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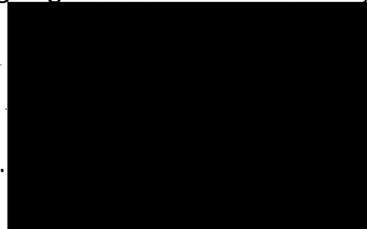
**IN THE MATTER OF THE ROYAL COMMISSION  
INTO FAMILY VIOLENCE**

**ATTACHMENT SW-14 TO STATEMENT OF SCOTT JAMES WIDMER**

Date of document: 21 July 2015  
Filed on behalf of: State of Victoria  
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This is the attachment marked '**SW-14**' produced and shown to **SCOTT JAMES WIDMER** at the time of signing his Statement on 21 July 2015.



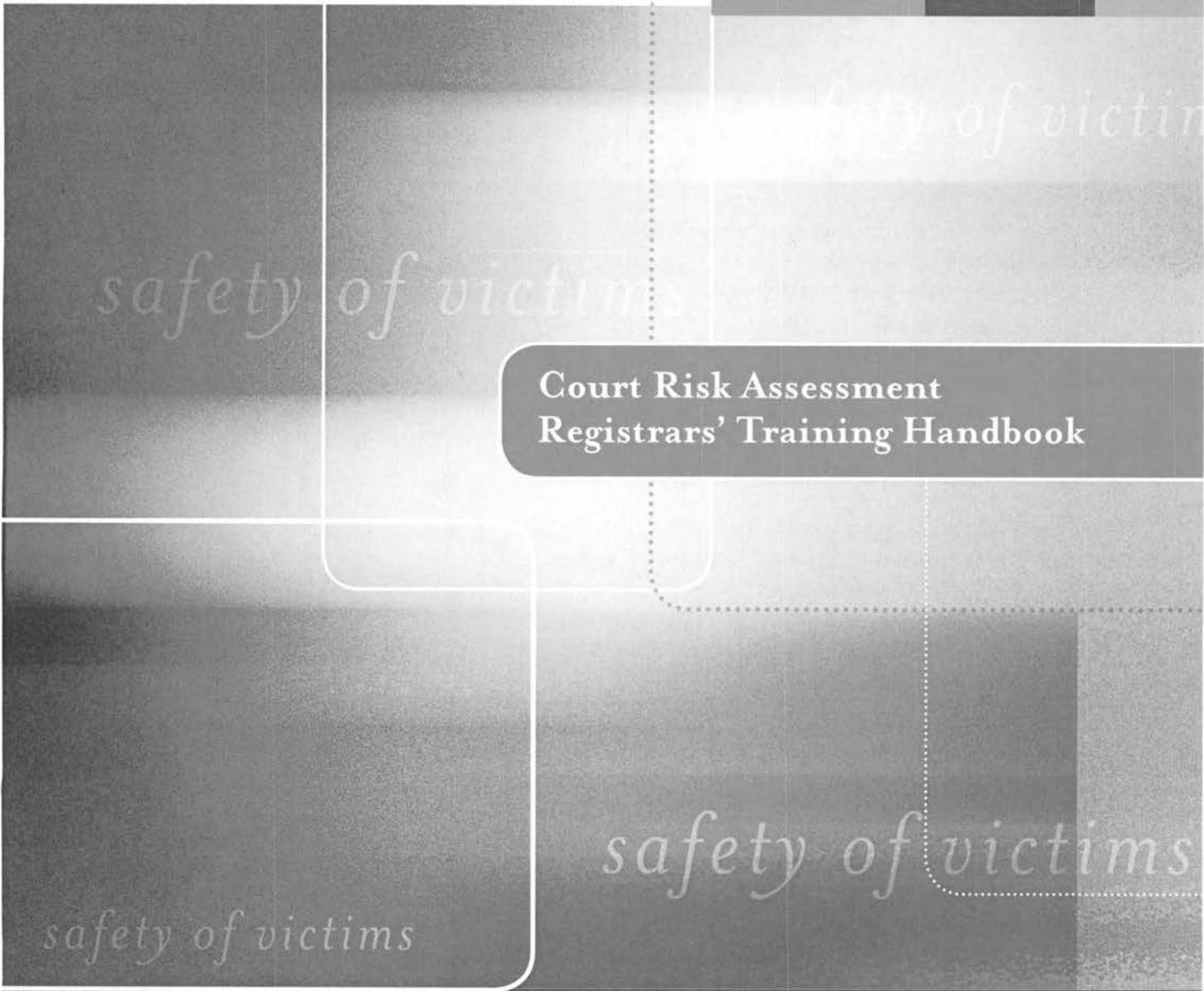
Before me: ...



**An Australian Legal Practitioner within  
the meaning of the Legal Profession Uniform Law (Victoria)**

# Family violence

## RISK ASSESSMENT AND RISK MANAGEMENT



### Court Risk Assessment Registrars' Training Handbook

An initiative of the Victorian Government Family Violence Reform program developed by  
 Domestic Violence Resource Centre (Victoria)  
 Swinburne University of Technology  
 No To Violence (NTV)

A Victorian Government initiative



Supported by the Magistrates' Court of Victoria

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# Introduction

The Victorian Government has committed funding to implement the Safer Families Training Program (including the Family Violence Risk Assessment and Risk Management Framework Training program) across the state for professionals responding to victims of family violence. The program is expected to provide a consistent approach to family violence risk assessment and contribute to an early, effective and professional response to family violence by skilled key professionals such as teachers, doctors, nurses, social workers, police and court workers. (A Fairer Victoria, 2007: Strategy 3.2)

This training forms part of a response deriving from State Government policy and reform strategies, including:

- A Fairer Victoria: Creating opportunity and addressing disadvantage
- A Fairer Victoria (2007)
- The Women's Safety Strategy - report of the State-wide Steering Committee to Reduce Family Violence:
- Reforming the Family Violence System in Victoria (2005)
- Family Violence Risk Assessment and Risk Management Framework (2007)

For further information about the Victorian Government Family Violence reform agenda please visit [www.familyviolence.vic.gov.au](http://www.familyviolence.vic.gov.au).

## Handbook design

Within each of the topic areas in this handbook one or more of the following pictures will be shown to indicate the nature of the learning strategy used.



**Activity**



**Background Information/Reading**



**Discussion**

## About this training

The aim of the training is to build capacity and consistency across the workforce including the Courts in risk assessment and risk management practice, within the objectives of the family violence reforms in Victoria.

Throughout the training the overall Framework will be referred to in keeping with the further development of an integrated family violence service system. However, the program will be tailored specifically to the roles and needs of Registrars and will build on the *Recognise and Respond to Family Violence* training Registrars have completed.

## A note about language



Both terms *family violence* and *domestic violence* may be used interchangeably during training as this reflects their different uses in various contexts, in particular, in Federal and State legislation and in the preferences of different social groups within the community.

There is acknowledgement that the terms victim and perpetrator are not used within the Court environment. The terms AFM/Applicant and Respondent will be incorporated whenever possible throughout the training. The overall Framework and background reading/information is where this most commonly takes place.

## Family Violence Risk Assessment and Risk Management Framework



The Family Violence Risk Assessment and Risk Management Framework has been developed to better identify and respond to family violence.

It is comprised of six components. These six components are designed to support the effective identification (risk assessment) and response (risk management) to victims of family violence. The Framework is important because it represents a standardised approach to assessing risk and a consistency of practice across all services. This in turn supports an integrated family violence service system.

This training will focus on the first three of these elements.

### The six elements of the Family Violence Common Risk Assessment and Risk Management Framework are:

1. a shared understanding of risk and family violence across all service providers
2. a standardised approach to assessing risk
3. appropriate referral pathways and information sharing
4. risk management strategies that include ongoing assessment and case management
5. consistent data collection and analysis to ensure the system is able to respond to changing priorities, and
6. quality assurance strategies and measures that underpin a philosophy of continuous improvement

## The Framework and how the Court will approach risk assessment

### Introduction to the Framework's approach to risk



The Risk Assessment and Risk Management Framework aims to develop common standards and practices among service providers. Adopting a consistent approach for assessing and managing family violence throughout the service system ensures the focus of the intervention and support remains on the safety of those experiencing violence. The three practice guides included in the framework represent the different levels of assessment required by various professionals.

