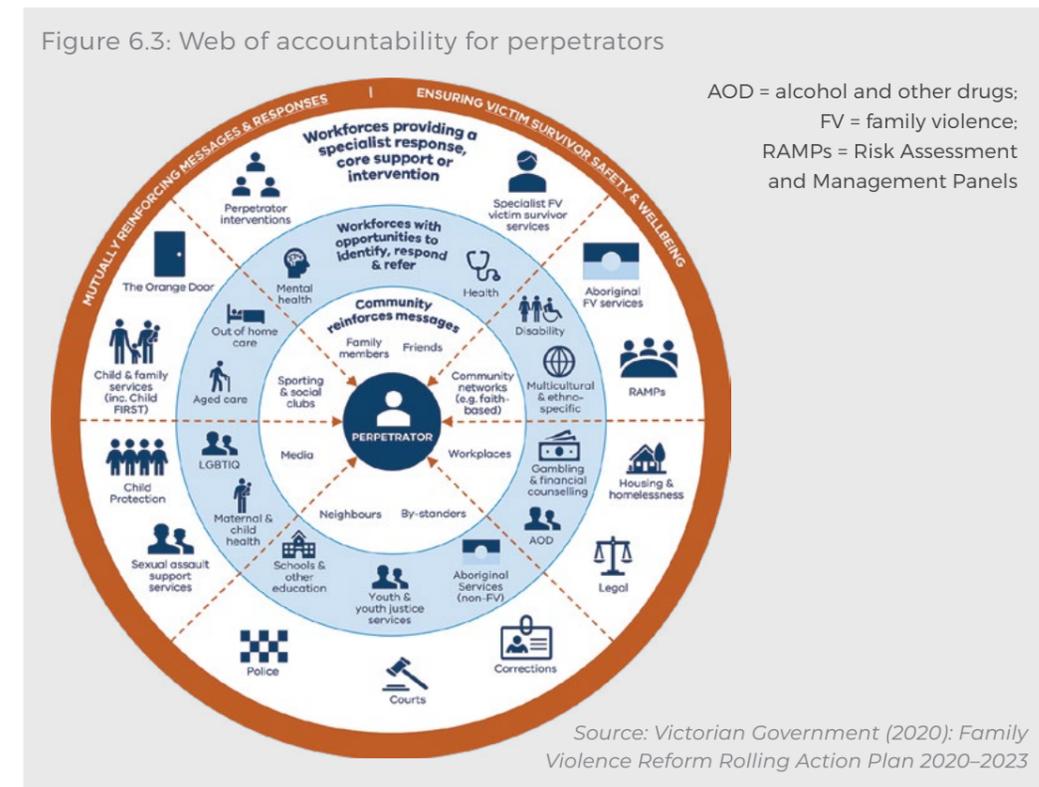
Strengthening the system approach to perpetrator accountability

While we have seen evidence of ongoing conversations about perpetrator accountability (including approaches to address the committee’s recommendations) since the release of the report, some stakeholders expressed

frustration with the slow pace of progress in responding to the committee’s recommendations and indicated that they were unsure what had been done to implement the recommendations in the two years since the report was delivered.

Consultation relating to perpetrators as part of developing the Family Violence Reform Rolling Action Plan 2020–2023 gave stakeholders a more explicit opportunity to understand and provide feedback on the proposed actions that would respond to the committee’s recommendations. A whole of Victorian Government perpetrator accountability work program is now articulated in the internal perpetrator accountability plan and the Family Violence Reform Rolling Action Plan 2020–2023. These plans articulate a web of accountability (depicted in Figure 6.3), involving all parts of the service system working together to deliver the roles and responsibilities relating to perpetrator accountability and victim survivor safety as set out in the MARAM Framework and the Family Violence Information Sharing Scheme.

Priority must now be given to the timely delivery of the work program. This will require appropriate cross-government governance, which will be critical to ensure integrated whole of system responses. The ongoing inclusion of sector stakeholders in a meaningful way – as envisioned by the committee – will also be important for achieving the intended outcomes of the work program.



Case study: Dardi Munwurro's healing success

Dardi Munwurro is a specialist Aboriginal family violence service. Its holistic, culturally driven programs are underpinned by the understanding that the social and emotional wellbeing of Aboriginal people is based on their connection to country, community, family and culture. A key focus of its model is supporting people to heal first to enable them to change their behaviour. The service runs Ngarra Jarranounith Place, an intensive 16-week residential, culturally appropriate, healing and behaviour change program for men who perpetrate, or who are at risk of perpetrating, family violence. The program has an 82 per cent completion rate*. It centres around one-on-one case management, structured group work, volunteering and community engagement, supported by a case manager and a range of practitioners and professionals. After participants complete the residential program, Dardi Munwurro provides ongoing support as they transition back into the community. A Family Support and Engagement program has also been set up to provide support to the women and children affected by family violence perpetrated by men and young people participating in the Dardi Munwurro programs.

Deloitte Access Economics found that Dardi Munwurro's men's healing programs deliver a range of benefits to individuals, families and the community.

Benefits able to be monetised (from largest to smallest) were:

- > reduced rates of incarceration
- > increased employment resulting in reduced welfare expenditure and increased tax revenue
- > fewer community corrections orders.

Areas where there were significant measurable, positive changes included:

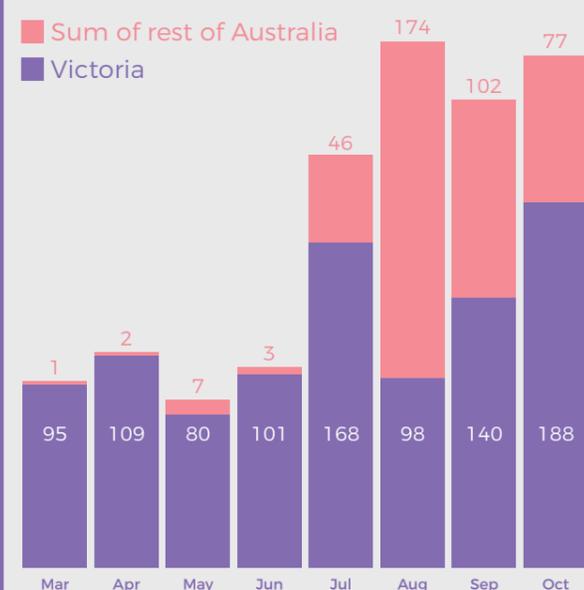
- > decreased misuse of alcohol and other drugs
- > decreased homelessness
- > increased engagement in education
- > an increase in gaining employment.

A cost-benefit analysis highlights that every dollar invested in a Dardi Munwurro program results in \$1.50 to \$2.90 of benefits — a return on investment of between 50 and 190 per cent.

Dardi Munwurro has also established the culturally safe Brother-to-Brother 24/7 Aboriginal Men's Crisis support line on 1800 435 799 to engage and support Aboriginal men who are at risk of, or who are, perpetrating family violence. It is the only hotline in Australia specifically created to assist Aboriginal men seeking help. Since it launched in March 2020, demand for the helpline has almost tripled (Figure 6.4). Significantly, the program has attracted callers from across Australia.

* Completion rates for general community men's behaviour change programs are not available for comparison.

Figure 6.4: Brother-to-Brother calls for 2020



Source: Dardi Munwurro, November 2020

Looking forward

Since the Royal Commission there has been a significant shift to recognise that addressing perpetrator behaviour and risk is central to ensuring victim survivor safety. Among submissions to the Monitor, the increased visibility of perpetrators was a commonly cited change in the system.

While there have been substantial improvements over the past five years, many of the issues identified by the Royal Commission remain. There are still insufficient intervention options to cater to the diverse needs of perpetrators,¹⁴⁶ demand for programs continues to be unmet, and not enough is known about the effectiveness of interventions.¹⁴⁷ Responses to perpetrators across the justice and family violence systems also remain somewhat siloed, resulting in perpetrators continuing to move 'in and out of view'. Within these limitations, dedicated workforces continue to do their best to manage risk and hold perpetrators to account and to promote behaviour change to keep victim survivors safe.

To date there has not been a focused and coordinated strategy to drive a systemic response to perpetrator accountability and management. The whole of Victorian Government work program for strengthening perpetrator accountability articulated in the Rolling Action Plan 2020-2023 represents a valuable opportunity to progress integrated work in this critical area. In progressing the planned perpetrator accountability work, we suggest that responsible agencies give attention to the following:

- > Action the whole of Victorian Government perpetrator work program as a matter of urgency, maximising its effectiveness through meaningful and ongoing sector engagement and cross-government governance.
- > Find opportunities to coordinate the management of higher risk perpetrators beyond the existing Risk Assessment and Management Panels, and better connect the growing range of approaches to perpetrator management across the system.
- > Seek to understand stakeholders' concerns about the enforcement of family violence intervention orders and family violence safety notices, from the perspectives of policing and sentencing.
- > Build on the outcomes of the perpetrator accommodation initiative to consider ongoing options to support removing perpetrators from homes.
- > Reconsider the differing needs of the young adult cohort (18- to 25-year-olds) within perpetrator interventions — they most likely require a different response.
- > Learn from the broader intervention response of the holistic approach taken by Dardi Munwurro in working with Aboriginal men who use violence.

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Chapter 7

Adolescents who use violence in the home

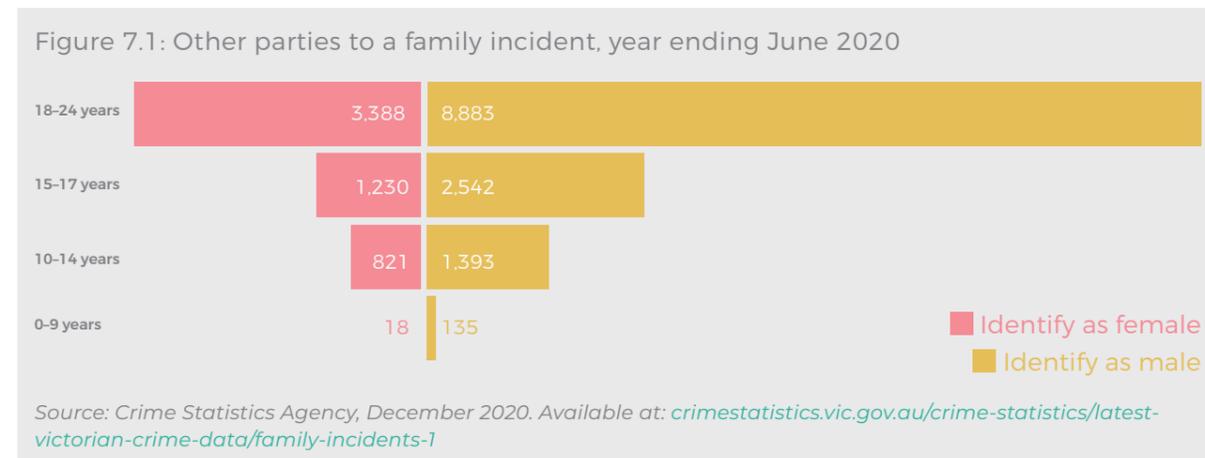
Background

Royal Commission findings

The Royal Commission into Family Violence identified that adolescents who use violence in the home require a specialised and systemic response and recommended that programs with successful trials should be expanded. It defined young people’s use of violence against family members as ‘a distinct form of family violence’, with three forms: child-on-parent violence, sibling violence and problem sexual behaviours. It reported that family violence, youth services, family services and justice sectors generally have limited understanding of adolescent family violence and are ‘ill-equipped to address it’, concluding that there was ‘no systemic response to the needs of these young people and their families, though a number of positive initiatives operate in local areas’.

Characteristics of adolescents using violence

In the year ending June 2020, Victoria Police recorded 18,410 family incidents where the ‘other party’ (most commonly the aggressor) was aged 24 years or under, as shown in Figure 7.1.

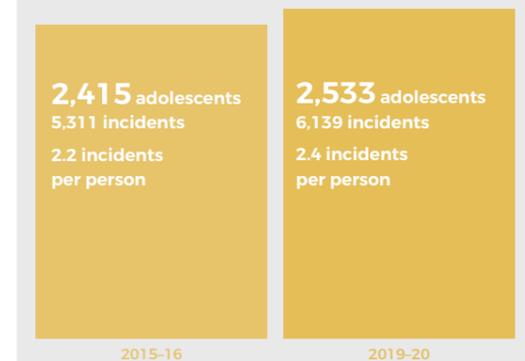


The Crime Statistics Agency’s analysis of Victoria Police, family violence intervention order and Victoria Youth Justice data in February 2020 showed (see also Figure 7.2):

- > the number of adolescent family violence incidents recorded by police has increased over the past five years
- > intimate partner violence is the fastest growing type of adolescent family violence
- > the rate of adolescent family violence was twice as high in regional or rural areas than in major cities
- > over half of adolescent aggressors of family violence had prior contact with police as a witness or victim survivor of family violence, or with courts as a protected person on a family violence intervention order
- > 80 per cent of young people go on to have future contact with the justice system after a first adolescent family violence aggressor incident, and over half have subsequent involvement as a victim of crime, a victim survivor of family violence or a complainant on an intervention order.¹⁴⁸

Figure 7.2: Growth in the number of distinct adolescent (aged <18 years) family violence offenders and the number of adolescent family violence incidents

+ 5% in distinct adolescent offenders
+ 16% in family violence incidents



Source: Crime Statistics Agency, December 2020. Available at: crimestatistics.vic.gov.au/crime-statistics/latest-victorian-crime-data/family-incidents

The Royal Commission also noted that children, young people and adolescents who use violence in the home often have complex needs, including mental illness, acquired brain injuries, alcohol and other drug use, and past exposure to family violence.¹⁴⁹ Subsequent research has shown that in 47.4 per cent (66) of Victorian case files reviewed between mid-2017 and the end of 2018, the adolescent who had used family violence had a diagnosis of psychosocial or cognitive disability, and in 23 per cent of cases, this was likely significant enough to affect the adolescent’s capacity to comprehend and comply with legal orders.¹⁵⁰

The evaluation of the Victorian Government-funded Adolescent Family Violence Program reported on the characteristics of its participants, confirming this complexity:

- > 61 per cent had a diagnosed mental health issue
- > 30 per cent had a substance use (alcohol or drug) issue
- > physical (6 per cent) and intellectual disabilities (12 per cent) were also present
- > 80 per cent had witnessed violence between other family members
- > 54 per cent were from households with a single carer, most commonly female.¹⁵¹

Systemic recognition and awareness raising

Adolescents using violence in the home is now recognised as a distinct form of family violence in major policies and practice guidance. For example, Principle 10 in the Family Violence Multi-Agency Risk Assessment and Management (MARAM) Framework requires a specialised response:

...family violence used by adolescents is a distinct form of family violence and requires a different response to family violence used by adults, because of their age and the possibility that they are also victim survivors of family violence.¹⁵²

The Expert Advisory Committee on Perpetrator Interventions specifically stated in its 2019 report that this group was outside its scope because it considered ‘that these young people require a specialised, therapeutic response and note that work is underway by government on this area of service’.¹⁵³ Adolescent violence in the home was also out of scope whole of Victorian Government work program to strengthen perpetrator accountability articulated in the Rolling Action Plan 2020–23.

Victoria Police’s Code of Practice for the Investigation of Family Violence includes adolescents’ use of violence specifically within its definition of family violence and recognises the group as a diverse community, going on to provide specific practice guidance for appropriate police responses.

In 2018, Family Safety Victoria established an Adolescent Family Violence Cross-Government Working Group ‘to develop a coordinated service response for adolescents who use family violence’, which includes representation from the education, youth justice, police, children, youth and families, disability and court sectors.

Building the evidence base

RMIT University’s Centre for Innovative Justice led a research project, Positive Interventions for Perpetrators of Adolescent Violence in the Home, which had a specific focus on the initial legal response that adolescents and their families receive. Reporting in April 2020, the project had strong engagement in Victoria and made 21 recommendations, a substantial number of which endorse recommendations from previous reviews.¹⁵⁴

Family Safety Victoria launched a project in partnership with the Centre for Excellence in Child and Family Welfare in 2019, The Building the Evidence project, aiming ‘to better understand the nature of youth violence in the home and the approaches that work’.¹⁵⁵ The project undertook a statewide consultation with child and family services and specialist family violence workforces in December 2019 and delivered a report and symposium in March 2020. It has made tangible contributions through developing a menu of evidence-informed programs. Family Safety Victoria has committed to ‘explore how the interventions from the menu could be tested within other sectors’.¹⁵⁶ While building the evidence base is essential, it will be important to find a balance between further research and moving forward to service delivery.

