INTRODUCTION

I have a background of 40 years of work and knowledge from a range of sectors including family violence, sexual violence and prevention of violence against women and children in Australia and NZ, Federal and State Government and with community agencies. Other relevant experience that informs me is women's health, health promotion, adult education, counselling, victims of human trafficking, palliative care, community development, new technologies and as an artist.

During 2012-2013 I worked at Office for Women's Affairs DHS, in the family violence team with responsibility for managing Prevention projects. Currently employed by Family Violence Command, Victoria Police as a non-ongoing senior project officer

By agreement this is a personal submission based on my experience in the area and it does not represent the views of Victoria Police.

Context for this submission

I have chosen not to repeat what I know many others will be saying. I'm very likely to support the views of key women's organisations and some government organisations about how to rework the system based on similar but improved approaches.

I have structured part one to imagine some possibilities if we were braver, if we threw the whole approach to responding to family violence into the air and started again.

It's essentially written as a victim-centered imagining of what radical innovation might look like in 2018 if perpetrator management and collaborative service to victims became priority foci to keep victims safe. The key structural elements are identified in green text.

Family Violence has been estimated to cost the Victorian economy \$3.4 billion a year. Taxpayer's money is mostly spent on keeping women and children safe and otherwise mopping up the consequences of men's violence to women and children. If the majority of the system was focused on making it very unattractive for men to abuse their families and reducing likelihood of future violence by those who do, there would be fewer victims harmed and in need.

In presenting this 'speculative fiction' as a potential future I refer to perpetrators as men and victims as women or children. In the imagined world, companion options would have been created for male victims and female perpetrators.

Additionally I haven't taken any of the following into account;

personal, political and organisational sensitivities, capacity for the law, the government and other organisations to enact it, or the complex details of how transition could be managed.

In part two, I offer some thoughts about a range of issues that are more likely to relate to options for reform provided by key VAWC stakeholders and government agencies.

PART ONE - Imagining

Summary; If the whole response system was wiped clean and started again, this could be an alternative story. It puts maximum effort into containing and holding accountable those who are violent whilst making sure victims of violence are safe, have options, are empowered and informed, and simplifies the service system to benefit victims.

1st phase - Crisis

Its **2018** - I am an employed woman in a 4 year violent relationship seeking help after a particularly violent incident (he has stormed out). I have a baby and a 3.5 year old from my previous relationship.

I google (or whatever exists in 2018)— 'I need help with family violence' and a single FV crisis call number is immediately presented to me at top of page. Later I remember that the crisis number is always printed on the bottom of the school newsletter which is on the fridge, but I wasn't thinking straight.

The number I call is the Victorian Statewide Combined FV Response Service Crisis line although I don't need to know what it's called, and it may have another name. My call is answered quickly because when the whole FV set up changed in 2016, the government recognised that immediate action when someone is brave enough to call is a really important part of the system to get right and funded it.

I tell the person on the end what's happened, I'm not sure what to do next because I'm confused and my child wont stop crying. The Crisis responder explains how serious my situation is and that I really do need the police to come so that I and my children are safe from further harm. I don't know why I didn't think of that. I call 000 on my mobile while the Crisis responder stays on the line -they are able to support me till the police arrive. They come very quickly because I've mentioned he tried to choke me and that our youngest is just a baby.

The police members that arrive for this crisis clearly believe me, are kind, look me in the eye and they sound like they understand what's been going on in our house and how men like my husband behave; I get an immediate Order for a month from the police once they've finished the crisis interview and have clarified which category our family belong in. I call my aunt who comes to get the children. It's explained to me that while I need to go to hospital soon, later they will help me leave the house safely if I want to (or even the area or the state) but even though I'm full of distress I already know I want the children to stay in their school and community, and that its not right we should move out. The police members at my place call the Police Perpetrator Action Team to find him and start the next phase of the process.

Since the law relating to FV was changed to respond in a targeted way that focuses on containing violent perpetrators, the new system I am describing falls into place very quickly in my situation.

In 2016 the process was changed to identify three categories of perpetrators (with mandated roles who can measure the criteria to present to court) with Streams of response-actions proscribed depending on category.