#### Practice guide No. 1: *Identifying family violence*

To assist mainstream professionals who may encounter people they believe to be the victims of family violence. This guide provides a consistent set of possible indicators of family violence and clear advice on how to identify family violence, including a set of questions that should be asked. Mainstream professionals may include:

- maternal and child health nurses
- general practitioners
- teachers, and
- other health care providers

#### Practice guide No. 2: *Preliminary assessment*

To assist professionals who work with victims of family violence but for whom it is not their core business, including:

- police and court staff
- members of community legal centres
- members of community health centres, and
- disability and housing services workers

## Introduction

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### **Practice guide No. 3: *Comprehensive assessment***

To assist specialist family violence professionals working with women and children who are victims of family violence. Comprehensive assessment requires enhanced client engagement skills and detailed safety planning and case management responses. Such professionals will generally be qualified in:

- welfare
- social work
- psychology
- counselling or family therapy, or
- have significant experience in the family violence field including expertise in conducting complex assessments

### **The Court's approach to risk**

The Court will undertake risk assessment and risk management that will incorporate a combination of Practice guide No. 1: *Identifying family violence* and Practice guide No. 2: *Preliminary assessment*.

The Risk Assessment for Court Appearance has been developed to assist Registrars who work with victims of family violence making an application to the Court for an Intervention Order.

Where an Applicant Support Worker is available, they will be conducting the risk assessment which falls within Practice guide No. 3: *Comprehensive assessment*.

### **Learning outcomes**

- To have a common understanding of family violence as defined in the Risk Assessment and Risk Management Framework (July 2007)
- To understand the six elements of the Framework
- To understand your role in relation to assessment of victims at Court and responses to perpetrators in an integrated service system
- To know how to undertake a relevant level of risk assessment and risk management as described in the Framework Practice Guides
- To be provided with current information about the Integrated Family Violence referral pathways in your area
- To have an increased knowledge of diversity as a factor in risk assessment and risk management – particularly as this relates to children, Aboriginal families and communities, culturally and linguistically diverse (CALD) people and people with a disability

# Shared understanding of family violence

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## Family violence quiz



As Registrars who come into contact with people experiencing family violence daily, you will already have considerable knowledge in this area. Two of the following questions have clear answers and two are to encourage consideration of the issues that will be discussed throughout the training. This is indicative of the need to have a common understanding of the issues underpinning family violence.

In groups of three please discuss each of the questions below and note your responses for large group discussion.

1. **What is the greatest risk factor for experiencing family violence?**
  - Poverty
  - Race
  - Religion
  - Gender
  
2. **Number from 1-4 who you think family violence has the most impact on?**
  - Women
  - Children
  - Wider community
  - All of the above
  
3. **When is a woman who experiences violence in most danger of being killed?**
  - When the perpetrator is drinking
  - When she fights back
  - When the parties involved have separated
  - All of the above
  
4. **Victims of family violence enter the service system at various points. Number from 1-5 who you think victims would most likely turn to for support**
  - General practitioner
  - Legal and statutory services
  - Family violence services
  - Family/friends/neighbours
  - Mainstream services

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## Understanding family violence



An integrated service response depends on all agencies speaking a common language in terms of family violence and having a common understanding of the issues underpinning family violence.

This includes clarity about:

- What constitutes family violence - definitions and types of violence
- Common beliefs about family violence
- Prevalence of family violence
- The impact of family violence
- Diversity as a risk factor in family violence

In addition to this, an integrated service response depends on all agencies speaking a common language in terms of risk assessment and risk management.

This includes:

- Understanding what constitutes risk and what elements should be considered when assessing family violence
- The barriers to effective risk assessment and risk management, and
- The requirements of vulnerable groups.

## Definitions of family violence

### 1. Family Violence Protection Act 2008

For the purposes of this Act, family violence is –

- (a) behaviour by a person towards a family member of that person if that behaviour –
  - (i) is physically or sexually abusive; or
  - (ii) is emotionally or psychologically abusive; or
  - (iii) is economically abusive; or
  - (iv) is threatening; or
  - (v) is coercive; or
  - (vi) in any other way controls or dominates the family member and causes that family member to feel fear for the safety or wellbeing of that family member or another person; or
- (b) behaviour by a person that causes a child to hear or witness, or otherwise be exposed to the effects of, behaviour referred to in paragraph (a).

### 2. Partnerships against domestic violence definition (2002)

Domestic violence is a pattern of behaviour where one partner in an intimate relationship attempts by physical or psychological means to dominate and control the other. It is generally understood as gendered violence, and is an abuse of power within a relationship or after separation. In the large majority of cases those who use violence are male and those who experience violence are female. Children and young people are profoundly affected by family violence, both as witnesses and those who experience violence.

### 3. Family Violence Risk Assessment and Risk Management Framework (2007)

Family violence includes violent behaviour that is repeated, controlling, threatening and coercive and that occurs between people who have had, or are having, an intimate relationship. In most cases, the violent behaviour is part of a range of tactics used by men to exercise power and control over women and children and can be both criminal and non-criminal. Family violence therefore includes physical assaults and a range of tactics including intimidation, direct or indirect threats, sexual assault, emotional and psychological torment, economic control, property damage, social isolation and any other behaviour that causes a person to live in fear.

### 4. How diversity may effect the definition of family violence

The Aboriginal definition of family violence extends to include, physical, emotional, sexual, social, spiritual, cultural, psychological and economic abuse and can occur within families, intimate relationships, extended families, kinship networks and communities.

Other culturally and linguistically diverse communities within Australia may also have their own definition of and mechanisms for dealing with family violence. For example, some people may have originated from countries where family violence is accepted by authorities or not considered a crime.

People with a disability may also experience family violence, not only from family members, but from a paid or unpaid carer. This has now been recognised in the Family Violence Protection Bill under family-like relationships.

## *Shared understanding of family violence*

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### **Types of family violence**

<b>PHYSICAL</b>	Hitting; punching; dragging by hair; choking; burning; slapping; pinching; stabbing; pushing/shoving; restraining; tying up; gagging; physical intimidation; use of body language ie: standing over/invading personal space; threats with gun/other weapons; damage to possessions/property; denying medication or even medicating; putting something out of reach of a person with a disability.
<b>SOCIAL</b>	Prevention of studying or advancing self/skills; public humiliation; isolating by being obnoxious to friends & family driving them away; interfering with car to control movements; preventing contact with friends/families; prevent from studying; imprisoned at home; monitoring phone calls; denial of access to phone; threats to out a gay or lesbian; preventing a woman from attending medical appointments on her own.
<b>SEXUAL</b>	Coerced sexual activities ie: forced to perform acts which you find humiliating; forced to have sex with and or in front of others; forced to have sex with animals; rape with objects; forced to wear clothes which make you feel degraded; forced to be constantly sexually available no matter how tired sick or uninterested; waking up to find you are being raped; mutilation of genitals/breasts; sexual harassment; forced sterilisation, forced abortion or pregnancy.
<b>FINANCIAL</b>	Controlling all finances & denying access to money; coercion to sign contracts without being an equal partner or fully informed; gambling all the money & assets away leaving family destitute; overzealous scrutiny of expenditures; dragging out family court proceedings in order to force all funds to be spent in legal costs; forced to hand over pay; Incurring debts & then disappearing leaving the debts to be paid by the partner left behind.
<b>SPIRITUAL</b>	Undermining spiritual myths/practices; use of spiritual/religious rituals to abuse; denial of access to religious practices/networks; within some cults, use of brainwashing & controls over all aspects of life; forced to participate in religion you don't want to join; forced to participate in rituals.
<b>EMOTIONAL</b>	Yelling abuse; name calling; mind games; crazy making behaviour; undermining parenting skills; criticising beliefs; criticising abilities; put downs; emotional withdrawal at times of need; silent treatment; threats to kill / to harm/to suicide; harming/killing pets; use of anger to control; excessive controlling jealousy; prevent from studying; destroying books, notes, essays; stalking/harassment behaviour.
<b>SYSTEMIC</b>	Myths & stereotypes about people (ie: indigenous, gay & lesbian, people with disabilities) prevent people from obtaining their basic human rights. They have a direct effect on the development & also the absence of services, laws, public programs & social policies. Myths, stereotypes & social systems not only influence public opinion, but can also influence the action of individuals. There may be times when a person experiences individual & systemic abuse at the same time. What is especially harmful about systemic abuse is that people (ie: with disabilities) are often dependent on the people or systems that are abusing them.

