



## Royal Commission into Family Violence

### WITNESS STATEMENT OF JANINE MADGE WILSON

I, Janine Madge Wilson, Family Violence Advocate of 120 Madden Avenue Mildura, 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.

#### Current role

2. I am currently a Family Violence Advocate at the Mallee District Aboriginal Service (**MDAS**). I have been in this role since May 2015. Within this role I am to incorporate three men's family violence programs and *Meminar Ngangg Gimba* as a holistic approach in the prevention and reduction and address family violence in the community. My role is also to create referral pathways and partnerships between MDAS and mainstream agencies.

#### Background and qualifications

3. My previous role was Intake and Community Development Engagement Worker at *Meminar Ngangg Gimba*.
4. I have been a member and Chairperson of the Northern Loddon Mallee Indigenous Family Violence Regional Action Group (**Northern Loddon Mallee IFVRAG**) since 2000.
5. In twenty years since returning to Mildura I was instrumental in setting up the first Community Development Employment Program (**CDEP**) and setting up NUACCL Mother Company incorporating the five satellite CDEP's across the Loddon Mallee region. I was involved in the Koori Open Door Education School and was the first children's Koori Court officer in the Magistrates Court in Mildura. I am currently an Elder on the Koori Court. I also managed the Mildura office of the Aboriginal Family Violence Prevention and Legal Service (**FVPLS**) and then managed the process of getting *Meminar Ngangg Gimba* up and running.

### **Family violence in the Loddon Mallee**

6. Family violence is a significant and complex issue for the Indigenous community in Mildura and the Loddon Mallee region.
7. In the 15 years I have worked in family violence in this region I have seen family violence increasing and getting worse, to the extent that many of the physical and psychological injuries are horrific and demoralising.

### **Addressing family violence holistically - *Meminar Ngangg Gimba***

8. In this statement I would like to outline the integrated response to family violence that is *Meminar Ngangg Gimba*.

#### *What is Meminar Ngangg Gimba?*

9. *Meminar Ngangg Gimba* is a service response for Indigenous women and children experiencing family violence, located in Mildura, Victoria.
10. The *Meminar Ngangg Gimba* facility features six self-contained units and an onsite support unit, providing a secure environment for women and children fleeing family violence. Attached to this statement and marked 'JW 1' is a copy of a presentation providing an overview of *Meminar Ngangg Gimba* dated 10 December 2012.
11. The services at *Meminar Ngangg Gimba* are client-directed, confidential and designed to ensure privacy. The program provides crisis support, safety planning, case management, family and children's workers, in-house playgroups, court support, housing support, yarning from a cultural perspective, advocacy and referral to others. Women can access this broad range of services, and can arrange to meet them where they feel comfortable, including at *Meminar Ngangg Gimba*.
12. As a Latji Latji Elder, I was approached to see if I was able to come up with a name appropriate for our service. *Meminar Ngangg Gimba* means 'a group of women dwell here'. 'Meminar' means the group of women, 'ngangg' means dwell and 'gimba' means here. So putting the three of them together, 'a group of women dwell here'.

#### *Why was Meminar Ngangg Gimba set up?*

13. Mainstream family violence services have never been able to tick all the boxes for Indigenous people, who are still living with the effects of colonisation.

14. All women's refuge services run on a feminist model, however this model will not work for Indigenous women. We needed to meet the specific needs of our clients to drive service delivery. In a mainstream women's refuge you only stay for a very short period of time. Once this time is over, you are case managed out of the refuge. If a service hasn't met the needs of the client by that time, then it is setting her up to fail when she goes home.
15. *Meminar Ngangg Gimba* also came to be because women who were fleeing family violence in Mildura couldn't access the mainstream services for a number of reasons. That was sad to say. Many were "breach clients", that is they had broken the rules of mainstream services. These could have been big rules or small rules. For example, breaking a big rule may have been telling people where you were staying and having your partner, or a family member, show up. Because the mainstream service is a communal refuge or a house, this was an issue. The communal model means different women had to share the facility, with separate bedrooms; if they had children, their children had to stay in the bedroom with them.
16. Our goal in setting up *Meminar Ngangg Gimba* was to address the fact that many Indigenous women fleeing family violence have given up their housing to get away from their bloke. We were the last option. Primarily, we wanted to be able to get them back on the housing list, reduce their debts and get them back in their own home. We needed the flexibility to do that, whether it be over a three, six or 12 month period.

