



PO Box 438 Wangaratta Victoria 3677

Centre Against Violence (CAV) was previously known as Upper Murray Centre Against Sexual Assault (UMCASA). The original organisation UMCASA was established in the early 1990s by a group of people from northeast Victoria. In 1992, the organisation was incorporated under the Associations Incorporation Act and has always been managed by a community based Board of Management. In 2012 the new name of Centre Against Violence was created to incorporate the diversity of programs operating under the auspice of the organisation.

CAV receives core funding through the Victorian Government Department of Health and Human Services, Children and Family Services branch. From time to time special project funding is sought from other sources.

CAV has endorsed the Standards of Practice for Victorian Centres Against Sexual Assault. The Victorian Centres Against Sexual Assault Forum Inc, the peak body for the 16 Victorian CASAs, developed the Standards. CAV's policies and procedures manual are supported by the Standards of Practice. CAV refers to the Code of Practice for Specialist Family Violence Services for Women and Children 2006 and the Practice Guidelines: Women and Children's Family Violence Counselling and Support Programs 2008. All staff working in Family Violence Teams are expected to work according to these guidelines and standards.

We operate within a feminist framework in respect of our understanding and analysis of sexual assault and family/domestic violence. CAV provides crisis and short to medium term and long term counselling, advocacy, information and support to women, men and children who have experienced sexual assault and their supporting family members and friends. We also offer services to children under 10 with problem sexual behaviour and young people 10 and under 15 who have sexually abusive behaviours.

Our organisation is linked to the Victorian after hour's sexual assault crisis telephone service: SACL. Our agency provides 24/7 crisis care service to victim survivors of recent sexual assault (Recent = past two weeks).

CAV is also linked to Safe Steps, the state-wide women's domestic violence crisis service. CAV provides 24/7 crisis care for women and children affected by family/domestic violence.

Rostered after hours work is an important role shared by CAV staff in both the Sexual Assault Service and the Family Violence Crisis Accommodation and Support Service.

Our vision for a strengthened integrated response to women affected by family violence and sexual assault is evident in organisational discussions titled *CAV ONE*, a model of care possible in a joined up service such as CAV. There will be a day where a woman is provided service by a single worker rather than moving amongst programs.



PO Box 438 Wangaratta Victoria 3677

Gender

The issues paper uses terms such as “family violence” and “respectful family relationships” and “people” and “wide range of people affected”. The issues paper also explains the rationale for its use of this language. However, it is a problem to de-identify the gendered nature of the violence. While the paper acknowledges that overwhelmingly it is women and children harmed by family violence and that it is men who are using violence toward them, it avoids the difficulties and confrontations that become inevitable when describing the violence specifically. Using the term ‘gendered’ loosely without referencing to which gender ignores the underlying power imbalances between men and women in society and therefore loses capacity to find solutions. It is also our view that by attempting to discuss violence ‘broadly’ the paper and perhaps the direction of the Royal Commission will lose the opportunity to find and discuss the diversity of violence between men and women, men with men in intimate relationships, women with women in intimate relationship, sibling abuse and parent child abuse. If we fail to investigate specifically to the distinct groups the risk is that all violence that happens in the home will be labelled in the same way and responses to it will be inadequate because the orientation of the violence and its roots is missed. It will also miss developmental considerations when responding to violence exhibited by young people 18 and under, whether that violence is directed to siblings or parents. Equally it is fundamentally important to discuss the age, gender and forms of violence used by perpetrators to gain richer knowledge about its origins.

Recommendation

Be gender specific.

Language

It is important that language is specific to the problems. Our point here is partly related to gender as previously discussed. However, it also has further elements. For example, the police and the media frequently report family violence in the context of ‘conflict’ ‘argument’ and related to issues within relationship such as infidelity, family breakdown, custody, drug and alcohol issues and mental health issues (to name a few). Confusing the perpetration of violence at home with other social issues is not helpful and can be harmful. It can also hide the nature of the problem.

