

Royal Commission into Family Violence  
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**Submission to the Royal Commission into Family Violence  
In response to the Issues Paper released 31 March 2015  
Public Submission**

To the Commissioners,

Thank you for the opportunity to comment on the Issues Paper released for the purposes of informing the Royal Commission on issues, gaps and problems in the response of our system to family violence, and possible solutions.

MacKillop Family Services (MacKillop) is a leading provider of services for children, young people and their families in Victoria and New South Wales (NSW) and Western Australia (WA).

Formed in 1997 by the Sisters of Mercy, the Christian Brothers and the Sisters of St Joseph, MacKillop now works to support, foster hope and promote justice for children, young people and their families, particularly those who experience distress, disadvantage and abuse.

The programs we deliver include disability services, home-based and residential out-of-home care services, refugee services, youth support, education and training, family support and support to women and men who as children were in the care of our founding agencies. We are a service provider employing more than 800 staff in a broad range of programs and services. While MacKillop is not a direct provider of funded family violence services, almost all areas of our work support people who have experienced the impact of family violence.

The following submission explores service gaps and potential resolutions when the children and young people with whom we work are impacted by family violence. The information contained in this submission is drawn from the expertise of MacKillop's skilled and knowledgeable staff, and our experience delivering community and family services and out-of-home care.

We expect that this submission will be made public. We will be submitting three confidential case studies related to this submission under a separate cover. We request that these remain confidential to ensure the safety of the individuals concerned.

MacKillop has also provided a joint response with Berry Street Victoria, Anglicare Victoria, Salvation Army, Wesley Mission, the Victorian Aboriginal Child Care Agency (VACCA) and the Centre for Excellence in Child and Family Welfare. In addition, MacKillop is also pleased to be a part of three alliances in Melbourne's west: the Western Integrated Family Violence Partnership; the Western Child and Family Alliance; and the Western Think Child Working Group. These groups have all made submissions to the Royal Commission and we support the views put forward in those documents.

Thank you for the opportunity to provide comment to the Royal Commission into Family Violence. If you wish to discuss this submission further, please contact me or Dr Nick Halfpenny, Director, Policy and Quality on 03 9699 9177.

Yours sincerely,



Micaela Cronin  
CEO, MacKillop Family Services

**JUSTICE  
HOPE  
COLLABORATION  
COMPASSION  
RESPECT**

## **MacKillop Family Services Submission to the Royal Commission into Family Violence**

### **Introduction**

MacKillop Family Services provides a comprehensive range of services in Victoria and NSW and we are currently building our capacity in WA.

In Victoria, we provide out-of-home care services to children and young people in **Melbourne's** Southern, Northern and Western metropolitan regions, as well as Geelong and Warrnambool. These services include residential care, foster care and lead tenant services. Children and young people in out-of-home care also receive support through case management and youth work, including leaving care support.

In Footscray and Melton-Brimbank, MacKillop provides a range of family services, including disability services, parenting support and support for families in which a family member has alcohol or other drug issues. MacKillop is the lead agency in the ChildFIRST and Services Connect alliances in Melton-Brimbank and the Family Relationship Centre in Broadmeadows.

The broad range of our work means we have extensive experience and expertise working with children, young people and their families in a number of settings and experiencing a range of issues, including family violence. MacKillop is therefore well placed to provide the perspective of a large service delivery organisation providing services to children and young people and families whose lives have been impacted by family violence.

Our experienced and knowledgeable workforce identified a number of issues related to the family violence system and potential responses that we wish to explore in this submission. In addition, three confidential case studies drawn from our consultations with staff will be forwarded under a separate cover.