Therapeutic programs

Adolescent Family Violence Program

The Royal Commission recommended statewide expansion and strengthening of targeted therapeutic responses, both sexually abusive behaviours treatment and adolescent family violence programs. The Adolescent Family Violence Program is an intensive case management program that works with the whole family and is funded in three areas in Victoria to each support 80–100 families annually. It has received additional investment of \$1.426 million, a 229 per cent increase, over the five years to 2019–20. This new funding has been predominantly shared between the three existing providers (Child and Family Services Ballarat, Peninsula Health and Barwon Child Youth and Family Services), with new funds to Mildura District Aboriginal Services to develop and deliver a new program (which Family Safety Victoria advised the Monitor is in the early stages of development). Although the number of cases opened has increased (Figure 7.3), the program has not seen the statewide expansion that the Royal Commission recommended – the 2020/21 Victorian Budget provided funding to continue but not expand the existing programs.

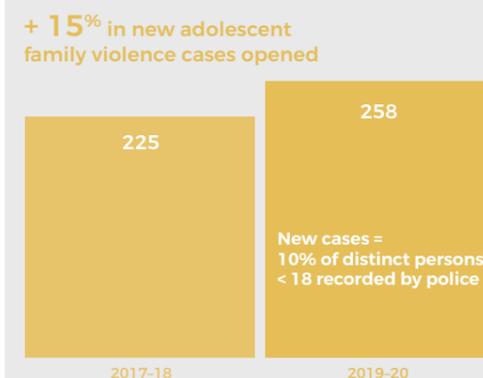
The Australian Institute of Criminology conducted an independent evaluation of the program in 2014–15 and reported in 2017. Agencies delivering the program advised the Monitor that there has not yet been any government response to the evaluation nor any communication about its findings since it was finalised three years ago. The report had not been publicly available, although eagerly awaited by other stakeholders, but the Australian Institute of Criminology published it during the conduct of this review in September 2020.

The evaluation showed the program has had some significant positive impacts. While there was no change in police reports for violent reoffending, young people and families' self-reports of reoffending did decrease, and the evaluation showed significant findings regarding improved relationships within families in many situations, which had flow-on benefits for the stability of young people's accommodation, and their engagement in school.¹⁵⁷

The three providers of the Adolescent Family Violence Program advised that demand for the program far exceeds capacity, and demand has surged during the coronavirus (COVID-19) pandemic. There is also growing demand outside of the program's target age of 12–17 years, increasingly down to eight-year-olds and up to 24-year-olds.

Family Safety Victoria has advised that a current priority is working to strengthen the capacity of existing workforces to work with families that do not have access to specialist adolescent family violence programs. This includes developing a guide to evidence-informed programs that focus on adolescent family violence. These are important strategies towards a system-wide response, but they should not distract from the Royal Commission's recommendation for statewide expansion of the Adolescent Family Violence Program. The Commission for Children and Young People has previously reiterated the need to consider a statewide trauma-informed model of treatment for young people with violent behaviours to ensure early intervention.¹⁵⁸

Figure 7.3: Increase in number of new cases opened in the Adolescent Family Violence Program



Source: Department of Health and Human Services

Crisis response

The Royal Commission made several recommendations about the frontline, immediate response when adolescents are using violence in the home, including that Victoria Police considers using dedicated youth resource officers and that there be additional crisis and longer term supported accommodation options for adolescents, combined with therapeutic support. Stakeholders have advised that while there has been progress in these areas, there remain significant issues.

In response to the Positive Interventions for Perpetrators of Adolescent Violence in the Home project's findings about the gap in an immediate response to adolescent family violence, Jesuit Social Services has developed an evidence-informed model of 'co-response', where police would be accompanied by a social worker responsible for de-escalating a situation in the home, and then provide follow-up to the family within 72 hours. Jesuit Social Services advised the Monitor that a proposal to trial the model was provided to Family Safety Victoria in April 2020 and that it is awaiting a response.

The 2020 announcement of Commonwealth-funded perpetrator accommodation included public commitments to implement adolescent-specific initiatives that may also address these issues, though details are not yet available. We also understand that the youth refuge service model is currently under review to better meet the needs of young people experiencing homelessness, including adolescents who use violence in the home.

Justice system responses

The Royal Commission recommended using diversion more frequently for adolescents. In response, the Victorian Government established the Children's Court Youth Diversion service through the *Children and Justice Legislation Amendment (Youth Justice Reform) Act 2017*. This statewide service:

...provides an opportunity for eligible children and young people to address the harm caused by their offending by taking responsibility and completing a diversion activity or activities. On successful completion of the diversion activity or activities, charges are discharged, with a non-disclosable criminal record for the offences subject to the diversion order.¹⁵⁹

The *Children, Youth and Families Act 2005* was amended in 2019 to extend the therapeutic treatment order regime for children and young people displaying sexually abusive or problematic behaviours (which often occurs in a family violence context) to include young people aged 15–17 years. The Commission for Children and Young People went further and recommended, in acknowledgement of

the 'transgenerational pathway' to family violence, that the use of therapeutic treatment orders be analysed to determine whether 'any results from those orders have relevance to young people with violent behaviours'.¹⁶⁰

Other justice responses to address adolescents who use violence in the home include the following:

- > The 'Restore' pilot program delivered by Jesuit Social Services operates out of the Melbourne Children's Court to support families where young people are using violence in the home. A Family Group Conference is offered to help the young person and their family develop practical solutions that will keep people safe and prevent further violence occurring at home.
- > Youth Justice is undertaking a comprehensive program of work to align its services, including funded community service organisations and Aboriginal community-controlled organisations, with the Family Violence Multi-Agency Risk Assessment and Management (MARAM) Framework. This includes a Practice Guideline: Understanding and Responding to Family Violence, which outlines requirements for family violence identification, risk assessment and risk management, to be used throughout a young person's involvement with Youth Justice.
- > Youth Justice funds and can refer young people under its supervision to Functional Family Therapy in the North West Metropolitan area and Multisystemic Therapy in the South East Metropolitan area. These intensive, evidence-based programs work with young people and their caregivers in the family home to improve family cohesion and empower caregivers to foster healthy home environments that can support young people to reduce offending behaviours.

Restorative justice options

The Royal Commission noted the benefits of restorative justice options for families where adolescents have used violence.

Group conferencing, which is underpinned by restorative justice principles, is available in the Children's Court prior to sentencing, bringing the young person found guilty of offences together with community representatives and persons of significance, which may include the victim or victim representative. Group conferencing can be used in family violence cases where deemed appropriate by the convener and with appropriate supports in place.

The Department of Justice and Community Safety and Family Safety Victoria trialled 'restorative family meetings' as part of the Adolescent Family Violence Program from December 2018 to December 2019. An unpublished evaluation by

the Department of Justice and Community Safety found a range of challenges with the approach, as well as low uptake, and it has not been continued beyond the trial. Stakeholders involved in the project have advised the Monitor of hurried and poor implementation of the trial, which went beyond what is reported in the evaluation and most likely contributed to the low uptake and inability to show clear outcomes.

Several stakeholders have advised the Monitor that restorative justice options are frequently misunderstood and poorly implemented, but when done so with the necessary expertise and approaches, show very strong results and should continue to be offered and considered. The Department of Justice and Community Safety's acknowledgement of the limitations of the trial and of the need for a restorative justice response for adolescents who have used violence in the home suggest that a further carefully implemented trial should be considered.

Service and system integration

Adolescent violence in the home is a critical area where service coordination is essential. The complexity of issues that adolescents and families are experiencing mean that appropriate responses commonly require coordination between many sectors and services such as housing, child protection, child and family services, police and The Orange Door (previously Support and Safety Hubs), where it exists, as well as mental health services in many cases.

Achieving this integration is further complicated where a specialist service, such as the Adolescent Family Violence Program, is not available in most parts of the state. But even where there is a specialist program, challenges around referral pathways exist.

Family Violence Regional Integration Committees, which bring together specialist family violence and other providers in local areas, have done substantial work in adolescent family violence such as convening forums and roundtables to specifically address the issue. Three have completed service mapping in recent years.

The MARAM Framework and its supporting resources now include specific advice and guidance for practitioners working with adolescents who use family violence, with a focus on the restrictions that the coronavirus (COVID-19) pandemic presents, through a practice note published in May 2020. This is an important system-wide response that will most likely make great contributions to strengthening practice in responding to adolescent family violence. Stakeholders have, however, expressed concern to the Monitor about increasing identification of adolescent family violence without any specialist or system response available in most areas of the state.

Looking forward

In its submission to the Monitor, the Commission for Children and Young People advised that it is 'deeply concerned by the lack of progress on recommendations to improve responses to adolescents who use violence in the home'. Service and system responses for adolescents who use family violence should be a priority for the next stage of the reform, in particular:

- > Acknowledge and build understanding of the complex issues surrounding adolescents using violence in the home, such as substance misuse, disability, previous experiences of family violence and mental health issues.
- > Expand the Adolescent Family Violence Program or other specialist therapeutic programs to ensure statewide access, and consider service responses for both younger (8–12 years) and older (18–24 years) age groups.
- > Ensure the sustainability of funding for the Adolescent Family Violence Program.
- > Consider a further, carefully designed and implemented trial of restorative justice options for adolescents and their families.
- > Improve the immediate crisis response when adolescents use violence in the home, including trialling options such as Jesuit Social Services' proposal to have social workers accompany police officers.
- > Develop a coordinated system approach and service response for adolescents who use violence in the home, including workforce capacity building and referral pathways into therapeutic services.

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Chapter 8

Voices of victim survivors

Royal Commission findings

The Royal Commission into Family Violence acknowledged the importance of allowing the voices of victim survivors to be heard. It recommended that victim survivors' experiences should directly inform service planning and evaluations of services' performance, to contribute to system improvement.¹⁶¹

Victim Survivors' Advisory Council

In July 2016, the government established the Victim Survivors' Advisory Council. The council currently has 15 members with lived experience of family violence and who represent various diverse communities that were identified by the Royal Commission. Members are provided with financial and other supports such as training and professional coaching to support them in these roles.

Ms Rosie Batty AM was the inaugural chair of the council and held this role for three years until August 2019. Another eight of the original members had their tenures expire at the end of 2019. Following an expression of interest process, these positions were filled in early 2020 and the group continues to meet regularly. The Monitor attended a meeting of the group during the monitoring period.

The Monitor has previously reported concerns received from council members that, although they are consulted about many reform activities, it is not always clear what actions are taken in response to their feedback.

The Valuing the Lived Experience project, commissioned by Family Safety Victoria, reviewed the council's work and made recommendations that focus on updating policies and procedures and broadening the opportunities for the council and other victim survivor groups to support work related to the family violence reform. The insights from this report can help to support the sector's significant work to develop policies and practice for working with victim survivors.

Family Safety Victoria has advised the Monitor that it has worked with the Victim Survivors' Advisory Council during 2020 on the council's role and operations and that they will work together to develop engagement protocols to improve the effectiveness of the working relationship. Progressing this work to strengthen the council and its impact will make an important contribution to the reform.

Experts by Experience – a consumer participation model for the family violence sector

A significant contribution to this field occurred during 2020 with the launch of the Experts by Experience framework. It has been developed independently by Domestic Violence Victoria to support its members in the specialist family violence sector, in partnership with the Melbourne Research Alliance to End Violence against Women and their Children at the University of Melbourne and their victim survivor advisory group, the Women and Children who have Experienced Abuse and Violence: Advisors and Researchers. The framework, depicted in Figure 8.1, supports services to provide opportunities for victim survivors to influence policy development, service planning and practice, and it includes 10 principles for best practice. The project also made recommendations for strengthening practice in engaging victim survivors based on international literature and consultations with victim survivor advocates, including Victim Survivors' Advisory Council members. Implementation of this framework will make significant contributions to progressing the reform.

Figure 8.1: Experts by Experience framework



Source: Domestic Violence Victoria and The University of Melbourne. Available at: dvvic.org.au/members/experts-by-experience

Client Voice Framework for Community Services

Another recent contribution to strengthening client voices has been the Department of Health and Human Services' Client Voice Framework for Community Services, which aims to help staff and leaders in community services 'to critically assess their current practice in relation to seeking, hearing and responding to the client voice'.¹⁶² The framework emphasises 'the critical link between quality governance, client voice and outcomes'.¹⁶³ Projects developed under the framework include the Voice of the Child Project, aimed at improving and embedding the department's approach to effectively capture, listen to and respond to the voice of children and young people.

Given the large number of community service organisations that are part of the family violence service system (both specialist family violence services and more generalist services), this framework is highly relevant.¹⁶⁴ The Monitor has been advised that the work to develop the Client Voice Framework informed Family Safety Victoria's concurrent development of the Client Voice Process and the Client Partnership Strategy, specifically for The Orange Door (previously Support and Safety Hubs). In addition, a number of partner agencies and family violence services already have or are developing their own processes for gathering client feedback, and for engaging with their clients for the purposes of service improvement.

The Orange Door client experience

The Victorian Auditor-General's 2020 review of The Orange Door¹⁶⁵ found that Family Safety Victoria has not yet collected detailed information about client experiences. A paper-based client survey has been piloted and rolled out to all sites, but with only 4 per cent of cases in 2018–19 involving physical visits, the capacity of a paper-based survey will be limited. Family Safety Victoria upgraded its phone system for all sites in 2020, with an added ability to administer a phone-based survey of client satisfaction. Due to service delivery changes in the wake of the coronavirus (COVID-19) pandemic, with workers working remotely, it was not possible to administer the survey due to safety and security issues. It is anticipated that once the workforce can return to their respective worksites, the phone survey will be possible. Further options, including web-based survey delivery, are currently being considered.

The Auditor-General also noted that case file reviews would provide an opportunity to understand client experiences, including children's experiences, and that only the Bayside site had conducted these. In response to this advice, Family Safety Victoria is developing a standard procedure and support tool to ensure regular, high-quality case reviews are completed at all The Orange Door sites.

The Orange Door 2019 evaluation¹⁶⁶ also attempted to understand client experiences but had significant difficulties engaging people in crisis and noted the lack of client voice in its evaluation as a significant limitation. Planning for the second stage of the evaluation, to begin in 2021, includes using the client voice as a critical input.

Implementation of the Client Partnership Strategy for The Orange Door completed in September 2019 and, as described in the Monitor's previous report, has not progressed, with delays attributed to the coronavirus (COVID-19) pandemic. Effective and sustainable mechanisms for understanding client perspectives, and ensuring these are used in service review and development, will be essential.

Lived experience practitioners

There have been some examples of trialling employment of 'lived experience practitioners' in several reform initiatives.

The 2018 evaluation of Family Safety Victoria's 26 therapeutic intervention demonstration projects involved 107 client interviews, including 18 children. One of its aims was to look at sector capability in terms of 'supporting the development of lived experience practitioners'.¹⁶⁷ It noted only 'a small number' of projects included this work, and reported only one, as follows:

One demonstration project, led by Drummond Street, had a particular focus on building lived experience workforces. This included a workforce that identified as LGBTIQ practitioners, women with disability, and women from [culturally diverse] backgrounds. The evaluation observed that clients spoke positively of the value of having a person who understood their experience from firsthand experience.¹⁶⁸

The evaluation went on to describe the challenges that Drummond Street's managers encountered with having lived experience workers on staff, and proposed a range of strategies required to support these practitioners in the future. It also made a recommendation that: 'For services building a lived experience workforce, service models should ensure appropriate supports are in place for practitioners with a lived experience'.¹⁶⁹

The Magistrates' Court's Family Violence Consultant role provides input across the court's reform activities. The role provides practical advice from a victim survivor's perspective of how people use the system and how service delivery can be improved. In September 2020, the Monitor met with the Family Violence Consultant, who was clear about the importance of such a role being embedded within an organisation to be able to truly help shape policy, processes and practices. The Family Violence Consultant also explained the importance of drawing on the experience of other victim survivors, as well as her own lived experience, skills and qualifications, to perform her role effectively. Ensuring that systems and processes allow lived experience practitioners to enact their roles flexibly is an important consideration for the future.

A submission from Berry Street's Y-Change team of young people with lived experience of family violence specifically highlighted the need for lived experience practitioners:

*In Victoria, there are many exciting initiatives that are working to ensure people with a lived experience become meaningful members of the community sector workforce. This has yet to take off in the same way within the family violence service system context. We need system navigators — young people who are trained up to become Peer Support workers in the family violence service system who can help support other young people doing it tough.*¹⁷⁰

Client First Approach

The Monitor's consultations with Victoria Legal Aid identified their progressive and comprehensive approach to including the voices of clients, which includes both victim survivors and perpetrators, into their work. In developing Victoria Legal Aid's approach to providing legal assistance within the Specialist Family Violence Court model, they have engaged with clients by:

- > conducting contextual observations at two Specialist Family Violence Court sites to explore clients' actual experience of family violence legal services in a court setting
- > interviewing and discussing with victim survivors and perpetrators their experience before and during the court day, then developing 13 client stories and journey maps
- > including people with lived experience of family violence and the justice response in ideation workshops to discuss their legal practice vision for Specialist Family Violence Courts
- > convening one-on-one consultations with people with lived experience about the proposed initiatives.

