



CITY OF MELBOURNE

**Submission to the
Royal Commission into Family Violence
May 2015**



Our understanding of family violence:

The City of Melbourne acknowledges that all violence toward women is an abuse of power, a discrediting of fundamental human rights to safety and respect and an intentional choice to assert control over another person. As part of this, family violence is purposeful and demonstrates a range of covert and overt behaviours to gain and maintain domination and control mainly by men over women.

We understand that attitudes and behaviours that reinforce gender inequality and sexist stereotypes must be challenged and changed if Australian women and girls are to live equal and fulfilled lives. The City of Melbourne is aiming to drive and embed positive cultural change through our role as a capital city as well as influencing appropriate attitudes and behaviours towards women.

The information presented in the City of Melbourne submission is drawn from a review of literature and research from international, national and Victorian organisations such as the United Nations and VicHealth and was utilised in the development of our We Need to Talk Preventing Violence against Women Strategy 2013–16. Our communities, stakeholders and professionals across many different sectors have furthered our understanding of this issue within our organisation and within our municipality.

Key messages from City of Melbourne:

The City of Melbourne, as all local governments, plays a significant role in creating safer public environments, developing community facilities and providing health and community services within the municipality for residents, workers and visitors.

As a result we are well placed to take an active role in preventing men's violence against women.

1. Working with families at critical life stages

The City of Melbourne Family Services Team comprises maternal and child health (MCH) workers, social workers, family support workers and counsellors who work together to support women and their children experiencing family violence. Support includes assessment, case management, counselling and development of individual safety plans.

The team program areas work together to provide an integrated service. This model's strengths include:

- the capacity to be responsive and innovative
- an emphasis on early intervention and prevention
- a commitment to providing accessible and inclusive services
- an accessible entry point into other Family Services programs
- culturally relevant services.

The MCH Key Ages and Stages Framework ensures all women are asked at the four week consultation about feeling safe in their relationship. Women can be asked at any Maternal and Child Health consultation if judgement warrants.

Through the Child FIRST intake system vulnerable children, young people and their families are linked effectively into relevant services.

Parenting information programs are delivered and include sessions such as Now you're a dad, adjustment to parenting, and the role of fathers.

2. Planning and designing safe and inclusive public spaces and places

Planning and designing safe public spaces for women and girls means creating public spaces with features that enhance women's safety and feelings of safety, and detract from features that cause women's insecurity and feelings of insecurity.



The City of Melbourne believes that both Crime Prevention Through Environmental Design (CPTED) principles and gender auditing are effective means for assessing women's safety in and use of public spaces and places.

Attention must be paid to:

- features such as lighting, landscaping, visibility, traffic, pedestrian traffic, urban furniture, potential hiding spots, signage, security personnel, proximity to other public spaces, proximity to emergency services, and access to public transportation.
- the physical and social characteristics of space. These also require constant evaluation of the implications of the planning and design process, as these have the potential to either reinforce gender inequality or to advance gender equality.
- how spaces and places are used or not used by women.
- enabling mainstream service sites such as the municipal libraries to act as safe spaces and as referral and information hubs for women and children experiencing violence.

3. Eradicating violence supportive behaviour

Gender based violence is a complex social phenomenon that is supported and maintained in society as a result of a range of overt and covert actions that are normalised to the point where they are taken for granted and often pass unnoticed.

The relationship that exists between sexist peer norms, low status of women and violence against women needs to be addressed. To do this the attitudes and behaviours that foster or maintain sexism must be made visible and changed.

A range of particular predisposing attitudes and behaviours has been identified in male perpetrators of violence against women. These include a general approval of interpersonal violence by men, acceptance of rape myths, belief that relations between men and women are adversarial and generalised hostility towards women. Adherence to any of these beliefs or values by a person of any gender contributes to a violence supportive environment¹.

Young boys and men need to be educated and nurtured to bond with other boys and men in ways that don't devalue or disrespect women.

4. Increasing the availability of men's behaviour change programs

The numbers of incidents of family violence reported to police and the subsequent mandatory referrals to men's behaviour changes programs experienced have increased in recent years and are likely to continue. This is placing ever increasing pressure on these programs to respond to demand.

Sufficient resourcing of men's behaviour change programs is critical if they are to operate as a safe and effective element of Victoria's integrated response to family violence.

Question One. Are there other goals the Royal Commission should consider?

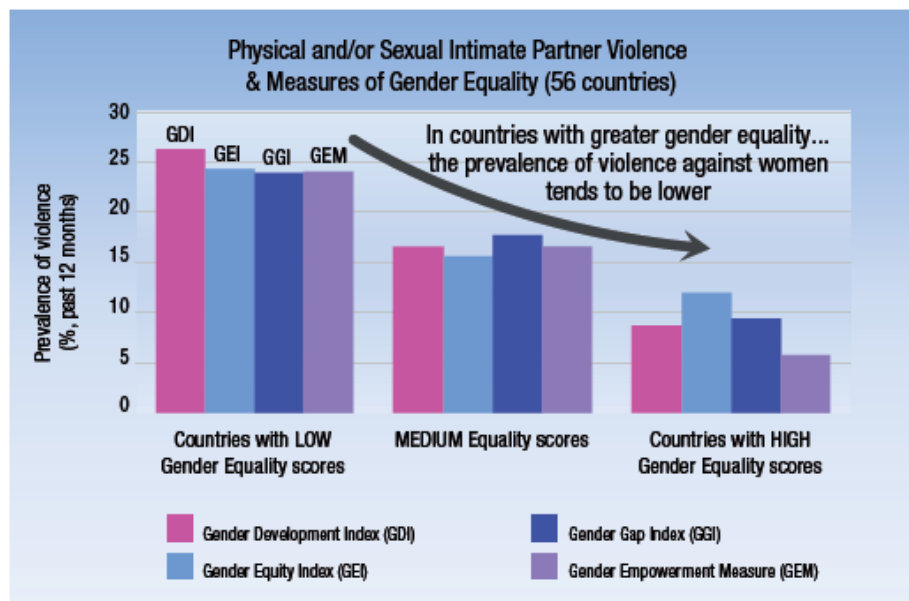
Recommendation 1a. Goal: Reduce and eliminate gender inequality

The City of Melbourne recommends the inclusion of a goal that recognises and states the importance of achieving gender equality as a means of preventing violence against women.

Research has shown that societies that value women's participation and representation, and where there are fewer economic, social or political differences in power between men and women, have lower levels of violence against women and girls (refer to Figure 1).

¹ Australian Women's Health Network (2014) Health and the Primary Prevention of Violence Against Women, Position Paper 2014.

Figure 1. As gender equality improves, the prevalence of intimate partner violence against women is lower



Recommendation 1b. Goal: Address and eliminate violence-supportive behaviours

In order to prevent violence against women we need to address and eradicate violence-supportive behaviours. Young boys and men need to be educated and nurtured to bond with other boys and men in ways that don't devalue or disrespect women.

