



**Barwon CASA
Counselling
Services**

Royal Commission into Family Violence
Submission prepared by Barwon Centre Against Sexual Assault Inc
May 2015



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Royal Commission into Family Violence – 28 May 2015

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This submission to the Family Violence Royal Commission outlines the work being carried out by Barwon CASA both as a stand-alone agency and as a committed partner to the Barwon Multi-Disciplinary Centre. We commend the Victorian government for instigating this Royal Commission and stand ready to partner to eliminate all forms of gender –based violence including family violence and sexual assault.

1 RECOMMENDATIONS

1.1 RECOMMENDATION 1 – EXPAND CO-LOCATED SERVICES AT BARWON MDC TO BECOME A FULLY INTEGRATED SPECIALIST HUB

Barwon CASA proposes that the MDC model include expanded services:

- ❖ **The MDCs are a significant infrastructure investment and are optimal models to expand:** Using a multidisciplinary approach this specialist service platform has proven its worth and efficiencies in bringing key specialist services together. The facilities are strategically positioned to expand upon to include intensive family violence services. The MDCs have a high profile and are recognised within communities. They are prime facilities to develop into prominent ‘Centres Against Violence’.
- ❖ **Expand MDCs to include Specialist Family Violence Police:** Resource and enable greater collaboration between the Victoria Police Family Violence Unit (FVU) and the MDC. Pending the viability of full integration; immediately test co-location or outreach of the FVU to the MDC one day per week.
- ❖ **An MDC coordination platform would reduce duplication.** Multiple services receive referrals for the same high risk, complex families and individuals. The MDC could act as a central triage point to coordinate intake and assessments across a geographical area. Currently various service providers receive L17s for women, children, and men; we have systems for family violence cases to be referred to and from child protection, child first and services connect, we have crisis care after hours services for family violence and sexual assault. Our experience of the information sharing and coordination that occurs in the MDC, between CASA, Police and Child Protection is that a central coordination point mitigates the need for families to navigate a complex service system. A central intake platform would create a more innovative, effective, flexible client centred system that better manages high risk cases.
- ❖ **Expand and co-locate services:** Assess feasibility and resourcing to expand co-located services at Barwon MDC such as RAMP, drug and alcohol, mental health, Office Public Prosecutions, Victorian Legal Aid, Victims of Crime, financial counsellors and health services. Current visiting services have proven beneficial.
- ❖ **Evaluate Barwon MDC and implement shared data collection:** Evaluate Barwon MDC as part of a statewide MDC evaluation to build an evidence base on the effectiveness of the MDCs, including the practice approach of partner agencies and how this has been positively influenced and the unique outcomes achieved. Implement shared performance database between Victoria Police, Child Protection and CASAs to document the client access and specific client centred outcomes through the whole episode of support to criminal justice outcome.
- ❖ **Review criteria for Video and Audio Taped Evidence:** Assess feasibility of expanding eligibility under VARE to extend to all people who have experienced sexual assault and family violence.

1.2 RECOMMENDATION 2 – DEVELOP A CENTRE OF EXCELLENCE IN TRAUMA INFORMED THERAPEUTIC COUNSELLING AND SUPPORT AT BARWON CASA LINKED TO THE MDC

Barwon CASA proposes the following improvements and expansion of its suite of services to establish a model centre of support for those who have experienced sexual assault or family violence in the Barwon and Wimmera region. Suggested enhancements include:

- ❖ **Flexible client funding packages:** Develop flexible funding packages to respond to those most at need. This includes early intervention for children who have experienced family violence to reduce longer term trauma.
- ❖ **Forensic Medical Examinations:** Improve access to Forensic Medical Examinations for adults and children in Geelong. Commission a review of current barriers and constraints.
- ❖ **Aboriginal Sexual Assault Counsellor:** Scope and develop a specialist Aboriginal sexual assault counsellor position for Barwon and Wimmera.
- ❖ **Sexual Assault Case Management:** Introduce case management for sexual assault clients who present with multiple and complex issues. This model is particularly important in providing a more intensive level of care, for example re-connecting traumatised young people with non-offending family, linking adults who have complex trauma into the mental health system, case coordination with child protection, court support etc.
- ❖ **Evaluate and document:** Build the evidence base regarding the contribution of empowering therapeutic support in addressing long term and complex trauma for people who have experienced violence.
- ❖ **SABTS:** Share learnings from the SABTS evaluation and expand capacity in accredited agencies. SABTS is an important and effective early intervention program, we need to continue to develop an evidence base and ensure programs are gender informed and accountable to victim centred practice. Continue research, monitoring and evaluation and workforce development. Increase the age of the young people who access the SABTS program to 17 years.
- ❖ **Greater access and responsiveness for women with a disability experiencing violence.** Implement a state-wide roll out of the Making Rights Reality program currently offered by South East CASA.

1.3 RECOMMENDATION 3: ROLL-OUT PREVENTION INITIATIVES ACROSS BARWON AND THE WIMMERA

- ❖ **Rapid rollout of Prevention programs:** Barwon CASA supports significant resourcing and roll out of violence against women prevention programs and coordination across key settings such as Local Government, Sports, Workplaces, Community Services, Media and Schools/Further Education settings. For example Baby Makes 3, Workplace initiatives and Active Women and Girls Strategies.
- ❖ **Barwon CASA as partner in RRE roll-out:** Barwon CASA welcomes the opportunity to collaborate with the DET and schools in our region to support RRE and whole-of-school approaches.¹ Barwon CASA has developed partnerships with 4 schools and adapted our SAPPSS program to the needs of students with disabilities. We urge resourcing for DET and partners to implement and resource RRE programs², partnerships together with specialist services³ and to ensure program adaptation and access for students with disabilities.⁴

1.4 RECOMMENDATION 4: UPHOLD THE RIGHT TO SAFETY FOR VICTIMS AND ACCOUNTABILITY OF PERPETRATORS OF FAMILY VIOLENCE STATEWIDE, BARWON AND THE WIMMERA

Barwon CASA welcomes the development of state-wide and regional plans, programs and collaboration between DOJ, the Courts, Police, Corrections, Specialist Services using a gender equality approach as a key organising and evidenced principle for enhancing safety and accountability. Suggestions include:

Barwon and Wimmera:

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- ❖ **Geelong FVU and SOCIT:** Endorse ongoing support for the specialisation of Geelong FVU and SOCIT and investigative resources for the FVU.
- ❖ **Workforce Development:** Resource and develop quality shared training and development on the gendered impacts of family violence and sexual assault for all Barwon and Wimmera FV&SA stakeholders including Courts, Corrections, legal services, child protection etc.
- ❖ **RAMP:** Support the ongoing implementation of RAMP and resourcing for evaluation.
- ❖ **Integration:** Develop and build on key integration tools and practices across sexual assault and family violence services whilst maintaining specialist approaches including collaboration, governance, workforce development, information sharing protocols and referrals protocols.
- ❖ **Implement programs for men:** who have a childhood sexual assault history and current family violence offences who require trauma related counselling and support combined with completion of a MBCP (note: no causal link is implied).
- ❖ **Implement a remote witness facility** to courts from the Barwon MDC as a more appropriate supported environment.

Statewide:

- ❖ **Formal sexual assault referrals:** Test the feasibility of and develop a formal referral assessment form (similar to the L17s) to the CASA by Police (including SOCIT) for all victims of sexual assault – historical and recent cases.
- ❖ **High risk and recidivist cases:** Greater coordination and collaboration for high risk and recidivist cases including sexual assault and the Sex Offender Register.
- ❖ **Men's Behaviour Change Programs (MBCP)** Increase the effectiveness of MBCP, standardised structure and content for programs, provide adequate core funding; increase case management and enhance partner contact and child safety within an accountability framework.⁵
- ❖ **Violent offenders:** stronger sentencing for serious sexual and violent offenders and longer non parole periods. Assess correctional services for violent offenders whilst in remand, on bail and on parole.
- ❖ **Access to Justice:** Assess the feasibility of a *gender access to justice strategy* including expanding the family violence court jurisdiction, including increased support for court directed MBCP and adolescent programming.
- ❖ **Family Court:** review the intersection between the family court and family violence legislation that entraps women and children into access arrangements and privileges violent and abusive men.
- ❖ **Resource and Reform Victoria Police:** Support Victoria Police to establish itself as a model equitable law enforcement agency through workplace reforms to embed best practice workplace standards. This includes trialling and adapting primary prevention programs across the organisation. Increase sworn and unsworn resources to enable Police to more effectively respond and investigate to all forms of family violence, sexual assault and child abuse. Evaluate the current VAWC Strategy achievements to inform future strategic development.
- ❖ **Early Intervention:** Invest in an empowering gender equitable early intervention program to reduce violence against women including increased access to information in accessible forms for multi-lingual communities, people with cognitive impairment and other disabilities that require tailored information, outreach and awareness rights based programs, partnerships with community organisations and workplaces.
- ❖ **Consider expansion of MDC integrated specialist hubs in other locations across the state:** Pending an evaluation of the MDCs, explore the feasibility of expanding MDCs to other locations in Victoria. Explore an expanded role for MDCs to include family violence matters.

1.5 RECOMMENDATION 5: INVEST IN THE BUILDING BLOCKS OF GENDER EQUALITY AND PREVENTION - STATE-WIDE

- ❖ **Systemic community mobilisation:** Invest in systemic community mobilisation that includes community-driven development engaging multiple stakeholders and addressing gender norms.⁶
- ❖ **Whole-of-government and whole of community prevention plan:** Develop a long term, whole-of-government and whole of community prevention plan
- ❖ **Invest in prevention roll out:** Ensure investment and saturation in state-wide, regional and local initiatives to multiple settings
- ❖ **Schools:** National accreditation of school based prevention programs to ensure they comply with evidence based best practice regarding primary prevention and develop a gender equality primary school program.
- ❖ **Primary Prevention:** We endorse the “*Getting serious about change: the building blocks for effective primary prevention of men’s violence against women in Victoria*”. We endorse support for key national and state-wide organisations including Our Watch and Vic Health to continue to research, test and generate evidence to support gender equality and primary prevention of violence against women in Victoria. Continue support for the Vic Health PVAW short course and other workforce development initiatives to create a skilled workforce capable of building capacity in PVAW and gender equality. Implementation of bystander programs to equip the community to have conversations on VAW and challenge violence supportive attitudes.
- ❖ **VLRC:** Endorse a VLRC review of laws in partnership with VHREOC to enhance gender equality in Victoria to enshrine legal architecture in place to build gender equality.
- ❖ **Gender equality legislation:** Embed gender equality reforms in legislation and dedicated gender equality permanent budgets to ensure long term investment safeguarded from the changes in governments.⁷

1.6 RECOMMENDATION 6 INVEST IN LONG TERM EVIDENCE BASED SYSTEMS TO BREAK THE CYCLE OF VIOLENCE AND PROMOTE SAFETY, DIGNITY AND RECOVERY -STATEWIDE

- ❖ **Invest in systems:** Invest in systems analysis and economic forecasting to ensure planning and investment in long term elimination of men’s violence against women and children. Utilise agencies such as the Productivity Commission or Access Economics.
- ❖ **Governance:** Support long term community owned, whole of government/NGO governance with multi-portfolio responsibilities. Develop well-resourced effective governance with Ministerial and Secretary level appointments that has strong functional links between regional and national governance. Governance which is co-chaired by Government and Non-Government partners is preferable. Ensure that sexual assault reforms are linked with family violence and primary prevention to ensure sustainable integration and collaboration across the continuum.
- ❖ **Policy:** Develop long term community owned, whole of government evidence based policy for family violence and sexual assault which builds on previous policy and has a strong M&E framework.
- ❖ **Law reform:** Ensure that a law reform agenda for gender equality, family violence and sexual assault is resourced through VLRC. Resource VLRC to assess reforms implemented and outstanding from previous, current and new evidence and findings.

