



**Royal Commission**  
into Family Violence

## **WITNESS STATEMENT OF DR PHILOMENA ANNE HORSLEY**

I, Philomena Anne Horsley, Research Fellow and Senior Trainer, of 215 Franklin Street, Melbourne, in the State of Victoria, say as follows:

1. I make this statement on the basis of my own knowledge, save where otherwise stated. Where I make statements based on information provided by others, I believe such information to be true.

### **Background and qualifications**

2. I hold a Doctor of Medical Anthropology and a Master of Medical Anthropology from the University of Melbourne. I also hold a Graduate Diploma in Education and a Diploma in Women's Studies from Deakin University, a Bachelor of Arts from Monash University, and a Graduate Certificate in Professional Writing and Editing from Deakin University.
3. I am currently an Honorary Senior Research Fellow & Sessional Lecturer in the School of Population and Global Health at the University of Melbourne. In this role I lecture on the subjects on Gender & Health, Sexual Violence and Sexuality & Health.
4. I have a long term interest in the areas of disability, family violence and the experience of exploitation of vulnerable populations through caregivers and staff. I am currently on the Advisory Committee for Women with Disability Victoria. This has a focus on women who experience violence both in the home and in organisations settings. I am also a member of the Human Research Ethics Committee for SCOPE (formerly, the Spastic Society of Victoria), and on the Board's Duty of Care Committee charged with looking at responses to sexual and physical assault of clients. Previously, I worked for seven years in the area of intellectual disability, with a specific focus on sexual rights and sexual violence.
5. In 2014 I was part of a research team that completed a two-year national research project focussing on the sexual assault of older women, in the broad context of family, aged care service, health service and stranger/public based sexual assault. The sexual assault of older women is an under-researched area. The research was not

specific to LGBTI individuals. As part of this project, the experiences of family members (including husbands, partners and sons), aged care staff and service providers were collected through survey and interview.

6. I am also currently a Research Fellow and Senior Trainer at Gay and Lesbian Health Victoria (**GLHV**) which sits within the Australian Research Centre in Sex, Health and Society (**ARCSHS**) based at La Trobe University.
7. Attached to this statement and marked “**PH1**” is a copy of my curriculum vitae.

### **ARCSHS and GLHV**

8. ARCSHS is a centre for social research into sexuality, health, and the social dimensions of human relationships. It sits within the College of Science, Health and Engineering at La Trobe University.
9. ARCSHS specialises in community-focused, multi-disciplinary research. It works collaboratively and in partnership with communities, community-based organisations, government and professionals, and with marginalised and difficult-to-reach communities to promote positive change in policy, practice and people’s lives.
10. GLHV (which sits within ARCSHS) is an independent, government-funded lesbian, gay, bisexual, transgender and intersex (**LGBTI**) health and wellbeing policy and resource unit. Its mission is ‘to enhance and promote the health and wellbeing of LGBTI Victorians and to improve the quality of health care they receive’.
11. GLHV’s key tasks include:
  - 11.1. providing training across health, education and community sectors on LGBTI health and wellbeing and appropriate service delivery;
  - 11.2. developing and implementing LGBTI-inclusive professional practice guidelines;
  - 11.3. establishing and managing a LGBTI health research and information clearinghouse;
  - 11.4. developing and distributing LGBTI health promotion resources in partnership with LGBTI and mainstream organisations; and

- 11.5. providing advice to Government on the planning, development and implementation of future LGBTI policies, programs and services.

## **Submissions**

12. In May 2015 I made a submission to the Royal Commission into Family Violence on behalf of GLHV (**Submission**). I refer to and adopt that Submission. Attached to this statement and marked “**PH2**” is a copy of the Submission.
13. In the Submission, at pages 16 to 21, we make five recommendations to address the needs and experiences of LGBTI people in relation to family violence. I set out a summary of those recommendations below.
  - 13.1. Inclusive definitions of family violence: in its own Issues Paper, the Royal Commission notes that a ‘comprehensive definition of family violence is important for both practical and symbolic purposes’ (p.3). This observation is particularly relevant and important in the case of LGBTI-related family violence which is not readily accommodated into the model that focuses on male violence against women and children. We recommend that a more inclusive definition of family violence, and of domestic violence, be adopted which would provide impetus for both greater practical recognition of the issue within the services system, and symbolically acknowledge the damage that such violence brings to the lives of LGBTI people.
  - 13.2. Integration of models of LGBTI inclusive practice: it is imperative that some systematic approach to LGBTI-inclusive practice is introduced into the Victorian family services sector to ensure that LGBTI people do not continue to remain invisible or an ‘optional extra’ for services to consider at some future date. This could include a recommendation or directive that services that are part of the family services system commence a whole of organisation approach to implementing LGBTI inclusive practice and the provision of additional resources to assist them to undertake this process.
  - 13.3. Training for staff in the family violence system: there are many problems with the current education and training provided to police, judges and prosecutors, services providers and employers in relation to family violence and LGBTI people. Higher-quality, more nuanced and a greater quantity of training is needed.

- 13.4. Prevention education for the LGBTI community: there is a need for more nuanced violence prevention education for the LGBTI community, particularly to address the stigma, discrimination, marginalisation and violence endemic to the LGBTI community. We recommend that community education initiatives need to be developed and resourced that specifically target the LGBTI community.
- 13.5. Funding for LGBTI-related research: LGBTI-related family violence remains poorly understood in Australia. Funded research, in collaboration with the LGBTI community, is urgently required to, among other things, develop a better understanding of the prevalence and nature of family violence experienced by LGBTI people, better understand the barriers that exist for LGBTI people within the current system and understand what models of services delivery are needed to address these issues.

A handwritten signature in black ink that reads "P. A. Horsley". The signature is written in a cursive style. Below the signature is a horizontal dotted line.

Dr Philomena Anne Horsley

Dated: 5 August 2015