Violence-supportive attitudes and behaviour can be found in any setting, and are recognised as: a lack of support for gender equality; belief in the inferior status of women in relation to men; sexual harassment and coercion, bullying, abusive or controlling behaviours; and group disrespect - demonstrated by rude, aggressive behaviour, consumption of pornography, sexualising women, group consumption of alcohol, and rape supportive attitudes.

Adolescence and young adulthood are times when young men are testing ways of enacting their masculinity, which can be highly contingent and situational depending on peer groups and role models. Blye (2003) described this as a process of young men jostling between competing forms of masculinity. For example, men may use sexist jokes as a kind of bonding exercise; it is through joking friendships that men are able to negotiate the tension they feel over a need for intimate friendships with other men².

Recommendation 1c. Goal: Acknowledge the importance of, and support primary prevention

There is international consensus that violence against women can be stopped by tackling its causes – all of which are modifiable and can be eliminated. By addressing the underlying determinants and contributing factors of violence against women, we can prevent the problem from happening in the first place.

Initiatives to prevent violence against women must consider universal strategies, that is strategies for the whole community, and selected or targeted strategies to reach those who can be missed through universal efforts (such as culturally and linguistically diverse or Aboriginal and Torres Strait communities) and to build the capacity of specific groups to take action such as young people, men, women or carers of women with disabilities³.

² Australian Women's Health Network (2014) Health and the Primary Prevention of Violence Against Women, Position Paper 2014.

³ VicHealth (2007) Preventing violence before it occurs: a framework and background paper to guide the primary prevention of violence against women in Victoria.



Primary prevention must take a positive, community building, or strengths-based approach. A strengths-based approach calls for programs to be positive, inclusive and enabling. Such an approach values and makes visible the skills, knowledge, connections and potential in a community. It promotes capacity, connectedness and social capital. This approach has the potential to engage men and women in the community as partners in bringing about the changes needed to eliminate violence against women.

As greater numbers of ordinary people become involved in prevention programs the combined effect has the potential to create a momentum that will lead to the kind of long term cultural change that is required to create a society in which all people are equal, and respectful relationships and behaviours are the norm.

Recommendation 1d. Goal: Address the stigma of reporting

Including a goal to address the stigma of reporting will improve women's confidence in seeking professional help and reporting family violence.

Statistics relating to violence against women are alarmingly high, but it is acknowledged that they do not accurately reflect the true extent of violence.

Women are least likely to report violent incidents (either sexual or physical) committed by a current or former intimate partner as compared with reporting incidents perpetrated by a stranger or non-intimate partner. In 2006, the ABS estimated that only 36 per cent of women who experience physical family violence assaults ever report the assault to police and even fewer report their experience of sexual assault (19 per cent).

The many reasons why victims may not report the violence to police or seek assistance from support services include fear of repercussions from the perpetrator, fear of losing children to DHS Child Protection, financial dependence on intimate partners, lack of confidence in the legal process, lack of alternative accommodation or cultural and religious beliefs⁴.

Recommendation 1e. Goal: Prevent women, young people and children entering homelessness as a result of family violence

Include a goal to keep women, young people and children in their homes. This will reduce disruption and disengagement from community life including employment, school, and social networks and is a far more cost effective approach than dealing with the consequences of homelessness.

Almost half of all Victorians experiencing homelessness are women and one-sixth are children under 12 years of age. Family violence is the most common cause of homelessness in Victoria. There are over 34,000 people on the waiting list for public housing in Victoria and only 0.04 per cent – 2 per cent of all private rental properties in and around metropolitan Melbourne are affordable for single parents on low incomes.

Question Two

The Royal Commission wants to hear about the extent to which recent reforms and developments have improved responses to family violence, and where they need to be expanded or altered.

From our experience we believe the following reforms and developments have significantly improved responses to family violence and improved our understanding of the underlying causes of violence against women and how it can be prevented.

⁴ Department of Justice (2012) Measuring Family Violence in Victoria: Victorian Family Violence Database Volume 5: Eleven year trend analysis 1999-2010.



Family Violence Protection Act 2008

Since the introduction of the Family Violence Protection Act 2008 the number of family violence incidents reported to Victoria Police has dramatically increased as have the number of Family Violence Safety Notices and Family Violence Intervention Orders being issued.

The unintended consequence is that a significant strain has been placed on the family violence service system making it difficult for women to access services and support in a timely manner.

The increased reporting and the resulting profile in the media has assisted local governments and community agencies to better understand the magnitude of the issue and justify committing resources to develop and deliver comprehensive strategies to reduce and prevent violence against women in local communities.

Children Youth and Families Act 2005

The Children Youth and Families Act 2005 introduced a range of new reporting and referral arrangements, including the establishment of Child FIRST (Child and Family Information, Referral and Support Teams) to develop better pathways to earlier intervention services and more flexible responses to promote a child's safety, stability and development.

Family violence courts

The Family Violence Court Division commenced sitting at the Magistrates' Courts of Victoria at Ballarat and Heidelberg on 14 June 2005. Specialist Family Violence Services were later introduced and operate at the Melbourne, Frankston, Sunshine and Werribee Magistrates Courts. These courts are overwhelmed with applications for intervention orders on a daily basis.

A woman applying for an intervention order is required to attend the court in person. She is required to remain at court, often for the whole day, until her case is heard by the Magistrate. During this time her partner/ex-partner may be present in court causing her much anxiety and stress. There is no special waiting room for victims.

VicHealth's Framework for Primary Prevention

Preventing violence before it occurs: a framework and background paper to guide the primary prevention of violence against women in Victoria was developed by VicHealth in 2007. It has provided all levels of government, community health and women's agencies with the approach to focussing primary prevention efforts. The framework identifies key settings, population groups and best practise strategies to prevent violence against women.

According to the Municipal Association of Victoria, approximately 25 of the 79 local governments in Victoria have a Family Violence, Preventing Violence Against Women and / or a Gender Equity Policy or Strategy. Over 60 local governments have a Family Violence clause in their Enterprise Bargaining Agreement.

Local government has been an industry leader in the provision of family violence leave as part of Enterprise Bargaining Agreements; it is hoped other organisations and industries would follow this lead.

Establishment of Our Watch (National Foundation to Prevent Violence Against Women and their Children)

Our Watch was established in 2013 by the Commonwealth of Australia and the State of Victoria to promote cultural and behavioural change.

Our Watch is working with VicHealth and the Australian National Research Organisation for Women's Safety on the development a National Framework to Prevent Violence against Women and their Children. The Framework will bring together the international research and nationwide experience on



what works to prevent violence. It will establish a shared understanding of the evidence and principles of effective prevention and present a way forward for a coordinated national approach.

This is significant and ground breaking as no other country in the world has a national framework.