*How was Meminar Ngangg Gimba set up?*

17. The establishment of *Meminar Ngangg Gimba* occurred in the context of many years of Indigenous family violence reform. In 2002, the Victorian Government released the *Framework for the development of the Victorian Indigenous Family Violence Strategy: a partnership approach between Indigenous Communities and Government (Framework)*. The Framework outlined a staged process to develop and implement an Indigenous Family Violence Strategy in Victoria. Arising from the Framework was the establishment of the Victorian Indigenous Family Violence Taskforce (**Taskforce**) in 2003 and 11 Indigenous Family Violence Regional Action Groups (**IFVRAGs**) in 2005. In 2008, the *Strong Culture, Strong Peoples, Strong Families: towards a safer future for Indigenous families and communities 10 year plan (Ten Year Plan)* was released. I make some observations about the Ten Year Plan at paragraphs 67 to 73 of this statement.

18. Following the release of the Ten Year Plan, the Victorian Government secured funding through the National Partnership Agreement on Homelessness for two Indigenous women's family violence responses; one in the Loddon Mallee and one in the Gippsland Region.
19. The two women's crisis response services which were funded, *Meminar Ngangg Gimba* and *Orana Gunyah* were funded at the same time, but have different stories, and are quite different in their approach. At the start, *Orana Gunyah* had an interim service through the Victorian Indigenous Child Care Agency (**VACCA**), but no land. In contrast, *Meminar Ngangg Gimba* had land, but no interim service.
20. Although many mainstream refuges are autonomous, the government required that *Meminar Ngangg Gimba* be auspiced by another agency. We had to look for a service provider willing to take up the challenge and deliver this service on behalf of the Indigenous community in our region. We originally partnered with Haven Home Safe, which is a homelessness service.
21. In 2007 the Department of Human Services (**DHS**) (as it then was), asked the Northern Loddon Mallee IFVRAG look at organisations, mainstream and Indigenous, who could assist in designing the building and implementation of *Meminar Ngangg Gimba*. We approached Centrelink, Victoria Police (through the Indigenous Community Liaison Officer), an Indigenous tenants at risk worker at Mildura Indigenous Corporation (now MDAS), Mallee Family Care, Mallee Sexual Assault Unit and Domestic Violence Service, the Northern Loddon Mallee IFVRAG and the FVPLS. Representatives from these parties were on the Project Control Group. Over half of the representatives were female. Designing *Meminar Ngangg Gimba* was an Elder and community driven process, with input from government and other stakeholders.
22. In 2010 we began our interim service so that we could respond to needs. The Victorian Government gave us two transitional houses that we could use as our crisis response. We were also able to employ two staff members first up while we constructed the purpose-built site.
23. The Project Control Group had extensive discussions with the architects about what should be done, especially from a woman's perspective. We considered the physical space very carefully, from the way fridge doors faced to disability accessible kitchens,

to quick exit doors. We advocated strongly for the physical space to be comfortable, safe and culturally respectful.