Example:

29 April 2015

ABC News

Quakers Hill man charged with murder over death of partner after alleged domestic violence attack

Posted 1 May 2015, 7:32am Fri 1 May 2015, 7:32am

[Related Story: Sydney woman dies after alleged domestic violence attack](#)



PO Box 438 Wangaratta Victoria 3677

[Map: Quakers Hill 2763](#)

A man has been charged with murder after his partner died from injuries sustained in an alleged assault at a home in Sydney's west.

The victim was the 34th woman to be violently killed in Australia this year, according to the Counting Dead Women group.

Police alleged the man, 46, attacked the woman, 51, after they argued at their Quakers Hill home on Monday morning.

They said the victim was placed on life support after sustaining head trauma during the attack before 6:00am.

She was also treated for a collapsed lung at serious facial bruising, but died in hospital about 11:00pm on Tuesday.

The man appeared in court on Tuesday after being charged with assault occasioning grievous harm.

Police have since laid an additional charge of murder against the man.

He has been remanded in custody.

He is due to reappear in court on June 26.

The problem with the report cited is a common problem. The messaging is that violence has happened 'after they argued'. Arguing is linked to a homicide. It contributes to the myths held in Australian society about the reasons for family violence and then the attitudes held such as "family violence is ok when..." (See Vic Health statistics cited in RC Issues Paper). The language is so insidious that the reader will be unaware that they linked the homicide to an argument rather than to the violence perpetrated by a man to his partner in the setting of their home.

If police were using a guide to manage the report to the public an alternative message is:

A woman was killed in her home by her partner. He physically assaulted her and she sustained fatal head injuries.

Recommendation

All government and non-government organisations are provided with a language guide and expected to respond to incidents and provide community education with the same language. This will educate all participants including general community. It will increase accountability of perpetrators. It will reduce the secondary harms suffered by women and children.

Gathering Data



PO Box 438 Wangaratta Victoria 3677

The data cited in the issues paper refers to the Personal Safety Survey which refers to “since the age of 15”. It is common practice to differentiate between children and adults, both socially and legislatively. It is crucial to do so in terms of the differences in developmental maturation for children and young people under 18. It is also vital to ensure that data and evidence are capable of enriching knowledge and informing strategies at both prevention and intervention domains. This would require distinctions as mentioned in discussion of gender such as

- Violence perpetrated at home by men to women and children
- Violence perpetrated at home by men to their male partners
- Violence perpetrated at home by women to their female partners
- Violence perpetrated at home by children to their siblings
- Violence perpetrated at home by children to their parent/s

Research and investigation of family violence need to enquire about whether the violence meets the family violence definition provided by the Family Violence Protection Act 2008 which includes the requirement for violence to cause fear, be controlling and to be repetitive/patterned in nature.

Research that is specific will reveal more about the nature of violence at home and be able to describe it distinctly and clearly. We will also be able to develop responses specific to the problem.

Recommendation

Through research an evidence base develops that is capable of generating knowledge and strategies which are able to be related to different forms of violence and to different victims and their needs.

Children are in the age group 0 – 17 and data collection and evidence refers to children distinctly from adults.



PO Box 438 Wangaratta Victoria 3677

Are there other goals the Royal Commission should consider?

Yes. Children need to be considered in their own right. We would like to see a goal such as but not limited to:

- Protect Children
- Respond holistically to children harmed by family violence.
- Investigate the standards of practice required to support children harmed by family violence
 - Is location of children's services in the homelessness sector capable of delivering the quality and dimensions of care required to aide their recovery?
 - Is the fragmentation of children's service in relation to family violence serving them well e.g. located in health, homelessness and family, private practice (referral pathway from VAP), CAMHS and violence sectors?