Recommendations:

2. Continue to provide specific funding for the tertiary response sector to ensure women who are subjected to intimate partner violence and sexual assault have adequate and appropriate services available to provide them with safety and support.
3. Ensure specialist children services and support are made available to children who have been affected by family violence.
4. Ensure the legal and justice system is much more victim focussed. This could include establishing a special waiting room for victims of family violence, developing plain English legal documentation, and an option for victims to be present at court remotely.
5. Expand the Family Violence Court Division beyond Ballarat and Heidelberg.
6. Provide dedicated and long term (five to ten year) funding to the primary prevention sector to ensure activities can be delivered across the range of settings where people live, work and play.

Question Three

Which of the reforms to the family violence system introduced in the last ten years do you consider most effective? Why? How could they be improved?

Reforms which have been most effective include:

- Police taking out intervention orders on behalf of the women results in taking pressure off women and possible consequences.
- Police reporting to Child Protection following a family violence incident where a child/children are present. This has improved communication between agencies and results in safer outcomes for children.

Question Four

If you or your organisation have been involved in programs, campaigns or initiatives about family violence for the general community, tell us what these involved and how they have been evaluated.

Like all local government areas in Victoria, the City of Melbourne has been significantly impacted by violence against women and family violence in our community.

For the Melbourne municipality, the number of family incidents reported to Victoria Police has increased in the last five years by 42 per cent from 679 incidents in 2009/10 to 1163 in 2013/14. Other significant increases include the number of Intervention Orders applied for (30 per cent), Safety notices issued (8 per cent) and children present (32 per cent). The majority of victims who experienced family violence incidents were most likely to be aged between 25-35 years followed closely by 18-24 years.

The City of Melbourne developed its first preventing violence against women strategy titled [We Need to Talk](#) in 2013. The strategy aims to prevent men's violence against women by focussing on three key settings: the workplace, the community and the home. The City of Melbourne is the first capital city council in Australia to develop such a comprehensive strategy.

Family violence and violence against women is also being addressed in [Melbourne City Council Plan 2013-17 and Municipal Public Health and Wellbeing Plan](#) and a number of other City of Melbourne strategies including the [Beyond the Safe City Strategy](#), [Pathways: Homelessness Strategy](#) and [Melbourne for All People Strategy](#).

Below is a summary of the initiatives we have in place to respond to and prevent family violence and violence against women, and promote gender equality.



City of Melbourne's leadership in organisational cultural change

The City of Melbourne understands the impact that violence against women and gender inequality has on communities and the importance of leading by example through developing respectful and equitable workplace cultures.

As a relatively large organisation and a capital city council with major industries and small businesses based within our municipality, the City of Melbourne has an important role to play in changing the culture of violence and promoting gender equality. This needs to be within our organisation as well as providing leadership for other organisations within our municipality.

The City of Melbourne, in partnership or consultation with expert consultants, Our Watch, VicHealth, and the Preventing Violence Together (PVT) United Implementation Committee, has put in place a number of initiatives to build our capability in promoting gender equity to prevent violence against women, these have included:

- a) Independent gender audit of our existing workplace policies and procedures.
- b) Development of new workplace policies, procedures and resources, including:
 - Gender Equity Policy
 - Gender Equity Audit Tool (for the Organisation and its Branches)
 - Preventing Violence Against Women Policy
 - Bystander Policy and Procedure and fact sheets
 - Responding to Family Violence Policy and Procedure, and a separate
 - Sexual Harassment Policy and Procedure.
- c) Development of an organisational training program which includes four modules:
 - Module one. Preventing violence against women: An overview
 - Module two. Responding to family violence at the City of Melbourne
 - Module three. Gender equity audit tool / Gender analysis
 - Module four. Bystander action in the workplace.
- d) Conduct of a gender audit of a number of City of Melbourne services, programs and facilities.

Relevant questions will be included in the City of Melbourne staff culture survey to measure staff satisfaction with employment conditions, promotional opportunities, leadership etc.

Questions will also be included in the annual customer satisfaction survey to measure any change in men's and women's use and satisfaction with the quality and accessibility of City of Melbourne's services, programs and facilities.

Staff participation in preventing violence against women (PVAW) activities

We need to talk awareness campaign

Over 100 City of Melbourne staff participated in the development of a [We Need to Talk](#) short film to help raise awareness and take a stand on violence against women. The film was released as part of the community consultation phase for the development of our Preventing Violence Against Women strategy. Since its launch on 22 November 2012 the film has been viewed 1245 times.

Working with local businesses and community groups

PVAW guidelines for business and community groups (in development)

Preventing violence against women and gender equity guidelines and training program are being developed for local businesses and community groups to help them to understand the important role they can play in preventing violence against women in the community and in their workplace.



Community based activities

Respectful relationship education

The City of Melbourne has funded Inner Melbourne Community Legal Service, as part of our Long Term Community Grants program, to deliver respectful relationship and family violence education to secondary school students.

Maternal and Child Health Services - Baby Makes 3

City of Melbourne's Maternal and Child Health Service is piloting Baby Makes 3 in three locations - Boyd Community Hub, Kensington Maternal and Child Health Centre and North Melbourne Maternal and Child Health Centre.

Baby Makes 3 is a primary prevention program that seeks to prevent violence before it occurs, by promoting equal and respectful relationships between men and women during their transition to parenthood.

Developing leadership opportunities for women

The City of Melbourne has committed \$150,000 over the next three years to work with the local African Australian community on improving health and wellbeing outcomes. Local African women leaders have stated that they want to adopt a leadership role in addressing and preventing family violence in their local community.

Sexual assault awareness campaign

The City of Melbourne contributed funding to the development of Crime Stoppers Victoria's Say Something [sexual assault awareness campaign](#).

The sexual assault 'Rachel' campaign was launched on 20 May 2013. The 'Rachel' film advertisement was screened 64 times in cinemas in metro Melbourne throughout the peak holiday periods.

Over a 12 month period (July 2013 – May 2014) Crime Stoppers' Say Something website received 70,842 visits and 203,394 page views.

Elder abuse awareness

In 2014, a number of activities were organised as part of World Elder Abuse Awareness Day to raise awareness of elder abuse. These included:

- internal training for Ageing and Inclusion staff
- volunteers in our Friendly Visiting Service were offered Elder Abuse training through Seniors Rights Victoria
- afternoon tea for City of Melbourne staff to promote and raise awareness of World Elder Abuse Awareness Day
- information was displayed at our senior's centres, planned activity group and local libraries – this was targeted with language appropriate collateral.

Community Grants

The City of Melbourne funds the delivery of women's safety, preventing violence against women and family violence projects by a number of not-for-profit organisations and community groups. Over the last three years the City of Melbourne has funded more than 14 projects to the value of \$438,000 on both annual and long term (up to four years) bases.

All grant recipients submit an acquittal and evaluation report detailing the outcomes of their project.