This submission seeks to explore:

1. Children: gaps and responses. This section focusses on the different, and at times competing, understandings of the needs of women and their children in the context of family violence.
2. Young people: gaps and responses. This section looks at the needs of young people, especially young people in out-of-home care and leaving care with a focus on access to therapeutic services, healthy relationships programs and behaviour change programs.
3. Additional issues. This section addresses other issues raised in consultation with MacKillop staff including cross **jurisdiction (federal/state) issues and the lack of accessibility of men's behaviour change programs.**

### **Context**

MacKillop is strongly supportive of the definition of family violence in **Victoria's *Family Violence Protection Act* (2008)** that includes causing a child to hear, witness or otherwise be exposed to acts of family violence. A similar definition is contained in the Commonwealth ***Family Law Act* (1975)**. MacKillop supports these definitions as they approach victimisation and exposure to trauma holistically. We believe that hearing and being aware of violence towards their mother equates to violence towards the child, because of the trauma impact that the exposure has on the child. Where once children were viewed as silent witnesses to violence, it is now understood that children are involved in, and harmed by violence in a range of ways.<sup>1</sup> See, for example, case studies 1 and 2.

MacKillop notes family violence has a disproportionate impact on Aboriginal and Torres Strait Islander communities. For example, the rate of domestic violence-related assault is five times as high for Aboriginal women as for non-Aboriginal women. Furthermore, Aboriginal people are 6.5 times more likely to report being a victim of family violence related offences<sup>2</sup> and 34 times more likely to be hospitalised as a result of domestic violence compared to non-Aboriginal people<sup>3</sup>.

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<sup>1</sup> Campo, M., Kaspiw, R., Moore, S., and Tayton, S. (2014) *Children affected by domestic and family violence: A review of domestic and family violence prevention, early intervention and response services*, Australian Institute of Family Studies, Melbourne page 15; Richards, K., (2011) *Children's exposure to domestic violence in Australia: Trends and Issues in Crime and Criminal Justice* No. 419, Australian Institute of Criminology, page 3.

<sup>2</sup> Aboriginal Family Violence Prevention & Legal Service Victoria (2015) Submission to the Senate Community Affairs References Committee Inquiry into Out-of-Home Care, page 5.

<sup>3</sup> Steering Committee for the Review of Government Service Provision. (2009) *Overcoming Indigenous disadvantage: Key indicators 2009 report*. Canberra: Productivity Commission.

Family violence is a key factor in children and young people coming to the attention of child protection services. Local and international research suggests that the proportion of child protection notifications involving family violence ranges between 30 and 50 percent<sup>4</sup>. The evidence suggests the proportion of child protection notification involving family violence for Aboriginal and Torres Strait Islander children is significantly higher – approximately 67 percent<sup>5</sup>.

Evidence about the connection between experiencing violence as a child or young person and going on to perpetrate or be a victim of violence in adulthood is mixed. The reality is that not all children who experience family violence go on to perpetrate violence, and not all perpetrators have a history of childhood violence or abuse.<sup>6</sup> However, there are associations between other forms of childhood maltreatment and risk of perpetration of family violence.<sup>7</sup> While the evidence on the connection is complex, MacKillop believes it is imperative that children and young people with whom we work are afforded every opportunity to heal and recover from violence, so as to enhance their ability to establish meaningful and violence-free relationships as adults.

## Children: gaps and responses

In their book, *Domestic Violence: Australian Public Policy*, Murray and Powell explore the complex policy relationships that impact on children in the context of family violence. The authors suggest:

Current domestic violence, child protection and family law responses all potentially collide where a child experiences domestic violence. Yet these responses have been designed as unrelated spheres of intervention: they not only operate with different purposes and assumptions, but also problematise domestic violence in different ways, with various implications for responding to families.<sup>8</sup>

MacKillop's experience as a service provider to children, young people and their families is that the service responses to family violence often reflect this systemic malaise. In addition, unmet demand for family violence and family support services is exacerbating the fissures caused by a lack of coherent and integrated policy and service responses.

It has been the experience of MacKillop staff that some Child Protection practitioners may minimise family violence incidents to ensure **MacKillop's** family support services staff will accept a referral. While this approach allows a mother to stay at home with her children and access family and parenting support, it does not directly address the **perpetrator's** violence, which is likely to be at the core of risk to the children and the mother and her capacity to parent effectively. It can also impact on the safety of workers who are not given a full understanding of the issues impacting on the family (see case study 2).

While it is generally the practice of some specialist family violence services to focus support towards women and children who are no longer living with the perpetrator, **MacKillop's** family support teams work with families in which violence is on-going. MacKillop does not believe that this practise in any way condones violence, however it is our experience that families are referred and/or women might seek support while still experiencing violence. MacKillop recognises the need to provide this support and will not deny support if the violence is on-going or if the perpetrator remains in the home.