2 INTRODUCTION

Family violence and sexual assault are manifestations of gender based violence perpetrated in Australia and Victoria.

“In 2014, police attended a family violence incident every eight minutes...”⁸

High numbers of women, girls, boys and men are all affected by and victims of family violence and sexual assault. However it is important to note that this violence is gendered and most victims of family violence and sexual assault are women and children and most perpetrators are male.⁹

More than one in three women across the world is a victim of intimate partner violence in her lifetime.¹⁰

Women are particularly vulnerable to abuse by their partners in societies where there are marked inequalities between men and women, rigid gender roles, cultural norms that support a man's right to have sex regardless of a woman's feelings and weak sanctions against such behaviour.

World Report on Violence and Health 2002

We know that countries with higher levels of gender equality have lower levels of current intimate partner violence.¹¹ Globally, Australia has slipped from 15th place in 2006 to 24th place in the world for Gender Equality ranking.¹²

We know from our work in Barwon, the Wimmera and more recently in the Pacific nation of Kiribati that working together in partnership can interrupt the insidious cycle of violence and trauma and that we can work together to improve gender equality, and prevent violence from occurring in the first place.

Global standards and legal obligations that Australia has signed up to and are developing, help inform best practice in our

response to family and sexual violence.¹³

2.1.1 Sexual Assault in Victoria and the co-occurrence of family violence

Barwon CASA refers to ‘sexual assault’ and ‘family violence’ as forms of gender based violence or men's violence against women. Our organisation supports the evidence that there are shared drivers of this violence and proven strategies to address these.¹⁴

Agency Data

A review of current data within our sexual assault funded program showed that over 60 percent of women identified that they had experienced other forms of family violence. We expect that this figure would be higher as we only record this as a self-identified issue at intake, whereas upon exiting our service women are more informed of the pervasive nature of family violence and able to recognise their experience. In 2013–2014 we supported 1274 sexual assault cases; police referrals comprised 12 percent of the referrals. 742 cases had either current or past family violence. We also find women with a disability over represented at 17 percent of total cases and those with mental health issues presenting at 22 percent. Overall 30 percent of our clients are aged under 18 years and 70 percent over 18 years.

In our SABTS program a similar pattern is present with 48 percent of adolescent cases identified within a context of parental family violence. In 2013-2014 the demand, that we met, for the SABTS program exceeded funded targets by 275 percent. This has consistently been the case for a number of years; however it is an important early intervention program for adolescents.

Our funded family violence program that provides counselling to women and children who have experienced family violence also exceeded target in 2013-2014 by 144 percent. In the current financial year

we met our target in January 2015 and continue to provide valuable services to women and children experiencing violence.

Sexual assault can remain a hidden aspect of abusive relationships. Sexual violence is one of the most difficult of crimes to detect, deter, police, or punish and sexual offences are one of the most under reported crimes and conviction rates for rape are substantially lower than for other criminal offences.¹⁵

We find in our counselling that women often identify physical violence by their partners, however are surprised to learn that non-consensual or forced sex by their partner constitutes sexual assault. Sexual assault is included in the definition of family violence and is a risk factor for lethality and high risk offending¹⁶ thus it is important for the family violence and sexual assault sectors to collaborate closely.

There are a number of personal, social, gendered, cultural and institutional barriers that prevent people from reporting sexual offences; therefore, it is likely that reported victimisation rates underestimate the true incidence of sexual assault. The most recent Personal Safety Survey found that 4 out of 5 women who had experienced sexual assault did not contact the Police about the most recent incident.¹⁷ We know that many women and children who are sexually assaulted know the offender and often they are family members. For many women the perpetrator is a partner or ex-partner.¹⁸

*“There seems to be more reluctance on the part of victim/survivors to report or discuss spousal sexual violence compared to other types of sexual assaults (Lievore, 2003; Mahoney, 1999)”.*¹⁹

The 2013/2014 Victoria Police Crime Statistics reveal that *“the proportion of rape offences which were family incident related was also up, going from 30.8% to 34.3%”.*²⁰

The figures show that police recorded over 68,000 family violence incidents in 2014, an increase of 8.2 per cent. The overall rate of recorded family violence incidents has increased 70.2 per cent since 2010.

In 2014, family incidents also featured in the following offences:

- A third of sexual assault and related offences (3282 of 9806 offences)
- Almost half of assault and related offences (17,544 of 37,639 offences)
- More than half of stalking, harassment and threatening behaviour offences (5310 of 10,573 offences)

Between 2013 and 2014, the major offence categories that showed a significant upward trend included:

- Sexual assault and related offences are up 9.5 per cent, from 9806 to 10,738 (7.5 per cent per 100,000 people)
- Stalking, harassment and threatening behaviour are up 10.8 per cent, from 10,573 to 11,719 (8.8 per cent per 100,000 people)
- Breaches of orders are up 56.9 per cent, from 29,497 to 46,295 (54.1 per cent 100,000 people).

Sexual assault offences reported rose 9.5 per cent to 10,738. More than 46,000 breaches of family violence orders, intervention orders, bail conditions were recorded — almost 17,000 more than in 2013. There was also a 10% increase recorded stalking, harassment and threatening behaviour. Half of the 11,719 offences recorded in 2014 were family violence-related, including an increase in cyber-harassment.²¹

2.1.2 Language and Evidence

Throughout this submission we use the terms family violence and sexual assault to reflect current laws²² and recognise the gendered nature of these most prevalent forms of violence against women and children.

We encourage Victoria to adopt a human rights approach to violence against women and to use that terminology. A narrow focus on ‘family violence’ somewhat limits the scope of the discourse to intimate partner and family member violence. This can also have connotations of individual pathology rather than a structural analysis. In this context we see programs develop for family counselling, anger management and

protective behaviours programs for children, well-intentioned but poorly informed and not positioned to address the social determinants of gender inequality and violence supportive attitudes.

Sexual assault is a uniquely positioned structural issue. Whilst the majority of offences we see are by a known family member, sexual assault also occurs by unknown offenders, often with homicide, or by unrelated people who have a role of caring for individuals such as we see in the current *Royal Commission into Institutional responses to Child Sexual Abuse*. This unique positioning of sexual assault within and outside of family violence requires a particular focus and understanding that is currently not part of the State Governments dialogue. In the recent Victorian Government Budget there was \$800,000 provided for Centres Against Sexual Assault and \$71M for family violence initiatives. Addressing the trauma of sexual assault is a highly specialised area and requires a deeper understanding and more considered response.

We know that violence against women and their children can be reduced and prevented. Evidence based approaches using whole-of community and whole of population, rights based gendered approaches are showing promise.²³

2.1.3 Embracing diversity and intersectionality

Barwon CASA is committed to working with and ensuring that people who have experienced family violence or sexual assault in all their diversity can access services both responding to sexual and family violence as well as participate in primary prevention programs targeting whole-of population and specific target groups.

We have prioritised our engagement and partnership with women and children with disabilities²⁴, disability organisations, Aboriginal women and children and Aboriginal organisations and the LGBTI community.

2.1.4 People with Disabilities and their rights

“Research shows that women with disabilities experience higher rates of violence over their lifetime, and for longer periods of time in comparison to their male counterparts and women in the general population, and at the hands of a greater number of perpetrators”.²⁵ We also know that women and children with disabilities find it much harder to access services to support them to access safety and justice.²⁶ We recognise the work of Women with Disabilities Victoria and endorse their research and recommendations arising from the *Voices Against Violence* series. We endorse further quality assured roll-out of the *Making Rights a Reality Program (MRR)*.²⁷ The MRR program evaluation found that 75% of the cases the alleged offenders was known to the victim, many of them family, friends, neighbours, boyfriends, carers and disability support workers

Barwon CASA recognises that the cultural and interpersonal impact is shared for all Aboriginal people who have experienced sexual assault or family violence. Our relationship with Wathaurong Aboriginal Co-operative, the Barwon South West Indigenous Family Violence Regional Action Group, Elders and community members is central to the engagement and trust we are given to support and work alongside their journey.

2.1.5 Aboriginal people, community and organisations

People who have experienced sexual assault or family violence who are Aboriginal experience the same consequences of sexual assault and interpersonal violence as non-Aboriginal Australians. However, some consequences of sexual violence are experienced differently by Aboriginal victims. Aboriginal victims of sexual violence may experience shame and fear that is associated with cultural and community ties.¹ Aboriginal women may believe that if they speak out about sexual violence it will bring shame on their whole family even though only they have been victimised, or there will be payback, bullying or intimidation from the perpetrator’s family.¹ The sense of a connected and relatively small community can act as an inhibitor from seeking help.

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We acknowledge that there are very high levels of violence perpetrated against Aboriginal women and children and we prioritise their access to services and programs.²⁸ We aim to develop an Aboriginal Sexual Assault Counsellor Advocate role. Our service data indicates that 2.4% of our clients identify as Aboriginal or Torres Strait. We acknowledge the work of the Aboriginal Family Violence Prevention Legal Service²⁹ and ongoing *Indigenous Family Violence Strategy* and related initiatives and governance.

We have partnered with Wathaurong Coop to outreach our services 2 days per week and continue to seek ways to partner with Aboriginal communities. This includes participation in the *Sisters Day Out*.³⁰

“Sisters Day Out breaks down barriers to reporting for Aboriginal victim/survivors of family violence. There is a lot of fear and mistrust about disclosing family violence. At FVPLS Victoria, we know Aboriginal women experiencing violence won’t just walk through our doors - we need to take our services to the community,” said Ms Braybrook”.³¹

2.1.6 Lesbian, Gay, Bisexual Transgender, and Inter-sex communities

Barwon CASA is committed to ensuring equal access for all who need our services and we recognise that we exist within a diverse community. We recognise the range of needs presented by the LGBTI community and our responsibility to respond to these needs by providing an inclusive service. It is important that our clients feel understood, respected and supported in accessing our service. In 2013 we went through a LGBTI cultural audit and accreditation How2.³²

2.1.7 CALD, newly arrived and refugee communities

Barwon CASA is committed to increasing access to services for people who have experienced sexual assault or family violence from CALD background, newly arrived, refugee’s ad asylum seekers. Many women we support are on visas and have few rights and entitlements in Australia.

The fear of deportation acts as a real barrier to women who are dependent on their partners for their immigration status. Women conflate lawyers, police, and government departments as representatives from the one authority that can demand their deportation if their relationship breaks down. ‘My husband always told me he is going to send me back. I was living in fear that the immigration officer would come to my house and send me back.’³³

3 OUR PRINCIPLES:

1. **Human rights:** We believe that sexual assault and family violence are a violation of human rights and a crime against individuals and society. Our programs take a gendered and rights based perspective to ensure that the rights and needs of those who have experienced family violence or sexual assault is central to all that we do.
2. **Gendered analysis:** Global evidence supports that the majority of family violence and sexual assault is perpetrated by men against women and children. We acknowledge men and boys are also victims of sexual assault, generally perpetrated by men. The underlying cause of this violence is the ongoing social inequalities between women and men, including gender inequality, adherence to rigid gender roles and violence supportive attitudes in our culture.
3. **Evidence based prevention:** We aim to address the underlying causes of violence by implementing a coordinated range of activities to effectively prevent violence against women before it occurs. This includes community education, prevention programs and awareness in promoting equal and respectful relationships between men and women, boys and girls.
4. **Evidence based response:** Barwon CASA is committed to providing services that are accessible and equitable to all members of the community who are affected by sexual assault and family violence. We deliver services that address immediate safety needs and long term recovery and we support a system that holds perpetrators accountable and imposes adequate legal and social sanctions against those who use violence.
5. **Inclusive and diverse:** We believe active empowering participation of, and tailored approaches for and by, Aboriginal women and children, women and children with disabilities, LGBTI communities and CALD women and children are essential.