24. One example of our advocacy was the air-conditioning. The Department of Human Services (**DHS**), had a policy of not putting air-conditioning in public housing, unless there was a medical certificate. When the project started one of the first questions I asked was, "Can we have air-conditioning?" and they said, "Well, no, DHS doesn't put air-conditioning in public housing". And I said, "Well, pack up your bag and take it. We don't want it, because women fleeing violence are in a heightened state, they're upset, their children are upset, they're all stressed out, and if they can't cool down we can't have them 24/7 in a facility in Mildura where there's no air-conditioning. You go away and you find a loophole in your policy." We were told that the facility was seven stars, and that it was built to the climate because it was facing all the right way. I said to the project architect in Melbourne, "Well, you come and stay overnight and we'll lay on the grass and look at the Milky Way and as many stars as you like; it still ain't going to make her cool." It took them about three months to find a loophole in their policy and we got it. We won that battle.
25. We also asked the architect to insert doors for quick exit out of each of the consultation rooms. We needed to make sure we could get to the gate and that the police could come into these rooms via the back door, if the person they were bringing in didn't want to be seen.
26. *Meminar Ngangg Gimba* has cultural overlay throughout the whole place. We worked with the architects to ensure that the facility was culturally appropriate. They did a great job of that, but they forgot to consult with us about plantings. They consulted with a "native specialist" but forgot to consult with "the natives". In 2012, when we were ready to take the keys, the members of the Project Control Group, which included some men were standing inside the gate and I said, "Before we go in, there's a couple of blokes here that have to leave". The men on the Project Control Group were confused, thinking I was talking about them, but I was talking about a number of plants that had been planted in the garden, outside each of the units and at the back. I said, "In the majority of this country, those plants represent men's business. You can't have them in a women's space". And despite all the money that had been spent transporting these plants from Western Australia, they had to be removed (except for five plants at the gate, which represent our male staff, the males we work with in the context of the Ten Year Plan, and the male children who come in). That was just the way it had to be, before we had even moved our first client in.

27. As mentioned, we originally partnered with Haven Home Safe as an auspice agency. As of 1 January 2015, MDAS took over as our auspicing agency. While it is early days with MDAS, I believe it is important for future generations that *Meminar Ngangg Gimba* is partnered with an Aboriginal Community Controlled Organisation. Ultimately, however, the goal is for *Meminar Ngangg Gimba* to become autonomous.

*What are the key features of Meminar Ngangg Gimba?*

28. *Meminar Ngangg Gimba* provides a holistic family violence service, by taking a philosophy that not everyone fits in a box or the same box; if everyone fit in the same box we'd all be robots. So to meet the needs of our women and our children under the Ten Year Plan we needed a holistic model. We therefore call *Meminar Ngangg Gimba* a women's response, not a women's refuge.
29. In contrast to the communal living mainstream refuge model, *Meminar Ngangg Gimba* is a facility in a cluster model that has support services on-site for six individual units. Each of the units is fully furnished and self-contained, with kitchens and bathrooms.
30. The unit design is flexible. We have two three-bedroom units, two two-bedroom units and one one-bedroom unit. The one-bedroom unit can be joined with a two-bedroom, making another three-bedroom unit and a two-bedroom and three-bedroom unit can open up to make a five-bedroom unit.
31. This flexible design means we can accommodate larger extended families and children (other than male children over the age of 16). Because we have to meet the needs of Indigenous women and their extended families – like an elderly aunty, grandmother, mother, or somebody they care for – and they have to flee violence with them, they also come into the service. So we have the capability to move the women around in the facility and put a bigger family in there. We also have cots available for the younger children.
32. Anyone who comes with women fleeing violence, including children, Elders or other family members are also individually case managed, so we meet the needs of everyone who has been living in a violent environment. Mainstream services don't take extended family, and this is very important to Indigenous families. We also take women of any background who have Indigenous children or whose partner is Indigenous.

33. *Meminar Ngangg Gimba* addresses all types of family violence including physical violence, psychological violence and controlling behaviour, financial abuse, sexual assault, as well as spiritual and cultural violence. We also embrace handling community violence, sometimes known as lateral violence. We recognise that a woman's family can be perpetrating violence, not just intimate partners. This responds to the Victorian Indigenous Family Violence Task Force definition of family violence, set out in the Ten Year Plan, as: 'An issue focused around a wide range of physical, emotional, sexual, social, spiritual, cultural, psychological and economic abuses that occur within families, intimate relationships, extended families, kinship networks and communities. It extends to one-on-one fighting, abuse of Indigenous community workers as well as self-harm, injury and suicide'.
34. One observation I have is that many women don't understand what family violence is, especially financial abuse and psychological violence, which I believe is a silent killer because it destroys people inside. Disturbingly, sexual assault is also not well understood; rape is not well understood. *Meminar Ngangg Gimba* helps women identify violent behaviour and what constitutes family violence.
35. Unlike mainstream refuges, *Meminar Ngangg Gimba* is not at a secret location. We decided that the more we could be like Myer's front window, and everyone could go past and see it, the more the community would be our protection. However, we generally encourage women not to tell family and friends they are staying at *Meminar Ngangg Gimba*. We have not had any incidents which have caused us to reconsider this decision.
36. As mentioned above, the length of time women and their children can stay at *Meminar Ngangg Gimba* is flexible. Women can stay as long as they need to until their situation is stabilised. We assess and case manage clients. We have high clients (with many complex needs), medium clients and low clients. Each client has their own case worker. I believe *Meminar Ngangg Gimba* was initially funded for 64 clients, with a ratio for distribution across high, medium and low levels. However, we were always over each quota.
37. Once a client leaves *Meminar Ngangg Gimba*, we continue outreach case management for three, six or 12 months. Mainstream services don't do that. Often women have been kicking goals at *Meminar Ngangg Gimba*, but when they leave they become isolated and alone. They start thinking silly things and start falling down again. We make a phone call or a visit to make sure they're okay.