## Common beliefs about family violence

Commonly held beliefs about domestic violence influence the way victims see themselves, and the responses of social institutions and services.

Many people believe that family violence is caused by the abuse of alcohol or drugs, unemployment, financial stress, coming from a dysfunctional/violent family background, anger issues, stress, mental illness, male hormones, female hormones, provocation by women, culture, class, and so on. Although these and other factors may play a role in a particular instance of family violence, none of them **cause** violence. Unfortunately, these beliefs remain widespread and lead to the following responses:

- a failure to name the violence as a crime, treating it instead as a health, communication or relationship problem
- providing the person who chooses to use violence with an invitation to excuse himself and to pursue a search for causes, triggers, precipitating events and circumstances
- ignoring power and control issues that are central to the violence
- ignoring the gendered dimension of family violence
- individualising the problem by ignoring the social/cultural/historical context in which violence towards women and children has been both openly and secretly excused
- a failure to locate responsibility with the person using violence, failure to acknowledge violent behaviour as a choice and failure to focus on the man stopping his violence
- a tendency to excuse the man and blame the woman.
- involving the woman in taking responsibility for the violence and often requiring her to change in order to avoid violence
- a lack of community or social responsibility for violence in the community
- avoiding a criminal response to criminal behaviour

## Prevalence of family violence

### Population surveys

The 2004 International Violence Against Women Survey included Australia<sup>1</sup>. It surveyed women between the ages of 18-69 about their experiences of physical and sexual violence. Some of the findings included:

- 34% of Australian women had experienced some form of violence by a current or previous partner
- Of 6,677 women surveyed 57% reported experiencing at least one incident of physical or sexual violence in their lifetime
- 29% of women reported they had experienced physical and/or sexual violence before the age of 16 years

In 2006 the Personal Safety Survey<sup>2</sup> interviewed 11,900 women and 4,600 men across Australia<sup>2</sup> about their experiences of violence and safety. It found that:

- Women were most likely to be physically assaulted by someone they know. Some 242,000 women had experienced physical assault in the previous 12 months, and for these women, the most recent incident of assault was perpetrated either by a current or previous partner (31%) or by a family member or friend (37%)
- In contrast, only 4.3% of men were assaulted by a current or previous female partner in the most recent incident
- Women were more likely to experience repeated incidents of violence from a current partner than were men - 46% of women experienced more than one incident; compared to 26% of men
- Only 10% of women who experienced current partner violence had a violence order issued. Of those women, 20% reported that the violence still occurred
- Reporting to police by women of violence by a previous male partner in the past 12 months had increased from 35% in 1996 to 61% in 2005

<sup>1</sup> Mouzos, J and Makkai, T (2004) Women's Experiences of Male Violence, Findings from the Australian Component of the International Violence Against Women Survey (IWAWS) Australian Institute of Criminology, Research & Public Policy Series no.56  
<sup>2</sup> Australian Bureau of Statistics (2006a) Personal Safety Survey Australia 2005 (Reissue), Catalogue no. 4906.0, ABS, Canberra.

## *Shared understanding of family violence*

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### **Police and Court statistics<sup>3</sup>**

- During 2007/2008, there were 31,676 family incident reports, 6.9% higher than in 2006/2007
- In 2003-04, Victoria Police recorded 27,672 incidents of family violence. This was a 41% increase in recorded incidents since 1999-00.<sup>4</sup>
- In Victoria for each of the years 1999 to 2004, approximately 80% of victims were women, and 20% were male.
- In 2003-04 there were 20,120 applications for Intervention Orders in Victorian Magistrates Courts. Of these applications, 80% involved women as the victims of domestic violence, and 80% involved men as alleged offenders.

### **Homicide Data<sup>5</sup>**

- During 2004-05, a total of 66 intimate partner homicides occurred. Women were most likely to be killed by an intimate partner (57%) or a family member (17%). Men were far more likely to kill (22%) or be killed (26%) by a person unknown to them.
- Three-quarters of intimate partner homicides involved a male killing his female partner.
- A history of domestic violence was recorded in 38 out of the 66 intimate partner homicides (58%) that occurred during 2004-05. This was an increase from 44 % recorded during 2003-04.

## **Impact of family violence**

### **On women**

Intimate partner violence is the leading contributor to death, disability and illness in Victorian women aged 15-44.<sup>6</sup>

Direct effects of family violence on women can include physical injuries, disability, miscarriage, sexually transmitted diseases and homicide. Less direct physical health outcomes include headaches, irritable bowel syndrome and self-harming behaviour such as substance abuse or unprotected sex. The mental health consequences of family violence can include depression, fear, anxiety, and low self esteem, while other consequences include social isolation, financial debt, loss of freedom, and degradation and loss of dignity.

Women who experience family violence may be diagnosed with Post-Traumatic Stress Disorder. Symptoms include nightmares, flashbacks, emotional detachment, insomnia, avoidance of reminders and extreme distress when exposed to the reminders (triggers), irritability, hypervigilance (watching for anger or signs of violence), memory loss, excessive startle response, clinical depression and anxiety, and loss of appetite.

Mothers who are traumatised may be unable to provide for their own or their children's needs.

### **On children**

Exposure to family violence has long-term psychological, emotional and behavioural consequences for children and young people including anger, trauma, sadness, shame, guilt, confusion, helplessness and despair. Children do not need to be physically present when violence occurs to suffer negative consequences. Living in an environment where violence is the norm is extremely damaging to them, and it makes little difference whether or not they see the violence.

Recent evidence indicates that ongoing exposure to traumatic events as a child, such as witnessing or being the victim of family violence, results in chronic overactivity of the body's stress response (the fight or flight response) and permanent changes to the brain's architecture, leading to behaviours such as hypervigilance and hyperactivity.

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<sup>3</sup> Victorian Community Council Against Violence (2006) Victorian Family Violence Database. Five Year Report 1999-2004, Vol. 2.

<sup>4</sup> Victoria Police. 2005. Victoria Police Crime Statistics 2003/04

<sup>5</sup> Mouzos, J and Houliaras, T. (2006) Homicide in Australia: 2004-05 National Homicide Monitoring Program (NHMP) Annual Report, No. 72 Australian Institute of Criminology, Canberra

<sup>6</sup> Victorian Health Promotion Foundation (2004) The Health Costs of Violence, Measuring the Burden of Disease Caused by Intimate Partner Violence, Victoria, Australia

The impact of cumulative harm on children is now well documented. The Department of Human Services, Children Youth and Families Division provides the following definition:

*Cumulative harm refers to an accumulation of risk factors. It recognises the existence of compounded experiences by way of multiple levels or 'layers' of neglect or maltreatment.*

*By the time abuse/neglect is identified as having caused cumulative harm, its unremitting daily impact on the child is wide ranging, profound and exponential, covering multiple dimensions of child and family life, causing damage to the foundations of a child's sense of safety, security, wellbeing and development, which can be irreversible.<sup>7</sup>*

### **Cost to the community**

A report by Access Economics estimated that the total cost of domestic violence in 2002-03 was \$1.8 billion. This estimate includes the costs of pain and suffering, health costs and long-term productivity costs<sup>8</sup>.

The Australian statistics in a World Health Organisation report indicate that in 2001 \$14.2 million was spent on refuge accommodation<sup>9</sup>.

Lost wages due to absenteeism from work (due to family violence) is estimated at \$546 million per year in Queensland.

Other community costs include expenditure on counselling, medical treatment, police services, housing, child protection and social services.

### **Diversity as a risk factor in family violence**

Aboriginal women, women from culturally and linguistically diverse (CALD) backgrounds and women with a disability are at the highest risk of experiencing family violence. In addition women from rural and remote communities also face considerable disadvantage.

Please refer to Framework pp. 26-29 for more detailed information.

### **The importance of Aboriginal cultural competence**

In Victoria, there has been an historic lack of culturally sensitive responses to the needs of Aboriginal families and their communities.