Promoting safe spaces and places for women

Amica women's lunch and activity club

The City of Melbourne has engaged Women's Information Referral Exchange (WIRE) to provide a lunch and activity program which engages with a range of women including those from culturally and linguistically diverse (CALD) backgrounds and older women at risk of, or experiencing homelessness.

Legal clinic for women

In partnership with Justice Connect and Lord Mayor's Charitable Foundation, a legal clinic for women experiencing family violence and threatened with homelessness has been located within one of City of Melbourne's libraries. Over the past twelve months 60 women with 96 children in their care have been assisted. Ninety per cent had experienced family violence. It is believed that 80 per cent of these women have been able to maintain safe and secure housing as a result of legal representation and social work support.

Central City Community Health – women's only service

In 2011, the City of Melbourne provided a subsidised space for the delivery of Central City Community Health Service in one of our heritage buildings known as Drill Hall.

The Central City Community Health Service provides a range of services from the one site specifically catering for the needs of Melbourne's homeless, many of whom have complex health needs, in the heart of the central business district.

The service also offers a 'women / women and children only' service access at various times and on a particular day each week.

Safe and inclusive spaces for women and their children at risk of violence

City of Melbourne is engaged in a project to make our own facilities and services more safe and accessible for women and their children experiencing or at risk of family violence. An audit tool has been trialled with three key facilities; a library, a sports and recreation centre and a community hub.

City of Melbourne will use this audit tool to make recommendations on service enhancements so that women experiencing or at risk of family violence can access mainstream services while fulfilling some of their more specific needs.

In addition, City of Melbourne has compiled a database of services and programs for women in the municipality. This information will be distributed to referring agencies, making sure it gets to women who will benefit from using these services rather than making it available for potential perpetrators of violence.

Working with and supporting local families

The City of Melbourne's Maternal and Child Health Services, Family Support and Counselling and Parenting Services provide information, referral, counselling to mothers and children experiencing violence, and to couples experiencing high levels of conflict.

A Women's Health West outreach worker is placed at Carlton Family Services as a referral point for City of Melbourne staff, and for families to access. The service provides practical and counselling support to women in family violence situations.

New Parent Groups are scheduled in the evening to allow both partners the opportunity to attend.

Collaborating with local and state wide agencies and other local government areas

Melbourne PVAW Coordination Committee



In October 2014, the City of Melbourne established a PVAW Coordination Committee to assist with the implementation of our We need to talk: preventing violence against women strategy.

The committee comprises representation from national, state and locally based agencies including Victoria Police, Our Watch, White Ribbon Australia, Women's Health Victoria, Women's Health West, Casa House, Safe Steps, Royal Women's Hospital, No to Violence, CoHealth, McAuley Community Services for Women, Municipal Association of Victoria, Victorian Equal Opportunity and Human Right Commission, University of Melbourne, Women with Disability Victoria, Multicultural Centre for Women's Health, and Domestic Violence Resource Centre Victoria.

The committee meets quarterly to share information on new initiatives, emerging trends and to identify opportunities for collaboration.

Municipal Association of Victoria's PVAW Network

The City of Melbourne is a member of the Municipal Association of Victoria's PVAW network meeting and regularly informs the network of the work the City of Melbourne and our partners are doing to prevent violence against women and promote gender equality. These meetings are held quarterly and provide a valuable platform for networking, support and collaboration.

Preventing Violence Together (Western Region Action Plan)

The City of Melbourne is a signatory to the [Preventing Violence Together: Western Region Action Plan to Prevent Violence Against Women](#).

Preventing Violence Together (PVT) is the Western Region's partnership and action plan to guide the primary prevention of violence against women in the west. The development of a regional prevention plan has greatly assisted in the integration and coordination of efforts across the western region.

The PVT United project, funded by Department of Justice, has enabled the Region's partners to participate in a series of networking, capacity building and training sessions. This has contributed to an increased level of awareness and capacity to adopt primary prevention activities within our respective organisations.

Our Watch

The City of Melbourne is currently working with Our Watch and VicHealth on the Capital Cities Lighthouse Project to develop a resource kit for capital city local governments across Australia. The resource kit will include:

- a model for PVAW and bystander action in local governments
- bystander action tools to support staff across the local government to take bystander action
- a gender audit tool to support the development of a whole of local government gender equity strategy
- a suite of policies and procedures which promote gender equality in local governments
- a suite of professional development materials (including four modules: leaders course; staff bystander action; using a gender audit tool; PVAW '101')
- an implementation guide (which incorporates advice on how to use/implement all the above components).

Elements of the resource kit are currently being tested at the City of Melbourne as an initial pilot site in phase one with expansion of this model and testing of the resource kit in an additional one to three capital city local governments across the country as part of phase two. Phase one is due to be completed by June 2015.

White Ribbon City and campaign partner

The City of Melbourne became a White Ribbon (WR) City and an official campaign partner on 25 June 2012.



We have sponsored the annual Melbourne White Ribbon Day Luncheon at the Town Hall every year for the last five years. The Lord Mayor, as a WR Ambassador, has on a number of occasions provided a welcome speech at this event. City of Melbourne councillors, directors, and managers are formally invited and regularly attend the luncheon.

Male Champions of Change

Our CEO, Ben Rimmer, recently joined the Victorian Equal Opportunity and Human Rights Commission's [Male Champions of Change](#) strategy. This strategy involves men of power and influence forming a high profile coalition to achieve change on gender equality issues in organisations and communities. The City of Melbourne is the first local government to be involved.

Question Five

If you or your organisation has been involved in observing or assessing programs, campaigns or initiatives of this kind, we are interested in your conclusions about their effectiveness in reducing and preventing family violence.

Respectful relationship education

The City of Melbourne has participated in and contributed to the delivery of respectful relationship education within our municipality and we believe they are effective in promoting respectful relationships between men and women and contribute to preventing violence against women in the long term.

We see significant benefits in positive primary prevention interventions such as respectful relationship education in the school setting as well as others settings such as child care centres, maternal and child health (e.g. [Baby Makes 3](#)), and sporting clubs (e.g. VicHealth's [Everyone Wins](#), and [Stepping In](#) programs).

To be most effective, these need to be adequately funded and delivered across the state, not just in a few local government areas.

Men's behaviour change programs

From our experience in delivering maternal and child health services and parenting programs, there appears to be little accountability for the family violence perpetrator. To guarantee safety, it is often the victim (mother) and her children who have to leave the home and seek refuge. There are few behaviour change and anger management programs available to male perpetrators. The programs that do exist have a very long waiting list.

Funding to provide more behaviour change programs would be very useful to workers wishing to refer the perpetrator.

Recommendations:

7. Incorporate respectful relationship education programs into all schools' curricula from kindergarten through to year 12.
8. Deliver evidence based programs such as Baby Makes 3 and respectful relationship education across the state.
9. Make available gender training and planning workshops for teaching staff, in co-operation with school management, parents associations and teachers unions, in order to provide school staff with an understanding of the construction of gender.
10. Develop and disseminate gender auditing guidelines to educational and training institutions.
11. Expand long term investment in evidence based behaviour change programs for perpetrators. This is urgently required.