38. *Meminar Ngangg Gimba* is a drug and alcohol free facility. It does not have a detox service, and clients need to be detoxed before they can come to *Meminar Ngangg Gimba*. Sometimes this means women have to go to Melbourne or Bendigo.
39. *Meminar Ngangg Gimba* is a State-wide service. Women can be referred to *Meminar Ngangg Gimba* from across the State, and already women have been referred from all States and Territories in Australia.
40. *Meminar Ngangg Gimba*'s services integrate with police responses to family violence. Victoria Police L17 referrals (also known as fax-backs) go to *Meminar Ngangg Gimba* (provided the police have asked and identified that the woman or her children are Indigenous), Mallee Domestic Violence Service and a men's behaviour change program run by Sunraysia Community Health.
41. Services are provided on site at *Meminar Ngangg Gimba*. We have had a partnership agreement with Mallee Domestic Violence Service around sharing clients, housing and case management needs. *Dardi Munwurro* provide assistance with partner contact, so both men and women get assistance and services talk to each other. Centrelink comes to *Meminar Ngangg Gimba*. Koori Drug and Alcohol Workers from Sunraysia Community Health provide services. We have arrangements with Fishers' Academy and MADEC who provide employment training and qualifications. We link in with and support the Mildura City Council's Indigenous Employment Strategy.
42. Importantly, MDAS can provide all of its many services at *Meminar Ngangg Gimba*, including health services. As mentioned, it was important to *Meminar Ngangg Gimba* to move to being auspiced by an Indigenous organisation. Since partnering with MDAS, clients have been given more choice about service provision.
43. Service provision is client-driven. Our philosophy is not to force one agency down people's throats, but to give them a choice as to who they want to work with, either in a mainstream agency or an Indigenous organisation. If they have existing support networks or caseworkers before they come to *Meminar Ngangg Gimba*, then they can keep receiving those services at *Meminar Ngangg Gimba*. We believe that all services, both mainstream and Indigenous, have to work together to build partnerships and get the most out of the small amount of funding each service gets.
44. Women who come to *Meminar Ngangg Gimba* have just given up their housing, so we make a Supported Application for Public Housing (Segment 1) to Department of Health and Human Services (DHHS), which puts them on the priority list for housing.



If women are renting in the private sector, we advocate for them not to lose their tenancy. We address any debts women might have, so they can re-enter the housing system.

45. The following staff are employed at *Meminar Ngangg Gimba*: a Team Leader; two Case Managers; an Intake and Community Engagement Worker; a Children's Worker; a Family Worker; two overnight support staff (during the week); weekend day staff and other rostered staff.
46. *Meminar Ngangg Gimba* employs male staff. When we first suggested this to DHS, they cringed. They said we couldn't do it, but we wanted to take this approach for important reasons. Firstly, we wanted to show women in crisis that there are men, both Indigenous and non-Indigenous, out there who don't condone violence in any way, shape or form. Secondly, we wanted them to be positive role models for children at *Meminar Ngangg Gimba*, because often the only male role model in the children's lives is the one hurting their mum. Having male staff builds trust and a sense of safety across the whole community. We have never regretted this decision.
47. Similarly, male workers from other services can come to *Meminar Ngangg Gimba* to support women and children. For example, if a woman has a male mental health worker from another service he can come in and continue to help her. If women have a really good rapport with these men, and we were to deny them that, we would only be re-abusing them. We would be taking control away from them again.

