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Gippsland Family Violence

Submission to the Strong Foundations: Building on Victoria's Work to End Family Violence

Promoting inclusive practices and affirming safe environments.



Prepared for the Gippsland Family Violence Alliance
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 www.gippslandfamilyviolencealliance.com.au



Gippsland Family Violence Alliance acknowledges the Gunai/Kurnai, Bunurong, Bidewell & Ngarigo/Monero people as the Traditional Owners and Custodians of the lands now also known as Gippsland. We pay our respects to elders past, present and visiting and acknowledge they hold the stories, traditions, spiritual connection and living cultures of this Country.

We recognise the Gunai/Kurnai, Bunurong, Bidewell & Ngarigo/Monero people's long and continued connection and protection of the beautiful coastline from the oceans through inland areas and to the rugged southern slopes of the mountain ranges. We recognise their continued connection to these lands and waters and acknowledge that they have never ceded sovereignty. Always Was Always Will Be, Aboriginal Land!



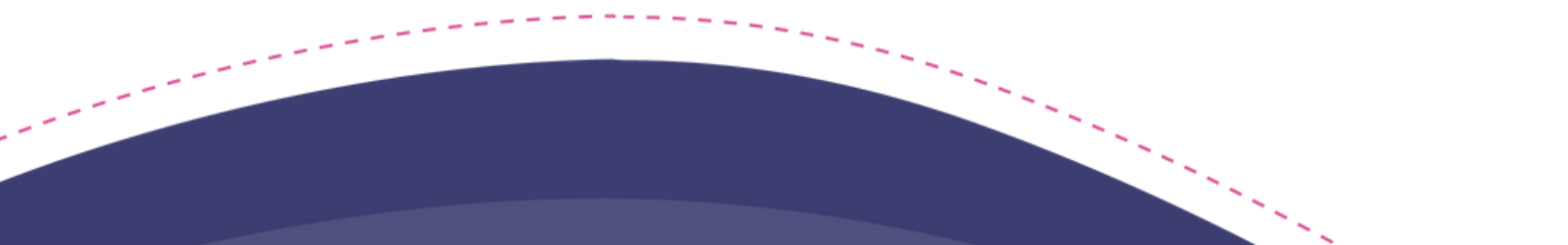
Gippsland Family Violence Alliance acknowledges that the systemic impacts of colonisation still exist today and that we are committed to respectful truth telling and working with our Aboriginal and Torres Strait Islander Communities to improve women's, children's and men's health, wellbeing and self-determination and to achieving reconciliation as a nation.

The Gippsland Family Violence Alliance would like to acknowledge the victims and survivors of family violence, whose tenacity, advocacy and courage have shaped the family violence service sector and provided us with the evidence base for our work. We would also like to acknowledge those who have lost their lives due to family violence and the families, friends and communities who have been impacted by these devastating crimes.

The Gippsland Family Violence Alliance would like to acknowledge our practitioners both current and those who have pioneered the sector who have worked with both victim/survivors of family violence and with people who use violence in the home. These practitioners have supported people in difficult periods of their lives and we wish to acknowledge that vicarious trauma has an impact not only on the workforce but on their family members. Without practitioners we wouldn't have a service system and we thank these workers every day.

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Preamble

The Gippsland Family Violence Alliance recognises the unprecedented contribution made by the Victorian Government to uplift the family violence and sexual assault sectors since the 2016 Royal Commission into Family Violence.

However, what we want to also draw attention to is if the commitment is to truly end family violence within a generation, as the The National Plan to End Violence against Women and Children 2022-2032 states, then we need to continue to put a heavy focus on investment and innovation on ending family violence in Victoria.

Since the Royal Commission, Victoria has experienced the COVID-19 Pandemic, a number of natural disasters, including bushfires and floods and the continuing affordable housing shortage, all of which impacts on the rates of family violence and limits the ability of those who experience violence to leave situations, and seek safety and security. We cannot pretend that the 227 Recommendations have solved the systemic issues of a family violence system which continue to experience ongoing and increasing demand. Nor can we pretend new and emerging issues will not occur on the quest to end family violence.

We thank the Victorian Government for the opportunity to contribute to the Strong Foundations: Building on Victoria's Work to End Family Violence and we have chosen to also publish our recommendations as a part of our ongoing advocacy for system's improvement's needed in Gippsland.



Drive Down Family and Sexual Violence

What steps would you recommend the Victorian Government take to build a community-wide approach to preventing family and sexual violence?

We welcome the positive strides in resourcing primary prevention in Victoria and acknowledge the fixed term funding increase to 30 June 2024 that Gippsland Women's Health Service has received to bolster workforce and community-based primary prevention initiatives. Notably, initiatives like capacity building, learning and development resources and collaborative campaigns, such as the Gippsland Orange Round and 16 Days of Activism, are crucial steps towards fostering a safer and more equitable society.

The Victorian Women's Health Services 2023 report, "Return on Equity: Health and Economic Dividends from Investing in Women's Health Services" authored by Impact Economics, underscores the economic benefits derived from investing in Women's Health Services including prevention initiatives. The report highlights that over an annual period, 13,626 people were reached because of the Women's Health Service-led initiatives and 275 Primary Prevention Partnerships relating to Gender Equality or Gendered Violence Prevention were maintained or expanded across the state. The report estimates that Victoria's lower rates of physical and/ or sexual violence compared to the national average mean that an estimated 22,000 fewer women experience violence each year, producing economic savings of \$600 million a year. The cost savings over a lifetime are almost \$8 billion (pg21).