Question Six

What circumstances, conditions, situations or events, within relationships, families, institutions and whole communities, are associated with the occurrence or persistence of family violence?

Men's violence against women affects women across all sectors of society. It occurs in private and in public: in homes and in the workplace, in schools, clubs and pubs, in prisons, detention centers and in hospitals. Men's violence against women is widespread, systematic and culturally entrenched (Amnesty International, 2008). While violence occurs in a variety of settings, it most commonly occurs in the home, with 75 per cent of all assaults against women since the age of 15 occurring in the home (ABS, 2006).

There are a number of circumstances, conditions and situations which are associated with the occurrence and persistence of family violence at a society, community and relationship level. Some of these are outlined below:

Men's privilege/patriarchy

The intimate links between men, masculinity and violence are the product of society and history, not biology. Men's violence against women is not universal: there are cultures in which gender-based violence is absent or exceedingly rare, and at an individual level many men do not use violence.

Violence against women is more likely in cultures in which manhood is culturally defined as linked to dominance, toughness, or male honour. In contexts where 'being a man' involves aggressiveness, the repression of empathy and a sense of entitlement to power, those men who are violent are acting out the dictates of what it means to be a 'normal' male.

If gender-based violence is to be undermined, men themselves will need to take part in addressing the issue, by changing their own violent behaviour and by joining with women in challenging the cultural and institutional underpinnings of violence in their communities and countries. Men's participation must be guided by gender justice and gender partnership, as these principles are integral to men's ability to cultivate a lasting legacy of peace⁵.

Gender inequality

We live in a nation where women are paid less for the work they do, do more unpaid work, are denied seats at the heads of the largest corporations, are more stressed and are greater victims of harassment and violence in the home. This inequality impacts on the way women are regarded and treated at home, school, work and in the community.

Perpetrators

Research exploring the abusers' psychopathology has identified three perpetrator types:

- The family-only group, who engage in the least severe violence, the least violence outside the family, and the least criminal behaviour (lower risk)
- The dysphoric group, whose violence is moderate to severe, who may be violent outside the family, psychologically distressed, may show signs of borderline personality characteristics, and may have substance abuse problems (moderate risk)
- The generally violent – antisocial group, who are moderately to severely abusive against partners, have the most extra-familial violence and most criminal behaviour, and are more likely to have an antisocial personality and substance abuse problems (high risk)⁶.

This typology can provide some guidance in identifying the most appropriate intervention programs or support services as well as implementing safer case management decisions.

⁵ Michael Flood (2002) Engaging men in ending men's violence against women.

⁶ Department of Communities, Child Safety and Disability Services (2012) Domestic and family violence and its relationship to child protection, Practice Paper 2012.



Divorce and separation

Domestic and family violence can continue long after the relationship has ended. Male perpetrators will often make threats on their children or pets as a means to continue to exert control and power over their ex-partners.

In 2009, the Australian Institute of Family Services undertook a national survey on the effects of family violence on post separation parenting arrangements. A dominant and repetitive theme that emerged from this research was that a large number of the female respondents stated that the family law professionals they came into contact with failed to recognise and / or understand the subtle, complex and controlling aspects of family violence and its effect on victims.

Many women suggested that more education and training for all family law professionals (lawyers and judges in particular) is needed so that the non-physical aspects of violence are recognised; disclosures of violence are facilitated, believed and investigated; and parenting decisions ensure that their children are safe and are not exposed to danger when with the other parent. Some suggested that all allegations of violence should be investigated by family violence experts, such as those employed in domestic violence services external to the family law system (who they felt did understand the nature and effects of family violence), before parenting decisions are made⁷.

The availability of free or low cost professional advice on financial, especially property, matters after separation is very limited in Australia. There is negligible legal aid available for property matters, most Community Legal Centres do not provide property advice, Family Relationship Centres deal mainly with parenting issues, and financial counselling is not widely available⁸.

Pregnancy

Recent research has focused on the effects and harm that domestic and family violence may have on an unborn child with one research sample indicating 17 per cent of women who experience domestic violence do so for the first time while pregnant.

In addition, the effects of this violence on women's pre-natal health and well-being are pervasive, and can impact significantly on their physical, emotional and mental health, leading to poor obstetric and reproductive outcomes. The effects can result in babies:

- being miscarried, either as a direct result of violence or due to stresses within the home
- having low birth weight
- being stillborn.

Evidence has also linked a higher proportion of abortions by mothers who experience domestic and family violence. A study conducted at the Royal Women's Hospital found that women experiencing abuse within their relationships were likely to have more hospital admissions during pregnancy, and be prescribed more medication, with newborns to the mothers of the group also having a higher incidence of asthma and epilepsy. Use of tobacco, alcohol, minor tranquilisers and non-prescription drugs was also more likely, possibly jeopardising the health of the baby in-utero⁹.

Alcohol and drug misuse

Evidence suggests that alcohol is involved in a significant proportion of cases of violence against intimate partners both in and outside the household. The Australian component of the International Violence against Women Study found that one in three (35 per cent) of recent domestic violence incidents were alcohol-related, with 32 per cent of women reporting that their partner was drinking at the time of the most recent violent act. In addition, analyses on victimisation data from the 2005

⁷ Australian Institute of Family Services (2011) The effect of family violence on post separation parenting arrangements: the experience and views of children and adults from families who separated post 1995 and post 2006. Family Matters No.86.

⁸ Australian Institute of Family Services (2014) No. 24 Family violence and financial outcomes after parental separation.

⁹ Department of Communities, Child Safety and Disability Services (2012) Domestic and family violence and its relationship to child protection, Practice Paper 2012



Australian Personal Safety Survey, estimated that alcohol contributed to 50 per cent of all partner violence, and 73 per cent of physical assaults by a partner.

Alcohol-related domestic violence incidents are not consistently reported across Australian states. National police figures on alcohol-related domestic violence collated on an annual basis are not identified and alcohol is inconsistently recorded across jurisdictions, making consistent monitoring of the data problematic¹⁰.

Role of media and advertising in improving the portrayal of women

Violence supportive attitudes and norms are also shaped by other social influences including popular media. A wide range of studies have documented relationships between tolerance for physical or sexual violence and exposure to particular imagery in pornography, television, film, advertising and electronic games (Flood & Pease, 2006).

A number of initiatives are currently in place to improve the portrayal of women in media and advertising, these include:

In 2011, the Victorian Government introduced [Gender Portrayal Guidelines](#). The guidelines have been developed for implementation by all Government departments, statutory authorities, and Government agencies. The guidelines are a useful mechanism for developing portrayals of women and men that are positive, are suitable for general viewing and seek to contribute to the elimination of systemic discrimination based on gender. It would be beneficial to have similar guidelines available for local governments and not for profit community organisations.