Improvements in the responses in recent years

- Women and children's counselling services
- Changes to the FV Protection Act 2008- Broadening of definitions of violence. This legislation has increased awareness of forms of violence other than physical and enabled recognition of harm to psychological, emotional and cumulative harm
- Increases in police powers to exclude perpetrators from the home and issue safety notices has contributed to reducing impact for women and children i.e. staying in the family home and remaining in their community.
- Reforms in law and in practice for both sexual assault and family violence sectors.

Further need for reform

- Need for family violence education and training of magistrates, police prosecutors, family law judges and probation and parole officers as a means to increase consistency in responding to safety and perpetrator accountability
- Children's services require expansion and relocation to specialist sexual assault and family violence settings. This enables mothers to attend service in a 'one stop' and holistic setting.
- Responses available become far more sophisticated. Specifically when women seek help there ought to be a range of choices available far beyond IVO, Refuge, Safe at Home and Recovery. An example of such a choice would be a restorative justice model that enables women to hold perpetrators accountable without referring to the legal system. Such services can be located in the CASA sector which is currently operating such models.



PO Box 438 Wangaratta Victoria 3677

- Include early intervention using a restorative justice model in preference to couples counselling which is not capable of addressing power imbalance
- Review the CRAF: ensure it is a more capable tool and that it has the capacity to be referenced when making decisions about child protection and women's safety.
- Ensure the CRAF (in its reviewed form) is utilised and respected by Magistrates Court and Family Law Court. The CRAF is an evidence based tool capable of measuring and predicting risk.
- Ensure Department of Justice staff members including those responding to perpetrators refer to the CRAF as a measure of risk of imminent and serious harm including lethality.
- Assessment and Risk Framework for Children in Victoria is not summarised by the provision of a risk/safety tool. This must be addressed to ensure consistency of application of risk measurement for children. Such a tool should be the common tool for Child Protection Unit, Family Violence Services, Sexual assault services and Child First Services to give strength to an integrated and consistent response.

Aboriginal and Torres Strait Islander Peoples

The Victorian Police Data system is not capable of informing the community of the rates of reporting of family violence and sexual assault by Aboriginal women. This is a problem in itself. Aboriginal and Torres Strait Islander women and children are experiencing family violence at significantly higher rates than non-Indigenous Australians. Data collected through the Specialist Homelessness Services suggests that the rates are 10 times higher than for non-Aboriginal women.

Please reference this point to Data Collection and Research.

It is our view that refuge services provided in a culturally sensitive and inclusive model will increase their relevance and helpfulness to Aboriginal and Torres Strait Islander women. Specialist family violence services in rural Victoria can form partnerships with local Aboriginal Cooperation's to establish such facilities. Discussions to forward this work have commenced in Ovens and Murray District with consultation between Mungabareena Aboriginal Cooperation and CAV.

Consider the location and support in resources available to family violence workers operating in Aboriginal Cooperation's ensuring that the position is viable given the breadth of the role. For example, full time is the minimum effort for a sole position.

Women and children with disability

For many years now Women with Disability Australia has advocated for the inclusion of women with disability in policy and practice. It is known that women and children with disability experience



PO Box 438 Wangaratta Victoria 3677

higher levels of vulnerability than others in community and this means that they are more likely to be victims of family violence and sexual assault. It is time to provide them with increased safety and security. Essentially there needs to be greater financial support to ensure that a safe environment can be located immediately in the event of a report of family violence. There also needs to be a capacity of the health and human services to respond quickly to their needs when they move. For example, when seeking support from Department of Health and Human Services for the care of a woman with a disability we were informed that relocating her care package from her ex-partner to professional provider would take a long time. We had anticipated a response of 24 – 48 hours.

Young people living in out of home care

Counting the vulnerability of children and young people living in out of home care is a priority. When children and young people are moved from the care of their family due to significant neglect and abuse it is horrifying to learn that they then experience high rates of sexual assault and other forms of violence in the residential care setting.

Legal Sector

Disconnect between family law and family violence IVO.