In many cases, rural and regional areas face additional challenges related to limited access to resources and constraints related to capacity. The invaluable expertise and support provided by Women's Health Services becomes a critical enabler, fostering collaboration and engagement within these communities. Rural, regional, and remote Women's Health Services, exemplified by the commendable efforts of Gippsland Women's Health, play a pivotal role in supporting Local Government entities, community organizations, and grassroots groups. Gippsland Women's Health has been providing a Community of Practice for local media which aims to improve how women and family and gendered violence is depicted in media. Having access to local, place-based Women's Health Services is instrumental in achieving better outcomes for these communities. The regional expertise on women's intersectional experience offered by Women's Health services becomes a cornerstone for tailored interventions, addressing the unique challenges faced by rural, regional, and remote areas.



Recommendation: The current fixed term funding uplift to the Victorian Women's Health Services is made permanent and ongoing as per the recommended base funding outlined in the Return on Equity: Health and economic dividends from Investing in Women's Health Service Report (Impact Economics, 2023).

Drive Down Family and Sexual Violence

We strongly urge the Victorian Government to adopt a more robust and systemic approach to address the cultural and structural factors contributing to gender inequality, with a specific focus on preventing family violence. Embracing the Socio-ecological model of violence against women, as recommended by OurWatch, can provide a comprehensive framework for intervention at various levels.

1. **Societal Level:** Encourage programs which promote equal participation in parenting and domestic duties, challenging traditional gender roles.
2. **Systems and Institutional:** Advocate for policies and initiatives which address gender base discrimination within systems and institution.
3. **Organisational and Community:** Support initiatives within organisations and communities which foster a culture of respect, equality and accountability.
4. **Individual and Relationship approach:**

Empower individuals and couples with resources and support to build healthy relationships. We would like to recognise the Women in Manufacturing and Energy Grants and the Women in Construction Strategy which are commendable efforts in breaking down the stereotypes and fostering inclusivity for women in trades. While acknowledging these positive steps, we believe that further progress can be achieved through increased funding to the Women in Manufacturing and Energy Grants, particularly with dedicated funding for workplace learning and development and capacity building. By allocating specific funding for workplace capacity building, we can address and diminish the persistent stereotypes and bias which women in trades encounter.



Recommendation: The creation of a statewide funding approach to programs such as Baby Makes Three, Fair Play or similar programs to educate parents/parents to be on equal domestic labour.



Recommendation: State-funded Childcare Centres offer significantly expanded hours, including outside of typical 6am-6pm business hours, allowing for families, in particular women to participate in the workforces that are traditionally shift work. However, we do recommend that children are restricted to attending for a maximum of 12 hours.



Recommendation: Increase funding for the Women in Manufacturing and Energy Grants beyond pilot projects.

Drive Down Family and Sexual Violence

What steps would you recommend the Victorian government take to support Aboriginal-led prevention?

We welcome the work and resources provided to the Dhelk Dja Action groups across the state and we note the often-complex work that is undertaken by the Dhelk Dja Coordinators to engage with communities at a grass roots level. Gippsland has three Dhelk Dja action groups and the strength of these partnerships demonstrates the ongoing need for Dhelk Dja to remain resourced by the Victorian Government.



Recommendation: Funding and resourcing for Dhelk Dja Action Groups is permanent and ongoing.

Australia's many First Nation Cultures have developed programs to support community to re-connect with culture, land, and to build relationships which were lost due to colonisation. One exemplary example is Mibbinbah's Be the Best You Can Be Program, which builds the capacity of Aboriginal and Torres Strait Islander people to be strong in themselves, leaders for their community, and encourages ongoing brother and sister care at a grassroots level. This is one example of a culturally led prevention program which is supported with the option of several workshops, and Elder Meetings, which are tailored to specific needs of the community.

Our Gippsland ACCO's would like to engage in a similar piece of work however, they acknowledge that working with their communities to deliver a prevention-based program such as Be the Best You Can Be would take a sustained level of time and resourcing which is currently beyond their ability to deliver.

ACCO's currently have limited ability to participate in Primary Prevention Partnerships across the state due to their smaller operating budgets. This often means that ACCO's are unable to contribute to Primary Prevention pieces of work or miss out on the opportunity for resources or information from those partnerships.



Recommendation: Funding is provided to local ACCO's for dedicated primary prevention roles to support culturally led responses to prevention.

Drive Down Family and Sexual Violence

What steps would you recommend the Victorian government take to engage men and boys to change attitudes and behaviours that can lead to violence?

We wish to commend the Victorian Government for its forward-thinking approach in enacting the Gender Equality Act 2020. The introduction of Gender Equality Action Plans and Gender Impact Assessments for Defined Entities is a commendable stride towards building organisational capacity and embedding gender equality into communities and workplaces. However, it is crucial to highlight existing gaps that hinder the full alignment of public sector organisations with the provision of the Gender Equality Act 2020. There is a clear need for enhanced resourcing to support public sector entities in effectively implementing and adhering to the principles outlined in the Act.

We would welcome broadening of the legislation to ensure other non-public service entities such as manufacturing, construction and energy industries are in scope. Broader inclusion of industry in general will assist significantly in achieving comprehensive gender equality outcomes.



Recommendation: Increased resourcing to allow public organisations to align with the Gender Equality Act 2020.



Recommendation: Expand the Gender Equality Legislation to include all Victorian employers with over 100 staff

We advocate for the adoption of place-based approaches as a unique cornerstone of achieving long-term attitudinal change, recognising the distinct dynamics inherent in each community. To truly transform societal attitudes, collaboration is imperative, spanning across public, private, industry, sporting/recreation and community organisations. Place based approaches are instrumental in tailoring interventions to the specific needs and dynamics of diverse communities. This targeted strategy acknowledges the nuanced factors that contribute to attitudinal shifts and allows for more effective community driven initiatives. With the fixed term funding uplift over the past 2 years, the Women's Health Services have had the additional capacity and capability to better engage men and boys through their individualised prevention approaches in each of their areas.