There are a number of reasons a woman might decide not to leave and, in **MacKillop's** view, support should be not be predicated on her leaving. Although policy and public opinion (supported by research evidence) has shifted beyond the "why doesn't she just leave?" paradigm, our staff report some programs have not made this shift. Some services still require that women and children have left (or the perpetrator has left) before support can begin. Ongoing support of this service model leaves many women and their children without adequate assistance.

<sup>4</sup> Australian Law Reform Commission (2010) *Family Violence - A National Legal Response (ALRC Report 114)*, Australian Government, page 894.

<sup>5</sup> Department of Planning and Community Development, *The Victorian Government Indigenous Affairs Report 2007/2008*, page 47.

<sup>6</sup> Tayton, S., Kaspiew, R., Moore, S. and Campo, M., (2014) *Groups and communities at risk of domestic and family violence: A review and evaluation of domestic and family violence prevention and early intervention services focusing on at-risk groups and communities*, Australian Institute of Family Studies, Melbourne page 38.

<sup>7</sup> Tayton et al page 38-39.

<sup>8</sup> Murray, S. and Powell, A., (2011) *Domestic Violence: Australian Public Policy*, Australian Scholarly Publishing, North Melbourne

As one MacKillop staff member describes:

*Children who have experienced family violence have few specific options for support. Few services are available to directly assist children. A lot of family violence services are, rightly, geared towards assisting the adult survivor, and the general needs – for example, parenting, finances, housing – of the mother and children. But it is hard to access play therapy or specific supports for children. There is often a requirement that therapy for children can only occur once the family is settled and safe. Access to play-based sessions for children would be beneficial for some children in helping them deal with the situations they have experienced. The challenge is to support and enable children to have a voice and be able to share what is happening for them in their families while violence is occurring.*

*Many MacKillop workers are working with families who are still in family violence because the specialist family violence workers don't provide support [for women or children] until a woman is no longer with the perpetrator.*

The paradox within the service system, that women cannot access support until they leave, means that some parenting issues may also remain unaddressed. In turn this makes child protection interventions more likely, with the blame for this directed towards mothers. For Murray and Powell the responsibility of fathers is not properly acknowledged in Victorian child protection practice while mothers are held solely accountable for ensuring **children's** wellbeing.<sup>9</sup>

As one of MacKillop's staff suggested:

*It is hard to leave [a violent relationship] so support needs to be there during this period for the wellbeing of the woman and the children. She might never leave but she still requires support. It is hard to leave a home and possessions, financial security. Women have concerns about pets, and children changing schools, and moving away from family and friendship groups. The upheaval of leaving can outweigh the desire to move. Either way, the violence should stop. And there is a need to intervene [to stop the violence] before the children are completely broken.*

The practice of accepting referrals for family support in situations where violence has not ceased can also have the positive effect of preventing entry into the child protection system.

In their research, Murray and Powell identified evidence from the United States and New South Wales in which referrals to child protection services spiked when definitions of child abuse were expanded to explicitly include family violence.<sup>10</sup> MacKillop supports the expansive definition of family violence that includes harms to children and young people. However, we acknowledge that this can result in an increase in the need for support, as the trauma associated with exposure to violence is better understood. If a wider understanding of family violence is accepted then there needs to be an accompanying increase in the supports available to families experiencing violence. This issue was also identified in the Victorian Auditors **General's** Report *Early Intervention Services for Vulnerable Children and Families*, released on 27 May 2015.<sup>11</sup>

Supports that help stop violence occurring, alongside therapeutic responses that promote the mother-child relationship are critical. Research suggests that perpetrators deliberately seek to undermine and destroy the mother-child relationship. For Humphreys, Thiara and Skamballis, **"the** tactics of abuse that undermine the [mother-child] relationship are part of a continuum of direct and indirect **attacks.**"<sup>12</sup> Examples of abuse of this nature range from criticising the **woman's** mothering and displaying jealousy about attention paid to the children, through to attacks during pregnancy, child abduction and child homicide. Children are also directly targeted.