Agencies involved in responding to family violence for Aboriginal and Torres Strait Islander clients must develop a culturally appropriate service response, based on:

- an understanding of past government policies and practices in relation to Aboriginal people
- a demonstrable understanding and respect for Aboriginal culture
- a connectedness to Aboriginal organisations and service providers in the local area, and
- a partnership approach to risk assessment and risk management with Aboriginal organisations and agencies in the local area.

Aboriginal or Torres Strait Islander victims must be offered a clear choice about referral options that includes referral to an Aboriginal-specific family violence service wherever possible, unless the victim prefers to use a non-Aboriginal family violence service to ensure safety.

### **Building inclusive services**

Many factors affect an individual's experience of family violence and ability to access resources. All services need to be aware of these diverse factors and practice inclusive policies which make responding to each client's individual story and needs a priority. Simply referring the client on to a

7 Robyn Miller (2006). Cumulative harm: a conceptual overview. Department of Human Services p.8.

8 Access Economics (2004) The Cost of Domestic Violence to the Australian Economy, Office of the Status of Women, Commonwealth of Australia

9 World Health Organisation World report on violence and health, 2002.

## Shared understanding of family violence

specialised service is seldom the best practice. Wherever the client discloses, workers can build on the trust established by the disclosure and bring in extra resources as needed while remaining, in many cases, the primary contact for that client. The idea of an integrated service is that it shouldn't matter who the client approaches in the first instance. It may be the police, a community health centre, an individual doctor, a specialist family violence service, a service catering to clients with a disability or one of a multitude of other possibilities. The client should be treated with the same care and respect, and receive the same advice and support. This creates a genuine, practical safety net throughout the society.

Please note the information above is not all relevant, as Registrars are not required to provide case management services to applicants. The fundamental principles of access and equity however, apply to all workplaces.

### Common underpinning principles



Adopting a consistent approach for assessing and managing family violence throughout the service system ensures the focus of intervention and support remains on the safety of the victims.

It also ensures all professionals involved in identifying and responding to family violence are approaching their clients' safety and needs consistently, and that victims receive a response that is respectful, informed, holistic and understanding, regardless of their background or an organisation's culture.

The identification and adoption of common principles is essential for a consistent approach for assessing and managing family violence throughout the service system. The principles listed below underpin the Family Violence Risk Assessment and Risk Management Framework.

Common Underpinning Principles	
<b>FAMILY VIOLENCE is</b>	A fundamental violation of human rights
	A crime
	Unacceptable in any community or culture
<b>SAFETY for vulnerable women and children can be improved by</b>	Integrated service responses
	Change in community attitudes
	Redressing gender power imbalances
	Awareness of diversity
	Upholding children's rights
	Holding perpetrators accountable

(Framework, p19)

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**Points of discussion**

- Family violence is a human rights issue and thus excuses of religion, culture etc are not legitimate defences of the practice
- Family violence is against the law and the law is being more strongly and consistently enforced
- Family violence is a gendered crime; all the evidence disproves current social mythology that women are just as bad or that women falsely report family violence
- Family violence affects the whole community; just as in the past drink driving was widely accepted but now is not, attitudes towards family violence are changing due to enforcement of the law and broader community awareness of the issues

# Use of risk assessment tools to assess for evidence based–risk factors

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As Registrars involved in undertaking risk assessment it is important that you are aware of the nature of risk and the processes for assessing risk in family violence matters. In addition, it is essential to use an approach that is rights based and respectful of women.

## Overview of risk assessment in family violence



Risk assessment in family violence is a relatively new field. The increasing public awareness of family violence as a crime, together with policy and legislative changes that reflect this community attitude, has seen organizations providing family services increasingly expressing the need for standardized assessment processes and tools.

Risk assessment is widely used in the criminal justice and mental health systems, where the need to determine the likelihood of re-offence or future violence is great.

While there is no scientific or completely accurate method of assessing risk to victims of family violence, it is known that a structured professional judgement approach is more accurate than relying on clinical judgement alone. The emphasis is on developing evidence-based frameworks that promote consistency, yet are flexible enough to take account of case-specific situations and contexts.

The risk assessments outlined in all practice guides of the framework combine three elements to determine the level of risk.

The Court approach is as follows:

## Three essential elements for determining risk

In the risk assessment there are three elements for determining the level of risk for applicants of family violence. These are as follows:

1. the applicant's own assessment of their level of risk
2. evidence-based risk indicators, and
3. the Registrar's judgement

### Applicant's own assessment of level of risk

This is often the surest indicator, due to the applicant's intimate knowledge of the respondent, his emotional state and any changes in the situation or his behaviour which increase her danger. It is always important to determine her level of fear and her apprehensions of his future behaviour.

Questions such as,

- *How scared do you feel given the latest incident? and,*
- *What are you most fearful of right now? can assist both the Registrar and applicant in determining the immediate risk level.*

## Evidence-Based Risk Indicators

The aide memoire in the Framework (see below) explains each of the evidence based risk factors<sup>1</sup>, and is integral to the risk assessment process. The aim is to identify any risk the applicant may have at Court in making an application for an Intervention Order. These should be explored through the course of a conversation with the applicant. Risk indicators are not intended to be asked as part of a data collection process and should not be used as a checklist.

The asterisks highlight factors Registrars should take into particular consideration when assessing risk at Court. The presence of these risk factors can result in associated risks for the applicant at Court and are likely to be the most common risk factors that will be brought to a Registrar's attention.

**Aide memoire** (Framework pages 53-55)

RISK FACTOR	EXPLANATION
<b>VICTIM</b>	
<b>Pregnancy/new birth</b>	Family violence often commences or intensifies during pregnancy and is associated with increased rates of miscarriage, low birth weight, premature birth, foetal injury and foetal death. Family violence during pregnancy is regarded as a significant indicator of future harm to the woman and her child.
<b>* Depression/mental health issue</b>	Victims with a mental illness may be more vulnerable to family violence due to their inability to accurately assess their situation.
<b>* Drug and/or alcohol misuse/abuse</b>	Victims may use alcohol or other drugs to cope with the physical, emotional or psychological effects of family violence, which can lead to increased vulnerability.
<b>Has ever verbalised or had suicidal ideas or tried to commit suicide</b>	Suicidal thoughts or attempts indicate that the victim is extremely vulnerable and the situation has become critical.
<b>Isolation</b>	A victim is more vulnerable if they are isolated from family, friends and other social networks. Isolation also increases the likelihood of violence and is not simply geographical. Other examples of isolation include cultural factors, which may limit a new immigrant's access to social supports; disabilities, which may limit social interaction or support; and/or the perpetrator not allowing the victim to have social interaction.
<b>PERPETRATOR</b>	
<b>Use of weapon in most recent event</b>	Use of a weapon indicates a high level of risk because previous behaviour is a likely predictor of future behaviour. A weapon is defined as any tool used by the perpetrator which can injure, kill or destroy property, including guns.
<b>* Access to weapons</b>	Perpetrators who have access to weapons, particularly guns, are much more likely to seriously injure or kill a victim than others without access to weapons.