Drive Down Family and Sexual Violence



Recommendation: The current fixed term funding uplift to the Women’s Health Services is made permanent and ongoing as per the recommended base funding outlined in the Return on Equity: Health and economic dividends from investing in Women’s Health Service Report (Impact Economics, 2023).

Evidence suggests that men are most motivated to change their behaviour by their children (Fathering Programs in the Context of Domestic and Family Violence, Australian Institute of Family Studies). However, currently the Caring Dad’s Program, the only Men’s Behaviour Change Program which is specifically aimed at fathering, is not a specifically funded function of the Victorian family violence service system. Keeping men engaged in a Caring Dad’s program after a Men’s Behaviour Change Program also keeps people who have used violence engaged in the service system for an additional 17 weeks after their 20 weeks Men’s Behaviour Change Program, which increases the likelihood of risk factors being identified and creates greater safety for the family.



Recommendation: Caring Dad programs receive permanent funding in every DFFH area of the state, as an additional service to the Men’s Behaviour Change programs funding.



Focus on children and young people

What steps would you recommend the Victorian Government take to engage children and young people to create generational change?

The invaluable work undertaken with the Respectful Relationships program in schools is to be applauded. The whole-school approach embedded in this initiative has been instrumental in fostering a culture of gender equality throughout the educational community. While celebrating these achievements, we wish to bring attention to a critical aspect associated with this. There is emerging evidence suggesting that students with disabilities or those who identify as differently abled may not be fully included in the resources and activities associated with the Respectful Relationships program. This potential oversight has implications for the equitable education of students with additional needs, both in specialist schools and public schools. In ensuring the principles of gender equality reach every corner of our educational institutions, it is imperative to address and rectify any limitations in the program's inclusivity. We believe additional resourcing of the Respectful Relationship program is needed to support this and advocate for a comprehensive examination of the Respectful Relationships program to guarantee that it caters to the diverse needs of all students.

Women's Health Service can support with applying an intersectional lens to the program, and to support the Respectful Relationship Program with resources through their primary prevention partnerships.



Recommendation: Fixed term funding uplift to the Women's Health Services is made permanent and ongoing as per the recommended base funding outlined in the Return on Equity: Health and economic dividends from Investing in Women's Health Service Report (Impact Economics, 2023).



Recommendation: Respectful Relationships be adequately resourced to participate in the regional primary prevention partnerships.

Focus on children and young people

The Gippsland Family Violence Regional Integration Committee has received some anecdotal advice from a Youth Advisory Council that some young people are using dating apps before they turn 18, which is a violation of the terms and conditions of the apps. However, even if they wait until they are 18 to access them, there is little education for young people about how to recognise the early signs of controlling behaviours, which often present on the apps as either 'love bombing', disrespectful behaviour, or asking for unequal relationships early on. Dating has fundamentally changed within a generation and there is little guidance for young people on how to navigate relationships where most connections they are making are the result of technology and are outside the community of their parents or extended family.

Providing education to parents on how to support their children as they enter their first relationships is essential as it builds supports around the young person which provides a protective factor in future relationships. We advocate for ongoing initiatives and resources which prioritises the relationship education for parents and young adults alike. There is also a place for education in the early years for parents around gender equality. Due to the subject matter being specific to the work of specialist family violence/child wellbeing workers they would be the ideas subject matter experts to deliver secondary prevention programs in schools and TAFE's around respectful dating. We also believe the Women's Health Services are best placed to work with Early Years around Gender Equality.



Recommendation: Specialist family violence agencies are funded to run programs in public schools and TAFE's on safe and respectful relationships and interactions.



Recommendation: Women's Health services are funded to run programs in public schools and early years on gender equality and parenting.

Focus on children and young people

What steps would you recommend the Victorian government take to provide support for children and young people where, when, and how they need it?

The Crime Statistics Agency indicated that 33,240 children were present at the time of a family violence Police call out. In Gippsland in the 2022–2023 period children were present in family violence incidents:

- East Gippsland 47.8% of police call outs included children as a witness or victim
- Wellington 47.6% of police call outs included children as a witness or victim
- Latrobe 43.7% of police call outs included children as a witness or victim
- Baw Baw 46.8% of police call outs included children as a witness or victim
- South Gippsland 48.8% of police call outs included children as a witness or victim
- Bass Coast 45.9% of police call outs included children as a witness or victim

However, our current service system offers counselling support for around 3000 children across the state each year, which is only 9% of those who witness an incident. In Gippsland it currently takes 4–8 weeks to see a family violence counsellor, as the waiting lists for this service are extensive. Family Violence counselling has had no significant funding uplift since the creation of the program, and we recommend an urgent review in line with changes in population and family violence incidents.



Recommendation: The Family Violence Counselling program across the state have its funding doubled in the 2024–25 budget, with a 20% increase each year after to facilitate recovery for more children and young people.

Currently there is no consistent, statewide approach or program available for [KG1] therapeutic education of young people who have experienced family violence. Young people who have experienced family violence are more likely to experience family violence as an adult or to use violence as an adult. It's currently reliant on a practitioner to undertake therapeutic education with a young person, and in many instances, practitioners may not have direct contact with young people.

This is supported by evidence that has come from the 'I believe you report' (Fitz-Gibbon, McGowan, Stewart 2023), which found that young people spoke of the need for responses to include an 'educative function that can disrupt cycles of violence and normalisation of abuse' (Fitz-Gibbon, McGowan, Stewart 2023: p6).