4 THE LEGAL AND POLICY FRAMEWORKS

Victoria has been fortunate to have had excellent government and non-government leadership, an evidence base and benchmarks, and well developed policies to guide the response to and the primary prevention of violence against women.³⁴ The whole-of-government reforms were a key ingredient in the success of both the integrated family violence and sexual assault reforms.³⁵ The policy governance model outlined in *A Right to Respect: Victoria's Plan to Prevent Violence against Women 2010- 2020* was a world first approach to a whole-of-government, multi settings taskforces to prevent violence against women and worthy of consideration in any new prevention governance.

Victoria needs strong Ministerial and whole-of government leadership and supportive structures such as well-resourced and trained Inter-Departmental Committee(s) (IDCs), for addressing violence against women. There is an opportunity to develop strong governance that is linked and/or integrated and coordinated to these specialist areas as well as broader and related initiatives. As members of the *Integrated Family Violence Services Committee* we support the development of strong, linked state-wide governance mechanisms that support violence against women reforms across primary prevention, early intervention and response based on gender equality.

Despite legislative progression such as *The Charter of Human Rights and Responsibilities Act 2006* (the Charter)³⁶ and the *Equal Opportunity Act 2010*.³⁷ Victoria has not yet entrenched gender equality in legislation, budgets or policy. The Royal Commission provides an opportunity to promote the need to ensure that the rights and needs of more than 50% of the Victorian population are adequately addressed and embedded in budgets and resources. By doing this much violence against women can be prevented. There remains a normative obligation and a unique opportunity to remove structural and social discrimination against women and girls in order to genuinely embed gender equality and prevent and reduce violence against women.³⁸ Precedents exist that Victoria can draw upon.³⁹

5 WHAT'S WORKING WELL

5.1 THE BARWON MULTIDISCIPLINARY CENTRE (MDC): BETTER OUTCOMES

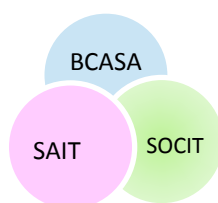
The Barwon MDC is an innovative and success collaborative partnership that improves service provision by bringing together in a single location the key services involved in supporting adults and children who have experienced sexual assault and serious child abuse:

- Barwon CASA, has a multidisciplinary team of over 40 staff located in Geelong and Horsham providing prevention programs and therapeutic services to children, adolescents and adults who have experienced sexual assault and family violence;
- The Department of Health and Human Services (DHHS) Child Protection Sexual Abuse Intervention Team (SAIT) includes up to 5 Child Protection practitioners who undertake investigations into sexual assault and serious child abuse and,
- Victoria Police Sexual Offences and Child Abuse Investigation Team (SOCIT). The SOCIT with 18 specialist detectives that undertake investigations into sexual assault and serious child abuse. The SOCIT also manages the Geelong Registered Sex Offender Program.⁴⁰

The Barwon MDC, located in Geelong, serves the City of Greater Geelong, Surf Coast Shire, Colac-Otway Shire and the Borough of Queenscliff and commenced operations in June 2012. The MDC response aims to increase reporting of sexual offences by reducing barriers to access and prioritises the needs of victims. The model aims to ensure peoples safety and wellbeing; their ability to regain control of their circumstances; and provides access to support, information, justice and services appropriate to their need.

The MDC is an evidence based model that facilitates a collaborative approach between services to provide adults and children who have experienced sexual assault with safety, support and access to justice within an integrated, seamless environment.⁴¹ It would not be possible without the coordinated efforts of the MDC partners who are responsive and flexible to the individual needs of each person, with staff available across each organisation for immediate enquiries and coordinated responses. A Protocol guides shared principles, governance and operational requirements and agreements.⁴²

A significant percentage of the people who access Barwon CASA also access the MDC partner organisations. However people who do not require contact with police or child protection are able to receive independent counselling and therapeutic support from Barwon CASA. Anecdotally during the first two years of co-location in the Barwon MDC, the sexual assault reports to Victoria Police went up by approximately 40%. A large number of reports were historical and the increased reporting may have been due to greater trust in the relationships between CASA and the police, and better access to the reporting process; this rate has now levelled out.⁴³



“We’ve had situations where people have disclosed (to CASA) next door and told us about it, we’ve gone out and got the crook straight away and finalised in a number of hours, whereas in the past when CASA was down the road and clients had no thought of talking to the coppers, that process might have taken days”. SOCIT

Partner organisations see the tangible benefits of the collaborative approach within the MDC unfolding every day.

Integrated service response

Sonia* presents to SOCIT to report a recent sexual assault which is likely to impact other family members. As SOCIT begin their investigation, they identify that Sonia's children are at risk of sexual abuse. The SOCIT detectives quickly access SAIT Child Protection practitioners for consultation, advice and assessment of the situation, in regard to child safety. This report to Child Protection is made smoothly and the safety of the children is actioned immediately.

SOCIT also notify the Barwon CASA intake counsellor who provides immediate counselling support and advocacy for Sonia and her family.

* Pseudonyms have been in these vignettes

In a recent MDC staff consultation, staff from all 3 partner organisations reflected on the positive achievements of working together to achieve better outcomes for people traumatised by family violence and sexual assault.

"We have better working relationships and a better understanding of how SOCIT, CP, and CASA work and can work together". "I find that the clients are more responsive at this location than a police station" MDC workshop feedback

5.1.1 People who have experienced sexual assault can explore their legal options with no obligation.

In the MDC, 'options talks' for people who have experienced sexual assault with Victoria Police have proven to be of enormous benefit. The 'options talk' provides information on the options and rights within the legal system. Benefits include the ability to clarify processes and information, to manage expectations, to consider the way forward, to share information with all concerned parties, to glean intelligence and to work toward agreed outcomes.

The immediacy of the police ability to respond within the MDC and the good rapport between counsellors and police has facilitated some outstanding results. For example a young woman disclosing sexual assault by her father, who was then arrested in the waiting room while his daughter was in a counselling session.

Timely access to options

In a counselling session with her Barwon CASA Counsellor Melinda* states she is contemplating reporting her past sexual abuse to the Police, but she is unsure of what this might mean.

With Melinda's informed consent, the Counsellor asks the rostered SOCIT officer to come into the counselling room to talk with Melinda, answering her queries and giving her options. Melinda chooses to have this conversation and it's at her own pace, and in a space in which she is already comfortable.

5.1.2 Clients value the model and feel safe and respected at the MDC

When moving into the MDC model, Barwon CASA sought the guidance of clients regarding the important aspects of CASA to be retained in the MDC. "We received a tremendous response from people who access our services and from past clients. People spoke of the quality of services from reception through to exiting our support. They valued the quality of information provided, the respect and choice they were given in the process, the welcoming nature of the centre and the quality of support provided leading to positive outcomes. This was an important component of our change management process in transitioning to the MDC and greatly valued by all.

Clients do not feel like they are entering a police station and this is so important for people who have experienced the trauma of violence" (MDC member).

Barwon CASA conducts an annual satisfaction survey on the MDC and has found positive results. Most recently we asked people if they had found having the three organisations collocated in the one building helpful.

One respondent stated:

“Yes very helpful! We would not have known where to go or what to do if it were not for these services. And the fact that they are all in the one building helps heaps too – not just that it is more convenient but that it is less unsettling, (especially for kids) if you only have to familiarise with one place – more comforting to be in familiar surroundings. We are extremely grateful 😊(Client - May 2015)”

One of the many benefits is that clients and all services are kept informed of case progress with much easier sharing of information. MDC partners are able to explain the role of each organisation and assist clients to understand when they might access the assistance of Child Protection and/or Police.

*“The police put me onto CASA and this is where I got the help I needed”
 “Safe with SOCIT in same building”.* Client feedback

Due to the collegiate nature of the model and enhanced understanding mandatory reporting has also been smoother and less traumatic for clients.⁴⁴

“Since we co-located with Child Protection it’s been a lot easier to work with adolescents and kids. If we’re not sure about notifying we do a consultation with staff there, it’s easier to find out what I should do. The same goes for SOCIT: they are able to provide advice with the client’s permission, what’s presenting and how they can assist. It’s a lot easier and less nerve wracking” Barwon CASA

5.1.3 Video and Audio Recorded Statements (VARE)

“... We would love every victim that we have here to do a VARE, we would love to have VAREs done for all of our sexual assault victims...”

Victoria Police SOCIT members have received specialist training in interviewing victims of sexual assault. They utilise the new VARE facility at the MDC. Children who make VARE statements in the MDC are better supported, calmer, less distressed. The purpose built friendly room is welcoming and less frightening for children than a police station.

Evidence from people with a cognitive impairment can also be collected through VARE. People with disabilities are often targeted by sexual offenders and Barwon CASA places particular emphasis on providing accessible services to people with disabilities.⁴⁵

*“..... ‘complaints withdrawn’ is decreasing in SOCIT units, particularly in multidisciplinary centres, where our ability to connect with victims and hear their stories has meant that fewer people withdraw their complaints during the stage of investigation”.*⁴⁶ Transcript from the Inquiry into the Handling of Child Abuse by Religious and Other Organisations

5.1.4 Police Code of Practice and formal referrals to CASAs

The 2005 Police Code of Practice for the Investigation of Sexual Assault has been adopted as standing orders for all cases of sexual assault reported to Police.⁴⁷ We look forward to the revised code being released shortly and also advocate for formal referrals for all victims of sexual assault to CASAs similar to the L17 process by Victoria Police to family violence services.

5.1.5 Supporting Children and Young People at the MDC

We know that child sexual abuse damages children physically, emotionally and behaviourally. Both the initial effects and long-term consequences impact on the individual, their family and on the community. Early identification and effective intervention can ameliorate the initial effects and long term consequences of child sexual abuse and the experience of family violence and promote recovery.

Barwon CASA works in partnership with Victoria Police and Child Protection as the responsible authorities for protecting children. Effective intervention is child-centred and involves multi-disciplinary teamwork and is guided by the best interests of the child.⁴⁸ A protocol between DHS and Victoria Police ensures the

management of both the protective and criminal aspects of investigations. DHS and Victoria Police are able to undertake joint investigations to determine the action required to protect the child and Police will determine whether criminal charges will be laid against the offender. Referrals are made to Barwon CASA for the child and the non-offending parents or carers.