<sup>10</sup> A condensed version of the aide memoire will be used as part of the Risk Assessment for Court Appearance

## *Use of risk assessment tools to assess for evidence based–risk factors*

<b>RISK FACTOR</b>	<b>EXPLANATION</b>
<b>PERPETRATOR</b>	
<b>* Has ever harmed or threatened to harm victim</b>	Psychological and emotional abuse has been found to be a good predictor of continued abuse, including physical abuse. Previous physical assaults also predict future assaults.
<b>Has ever tried to choke the victim</b>	Strangulation or choking is a common method used by male perpetrators to kill female victims.
<b>* Has ever threatened to kill victim</b>	Evidence suggests that a perpetrator's threat to kill a victim is often genuine.
<b>* Has ever harmed or threatened to harm or kill children</b>	Evidence suggests that child abuse and family violence are likely to occur in the same family. Children witnessing, hearing or being subjected to violence will be adversely affected and may develop behavioural and emotional problems.
<b>Has ever harmed or threatened to harm or kill other family members</b>	Threats by the perpetrator to hurt or cause actual harm to family members can be a way of controlling the victim through fear.
<b>Has ever harmed or threatened to harm or kill pets or other animals</b>	A correlation between cruelty to animals and family violence is increasingly being recognised. Because there is a direct link between family violence and pets being abused or killed, abuse or threats of abuse against pets may be used by perpetrators to control family members.
<b>Has ever threatened or tried to commit suicide</b>	Threats or attempts to commit suicide have been found to be a risk factor for murder-suicide.
<b>* Stalking of victim</b>	Stalkers are more likely to be violent if they have had an intimate relationship with the victim. Stalking, when coupled with physical assault, is strongly connected to murder or attempted murder. Stalking behaviour and obsessive thinking are highly related behaviours.
<b>Sexual assault of victim</b>	Stalkers are more likely to be violent if they have had an intimate relationship with the victim. Stalking, when coupled with physical assault, is strongly connected to murder or attempted murder. Stalking behaviour and obsessive thinking are highly related behaviours.
<b>* Previous or current breach of Intervention Order</b>	Breaching Intervention Order conditions indicates the defendant is not willing to abide by the orders of a court. Such behaviour should be considered a serious indicator of increased risk of future violence.
<b>* Drug and/or alcohol misuse/abuse</b>	Serious problems with illicit drug, alcohol or prescription drugs and inhalants lead to impairment in social functioning and create a risk of family violence. This includes temporary drug-induced psychosis.

RISK FACTOR	EXPLANATION
<b>continued...PERPETRATOR</b>	
<b>Controlling behaviours</b>	The perpetrator can exercise complete control over the victim's activities by, for example, telling the victim who they can be friends with, controlling how much money the victim can access, and determining when the victim can see friends and family and when the victim can use the car. Men who think they 'should be in charge' are more likely to use various forms of violence against their partner.
<b>Unemployed</b>	Unemployment is associated with an increased risk of lethal assault, and a sudden change in employment status - such as being terminated and/or retrenched - may be associated with increased risk.
<b>* Depression/mental health issue</b>	Murder-suicide outcomes in family violence have been associated with perpetrators who have mental health problems, particularly depression.
<b>* History of violent behaviour</b>	Perpetrators with a history of violence are more likely to use violence against family members. This can occur even if the violence has not previously been directed toward family members. Other victims may have included strangers, acquaintances and/or police officers. The nature of the violence may include credible threats or use of weapons, and attempted or actual assaults. Violent men generally engage in more frequent and more severe family violence than perpetrators who do not have a violent past.
<b>RELATIONSHIP</b>	
<b>* Separation</b>	For women who are experiencing family violence, the high risk periods include immediately prior to taking action, and during the initial stages of or immediately after separation. Victims who stay with the perpetrator because they are afraid to leave often accurately anticipate that leaving would increase the risk of lethal assault. The data on 'time-since separation' suggests that women are particularly at risk within the first two months.
<b>* Escalation - increase in severity and/or frequency of violence</b>	Violence occurring more often or becoming worse has been found to be associated with lethal outcomes for victims.
<b>Financial difficulties</b>	Low income (less than that required to provide for basic needs) and financial stress including a gambling addiction are risk factors for family violence.

## *Use of risk assessment tools to assess for evidence based–risk factors*

### **Registrar’s judgement**

Family violence incidents may present with great complexity and/or contradictory elements. A Registrar’s experience, skill and knowledge is invaluable in analysing a particular situation of risk and determining the significance of the many factors present.

Registrars need to remember that while they can never completely guarantee an applicant’s safety, they can greatly increase the probability of safer outcomes. The Registrar should use their skills to empower the applicant to make decisions which minimise her level of risk by providing information and appropriate referrals.

There will be occasions when a Registrar’s judgement leads them to question a woman’s decision to remain in a situation in which the Registrar judges her to be in grave danger. The Court will need to be mindful to provide support for Registrars when they experience such dilemmas by discussing the Registrar’s concerns where they arise.

(Framework, p 49)

### **The risk assessment approach**

Any person making an assessment must do so using an approach that is sensitive, collaborative, respectful, inclusive of diversity, strengths-based<sup>11</sup> and rights focused. The assessment must be as comprehensive as possible, even when there is limited time or privacy, and any action taken must err on the side of caution to ensure the safety of the applicant and child.

As a priority, Registrars conducting the risk assessment must ensure that the applicant is safe and able to communicate comfortably. For applicants who may require language support and who consent every effort must be made in engaging suitable interpreters. The telephone interpreter service can be used when an interpreter is not available in person.

Assessments conducted in crisis situations or where ideal conditions are not available should still aim to gather the information needed to make a thorough assessment. In other words, the assessment must still be based on the Registrar’s judgement, having taken into account the applicant’s view of their risk, and the risk factors in the aide memoire.<sup>12</sup>

The approach of Registrars to working with applicants seeking orders due to family violence needs to be informed by:

- an understanding of their experience of the violence
- their relationship with the respondent
- other significant family relationships and,
- the impact of the violence on daily functioning

At the time of assessment and from the moment of engagement, the applicant will be making their own assessment about how much information to disclose to the Registrar.

### **Rights based approach to working with those who experience family violence**

A rights based approach is where applicants are actively encouraged to identify the assistance they need to facilitate their access and engagement. By providing information to further an applicant’s understanding of rights and available options, a registrar enhances the ability to make informed decisions.

The following points outline what women expect when approaching a family violence service provider.

- Don’t judge or criticise
- Take her fears seriously

<sup>11</sup> One of the best current descriptions of the strengths-based practice approach can be found in the article *Noticing Women’s Agency*, by Tracy Castelino and Andrew Compton. They challenge workers to reflect on their own beliefs, such as *women need education and then they will leave violent men*. Relationships are complex, unique and capable of change. Workers can learn to recognize the many ways, often small but effective, in which women act to protect themselves and their children and to maintain their own dignity and self respect in very difficult circumstances. By identifying and appreciating these acts of resistance, the worker can build on the woman’s strengths and work with her to increase her agency

<sup>12</sup> See Risk Assessment for Court Appearance

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- Safety is the top priority
  - A victim is never responsible for the violence
  - Each woman's experience of family violence is unique.
  - Be clear about confidentiality and its limits.
  - Be aware of the barriers that limit her options
  - Provide accurate information about resources, legal options and referral to appropriate support services

### **Requirements of the risk assessment**



Undertaking a risk assessment requires that you use the three elements to determine the level of risk and based on this information, develop safety strategies at Court with the applicant, and follow up with appropriate referrals and documentation.

The assessment must be as comprehensive as possible, even when there is limited time or privacy, and any action taken must err on the side of caution to ensure the safety of the applicant and any children involved

When undertaking the risk assessment you are required to:

1. articulate the applicant's view of the risk the respondent holds for them or their children at Court
2. identify the presence of risk indicators through a conversational approach (use of aide memoire)
3. establish whether risk is present at Court and identify actions required (for example, arrange for security measures to be in place at the Court)
4. provide details of family violence service providers that can assist with appropriate safety planning, accommodation and support
5. provide contact details of the Family Violence Liaison Officer at the police station closest to where the applicant lives in order for the applicant to report any alleged offences.
6. identify any protective factors that may exist (for example, an Intervention Order exists, respondent incarcerated, or applicant currently in a refuge)
7. record the risk assessment and note any actions the Registrar will be required to take to ensure an applicant's safety at Court.
8. obtain written consent from the applicant for the risk assessment to be passed on as part of any referral to an external family violence service provider, and
9. consider the safety and needs of any children or other family members affected by the violence who will be at Court.

## *Use of risk assessment tools to assess for evidence based risk factors*

### **Engaging victims of family violence and conducting the risk assessment conversation**



The risk assessment conversation should be introduced with an explanation about the purpose of the assessment, the possible outcomes of the assessment, and any actions that may be taken after the assessment, for example:

*What we will do now is go through the application you have just filled out. We will do this to ensure I understand what has been happening for you and so I prepare an accurate complaint. I will also be determining whether there are going to be any risks for you while you are at Court both today and when the application comes before the Court again. I will be assessing these risks by noting what you have filled out on the form along with anything else you tell me now. If it is evident there will be some risk for you at Court, we will discuss the best approach to keep you safe while you are here. This may mean arranging for a private waiting room for you or even to have security provide a presence in Court. Does this all make sense? Are you okay with starting?*

The Registrar making the assessment and the applicant must work together to determine the level of risk and safety. The purpose of the assessment process is to determine risk and safety for the applicant by considering a range of victim and perpetrator characteristics that affect the likelihood and severity of future violence.