Focus on children and young people



Recommendation: Statewide funding of gender specific group programs which provide therapeutic supports for young people (14-21) who experience violence, which includes an evidenced based therapeutic - education component and individual case management as necessary.

What steps would you recommend the Victorian government take to support children and young people who use violence to heal and change their behaviour?

The Adolescent using violence in the home interventions programs are currently funded through to June 2025. We have reports that the program has greatly supported several families experiencing a high level of complexity throughout Gippsland. However, the period of intervention is too short to adequately support families who are experiencing the level of complexity we are currently seeing. Current engagement periods are between 13-26 weeks which is the same as adults, however young people need a unique approach and often require up to a 12-18 month period of support.

One example where the family has reported feeling supported because of a longer engagement was a Gippsland family that were supported for 10 months due to there being 6 children in the home and a high level of complexity across the family dynamic. At the beginning of engagement there was regular police attendance at the home, including events where the referred young person was using weapons and physical violence, high level of school refusal and challenging behaviours being reported by education providers regarding several of the children. After engagement with the adolescent using violence program there is now increased attendance at school for all children and there are no police calls to the home in reference to the referred young person. There has been increased engagement in the family and community in addition to no physical violence reported by Mum. The other children in the family have also benefited from the program with increased school attendance support for community engagement. The agency supported engagement to mental health support and counselling for Mum and one of the children has engaged with CYHMS for an acute presentation of poor mental health requiring an intervention.

The brokerage for the Adolescent Using Violence Program is limited to 'up to \$3000'. While this is sufficient in smaller families with limited needs, in large families with complex needs for intervention the amount may be insignificant.



Recommendation: Adjust the program guidelines to allow for increased engagement periods for young people.

Focus on children and young people



Recommendation: Allow for the brokerage use to increase up to \$6000 for complex needs or for larger families.

What steps would you recommend the Victorian Government take to provide all Victorians who experience family or sexual violence with the support they need when they need it?

Funding increases with the introduction of the Orange Doors is acknowledged, however, there are significant waiting lists throughout Victoria. These waiting lists are in-part caused by the inability of the broader service system such as case management and therapeutic supports to meet increased demand and to actively hold waiting lists.



Recommendation: Provide funding for Active Hold and Intake Practitioners to all therapeutic and case management services.



Recommendation: Review the funding for case management services and to ensure it's adequate to meet current demand.

The complexity of delivering services within a regional, but particularly rural/remote setting requires further consideration in the Orange Door funding model. This is apparent in the Outer Gippsland Orange Door which covers the only area classified as remote in the state. Clients within this area often don't have access to public transport, have limited access to internet and often don't have neighbours to assist or who can call Victoria Police when a family violence incident is suspected. These factors along with the unique demographics of the area mean we observe significant complexity and difficulties within the existing funding model to deliver service which meet the needs of community.



Recommendation: A review of the funding model in Outer Gippsland, to ensure it accounts for the unique factors of delivering service in a rural and remote location, including taking into consideration the large Gunai/Kurnai population to ensure service delivery can meet the expectations of community.

Strengthen support for victim survivors

In the Royal Commission to Family Violence children were to be considered as unique clients by the family violence service system, however there is evidence that while risk assessments may be performed on children and young people, often these children and young people are not sighted nor directly engaged with by family violence practitioners due to the time constraints of service delivery.

We do recognise that significant work is being undertaken to develop Children's Practice Guides to sit within the MARAM Framework.

We urge the Victorian Government to review the release of these practice guides and the expected workload of practitioners and to provide uplift funding to ensure all children and young people receive the service they deserve if they are to be considered to be autonomous clients who hold their own right to engagement with a practitioner, a case plan and risk assessment and where necessary therapeutic supports.



Recommendation: Review the funding model to ensure all practitioners have the time to engage directly with children, whether that be through their childcare or school or within the service.

Many community groups who have historically been marginalised are very reluctant to engage with the Orange Doors or the family violence system. This includes migrant and refugee communities, the LGBTQIA+ community, the disability community, and Aboriginal and Torres Strait Islander communities.

The Strengthening Communities Projects, which have been operating in several areas across the state, including Gippsland allowed a practitioner to undertake direct community engagement with the migrant and refugee communities and has built trust and understanding in the local services and Orange Doors. However, these projects only received short-term funding, when engagement with community needs to be ongoing to build a continued trust. This project is also limited to the migrant and refugee community, where there is evidence that we need support to build community engagement with other equally marginalised groups throughout our local communities.



Recommendation: Fund on-going four Community Builder Programs in each of the orange Door locations targeting:

- Migrant and Refugee communities
- LGBTQIA+ communities
- Disability community
- Aboriginal and Torres Strait Islander communities

We recommend that there are four separate roles within each location and to form a community engagement team. The objective of these roles would be to build trust of the services within their allocated community, but also building capacity within the sector to better work with their designated community, including providing secondary consultations, and resources for practitioners and community.

Strengthen support for victim survivors

The Gippsland Centre Against Sexual Assault works diligently to provide both counselling and the necessary Care Coordination that is required to support those who experience sexual assault and abuse.

The latest Crime Statistics indicate that sexual abuse is disclosed during a police call out in 2.4% of cases. The Australian Bureau of Statistics report that 92% of women who experience sexual assault do not report the incident to police, so we believe the numbers of sexual assaults in Gippsland are much higher than reported.

People who experience sexual assault also experience on-going trauma which within a person-centered model of care require longer periods of intervention. Current funding models do not take into consideration the individual mental health and well-being needs of clients and allocate money at arbitrary intervals instead of assessing the client holistically based on their needs.