“The Protecting Victoria’s Vulnerable Children Inquiry notes that MDCs have demonstrated outcomes in relation to child sexual assault and physical assault including:

- Increased rates of children disclosing abuse;
- Higher rates of offender conviction;
- Increased rates of engagement of non-offending
- family members in believing and supporting the child;
- Higher rates of children and families linked to specialised support; and
- Anecdotal evidence of higher rates of retained contact with known sexual offenders.”¹⁷

They also recommended an expansion of MDCs and Police FVU’s.⁴⁹

As a specialist service we work closely with mental health services, drug and alcohol, family violence services, child and family services, child protection, homeless services and placement and out of home care providers. Our partnerships reflect the breadth of complex factors that impact upon the lives of the many individuals and families we support. We aim to provide an empowering, respectful and culturally sensitive service committed to best practice. We are a client focussed service providing specialist therapeutic counselling, assessment, support, crisis intervention, advocacy, information, professional training, secondary consultation and education to individuals, professionals and the community

A 6 year old child, Nina* was seeing a Counsellor and disclosed after some time that she was experiencing abuse from her father. As trust and rapport had been established we explained to Nina that we needed to talk to someone that can keep her safe. Given the co-location and established working relationship with Child Protection, consultation and then notification was a smooth and immediate process.

During weekly sessions we were able to support Nina and her mother through this trauma, including relocation to another living arrangement to ensure her safety and recovery.

“It can take a lot longer for kids to feel safe. Often there is no clear disclosure. If this case had been closed after just a few sessions we would not have known what was going on. I don’t know where she would be today” Counsellor Barwon CASA.

5.2 WHAT IS UNIQUE ABOUT BARWON CASA – A CONTINUUM

Barwon CASA operates as a specialist sexual assault and family violence service located in an MDC and also covers a significantly large geographic area of Victoria. As a not for profit organisation, established in 1978, we have a proud history of delivering the highest quality services. We are accredited with the *Australian Health Care Association* and we are an active member of the *Victorian CASA Forum* and the *National Association of Services Against Sexual Assault (NASASV)* the national body for sexual assault services; we uphold their values, principles and standards.⁵⁰ Our organisation holds a strong commitment to the prevention of violence against women and are involved in numerous activities toward that goal.

Barwon CASA has office locations in Geelong and Horsham and services the four LGAs in the Barwon area and seven LGAs in the Wimmera. ⁵¹ With 40 staff delivering services in Barwon and the Wimmera, we provide short and long term therapeutic counselling and support services to empower people to lead lives free from violence and abuse. We also offer the sexually abusive behaviour treatment service in both locations.

Features of our service include:

Responding to family violence and sexual assault in 11 LGAs in Barwon and Wimmera

- Free and confidential, specialist trauma informed counselling to adults, young people and children who have experienced sexual assault or family violence (and to their non-offending parents, partners, family and friends)
- A 24-hour crisis care response to recent sexual assault, including crisis counselling, support and advocacy to forensic and general medical care and criminal justice services.
- Free on-site legal assistance and a forthcoming on-site nurse practitioner.
- Support groups for men and women who are survivors of recent and historic child sexual assault
- Access to a range of services including VOCAT applications and reports, health services, specialist police and child protection services through the on-site Barwon MDC.
- Support and assistance for victims of institutional abuse who are responding to the Commonwealth Royal Commission

Early Intervention

- A family focused early intervention therapeutic service to children and young people, under the age of 15, who have engaged in problematic or abusive sexualised behaviours (SABTS).
- Advocacy, secondary consultation, community education and professional training.
- Partnership with diverse communities to increase access to information and early intervention. For example Barwon CASA is committed to the rights of women and children with disabilities and has collaborated with Women with Disabilities Victoria as part of the Gender and Disability project.

“I was very scared, but everyone at CASA helped me feel okay”.

Prevention

- A prevention program in 4 secondary schools; 1 state, 2 catholic and 1 special developmental school, that aims to address violence supportive attitudes, build respectful relationships and prevent sexual assault and violence against women.
- Bi-annual Prevention Forum (100 people and key note speakers) to promote best practice approaches for preventing violence against women in Victoria.

Counselling and Advocacy:

Many people who experience sexual assault or family violence will seek counselling, assistance or support at some point in their life to cope with the impact of the trauma. Regardless of the identity, age, gender, occupation or relationship status, the consequences of sexual assault can include devastating and potentially ;long-lasting trauma, both for the person who has experienced the trauma and their immediate family or network. We know based on evidence that the impact and trauma can be reduced through effective therapeutic support; the sooner accessed to the traumatic event the better the outcome. Our continuum of therapeutic support is underpinned by a feminist understanding of the underlying causes of violence against women. We believe that evidence based, trauma informed counselling is essential in working with people who are recovering from violence related trauma. This is supported by a recent systematic review.⁵² We see the damage caused by family violence and sexual assault and believe it is critical to work together to support adults and children who have experienced violence rebuild their lives.

In order to address the multiplicity and complexity of issues that arise in relation to sexual and family violence, it is imperative that people can engage with organisations such as Barwon CASA that is respectful of their rights, recognises the impact of trauma and supports resilience and recovery.

“Counsellors really sincerely care and the front receptionists are beautiful” client feedback



Barwon CASA has extensive knowledge of the sexual assault and criminal justice systems and brings established protocols, referral pathways and partnerships with key stakeholders including Child Protection, Victoria Police, Legal and Justice Services.

“Very supportive, would not be here if it wasn’t for CASA”

We have established local, regional and state-wide networks, memberships, pathways and protocols across the service sector with key stakeholders including Victoria Police, Child Protection, Victorian Institute of Forensic Medicine (VIFM), State-wide Sexual Assault Crisis Line (SACL), Victoria CASA Forum, Victims Assistance and Legal, Services Indigenous Family Violence Regional Action Groups and Integrated Family Violence Services.

We outpost our Counsellors to increase access to services. This outreach includes attending Wathaurong Aboriginal Co-op⁵³, Deakin University, Headspace⁵⁴ and Corio Community Health. This provides people with immediate access to a service in an environment and location they are familiar with. In the MDC we also provide free on-site visiting legal services.

In the *Horsham* office outreach is offered to outlying areas such as Donald, Hamilton and Stawell where there are many issues affecting access to services including isolation of women and children and lack of public transport. Barwon CASA Wimmera Services have recently established a Crisis Care Unit (CCU) to address the need for clients to travel to Ballarat for a forensic medical examination after a sexual assault. The SOCIT and Child Protection whilst not co-located are based nearby and have excellent working relationships that enable better case coordination and planning.

5.2.1 Growth of services

Barwon CASA has managed growth and embraced change in a responsible and considered manner as demonstrated by a steady 50 percent increase in funds since 2009, and the recent transition into the Barwon Multidisciplinary Centre (MDC) in 2012. In 2013 we also commenced providing services in the Wimmera. In recent years there has been a marked increase in the demand upon our services for example in the financial year 2011-2012, we supported over 1,200 people and in 2013-14 a total of 1800 people. The high percentage of children reflects our approach that addressing the effect of trauma at a young age and close to the event is central to reducing the potential long term developmental and emotional disruption for children. Trauma informed therapeutic practice is essential in working with children who have experienced violence. During the 2013/14 year the youngest person we supported was four years of age with the oldest 94 years of age.

5.2.2 Demand management and waiting lists

With this knowledge in mind, we carefully manage and respond to both our child and adult waiting lists to reduce the length of time people wait for service. As demand in our services continues to grow, we continually refine our systems to respond to the need. The above statistics clearly demonstrate the very high need for our specialist services, both in the spectrum of response and our early intervention programs. Our waiting list is generally up to 3 months, however we offer innovative ways of supporting people during this time including single sessions, short term counselling and are always available for phone support. We respond to priority cases as a matter of urgency.

“We’ve been trialling skype counselling sessions where it’s safe to do so, it’s an innovative way to provide therapy, ... victims can be so isolated, they often only have one vehicle and have to rely on the offender to get to town. Huge barriers...” Wimmera Counsellor

5.2.3 Length of service and response to sexual assault and family violence

Barwon CASA provides a 24 hour service; we have a daytime intake team for all referrals and crisis care during standard hours and have a team of crisis care counsellors who can respond to sexual assault after standard business hours. A streamlined intake system carefully triages and ensures access to immediate support for adults and children. Single sessions, short term and longer term support is available in the recognition that people’s needs vary widely.

“The crisis work is very important and so too is the being there to support in the aftermath. We are set up to do this very specialist work to help rebuild people’s lives individually and as families. This includes creative ways to help re-attachment between women and their children (in the counselling post violence). Barwon Counsellor

5.2.4 The Barwon CASA Sexually Abusive Behaviours Treatment Services (SABTS)

The SABTS provides therapeutic support for children and young people up to the age of 15 who display problem or sexually abusive behaviour towards others (but do not have a conviction related to sexual offending) and children under 10 years of age who engage in problem sexual behaviour.

Barwon CASA has developed significant expertise in working with young people who display problem sexualised behaviour (PSB) or sexually abusive behaviours (SAB). In 2012, our staff received commendation by the Victorian Therapeutic Treatment Board for achieving significant outcomes.

A young man, *Jack, 13 years old came to the attention of police as he had sexually and physically assaulted a boy in a public place. He also had a number of other offences relating other matters including – assault, arson and extensive property damage including car break and enter. As a result of this he was remanded in juvenile detention for some time.

Jack already had a significant drug and alcohol abuse issue, had an autism diagnosis and had dropped out of school. He was living with his Dad, who worked full-time and wasn’t home much. Jack attended the SABTS program for assessment and he and his father quickly engaged. His father left work and started to spend more time at home to support his son. This was the key for Jack returning home. Jack didn’t enjoy being in a detention centre and being detained was a strong motivating factor for change. We worked with him and his father intensively for 12 months. During this time he was supported in understanding the detrimental impacts of the choices he was making such as his inappropriate sexual behaviour, his use of marijuana and people he was hanging around with and we supported him in his efforts to break free. DHS were heavily involved in the case. Jack did really well, he started back at school and ended up getting an apprenticeship at a small logistics firm and at a TAFE course.

Treatment services for sexually abusive children and young people include a common assessment framework,⁵⁵ an increased focus on intervention, with the child/young person’s family, school community and service collaborative service provision to address the broader needs of children/young people (rather than the narrow focus on the behaviour). It is important that children and young people are not referred to as “sex offenders”. The terms ‘sexually abusive behaviour’ and ‘problem sexual behaviours’ reflect a concern the behaviour should be labelled, and labelled accurately, not the young person.

Our goal, through early identification and intervention with the child and young person is to prevent the pattern of abusive sexual behaviours and return the child and young person to a more normative developmental path. It is the child and young person’s capacity for rapid growth and development which provides the impetus for addressing the sexualised behaviour at its onset. This accounts for the optimism in the field that earlier interventions improve the likelihood of change.

Currently the SABTS program is funded for 10-15 years old; we often receive referrals for adolescents up to 17 years of age who have sexualised behaviours, many with developmental delays. We believe that this is important work to address early offending.

There are other local programs working with young men who use violence in the home against their families – for a lot of those young boys – they are similar age i.e. 12,13,14,15 year olds – are on trajectory to using violence in their adult relationships. *There is a strong argument for a connected up program for men and young men engaging in any kind of violence – any gender based violence – whether it towards mum or towards partners because the underlying factors are likely to be very much the same.* Certainly the structural inequalities are going to be feeding into the tension of young men to engage in physical and sexual violence against society. Their roles and stereotypes reinforce this. Their “role model” may have been Dad who has engaged in violence against mum.

5.2.5 Early Intervention

Barwon CASA has taken a partnership approach to extend our expertise and knowledge regarding violence against women. We have delivered numerous trainings and professional development to assist specialist and universal services identify, respond and prevent sexual assault and family violence.