Victoria Legal Aid has articulated within this project a dedicated initiative to 'provide more opportunities for people with lived experience to share their experiences and have a say in the way we design, deliver and evaluate [Specialist Family Violence Court] services in conjunction with the family violence service system'.¹⁷¹

Implementation of the Client First Approach developed out of this process will involve victim survivors at every level of the governance model, as shown in Figure 8.2. This work is at an early stage, but ongoing monitoring for its impacts and lessons will be of great value.



Looking forward

Building on the positive work that has already been done to elevate the voices of victim survivors since the Royal Commission, the Monitor suggests that further focus is required on the ongoing collection of victim survivors' current system experiences and feedback to ensure continuous improvement within the reform. Particular considerations to this end are as follows:

- > Collect stories of recent client experiences to inform ongoing service review and development for significant areas of reform such as The Orange Door, Specialist Family Violence Courts,¹⁷² the police response and adolescent family violence services.
- > Ensure ongoing engagement with victim survivors throughout the development and implementation of approaches so they can clearly see how their experiences and input have informed policy development and service delivery.
- > Explicitly and appropriately seek the voices of children and young people with experience of family violence as part of any broader mechanisms.
- > Victim survivors, including children and young people, should have a voice in any future monitoring approaches for the reform, and should be consulted about what form that takes.

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Chapter 9

COVID-19 response

The coronavirus (COVID-19) pandemic and the necessary social restrictions on movement and gathering introduced in Victoria to control its spread led to heightened risk of family violence and posed more limited opportunities to seek help, significantly affecting vulnerable families.¹⁷³ This created a considerable challenge for the family violence service system, which had to rapidly transition to remote working and online service delivery while also continuing face-to-face crisis responses under very challenging conditions. During this time there was a diversion from primary prevention activity towards response activity to deal with demand and the escalation of family violence in a disaster context. In these difficult circumstances government and the service sector have risen to the challenge and worked in partnership to meet the needs of the communities they serve.

Across the family violence system, the proactive responses have been consistent and creative to deliver more choice through an enhanced range and reach of services. Throughout the emergency we have seen a willingness to share experiences, work together and deliver promising new approaches enabled by technology. Campaigns to educate the public on family violence were quickly activated, and the government has provided substantial additional funding to increase the availability of services across the system.

This chapter describes how government made decisions relevant to the family violence reform, how it supported the family violence system during the pandemic, and the changes that occurred within the family violence system, including a raft of changes that appear to have had real benefits and will be continuing, or warrant continuation, in some form.

Government decision making

Reorganisation of the public service

On 3 April 2020 the Premier introduced a reorganisation of ministerial portfolios and the most senior levels of government structures including creating the Crisis Council of Cabinet and eight cross-government 'missions', each led by a Department Secretary. After some consolidation of the missions, family violence services were placed within the scope of 'Mission 4: Restoration and Reform of Public Services – People' in June 2020. This mission was led by the Secretary of the Department of Justice and Community Safety, whose leadership group included the CEO of Family Safety Victoria.

Family violence-specific governance

The Family Violence Reform Interdepartmental Committee is chaired by the Department of Premier and Cabinet and normally meets monthly to oversee implementation of the family violence reform. It met weekly during April 2020 at the request of its members to facilitate information sharing at a time of rapidly changing circumstances. Its purpose remained to oversee the family violence reform and it did not engage in operational matters.

In April 2020 a new Family Violence System and Operations Group was established to monitor the impacts of COVID-19-related family violence responses and to ensure strong information sharing and coordination. It was chaired by Family Safety Victoria and included representation from the same government agencies represented on the interdepartmental committee. We observed active sharing of information, with updates provided from each department. Collaboration and decision making appeared to be occurring in bilateral discussions between specific agencies.

Availability of data for decision making

In a rapidly changing environment as experienced during the coronavirus (COVID-19) pandemic, accessible data is critical to support decision making about policy and operational changes. Some data products were produced for different audiences during 2020 as part of the coronavirus (COVID-19) pandemic response including:

- > Department of Health and Human Services' COVID-19 Social Services Impact Data Dashboard for government executives and Family Violence System and Operations Group members
- > Department of Health and Human Services' Deep Dive: Social Impacts – Family Violence report
- > Family Safety Victoria's Weekly Family Violence Data report for the Minister for Prevention of Family Violence and others
- > Crime Statistics Agency's COVID-19 Family Violence Data Portal launched on 2 November 2020
- > data on the Family Violence Contact Centre and the Family Violence Intervention Order Online Form provided to the Family Violence Systems and Operations Group members by the Magistrates' Court of Victoria.

However, the coronavirus (COVID-19) pandemic has highlighted that five years on from the Royal Commission, the availability of data remains a key area where improvements need to be made, with limited visibility of service demand and responses across the family violence system affecting the sector's pandemic response as illustrated in Domestic Violence Victoria's submission to the Monitor:

...a lack of comprehensive, real time data sets related to family violence frequency, types, demand, and service responses across the state meant the sector was reliant on anecdotal evidence about fluctuations in demand and service responses at a critical and high risk time for victim-survivors, and when the community and media needed to know about and understand family violence the most.

Stakeholders also told us that information about some critical issues was not available to decision-makers through regular reporting mechanisms:

- > wait times for men's behaviour change programs, which increased rapidly in the early stages of the pandemic
- > engagement of legal assistance, which decreased rapidly with courts moving largely online
- > backlog of non-urgent matters deferred by courts
- > demand for family violence crisis accommodation, which has reduced capacity with COVID-safe measures in place
- > increased complexity of cases, including first-time presentations, which is being noted by many service providers as a significant issue but not monitored well through available data products.

We understand that bringing together data that is fragmented across departments in different systems and with different updating schedules is currently a manually intensive process. Careful consideration of ways to manage these challenges should be prioritised. We also acknowledge that some work is underway to strengthen government-wide data to inform decision making. For example, Insights Victoria was launched in September 2020 as a secure digital reporting platform with data updated daily for senior decision-makers across the Victorian Government. It would be extremely valuable if this work extended into understanding the family violence service system.

Government support

The coronavirus (COVID-19) pandemic has seen fundamental shifts in the way government has engaged with the service delivery sector including its funded agencies. In its comprehensive review of the impacts of the coronavirus (COVID-19) pandemic on child and family services published in August 2020, the Centre for Excellence in Child and Family Welfare concluded that:

...the child and family services sector showed a high degree of collaboration, with department staff providing daily or weekly updates to service providers and cutting through bureaucracy to meet demand quickly, and CSOs [community service organisations] willingly sharing resources, information and practice approaches with fellow CSOs.¹⁷⁴

The peak body for men's services, No to Violence, also advised us that the community sector and government have worked flexibly together to quickly design, develop and implement new large programs. Improved collaboration between government and the sector was a common theme in our consultations, with many hoping that these closer ways of working will continue.

Funding

In April 2020 the Victorian Government announced a \$40.2 million investment comprising \$20 million for crisis accommodation and \$20.2 million to help family violence and sexual assault services to meet the expected increase in demand during the pandemic and provide help for victim survivors. This, along with Commonwealth funding from the COVID-19 National Partnership Agreement, was allocated at various points during 2020. This included:

- > \$3.2 million for more flexible support packages and \$6.3 million for additional family violence crisis brokerage funds
- > \$5.4 million to support capability building and business continuity across the specialist family violence and sexual assault sectors
- > targeted funding for Aboriginal community-controlled organisations to meet additional demand for family violence case management and crisis support
- > \$3.8 million to enhance statewide family violence crisis services as well as targeted support for Aboriginal, LGBTIQ and culturally diverse communities
- > \$2.7 million to providers that deliver perpetrator services to build their capacity to deliver services during the coronavirus (COVID-19) pandemic
- > \$2 million for perpetrator accommodation and support and to support 24/7 telephone responses to Aboriginal men (Dardi Munwurro's Brother-to-Brother helpline – see case study in Chapter 6).

Our consultations throughout 2020 and many submissions to the Monitor have stressed the funding and workforce challenges faced by the specialist family violence system. These challenges are amplified during times of widespread emergency, and Domestic Violence Victoria has suggested that further attention needs to be given to the role and funding of this system during emergencies such as the coronavirus (COVID-19) pandemic and the bushfires in early 2020.¹⁷⁵

Government plans and guidelines

The Victorian Government promptly issued a range of plans and guidelines with advice on safely continuing service delivery and adapting to operating during the pandemic. For example, in April the Department of Health and Human Services issued the Coronavirus (COVID-19) Plan for the Victorian Community Services Sector and, in September, a specific road map to reopening for the sector. Family Safety Victoria developed a range of Family Violence Multi-Agency Risk Assessment and Management (MARAM) Practice Notes to outline the heightened and additional risk factors for victim survivors and perpetrators during the coronavirus (COVID-19) pandemic. This was complemented by a 15-minute video outlining the MARAM risk factors in the context of the coronavirus (COVID-19) pandemic, reviewing emerging evidence of increasing family violence, discussing best practice responses for specialist practitioners and exploring the importance of collaborative practice to keep victim survivors safe and perpetrators in view and accountable for their actions.

Forums and briefings for the sector

Family Safety Victoria convened, co-chaired or participated in a series of program-specific and general forums with the specialist family violence sector that combined providing guidance with consultation on emerging risks and opportunities. For example, on 19 March 2020 a 'COVID Response Family Violence and Sexual Assault Services Sector Briefing' took place via live stream, with almost 300 participants.

Between March and September, the Victorian Council of Social Service, in conjunction with the Department of Health and Human Services, held monthly discussion forums to guide community sector organisations through the coronavirus (COVID-19) pandemic. The forums were streamed live online and uploaded to the Victorian Council of Social Service website with a full transcript. These forums appear to have been a highly effective approach to supporting and engaging the community services sector during this time.

From 26 March 2020 the Magistrates' Court of Victoria delivered regular briefings to stakeholders to inform them of operational responses taking place at courts due to the Stay at Home restrictions. The briefings were used as a forum to workshop emerging operational issues and support implementation of new processes across the court system.

From April 2020 and throughout the year, Respect Victoria led a COVID-19 Primary Prevention of Family Violence sector forum, involving key partners in primary prevention.

Key initiatives included:

- > development of a primary prevention framework for disaster management and principles to inform primary prevention activity in all phases of a disaster cycle (response, recovery, mitigation and preparedness)
- > analysis and consultation with primary prevention partners on the impact of the pandemic on their workforce and on the drivers of violence, and the subsequent development of shared advocacy statements to address the systemic and structural discriminations exacerbated by the coronavirus (COVID-19) pandemic and inform policy, planning and emergency management, published online.

Respect Victoria led major COVID-19 prevention initiatives involving key partners in primary prevention, gender equality and key response partners including:

- > development and execution of a COVID-19-specific campaign to support bystander activity and help seeking activity during this pandemic, and the development of communication materials to support primary prevention engagement and awareness online
- > a partnership with the Gender and Disaster Pod and delivery of specialised training for the primary prevention sector
- > rapid research projects assessing the impact of COVID-19 on the primary prevention of family violence, specifically addressing three questions: (1) the specific impact for LGBTIQ people; (2) the impact for older people (not including care settings); and (3) the impact on the primary prevention workforce.

This will continue to inform and build all the primary prevention work, and support future disaster preparedness and response going forward.

Key changes to the family violence service system

Police

- > Operation Ribbon continued Family Violence Investigation Units' active engagement with their highest-risk perpetrators and affected family members and added the central collation and public reporting of this data (as of 18 October 2020, about 28,000 visits including 8,000 perpetrators resulting in 1,700 bailed, remanded or summoned)
- > 'There is no excuse for family violence' public awareness campaign launched in 27 languages

Courts

- > Online Magistrates' Court introduced
- > Practice direction allowed family violence applications to be heard 'on the papers'
- > Fast-tracked rollout of the Family Violence Intervention Order Online Form
- > Introduced seeking consent to share affected family members' details to initiate legal assistance
- > Developed processes to support duty lawyers and police working remotely
- > Introduced practitioner outreach to provide support via phone, provide information about pending matters to affected family members and respondents and conduct up-to-date risk assessments
- > Worked with Family Safety Victoria to introduce online alternatives for the Court Mandated Counselling Order Program while face-to-face groupwork was limited
- > Provided up-to-date Q&As for court users on the Magistrates' Court of Victoria website about current arrangements

Corrections Victoria

- > Community Correctional Services shifted to a remote service delivery model for low-risk offenders and mixed supervision techniques for medium and high-risk offenders
- > Family violence perpetrator programs for prisoners and community-based offenders adapted to remote service delivery
- > Emergency crisis procurement used to purchase placements for individual case management support for perpetrators who were subject to Community Correctional Services supervision
- > Support services for family violence victim survivors delivered via Zoom or telephone, including safety planning for women with pending prison release dates

Specialist family violence services

- > Commenced widescale 'digital client contact', in some cases increasing frequency of client contact as well as larger caseloads due to time saved without travel required
- > Introduced web chat access to crisis support, requiring a transformed service model
- > New multi-intervention service model for perpetrators
- > Opening of The Orange Door in Central Highlands delayed from early 2020 to October 2020

Key changes to the family violence service system continued...

Prevention

- > 'Call It Out' campaign in May 2020 instructed Victorians to be alert to early warning signs of family violence
- > 'Respect Older People. Call It Out' in June 2020 encouraged action on elder abuse and awareness that the pandemic may lead to an increase of elder abuse
- > Three rapid research projects on the impacts of the pandemic in a primary prevention context
- > Specialised training for the primary prevention sector
- > Development of communication materials to support primary prevention engagement and awareness online (on top of campaign activity)
- > Shared advocacy statements to address the systemic and structural discriminations exacerbated by COVID-19 and inform policy, planning and emergency management, published online
- > Redeployment of prevention staff into response roles, which assisted in meeting service demand but which had a major impact on organisations' ability to deliver primary prevention work

Housing

- > Increased crisis accommodation to provide a safe place for victim survivors
- > Increased availability of motel accommodation for crisis accommodation
- > Perpetrator accommodation and support service announced in August 2020, with a soft launch in September 2020

Generalist: health system, schools

- > Deferral of the Child Information Sharing Scheme, Family Violence Information Sharing Scheme and the MARAM phase 2 commencement (intended to include hospitals, the broader health workforce and schools) from September 2020 to April 2021
- > Child protection MARAM training planned for early 2020 delayed, then commenced online in August 2020
- > Health and wellbeing key contacts assigned to government schools to increase support for vulnerable students; webinars delivered for 22 different school and area support staff roles (more than 320 participants), to provide guidance and supporting resources on COVID-19 affected family violence risk and response for students and staff

Impacts on the family violence service system

Specialist family violence workforce

In its review of the impacts of the coronavirus (COVID-19) pandemic on child and family services, the Centre for Excellence in Child and Family Welfare has captured examples of 'pragmatic problem-solving' by community service organisations as they transformed service delivery models. The review report concluded that community service organisations:

...demonstrated their ability to respond quickly to the unprecedented challenges facing their clients and workers by implementing creative solutions and workarounds in the face of restrictions on face to face engagement.¹⁷⁶

Research with 113 Victorian practitioners from specialist family violence and men's services during July and August 2020, the period in which Victoria re-entered Stage 3 and later Stage 4 restrictions and called a State of Disaster, further found that:

Family violence practitioners emphasised that like all Victorians they are working and living through the pandemic, and experiencing the same general anxiety and stress but with the added burden of working out of their living rooms or bedrooms alone, on personal laptops talking about highly emotional, traumatic and violent situations.

For many family violence workers, being cut off from colleagues physically has been detrimental to their wellbeing...Even just the loss of the car ride or commute home has had an impact, with the opportunity to switch off or put distance between work and home.¹⁷⁷

The impacts on the workforce of the significant shifts in practice that have occurred are beginning to be understood and will offer useful insights into shaping future service development. It has been an enormous achievement for the sector workforce to pivot to digital service delivery while working from home, away from established systems of support and infrastructure.

Selected examples of family violence service transformations

The following is a small sample of the many changes implemented in the family violence service system during the coronavirus (COVID-19) pandemic that demonstrate the breadth and scale of its impacts.

Safe Steps Online chat access

In recognition that the restrictions might affect a victim survivor's ability to seek assistance when the Stay at Home restrictions were introduced, Safe Steps Family Violence Response Centre responded quickly to develop an online access point through a web chat function. Managing the risks over web chat was significantly more difficult, with less information known about the caller when they begin to disclose information than can be elicited in a phone call.

In July 2020, shortly after launching, the service was receiving on average nine contacts per day. Safe Steps found that those contacting via chat differed from their 'regular' contacts. The dominant use was by victim survivors experiencing an escalation of family violence with limited options for safety due to the Stay at Home restrictions, including young people aged 17-22.

In October 2020 Family Safety Victoria approved a proposal from Safe Steps for additional funds to extend the program to facilitate longer hours due to the number of people seeking after-hours support. Victoria has been slow to utilise online support mechanisms prior to the coronavirus (COVID-19) pandemic, but it is clear from international evidence and experience that it can play an important role in giving access to support in dangerous situations.