#### **Including the 3 elements**

Assessing risk in family violence is based on effective communication between the applicant and the Registrar making the assessment, and it must include:

- the applicant's own assessment of their level of risk
- evidence-based risk indicators, and
- the Registrar's judgement

#### **Telling the story**

The initial objective is to encourage applicants to tell their story and define the problem in their own words.

Broad trigger questions can be used to begin the conversation, for example:

- *Can you tell me what has brought you to Court today?*
- *Can you tell me what has been happening for you lately?*

More specific questions can be used once the applicant has had the opportunity to respond to these broad questions. Registrars could ask more specific questions to determine the severity and frequency of the violence such as:

- *How long has this been going on?*
- *Could you tell me more about the last time you were hurt by him?*

#### **Considering children**

It is imperative for both the Registrar and the non-offending parent to understand the impact the violence is having on any children in the family. Asking women to consider whether they believe the children are safe (both physically and emotionally) in the family home is a good place to start.

**Considering children is an extremely important part of the interview so the issue of whether they should be included on the application is discussed with the applicant.**

It is appropriate for Registrars to refer to the respondent and children by name when asking questions about them, and to ask the questions in a natural manner. For example:

- *How do you think (the names of the children) are coping with things at home?*
- *Where are the children when the violence occurs?*
- *Has the child heard or witnessed the violence?*

### Case Study 1

Emma is a 28 year old woman with a physical disability, she arrives at Court in a wheelchair.

Emma is married to the respondent who is a 41 year old man.

Emma is 8 months pregnant with her second child. Her son is 6 years old.

Last night Emma was assaulted by her husband and sustained lacerations to her head and arm.

Emma was taken to hospital by her parents where she received stitches. Emma is now staying with her parents and her son is at school.



### Introducing the Roleplays

This roleplay is based on the case study of Emma.

Three people will be required for the roleplay who will choose the role of:

1. Registrar
2. Applicant
3. Observer

### Roleplay One: Using communication skills to engage with women, to identify family violence and begin assessing for risk

This roleplay has been designed to provide you with the opportunity to practise interviewing skills and to begin to undertake the risk assessment.

The purpose of this roleplay is:

- to practise skills in engaging with applicants and introducing the idea of the assessment
- to practise good communication skills
- to practise using trigger questions
- to observe others' use of the above
- to provide feedback to other participants

### Instructions for the roleplay

As the **Registrar** you will:

- introduce the idea of the assessment
- establish rapport with the applicant through use of active listening skills
- use trigger questions and a sound practice approach to elicit information from the applicant

As the **applicant** you will take into account the information provided in the case study

As the **observer** you will use the Observer's Guide/Checklist (following) to make comments on the role play.

## *Use of risk assessment tools to assess for evidence based risk factors*

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**Time:**

The roleplay should take 10 minutes followed by small group feedback and discussion.

**Feedback:**

Both the applicant and the observer should comment on their experience of the Registrars skill in creating a comfortable context, providing support and clear information about the Court process. The Registrar's experience of the process is also valuable feedback. Feedback should be specific and constructive.

Please note: It is not important to stick exactly to the details of the scenario. Your focus should be on the elements of good practice and the requirements of the Court's approach to risk assessment as identified earlier.

**Observer's Guide/Checklist**

Read through the Observer's Guide/Checklist which follows

Please note: it is a guide to note observations and should be used in a positive way when providing feedback

**Brief feedback session and discussion with large group**

Consider the following when participating in the roleplay;

- What's new in this way of working, if anything, compared to what you are currently doing in your work?
- What stood out for you?

.....

### Observer Checklist for Roleplay

Name of Roleplay Observer: \_\_\_\_\_

Name of Roleplay "Registrar": \_\_\_\_\_

Please Tick

Roleplay 1: **Identifying Family Violence and Asking Trigger Questions**

Roleplay 2: **Using the Aide Memoire and Assessing Level of Risk**

Skill	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> or NA	Comments
Active listening skills to encourage the applicant to tell her story <ul style="list-style-type: none"> <li>• eye contact</li> <li>• non-judgemental responses</li> <li>• no interrupting</li> <li>• open body language</li> <li>• empathic responses</li> <li>• reframing</li> <li>• reflecting back what was said</li> </ul>		
Created a comfortable and safe environment for the applicant		
Explained purpose of assessment, possible outcomes and actions that may need to be taken after the assessment		
Asked broad trigger questions to establish rapport and identify family violence indicators not present in application  Asked more specific questions to ascertain key information that may support her application  Questions asked in a conversational manner (not tick-the-box)		
Clear about confidentiality and its limits		
Thorough - obtained required information		
Identified major risk factors		
Included questions about any children affected by the violence		
Identified external resources available to her		
Explained options clearly		
Gained her consent for further action		
Observer's Notes		

## *Use of risk assessment tools to assess for evidence based risk factors*

### **Risk assessment for Court appearance: use of aide memoire and judgement**



Please read through the following information on using the aide memoire and the exercising of judgement to assess risk to the applicant. This will prepare you to undertake the second roleplay.

#### **Aide memoire**

The aim of the aide memoire is to help Registrars collect relevant information through interview, including established risk factors that should be explored to ensure that the risk assessment is based on as much information as possible.

The aide memoire should be used within a conversational dialogue, not as a tick-the-box assessment tool. The questions should not be used to collect data. Instead, they should be used as a 'memory jogger' to prompt the Registrar about information that needs to be collected, and to 'flag' information that should be followed up at a later stage if appropriate.

Judgement is required to ensure only indicators that are current and relevant to the circumstances are used to determine whether risk is present.

#### **Practice issues when using the aide memoire**

The Registrar must engage the applicant in a conversation that will explore the presence of risk factors and the applicant's own sense of their risk. Questioning and communication must demonstrate sensitivity, respect, and understanding of the applicant's experience, a rights-based approach, transparency and clarity, and active listening.

The initial aim of the assessment is to encourage the applicant to tell their story and define the problem and explain their situation in their own words.

Once the applicant has had the opportunity to respond to initial questions early in the assessment, subsequent questions can be more specific, to determine severity/frequency, for example:

- *Could you tell me more about the last time he hurt you?*
- *What is it exactly that he does that hurts/scares/controls you?*
- *How long has this been going on?*

#### **Applicant's own level of fear**

The applicant's own level of fear and views about the likelihood of future violence is a critical determinant of the level of risk experienced by the individual.

The following questions allow the Registrar to explore the applicant's view about their level of risk. Although this is covered in the Application for an Intervention Order you may require further information to gain further clarity.

- *How scared do you feel given what has just happened/the latest incident?*
- *Do you think the violence will continue and why?*
- *Is the violence getting worse? In what way?*

Scaled questions may also be a useful way of determining fear levels; for example, the question could be asked, On a scale of 1 to 10, with 1 being 'not scared' and 10 being 'extremely scared', where would you put yourself?

Scaled questions are also effective for use with children.

Observation of the applicant will also provide information about their level of fear. Signs of fear, anxiety, anger or terror should be considered as should signs of the applicant minimizing the situation or seeming vague or quiet.

### Protective factors

It is important to determine whether protective factors are present that may serve to mitigate the risk. Protective factors may include, but are not be limited to:

- an applicant's decision to move away from the respondent - this factor can, however, significantly increase the level of risk and must be carefully examined because it is truly protective only if there is no chance of the perpetrator locating the victim
- the respondent being incarcerated or otherwise prevented from approaching the applicant.

Other protective factors to consider may include the applicant being employed (and therefore being less isolated), having a well developed social network and having access to resources such as money, transport, a place to stay and advocacy services.

While the presence of protective factors should be taken into account in making the risk assessment, caution must be taken not to place too much weight on them. The applicant's own view of whether the factor can protect them is of vital importance.

### Registrar's judgement

Having collected as much information as possible about the applicant and their situation, the Registrar needs to use judgement to determine:

- if risk is present [yes or no]
- if action is required [yes or no]

The Risk Assessment for Court Appearance addresses:

- the applicant's own assessment of safety at Court
- risk level for the applicant on subsequent return date at Court
- the actions (if any) the Registrar has undertaken to ensure the safety of the applicant at Court.