The Centre's Against Sexual Assault across Victoria have not had their funding reviewed in a significant period, nor received any on-going uplift funding as populations have increased and incidents of assaults increased. As a result, waiting lists are increasing for clients, and agencies are experiencing difficulties in ensuring that they can meet increasing demands.



Recommendation: Family Safety Victoria works with Sexual Assault Victoria to review the funding model to ensure the financial viability of the CASA's to meet the increased demand.



Recommendation: Family Safety Victoria works with Sexual Assault Victoria to review the program guidelines for CASA's to allow for a client centred approach to engagement periods.

Strengthen support for victim survivors.

What steps would you recommend the Victorian government take to continue to shift the focus onto people who use violence?

With the shift to L17's being sent to the Orange Door, and those practitioners being the ones left to make early contact with people using violence, we have seen a decrease across the state of referrals to men's programs.

The uptake is as low as three referrals within 400 L17's in some DFFH areas. In the model of the Orange Door there was the assumption that people using violence had the same service delivery needs as those who experience violence or child wellbeing issues.

However, it appears that the model isn't addressing the needs of this cohort.

Aboriginal Community Controlled Organisations in particular have noted that the Orange Door model no longer allows them to do the community outreach that was performed pre-introduction of the model. Due to the inability to meet the community where they are at, it has resulted in men not engaging. The ability to go out and yarn with community has been lost in the model.



Recommendation: A review of the intake process for people using violence, specifically males using violence, including gathering an understanding of what will encourage them to engage in programs, with the aim of making changes to the intake system as needed.

Strengthen support for victim survivors.

What steps would you recommend the Victorian government take to support Aboriginal-led responses for Aboriginal victim survivors and people who use violence?

Gippsland, particularly the Local Government Area's of East Gippsland, Wellington and Latrobe have large First Nation populations which are overrepresented in the police call outs for family violence incidents. In the September 2022-2023 period:

-Out of all family violence incidents in East Gippsland Vic Pol attended, 23.54% were for Aboriginal and Torres Strait Islander residents.

-Out of all family violence incidents in Wellington Vic Pol attended, 10.49% were for Aboriginal and Torres Strait Islander residents.

-Out of all family violence Vic Pol attended, 11.07% were for Aboriginal and Torres Strait Islander residents.

Working with First Nation's populations requires a level of speciality and time, due to the overlay of health, housing, community relationships that required to be navigated and understood to address family violence risk and safety. Engagement periods within the guidelines are often too short which results in clients being moved between programs, just to ensure that the ACCO is able to engage with the client for the amount of time they need to feel supported. Currently levels of funding and EFT, are not sufficient for our programs that work with those who experience violence or those who use violence.



Recommendation: Review the period of engagement within the Guidelines which ACCO's operate under, including intake and case management.

Due to the shortages of funds and the prioritisation of service delivery, ACCO's are unable with their current resourcing to develop culturally led model of service delivery which truly addresses the nuanced needs of various First Nations Communities across the state. A 3-year project, in each community which works with the ACCO's and community themselves to develop a service delivery model which meets the cultural needs is needed.



Recommendation: Provide funding in each of the regions to develop a culturally led service delivery model and to work with the sector and community to implement the model.

Strengthen support for victim survivors.

In East Gippsland there is a significant shortage of culturally safe therapeutic counselling options for the First Nations Community. More needs to be done to provide upskilling opportunities to First Nations people to enter the therapeutic space and greater funding for ACCO's to be able to provide employment opportunities.



Recommendation: Review of the family violence counselling funding to provide additional funding to ACCO's.

Feedback that the Gippsland Family Violence Regional Integration Committee has received is that the Gippsland First Nations communities and ACCO's are feeling over consulted, and are contributing to statewide frameworks which do not produce local results. While they welcome the opportunity to provide feedback into initiatives that affect them, they feel that consultations are based more on what is within the budget allocation than genuine listening to Mob.



Recommendation: Review the consultation process and ensure that local approaches are being taken within statewide frameworks in recognition that one framework will never meet the needs of all communities.

Respond to change

What steps would you recommend the Victorian Government take to respond to cultural, social and technological shifts that impact family and sexual violence?

In the era of rapid technological advancement, where work, communication, and relationship building increasingly rely on technology, it becomes imperative to ensure that these shifts do not exacerbate existing cultural and social inequalities. Ideally, by building gender-equitable environments, we can mitigate the impact of these changes. One key aspect of this effort is the promotion of digital literacy, particularly in regions with lower literacy rates such as Gippsland. Bridging the digital literacy gap requires a greater investment in e-safety programs tailored to the unique needs of regional, rural, and remote communities. By investing in digital literacy initiatives, we not only empower individuals in these communities to navigate the digital landscape effectively but also ensure that the benefits of technological advancements are distributed equitably. This approach is vital in fostering inclusivity and preventing the exacerbation of existing disparities. Women's Health Services are well positioned to lead this work given their placed-based approach to gender equality outcomes.



Recommendation: Increase funding for Women's Health Services to lead e-safety gender equality and prevention of gendered violence work.

We recognise the dynamic shift in how communities interact with agencies and the evolving expectations placed on service providers. It's evident that many agencies are transitioning towards a hybrid approach to service delivery, allowing for practitioners to work online, from home or face-to-face with client, acknowledging the changing landscape.[KG1] While we appreciate that a hybrid approach may not be universally applicable to every program, we emphasise its significant benefits, particularly in regional, rural, and remote areas. The hybrid model introduces a level of flexibility for both the workforce and clients, fostering a more adaptable and responsive service environment. In regional communities, where unique challenges often exist, embracing a hybrid service delivery approach allows agencies to cater to the diverse needs of the population. This flexibility not only enhances the efficiency of service provision but also aligns with the evolving preferences and expectations of community members.