**What should be continued and prioritised at *Meminar Ngangg Gimba*?**

48. *Meminar Ngangg Gimba* is a unique women's response. Everything done at *Meminar Ngangg Gimba* is focused around the needs of women experiencing family violence, and integrating services around those needs. This necessarily requires some separation from other services, be they mainstream or Indigenous. Information sharing and service provision needs to be guided by this philosophy.
49. Any women's response, not just responses for Indigenous women, should be guided by the philosophy that intake and risk assessment needs to be tailored solely to women experiencing family violence, and services should be integrated around that.
50. Consistent with this philosophy, *Meminar Ngangg Gimba* has worked very hard to ensure privacy and confidentiality for the women they help, having a separate location is only part of this. Women need to feel confident that they can access a service

without anyone finding out. *Meminar Ngangg Gimba* is in a position to do this. Women's crisis responses should be the central part of the integrated system because they know how to respond to women's needs and ensure that they feel that their trust their privacy will be respected. This is particularly important in Indigenous communities, and where Aboriginal Community Controlled Organisations provide family violence services. One of the challenges in moving over to MDAS will be to maintain both the reality and perception of *Meminar Ngangg Gimba* as being confidential. Although auspiced by MDAS, a woman is able to contact and enter *Meminar Ngangg Gimba* directly.

### **Other observations about responses to family violence**

#### *Police responses to family violence*

51. I would like to make some observations, from my experience, about the police response to family violence.
52. When a 000 call is made, the call goes out to a mobile police vehicle and that vehicle will attend the address of the family violence incident. Once the police officers attend the address, they have to do a risk assessment. This tells them where the danger sits and whether they need to immediately remove the women and/or the children, if there are children present. This is a standard set of protocols.
53. The Koori Family Violence Police Protocols kick in where police attend an address and there is an Indigenous woman, Indigenous child and/or an Indigenous man present. If Indigenous people are present, police referrals need go to Koori organisations, like *Meminar Ngangg Gimba*.
54. There were three pilot sites picked for the Koori Police Protocols, at Bairnsdale, Preston and Mildura. Mildura was first to launch a Koori Police Protocols in 2009. The other sites have launched just recently, six years later.
55. The standard police family violence protocol and the Koori Police Protocols are not working on the ground in Mildura because police are not applying them. Koori family violence responses, like *Meminar Ngangg Gimba*, are not receiving the L17s and so they are not able to respond.
56. I often quote the *Family Violence Protection Act 2008* to local police officers and tell women that they should tell the police to ring *Meminar Ngangg Gimba*. Many police

are still set in their ways and community members are frustrated because of what is not happening. For example, in one case where police were called the neighbours who called them knew it would be a while before police could come, so they stayed and watched to make sure nothing serious happened to this lady. The police arrived and the woman opened the door, standing there bleeding – busted lip, bunged-up eye and crying. She had an intervention order against her partner. Her partner was inside, standing behind her. He had obviously breached the order. The police, instead of speaking to the woman, began talking to the perpetrator. They completely ignored her, telling him to tone it down because they didn't want to have to arrest him or come back again that night. Then they left. They didn't ask her what she wanted. This is because they knew the partner from previously attending the home.

57. I have raised this example, and many others, with local police. What hope have our women got if police won't follow the letter of the law around family violence? If police can't even follow their standard family violence protocols, and do a risk assessment, how can they follow the Koori Police Protocols? We are losing our women. Children are being taken into out of home care. We have been working on this since 2008 and somebody needs to step up to the plate.
58. There are examples of police officers you can't fault. They will bend over backwards, but others won't accept change and there are some new recruits who are taught bad habits. In Mildura we have a very strong community working relationship with the police overall, but the issue is with core police business in the day-to-day response on the ground. Some police have preconceived notions of what is happening at an address – which they attend frequently – and they don't follow the protocols. They think "if you're not going to help yourself, we're not going to help you either" and so they don't do the risk assessments. The law has changed in relation to family violence, and the police must provide an immediate and appropriate response. Police not following mandated practice is probably an issue for non-Indigenous people as well.
59. A further problem is that police don't ask the questions in accordance with the Koori Police Protocols. There are too many unknowns in the data. The need to identify Koori people was required by the Chief Commissioner, but police have told me anecdotally that they are afraid to ask the questions. This is not an excuse. They are mandated questions. As a result, there are alarming rates of unknowns and we are not getting the appropriate referrals.