Phone contacts to Safe Steps also increased during 2020, including more calls received from concerned family and friends, older people experiencing violence from children and grandchildren who had moved in due to the pandemic, and male victim survivors, a cohort for whom there is an identified gap in the family violence service system.

Initiatives for multicultural communities

The Victorian Government recognised that multicultural and faith communities were facing disproportionate and unique challenges as a result of the coronavirus (COVID-19) pandemic. On 8 May 2020 the government announced a \$11.3 million Multicultural COVID-19 Response Package. A portion of this funding (\$1.1 million), along with an additional \$1 million provided by the Office for Women and Family Safety Victoria, was allocated to a Multicultural COVID-19 Family Violence Program. The program aims to provide one-off funding to enable multicultural, faith-based and ethno-specific organisations to design and implement awareness

raising, prevention and early intervention of family violence activities. Appropriate training, including the MARAM training, will be tailored and made available to the funded organisations. Although the program's funding is time-limited and specific to responding during the coronavirus (COVID-19) pandemic, the Department of Premier and Cabinet and Family Safety Victoria have already noted the potential for the program to be part of broader, longer term planning around the family violence system response and reform.

Basic needs brokerage funding was provided in the first COVID-19 Response Package for Victoria's multicultural and faith communities to assist people on temporary visas impacted by family violence. This recognised their lack of access to basic safety net supports and exacerbated risk in the coronavirus (COVID-19) pandemic context and was delivered via Safe Steps and inTouch.

A short-term Multicultural Communities Family Violence Working Group was also established. Led by Family Safety Victoria and supported by the Department of Premier and Cabinet, the working group includes 23 organisations that intersect with multicultural communities, along with the Victorian Multicultural Commission. The 23 organisations were selected to ensure statewide coverage of relevant services but also a focus on a diverse range of priority communities and cohorts. The working group has a broader remit than the program funding, and from 2021 it will have a deeper focus on addressing long-term systemic issues. It will be important that this collaborative approach continues and builds, resulting in stronger partnerships between multicultural, faith and ethno-specific organisations and specialist family violence services to better support people in these communities experiencing family violence.

Access to legal assistance with courts moving online

Legal services experienced a significant decline for family violence legal assistance when the Stay at Home restrictions began in March 2020. Before this, an average of seven clients a day were being referred to Victoria Legal Aid's duty lawyer services assisting with family violence intervention order matters throughout the state. This dropped significantly to between two and 11 referrals per week. Many victim survivors and perpetrators were reportedly confused about whether they were to attend court or how to access the off-site duty lawyer if they did attend. After being told they were not to attend court, many clients did not seek any legal assistance.

Victoria Legal Aid was concerned about the reduced referrals because a lack of legal advice means that victim survivors may not fully understand the impacts or conditions of any interim family violence and personal safety interventions order covering them, and perpetrators may not understand the conditions and requirements of orders and are therefore more likely to breach an order. To

increase access to legal assistance, Victoria Legal Aid worked with the courts, Victoria Police, community legal centres and family violence services to improve referral pathways to legal services. For example, the courts began asking for consent to share court users' details with legal services so duty lawyers could then make contact directly.

Victoria Legal Aid launched a family violence priority phone line and family violence-specific channel on its web chat, enabling people with family violence legal needs to receive information and advice faster. Both Victoria Legal Aid and the Magistrates' Court of Victoria updated their websites with information for people affected by family violence and perpetrators of family violence about how to access legal advice.

On 9 May 2020 the Victorian Government announced \$17.5 million in funding for frontline legal assistance services in response to the coronavirus (COVID-19) pandemic. This funding was directed at Victoria Legal Aid, Community Legal Centres and Aboriginal legal services across the state, to support Victorians with a range of issues including family violence-related matters.

'Call It Out' advertising campaigns

During 2020, Respect Victoria released two coronavirus (COVID-19) pandemic-specific advertising campaigns titled Respect Each Other: 'Call It Out' (COVID-19) and Respect Older People: 'Call It Out.' The messaging in these campaigns encourages people who see or hear signs of family violence to be an 'active bystander' and to 'call it out'. These campaigns ran during May and June 2020 respectively and featured on a mix of regional and metropolitan television (including catch-up TV), digital (through social media) and audio channels, radio and Spotify. A broad mix of media channels were used to ensure maximum reach and awareness of Victorians in their homes during the Stay at Home restrictions.

In its Inquiry into the Victorian Government's Response to the COVID-19 Pandemic: Interim Report, the Public Accounts and Estimates Committee heard that widespread advertising campaigns often lead to a higher demand for services, which also needed to be managed and coordinated. Consistent with this, we have received anecdotal feedback that the campaigns have led to increased calls to family violence services. The Public Accounts and Estimates Committee recommended an evaluation of the 'Call It Out' campaigns be conducted to determine the effectiveness and impact on service demand. Respect Victoria has conducted quarterly and annual evaluations of 'Call It Out', which have demonstrated the campaigns' effectiveness in changing the drivers of violence.

Online and phone-based perpetrator interventions

Most referrals to voluntary men's behaviour change programs in the community are self-referrals (46 per cent in 2019–20) or from police (37 per cent in 2019–20).¹⁷⁸ These programs require men to physically attend weekly group-based sessions. In March 2020, when the first Stay at Home restrictions were announced, many behaviour change programs were temporarily suspended. Where a program was suspended, many services adapted their response to provide phone and email support to clients who were unable to attend programs, and continued risk assessment and family safety contact services. This one-on-one engagement is more labour-intensive and has 'stretched services to capacity', leading to a backlog of cases.¹⁷⁹ In the corrections system, funding from the Family Violence Perpetrator Grant program was used to purchase additional one-on-one individual case management placements, which were used to continue to engage perpetrators who could not participate in group men's behaviour change programs.

Family Safety Victoria worked in collaboration with No to Violence, Court Services Victoria and Corrections Victoria to develop service guidelines for perpetrator responses during the coronavirus (COVID-19) pandemic. These aimed to provide a consistent service model for mandated and non-mandated clients, expectations for family safety contact work, direction on the frequency and modality of interventions and consideration of workforce capacity and funding arrangements. Although this work was done to minimise disruption of services to perpetrators, this guidance stated that, based on emerging research, virtual men's behaviour change programs are generally not appropriate if the perpetrator is living with the victim survivor, but services were advised to continue to keep these perpetrators engaged where possible.

One agency was halfway through delivering a 20-week in-person men's behaviour change program when Stay at Home restrictions were announced, so the agency trialled delivering the second half online. Free training was offered to all staff on how to engage in this technology in a safe way. That same agency went on to trial a full 20-week program delivered online. Another agency moved all 200 men in its program to telephone services. This individual phone-based work is much more labour-intensive than in-person, group-based behaviour change programs.

Notably, a number of organisations have indicated significant engagement from perpetrators with one-on-one work, including engagement from perpetrators who have previously declined support and those on waiting lists.

Preliminary evaluations of this change in service delivery have highlighted increased engagement due to the accessibility of online platforms, although concerns have also been raised around analysis of body language, environment and engagement.

Moving the MARAM training online

In response to the coronavirus (COVID-19) pandemic, all MARAM face-to-face training sessions were cancelled and Family Safety Victoria began working with departments and training providers to determine alternate modes of delivery to reduce the interruption to training as much as possible. Family Safety Victoria worked with the Domestic Violence Resource Centre Victoria to develop an online method of delivery for the training.

Training was prioritised for experienced specialist family violence practitioners followed by comprehensive training for newer family violence workers. Family Safety Victoria also worked with the Department of Health and Human Services to adapt training for maternal and child health, antenatal, child protection, alcohol and other drug, homelessness, designated mental health and family services including Child FIRST to enable online delivery.

As of August 2020, approximately 3,600 practitioners had begun and 1,500 had completed the training online. However, Domestic Violence Victoria advised that some specialist family violence services could not enrol new practitioners or casual staff in the appropriate MARAM training due to a lack of training availability, adding to the already significant level of unmet demand for training. This has had an impact on specialist services' ability to have appropriately trained and skilled practitioners available.

The Domestic Violence Resource Centre Victoria also worked with Court Services Victoria to develop online training modules including self-paced online learning and a facilitated virtual workshop. As of September 2020, all Family Drug Treatment Court clinicians, family violence practitioners and court support coordinators across the Children's Court had completed comprehensive MARAM training online.

Positively, several key stakeholders told us that moving training online improved the accessibility of MARAM training for staff in rural and regional areas and have advocated for a combination of online and face-to-face training to continue, even when social restrictions are no longer in place. The Department of Health and Human Services expressed support for continuing to provide online training due to the high satisfaction rates of participants to date.

Family violence risk assessment and support in COVID-19 testing and quarantine

Important work ensured all major public health operations (including the new services developed to manage the pandemic such as hotel quarantine and COVID-19 testing stations) were used to identify family violence risk and to connect individuals to services.

The Department of Health and Human Services Principal Practitioner (for Family Violence) amended the MARAM Screening Tool for use in the hotel quarantine program and arranged a family violence briefing for staff working in the department's Complex Assessment and Response Team to support recognition of family violence as a psychological risk as part of the welfare response to those in mandatory quarantine. We have also been advised that Family Safety Victoria developed a shortened risk assessment to be used to respond to immediate family violence risk during the coronavirus (COVID-19) pandemic.

Extended community engagement and planning periods

The Monitor was most interested to engage with the leadership group working to establish The Orange Door (previously Support and Safety Hubs) in the Central Highlands area, with its first premises in Ballarat. The coronavirus (COVID-19) pandemic, and its associated restrictions, occurred at a point where many staff had been employed but operations had to be paused. Chapter 2 describes some of the benefits this pause offered.

Changes that should continue

Our call for submissions from the sector and stakeholders specifically sought service providers' views on any changes they had observed or experienced during the pandemic that they felt should continue. Responses highlighted the following:

- > **Remote service delivery** (including online and telephone-based) has allowed services to be more flexible and accessible, **providing clients with more choice about how they access services**, which is especially important when victim survivors are in circumstances where picking up the phone is not a safe option for accessing support. However, remote service delivery can create some barriers for some clients, including multicultural community members who do not have digital access or literacy. This should be an ongoing consideration as the continued role of remote service delivery is contemplated.

"Responding to COVID-19 through telehealth and phone counselling has demonstrated that not all therapeutic services need to be delivered face to face. Victim/survivors of family violence can become exhausted — physically, emotionally and financially — from having to attend multiple agencies for multiple appointments." — cohealth

"The main change that should be continued as a result of COVID-19 pandemic is that...clients be given the option engage with services remotely, using methods such as telephone and video-conferencing." — Sexual Assault and Family Violence Centre

- > **Online services** have **enhanced the reach of some services**, particularly in relation to supporting clients across regional and rural Victoria.

"Offering services online has allowed for greater reach of our programs and services with the ability for more children, women and families to participate." — Victorian Aboriginal Child Care Agency

"We have been able to appear for women in locations we would not have had capacity to physically reach." — Djirra

- > The coronavirus (COVID-19) pandemic has highlighted the use of **risk assessment strategies and practices** to support victims in the home and to keep perpetrators more visible.

"...it has highlighted the importance of perpetrator mapping in risk assessment and risk management. Understanding the behaviours of the perpetrator both historically and currently, what they do, how they respond to the actions of the victim/survivor and to their own behaviour has been highlighted during COVID-19." — Individual, Grampians Health

The coronavirus (COVID-19) pandemic has "increased education for victims and sector workers regarding de-escalation strategies at home. This should continue in the event of future emergency or health crises". — AustralAsian Centre for Human Rights

- > The increased use of **online platforms and tools**, including conference calling, document-sharing platforms and web-based training, has **improved interagency work** and supported engagement with a wider range of stakeholders. Technology has particularly benefited regional and rural services.

"We have seen a positive change towards online document sharing in the courts, which we would like to see continued." — Djirra

"Service collaboration using teleconferencing has increased sector engagement due to removing the need to travel to different meeting locations." — Peninsula Health

"The ability to do training online has been wonderful as I live in rural Vic and it is a long drive to the city and takes up a lot of my week." — Individual, Grampians Community Health

- > The use of **technology within courts** has enabled promising new approaches to service delivery for courts, including service expansion for online applications.

“...the increased use of video technology, more victim survivors can be offered a choice in how they appear at their court hearing and can appear virtually if they choose to do so.” – Magistrates’ Court of Victoria

“Having a technology enabled court system has helped reduce waiting times.” – AustralAsian Centre for Human Rights

“Court appearance by video link is appropriate for Intervention Orders at all stages, and is essential for Aboriginal applicants during COVID-19.” – Djirra

Looking forward

Our review of the how government and the sector responded to family violence-related need during the coronavirus (COVID-19) pandemic suggests the following matters require ongoing development and focus:

- > While acknowledging the challenges in doing so, ensure a focus on enhancing the quality of data about the family violence service system that is available to government and the specialist family violence sector to inform system-wide monitoring and decision making, particularly in an emergency.
- > Review the emergency response planning and capabilities of the family violence system.
- > Develop a strategic approach to primary prevention preparedness in a disaster context.
- > Continue to develop web-based access to crisis support for victim survivors and perpetrator interventions, and determine an appropriate balance between remote and face-to-face service delivery.
- > Understand, and respond to, specific population groups that have disengaged or been excluded by remote service delivery limitations, from vulnerable school children to victim survivors and perpetrators.
- > Further develop a multi-intervention service model for perpetrators that includes pre- and post-program engagement.
- > Create staff wellbeing strategies for remote working and digital service delivery.
- > Develop a timely plan for clearing the backlog of critical services that have experienced increased demand and decreased capacity such as therapeutic interventions, men’s behaviour change programs and adjourned non-urgent matters at Children’s and Magistrates’ courts, including legal assistance.

References

- 173 For example: Australian Institute of Criminology (2020): The prevalence of domestic violence among women during the COVID-19 pandemic, Statistical Bulletin, 28 July 2020.
- 174 Centre for Excellence in Child and Family Welfare (2020): COVID-19: Responding to the Needs of Children and Families – Impact Report, p. 3. Available at: cfecfw.asn.au/covid-19-responding-to-the-needs-of-children-and-families-impact-report (accessed 3 September 2020).
- 175 Domestic Violence Victoria, submission 121.
- 176 Centre for Excellence in Child and Family Welfare (2020): *COVID-19: Responding to the Needs of Children and Families* – Impact Report, p. 3. Available at: cfecfw.asn.au/covid-19-responding-to-the-needs-of-children-and-families-impact-report (accessed 3 September 2020).
- 177 Monash University (2020): 'New research reveals wellbeing toll of Melbourne's toughest COVID-19 restrictions on practitioners responding to family violence', media release, 20 October 2020.
- 178 Family Safety Victoria: Relates to voluntary community-based men's behaviour change programs funded by Family Safety Victoria. A further 13 per cent of referrals in 2019–20 were from corrections, courts and legal services.
- 179 No to Violence, submission 33, p. 12.

Chapter 10

Maintaining momentum: What remains to be done?

This chapter examines what remains to be done to address the Royal Commission into Family Violence’s recommendations and to achieve the vision set out in the government’s 10-year plan – Ending Family Violence: Victoria’s Plan for Change. The chapter draws substantially on submissions to the Monitor – in addition to other elements of monitoring – to assess progress against the system limitations identified by the Royal Commission and identifies areas requiring further focus in the next stage of the reform.

Recommendations remaining in progress

As of 1 November 2020, 61 of the Royal Commission’s 227 recommendations remained in progress. The remaining recommendations do not reflect all reform implementation activity that is being undertaken, with much of the focus now on refining and embedding existing initiatives. Figure 10.1 presents the remaining recommendations according to responsible minister.

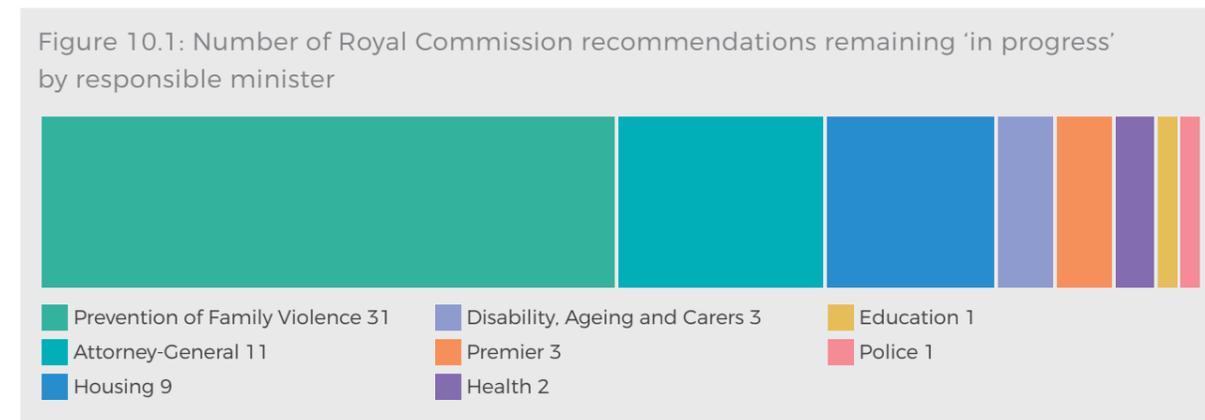


Figure 10.2 presents the remaining recommendations according to coordinating entity, reflecting the machinery of government changes that took effect on 1 February 2021. The majority of in-progress recommendations sit with Family Safety Victoria and the new Department of Families, Fairness and Housing.