Refer to pp. 12-13 of the Application for an Intervention Order

### Roleplay Two: Using the aide memoire and judgement in making an assessment



Please read the following case study and its purpose. It has been designed to provide you with the opportunity to practice using the aide memoire and become familiar with making a judgement in terms of risk assessment.

#### Introducing the Roleplay

This roleplay is based on the 'Emma' case study above. Three people will be required for the roleplay. Participants are to choose the role of:

1. Registrar
2. Applicant
3. Observer

As the **Registrar** you will:

- familiarise yourself with the use of the aide memoire
- establish rapport with the applicant through use of a conversational approach rather than a tick-the-box approach
- utilize all information gathered to make a professional judgement about risk

## *Use of risk assessment tools to assess for evidence based risk factors*

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As the **applicant** you will take into account the information provided in the case study

As the **observer** you will use the Observer's Guide/Checklist to make comments on the roleplay.

**Time:**

Roleplay should take 10 minutes, followed by small group feedback and discussion.

**Feedback:**

Both the applicant and the observer should comment on their experience of the Registrar's skill in creating a comfortable context, providing support and clear information about the Court process. The Registrar's experience of the process is also valuable feedback. Feedback should be specific and constructive.

Please note: it is not important to stick exactly to the details of the scenario. Your focus should be on the elements of good practice and the requirements of the Court's approach to risk assessment, as identified earlier.

The instructions are the same as those for the first roleplay. Please remember to swap roles in this activity ensuring that you have one Registrar, one person playing the applicant and one observer.

# Safety at Court

## Implementing safety strategies at Court



Implementing safety strategies at Court is a key component of managing risk. As with the identification of risk factors, this activity must be undertaken in collaboration with the applicant. There are numerous options that can be implemented to maximize an applicant's safety at Court.

### If risk is present, action is always required, and may include:

- security officers alerted of possible risk
- referral made to applicant support worker where available
- arrangements made for private waiting room/area where available
- remote witness facility made available
- arrangements made for court network to provide support at court
- unassisted referrals made to appropriate external services such as police, legal practitioner, domestic violence service, Salvation Army officer, or any other service providers deemed appropriate. (App 3, p.14)
- access to financial assistance via VOCAT application

## Safety versus agency in implementing safety strategies

Ethical and legal issues may arise when undertaking risk management to maximise an applicant's safety. Registrars need to be aware of the importance of balancing an applicant's safety against self determination.

Reflection: How would you respond to the applicant about her safety at Court if her own assessment differed from your professional judgement?



The Court has developed documentation to address safety at Court. Please read 'Risk Assessment for Court Appearance' in previous chapter to complete the next activity.

### Small group discussion: Safety strategies for the applicant

Draw on the case study and risk assessment so far, identify whether you have assessed:

1. whether there is risk present
2. if action is required, and
3. action necessary on Court date

Write down a few simple statements that you might say to the applicant that would outline the need for further Court measures to enhance her safety at Court.

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## Caution when working with the person using violence

While the Risk Assessment Framework can potentially be used with anyone who is a victim of violence, it has been primarily designed for use with women and children. Some caution is warranted in using it with other presenting situations and in particular in its use with men. Men who are using violence will often present with a story of victimisation and minimise their responsibility and behaviour. **Δ**Professionals working with men who advise they are the victims of family violence should seek advice and support from an organisation experienced in working with men e.g. the Men's Referral Service, before undertaking any risk assessment.

Assessing who is actually at risk, at risk from whom and at risk of what is a complex clinical process when contradictory accounts of the violence are given by the person using violence and the victim.

- Many men using violence will directly or indirectly seek to justify it, minimise it, and blame their partner or claim in some way that they are the victim in the relationship.
- Women may present in more intensely emotional ways than men, as a result of the fear, trauma and loss of dignity they have been experiencing as a result of his violence. In many cultures, women might therefore be judged as hysterical, agitated, and presenting a less credible account than men, who frequently present as calm and in control.
- Some men will deliberately refer to their partners as hysterical, irrational or even mentally ill when trying to minimise their own behaviour to others.
- Men's stories about their violence are very different from women's. Men frequently underestimate their use of violence while women often overestimate their responsibility. Men often have a very different remembering of events, in particular about what was the most recent incident or the one which impacted most on the woman.
- In addition to blaming her, a man will often use language indicating that the source of their problems is relationship conflict, rather than his use of violence. He might use language such as *we just had a really bad blue and she over-reacted in calling the police*.
- Men may present with injuries consistent with a woman having acted in self defence, e.g. superficial scratches and bite marks, but claiming these as evidence of his victimisation. There is evidence<sup>1</sup> that this has led to women being wrongly charged as the aggressor when they were in fact defending themselves. Even when men aren't able to portray her as the sole aggressor and himself as the sole victim, they often use her actions of self-defence to present the situation as tit-for-tat fighting or that she gives as good as she gets.

### Caution is needed before undertaking a victim risk assessment with men because your intervention may:

- make a woman and her children more unsafe due to not addressing the violence being used against her
- reinforce the woman's tendency to blame herself for provoking the violence and her belief that she is somehow at fault and responsible for fixing things
- increase the risk of a woman not taking measures to increase her safety and that of her children, whether that be to reduce her isolation and seek support services for herself, establish a safety plan, or begin a process of separating from the person using violence
- reinforce a message to the man that he need not take responsibility for his actions and reinforce his story of victimisation
- reinforce the man's tendency to minimise both the violence and its impact on the victim
- miss the opportunity to engage the man in a conversation that might help him to take a step closer to taking responsibility for his behaviour, and towards accepting specialised help to change his behaviour

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<sup>1</sup> Braff, R. & Sneddon, C. (2007) Arresting Practices: exploring the use of dual arrest for domestic violence. Australian Domestic and Family Violence Clearinghouse.

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Although it is not the purpose of this training to deal with the assessment of men who use violence, it is important to be aware of these cautions and:

- Know the limits of your role and expertise
- Always see people individually as early as possible when performing a risk assessment
- When couples attend together, try to interview them separately and alone with the woman first in order to ascertain her safety and allow privacy for disclosures
- Be aware that intervening with the person using violence can itself be a risk. Violence used by a man against his female partner and children often escalates once the violence becomes known to others. Furthermore, attempts to engage a man about his use of violence can increase the risk of harm to her and her children if not done in a very skilled and careful way
- Never disclose information provided by the woman to her partner or another family member if it compromises her safety. Information provided by the man that affects the woman and her children's safety must be acted on (e.g. contacting police, the woman, DHS child protection etc)
- Consult with providers who specialise in working with men who use violence, such as the Men's Referral Service ([www.mrs.org.au](http://www.mrs.org.au)) and/or a local Men's Behaviour Change Program ([www.ntv.org.au](http://www.ntv.org.au)). Men's Behaviour Change Programs are required to comply with State Government standards.

# Information sharing, effective referral and networking



Information sharing, effective referral and networking are integral to the implementation of the six components of the Framework. It assists to effectively identify (risk assessment) and respond (risk management) to victims of family violence.

**Within a Court environment it is understood that Registrars have limited time and resources to undertake networking. The Family Violence Resource Officer will assist the Court to identify relevant services that will enhance the safety of the applicant whilst at Court.**

## Information collection and sharing

A review of the six components shows the important role that consistent and thorough collection, recording and sharing of information plays in developing an integrated family violence service system.

1. a shared understanding of risk and family violence across all service providers
2. a standardised approach to assessing risk
3. appropriate referral pathways and information sharing
4. risk management strategies that include ongoing assessment and case management
5. consistent data collection and analysis to ensure the system is able to respond to changing priorities and
6. quality assurance strategies and measures that underpin a philosophy of continuous improvement

**The first three components are those the training program has chosen to focus on with an emphasis on Court procedure. It is understood that the Courts do not undertake case management (4) and that data collection and quality improvement processes (5-6) are developed within the Court itself.**

### Recording information

The Court has developed its own documentation for formalizing and recording the risk assessment. This meets the majority of the requirements outlined in the Framework. Refer to pp. 59-64 for comparison

### Privacy and confidentiality

The Framework document discusses these issues at length (refer to pp 34-35 and 57). The Court will inform Registrars of any specific legislative requirements in relation to these matters in due course.