In January 2012, the Australian Association of National Advertisers (AANA) adopted a [Code of Ethics](#) as part of advertising and marketing self-regulation. Its object is to ensure that advertisements and other forms of marketing communications are legal, decent, honest and truthful and that they have been prepared with a sense of obligation to the consumer and society and a sense of fairness and responsibility to competitors.

According to an article in The Australian Financial Review, the Advertising Standards Bureau looked at 545 ads last year and found only 62 of them, or 11 per cent, breached the advertising code. This represents a drop from 2013, when 15 per cent of ads were found to be in breach of the advertising code and in 2012, 14 per cent¹¹.

If and when a determination of a breach of the advertising code has been reached, the advertising company is requested to change or remove the advert with no other financial or legal consequences. This has a limited effect since by this stage the advert has been seen and or heard by potentially many millions of people.

The Australian Standards Bureau only addresses complaints once an advert has been released and has no power or responsibility for approving an advert before it is released. Advertising companies need to be held accountable with legal and financial consequences if we are serious about kerbing sexist and discriminatory advertising.

The Centre for Advancing Journalism at the University of Melbourne is working with the Herald Sun, and other agencies including VicHealth, Our Watch, White Ribbon, Domestic Violence Victoria, Victoria Police, and the Municipal Association of Victoria on 'Preventing Violence Against Women: a media intervention project'. They are currently seeking funding through the Australian Research Council Linkage Grants.

Our Watch is working on a [National Media Engagement Project](#) which engages media to increase quality reporting of violence against women and their children and build awareness of the impacts of gender stereotyping and inequality.

¹⁰ Foundation for Alcohol Research and Education (2015) The hidden harms: Alcohol impacts on children and families. February 2015.

¹¹ <http://www.afr.com/business/media-and-marketing/advertising/punters-stir-storm-over-sexist-sportsbet-ad-dangerous-hsbc-skateboarder-20150512-1mwk26>



Recommendations

12. Advocate for services that can treat victims/survivors and perpetrators with multiple and or complex needs i.e. family violence, drug and alcohol, and mental issue issues.
13. Investigate opportunities for improved data collection of alcohol and other drug related domestic violence incidents.
14. Support media intervention programs such as those being developed by University of Melbourne and Our Watch – with the view of working collaboratively with all media platforms to develop minimum standards for reporting and advertising that reflects gender equality and respectful representations of women and men.
15. Conduct research to determine if the current Australian Association of National Advertisers self-regulation system is effective in preventing and managing inappropriate and sexist advertising.
16. Consider legislative reform to make it against the law to vilify a person or group of people because of their gender.

Question Seven

What circumstances and conditions are associated with the reduced occurrence of family violence?

The City of Melbourne believes the following circumstances and conditions provide for a safe and inclusive family environment with reduced levels of family violence:

- less rigid gender roles and stereotypes
- supportive family environment
- strong social/peer networks
- secure accommodation
- stable employment/income
- access to appropriate support services and information
- responsive service and justice system.

Question Eight

Tell us about any gaps or deficiencies in current responses to family violence, including legal responses. Tell us about what improvements you would make to overcome these gaps and deficiencies, or otherwise improve current responses.

Safety issues that have arisen due to current court practices and design include:

- Women are put at risk due to being exposed to the perpetrator in the court waiting areas.
- Interpreters are often booked for one hour which is not sufficient time to ensure language supports as the court process can extend for the duration of the day.
- Lack of support/advocacy for women entering the court and navigating the court process. Although, there are some supports such as Court Network their resources are very limited.

Recommendations:

17. Have a dedicated support worker or court network volunteer to meet the woman at court and support them through the process if required.
18. Ensure police communicate with women prior to, not on the morning of, their attendance in court. This will assist in reducing women's anxiety about the court process.
19. Ensure up to date training for all professionals and decision makers on new technologies that perpetrators are using to carry out family violence, and which can often be concealed.
20. Ensure availability of sufficient language resources, such as interpreters at court for victims and perpetrators to ensure full understanding and to prevent delays in decision making.



Question Nine

Does insufficient integration and co-ordination between the various bodies who come into contact with people affected by family violence hinder the assessment of risk, or the effectiveness of (early intervention, crisis and ongoing) support provided, to people affected by family violence? If so, please provide examples.

The City of Melbourne agrees that insufficient integration and co-ordination between key bodies that come into contact with people affected by family violence hinders the assessment of risk and the effectiveness of support provided to people affected by family violence.

For instance, lack of integration can result in women being assessed multiple times and having to retell their story. The risk inherent here is that of re-traumatising women and inhibiting their recovery from their experience.

Integration and coordination needs to be resourced and not 'fitted into' existing structures and systems. This is to ensure that co-working includes appropriate consents; timely sharing of information including notification of a change in the women's risk status; and capacity building across different service systems.

Failure of services to make linkages leaves the women experiencing violence to take responsibility for ensuring all generalist agencies and specialist support services involved in her case have her most current information including risk status.

Question Ten

What practical changes might improve integration and co-ordination? What barriers to integration and co-ordination exist?

Practical changes to improve integration and co-ordination could include:

21. Continue to invest in systems and programs that connect services such as the Victorian Strengthening Risk Management program and Patchwork.
22. Develop a comprehensive multi-agency training program to improve knowledge and skills; build on consistent approaches; and understand roles and responsibilities of each professional/agency involved in family violence cases.

Question Eleven

What are some of the most promising and successful ways of supporting the ongoing safety and wellbeing of people affected by violence? Are there gaps or deficiencies in our approach to supporting ongoing safety and wellbeing? How could measures to reduce the impact of family violence be improved?

From our experience in working with local families and people experiencing homelessness, the most promising and successful ways of supporting women and children affected by violence are outlined in the following recommendations.

Recommendations:

23. Ensure that affordable and safe accommodation options are provided for women and children who need to leave their home to ensure their safety.
24. Ensure that women experiencing family violence have access to money or Centrelink benefits to enable them to be safe and independent.
25. Advocate for the review of immigration visas to address the issues for women who are in the country on a partner visa, have left their partner but not allowed to work to support themselves and their children.
26. Ensure that services for women adopt family sensitive practices so that mothers and their children are able to stay together.



Question Seventeen

Are there specific cultural, social, economic, geographical or other factors in particular groups and communities in Victoria which tend to make family violence more likely to occur, or to exacerbate its effects? If so, what are they?

It is important to note that while violence has the potential to impact women across the entire social continuum, the experiences of women and the contributing factors to violence vary greatly. There are female populations which are particularly at risk to violence. These are outlined below.

Women and children experiencing homelessness:

In Victoria, domestic and family violence represents the main reason for women seeking assistance from homelessness services (AIHW 2011). It is evident that addressing violence against women in the community remains one of the critical areas for helping to prevent homelessness. This is relevant to the City of Melbourne and confirms the findings of the Homelessness and Women in the city of Melbourne 2011 study which found that all participants had become homeless as a result of family violence and that lack of affordable housing alternatives placed them under pressure to return to the family home.