Remaining recommendations also cluster around key themes, as presented in Figure 10.3. These themes provide an indication of where implementation progress has been more complex and slower.

Figure 10.2: Number of Royal Commission recommendations remaining ‘in progress’ by coordinating entity

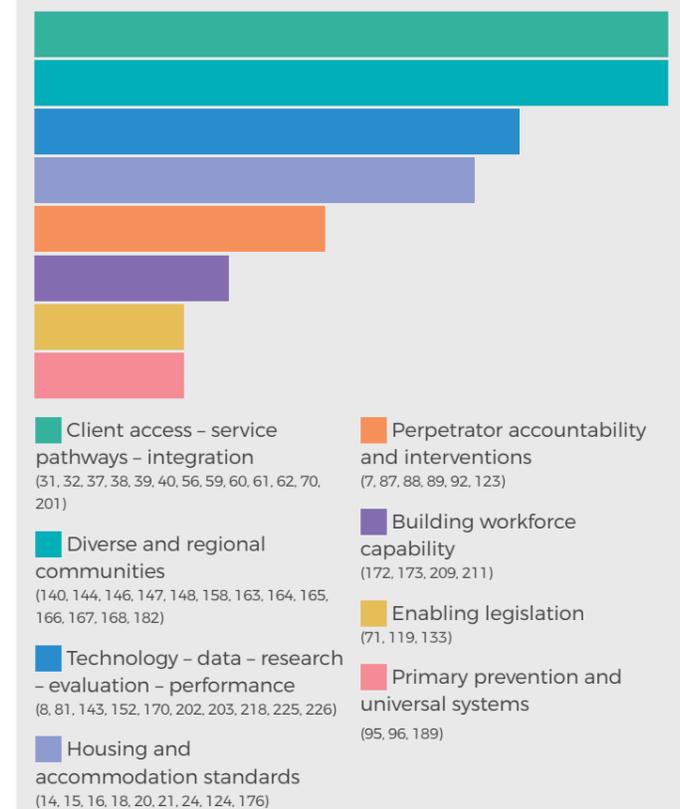


More than three-quarters (51 out of 61) of the recommendations remaining in progress fall into five key themes:

- > client access, service pathways and integration – 13 recommendations
- > diverse and regional communities – 13 recommendations
- > technology, data, research, evaluation and performance – 10 recommendations
- > housing and accommodation standards – nine recommendations
- > perpetrator accountability and interventions – six recommendations.

These themes align with areas identified by stakeholders as requiring more attention and include some of the more complex remaining recommendations.

Figure 10.3: Number of Royal Commission recommendations remaining ‘in progress’ according to theme



Nearly five years into the reform program, there has been more progress in addressing some system limitations than others

The Royal Commission identified 11 system limitations¹⁸⁰ that their recommendations and new approaches aimed to address. Progress of the reform in addressing these limitations, and the areas where further effort and attention is required, has been assessed, drawing substantially on the views expressed in submissions to the Monitor and our consultations with stakeholders, as well as a review of government materials.

This assessment has been undertaken within the context that this is an ambitious 10-year reform program, therefore it is not expected that the system limitations will all have been resolved at this time, but rather to draw attention to those areas that would benefit from further effort.

(Note that each of the following sections begins with a quote from the Royal Commission's final report that details the relevant 'system limitation'.)

System demand

'All parts of the system – support services, police, courts – are overwhelmed by the number of family violence incidents now reported. Services are not currently equipped to meet this high level of demand, which undermines the safety of those experiencing family violence and their potential for recovery.'

The Victorian Government's substantial investment in family violence since the Royal Commission has resulted in more services. However, over this time demand has also continued to increase, in part due to improved awareness and willingness to seek assistance. Family violence matters continue to represent a significant and growing proportion of the work of police, courts and legal services, while funded places across a number of program areas (such as men's behaviour change programs, adolescent family violence programs, therapeutic interventions and support packages for victim survivors) remain insufficient to meet demand, resulting in growing waiting lists and the continued inability to access services in a timely manner.¹⁸¹

"...significant and growing demand for services post the [Royal Commission] has led [specialist family violence services] to introduce demand-management strategies that prioritise the most complex and at-risk clients...staff are no longer dealing with a continuum of risk; high risk situations have become the norm." – Women's Health West

"...practitioners in some regions report that specific evidence based [culturally diverse] therapeutic and specialist services are still neither widely available nor adequately funded." – Uniting Vic.Tas

Availability of data on service need and access, as well as modelling of demand, are critical for effective planning and targeting of limited resources. These are areas that have not progressed enough since the Royal Commission. This was particularly apparent during the coronavirus (COVID-19) pandemic when a range of data dashboards and reports were developed, including the Crime Statistics Agency's Family Violence Data Portal, which increased public access to family violence data. Nonetheless, there were numerous gaps in data on demand and service delivery to inform system monitoring and decision making. Similarly, the Victorian Auditor-General's Office found that while Family Safety Victoria collects demand data from The Orange Door (previously the Support and Safety Hubs), it doesn't include this information in the quarterly reports provided to government and to governance groups.¹⁸² The Auditor-General also found gaps in The Orange Door data Family Safety Victoria is collecting, or is able to collect, making it impossible to demonstrate the impact of services or the timeliness of service delivery.

A family violence demand model was developed over 2016 and 2017 to acquit recommendation 223, but the model has not been in use for some time and a broader social service system demand model being developed by the Department of Premier and Cabinet is not yet able to produce family violence system outputs to inform system planning. This represents a significant gap in the reform monitoring.

Different forms and manifestations of family violence

'The many different forms and manifestations of family violence are insufficiently recognised, and responses are not tailored to the particular circumstances and needs of diverse communities.'

Since the Royal Commission, there has been greater recognition of the many distinct forms of family violence including adolescent violence in the home,¹⁸³ financial abuse¹⁸⁴ and elder abuse.¹⁸⁵ Despite the considerable effort to reorient the system to more diverse responses, there remain areas where more attention is required.

"We particularly require services to be available in regional areas to meet the additional demand where traditionally there have been few [men's behaviour change] programs." – Loddon Gender Equality and Violence Prevention Consortium

"Currently, we have multiple data systems across sectors, workforces and organisations that don't really talk to each other." – Bayside Peninsula Integrated Family Violence Partnership

There is already "ample anecdotal evidence of ever-increasing demand that [specialist family violence services] are advising that they are unable to adequately meet..." – Domestic Violence Victoria

A theme in submissions and in our consultations was that access and tailored support for victim survivors with a disability need to be improved. Women with Disabilities Victoria noted that ‘improved access for women with disabilities to the [family violence] system [since the Royal Commission] is not evident from available data or what women tell us’.¹⁸⁶ The need for disability-specific funding to remain differentiated from broader brokerage funding has also been raised by organisations¹⁸⁷ to ensure that meeting women’s disability-specific needs doesn’t come at the expense of addressing other needs.

More attention must be paid to the system response supporting victim survivors who choose to stay in the relationship. This has been raised as particularly problematic for women from Aboriginal, refugee and migrant communities, where there is a perception that seeking assistance effectively results in a ‘referral to child protection’.¹⁸⁸ Working with victim survivors who wish to stay in the relationship requires a sophisticated whole of family model of practice that is yet to fully develop in family violence service responses.¹⁸⁹

Stakeholders have also identified that the response to male victims needs to be improved. In his submission to the Monitor, the LGBTIQ representative on the Victim Survivors’ Advisory Council described critical service gaps and the absence of effective referral pathways, particularly into refuge, for males in the LGBTIQ community.¹⁹⁰ He identified that more work needs to be done to ensure an equitable service response for all victim survivors.

The availability of community-based, early-intervention service responses for adolescents using violence in the home, many of whom are also victim survivors, is also extremely limited – both in number¹⁹¹ and geographical accessibility. This means that most adolescents cannot receive the tailored support they and their families need. Funding in the 2020/21 Victorian Budget provides continuation

“...there seems to be heightened conversation and increased awareness that [adolescent violence in the home] is a **distinct phenomenon** to adult-perpetrated intimate partner violence and requires a **distinct response**.” – Youthlaw

“Overall, the recognition of **elder abuse** as a form of family violence is at a conceptual and professional level, but has not yet translated the public or, with any consistency, frontline family violence staff.” – Senior Rights Victoria

There is a general “**lack of disability access** to all services across all sectors (and of course also in the family violence sector).” – Individual

Older people remain “largely overlooked during family violence training and service planning.” – Peninsula Health

“...a position that requires a woman from a **migrant or refugee background** to leave as a condition of receiving support to address and escape violence... she must ‘choose’ between **absolute social destitution** and unsustainable loss or remain within a violent relationship.” – South East Community Link

of the Adolescent Family Violence Program at its current level but does not enable expansion into additional areas of the state. To prevent adolescents from being criminalised, police are also calling for an adolescent crisis service and a longer term family response to address the root causes of adolescents using violence in the home.

In this context, the submission from the Victorian Aboriginal Child Care Agency called for a stronger focus on prevention and working with men, including young men. It also suggested a fundamental shift is to ‘reorient the system and apply a cultural lens to working with the entire family’.

Submissions to the Monitor suggest that more needs to be done to ensure the family violence reform can effectively reach into regional and rural areas. The travel distances and isolation of victim survivors in these areas create unique contexts that sometimes undermine access to support.

Across the service system there also remains a critical lack of data on the demographic characteristics of people accessing services. Consequently, we don’t know whether diverse communities are being referred to and accessing services equitably. The 2019 Family Violence Data Collection Framework provides specific guidance on data collection practices, including the use of mandatory fields for Aboriginal communities, LGBTIQ communities, people with disabilities, multicultural communities, children and young people and older people, and should be implemented as a matter of priority to inform service monitoring and planning.

“...there is still a **critical service gap** in the family violence service system for **adolescents**.” – Victoria Legal Aid, Federation of Community Legal Centres, Women’s Legal Service Victoria

“Lack of available data on [culturally diverse] communities remains a significant hindrance in shaping effective policy responses...” – AustralAsian Centre for Human Rights and Health

“We believe that the **more information** that is collected regarding a client’s **preferred language, cultural needs, and visa status**, can help to prepare the best response to her needs and ultimately her safety.” – inTouch Multicultural Centre Against Family Violence

“I requested figures on the number of **GBTQ male victims** that [The Orange Door] had contact with and was told...that this was unavailable due to flaws in the [Client Relationship Management] data collection system.” – Individual, Victim Survivors’ Advisory Council

“Some of the most high-risk cases we see are women in **remote or rural locations**, who cannot access 24-hour police [stations] and are hours away from critical supports.” – Loddon Gender Equality and Violence Prevention Consortium

“Greater resourcing is needed for programs that give a voice and space to those who use violence to ensure they are able to have conversations about **taking responsibility for violence in their community** including recognising all forms of violence, changing attitudes towards violence, and supporting each other to change.” – Victorian Aboriginal Child Care Agency

Specific needs of children and young people

‘There is a lack of targeted resources to meet the specific needs of children and young people who have experienced family violence.’

Submissions acknowledged and welcomed the renewed focus on children within the reform, particularly acknowledging the importance of the Child Information Sharing Scheme¹⁹² and recognition in the Family Violence Multi-Agency Risk Assessment and Management (MARAM) Framework of children as victim survivors in their own right. Child-focused training has been provided to build workforce capability in applying the MARAM Framework to children and understanding the impact of family violence on them. More investment has been directed to children, including through:

- > increased funding for therapeutic interventions for children who experience family violence
- > expanded treatment options for young people who display sexually abusive behaviours.¹⁹³

Nevertheless, there remains considerable concern among stakeholders that there is insufficient and inconsistent availability of therapeutic supports for children. The actual provision of therapeutic services to children from September 2019 to June 2020 was 32 per cent (see Figure 4.3 in Chapter 4), below the intended 40 per cent level (which is consistent with children as a percentage of clients receiving a response through The Orange Door).

The next stage of the reform needs to ensure a continued focus on strengthening workforce capability and practice in relation to children, including those with diverse needs, to ensure the commitment at the strategic and policy levels to recognising children as victim survivors in their own right and providing child-centred responses that meet their specific needs is carried through in practice. Further monitoring of the availability and access to therapeutic supports for children is also required at the local and statewide levels.

There has been a renewed focus on **children** being “seen as victim survivors in their own right.” – Centre for Excellence in Child and Family Welfare

“Councils across the state also point out that the Royal Commission into Family Violence has led to **improved collaboration between children and family services and family violence services in some municipalities, establishing a clearer understanding of roles and improved collaboration across services in supporting families in need.**” – Municipal Association of Victoria

“...the investment in therapeutic services for infants and children is **still inadequate to meet express demand...there continues to be a lack of focus on the impact of family violence on children in the absence of visible injuries, resulting in the trauma and mental health impact of the violence on children being left unaddressed until it manifests much later.**” – Berry Street

“We feel strongly that there needs to be **more youth led and driven initiatives focused on family violence from young people’s perspective.**” – Y-Change Initiative, Berry Street

Our monitoring didn’t identify any activity focused on differentiated responses for young adults aged 18–24 years. There is a need for further consideration of how to suitably respond to young adult victim survivors or perpetrators.

Safe housing for victim survivors

‘The current response to family violence largely assumes that women will leave their home when family violence occurs. For those who must leave, homelessness and housing systems cannot guarantee a safe place to stay or a permanent home that is affordable. For those who remain at home, monitoring of the perpetrator is inadequate.’

Despite a series of investments in a range of accommodation types, this system limitation has seen the least progress out of all areas of the reform since the Royal Commission. Outside of investment in Safe at Home responses such as the Personal Safety Initiative and Flexible Support Packages, our analysis found there has not been a coordinated, whole of government response to enable women to remain confidently in their own homes as standard practice. Submissions to the Monitor argued that stronger perpetrator monitoring and better accountability mechanisms for breaches of intervention orders were required for women to remain safely at home.

A lack of long-term, affordable housing options has continued to be a major challenge for victim survivors and one that has continued to cause blockages for those trying to enter and exit crisis accommodation. An inadequate supply of social housing, despite repeated investments, has been the main problem. The \$5.3 billion investment to deliver 12,000 new homes, announced as part of the 2020/21 Victorian Budget, aims to deliver a safe home for as many as 1,000 victim survivors and provides an opportunity to begin to close the gap between supply of and demand for social housing. However, there is still a need for a more strategic approach to addressing the specific needs of victim survivors within the broader housing model.

Carefully managing the continued rollout of core-and-cluster refuges will help to ensure the benefits of this strongly supported model are realised for victim survivors who need crisis accommodation.

“Access to safe housing and crisis accommodation is a **continuing weakness in the family violence service system.**”
– Victorian Aboriginal Child Care Agency

“...securing permanent and safe housing remain **insurmountable for young people.**” – WEstjustice

“...the **waitlist for LGBTIQ+ safe housing has more than doubled in the last 12 months.**”
– Family Access Network

Identification within universal systems

‘Key personnel in universal systems, such as health services and schools, are not adequately equipped to recognise that family violence may be occurring and often do not know what to do when it is identified.’

The MARAM Framework has been a significant development in the reform, providing a shared language and understanding of roles and responsibilities and a clear foundation for identifying and responding to risk. The next implementation phase for the MARAM reforms and the Family Violence Information Sharing Scheme, in which these initiatives are rolling out to services like hospitals and schools and other education institutions, was due to start in 2020 but has been delayed until April 2021 due to the coronavirus (COVID-19) pandemic. This next phase of implementation significantly broadens the number of workforces that are prescribed under MARAM – estimated at 370,000 staff compared with fewer than 40,000 under the first phase.¹⁹⁴ As described in Chapter 1, the next phase of the MARAM reforms rollout will strengthen practice changes already underway through implementing the Strengthening Hospital Responses to Family Violence and Respectful Relationships programs. Substantial preparation for implementing the MARAM reforms has already been undertaken with these phase 2 workforces. General practitioners will be prescribed under the Family Violence Information Sharing Scheme but not under the MARAM Framework. Further consideration should be given to engagement with general practitioners given the critical role they play as a major point of identification and referral.¹⁹⁵ To realise the intent of the Royal Commission, more focus on the health and mental health systems is required.