60. I will say that once the L17s are in the electronic system, which is called LEDR Mk2, I can't fault the process. Once the required protocols are followed, then we can have the right referrals and get started on helping our people.
61. I also think that results are better where there is a specialist police Family Violence Unit. They are more responsive and they understand family violence. If procedures aren't followed, you can call the Family Violence Unit and they will address it straight away. Normal uniformed officers don't prioritise family violence. I also have arrangements with some Mildura police, so that when community members ring me to report family violence, I will forward it on the Family Violence Unit. This is because many community members won't make a complaint to police because of previous bad experiences with police responses.

*Workplace culture, training and advocacy*

62. Workplace culture and training around family violence is critical. If the response to family violence starts within the workplace, we will see real benefits.
63. Organisations, from frontline health services, to local councils, to schools, need to understand what family violence is, how to identify it and how to respond to it. Then they need to train their staff to be able to do so. Then they need to support their staff to do so. If it is practiced in the workplace that violence isn't acceptable under any circumstances, then prevention will get into second gear. This will sustain and grow outcomes.
64. In my experience, I have often had colleagues and community members ask for my advice on family violence, because they don't know how to respond. All organisations, including Indigenous organisations, need to train staff in how to unpack and respond to disclosures of family violence. People don't understand the whole spectrum of family violence out there. They don't know how to help people experiencing family violence, whether they're Indigenous or non-Indigenous.
65. If you do receive disclosures of family violence, you hear some horrific stuff. You feel helpless, because you don't know how to stop the hurt someone else is experiencing. We have to help people to deal with this appropriately. People need to have a debriefing, like the Lean on Me program, to unpack the baggage, culturally and not just clinically. Supporting Indigenous workers in a culturally respectful way is critical.

*Government support for and funding of Indigenous family violence services*

66. I agree with the evidence provided by Mr Andrew Jackomos, and others, to the Royal Commission that the Ten Year Plan lacks rigour, accountability and transparency. We approached our relationship with government under the Ten Year Plan like business partners. However, our peak government organisations were not really committed to the Ten Year Plan.
67. We are less than three years from the end of the Ten Year Plan and we are yet to see the results of it.
68. Funding for *Meminar Ngangg Gimba* and other Indigenous family violence services comes from both the Victorian Government and the Commonwealth Government. In basic terms, the Commonwealth paid for *Meminar Ngangg Gimba* to be built, and the State provides money for running the service. The funding arrangements are very complex.
69. Importantly, *Meminar Ngangg Gimba* has been significantly impacted by the Commonwealth budget cuts to the National Partnership Agreement on Homelessness, which took effect in June 2015. These cuts would have meant *Meminar Ngangg Gimba*, and other family violence services in our area, would have had to close. In response to the Commonwealth Government's decision, we really pushed the Victorian Government, through the DHHS, the Minister of Indigenous Affairs and Indigenous Affairs Victoria, to provide a safety-net for *Meminar Ngangg Gimba*. The Victorian Government agreed to provide a safety net for three years, but we are worried about funding into the future.
70. In terms of the Partnership Forums, in the past the Commonwealth Department of Families, Community Services & Indigenous Affairs (as it was then called), whose representatives sit on the forum, have made it clear to me that there is no money for new services; the Commonwealth will only fund existing services.
71. As far as I am aware, many Indigenous family violence organisations and services in our area, like healing services, the Northern Loddon Mallee IFVRAG, and *Meminar Ngangg Gimba* have never had long-term funding arrangements. They only receive yearly increments, and have not seen another dollar added to them in all the years they have been going.