According to the latest [City of Melbourne Street Count research](#) there were at least 142 people sleeping rough within the Melbourne municipality. Although this group of people is predominantly single, male and Australian born we know anecdotally that the number of women sleeping rough is increasing and under-reported. Many women do not necessarily identify as homeless if they are couch surfing or sleeping in their cars.

The City of Melbourne is working with HomeGround Services to provide a range of programs and services for women and children at risk or experiencing homelessness as a result of family violence these include:

- Elizabeth Street Common Ground
- HomeGround Real Estate
- Melbourne Street to Home.

Children exposed to family violence:

Data analysed by the Australian Institute of Criminology (2006) has indicated that for 2003–04, children were recorded as being present at 44 per cent of domestic /family violence incidents. Notwithstanding the prevalence of children's exposure to such violence, there is currently little research that 'improves our understanding of the long-term impacts of continued exposure to trauma on the psychological, physical and brain development of children, or how this exposure impacts their personality, impulse control and, ultimately, their propensity to perpetrate violence in the future' (NCRVWC 2009: 83).

The available evidence indicates that witnessing violence in the home poses a threat to children's physical, emotional, psychological, social, educational and behavioural wellbeing. Browne and Winkelman (2007) noted that child abuse and neglect have been associated with insecure attachment in both childhood and adulthood, as well as cognitive distortion associated with safety (eg preoccupation with danger), controllability (eg perceptions of hopelessness) and internal attribution (self-blaming).

Ageing population and elder abuse:

The City of Melbourne, like other local councils is experiencing an increase in the number of older members of the population. With this demographic change, elder abuse has become a growing concern. Increasing longevity, with more people living alone and isolated, and the rising numbers of older people with dementia are the two other driving forces.



Elder abuse is a complex issue that challenges views about nature of families and status of older people within communities. Elder abuse can take many forms including:

- physical
- sexual
- financial
- psychological
- social
- neglect.

In many cases neither the victim nor the perpetrator may be aware that what is occurring is a form of abuse. The hidden nature of elder abuse means that it is difficult to determine its full extent. According to studies conducted in Australia and overseas it is estimated that up to five per cent of older people are victims. Financial abuse is the most common form, comprising approximately 50 per cent of all cases. Financial abuse can occur concurrently with other forms of abuse.

The impact that physical and psychological violence have on the health of an older person is exacerbated by the ageing process and diseases of old age. It is more difficult for the elderly to leave an abusive relationship or to make correct decisions because of the physical and cognitive impairments that usually come with old age. Often, the abuser may be the abused person's only source of companionship. Because of these and other considerations, preventing elder abuse presents a whole host of problems for practitioners.

In some places, kinship obligations and the use of the extended family network to resolve difficulties may also lessen the ability of older people, particularly women, to escape from dangerous situations. In most cases, the greatest dilemma is how to balance the older person's right to self-determination with the need to take action to end the abuse¹².

One important means of raising awareness, both among the public and concerned professionals, is through education and training. Those providing health care and social services at all levels, both in the community and in institutional settings, should receive basic training on the understanding and detection of elder abuse.

Women with a disability:

Women with disabilities are among the most economically and socially disadvantaged with over 50 per cent living on less than \$200 per week. They are more likely than any other group, including men with disabilities to, among other things:

- be institutionalised
- not own their own home
- not be employed
- not have completed basic schooling.

The risk of violence for women and girls with disabilities is heightened because of gender-based and disability-based discrimination. This dual marginalisation exposes women with disabilities to grave risks of emotional, physical and sexual abuse.

Women with disabilities face the risk of abuse by health care providers or caregivers. Caregivers can withhold medicine and assistive devices, such as wheelchairs or braces. They can also refuse to help with daily needs like bathing, dressing, or eating¹³.

When such abuse does occur, victims are likely to face barriers when seeking assistance through both disability and violence related support systems. Services may be non-existent, inaccessible or inadequate to meet their needs. Women with disabilities are often not believed when they report

¹² World Health Organisation (2002) Chapter 5. Abuse of the elderly

¹³ Office of Women's Health United States (2011) Violence against women with disabilities



sexual assault or family violence or their cases are not taken seriously by the criminal justice system or service providers¹⁴.

Research suggests that the abuses reported by women with disabilities last longer and are more intense than women without disabilities.

Women from CALD communities:

Melbourne is the home, workplace and leisure centre of one of the world's most culturally diverse communities.

Around half (48 per cent) of the municipality's residents were born overseas, with China and Malaysia the most likely countries of birth outside of Australia (8 per cent and 5 per cent of residents respectively).

Women from culturally and linguistically diverse communities face specific challenges. In addition to gender discrimination, they can experience discrimination on the basis of skin colour, religious affiliation, ethnic origin and other identity characteristics such as dress codes.

Some women who are newly-arrived to Australia from migrant or refugee backgrounds face even greater challenges such as:

- a lack of established family networks, support systems and community structures
- dealing with the distress of refugee displacement and prior experiences of torture and trauma
- language barriers and social isolation that can limit awareness of rights and available services
- uncertainty or fear around visa or immigration status
- differences in cultural beliefs and practices regarding respectful and equitable relationships between men and women.

Women from CALD backgrounds are generally less likely than other groups of women to report cases of family violence (Morgan & Chadwick 2009; Tually et al. 2008).

Shame or fear of exclusion from communities can also make it difficult to talk about violence and seek help, and this is even more pronounced when coupled with geographic isolation or socio-economic disadvantage.

Young women:

International and Australian studies show that for young women, the risk of violence by a male intimate partner can be up to three to four times higher than the risk for women across all other age groups (Young et.al in VicHealth 2011).

Young women are also being exposed to other forms of violence through the use of new technology and social media including sexting, doxing, cyber stalking, creep shots, revenge porn, rape videos and photos, and GPS tracking surveillance.

International students:

Melbourne attracts students from all over the world to study at the many leading tertiary institutions in the city. Almost 55 per cent of students living and studying in the city are international students.

During the calendar year of 2012, there were just under one quarter of a million tertiary students (244,353) living and/or studying in the city of Melbourne. The majority of Melbourne's international students come from south-east or north-east Asia.

Anecdotal evidence indicates that international students may be vulnerable to sexual assault, rape, sexual harassment and exploitation because of social isolation, disconnection from family and community and insecurity regarding visas¹⁵.

¹⁴ Department of Human Services (2005) Reforming the family violence system in Victoria.

¹⁵ Australian Institute of Family Services (2011) Supporting women from CALD background who are victims/survivors of sexual violence: Challenges and opportunities for practitioners. No.9.



Women from Aboriginal and Torres Strait Islander communities:

Aboriginal and Torres Strait Islander women are almost ten times more likely to die from assault than non-Aboriginal women and are 35 times more likely to be admitted to hospital as a result of intimate partner violence (Al-Yaman, Van Doeland, Wallis, 2006 in Women's Health West).