The phased development of the MARAM practice guidelines for specific cohorts – for example, children and perpetrators – has caused some frustration among stakeholders. Perpetrator assessment tools and practice guidelines were due for release in 2020 but have been delayed and are planned for release

*“...implementation of MARAM has been a **huge shift in the practice** of many different types of agencies in the human services sector. It has allowed more professionals to gain knowledge and skill in identifying and responding to family violence and **created a shared language** around family violence risk, safety and perpetrator accountability.”* – Annie North Inc.

*“As more workforces that have responsibility for child safety implement and **align practice to MARAM**, it will **enable greater collaboration and shared responsibility** for children’s safety and management of family violence risk.”* – Domestic Violence Victoria

*“...the development of a screening tool to assess family violence **risk to children specifically** has taken **far too long** and does not screen for child wellbeing.”* – Centre for Excellence in Child and Family Welfare

*“Members tell us that there is **still a glaring gap** in education and awareness of family violence amongst **psychiatrists and mental health professionals** more generally.”* – Royal Australian and New Zealand College of Psychiatrists

in early 2021,¹⁹⁶ around one and a half years after the original MARAM practice guidelines were released. The Barwon Integrated Family Violence Committee noted in its submission that delays in distributing guidance documents has impeded attempts to embed the MARAM reforms in perpetrator and adolescent family violence practice,¹⁹⁷ while the Royal Women’s Hospital raised that the delay in the MARAM practice guidelines for working with children and perpetrators has presented challenges for acute hospitals.¹⁹⁸

There are areas requiring further attention for workforces already operating with the MARAM Framework, including child protection and mental health. Although the evaluation of the Tilting Our Practice family violence training for the child protection workforce identified improved understanding of and confidence in responding to family violence, and efforts to further improve family violence capability uplift are ongoing, submissions raised specific areas where practice improvements are required. For example, submissions identified a need for greater understanding of trauma-informed practice¹⁹⁹ and a problematic focus by the child protection system on:

...mothers taking responsibility for keeping their children safe, rather than keeping perpetrators out of the household, and the statutory and non-statutory systems engaging perpetrators to take responsibility for how their behaviours impact their family.²⁰⁰

When fully embedded, the MARAM reforms will provide the foundation for a strong and coordinated family violence response and will be a critical area for ongoing effort and improvement, which should be based on feedback and evaluation learnings.

*“Our sector would maintain that there is still very **limited understanding** of the impact of trauma, and of trauma informed practice in Victoria’s **Child Protection system.**”* – Centres Against Sexual Assault Forum

*“The Strengthening Hospital Responses to FV [SHRFV] initiative is being scaled back, with funding ceasing next year. ...There will be **many gaps for those hospitals** around the FV response without SHRFV funded positions, especially when they are prescribed under the Information Sharing Schemes.”* – North Western Mental Health

*“...the engagement of **universal health services** to step up to the challenge of identifying and responding to family violence is a key part of the reform. However, this has had **limited effect on the work that general practitioners (GPs)** undertake as there has not been sufficient engagement with this sector ... despite the fact that **GPs are the major professional group who survivors disclose to...**”* – Royal Australian College of General Practitioners Victoria

Coordination of services

'The range of services a victim might need at different times, including at points of crisis and beyond, are not as well coordinated as they should be, particularly when these services are located in different systems – for example, the health and justice systems. Gaining access to support can be difficult for victims, and service responses remain inconsistent and hard to navigate.'

The government's 10-year Ending Family Violence plan outlined a vision where victim survivors would not have to 'navigate the complex legal and community services systems by themselves'²⁰¹ but would be supported by specialist service navigators who would 'support people from crisis through to recovery'.²⁰² Establishing The Orange Door network was a key element of this approach, bringing together the specialist family violence, children's and families, perpetrator and Aboriginal workforces to coordinate risk and needs assessment, safety planning and crisis support, including linking with other service systems such as housing, legal assistance and ongoing family violence case management. While acknowledging the enormous effort of the sector and government and the benefits that are starting to be seen, realisation of this vision requires further integration across a number of areas.

Notwithstanding the stated aim of collaborative practice within The Orange Door, stakeholders²⁰³ and the Auditor-General²⁰⁴ have identified a need for much clearer guidance on what collaborative models look like in practice. The 10 remaining The Orange Door locations have been announced and are due to open by 2022. It will be important that this guidance and practical training is incorporated into their implementation planning, along with other lessons from delivering services at previous The Orange Door sites. Service integration and referral pathways from The Orange Door into longer term accommodation is yet to be clarified but will be an important future focus area, with efforts to date focusing on crisis accommodation.

"...'iconic' system-wide reform measures such as The Orange Door, Multi-Agency Risk and Management Framework (MARAM), Family Violence Information Sharing Scheme, and workforces development. Most of these elements have progressed in our area over the last four years albeit to different degrees..." – Bayside Peninsula Integrated Family Violence Partnership

"Members report that despite formalised agreements at management level, staff from different services find it difficult to establish shared understandings of the complex needs and best way forward for people calling on the Orange door services." – Australian Association of Social Workers

"The lack of a clear shared vision for service integration and collaboration has been clear within Orange Door locations... these lessons should be used to develop a more integrated system response across all family violence interventions." – No to Violence

Legal assistance remains an area that is not sufficiently integrated within the family violence system. Considerable effort has gone into developing a legal assistance model to support the operation of the Specialist Family Violence Courts; however, a similar model for The Orange Door has not progressed, noting it was recommended for inclusion in their design by the 2016 Access to Justice Review.²⁰⁵

Victoria Legal Aid or Community Legal Centres are operating in some form at existing Orange Door locations through local arrangements and within existing resources, focusing largely on assistance related to family violence intervention orders and family law. People experiencing family violence often have related legal needs such as tenancy, migration, fines, Centrelink and child protection matters. Early information and access to assistance across the range of legal needs is critical to support recovery for victim survivors and requires a consistent model and resourcing. We are pleased to see the inclusion of legal assistance as a system priority in the Family Violence Reform Rolling Action Plan 2020-2023.

Another reform component with a strong service coordination focus is the Specialist Family Violence Court model, which aims to offer a more holistic response to hearing family violence matters in court. As was noted in Chapter 1, stakeholders have welcomed this approach. With around 5 per cent of family violence intervention orders / personal safety intervention orders heard in Specialist Family Violence Courts in 2019-20 (from the three courts that were operational at that time, with one only coming online in March 2020), there is some way to go to meet the Royal Commission's recommendation that all family violence matters are heard in specialist courts. In progressing this work, integration between the specialist courts model and legal assistance, police, family violence services and the wider perpetrator accountability system will be critical.

Djirra notes that for culturally appropriate services to function in settings such as the Specialist Family Violence Courts, Aboriginal community-controlled organisations must 'be adequately funded to provide duty lawyer services and casework services'. Djirra notes that 'none of the funding allocated for the legal services assistance sector to support [Specialist Family Violence Courts] has been distributed to Aboriginal Legal Services'.²⁰⁶ In reviewing the Specialist Family

"It has taken 3-4 years for the Family Safety Victoria reform agenda to start to include sexual assault as critical work. It is vital that the sexual assault response and prevention is recognised as a distinct area of specialisation." – Loddon Gender Equality and Violence Prevention Consortium

"In the absence of a state-wide model and support for family violence workers to identify and respond to legal needs, our practice experience is that we continue to see that people with legal needs are not always referred to legal services in a timely and effective manner." – Victoria Legal Aid, Federation of Community Legal Services and Women's Legal Service Victoria

Violence Courts Legal Practice and Resourcing Model, further consideration of access to specialist legal services for Aboriginal people under the operation of the model may be warranted.

Perpetrator accountability and management

‘Efforts to hold perpetrators to account are grossly inadequate. Victims are too often left to carry the burden of managing risk. Insufficient attention is given to addressing perpetrators’ individual risk factors.’

There have been many positive developments in perpetrator accountability and management since the Royal Commission. For example, we have seen active monitoring of high-risk perpetrators by Family Violence Investigation Units at Victoria Police, although this monitoring needs to be better integrated with other parts of the accountability system (for example, visibility of perpetrator attendance at programs).

Other important developments include respondent practitioner roles in courts, additional funding for trials of new interventions and men’s behaviour change programs, and increased perpetrator visibility through Risk Assessment and Management Panels and the Central Information Point.

However, nearly five years into the reform a systemic response to perpetrator accountability and coordinated management has not yet begun. The government’s response to the 2018 Expert Advisory Committee into Perpetrator Interventions report has now been developed and is a priority for implementation. Submissions identified that further work is also required in perpetrators’ understanding of intervention orders, perpetrator misidentification, and responses where a police member is the alleged perpetrator.

While acknowledging the work Victoria Police has undertaken with the Aboriginal community to improve cultural awareness training, the Victorian Aboriginal Child Care Agency has called for more effort across the police force to improve culturally consistent and appropriate responses.

“...it is still common across the family violence response system for the focus of interventions to be on the choices and actions of victim-survivors rather than perpetrators.”
– Domestic Violence Victoria

“With increased funding, we have been able to work with more men, and provide a range of tailored responses to them...However, there is a need for increased funding to ensure we have the resources to address growing waiting lists (particularly as a result of COVID-19)...” – Loddon Gender Equality and Violence Prevention Consortium

“Many of [our] clients...are in prison due to breaches of family violence orders. Our lawyers regularly...explain them to individuals who have not previously understood the effect of the orders they are subject to. We recommend further support be available to ensure that respondents have a clear understanding of the consequences of orders when they are made or served.”
– Mental Health Legal Service

Information sharing

‘The safety of victims is undermined by inadequate methods for sharing information between agencies about perpetrator risk. This is exacerbated by outdated information technology systems.’

As described in Chapter 1, the introduction of the Family Violence Information Sharing Scheme and Child Information Sharing Scheme have been transformational for the reform and are almost uniformly viewed by stakeholders as instrumental in improving the safety of victim survivors. Similarly, the Central Information Point is a valued addition to the family violence system.

The delay in system integration with partner agencies is impacting the scaling up of the Central Information Point to provide coverage to all 17 The Orange Door sites when operational as well as other organisations, such as Safe Steps, who would benefit from receiving the information reports. Funding provided in the 2020/21 Victorian Budget enables the continued operation of the Central Information Point until June 2021, and planning for its further development.

Implementation of the Central Information Point has not been examined in detail in this monitoring period, but we received a demonstration of the operation of the Central Information Point early in 2020 and were impressed with the systems and processes in place.

Some concern has been expressed about the operation of the information-sharing schemes for some cohorts, including adolescent victim survivors²⁰⁷ and criminalised women, particularly where they have been misidentified as the perpetrator. For example, information can be shared about any person, including adolescent victim survivors, without consent to manage family violence risk to children. However the Family Violence Information Sharing Scheme Ministerial Guidelines advise that services should seek the views of both child and adult victim survivors whose information may be shared without consent, where safe, appropriate and reasonable to do so. In any case, further consideration of these cohorts within training and guidance materials

“[Information sharing] in our view is the jewel in the crown of the Royal Commission Recommendations. There have been substantial changes to information sharing process around family violence and risk to children.” – Annie North Inc.

“...the Family Violence Information Sharing Scheme states that ‘a child’s safety is prioritised over any individual’s privacy.’ This approach, whilst understandable, undermines the autonomy of adolescent victim-survivors whose personal information may be shared without their consent, input or even knowledge.” – WEstjustice

“...there are still barriers to effective implementation of these [information sharing] reforms, including other services’ understanding of the Schemes, confidence in sharing information with other services...” – Centre for Excellence in Child and Family Welfare

may be warranted. Similarly, the Centre for Excellence in Child and Family Welfare has noted a need to further develop understanding of the interaction of the Family Violence Information Sharing Scheme and the Child Information Sharing Scheme to support permissible information sharing for the wellbeing of children. Such understanding would necessarily focus on the full application of the Child Information Sharing Scheme rather than be limited to the family violence context.

Early intervention and recovery support

‘Too little effort is devoted to preventing the occurrence of family violence in the first place, and to intervening at the earliest possible opportunity to reduce the risk of family violence or its escalation. Similarly, there is not enough focus on helping victims recover from the effects of violence and rebuild their lives.’

The continued rollout and effective use of the MARAM Framework and information-sharing schemes will help support earlier intervention, as universal systems become better equipped at identifying family violence risk. Improved data and monitoring will be required to determine whether earlier identification of family violence and earlier access to services is occurring.

However, it appears that responses to victim survivors and to perpetrators could be more proactive. For example, through our monitoring the need for earlier intervention arose as a theme in relation to children. The Commission for Children and Young People has described how child protection practice needs to improve to ensure child victim survivors are appropriately supported and protected, citing examples of cases being closed despite repeated and early reports to Child Protection where, tragically, a child death subsequently occurred. The Commission has also called for earlier, trauma-informed interventions for young people who use violence in the home.

Working with perpetrators as early as possible is vital to maximise engagement and reduce the risk of escalating violence, but waiting lists for services present challenges.

At the other end of the family violence support spectrum, victim survivors spoke of the need for more support in managing legal, financial and administrative matters in the aftermath of family violence incidents, which can seem overwhelming at a time of crisis. Consumer Affairs Victoria plays an important role in this area, including through its funded financial counselling programs and the Tenancy Assistance and Advocacy Program for victim survivors. Building on such services, there is an opportunity to develop a more joined-up approach to helping victim survivors get back on their feet. The need for more support to access long-term, stable housing and to be able to engage in education were also raised as being essential for effective recovery from the effects of family violence.

Governance and outcomes

‘The Victorian Government does not have a dedicated governance mechanism in place to coordinate the system’s efforts to prevent and respond to family violence or to enable an assessment of the efficacy of current efforts.’

Following the Royal Commission, the government established a range of governance bodies to oversee and progress the family violence reform. Key bodies included (* will no longer exist after the creation of the Family Violence Reform Advisory Group):

- > Ministerial Taskforce for the Prevention of Family Violence*
- > Victorian Secretaries’ Board Sub-Committee on Family Violence Reform
- > Family Violence Steering Committee, including sector representatives*
- > Family Violence Reform Interdepartmental Committee
- > Family Violence Multi-Agency Risk Assessment and Management and Information Sharing Steering Committee
- > Industry Taskforce*
- > Victim Survivors’ Advisory Council
- > Dhelk Dja Partnership Forum
- > Family Violence Regional Integration Committees
- > Diverse Communities and Intersectionality Working Group*
- > LGBTIQ Family Violence Working Group*
- > Victorian Public Service Family Violence Research and Evaluation Working Group.

“While there are complex whole of government governance structures in place to oversee the family violence reforms, these are difficult to navigate and have not translated into effective implementation of the reform agenda.”
– Domestic Violence Victoria

“Our experience of the [Family Violence Steering Committee] is that it has functioned more as a stakeholder group to communicate about work in progress or completed rather than as a body to facilitate input or decision making by the non-government and community service sector.” – Victoria Legal Aid, Federation of Community Legal Services and Women’s Legal Service Victoria

While acknowledging the breadth of governance structures in place, stakeholders have been critical of the functioning of the Family Violence Steering Committee and Industry Taskforce, and of the integration of Family Violence Regional Integration Committees within the broader reform governance.

Family Safety Victoria initiated a major review of reform governance in December 2019 to address known governance issues and acknowledge the move from an establishment phase to an implementation and embedding phase in the reform. The refreshed arrangements include a Reform Board to replace four

existing project-specific steering committees. The Reform Board, which will be internal to government, will receive advice from a Family Violence Reform Advisory Group comprising external sector representatives as well as the existing Dhelk Dja Partnership Forum and Victim Survivors' Advisory Council.

Coordination and accountability for prevention effort has also been raised by stakeholders as complex and unclear, with responsibility sitting variously with Family Safety Victoria, the Office for Women and Respect Victoria. The machinery of government changes that took effect on 1 February 2021 have resulted in the Office for Women and Respect Victoria, along with the Family Violence Branch responsible for whole of government coordination, moving from the Department of Premier and Cabinet to become the Office for the Prevention of Family Violence in the Department of Families, Fairness and Housing. Family Safety Victoria will also sit within this new department. The consolidation of groups and entities responsible for family violence within a single department, along with the proposed changes to governance arrangements, provides a clear opportunity to simplify and strengthen governance and oversight for the next stage of the family violence reform. Respect Victoria being established under legislation in 2018 to lead a coordinated approach to primary prevention should also help clarify roles and responsibilities.

A Family Violence Outcomes Framework including specific domains was developed as part of the 10-year Ending Family Violence plan. However, there has been no reporting on achievements against these outcomes in the first five years of reform. An outcomes framework implementation strategy was publicly released with the Rolling Action Plan in December 2020, noting indicators and measures are not comprehensive and require further development. This work is critical to effective governance because system leaders and the community need to know if the reform is bringing about the benefits the Royal Commission intended. Priority must be given to measuring outcomes in the next stage of the reform.