A MacKillop staff member noted how family violence systemically impacts on the mother-child relationship, and the resulting need for responses that support their relationship:

*Mum is stressed and sleep deprived, the children hear a narrative that Mum's hopeless - and worse - Mum is traumatised and lacks capacity to be really present for the kids.... Ongoing parenting support and work with mums and kids to re-attach is a massive gap.*

The level of abuse directed at women and children sometimes results in a child protection intervention, even though there are inadequate services to assist victims of the violence and prevent further violence while the violence is occurring.

<sup>9</sup> Murray and Powell page 87.

<sup>10</sup> Murray and Powell page 89.

<sup>11</sup> Victorian Auditor General (2015), *Early Intervention Services for Vulnerable Children and Families*, Victoria, page 22.

<sup>12</sup> Humphreys, C., Thiara, R.K. and Skamballis, A., (2010) **"Readiness** to Change: Mother-Child Relationship and Domestic Violence Intervention" in *British Journal Of Social Work* 2010 page 3.

Rather than hold the perpetrator to account for the ongoing violence in the home, it is **MacKillop's** experience that Child Protection sometimes intervenes to remove children, which punishes the non-offending parent and further disrupts the mother-child bond (see case study 1). MacKillop supports the view presented by Murray and Powell, as follows.

We do not, of course, mean that the needs of a child in this situation should be ignored because their mother is not responsible for what has happened. Rather that in instances where mothers are experiencing domestic violence, child protection responses need to support **women's** and **children's** safety, while at the same time, holding perpetrators of violence accountable.<sup>13</sup>

Although there is a clearly established need for support and therapeutic programs that work with families, resourcing specifically to support these needs is insufficient. Campo et al referred to evidence to support “**interventions** that address both caregivers (mostly mothers) and children, in order to repair the potentially damaged parental **relationship**”. There are, however, very few services that undertake this type of work with both mother and child.<sup>14</sup> While addressing the mother-child bond is central to best practice approaches<sup>15</sup> some services treat children as peripheral.

## **Young people: service gaps and responses**

MacKillop is of the view that early intervention (sometimes referred to as secondary prevention) is a critically important systemic response to family violence. For MacKillop, this refers to the work we do with children and young people in out-of-home care, to ensure that they grow up to have stable, healthy relationships, free of violence and exploitation.

The reality is, however, that many young people leave care without ever having properly examined the impact of the violence within their family of origin, and how they can work towards healthy relationships in adulthood. One of the barriers to accessing appropriate mental health supports for some young people in care is a requirement (by some services) that therapeutic interventions cannot commence until the young person is “settled”.

There is no doubt that it can be difficult to engage a child or young person in counselling and/or therapy unless they are settled. For some children and young people in out-of-home care the experience of being “settled”, in and of itself, can be difficult, and therapeutic interventions necessarily must focus on developing strategies for staff to deal with the behaviours of the child or young person, rather than engaging the young person directly. It can also be difficult for children and young people to stay settled unless this therapeutic work has been undertaken.

MacKillop is currently implementing the Sanctuary Model. This model is an organisational framework that integrates trauma theory with the creation of therapeutic communities to promote safety for all. The model provides principles and tools to overcome the traumatic impacts of adversity, loss and change. It recognises that trauma has an impact on not only the people who seek our services but also our employees and systems in providing these services.

When children and young people's violence occurs in a trauma-informed setting, their behaviour can be understood as them “showing” their carers the abuse they experienced in their family of origin. If violent behaviour is not viewed within the context of the child or young **person's** own traumatic experiences, it can be misunderstood by carers and the service system, which effectively prevents an appropriate response to a traumatised young person. Based on our therapeutic approach, it is **MacKillop's** practice for residential care staff to take a trauma-informed approach to their work, developing strategies to support young people who may be exhibiting violent behaviours, and participating in regular reflective practice sessions to explore that work. These are conducted by **MacKillop's** team of in-house therapeutic practitioners.

MacKillop's therapeutic practitioners help staff to understand violent behaviour in the context of past trauma, at the same time as working with young people in care to understand the importance of taking responsibility for violent behaviours.

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<sup>13</sup> Murray and Powell page 88-89.