Recommendation: Ensure that agencies are supported to embed hybrid service delivery through appropriate technology, security, training, and expertise.

Respond to change

What steps would you recommend the Victorian Government take to respond to cultural, social and technological shifts that impact family and sexual violence?

Communities across Victoria still have limited understanding of what family violence constitutes in its various forms. Before the Royal Commission the Family Violence Regional Integration were funded to provide Recognising and Responding to Family Violence Training. This funding was repurposed to MARAM Collaborative Practice Training funding. There is evidence that there is still demand for a recognise and respond to family violence community session for groups such as Food Banks, Opp Shops, Church Groups, Council etc, and we encourage Family Safety Victoria to examine the training funding and model provided to the Family Violence Regional Integration Committee, to ensure that it is both sustainable and meets the needs of the partner agencies and community.



Recommendation: Review of the Training Model provided to the Family Violence Regional Integration Committee to ensure that it is fit-for-purpose.

We wish to draw attention to a critical gap in the family violence sector concerning the collation and analysis of data to identify emerging trends. While service users can present at the Orange Door or directly to services, there is currently no centralized mechanism to systematically collate this data, hindering the ability to highlight emerging patterns through risk assessments.

While Victorian Police Data can be desegregated for specific incidents, there is no parallel mechanism that consolidates all family violence service data. Despite recent improvements by the Crime Statistics Agency, significant data, particularly from the Orange Doors, is still unavailable. This data gap poses a challenge as the sector heavily relies on anecdotal evidence to identify emerging trends, potentially missing crucial insights.

Furthermore, it's essential to recognize that certain client groups, such as those working in the sex industry, may not have their trends accurately identified due to stigma and practitioners potentially overlooking emerging needs.

We propose nominating Family Violence Regional Integration Committees as local experts in their respective Local Government Areas in order to provide these committees access to de-identified client data. This would enable better positioning in terms of analyse of information and the ability to determine emerging trends within their communities at a place based level.

Respond to change



Recommendation: A review is undertaken of the current client record management systems, with the aim of designing a fit-for-purpose system that will be more relevant to how the agencies currently use the systems, and support client's within their legislative requirements.



Recommendation: Provide ongoing uplift money to allow each Family Violence Regional Integration Committee to hire a Data and Evaluation Coordinator and create a statewide data strategy for those workers to feed into for the purposes of systems integration and improvements.

Respond to change

What steps would you recommend the Victorian government take to respond to new forms of family and sexual violence?

Much of the technology we rely on to record client data when responding to family violence is quickly becoming out-of-date, compared to client record systems that are used in other parts of the system/world, such as Electronic Health Record Management systems used by the healthcare system, or the Te Au Reka digital case management system which is used by the Administration of Justice in New Zealand.

The Victorian family violence system is contingent on the sharing of information between agencies for the purposes of risk assessment and management. However, as it stands, this information sharing needs to be undertaken manually with practitioners emailing and calling agencies and when they use the same client management system such as the Specialist Homelessness Information Platform (SHIP). There is no ability to share information via the system from one agency to another, without a manual component. Many practitioners are currently using between 2-6 client record management systems within the one agency. This is not efficient and creates situations where information needs to be copied between systems, sometimes even within one agency.

As demand on our service system grows, reducing the administration burden on practitioners who need to re-record information multiple times in multiple systems will allow the system to more effectively support more clients.



Recommendation: A review is undertaken of the current client record management systems, with the purpose to design a fit-for-purpose system that will be more relevant to how the agencies currently use the systems, and support clients within their legislative requirements.

As technology quickly changes, we already have artificial intelligence (AI) programs being marketed at allied health professionals to assist with functions such as case noting. While these programs may assist a diligent practitioner, who checks over and rewords the notes after AI has written the case note, an inexperienced or less than diligent practitioner may easily find themselves recording inaccurate information. The information, policy advice and legislation need to be ahead of what is being marketed to the sector, which we acknowledge may be easier said than done. However, we also need a mechanism where new technology can be embraced to support better workflow and to help the sector remain current. This is not just true of the family violence sector, but of the broader community, health and education sectors.

Respond to change



Recommendation: A new department is formed inside the Centre for Workforce Excellence to provide and give advice, including policy direction on new technologies which can be used to support the workforce.

There is some evidence that where technology is being used with victim-survivors, there isn't enough support within the current service system to utilise the technology well. In a study from Monash University, it was found that many people who are trying to replace their documents because of family violence, experience barriers because they are required to provide an electronic signature, which their phone doesn't provide. There are also limitations to some technology, such as the Family Violence Invention online application system which only allowed applicants to complete the form in English, which created barriers for non-English speakers (Domingo-Cabarrias, Woodlock, Alexander, et al, 2023 pg 6).



Recommendation: Greater advice is sought from the Victim Survivor Advocacy Council and other similar groups before rolling out technology through services.

Respond to change

What steps would you recommend the Victorian government take to reduce and respond to the risk of family violence during times of crisis?