- We have partnered with Women with Disabilities Victoria and Gateways to support the Gender and Disability Workforce community of practice.
- We have supported a Pacific wide and Kiribati learning exchange in Geelong and travelled to Kiribati to deliver training and support for a World Bank project to build a multi-agency response to violence against women and children in a low resource setting.⁵⁶

“There is a huge fear and stigma about PSB; how we do we protect and heal? It blows my mind how effective this program is”. SABTs counsellor/advocate

- We trained the TAC and Worksafe in identifying and responding to physical and sexual violence and neglect for their most vulnerable clients.
- We provided training to Pap screen nurses in supporting women who have been sexually abused
- We trained local government bylaw officers in recognising the impact of family violence in the homes they

were visiting

- We have trained Supported Residential Services in gender appropriate facilities, policies and procedures and the impact of violence against women
- We provide a range of other co-located supports including health checks, legal advice and practical support to assist people re-build their lives and live free from violence and trauma.

5.2.6 Primary Prevention programs

Barwon CASA is committed to the primary prevention of violence against women. Given the evidence base to support respectful relationships education in schools we committed funding to a RRE prevention position to roll out the Sexual Assault Prevention Program in Secondary Schools (SAPSS) RRE program in the Barwon region.

“It’s something the boys are interested in; they can ask questions and explore issues they’re possibly going to face at some stage. I think it’d be great if it was mandatory in all schools.” St Joseph’s College The Citizen, March 2014⁵⁷

The broad aims of the SAPSS program are to:

- reduce the incidence of sexual assault in school communities and build respectful relationships
- establish safe environments for young people to discuss relationships, consent and communication
- enhance young people’s knowledge of and access to support
- enhance the capacity of secondary schools to respond to sexual assault.

The main components of the model are:

- 3 year partnership with the school
- whole-staff professional development on the issue of sexual assault
- student curriculum for year 9 or 10
- train-the-trainer workshops for teaching and support staff to deliver student curriculum
- building capacity of the school to sustainably embed the program for future years

“Although the focus is prevention of sexual assault, SAPSS also addresses a range of violence supportive and discriminatory behaviours and social norms that relate to other types of violence against women and, overall, aims to promote cultural shifts towards respect and equality.”⁵⁸

We have partnered with 4 schools to support the implementation of RRE for the past 5 years. Barwon CASA have built excellent partnerships with these schools and have promoted a whole-of-school approach.

In recognition of the needs and rights of students with disabilities and the high level of violence perpetrated against women with disabilities Barwon CASA and Nelson Park Special Developmental School formed a partnership. This very positive and productive partnership has resulted in a tailored program to suit the students. This package could potentially be scaled up and expand to other special developmental schools. Annex 3 contains a case study of how this program and partnership has developed.

Barwon CASA welcomes the opportunity to collaborate with the DET and schools in our region to support the new RRE curriculum and whole-of-school approaches. We understand the SAPPSS package is currently being redeveloped by CASA House. We acknowledge and welcome the roll-out of RRE in Victoria through DET with the gender based violence prevention program *Stepping Out*.⁵⁹

“Sometimes it’s hard for people who are not in the field to understand that sexist jokes and gender inequality contribute to violence against women...” Barwon CASA

6 CHALLENGES AND OPPORTUNITIES

Barwon CASA held consultations with our staff in Geelong and Horsham as well as consulted with MDC partner staff, Child Protection and SOCIT. A number of challenges and opportunities were identified that have assisted in forming our recommendations and suggestions going forward. We welcome further discussion with the *Royal Commission into Family Violence*.

The feedback from consultations focussed on the need to:

- Build on the success of the Barwon MDC
- Strengthen and expand services at Barwon CASA
- Improve accountability for perpetrators of family violence by reforms in the state and federal justice system
- Increase collaboration and integration between family violence and sexual assault services
- Build on the success of the SAPPSS program and roll out RRE in Barwon, Wimmera and Statewide
- Invest in and roll out primary prevention across Victoria in all settings
- Increase resources for regional, rural and remote services to increase access to services.

6.1 BUILDING ON THE SUCCESS OF THE MDC

The consultations with external stakeholders revealed widespread positive regard for the MDC and for the dedication of all colleagues who work together to achieve better outcomes for clients presenting for services to the MDC. A number of suggestions were made to expand service delivery and enhance shared practice, documentation monitoring and evaluation.

Discussion and feedback during consultations was overwhelmingly positive. There was a strong consensus that the MDC was a critically important initiative for enhanced client services, outcomes and confidence in the justice and service system.

Consultations led by Barwon CASA raised the following;

1. **Lack of an MDC monitoring and evaluation framework:** Establishment of an MDC monitoring and evaluation framework, performance measures with data collection and case management.
2. **Lack of MDC shared data collection:** Consultations revealed a need to establish a shared data base to analyse cross-agency referrals, and analyse a range of MDC trends and issues. There is currently no current data collection to assess MDC service delivery, demand, track client outcomes
3. **Need for a State-wide evaluation of the MDC model progress:** The need to resource and participate in a state-wide evaluation of the MDC model
4. **Lack of evidence based shared practice frameworks:** The need to develop and embed a shared practice framework using a gender equality and client focus for the MDCs as a whole and for each

of the MDC partners, including resources shared professional development and a community of practice. This must include a shared approach to Taking care of our MDC team including shared standards for Vicarious Trauma and other forms of clinical support to ensure professionals are high performing and supported in their work.

5. **The growing interest in co-location from legal and social services:** A number of professionals and services have expressed interest in the MDC model. A number of suggestions were made during our consultations to explore the expansion of the MDC into a multi service hub. This would enable greater coordination of services; stakeholders could meet regularly (such as lawyers, OPP, Police Family Violence Unit, Family Violence Services) to undertake demographic analysis, to consider Police crime statistics, high risk and recidivist cases and hot spots, service delivery themes, complex families and individual cases, analyse broader service demands and trends, and would enable services to work together to meet demand in a timely and efficient manner.

Working together to deliver a flexible model which appropriately services diverse and complex population groups across large geographic areas, enhanced systems planning, targeting of resources to those most in need, together with a comprehensive analysis of the Divisional service trends, factors and needs. The advantages of this might be less duplication of systems and resources, comprehensive risk assessment, triaging and demand management would enable services to prioritise cases and contribute to case consultations, resources and strategies. A multi-service hub could provide an authorising environment for innovative and coordinated responses. It could promote consistency through appropriate management, timely coordination and shared communication of high risk cases.

6. **Needs of high risk victims of family violence:** The needs of high risk victims of family violence were raised and queries about how the family violence and sexual assault response could better coordinate to uphold their safety and wellbeing. Suggestions included a feasibility study to assess expanding the functions of the MDC to include high risk family violence investigations to support the Geelong FVU.
7. **Expanding VARE criteria:** Explore the feasibility of extending VARE recording to all victims of sexual and family violence.
8. **Increasing access to services for people with disabilities:** Consultations raised the commitment in continuing to partner with a range of organisations such as Women with Disabilities Victoria, Gateways, TAC and Nelson Park School. Suggestions also included rolling out the making *Rights a Reality*, the RRE SAPPs program for students with intellectual disabilities.⁶⁰
9. **Information sharing:** Barwon CASA balances its legal and ethical practice requirements to enable appropriate and consensual information sharing with MDC partners. This is balanced with the presenting risk for clients, particular needs and different legislative framework for the Police and Child Protection. Further advice and research could be undertaken to further explore information sharing across the MDC to maximise client outcomes and safety.
10. **Need to document and share learnings and promote research and practice excellence:** The MDC is a great learning and research platform to help inform better systemic responses to sexual assault and family violence, including informing better evidence briefs and client trust in the system.

6.2 STRENGTHENING SERVICES AT BARWON CASA

Staff at Barwon CASA raised a number of issues and suggestions about how to strengthen and expand current service delivery to people who have experienced sexual assault or family violence.

Access to and information about rights and services: Even though every man, woman, girl and boy has the basic human and legal right to live free from violence, many people do not know their rights, where they can get help and if they do, how to access that help in a timely way. There is much needed investment in awareness campaigns and information distribution to our diverse communities. We also find that there is a need for education on bystander action, that increasingly people are asking us how to have conversations

with people who use or experience violence. Increased media attention has created community awareness of violence against women and children but not the skills to address the concerns.

“we need to have people more informed of everything they can do to help people” Client feedback

Enhancing service access and integration: As confidence in reporting sexual assault and family violence improves so too does the demand on services. In the past 5 years reporting to Victoria Police of both family violence and sexual assault has increased.⁶¹ Data indicates that 4 out of 5 women did not report the most recent sexual assault to Police, how we can plan services and law enforcement agencies that are able to respond to peoples requests for crisis assistance and longer term assistance to rebuild their lives.⁶²

There were a number of suggestions about how the services could be improved to respond to complex needs, be flexible and timely. These included flexible client funding packages, increase co-location and collaboration of a range of services, build on and improve specialist intake, including triage and introduce a sexual assault case management approach. The feedback from counsellors was that timely short and long term skilled therapeutic, trauma informed support can help reduce the traumatic impacts of sexual assault and family violence to adults and children.

Counsellors also expressed interest in enhancing outreach and reflected on issues for rural and regional areas including travel times, lack of transport, isolation for women and children, very high rates of family violence and sexual assault in rural areas.

“..a 16year old came to Horsham for a morning appointment and couldn’t get a bus home until 10.30pm that night, she had to hang around for 12 hours..” Wimmera

Increasing access to services for people with disabilities: There is opportunity to increase access to our services for people with disabilities and to partner with local and statewide organisations to provide prevention, early intervention and response support and partnership. Numerous opportunities identified include statewide, regional and local roll out of the *Making Rights a Reality* program trialed and evaluated by SECASA.

“While disability organisations need to be able to identify abuse and then report it the MRR referral data strongly suggests that an equal if not bigger effort should be made to ensure people with disabilities can independently disclose and report to mainstream services like the CASA and Police.”⁶³

Limited access to Forensic Medical Examinations (FME) for Adults and Children: There was consistent feedback from both the Geelong and Horsham staff that access to Forensic Medical Examinations whilst delivered by dedicated doctors, are in short supply.

We are lucky to have such a dedicated doctor, who has been doing it for 20 years, if he ever leaves there will be issues” Wimmera CASA

“I would like for no client, Police Officer or CASA staff member to have to travel to Melbourne for the purpose for a FME. I do not believe it is best practice and it certainly discourages clients when deciding whether to have a forensic medical”. SOCIT

Strengthen the afterhour’s service response to sexual assault and family violence: In Victoria we have both the Sexual Assault Crisis Line (SACL) and the Safe Steps Family Violence Response Centre who each provide a 1800 phone service with afterhour’s service coordination across Victoria to local services. Both services provide a similar response and experience peak demands beyond capacity and this in turn flows on, resulting in women experiencing difficulty accessing services and local providers not being accessible to their community. We rely on these two organisations as the afterhours entry points to our service systems.

Increase access to our service for Aboriginal women, men and children: Barwon CASA would like to build on our work with supporting and partnering with our Aboriginal community. We provide a visiting service to the Local Aboriginal Co-operative however we are exploring development of a dedicated Aboriginal sexual assault counsellor role at Barwon CASA and Wimmera to work in a more integrated way with Aboriginal people.

SABTs: There is increasing demand for access to SABTs programs. Barwon CASA would like the age of eligibility to be increased to 17 to accommodate for an older cohort of young people presenting for services. This area of services is critical to supporting young people to develop healthy sexuality and interrupting the cycle of violence and trauma. The number of places available is limited and the workforce is specialist. We see a need for increase in resources for gender sensitive service delivery and workforce development.