<sup>14</sup> Campo, M., Kaspiew, R., Moore, S., and Tayton, S. page 42.

<sup>15</sup> Campo, M., Kaspiew, R., Moore, S., and Tayton, S. page 43.

Aside from the provision of trauma-informed out-of-home care, services and programs to specifically respond to the needs of young people who are displaying violence in care are not well established. A review of **men's** behaviour change programs undertaken by Carmody, Salter and Presterudstuen<sup>16</sup> concluded that programs are predominantly offered for adult men and those that are for younger men are offered in schools. Tayton et al draw a similar conclusion regarding programs for young women that focus on healthy and safe relationships. As a large number of children and young people in out-of-home care – particularly those at higher risk of becoming perpetrators of, or vulnerable to, family violence in adulthood – are often disengaged from education, it is unlikely that they will engage in either targeted behaviour change (or universal approaches such as healthy relationships coaching) by virtue of being outside the target age range and/or disengaged from school.

Additionally, **men's** behaviour change course content that focuses on challenging male privilege and power “may have little resonance for boys and men in poor or marginalised **communities**.”<sup>17</sup> We suggest that young males in out-of-home care are unlikely to view violent behaviour through a prism of power, when in reality they are likely to have experienced disenfranchisement and disempowerment through their experience with Child Protection, youth justice and/or welfare interventions in their lives.

Evidence suggests that prevention programs have a greater impact on men and boys when they are delivered as single-gender programs.<sup>18</sup> Research also suggests that programs that hold responsibility as a central theme, and are grounded in exploring the aspirations of participants, for example by asking “**What** sort of dad do you want to **be**?” are effective.<sup>19</sup> There is considerable potential to harness the expertise and experience of youth services, out-of-home care and other community agencies working with children and young to build their capacity to develop and implement initiatives targeting respectful relationships and violence prevention.<sup>20</sup>

In relation to the experience of violence toward young people in our care, in **MacKillop's** view there is a strong link between the issue of sexual exploitation of young people in care and family violence. These issues share many of the same risk factors. As discussed in **MacKillop's** submission to the Victorian Commission for Children and Young People's Systemic Inquiry into Sexual Abuse and Sexual Exploitation of Children and Young People in Care, some young people in out-of-home care seek out intimacy as a form of connection, comfort and belonging, and some adults will prey on those needs.<sup>21</sup>

As a group, young people in residential care can be vulnerable when in public and may attract people who prey on them. Young people who have experienced an abusive home life may have a distorted safety “barometer” and unintentionally place themselves in situations, and establish relationships with people that increase their vulnerability to abuse. There is no doubt that children and young people who have experienced a disruptive home life are less likely to have engaged in formal education and may not have learnt how to recognise safe relationships and safe adults. Having experienced disrupted attachment and few appropriate relationships with adults, it can be difficult for traumatised young people to recognise and move away from an abusive relationship. As noted above, healthy relationships programs may not impact on young women in out-of-home care because of disengagement and exclusion from school. However Tayton *et al* argue that “[t]hese young women may be socially marginalised and potentially at greater risk of being victims of [family violence], and prevention initiatives need to consider how to engage with this cohort of young **women**.”<sup>22</sup>

Engagement with workers in residential homes, collaborative organisational alliances and program content tailored for an out-of-home care audience (for example, flexible, trauma informed, outreach models) are useful approaches for supporting young people in out-of-home care.

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<sup>16</sup> Carody, M., Salter, M., and Presterudstuen, G.H., (2014) *Less to lose and more to gain? Men and Boys Violence Prevention Research Project Final Report*, University of Western Sydney, Australia.

<sup>17</sup> Carmody, Salter and Presterudstuen page 62.

<sup>18</sup> Carmody, Salter and Presterudstuen page 29.

<sup>19</sup> Carmody, Salter and Presterudstuen page 64.

<sup>20</sup> Our Watch (2015) Working with children and young people: policy brief 5, Melbourne, page 7.

<sup>21</sup> MacKillop Family Services (2014) *Submission to Commission for Children and Young People's Systemic Inquiry into Sexual Abuse and Sexual Exploitation of Children and Young People* <https://www.mackillop.org.au/submission-to-systemic-inquiry-sexual-abuse-and-sexual-exploitation-2014>.