People experiencing family violence are regularly being placed in motels, which are places that are not fit for purpose, particularly for children. The private motel sector is problematic, and Gippsland's Motel Project identified the following challenges with motel usage:

Safety Issues for Victim-Survivors in Crisis Accommodation

- Issue 1: Limitations of the crisis accommodation model to provide a safe and appropriate environment for clients
- Issue 2: Racism and prejudice in the sector

Lack of options for Crisis Accommodation in peak periods

- Issue 3: Busy periods for Moteliers results in lack of crisis accommodation options, clients needing to move motels, or being ordered to vacate
- Issue 4: Time limitations and lack of funding for crisis accommodation increases the risk for clients
- Issue 5: Lack of resourcing and crisis accommodation options puts pressure on other aspects of the system

Inadequate resourcing for People Using Violence (PUVs)

- Issue 7: Lack of support services for People Using Violence
- Issue 8: Lack of support for clients with complex needs
- Issue 9: Agency and/or client reputation impacting crisis accommodation options

Information gaps between Agencies

- Issue 10: Lack of awareness of different cohorts accommodated
- Issue 11: Challenges with reporting and referrals between agencies
- Issue 12: Administration challenges between agencies
- Issue 13: Connection with state services can be challenging

Reliance on informal arrangements with Moteliers

- Issue 14: Reliance on informal relationships with Moteliers
- Issue 15: A need to streamline booking process for workforce
- Issue 16: Inconsistent approaches to how crisis accommodation damages are covered.

Motels are not the ideal environment and motels are private entities who are not incentivised to take our clients. Children are also placed at risk in motels by the other people using motels, motel staff not required to have Working with Children's Checks and by the inability of their parents to control the environment. As it stands, we have not seen an increase of available options for crisis accommodation, the sector has the same two options available that it did pre-Royal Commission, motels or refuge/core and cluster accommodation.

Respond to change



Recommendation: The Victorian Government create a phased plan to fully implement Recommendation 14 of the Royal Commission into Family Violence, which includes the complete phasing out of motel usage. This could include short term accommodation options such as head-leased or agency managed housing, that are complimented with the option of immediate therapeutic support for children through the current core-and-cluster crisis accommodation.



Recommendation: While motels are in use, each Orange Door needs a Coordinator position which can build relationships with motels, manage issues relating to accounts, address arising concerns between moteliers and practitioners/agencies, to source alternative accommodation partnerships with universities, disability housing providers and other similar arrangements.

One of the most significant and critical factors emerging from disaster research both in Australia and internationally is the increase in violence against women during and after climate change disasters including drought, bushfires and floods.

Compounding this is the economic dependence women often experience that increases barriers to disclosing family violence and seeking support during and after disasters.

Factors that contribute to violence against women are those issues that can weaken prosocial behaviour which in terms of climate change disasters includes stress, male-dominated settings such as emergency services and heavy alcohol consumption often seen during and after climate change emergencies.

In terms of climate change disasters, women are more likely to be injured due to long standing gender inequalities. Their ability to mobilise themselves and their children is compromised, their decision-making abilities are compromised, and they are less able to access relief and assistance including family violence response and health services.

Women's Health Services have been instrumental in assisting Local Government entities in rural and regional areas to apply a gender lens to place based prevention, planning and response and recovery.



Recommendation: Women's Health Services are funded to work with Local Government and Emergency Management Services across rural and regional areas to develop place-based prevention models that raise awareness and build the capacity of organisations, emergency response services and communities to prevent gendered and family violence.

Respond to change



Recommendation: Inclusion of the Principal Strategic Advisors for Family Violence in the State Health Emergency Arrangements and are consulted into policy.



Understand and demonstrate our impact

What steps would you recommend the Victorian Government take to strengthen how we measure impact?

We have 17 unique service systems across Victoria, and we need a framework to measure how they are all individually progressing, but also the ability to compare them to each other – controlled for factors such as population size. We acknowledge that the Crime Statistics Agency does hold some data, but there is some crucial information missing, including the Orange Door data, which could give us an indication of:

- How often early intervention is occurring
- The unmet need due to waiting list demands
- How many clients are disengaging before receiving a service
- The demographic data, which indicates who is and isn't accessing services
- Emerging trends in the types of violence that is occurring in our community

The Family Violence Regional Integration Committee's and Family Services Alliances currently only receive data through good-will to assist them with monitoring and evaluating the service system. While we understand the complexities with gathering the Orange Door data and the reluctance in sharing the data, there cannot be accountability within the system until the system is accountable to the outcomes it is producing, this includes highlighting area's which might be underfunded.



Recommendation: Family Violence Service System Data, including Orange Door Data is disseminated to either the Crime Statistics Agency, or if not appropriate for the public is provided to the Family Violence Regional Integration Committee's and Family Service Alliances by placing the conditions of accessing the data within the Guidelines of the Committees.



Recommendation: Family Violence Regional Integration Committee's are funded to feed into a statewide framework to measure the impact of the family violence reforms on each of the 17 respective service systems.

If we examine the Outcomes Framework for Family Violence, most of the indicators only measure surface level information and often sit with large departments. For example, measuring the impact of the Information Sharing Schemes using the number of CIP requests.

Understand and demonstrate our impact

This doesn't provide any real measure as to how the information sharing schemes are being used on a local level, nor how often MARAM risk assessments are being shared or used for client risk assessment management between agencies, which is what the MARAM is predicated upon.

We also note that there have been several attempts to count the family violence workforce, the Family Violence Workforce Census and then through the Family Violence and Sexual Assault Workforce Pulse Survey. However, there are issues with both attempts, including not getting a response rate greater than 35% on the Pulse Survey and what appears is several geographic area's going un-represented in the survey.

The Outcomes Framework and Workforce Survey's Data is never disseminated in a localised manner, so local Family Violence Regional Integration Committee's cannot determine the health of their local service systems. Which means agencies cannot work together to address localised issues. This creates a disincentive for agencies and practitioners to complete survey's as they become survey fatigued and cannot see the benefits of the surveys at a local level.