“The future governance structure will need to enable the vertical integration of [Family Violence Reform Interdepartmental Committees] through clear communication pathways, meaningful opportunities for consultation, and participation on relevant committees.” – Western Integrated Family Violence Committee

“More information about the system should be published in a transparent form, especially family violence funding since 2016.” – South East Community Link

“Despite the news reporting of women who have been murdered in family violence incidents, there is still no official government death count for family violence deaths across the country as is the case for deaths related to road accidents or COVID-19.” – Australian Association of Social Workers

“It takes both experts and survivors to make choices... Lived experience is invaluable to inform and help make decisions around planning how to respond to family violence. Survivors' voices are powerful and need to be heard.” – Victim survivor advocate

The inclusion of victim survivor voices in policy and service design has been a strength of the reform. Now, across multiple reform areas – such as The Orange Door network, Specialist Family Violence Courts and the policing response there is a need to seek the current experience of system users to identify improvements to practice and systems that would result in better outcomes.

Investment in prevention and response

‘There is inadequate investment in measures designed to prevent and respond to family violence.’

There has been significant investment in family violence response efforts since the Royal Commission; however, investing in response measures to fully meet demand is not feasible. A strong focus and significant, sustained investment in primary prevention are required to reduce future demand on the service system and eliminate family violence. Progress on primary prevention has not been examined in detail in this monitoring period, but previous Monitor's reports have outlined the strong foundations that have been built. Alongside the investment in response, there has been a more than three-fold increase in prevention funding between 2015–16 and 2019–20, with further investment in the 2020/21 Victorian Budget (refer to Figure 1.1 in Chapter 1).

More work is needed to ensure primary prevention operates as an integrated part of the family violence system, as well as a strong, coherent and coordinated system in its own right,²⁰⁸ supported by effective governance structures.²⁰⁹ This requires the design and implementation of long-term infrastructure that incorporates clear roles and responsibilities for all players in family violence prevention, and strong partnerships between government and other sectors.

Through their submissions, prevention stakeholders outlined that prevention efforts need to build awareness of dysfunctional family dynamics and acknowledge a range of forms of family violence, including parents being abusive towards their children, siblings being abusive towards other

Primary prevention is “the only way in which the overall prevalence of family violence (and therefore demand) can be reduced.” – Respect Victoria

A wider scope of prevention efforts is needed to “address women's economic insecurity, other forms of gendered violence and the unequal health consequences of inequality...” – Gender Equity Victoria

“The Salvation Army strongly advocate for increased investment in a range of new men's perpetrator programs and trials to address prevention.” – Salvation Army

“The Victorian Government and its agencies [should] shift away from short-term funding models for primary prevention towards more long-term thinking and investment.” – Bayside Peninsula Integrated Family Violence Partnership

siblings and LGBTIQ-specific dynamics.²¹⁰ There is also an opportunity to improve coordination of prevention research 'to avoid duplication and to further build the evidence base for primary prevention practice'.²¹¹

Approaches within the Transport Accident Commission and WorkSafe Victoria have demonstrated the effectiveness of evidence-based, targeted and properly resourced prevention effort in reducing road and worker fatalities and injuries, providing confidence that similar efforts with family violence will reduce long-term harm to the community.

Looking forward: priority areas for future focus

Based on our consultations, an analysis of remaining recommendations and our assessment of progress against the system limitations identified by the Royal Commission, we consider that the following should be priorities within the reform program:

- > **Governance** – ensure timely implementation of new governance arrangements to deliver strong, coordinated oversight and decision making for the reform, and the meaningful engagement of non-government system partners in governance.
 - > **Data, evaluation, performance and outcomes** – identify ways to improve data collection and to make service supply, demand and outcomes data readily available to ensure reform transparency and enable timely decision making and support system planning.
 - > **Service integration** – ensure alignment and (appropriate) integration in the ongoing design and delivery of interrelated reform initiatives including The Orange Door, legal assistance, Specialist Family Violence Courts and perpetrator accountability mechanisms to improve responses for victim survivors and perpetrators.
 - > **Workforce** – continue to grow and develop the specialist family violence and primary prevention workforces needed to support the service system and strengthen development of the broader workforces that intersect with the family violence system.
 - > **Perpetrator accountability** – ensure perpetrators remain 'visible' and are held to account through the creation of a joined-up accountability system and through the design and delivery of a range of programs to meet service demand.
- > **Children and young people** – support a systemic shift that acknowledges and responds to the independent needs of children and utilises the voices of children and young people in service design and delivery.
 - > **Housing** – improve housing access by addressing known issues through a clear strategy and by adopting a whole of government approach to enable more victim survivors to remain in their own homes.
 - > **Prevention** – shift the focus to preventing family violence to reduce the harm experienced by the community and demand for response services by ramping up prevention efforts and research, and through creating a coherent, coordinated and well-resourced prevention architecture.

These areas are largely aligned with the priorities for 2020–2023 outlined in the government's Rolling Action Plan. In progressing further reform work, the reform-wide focus on intersectionality, Aboriginal self-determination and lived experience articulated in the Rolling Action Plan will be important to ensure the benefits of the reform are experienced equally.

Future monitoring

The 2020/21 Victorian Budget included \$1.6 million to continue the Family Violence Implementation Reform Monitor function until the end of 2022. The Monitor's office will work with the Minister for the Prevention of Family Violence and government to develop a new monitoring approach aligned with the second Rolling Action Plan 2020–2023 that, along with Ending Family Violence: Victoria's Plan for Change, forms the government's implementation plan for the second phase of the reform.

In developing the next monitoring approach, the Monitor will consult with key stakeholders and engage with victim survivor groups to strengthen the voices of victim survivors in monitoring the reform.

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- 196 Department of Premier and Cabinet (2020): Family Violence Reform: Rolling Action Plan 2020–2023. Available at: vic.gov.au/family-violence-reform-rolling-action-plan-2020-2023 (accessed 21 December 2020).
- 197 Barwon Area Integrated Family Violence Committee, submission 103.
- 198 Royal Women's Hospital, submission 76.
- 199 The Sexual Assault and Family Violence Centre, submission 87.
- 200 Domestic Violence Victoria, submission 121, p. 12.
- 201 Victorian Government (2016): Ending Family Violence: Victoria's Plan for Change, p. xi. Available at: vic.gov.au/ending-family-violence-victorias-10-year-plan-change (accessed 4 December 2020).
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- 203 The Sexual Assault and Family Violence Centre, submission 87; Domestic Violence Victoria, submission 121.
- 204 Victorian Auditor-General's Office (2020): Managing Support and Safety Hubs. Available at: audit.vic.gov.au/report/managing-support-and-safety-hubs (accessed 4 December 2020).
- 205 Victorian Government (2016): Access to Justice Review: Summary Report.
- 206 Djirra, submission 54, p. 21.
- 207 WEstjustice Western Community Legal Centre, submission 93.
- 208 Respect Victoria, submission 78.
- 209 Ibid.
- 210 Berry Street Y-Change Initiative, submission 26; Respect Victoria, submission 78.
- 211 Gender Equity Victoria, submission 118, p. 9.

Glossary of relevant terms and abbreviations

Aboriginal	While acknowledging the diversity of Aboriginal people in Australia, the term 'Aboriginal' has been used to refer to all people of Aboriginal and Torres Strait Islander descent.
Adolescent Family Violence Program	Provides family-based case management to young people using violence in the family to reduce violence and increase the safety of family members. The program is targeted at young people aged 12 to 17 years and their families. It is funded by the Victorian Government in three areas (Ballarat, Barwon and the Mornington Peninsula).
Affected family member	A person who has experienced family violence, also known as a victim survivor. The term is predominantly used in police and court proceedings to refer to the person to be protected by a family violence intervention order.
Applicant	A person who applies for a family violence intervention order. This can be a Victoria Police member applying on behalf of the affected family member.
Central Information Point	Provides timely information to support effective risk assessment and management of perpetrators of family violence. Enabled by the Family Violence Information Sharing Scheme, it brings together representatives from Court Services Victoria, Victoria Police, Corrections Victoria and the former Department of Health and Human Services to consolidate critical information about perpetrators of family violence into a single report. Reports can currently be requested by The Orange Door network and some Risk Assessment and Management Panels.
Child Information Sharing Scheme	Established in legislation, the scheme provides for sharing of information among authorised organisations to support child wellbeing or safety, including within (but not limited to) family violence contexts.
Counselling order	An order that requires a male respondent to attend a men's behaviour change program. Counselling orders can be made by magistrates at Specialist Family Violence Courts. If a respondent does not comply with a counselling order they can be charged with a criminal offence. The program began operating in January 2020.
Duty lawyer	Publicly funded legal aid lawyer 'on duty' at courts and tribunals to provide free advice and representation for people attending a court hearing who do not have their own lawyer.
Family Safety Victoria	An administrative office of the Department of Families, Fairness and Housing (comprising some portfolio responsibilities of the former Department of Health and Human Services) with dedicated responsibility for delivering key elements of the family violence reform. This includes the Family Violence Information Sharing Scheme, The Orange Door network and the Family Violence Multi-Agency Risk Assessment and Management reforms.

Family Violence Information Sharing Scheme	Established in legislation, the scheme enables sharing of information between authorised organisations to support the assessment and management of family violence risk.
Family violence intervention order	A court-issued order to protect people from further family violence.
Family Violence Investigation Units	Established in each police division, the 31 units investigate serious family violence matters and support general duties police and other specialist units on appropriate risk management interventions to increase safety for adult and child victims.
Family Violence Multi-Agency Risk Assessment and Management (MARAM) Framework	A framework to support the identification, assessment and management of family violence risk. A range of organisations are required by law, under the <i>Family Violence Protection Act 2008</i> , to align their practices and policies with MARAM, which replaced the former common risk assessment framework or 'CRAF'. The MARAM Framework is supported by operational practice guidance and risk identification, screening and assessment tools.
Family Violence Principal Practitioner	Positions established in the former Department of Health and Human Services, the Department of Education and Training and the Department of Justice and Community Safety to develop family violence practice and knowledge and provide leadership across their departments. The positions support implementation of key initiatives such as the Information Sharing Scheme and the Family Violence Multi-Agency Risk Assessment and Management Framework.
Family Violence Reform Interdepartmental Committee	The committee responsible for leading cross-government engagement and providing oversight and governance for the implementation and delivery of family violence reform. Representatives include the reform's key implementing agencies.
Family Violence Regional Integration Committees	Committees established in 2006 in each of the then 14 Department of Human Services' areas. Their purpose is to improve the integration of services that respond to family violence at the local level, drive workforce development, and act as a conduit between specialist family violence and other providers in local areas.
Family violence safety notice	A police-issued notice that provides immediate protection for a person from a family member who is using family violence before an intervention order application is heard in court.
Flexible Support Packages	Tailored assistance packages for victims survivors experiencing family violence. Packages can include rental and mortgage subsidies and assistance with the costs of accessing counselling, education, employment and other services to support housing stability and financial security.
LGBTIQ	An inclusive initialism that refers to lesbian, gay, bisexual, transgender, intersex and queer people.

Other party	A Victoria Police term used to describe an alleged perpetrator of family violence in a family violence incident.
Personal Safety Initiative	A non-crisis response to support women experiencing family violence to remain safely in their own homes. It provides professional advice on modifications to property and use of technology to increase security and safety, and case management support.
Respectful Relationships	A primary prevention education initiative that supports government, Catholic and independent schools and early childhood settings to promote and model respect, positive attitudes and behaviours. Respectful Relationships education was introduced as a core component of the Victorian curriculum in 2016.
Respondent	A court term used to describe the accused against whom legal proceedings have been brought by the applicant. In cases involving family violence intervention order applications, the respondent is the alleged perpetrator.
Risk Assessment and Management Panels	Formally and regularly convened meetings of key agencies and organisations in local service areas that manage the highest risk family violence cases. The panels develop coordinated action plans to address serious and imminent threats to an individual's life, health, safety or welfare. There are 18 panels operating across Victoria.
Royal Commission into Family Violence	Established in 2015 the Commission was tasked with finding ways to prevent family violence, improve support for victim survivors and hold perpetrators to account. The Royal Commission provided its report, which included 227 recommendations, to the Victorian Government on 29 March 2016.
Safe at Home	A range of interventions aimed at helping victim survivors to safely remain in, or return to, their homes and communities. The approach aims to mitigate the risk of homelessness and the safety impacts of family violence and put responsibility for leaving the family home on the perpetrator of the violence. Safe at Home responses in Victoria include the Personal Safety Initiative and Flexible Support Packages.
Specialist Family Violence Advisors	Established in each of the 17 Department of Health (formerly Department of Health and Human Services) areas, these roles are intended to increase access to specialist family violence skills as well as supporting the development of local capability and resources across mental health, alcohol and other drug and family violence services across Victoria.
Specialist Family Violence Courts	Specialist courts that provide enhanced safety features including separate entrances for victim survivors and remote hearing facilities. Specialist Family Violence Courts are staffed by specially trained magistrates and court staff, partner agencies and other court-based services to deliver a coordinated response. Magistrates at Specialist Family Violence Courts have powers to mandate counselling orders for perpetrators.

Support and Safety Hubs	A network of local access points across Victoria recommended by the Royal Commission into Family Violence to better support victim survivors in accessing services. The public branding of the Support and Safety Hubs is The Orange Door (see also 'The Orange Door').
The Orange Door	A network that is the entry point to women's and children's family violence services, services for men who use violence and family services. It undertakes triage to assess and manage risk and connect people to the services they need.
Therapeutic interventions	Facilitated by a professional practitioner, an action designed to improve an individual's health and wellbeing as a result of family violence trauma. Intervention responses include group sessions, family work, individual counselling, coaching and ongoing peer support, with the long-term goal of rebuilding self-esteem and confidence and reducing social isolation.
Tilting Our Practice	A family violence theoretical framework that outlines the shift in practice required by child protection practitioners to effectively apply a family violence lens to their work with families experiencing family violence. The framework and accompanying Tilting Our Practice resource have informed training for all child protection staff.
Universal services/systems	Services provided to the whole community regardless of socioeconomic status – for example, public health services and public education.
Victim survivor	A person who has experienced domestic, family or sexual violence.
Victim Survivors' Advisory Council	Formed in July 2016, the council was established to include people with lived experience of family violence in the service design of the family violence reform.

Appendix 1:

2019–20 monitoring approach

The role of the Monitor

Ending Family Violence: Victoria's Plan for Change sets out an ambitious reform program. The size and complexity of this reform, requiring new and innovative ways of working, make this a high-risk program. The role of the Family Violence Reform Implementation Monitor was established to mitigate against some of these risks and to provide the Victorian people and parliament with an independent assessment of the progress of the government's implementation of the reform.

The Monitor is established under the *Family Violence Reform Implementation Monitor Act 2016* as an independent officer of the Victorian Parliament. The Monitor's functions are set out in section 14 of the Act.

Monitoring is an effective form of risk mitigation when it enables those responsible for implementation to address issues as they arise. To this end, the Monitor aims to act as an early warning system for risks and issues that could mean the reform is less effective for victim survivors now and in the future. The Monitor does not have the power to direct the government or implementing agencies and does not have decision-making authority.

The Monitor must report to parliament on progress of the reform as at 1 November each year, and this report is the fourth and final such report under the Act. The three previous reports are available on the Monitor's website at fvrin.vic.gov.au.

Values of the Monitor

The Monitor is driven by a set of core values, which are embedded in our approach, including stakeholder engagement and the messages communicated about the reform. Specifically, the Monitor's values are to:

- > exercise **integrity** by reporting independently on the implementation of the reform
- > be **supportive** and constructive in our approach and advice to the government
- > demonstrate **commitment** to the reform through perseverance and continuing to push the government to do better
- > demonstrate **courage** in delivering frank and fearless advice
- > be **outcomes-focused**, considering what is best for current and future victim survivors and what might break the cycle of family violence
- > reflect on how best to use the role to **make a difference**.

The work of the Monitor is also guided by two questions:

- > What is best for current and future victim survivors?
- > What will break the cycle and avoid people becoming perpetrators or victim survivors?

Approach to monitoring for the final report

As the fourth and final report under the Act, a different approach was taken to previous reports. Monitoring focused on examining reform progress by looking back over the nearly five years since the Royal Commission through the lens of 'what has changed' and looking forward to the next phase of the reform to consider 'what remains to be done'.

As in previous reports, monitoring in this period was based on information gathered through:

- > consultations with government agency staff on the progress of implementation, particularly around any changes to timeframe or budget, the reason for delays, and the level of collaboration
- > consultations with community groups and victim support groups on specific areas of reform progress, and whether there are any indicators of effectiveness
- > attendance at key governance and advisory committee meetings
- > reviews of documentation from implementation agencies, meeting papers and records of decisions by governance bodies.

Monitoring this year was additionally informed by a call for submissions from individual practitioners and organisations that work with people who have experienced or perpetrated family violence, and through applying an 'implementation science' approach to key areas of the reform, both of which are outlined further below.