The term family violence recognises the complex interaction of kinship structures and extended family relationships within Aboriginal and Torres Strait Islander communities.

The importance of kin and the co-location of kin make it difficult for Aboriginal victims to leave violent partners. Strategies for addressing family violence in these communities need to acknowledge that as consequence of the powerful kinship networks, an Aboriginal woman may be unable or unwilling to report violence or to leave her partner. In order to leave an abusive partner an Aboriginal woman would most likely have to leave her community. But to do so would separate her from extended family, from her ancestral lands and her entire social, cultural and spiritual world¹⁶.

Being separated from kin would constitute a fragmentation of her identity. Professionals working in Aboriginal communities need to understand the powerful role that kinship plays in determining identity, and along with many other factors, kinship is a powerful disincentive to reporting violence¹⁷.

Lesbian Gay Bisexual and Transsexual (LGBT) community:

Domestic violence has been a hidden issue within the lesbian and gay community but it is recognised as a major health concern.

The 2006 large scale study titled 'Private Lives: A report on the health and wellbeing of LGBT Australians' found that 33 per cent of respondents reported having experienced violence or abuse in a relationship. For women, the rate was 41 per cent. These results are echoed by the ACON 2006 Fair's Fair report on violence within Sydney lesbian and gay relationships which found that 48 per cent of respondents had experienced some form of abuse in a same sex relationship.

In many cases of same sex domestic violence, children are involved. According to Fair's Fair, 14 per cent of respondents who reported abuse in their current relationship have children under the age of 16 in their care. Sixteen per cent of respondents who reported abuse in a previous relationship indicated that they had children in their care during the relationship.

These studies and further overseas research has shown that domestic violence occurs in same sex relationships at around the same levels as in heterosexual relationships and a Western Australian report on the issue cited research suggesting that the prevalence may well be higher. In addition to under-reporting, many LGBT people do not identify domestic violence when they experience it due to a lack of recognition of its existence in same sex relationships¹⁸.

Although violence within heterosexual and same-sex relationships is similar in terms of prevalence and type of violence experienced, homophobia and heterosexism create unique difficulties for the LGBT community¹⁹, for example:

- The lack of recognition of the existence of same sex domestic violence and underdeveloped community language around the issue limits LGBT people's ability to recognise and respond to domestic violence.

¹⁶ Australasian Institute of Judicial Administration Family Violence Conference (2009) Paper on family violence in Indigenous communities by Tom Calma. Brisbane.

¹⁷ Australasian Institute of Judicial Administration Family Violence Conference (2009) Paper on family violence in Indigenous communities by Tom Calma. Brisbane.

¹⁸ National GLBT Health Alliance (2008) Submission to National Plan to Reduce Violence Against Women and Children. July 2008.

¹⁹ National GLBT Health Alliance (2008) Submission to National Plan to Reduce Violence Against Women and Children. July 2008.



- Perpetrators can use homophobia and heterosexism as weapons against their partners, such as threatening to 'out' their partner, or preventing their partner from accessing services by creating the impression that those services will be homophobic.
- A lack of visibility and few role models for healthy LGBT relationships mean that for many, the abuse becomes associated with their sexual identity.
- Homophobia can mean that individuals are cut off from their families, which impacts on support options available.
- In areas with a small and close-knit LGBT community, issues of confidentiality, stigma, and embarrassment are compounded.

Recommendations:

27. Develop a state wide public awareness campaign on elder abuse.
28. Ensure elder abuse and family violence is a core component of the Aged Care and Disability Care course work.
29. Develop strategies for improving access for women with disabilities to family violence specialist services throughout the state.
30. Continue to raise awareness of same sex domestic violence within the LGBT communities, particularly amongst young people.
31. Advocate for research on a national scale to further measure the prevalence and impacts of same sex domestic violence, as well as research on the impact on children in same sex families where domestic violence is present.

Question Eighteen

What barriers prevent people in particular groups and communities in Victoria from engaging with or benefiting from family violence services? How can the family violence system be improved to reflect the diversity of people's experiences?

Women may be reluctant to access specialist family violence services because:

- they don't identify with being a victim of family violence and so don't want to be associated with these services
- they fear child protection services will remove children from their care
- they feel some services are not safe for them and / or their children especially if there are other service users, including men, who have complex needs and behaviours
- a previous experience was negative, with their needs were not met and/or the violence they experience had escalated
- they fear the perpetrator and the potential for retribution
- culturally appropriate services are not available
- lack of specialist support services that can deal with women who have complex and special needs eg disability, mental health issues, drug and alcohol issues, financial issues.

Also, refer to Question One under Recommendation 1d Goal: Address the stigma of reporting.

Recommendations:

32. Establish multi-disciplinary centres which can assist women victims/survivors with legal, health, housing, and child care needs.
33. Provide adequate funding to culturally appropriate specialist support services.

Question Nineteen

How can responses to family violence in these groups and communities be improved? What approaches have been shown to be most effective?

According to research and consultation with women experiencing family violence and homelessness undertaken by the City of Melbourne earlier this year, we know women prefer to access mainstream



community services and programs such as libraries, leisure facilities, and community hubs as these can have the potential to provide practical supports as well as opportunities for social engagement and enriching experiences for them and their children.

There is great potential for mainstream services and facilities to meet some of the social and practical support needs of women who may not be in crisis but are still vulnerable to family violence.

The benefits of improving access to mainstream facilities and services for women experiencing or at risk of experiencing family violence and homelessness include:

- Addressing some of the gaps identified in specialist service provision.
- Reducing the burden on specialist services.
- Many women avoid attending existing drop in, day shelters and food vans in Melbourne because they perceive them as being unsafe.
- Mainstream service sites and facilities can be a more appropriate setting for women and children to spend time in.
- Women need to maintain a sense of normality when life is chaotic and uncertain.
- Women who don't identify as being homeless or a victim of domestic violence won't want to use specialist services.

Recommendation:

34. Ensure mainstream services are more accessible, safe, welcoming and inclusive for women and children experiencing family violence and or homelessness.

Question Twenty

Are there any other suggestions you would like to make to improve policies, programs and services which currently seek to carry out the goals set out above?

Family violence prevention requires a whole of community, whole of government response with long term funding that lasts a minimum of ten years.

Recommendation:

35. Continue to fund and implement primary prevention programs in both traditional and non-traditional settings such as workplaces, schools, child care centres, sporting clubs etc to promote equal and respectful relationships between men and women and eliminate violent supportive behaviours.

Question Twenty-one

The Royal Commission will be considering both short term and longer term responses to family violence. Tell us about the changes which you think could produce the greatest impact in the short and longer term.

Short term

Establish a state body focussing on primary prevention of violence against women to ensure Victoria continues to be a leader in this work.

Longer term

Promote and achieve gender equality in all sectors of society – family, community, work and government/decision making.

END