Increase roll out Primary Prevention programs across Barwon and the Wimmera and continue to partner with specialist organisations such as Barwon CASA: Barwon CASA is committed to the primary prevention of men's violence against women. We endorse the VicHealth framework⁶⁴ and look forward to the new national framework in development by Our Watch. There are a range of evaluated programs and approaches that have been developed and tested by VicHealth and prevention partners which could be rolled out State-wide. Roll-out of these initiatives in regional areas would be of great benefit.

The unique combination of research, evidence generation, practice support, Evaluation Capacity Building and partnership has been and continues to be a unique contribution to primary prevention and gender equality in Victoria. Feedback included the importance of primary prevention programming being rolled out state-wide with support from VicHealth, Our Watch and prevention partners in local and state government, non-government agencies, sport clubs, businesses and specialist services. Programs such as such as Baby Makes 3, Respectful Relationships in Schools and Workplace initiatives could be rolled out. The workforce development through programs such as the PVAW short course, and other training⁶⁵ has been critical to developing and supporting a PVAW workforce.

Barwon CASA are proud of the work we have carried out through our SAPPS program in partnership with 4 schools. We understand that DET has commenced roll-out of the new Steeping Out school RRE program. Barwon CASA are keen to contribute as an RRE partner in Barwon. We have developed capacity in training of teachers, co-facilitating in schools and student support when disclosures are made. We have also developed a strong partnership with Nelson Park Developmental School and have a training package suitable for students with disabilities.

6.3 DEVELOPING STATE-WIDE SYSTEMIC CAPABILITY TO UPHOLD SAFETY FOR VICTIMS AND ACCOUNTABILITY OF PERPETRATORS

Consultations held with MDC staff highlighted a range of challenges and opportunities in working together to eliminate all forms of violence against women and children. There was acknowledgment of excellent initiatives such as improved Police responses, the Geelong Police Family Violence Unit, the RAMP High risk program, the weekly Geelong Multi Agency meeting chaired by Victoria Police to name but a few. However there was great concern expressed that the system overall is weakened by high demand and low levels of effective systemic accountability for perpetrators and lack of safety and options for victims of all ages.

Suggestions for improvements in the response to family violence include the following;

- Utilising an agreed evidence based approach to women's safety and a clear gendered analysis to inform shared work together to prevent reoccurrence of violence against women and children.
- Shared multidisciplinary professional development and training in Barwon and Wimmera through resourced ongoing specialist professional development in understanding the gendered dynamics of violence against women for all key stakeholders in universal and specialist services, courts (registry staff and judiciary) and corrections.⁶⁶

- Increasing the capacity of the local system to hold perpetrators to account in order to intervene and prevent reoffending from first responders including Police to Corrections with effective immediate penalties for breaches of IVOs, improved quality and quantity of Men’s Behaviour Change Programs and partner contact, exploring sexual assault as a risk indicator for homicide, flexibility to assess and respond to immediate risk, take women and children’s experience and fear more seriously, increased sentencing penalties and remand of perpetrators to protect women and children. There were concerns raised about court resources, safety at court for victims of all ages and apparent low usage and inappropriate location of the remote witness facilities at Geelong Court.
- Increased investigative and intelligence resources for the Geelong Police Family Violence Unit and capacity to outreach to the MDC at least one day per week or include the MDC in relevant high risk and multi-agency meetings.
- Improving links and collaboration between sexual assault and family violence services was also a theme of consultations. Barwon CASA are an active member of the *Barwon Area Integrated Family Violence Committee*.

6.4 INVESTING IN GENDER EQUALITY AND PRIMARY PREVENTION IN VICTORIA

States hold the primary accountability for eliminating violence against women and children in both state and non-state actors.⁶⁷ The recognition that all governments across the world have a legal responsibility to prevent violence against women and girls from occurring and re-occurring and protect victims after violence has occurred, is enshrined in the *due diligence principle* emanating from CEDAW General Comment 19.⁶⁸ This obliges governments to take action to commit to a comprehensive approach to addressing violence against women through the 5 P’s - prevention, protection, prosecution, punishment, and provision of redress. It is also obliges them to ensure that individuals (or “non-state” actors) are held accountable.

There is an opportunity to invest in evidence based primary prevention and community mobilisation that includes government and community-driven development engaging multiple stakeholders and addressing gender norms.⁶⁹

Evidence from VicHealth, WHI, EU, and recent systematic reviews and lessons learnt from Pacific women’s organisations such as the *Fiji Women’s Crisis Centre* and *Vanuatu Women’s Centre* show promise. They illustrate that concerted long term women’s rights based programming which saturates communities with consistent gender equitable approaches and support can result in transforming individuals, families, workplaces, communities and can reduce and prevent violence against women.⁷⁰

The work of VicHealth, Our Watch, Local Government, Women’s Health Services, many other NGOs, Government, workplaces and businesses are a strong platform upon which to build a strong prevention platform and roll out initiatives.

There is an urgent need to embed and more comprehensively mandate gender equality through enduring legislative and policy reforms coupled with adequate resources, courageous leadership and effective, strong measures. There are opportunities to change the workplaces and communities in which we live, work and play. Victoria Police has led the way with family violence and sexual assault reforms. There is an opportunity for large workspaces to also embrace prevention and gender equality approaches to further model these reforms.

References

- Aboriginal Family Violence Prevention and Legal Service Victoria, 2015, The Sisters Day Out program comes to Lake Tyers, FVPLS Victoria. Accessed <http://www.fvpls.org/images/files/MR%20The%20Sisters%20Day%20Out%20program%20comes%20to%20Lake%20Tyers.pdf>
- Aboriginal Family Violence Prevention and Legal Service Victoria, Accessed <http://www.fvpls.org/Prevention-and-Education.php#SistersDayOut>
- Arango, Morton, Gennari, Kiplesund, Ellsberg 2014, 'Interventions to Prevent or reduce Violence Against Women and Girls: A Systematic Review of Reviews', Women's Voice and Agency Research Series 2014, No 10, The World Bank. Accessed <http://www.worldbank.org/content/dam/Worldbank/document/Gender/Arango%20et%20al%202014.%20Interventions%20to%20Prevent%20or%20Reduce%20VAWG%20-20A%20Systematic%20Review%20of%20Reviews.pdf> Brownridge, DA 2009, Violence Against Women: Vulnerable Populations, Routledge, New York.
- CASA Forum, 2008, Victorian Centres Against Sexual Assault Standards of Practice, Department of Human Services. Accessed http://www.dhs.vic.gov.au/__data/assets/pdf_file/0008/581462/casa-forum-standards-nov2008.pdf
- Chung, D 2013, 'Understanding the Statistics about Male Violence Against Women White Ribbon Research Series – Paper No. 5', White Ribbon, Accessed <http://www.whiteribbon.org.au/uploads/media/Donna-Chungs-Research-Report.pdf>
- Department of Education and Early Childhood Development Melbourne, 2014, Building Respectful Relationships Stepping out against gender-based violence, State of Victoria (Department of Education and Early Childhood Development). Accessed <https://fuse.education.vic.gov.au/content/29a93fbb-0553-4f9c-a382-c30f29afb120/BRR%20full%20document%20110614.pdf>
- Department of Human Services 2012, Adolescents with sexually abusive behaviours and their families Best interests case practice model Specialist practice resource, DHS. Accessed http://www.dhs.vic.gov.au/__data/assets/pdf_file/0005/589721/adolescents-sexually-abusive-behaviours-families-specialist-practice-resource-2012.pdf
- Department of Human Services 2013, Strategy 2013 – 2020 Victoria's Vulnerable Children our shared responsibility, DHS. Accessed http://www.dhs.vic.gov.au/__data/assets/pdf_file/0010/764281/Victorias_vulnerable_children_strategy.pdf
- Department of Human Services, Study of Reported Rapes in Victoria 2000-2003 Summary Research Report Statewide Steering Committee to Reduce Sexual, DHS. Accessed http://www.dhs.vic.gov.au/__data/assets/pdf_file/0004/644152/StudyofReportedRapes.pdf
- Department of Human Services 2005, Reforming the Family Violence System in Victoria, DHS. Accessed from http://www.dhs.vic.gov.au/__data/assets/pdf_file/0020/643124/reforming_family_violence.pdf
- European Parliament Citizens' Rights and Constitutional Affairs 2015, Gender Equality A new strategy for gender equality post 2015, European Parliament. Accessed http://www.europarl.europa.eu/RegData/etudes/STUD/2014/509984/IPOL_STU%282014%29509984_EN.pdf
- Fergus, L, Flood, M & Heenan, M 2009, 'Respectful Relationships Education Violence prevention and respectful relationships education in Victorian secondary schools', State of Victoria (Department of Education and Early Childhood Development), Accessed <http://www.education.vic.gov.au/school/teachers/health/pages/respectrel.aspx>
- Frawley, P 2014, 'Making Rights a Results: Final Evaluation report 2014, South Eastern Centre Against Sexual Assault' accessed at <http://www.secasa.com.au/assets/Documents/MRR-final-evaluation-report-2014.pdf>, 18th May 2015.
- Gay Lesbian Health Victoria, 2015, GLBTI Inclusive Practice, GLBV accessed at <http://www.glvh.org.au/glbti-inclusive-practice>
- Hughes, K, Bellis, M.A. et al, 2012, 'Prevalence and risk of violence against adults with disabilities: a systematic review and meta-analysis of observational studies', Accessed [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(11\)61851-5/abstract](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(11)61851-5/abstract)
- Khalifeh, H, Howard, L et al, 2013, 'Violence Against People With Disability in England and Wales: findings from a National Cross-Sectional Survey', PLOS ONE, 8,2, e55952
- Mitchell A, Patrick K, Heywood W, Blackman P, Pitts M. 2014. '5th National Survey of Australian Secondary Students and Sexual Health 2013', (ARCSHS Monograph Series No. 97), Australian Research Centre in Sex, Health and Society, La Trobe University. Accessed [1] http://www.redaware.org.au/wp-content/uploads/2014/10/31631-ARCSHS_NSASSSH_FINAL-A-3.pdf
- News.com.au, 2015, The moment that got Tara Brown's back up: 60 Minutes confronts monster. News.com.au . Accessed <http://www.news.com.au/entertainment/tv/the-moment-that-got-tara-browns-back-up-60-minutes-confronts-monster/story-fn948wjf-1227358036377>
- O'Brien, W 2010, 'Australia's Response to Sexualised or Sexually Abusive Behaviours in Children and Young People', Australian Crime Commission. Accessed

Barwon Centre Against Sexual Assault Submission
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file:///C:/Users/user/Documents/Royal%20Commission%2015/SABTs/NIITF-PSB-REPORT-2010.pdf