The legislation needs to be consistent. There has been a consistent theme with magistrates that they are reluctant to put children on the order due to family law. Child protection Unit, Victoria, have been required to take out orders to protect the children because magistrates have not wanted to put children on the order. This is a failure to protect children and a form of cowardice. It is an inefficient use of Child Protection Unit resources when mother is acting protectively and children could have been protected on the order.

Furthermore lawyers will pursue the subject of family law when a family violence intervention order is being heard. Lawyers should not be able to allow use of family law as leverage for consenting to orders and magistrates should not consider family law but focus on protection of vulnerable mothers and children.

Outcomes that women have at court have been inconsistent due to following:

Women are inconsistently being represented by police. We have found that this is dependent on how well the woman can articulate the violence. The police prosecutor often has minimal knowledge of the case which puts the responsibility for the description of the violence on the victim.

Recommendation

Family violence services should be funded to employ a family violence specific lawyer to represent women at court or informants are able to attend court to represent the woman.

Presence at Magistrate's Court



PO Box 438 Wangaratta Victoria 3677

Victims should be able to give evidence at court from an offsite location. This will strengthen their safety. Going to court and leaving court are dangerous times for women and children.

Women returning to/ or allowing the perpetrator back in the home

Further support men in the homelessness system and offer them case management to reduce the pressure for women to reunify based on the argument that the perpetrator 'has nowhere else to go'.

Women have ongoing attachment to the men due to affection, social ties created over many years, the connection to children and the ideals of family life which they hold dear. It is difficult for them to watch him suffer and of course they respond to that with kindness and compassion. This comes at cost to their safety. Ensure he is supported to reduce the onus of responsibility falling to them.

Integration of key sectors.

While the Victorian State Government authored the principles of integration in 2006 it is time for more formality. There needs to be an interface between child protection, family law, magistrates and family violence services. We need to get better at holding the perpetrator accountable in preference to having women and children relocate which is often the first expectation from the system. The mental health system needs to be invited to the work and to be held accountable for their work. 85% of women affected by family violence will develop a post traumatic stress disorder and often receive care from the mental health sector. However, the appreciation the mental health sector has of the impact of family violence is minimal. Their response to safety and risk is also through a mental health lens only. It is our view that they neglect to accept the assessment of risk of suicide ideation that is provided to them by the sexual assault and family violence sectors. Referrals for hospitalisation are frequently declined and yet within 2 days of a specialist sexual assault or family violence referral we are aware of clients being admitted *after significant harm has occurred*.

Leadership

Leadership makes a difference. It is our view that Ken Lay maintained the profile of family violence within the police force and within the community. Leadership filters down to local levels influencing direct practice. We need knowledgeable leaders that encourage accountability and commitment and communication between services.

Sexual Assault Services

Victoria has an integrated and sophisticated sexual assault service sector, convened by CASA Forum. Strong consideration ought to be given to relocating all women's and children's counselling services to this sector where the trauma models and skills are located. Furthermore, the sector should be strongly considered as a leader in risk assessment and safety planning given the evidence that the presence of sexual violence is linked to higher risk of serious physical injury and lethality (Braaf,



PO Box 438 Wangaratta Victoria 3677

Rochelle, 2011, *Preventing Domestic Violence Death- is sexual assault a risk factor?*, Australian Domestic & Family Violence Clearinghouse, Research and Practice Brief 1)

Macro Interventions

1. Develop a long term, bipartisan, whole of government and whole of community plan
2. Address structural and normative gender inequality as the key driver of men's violence against women, through an intersectional approach
3. Develop a monitoring, accountability and reporting framework
4. Establish strong governance and quality assurance mechanisms
5. Significantly increase and sustain funding to support the above, and to ensure good programs are systematised and upscaled
6. Ensure universal reach through inclusive and tailored approaches
7. Engage communities through established organisations and networks
8. Build a skilled prevention workforce, within family violence sectors, and as specialists
9. Undertake an intersectional gender analysis of all government policy, legislative development and budgeting
10. Support research and evaluation for knowledge building and innovation as mentioned at introduction.