Consent to release details of the applicant's risk assessment to other agencies is contained in the Risk Assessment for Court Appearance documentation.

## An integrated family violence service system

An integrated family violence service system aims to ensure all service providers assess victims and respond to perpetrators in a coherent and consistent way, regardless of where they enter the service system.

Applicants come to the attention of the service system in a range of services and an understanding about other services and their place in the broader system will assist you with effective referrals. A review of Figures 1 and 2 in the Framework document pp 9-10 demonstrates the entry points and pathways an applicant may be negotiating at any given point in time.

The Framework (pp.32-33) includes an extensive list and explanation of referral pathways that may be appropriate for the applicant.

The Domestic Violence Resource Centre (Victoria) will also be providing all Courts with a hard copy of their Referral Options booklet.

## Networking



Although there are many dedicated and specialist services available to victims of family violence, the active cooperation of organisations, services, individual workers and the Court is needed to build and strengthen the support networks. Each Registrar should be aware of the services available in their area, and have a ready list of people in different roles who can be contacted to provide legal, financial, counselling, housing and specialised support as needed. Building and using such networks provides greater safety for both victims of violence and Registrars who resource them. The Family Violence Resource Officer will assist Registrars in this regard.

Please read the template inside the cover of the Framework and note the space on the final page of this guide on which to compile a list of local referral pathways.

### **The role of the Family Violence Resource Officer**

The new approach to family violence means that community services, police and the courts will now work together to make Victorian women and children safer and to hold to men who use family violence accountable for their actions.

The Court continues to have a vital role in the integrated response to Family Violence with the introduction of the Family Violence Court Divisions at Heidelberg and Ballarat as well as the Specialist Family Violence Service sites at Melbourne, Frankston and Sunshine/Werribee.

The Programs and Strategy Branch of the Courts and Tribunals Unit together with the Family Violence Programs and Initiatives area of the Magistrates' Court are committed to fostering professional development amongst registrars, and work closely together to ensure the skills of registrars are continually updated and built upon. As a result, these units have created and developed the role of the Family Violence Resource Officer, another new initiative in the response to family violence. A Family Violence Resource Officer is located within every region of the state.

Apart from completing their day to day duties as a Registrar of the Court, the officers also carry out the following roles:

- provide peer support within their local region;
- act as a point of contact or advice for Court Registrars who require assistance in dealing with family violence clients;
- alert Court Registrars to new research in the field;
- liaise with agencies and organisations who provide family violence support services in the regions and ensure referral information remains current; and
- provide feedback on issues arising in Court Registries and provision of services to family violence clients.

# References and websites

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- Access Economics. 2004. "The Cost of Domestic Violence to the Australian Economy." Canberra: Office of the Status of Women.
- Australian Bureau of Statistics. 2006. "Personal safety survey, Australia." Canberra: Australian Bureau of Statistics.
- Australian Institute of Health and Welfare. 2003. "Child protection Australia 2001-02." In Child Welfare Series no. 32. Canberra: Australian Institute of Health and Welfare.
- Braaf, R and C Sneddon. 2007. Arresting practices: exploring issues of dual arrest for domestic violence. Sydney: Australian Domestic and Family Violence Clearinghouse, UNSW.
- CASA House and Mirta Gonzalez. 1992. Desperately seeking justice: a resource and training manual on violence against women in a culturally diverse community. Carlton: CASA House.
- Castelino, T and A Compton. 2002. "Noticing Women's Agency." NTV FORUM 3(1):12-18.
- Chenoweth, L. 1992. "Invisible acts: violence against women with disabilities." Australian Disability Review 2:22-28.
- Davies, J, E Lyon and D Monti-Catania. 1998. Safety Planning with Battered Women: Complex Lives, Difficult Choices. California: Sage Publications.
- Domestic Violence and Incest Resource Centre. 2007. "Getting Safe Against the Odds - Family violence affects women with disabilities too." Collingwood: Domestic Violence and Incest Resource Centre.
- Domestic Violence Victoria. 2006. "Code of Practice for Specialist Family Violence Services for Women and Children: Enhancing the safety of women and children in Victoria." Melbourne: Domestic Violence Victoria.
- Dwyer, Evelyn. 2004. "Same-sex domestic violence project." Sydney: AIDS Council of NSW.
- Frohman, C. 1997. "Women With Disabilities and Violence: An Information Kit." Canberra: Women With Disabilities Australia.
- Healy, L, K Howe, C Humphreys, C Jennings and F Julian. 2008 "Building the Evidence: A report on the status of policy and practice in responding to violence against women with disabilities in Victoria." Melbourne: Victorian Women with Disabilities Network Advocacy Service.
- Keys Young. 1998. Against the odds: how women survive domestic violence. Canberra: Office of the Status of Women.
- Kirkwood, D and K Diemer. 2006. "Victorian Family Violence Database: Five year report 1999-2004." Melbourne: Victorian Community Council Against Violence, Department of Justice.
- Memmott, P, R Stacy, C Chambers and C Keys. 2001. "Violence in Indigenous Communities." Canberra: National Crime Prevention, Attorney-General's Department.
- Menzies, T. 1993. Nurturing Non-Violence: A handbook to help Children who witness Domestic Abuse. NSW: Lower North Shore Domestic Violence Liaison Committee.

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Miller, R. 2006. "Cumulative Harm: A Conceptual Overview." Victoria: Department of Human Services.

Mouzos, J and T Houliaras. 2006. "Homicide in Australia: 2004-05 National Homicide Monitoring Program." Canberra: Australian Institute of Criminology.

Mouzos, Jenny and Toni Makkai. 2004. *Women's experiences of male violence : findings of the Australian component of the International Violence Against Women Survey (IVAWS)*. Canberra: Australian Institute of Criminology.

No To Violence. 2006. "Men's Behaviour Change Group Work: A Manual for Quality Practice." Melbourne: No To Violence, the Male Family Violence Prevention Association.

Taft, A, L Watson and C Lee. 2003. "Violence against young women and reproductive health." Canberra: Office of the Status of Women.

Partnerships Against Domestic Violence. 2002. "Shaping the Future: Strengths-based Framework for Professionals who work with Children Experiencing Domestic Violence." Canberra: Partnerships Against Domestic Violence.

VicHealth. 2004. "The Health Costs of Violence: Measuring the burden of disease caused by intimate partner violence." Carlton South: Victorian Health Promotion Foundation.

VicHealth. 2006. *Two steps forward, one step back: community attitudes to violence against women*. Carlton South: Victorian Health Promotion Foundation.

Victoria Police. 2008. "Crime Statistics: 2007/2008." Melbourne: Victoria Police.

World Health Organization. 2002. "World report on violence and health." Geneva: World Health Organization.

## References and websites

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### Useful websites

Application form for Intervention Order

<http://www.magistratescourt.vic.gov.au/CA256CD30010D864/page/Publications+Forms>

Australian Domestic and Family Violence Clearinghouse

<http://www.austdvclearinghouse.unsw.edu.au/>

Domestic Violence Resource Centre Victoria

[www.dvrcv.org.au](http://www.dvrcv.org.au)

Domestic Violence Victoria

<http://www.dvvic.org.au/>

Family Violence Protection Bill

<http://www.dms.dpc.vic.gov.au/>

Family Violence Resource Guide

Goulburn Valley & North East Victoria

<http://www.whealth.com.au/pdf/fvguide.pdf>

Queensland Centre for Domestic and Family Violence Research

<http://www.noviolence.com.au/>

Victoria Police Code of Practice for the Investigation of Family Violence

<http://www.police.vic.gov.au>

Victorian Government

<http://www.familyviolence.vic.gov.au>

Women's Health West

Family violence support services available in Victoria

<http://www.whwest.org.au/famviolence/fvservices.php>

The Victorian Women with Disabilities Network

<http://www.whv.org.au/vwdn/violence.htm>

JOIN - Judicial Officers Information Network

All Registrars should have access to this site via the start menu on their PC.

Employees Assistance Program

Via intranet - Home Page - Our Business - People Management - Salaries and Benefits