- Office of Women’s Policy 2010, A Right to Safety and Justice, Strategic Framework to Guide Continuing Family Violence Reform in Victoria 2010-2020, Office of Women’s Policy. Accessed <http://thelookout.sites.go1.com.au/sites/thelookout.sites.go1.com.au/files/ARighttoSafetyandJustice.pdf>
- South East Centre Against Sexual Assault, 2012, Standards of Practice for Problem Sexual Behaviours and Sexually Abusive Treatment Programs, SECASA. Accessed <http://www.secasa.com.au/assets/Documents/cease-standards-of-practice.pdf>
- Springvale Monash Legal Centre 2015, The Victorian Register of Sex Offenders, SECASA. Accessed <http://www.secasa.com.au/pages/the-victorian-register-of-sex-offenders/>
- Steering Committee for the Review of Government Services, 2009, Overcoming Indigenous Disadvantage: Key Indicators 2009, Canberra: Productivity Commission.
- FVPLS Victoria, Strengthening law and justice outcomes for Aboriginal and Torres Strait Islander victims/survivors of family violence and sexual assault and women and children: National policy issues — A Victorian perspective, FVPLS Victoria. Accessed <http://www.fvpls.org/images/files/FVPLS%20Policy%20Paper%201.pdf>
- VicHealth 2011, Framework for Preventing Violence Against Women, VicHealth. Accessed <https://www.vichealth.vic.gov.au/programs-and-projects/vichealth-framework-for-preventing-violence-against-women>
- Victoria Police, Barwon Centre Against Sexual Assault and Child Protection, 2012, Protocol for the local operation of the Barwon Multidisciplinary Centre.
- Victorian Government Department of Human Services Melbourne 2012, Victorian State Disability Plan 2013 – 2016. DHS, Accessed http://www.dhs.vic.gov.au/_data/assets/pdf_file/0009/749862/Victorian-state-disability-plan-2013-2016-180113.pdf
- Victorian Human Rights and Equal Opportunity Commission 2010, The Equal Opportunity Act 2010. Accessed <http://www.humanrightscommission.vic.gov.au/index.php/the-law/equal-opportunity-act>
- Victorian Human Rights and Equal Opportunity Commission 2006, Charter of Human Rights and Responsibilities, VHREOC. Accessed <http://www.humanrightscommission.vic.gov.au/index.php/the-charter>
- Woodlock D, Healey L, Howe K, McGuire M, Geddes V and Granek S 2014: ‘Voices Against Violence Paper One: Summary Report and Recommendations’, (Women with Disabilities Victoria, Office of the Public Advocate and Domestic Violence Resource Centre Victoria). Accessed <http://www.wdv.org.au/documents/Voices%20Against%20Violence%20Paper%20One%20Executive%20Summary.pdf>
- YWCA Australia 2014, CEDAW Shadow Report A non-government perspective on Australia’s implementation of the United Nations Convention on the Elimination of all forms of Discrimination Against Women (CEDAW), YWCA Australia. Accessed <http://www.ywca.org.au/sites/ywca.org.au/files/CEDAW%20Shadow%20Report%20FINAL%2020141218%2001.pdf>
- Victorian Human Rights Commission, Accessed <http://www.humanrightscommission.vic.gov.au/index.php/our-projects-a-initiatives/independent-review-victoria-police>
- Victorian Judicial College, Sexual Assault Manual - 4.5.2 - Use of a VARE statement, VJC. Accessed <http://www.judicialcollege.vic.edu.au/eManuals/SAM/index.htm#29185.htm>
- Victorian Law Reform Commission 2005, Review of Family Violence Laws Report, VLRC. Accessed <http://www.lawreform.vic.gov.au/sites/default/files/Review+of+Family+Violence+Laws+Report.pdf> Review of Family Violence Laws Report
- Victorian Law Reform Commission 2010, Protection Applications in the Children’s Court Final Report 19, Victorian Law Reform Commission. Accessed <http://www.lawreform.vic.gov.au/sites/default/files/PACC.pdf>
- Victorian Law Reform Commission 2014, Victorian Law Reform Commission Sexual Offences Final Report 2014, Victorian Law Reform Commission. Accessed http://www.lawreform.vic.gov.au/sites/default/files/FinalReport_o.pdf
- Wall, L 2012, ‘The many facets of shame in intimate partner sexual violence’, Australian Institute of Family Studies. Accessed <http://www3.aifs.gov.au/acssa/pubs/researchsummary/ressum1/rs1a.html>
- Women with Disabilities Victoria, 2013, ISSUE 13 : OCTOBER 2013 The Violence and Disability Quarterly, WDV. Accessed www.wdv.org.au/newsletters.htm#ViolenceNews
- Worth, C 2008, ‘The Forth Wave Continued – The Incorporation of Services for Young People with Sexually Abusive Behaviours into Centres Against Sexual Assault’, South Eastern Centre Against Sexual Assault. Accessed <http://www.secasa.com.au/assets/Documents/the-fourth-wave-continued-the-incorporation-of-services-for-young-people-with-sexually-abusive-behaviours-into-centres-against-sexual-assault.pdf>

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- ¹ <http://www.education.vic.gov.au/school/teachers/health/pages/respectrel.aspx>
- ² <https://fuse.education.vic.gov.au/content/29a93fbb-0553-4f9c-a382-c30f29afb120/BRR%20full%20document%20110614.pdf>
- ³ Including sexual assault, family violence, women's mental health and women's health services.
- ⁴ See Women with Disabilities article about Nelson Park School and Annex 3 with the complete article <http://us6.campaign-archive1.com/?u=17e5b6c173bd34056f6c72cc1&id=9c161592d0&e=bb886396e9>
- ⁵ <http://www.news.com.au/entertainment/tv/the-moment-that-got-tara-browns-back-up-60-minutes-confronts-monster/story-fn948wjf-1227358036377>
- ⁶ Arango, Morton, Gennari, Kiplesund, Ellsberg, Interventions to Prevent or reduce Violence Against Women and Girls: A Systematic Review of Reviews, Women's Voice and Agency Research Series 2014, No 10, The World Bank, 2014, pg 25. See also; *What works to Prevent Violence, a global program to prevent violence against women and girls: A summary of the evidence.* 2014, DFID, <http://www.whatworks.co.za/documents/2-a-summary-of-the-evidence-and-research-agenda-for-what-works/file>
- ⁷ <https://www.vichealth.vic.gov.au/programs-and-projects/vichealth-framework-for-preventing-violence-against-women>
- ⁸ <http://www.premier.vic.gov.au/new-crime-statistics-highlight-family-violence-and-ice-use>
- ⁹ ABS, Personal Safety Survey 2012 indicates that domestic and sexual violence is overwhelmingly committed by men against women. 1 in 6 Australian women had experienced physical or sexual violence from a current or former partner compared to 1 in 19 men.
- ¹⁰ The report, *Global and regional estimates of violence against women: Prevalence and health effects of intimate partner violence and non-partner sexual violence*, http://www.who.int/mediacentre/news/releases/2013/violence_against_women_20130620/en/
- ¹¹ Investing in Gender Equality: Ending Violence against Women and Girls, UNIFEM, 2010, http://www.aidsdatahub.org/sites/default/files/documents/EVAWkit_01_InvestingInGenderEquality.pdf
- ¹² The [Global Gender Gap Report 2013](#) puts Australia at 24 on the gender gap index, just below the United States. In 2006 Australia was ranked 15th out of 136 countries
- ¹³ <http://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2014/brief-essential%20services-web.pdf>, ESSENTIAL SERVICES FOR WOMEN AND GIRLS SUBJECT TO VIOLENCE; Due Diligence principle
- ¹⁴ <https://gvrnconference.arts.unsw.edu.au/node/40/session/250>
- ¹⁵ *Getting serious about change: the building blocks for effective primary prevention of men's violence against women in Victoria.*
- ¹⁶ Australian Institute of Family Studies, 2010
- ¹⁷ http://www.adfvc.unsw.edu.au/PDF%20files/Research_&_Practice_Brief_1.pdf
- ¹⁸ <http://www.whiteribbon.org.au/uploads/media/Donna-Chungs-Research-Report.pdf>
- ¹⁹ The ABS 2012 Personal Safety Survey found that Australian women are most likely to experience physical and sexual violence in their home at the hands of a male current or ex-partner. <http://www.anrows.org.au/publications/fast-facts/key-statistics-violence-against-women>
- ²⁰ <http://www3.aifs.gov.au/acssa/pubs/researchsummary/ressum1/rs1a.html>
- ²¹ Victoria Police, Crime Statistic's 2013/2014, http://www.police.vic.gov.au/content.asp?a=internetBridgingPage&Media_ID=72176
- ²² <http://www.justice.vic.gov.au/utility/news+archive/victorias+latest+crime+statistics+released>
- ²³ Family Violence Protection Act 2008, Crimes Act 1958 and amendments.
- ²⁴ See for examples <https://www.vichealth.vic.gov.au/our-work/preventing-violence-against-women>, Why Do Some Men Use Violence Against Women And How Can We Prevent It? Partners for Prevention. A UNDP, UNFPA, UN Women And UNV Regional Joint Programme For Gender-Based Violence Prevention In Asia And The Pacific Quantitative Findings From The United Nations Multi-Country Study On Men And Violence In Asia And The Pacific, 2013, <http://www.partners4prevention.org/sites/default/files/resources/p4p-report.pdf>, see age 18 recommendations. Vanuatu Women's Centre, 2011, The Vanuatu National Survey on Women's Lives and Family Relationships, page 15, The UN Women [Report of the Expert Group Meeting on Prevention of Violence against Women and Girls](#), 2012 <http://www.unwomen.org/-/media/Headquarters/Attachments/Sections/Library/Publications/2012/11/Report-of-the-EGM-on-Prevention-of-Violence-against-Women-and-Girls.pdf>, 2010 World Health Organisation (WHO) report, [Preventing Intimate Partner and Sexual Violence: Taking Action and Generating Evidence](#)
- ²⁵ <http://www.theage.com.au/victoria/yooralla-manager-caught-on-camera-in-sex-activity-with-client-court-told-20150522-gh70cb.html>
- ²⁶ From unpublished briefing paper on violence against women with disability in disability care, May 2015, quoting For example, K. Hughes, M.A. Bellis et al, 2012, 'Prevalence and risk of violence against adults with disabilities: a systematic review and meta-analysis of observational studies,' *Lancet*, doi:10.1016/S0140-6736(11)61851-5, [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(11\)61851-5/abstract](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(11)61851-5/abstract); R. B. Hughes, E. M. Lund et al, 2011, 'Prevalence of Interpersonal Violence Against Community-living Adults with Disabilities: A Literature Review', *Rehabilitation Psychology*, 56, 4: 302-319; H. Khalifeh, L. Howard et al, 2013, 'Violence Against People With Disability in England and Wales: findings from a National Cross-Sectional Survey', *PLOS ONE*, 8,2, e55952; S-B. Plummer and P. Findley, 2012, 'Women with Disabilities' Experience with Physical and Sexual Abuse: Review of the Literature and Implications for the Field, *Trauma, Violence and Abuse*, 13, 1: 15-29; D. A. Brownridge, 2009, *Violence Against Women: Vulnerable Populations*, Routledge, New York.
- ²⁷ http://www.dhs.vic.gov.au/__data/assets/pdf_file/0004/644152/StudyofReportedRapes.pdf
- ²⁸ <http://www.wdv.org.au/documents/Voices%20Against%20Violence%20Paper%20One%20Executive%20Summary.pdf>
- ²⁹ Indigenous females are five times more likely to be victims of homicide than non-Indigenous females. Indigenous females were 35 times more likely to be hospitalised due to family violence relate assaults and Indigenous males 21.4 times as likely than non-Indigenous females and males.