72. Too often, Indigenous responses to family violence and other serious issues have been funded to fail.

*Housing and family violence*

73. The public and community housing situation in Mildura is dire. There are very old houses, with maintenance requirements exceeding the value of the house. Houses are being demolished to build three units on the same land. The availability of housing for families is therefore being reduced.
74. Haven Home Safe have resorted to giving out tents. MDAS has to do the same thing. Haven Home Safe and MDAS are paying for a nights' campsite fee. Women and children are camping, but after one night have to move on. There is nothing to be had, even though there are a lot of DHHS properties which are vacant, I think because they're wanting to sell them privately.
75. We also lost Harry Nanya Hostel earlier this year. The Commonwealth Government decided to sell it, which means Mildura has considerably less accommodation and support for Indigenous people. No option was given to other local Indigenous services to buy the facility, which was sold on the private market. *Meminar Ngangg Gimba* would use Harry Nanya Hostel for women who didn't want to stay at *Meminar Ngangg Gimba*, or a mainstream service. So we have lost another viable support option for Indigenous clients. There is now only one motel in Mildura which will take family violence clients (Indigenous and non-Indigenous), but the police also use this as accommodation housing for men. This is untenable.
76. Further, in relation to *Meminar Ngangg Gimba*, when it was auspiced by Haven Home Safe, DHS gave *Meminar Ngangg Gimba* two houses, which were used as transitional housing for women leaving *Meminar Ngangg Gimba*. When we moved to being auspiced by MDAS, we lost these houses. This means it has been much harder to find women leaving *Meminar Ngangg Gimba* transitional housing. All clients leaving *Meminar Ngangg Gimba* now have to apply through the Opening Doors system or the A Place to Call Home initiative, which are open to a number of services. I have had discussions with DHHS around the re-modelling of the system of transitional housing, including community organisation nomination rights, which is a very important aspect of the women's response service. Indigenous organisations and family violence organisations need to be involved in assessing applications for transitional housing, not just mainstream homelessness agencies. If we have

nowhere to send women, we have to put them on the street and we can't do that. You can't make a vulnerable person more vulnerable.

### *The gendered nature of family violence*

77. I agree with comments that have been made to the Royal Commission in relation to concerns about Indigenous communities not recognising the gendered nature of family violence. Overwhelmingly, the majority of Indigenous people who use violence are men and the majority of Indigenous people who experience violence are women.
78. Family violence is still a gendered issue. However, we are now seeing a number of women using family violence. But the Government and service responses don't recognise this because they think women can't be perpetrators. What is happening is that victims of family violence are becoming perpetrators. We have violent angry women because they are sick of being abused. In some organisations they won't be able to get help, because perpetrator responses are for males.
79. In my opinion, this reinforces the need to not only respond to victim/survivors. We need to work with victims and perpetrators equally, then we have to bring together the whole family and work intensively and holistically with them so they have the skills and the knowledge to deal with their issues and build better relationships. In this context, too, police responses need to be nuanced. Not one intervention order suits all families. Police often go the whole hog with intervention order applications; this means there is often no chance of integrated responses and no chance of reconciliation.

### **Recommendations for integrated responses to family violence**

80. Governments need to take Indigenous good practice seriously and fund it and expand it. Many Indigenous organisations, like *Meminar Ngangg Gimba*, have achieved well beyond expectations, yet *Meminar Ngangg Gimba* is in danger of losing funding in only three years' time.
81. We must work with men and women. There needs to be accommodation for men who use family violence. They need to be given housing, too. Men need to be linked in with support services. If men can access these services, some women wouldn't have to come to *Meminar Ngangg Gimba* because they could stay in their own homes.

82. Men's behavioural change programs, including those provided in prisons, should also be specific to Indigenous men. Mainstream models, including the No To Violence model, don't work for Indigenous men.
83. Post-crisis responses are important. In addition to outreach, we should be funding family reunification services. There needs to be a place where families can be brought together, after they have been separated, and worked with intensively for six to twelve weeks so they can learn to live together without family violence.
84. I also believe there is a need for other Indigenous women's responses in the State, particularly in western Victoria. There are only mainstream organisations in the west. As mentioned, the criteria for mainstream services do not suit Indigenous women.
85. Most importantly, we need local responses to local needs. *Meminar Ngangg Gimba* addresses local issues and is about conversation with the local community around what they need to address family violence at the local level. All family violence responses need come up with diverse ways to meet the complex needs of the specific clients who present to them.



Janine Madge Wilson

Dated: 13 August 2015