<sup>22</sup> Tayton et al page 58.

## **Additional issues**

### *Cross-jurisdictional issues*

In the context of federal family law, **MacKillop's** experience operating the federally funded Family Relationship Centre (FRC) in Broadmeadows is relevant. Although there is a protocol between the Department of Health and Human Services and the Family Court and Federal Magistrates Court, its contents and meaning are not well understood, especially among parents who may be the subject of orders.

**MacKillop's** FRC staff provided examples of situations in which non-offending parents are told by Child Protection that if they allowed contact, as per a Family Court order, between the offending parent and the child, Child Protection would apply to remove the child from the non-offending parent.

### *Behaviour change programs for fathers*

MacKillop is of the view that serious consideration needs to be given to programs which support the perpetrator to leave the home and undertake behaviour change, while the mother and children remain in the home and are provided with intensive support to rebuild parenting capacity, and work at strengthening the parent-child bond, in a violence-free environment.

In **MacKillop's** view, regardless of whether a parental relationship is ongoing, it will be in a **child's** best interests for a violent parent to engage in meaningful behaviour change. However, access to behaviour change for perpetrators was also highlighted as problematic by MacKillop staff. The main problem identified was the lack of appropriate services.

Staff relayed issues such as:

- Long wait times. For the FRC, this can translate to a delay in commencing family mediation, in circumstances where the perpetrator has been referred to behaviour change and is prohibited from commencing mediation until he has engaged in a behaviour change program. This also delays opportunities for the non-offending parent to settle their affairs and move on.
- Access to services in regional centres, for example in Geelong and Warrnambool. For men in regional centres and surrounds there are few behaviour change programs and there can be a reluctance for men to attend because of the shame associated with perpetrating violence and the risk to employment and standing in the community. More options for engagement beyond in-house programs are required to ensure men can engage in behaviour change when they need to.
- One-size-fits-all approaches. Perpetrators of family violence may have a range of other issues to deal with. No single model of behaviour change is going to be able to accommodate mental health needs and/or alcohol and other drug issues. Effective responses need to be holistic and person-centred. This includes taking into account cultural constructions and complexities around gender and family relationships, for example, considering multiple masculinities and economic, social, religious and historical factors that influence constructions of masculinity.<sup>23</sup>

### *Service system response*

Although MacKillop acknowledges the systemic reforms in the area of family violence in recent years, we are aware that there are still failures in individual cases. Case study 3 is a telling example of the failure of the existing system to support children and mothers to escape family violence. **MacKillop's** experience suggests such a case is not rare or unusual. It reflects a system that is under-resourced and unresponsive, and must be experienced by women and children as ambivalent and uncaring.

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<sup>23</sup> Carmody, Salter and Presterudstuen page 30.

## Recommendations

Based on the discussion above, MacKillop Family Services makes the following recommendations to the Royal Commission into Family Violence:

1. Investment in integrated and multidisciplinary responses to support for women and children who are living with violence in the home, including work undertaken by family service agencies that provide generalist family and parenting supports.
2. Investment in early intervention family and parenting support for families affected by family violence, to prevent the children entering out-of-home care. This should include programs that promote mother-child attachment, bonding and healing in the context of family violence, recognising the shared experience of the mother and her children.
3. Develop new approaches to information exchange between agencies responding to individuals affected by family violence, including improved information sharing from Child Protection.
4. Establish evidence-based programs tailored to meet the needs of children, young men and young women, including programs to:
  - a. assist and work with children to overcome experiences of violence and work on bonding and attachment with their non-offending parent
  - b. assist and work with young women in care to help them recognise potentially harmful relationships and to build respectful and violence-free relationships
  - c. work with young men in care to support them to establish positive and healthy adult relationships, and to work on changing violent behaviours.
5. Facilitate better alignment of federal and state approaches, and provide further clarity for families when they are subject to court orders from different jurisdictions. As the first point of contact in many cases, Child Protection also needs a clear understanding of how to work with families to whom competing court orders apply.
6. Ensure behaviour change programs are more accessible, based on evidence, focused on the gendered nature of family violence, and evaluated.