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- ²⁹ The research and recommendations from this report warrant revisiting in order to address the systemic discrimination and inequity faced by many Aboriginal women and children. <http://www.fvpls.org/images/files/FVPLS%20Policy%20Paper%201.pdf>
- ³⁰ <http://www.fvpls.org/Prevention-and-Education.php#SistersDayOut>
- ³¹ <http://www.fvpls.org/images/files/MR%20The%20Sisters%20Day%20Out%20program%20comes%20to%20Lake%20Tyers.pdf>
- ³² <http://www.glhv.org.au/glbti-inclusive-practice>
- ³³ CALD, Refugees, see in touch report on barriers; InTouch Inc. Multicultural Centre Against Family Violence ,2010, Barriers to the Justice System Faced by CALD Women Experiencing Family Violence.
- ³⁴ <http://thelookout.sites.go1.com.au/sites/thelookout.sites.go1.com.au/files/ARighttoSafetyandJustice.pdf>
- ³⁵ Noting the Family Violence State-wide Advisory Committee, the Sexual Assault Advisory Committee, the Family Violence IDC co-chaired by Victrola Police and then Office of Women’s Policy (DPCD), the Sexual Assault Reform Advisory Committee, chaired by DOJ, http://www.dhs.vic.gov.au/_data/assets/pdf_file/0020/643124/reforming_family_violence.pdf
- ³⁶ <http://www.humanrightscommission.vic.gov.au/index.php/the-charter>
- ³⁷ <http://www.humanrightscommission.vic.gov.au/index.php/the-law/equal-opportunity-act>
- ³⁸ See CEDAW Shadow report, <http://www.ywca.org.au/sites/ywca.org.au/files/CEDAW%20Shadow%20Report%20FINAL%2020141218%2001.pdf>
- ³⁹ http://www.europarl.europa.eu/RegData/etudes/STUD/2014/509984/IPOL_STU%282014%29509984_EN.pdf; <http://icclr.law.ubc.ca/sites/icclr.law.ubc.ca/files/publications/pdfs/Compendium.pdf>
- ⁴⁰ The Register operates under the *Sex Offenders Registration Act 2004* and aims to: Reduce the likelihood of registered sex offenders re-offending in the community; Assist the investigation and prosecution of any future offences, and Prevent sex offenders from working in child-related employment or volunteer duties. <file:///C:/Users/user/Downloads/Sex-Offenders--2013-14.pdf>; <http://www.secasa.com.au/pages/the-victorian-register-of-sex-offenders/>
- ⁴¹ <http://www.dhs.vic.gov.au/cpmanual/practice-context/child-protection-program-overview/1595-multidisciplinary-centres-mdcs-practice-requirements>
- ⁴² Protocol between Victoria Police, Barwon Centre Against Sexual Assault and Child protection for the local operation of the Barwon Multidisciplinary Centre. 2012.
- ⁴³ Personal communication Barwon CASA, May 2015.
- ⁴⁴ Feedback at MDC workshop, May 2015.
- ⁴⁵ file:///C:/Users/user/Documents/Royal%20Commission%2015/SABTs/Patrick_Tidmarsh__Rod_Jouning_9-Nov-12.pdf; VARE, Sexual Assault Manual, Judicial College, <http://www.judicialcollege.vic.edu.au/eManuals/SAM/index.htm#29185.htm>; <http://wdv.org.au/documents/Fact%20Sheet%203%20Violence.pdf>
- ⁴⁶ TRANSCRIPT
FAMILYANDCOMMUNITYDEVELOPMENTCOMMITTEE,inquiryintothehandlingofchildabusebyreligiousandotherorganisations
Melbourne — 9 November 2012
file:///C:/Users/user/Documents/Royal%20Commission%2015/SABTs/Patrick_Tidmarsh__Rod_Jouning_9-Nov-12.pdf
- ⁴⁷ http://www.police.vic.gov.au/content.asp?a=internetBridgingPage&Media_ID=1717
- ⁴⁸ <http://www.dhs.vic.gov.au/cpmanual/practice-context/specialist-services-for-children-and-families/1595-multidisciplinary-centres-mdcs/3>
- ⁴⁹ This includes expanding the utilisation of multidisciplinary centres that bring together Victoria Police, Department of Human Services and support personnel, and counsellors from Centres Against Sexual Assault, and full utilisation of Victoria Police Sexual Abuse and Child Abuse Investigation teams, and Victoria Police Family Violence Response Units. http://www.childprotectioninquiry.vic.gov.au/images/stories/inquiry/volume1/cpi%207649%20web-pdf%20volume%201%20protecting%20victoria_s%20vulnerable%20children_%20inquiry_bm.2.pdf
- ⁵⁰ http://www.dhs.vic.gov.au/_data/assets/pdf_file/0008/581462/casa-forum-standards-nov2008.pdf
- ⁵¹ City of Greater Geelong, Queenscliffe Borough, Surf Coast Shire, Colac Otway Shire, Horsham Rural City ,Hindmarsh West Wimmera, Northern Grampians,Southern Grampians,Yarriambiack, Part of Glenelg Shire, north of the Princes Highway
- ⁵² “For instance, psychosocial support has, in some cases, decreased violence in high income settings” page 1, <http://www.worldbank.org/content/dam/Worldbank/document/Gender/Arango%20et%20al%202014.%20Interventions%20to%20Prevent%20or%20Reduce%20VAWG%20-%20A%20Systematic%20Review%20of%20Reviews.pdf>
- ⁵³ <http://www.wathaurong.org.au/>
- ⁵⁴ <http://www.headspace.org.au/>
- ⁵⁵ Considering the varied presentation and nature of children and young people we see who have engaged in problem sexual behaviours or sexually abusive behaviours, comprehensive assessment is required to facilitate treatment and intervention strategies including assessing the child or young person’s psychological, social, cognitive and medical needs, family relationships, risk factors and risk management possibilities. Through assessment, we identify specific risk factors that serve to maintain sexual offending behaviours; this guides treatment strategies to target the development of protective factors.
- ⁵⁶ <https://www.youtube.com/watch?v=ySsYlzT8HyM&feature=share&list=PL6FE8A490Bo8CB2DB>; In October 2014 representatives from 15 organizations in seven Pacific Island countries gathered in Melbourne, Australia for a week-long knowledge and learning exchange organized by UN Women. It was an opportunity to share experiences and learn both from each other and from a number of organizations <https://www.youtube.com/watch?v=txo-4bflxqk>
- ⁵⁷ <http://www.thecitizen.org.au/features/macho-jocks-proud-feminists-all-boys-school-redefines-itself>
- ⁵⁸ CASA House program, <http://www3.aifs.gov.au/acssa/pubs/issue/i19/i19.pdf>
- ⁵⁹ <https://fuse.education.vic.gov.au/content/29a93fbb-0553-4f9c-a382-c30f29afb120/brr%20full%20document%20110614.pdf>

⁶⁰ <http://www.secasa.com.au/assets/Documents/MRR-final-evaluation-report-2014.pdf>

⁶¹ Family violence incidents rose 8 per cent on 2013, with more than 68,000 recorded in Victoria last year. Mr Blayney said the figure had almost doubled since 2010. More than 46,000 breaches of family violence orders, intervention orders, bail conditions and other orders also occurred — almost 17,000 more than in 2013. Stalking, harassment and threatening behaviour was up more than 10 per cent. Half of the 11,719 offences recorded in 2014 were family violence-related, but cyber-harassment was the biggest growth area in the category. Sexual assault offences rose 9.5 per cent to 10,738.

⁶² The PSS Survey 2012 as quoted in reporting sexual violence;

http://www.ourwatch.org.au/MediaLibraries/OurWatch/Images/ourwatch_reporting_on_sexual_violence_aa_v1.pdf

⁶³ Making Rights Reality, Frawley, P (2014) Making Rights Reality. Final evaluation report: A pilot project for sexual assault survivors with a cognitive impairment. Melbourne: La Trobe University

⁶⁴ <https://www.vichealth.vic.gov.au/our-work/preventing-violence-against-women>

⁶⁵ VicHealth (2012a) More than ready: Bystander action to prevention violence against women in the Victorian community research report. Victorian Health Promotion Foundation; see also WE NEED TO TALK PREVENTING VIOLENCE AGAINST WOMEN STRATEGY 2013 – 16, City of Melbourne,

https://www.melbourne.vic.gov.au/CommunityServices/CommunitySafety/Documents/PVAW_Strategy_2013.pdf

⁶⁶ [file:///C:/Users/user/Documents/Royal%20Commission%2015/Police/osce%20police%20and%20gender%20\(1\).pdf](file:///C:/Users/user/Documents/Royal%20Commission%2015/Police/osce%20police%20and%20gender%20(1).pdf)

⁶⁷ The recognition that all governments across the world have a legal responsibility to prevent violence against women and girls from occurring and re-occurring and protect victims/survivors after violence has occurred, is enshrined in the due diligence principle.⁶⁷ This obliges governments to take action to commit to a comprehensive approach to addressing violence against women through the 5 P's - prevention, protection, prosecution, punishment, and provision of redress. It is also obliges them to ensure that individuals (or “non-state” actors) are held accountable.

http://duediligenceproject.org/Resources_files/Due%20Diligence%20Framework%20Report%20Ooi.pdf

⁶⁸ The ‘due diligence principle’, as it is commonly termed, holds States accountable for human rights abuses committed not only by the State or State actors, but also by non-State actors. Violence against women (VAW) is most often perpetrated by non-State actors — for example, a close male relative or an intimate partner. The due diligence principle is a critical tool in the formulation of accountability. By making the State accountable for violence perpetrated by non-State actors, public international law recognizes that VAW, regardless of who commits it, constitutes human rights violations. The due diligence principle can be found in General Recommendation No. 19 (1992) of the Convention on the Elimination of All Forms of Discrimination against Women (“CEDAW”) Committee.

⁶⁹ Arango, Morton, Gennari, Kiplesund, Ellsberg, Interventions to Prevent or reduce Violence Against Women and Girls: A Systematic Review of Reviews, Women’s Voice and Agency Research Series 2014, No 10, The World Bank, 2014, pg 25. See also; *What works to Prevent Violence, a global program to prevent violence against women and girls: A summary of the evidence.* 2014, DFID, <http://www.whatworks.co.za/documents/2-a-summary-of-the-evidence-and-research-agenda-for-what-works/file>

⁷⁰ For examples the 2011 Vanuatu National Survey on Women’s Lives and Family Relationships found that “Places where VWC has been most active have significantly lower rates of physical and sexual violence by husbands/partners than places where VWC has been less active. These findings strongly suggest that the influence of VWC’s counselling and community education work over the past 19 years has contributed to reducing women’s risk of violence. ⁷⁰Awareness-raising about women’s human and legal rights has been the foundation stone of VWC’s approach since its establishment, in addition to providing information about services”. *Somebody’s Life, Everybody’s Business!* National Research on Women’s Health and Life Experiences in Fiji (2010/2011) study found that “Women who live in Port Vila and Shefa province are much less likely to experience partner violence in their lifetime than women in other provinces. Although this survey was not designed to assess FWCC impact there are several sources of evidence that illustrate this. They indicate that FWCC has contributed to a reduction in the prevalence of domestic violence and to some changes in attitudes. Each source requires caution regarding interpretation. The data supports the conclusion that that rates of physical violence have reduced. ⁷⁰ There is also emerging data when comparing the 2006 study which “indicate that mind-sets are indeed beginning to change among some sections of the population”. *The Vanuatu National Survey on Women’s Lives and Family Relationships*, Vanuatu Women’s Centre, 2011, <http://www.pacificwomen.org/wp-content/uploads/womens-centre-survey-womens-lives.pdf> *Somebody’s Life, Everybody’s Business!* National Research on Women’s Health and Life Experiences in Fiji (2010/2011): A survey exploring the prevalence, incidence and attitudes to intimate partner violence in Fiji, page 46.