Due to the restrictions in place during 2020 to manage the coronavirus (COVID-19) pandemic, the Monitor was largely unable to visit services in person. Most consultations during the monitoring period were conducted online.

Throughout the monitoring period, the Monitor shared early findings with the Family Violence Reform Interdepartmental Committee to enable implementation agencies to address issues identified in a timely way.

Selection of priority areas

Priority areas in this monitoring period were explored through a series of rapid deep dives. These areas represented systemic issues that could represent enablers or barriers to the progress of family violence reform. Areas were selected based on a thematic analysis of remaining recommendations and consultation with government and sector stakeholders and included:

- > workforce
- > children as primary victims of family violence
- > safe housing
- > perpetrator accountability.

Service integration and financial sustainability and system demand were also initially selected as systemic issues for examination. However, due to the reduced capacity of the Monitor’s office and government agencies during the coronavirus (COVID-19) pandemic, deep dives were not undertaken into these topics.

Monitoring also considered progress in relation to diverse communities (reflected throughout the report) and the inclusion of the voices of victim survivors in the reform. Following stakeholder feedback, progress in relation to adolescents who use violence in the home was also examined in the current monitoring.

Finally, the government’s response to family violence in the unprecedented coronavirus (COVID-19) pandemic was examined.

Implementation review methodology

In response to widespread implementation challenges, implementation science has emerged as a new discipline over the past two decades. Implementation science is the study of how research evidence and effective policies, practices and programs can best be promoted and implemented in health and human services. The core aim of implementation science is to influence and accelerate the uptake and embedding of effective approaches in real-world settings.²¹²

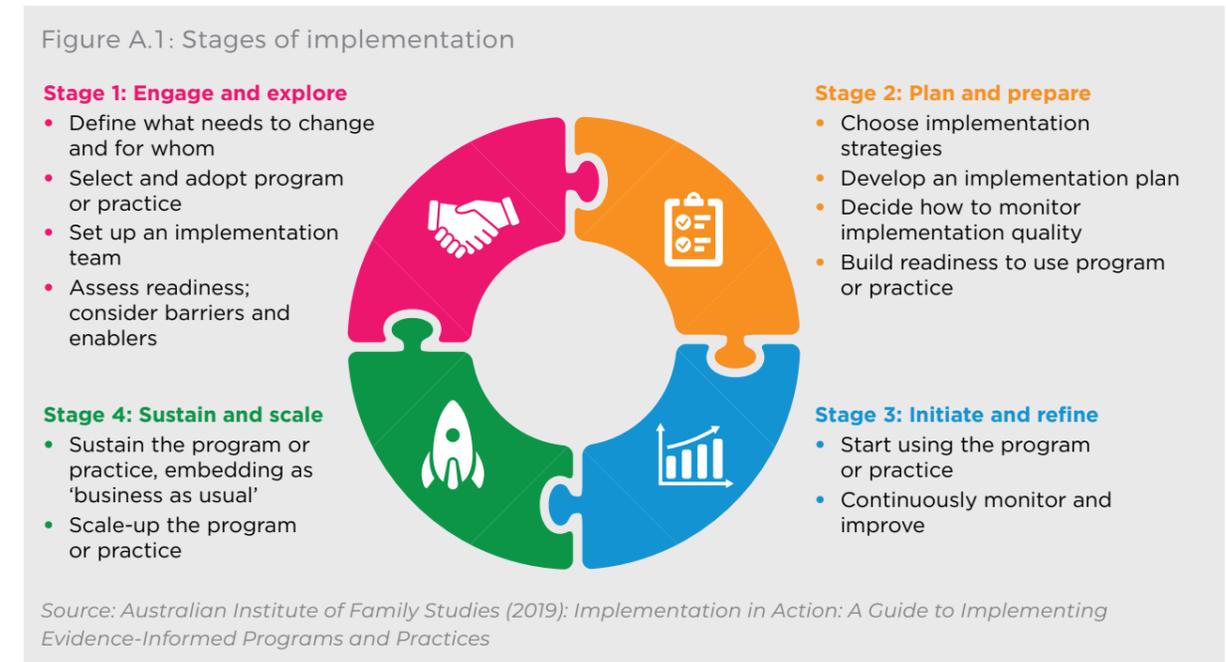
In partnership with the Centre for Evidence and Implementation,²¹³ the Family Violence Reform Implementation Monitor applied implementation science models to review a selection of family violence reform initiatives: Respectful Relationships education in schools; Specialist Family Violence Courts; and The Orange Door – Central Highlands.

Implementation science is a multidisciplinary field that offers insights for decision-makers and service providers involved in change and improvement processes. The field acknowledges the complexity of change processes by highlighting the

many different domains of influence (including individuals, organisational culture and characteristics of the system and environment) and by describing non-linear implementation processes. It also offers methods, tools and approaches that can help to navigate this complexity and to facilitate high-quality implementation. International experience emphasises the importance of taking an implementation science-informed approach to system reform to increase the likelihood of achieving and sustaining the intended changes.²¹⁴

Two key implementation science frameworks – an integrated staged implementation framework²¹⁵ and the Consolidated Framework for Implementation Research framework²¹⁶ – were adopted to guide the reviews. These frameworks were selected because they are directly applicable to the review goals and are widely used in implementation practice.

Implementation scientists often recognise four stages of implementation, as illustrated in Figure A.1.



The staged implementation framework was used to guide high-level descriptions of the program implementation processes. This included generating insights into implementation progress to date, implementation pace, and key activities undertaken (or skipped) in each stage. Such insights are beneficial for revealing the complexity of the implementation process and for highlighting the time and resourcing required for implementation efforts in each stage.

The reviews also considered barriers and enablers to effective implementation according to the five domains of the Consolidated Framework for Implementation Research. The Consolidated Framework identifies five key domains of influence over implementation:

1. **Individual characteristics ('people')**: Characteristics of the people involved in implementing the initiative.
2. **Program/policy characteristics ('program')**: Characteristics of the initiative itself.
3. **Inner setting ('organisation')**: Characteristics of the organisation or system within which the initiative is being implemented.
4. **Outer setting ('system')**: Characteristics of the surrounding context or environment.
5. **Implementation process ('process')**: Characteristics of the implementation process itself.

Figure A.2 illustrates the five domains, with examples of specific influencing factors (that act as barriers or enablers) within each domain.



These frameworks are most commonly (though not exclusively) applied to implementation at the local programmatic level. For these reviews, they were used to guide analysis at the reform level. This approach necessitated focusing on the key concepts offered by each of the frameworks, rather than the granular detail. Nonetheless, applying implementation science methods to the reviews facilitated a structured, consistent and transparent process across programs that delivered actionable insights.

The reviews drew on documents provided by implementation agencies, available evaluations, stakeholder feedback from the Monitor's call for submissions, and feedback from workshops involving agencies and, for The Orange Door – Central Highlands, service provider staff from Berry Street.

Call for submissions

The Monitor called for submissions from the family violence sector and other stakeholders through **Engage Victoria**. The campaign ran from 1 June 2020 to 26 July 2020 and sought the views of organisations, individual practitioners and advocates on:

- > how the family violence service system, and users' experience of it, has changed since the Royal Commission
- > looking forward – what is still required in the family violence reform
- > the impact of the coronavirus (COVID-19) pandemic.

Submissions informed analysis of progress and areas requiring further attention in implementing Victoria's family violence reform.

In total, 125 submissions were received (see Appendix 3), consisting of:

- > 36 submissions from individuals
- > 89 submissions from organisations.

Permission to publish was provided for 91 of the 125 submissions. These can be accessed from the Monitor's website at fvrin.vic.gov.au in PDF format.

References

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Appendix 2:

Stakeholder consultations and governance groups attended

Names of people, agencies, organisations and committees generally reflect their status during the monitoring period.

Stakeholder consultations undertaken during the monitoring period

The Family Violence Reform Implementation Monitor would like to thank the following stakeholders for their time:

Aboriginal Community Elders Services
 Aboriginal Justice and Dhelk Dja Forum
 Adult Parole Board
 Allen, Ro – Commissioner for Gender and Sexuality
 Australian Association for Restorative Justice
 Australian Services Union
 Barwon Child, Youth and Family
 Barwon Multidisciplinary Centre
 Berry Street
 Buchanan, Liana – Commissioner for Children and Young People
 Central Highlands Integrated Family Violence Committee
 Centre for Excellence in Child and Family Welfare
 Child and Family Services Ballarat
 Children’s Court of Victoria
 Court Services Victoria
 Department of Education and Training
 Department of Health and Human Services
 Department of Justice and Community Safety
 Department of Premier and Cabinet
 Department of Treasury and Finance
 Dhelk Dja Partnership Forum
 Domestic Violence Resource Centre Victoria
 Domestic Violence Victoria

Drummond Street
 Expert Advisory Committee into Perpetrator Interventions (former chair and members)
 Family Safety Victoria
 Family Violence Workforce Development Expert Forum representatives
 Federation of Community Legal Centres
 Future Social Service Institute
 Gender Equity Victoria
 Hannan, Lisa – Chief Magistrate
 Hegarty, Professor Kelsey – The University of Melbourne
 Human Services and Health Partnership Implementation Committee
 Hume Central Secondary College
 inTouch Multicultural Centre Against Family Violence
 Jesuit Social Services
 Judicial Advisory Group on Family Violence
 Keeping Women Out of the Justice System
 Magistrates’ Court of Victoria
 Mansour, Gerard – Commissioner for Senior Victorians
 McCormack, Fiona – Victims of Crime Commissioner
 Mohamed, Justin – Commissioner for Aboriginal Children and Young People
 Neighbourhood Justice Centre
 No to Violence
 North Western Mental Health, Melbourne Health
 Peninsula Health
 Respect Victoria
 Risk Assessment and Management Panels – Inner Gippsland, Outer East Melbourne, Ovens Murray, Statewide Coordinator
 Safe Steps Family Violence Response Centre
 Statewide Family Violence Integration Advisory Committee
 The Orange Door – North East Metropolitan Area
 Victim Survivors’ Advisory Council
 Victoria Legal Aid
 Victoria Police

Victorian Aboriginal Child Care Agency
 Victorian Alcohol and Drug Association
 Victorian Auditor-General's Office
 Victorian Council of Social Service
 Victorian Multicultural Commission
 Vincent, Dr Niki – Public Sector Gender Equality Commissioner
 Western Integrated Family Violence Committee
 Williams, Gabrielle – Minister for Prevention of Family Violence
 Women with Disabilities Victoria
 Women's Health Victoria
 Wyndham Multidisciplinary Centre

Reform governance groups attended during the monitoring period

Courts Family Violence Steering Committee
 Family Violence Operations and Coordination Group
 Family Violence Reform Interdepartmental Committee
 Family Violence Steering Committee
 Information Sharing and Family Violence Multi-Agency Risk Assessment and Management Steering Committee
 Multicultural Communities Family Violence Working Group
 The Orange Door – Central Highlands Operations Leadership Group
 The Orange Door – Hubs Leadership Group – Central Highlands
 The Orange Door Steering Committee
 The Orange Door Working Group
 Victorian Secretaries' Board Sub-Committee on Family Violence Reform

Appendix 3:

Submissions to the Monitor

A list of all submissions received, from both organisations and individual practitioners, is provided below.

Permission to publish was provided for 91 of the 125 submissions received. These are available at fvrим.vic.gov.au.

Individual submissions

Role or organisation as identified by individual	Submission number	Availability on FVRIM website
Academic	105	Not published
Cardijn Community of Australia	19	Available
Castlemaine Secondary College	9	Available
Charlotte Brewer Consulting	13	Available
Corrections Victoria	2	Available
Deakin University	14	Available
Education practitioner	24	Not published
Education practitioner	81	Available
enRICHed Pursuits	67	Available
Grampians Community Health	6	Available
Heavy M.E.T.A.L Group	68	Available
Heavy M.E.T.A.L Group	104	Available
Mindful Counselling Australia & Ashray Women's Centre	39	Available
Mornington Peninsula Shire	15	Available
Odyssey House Victoria	31	Available
Other individual	10	Not published
Other individual	21	Available
Other practitioner	4	Not published
Other practitioner	49	Not published
Other practitioner	75	Not published
Psychological/counselling service	7	Available
Psychological/counselling service	8	Not published
Sole legal practitioner	5	Available
Specialist family violence practitioner	1	Not published
Specialist family violence practitioner	3	Not published
Specialist family violence practitioner	16	Not published
Specialist family violence practitioner	109	Not published
Specialist family violence practitioner	30	Not published

Specialist family violence practitioner	32	Not published
Victim survivor	23	Available
Victim survivor	36	Not published
Victim survivor	99	Available
Victim survivor	100	Available
Victim survivor	110	Not published
Victim survivor	111	Not published
Victim survivor	37	Available

Organisational submissions

Organisation name or type	Submission number	Availability on FVRIM website
Anglicare Victoria	94	Available
Annie North Inc.	98	Available
AustralAsian Centre for Human Rights and Health	107	Available
Australian Association of Social Workers	72	Available
Australian Services Union Victorian and Tasmanian Authorities & Services Branch	59	Available
Ballarat Health Services Mental Health Services	41	Available
Barwon Area Integrated Family Violence Committee	103	Available
Bayside Peninsula Integrated Family Violence Partnership	58	Available
Bendigo Community Health Services	113	Available
Berry Street Victoria	74	Available
CASA Forum	84	Available
Central Highlands Integrated Family Violence Committee	90	Available
Centre for Excellence in Child and Family Welfare	122	Available
cohealth	71	Available
Commission for Children and Young People	115	Available
Community service organisation	64	Not published
Council to Homeless Persons	123	Available
Djirra	54	Available
Domestic Violence Victoria	121	Available
EACH Family Violence Counselling	51	Available
Eastern Community Legal Centre	69	Available
Eastern Metropolitan Regional Family Violence Partnership	63	Available

Economic Abuse Reference Group	56	Available
Elizabeth Morgan House Aboriginal Women's Service	47	Available
Family Access Network	57	Available
Family Life Ltd	45	Available
Family violence alliance/partnership	119	Not published
Family violence alliance/partnership	120	Not published
Flat Out Inc.	96	Available
Gender Equity Victoria	118	Available
Gippsland Family Violence Alliance	22	Available
Goulburn Family Violence Executive	46	Available
Health/community health service	34	Not published
inTouch Multicultural Centre Against Family Violence	85	Available
Jewish Care Victoria	29	Available
Law Institute of Victoria	86	Available
Legal/mediation service	95	Not published
Loddon Gender Equality and Violence Prevention Consortium	77	Available
Magistrates' Court of Victoria	112	Available
McAuley Community Services for Women	48	Available
Melbourne Specialist Relationship Counselling Clinic	11	Available
Mental Health Legal Centre	80	Available
Mental health service	82	Not published
Mental Health Victoria	101	Available
Monash Gender and Family Violence Prevention Centre	38	Available
Monash Health	114	Available
Municipal Association of Victoria	50	Available
No to Violence	33	Available
NorthWestern Mental Health	91	Available
Office of the Public Advocate	52	Available
Ovens Murray OD/MH/FV Steering Committee	18	Available
Peak body	12	Not published
Peninsula Health	60	Available
Professional representative body	117	Not published
Professional representative body	124	Not published
Project Respect	97	Available
Psychological/counselling service	17	Not published
Quantum Support Services	83	Available
Regional Integration Committee	35	Not published
Respect Victoria	78	Available
Royal Australian College of General Practitioners Victoria	43	Available

Royal Women's Hospital	76	Available
Seniors Rights Victoria	55	Available
South East Community Links	108	Available
Specialist family violence service	20	Not published
Specialist family violence service	28	Not published
Specialist family violence service	65	Not published
Specialist family violence service	70	Not published
Specialist family violence service	73	Not published
Specialist family violence service	88	Not published
Specialist family violence service	102	Not published
The Royal Australian and New Zealand College of Psychiatrists	89	Available
The Salvation Army	92	Available
The Sexual Assault & Family Violence Centre	87	Available
Uniting Vic.Tas	42	Available
Victoria Legal Aid, Federation of Community Legal Services and Women's Legal Service Victoria	66	Available
Victoria Police	79	Available
Victorian Aboriginal Child Care Agency	106	Available
Victorian Council of Social Service	44	Available
Victorian Multicultural Commission	116	Available
Victorian Trades Hall Council	53	Available
VincentCare Victoria	61	Available
Western Integrated Family Violence Committee	62	Available
WEstjustice Western Community Legal Centre	93	Available
Whittlesea Community Connections	40	Available
Women with Disabilities Victoria	125	Available
Women's Health West	25	Available
Y-Change Initiative Berry Street	26	Available
Youthlaw	27	Available

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Design by ACGD Creative.

*Printed by Finsbury Green.
Printed on Splengorgel — FSC Certified Paper.*

*ISBN 978-0-6483252-6-0 (Print)
ISBN 978-0-6483252-7-7 (PDF/online)*

May 2021