The Family Violence Regional Integration Committees can collect, measure and analyse this information, amount mirid of other information, and it's within their guidelines which have a strategic priority of: Strategic Priority 2: Supporting the implementation, monitoring, and evaluation of family violence reform initiatives to do so.

However, they are not adequately resourced to undertake the work. The FVRIC's are also well placed to undertake the work, given they work with the partnership of local agencies to address localised issues.



Recommendation: Family Violence Regional Integration Committee's are funded to feed into a statewide framework to measure the impact of the family violence reforms on each of the 17 respective service systems.

Understand and demonstrate our impact

What steps would you recommend the Victorian government take to increase opportunities for Victorians to help us improve the system?

We recognise the invaluable insights that people with lived experience bring to the improvement of services. Currently, individuals often provide feedback to specific agencies they engage with, yet challenges arise when they navigate multiple agencies, and care teams involve organisations engaged with other family members.

A critical gap exists in the ability of service users to provide feedback when the system, not just individual agencies, falls short or succeeds in delivering positive services. To address this, we propose the establishment of a mechanism allowing clients to provide feedback to the service system, facilitated through an independent body. We believe the Family Violence Regional Integration Committees are well-positioned to undertake this role. By securing funding to recruit an independent practitioner, these committees could gather feedback, with client consent, at various points throughout their service system engagement. This would provide valuable insights into both positive and negative experiences, aiding in the identification of systemic improvements and the emergence of trends. Regrettably, the current lack of funding prevents the Family Violence Regional Integration Committees from undertaking this critical work. We advocate for the allocation of resources to support these committees in their efforts to enhance the responsiveness and effectiveness of the service system.



Recommendation: Resource the Family Violence Regional Integration Committee's to be able to recruit a Service User Engagement Coordinator, to monitor and evaluate the experience of service users throughout their journey.

The system doesn't recognise the role of practitioners who support clients during their difficult periods. When seeking to make changes, government consults with industry, largely through industry leaders who are often torn between securing financial stability for their organisation and providing a service. Front line practitioners who are experiencing a high turnover rate in particular roles such as the Orange Door are experiencing the worker burnout and are implementing the layers of administration that is often required due to changes made by government. Many of our practitioners also enter the sector because of their lived experience. While there is a Victim-Survivor Advocacy Council, there is no Practitioner Advisory Council, and providing frontline practitioners with a voice may improve the outcomes of the workforce wellbeing initiatives, but also provide greater insight into the success likelihood of other client facing initiatives.

Understand and demonstrate our impact



Recommendations: Establish a Practitioner Advisory Council to provide insights into their experiences working in the sector. Criteria would need to include that member's substantial job is working with clients.

Currently agencies acknowledge that it is best practice to co-design initiatives and programs with people with lived expertise. However, there is a lack of specific resourcing provided to agencies to allow them to provide the necessary supports, time, and remuneration that a proper co-design process takes to succeed.



Recommendation: Agencies are specifically funded to support co-designed processes with people with lived expertise.

Other reflections

What has been the most impactful change the Victorian Government has made to date in the way it prevents and responds to family violence?

The introduction of the MARAM Framework has greatly increased the ability of the sector to have a shared language around both family violence, risk, risk management and safety. We hope to continue to see improvements to the Framework and that all the recommendations made by the 5-year review fully implemented.

The funding uplift provided to Women's Health Services over the past 18 months has significantly contributed to primary prevention efforts along with the commencement of impact measurement work. The increased funding in Gippsland has resulted in a significant increase in organisations partnering with Gippsland Women's Health in their efforts to prevent gendered violence and a major increase in organisations engaging in capacity building and learning and development opportunities.

Other reflections

Is there anything else you think the Victorian government needs to do for all Victorians to access the support they need and be safe, thriving and live free from family violence?

The family violence and primary prevention sector needs consistent, sustained, and ongoing funding throughout the entire system. This includes a budget allocation beyond the 10-year horizon, if we are to truly eliminate family violence within a generation. There is an evidence base that addressing the drivers of gendered violence early will prevent family violence and Women's Health Services are best placed to do this work. Short-term contract funding does not enable organisations to plan longer term efforts and results in practitioners exiting positions in March-April, due to agencies being unable to confirm their positions beyond June 30. It is typical for the agency to receive funding continuance; however they then go into a cycle of recruitment, which results in service delays and results in clients not receiving a continuance of service and targets not being met.



Recommendation: Ongoing funding throughout all programs, which increases with both population growth and family violence service demand.

The sector welcomes the ability for consultation into activities such as:

- Rolling Action Plans
- Guidelines
- Programs
- Among many other things.

We also welcome the ability to sit on advisory committee's such as the Family Violence Reform Advisory Group, the MARAMIS Expert Advisory Committee etc.

However, many of these meetings are not genuinely consultative in that ideas are first presented to them before projects or initiatives begin, instead the committees are often hearing about projects and initiatives when they are at their final stages or being presented as they are being implemented.

There is also limited transparency in how the decisions are made throughout the consultation process. Consulting firms provide reports, reviews and evaluations to Government, which agencies and individuals often take extensive time to contribute to, but these reports are most often not released to the public or only a 'response' is provided to the public. This means the consultation process in its current form comes at a significant cost to Government and has the appearance of lacking the authenticity required to effect comprehensive and sustainable change.

Other reflections

We support the continuation of the consultation process and advisory committees however, we believe there can be significant improvements in the transparency of the process, along with accountability measures to the sector and public.



Recommendation: Transparency in the consultation process to be improved, with a commitment that all reports, reviews and evaluations are publicly released with evidence of how feedback has been incorporated into the early stages of projects/initiatives and program design. There also needs to be accountability if evaluations are determining the same recommendations which were made in the early stages of projects.