- 1. Controlling violence/residential high, med, low severity where perpetrator is assessed as high, med, low threat of ongoing violence.
- 2. Controlling violence/ post relationship and/or non-residential high, med, low severity where perpetrator is assessed as high, med, low threat of ongoing violence.
- 3. Family violence other med and high severity only, where perpetrator is assessed as high med low threat of ongoing violence.

Wherever low severity or low threat are determined, *and* parties have a family or family like relationship, matters are dealt with by law *as if they were not related*.

Additional processes and penalties apply to any person who conducts any of the violent behaviours on behalf of the perpetrator.

Because the threat to us is assessed as 'severe violence with medium likelihood of future violence once he exits the system', my husband will automatically enter Stream 1A for perpetrators. That means he goes to flash incarceration in the dedicated holding 'jail' until next week when he will go straight into one of the system of residential 'rehabs' for men who are med-high threat of future violence to their partners. He can choose not to go to the rehab and then there'll be a fast court hearing and he will be definitely be sentenced to a jail term longer than period of rehab. He'd still have to do a program in jail though, and he'd be away from work and life for much longer. Where women and children choose to stay in the house, men who are assessed as medium or below would enter Stream 2A - that means supervised crisis housing overnight, 5 days in jail and then to rehab setting. (Stream 2B is pretty much the same but the woman and children choose to leave the house and the violent partner must stay there with an approved person. Women who want to leave the home can stay with friends or relatives, be helped to move in to one of the new dedicated sharedexperience refuges for women who choose to have the support of other women and kids or to preestablished apartments that she could rent for 3 months or so while the crisis period passes (& there are other options - the housing assistance worker is part of the core team put together by the Victorian Statewide Combined FV Response Service anyway)

I know my husband will be angry with me for finally telling police and I know he's ashamed, but I'm not scared because I can see I will be protected all the way and someone will always know where he is. His distress will only get worse next week because he will have to tell his boss & coworkers, take time off work to do the 4 week residential rehab program, he'll miss the Geelong game and he'll have to live with other controlling men that I know he feels he's different to...and of course there's the noticeboard out the front of the rehab and on the central website with each of the men's names on; his name will only come off if he completes the program. Any breach, and it goes back up and he's back to jail. Each aspect of the system gets to contribute to the list of what constitutes a breach so for example, leaving the rehab against advice is a breach.

2nd phase – post-crisis

I agree police can text me with updates. I go to hospital for treatment having been given a booklet that outlines the whole system containing a personal printed page of what will happen next in my own situation and a number to call if I need it. The hospital has been informed I am a patient

whose husband is in Stream 1A so I am put in a room with good supervision. Behind the scenes the police set up a transparent, information-sharing team for our family's circumstance which moves our case from the Crisis phase to the Post-crisis. Later in the night they text me to say my husband was picked up at the hotel I thought he'd be at, he is now under supervision on his way to jail, and that the team has been established. I feel confident because they tell me this team are already working for other families in my area that experience family violence so I know they will communicate with each other.

The core team =

- Myself (not all victims will want or be capable of being on their own team)
- one or two police members
- a specialist companion worker (SCW) for me who has specialist training in financial assistance as well as the usual skills
- a violent partner companion for my husband (VPC) a
- a Kids advocate (KA) to look out for their needs, arrange support and help, liaise with supervised access points or any other agencies involved
- a Housing-Access Worker (HAW) who can find me housing if I change my mind or assess my house for safety
- two other names are added later prosecutor and once I've contacted a lawyer I can give them access to the team as well if we think it's a good idea.

We are all given password access to an online hub just for our family within the whole of Victoria FV system shared information database. I get my password the next day and I check in straight away. I can see a thoughtful message, the first names of my team members, and the notes the police took last night. It also says they've taken my husband to the holding jail, but privacy is his right so his whereabouts & statement are not available to me. They've got my date of birth, my aunt's surname and her contact number written down wrong so I leave a message on the hub telling them the right information. I know I'll get a chance to tell my whole story to them soon so I don't add anything to the list of risks and violent behaviours they've made, even though there's heaps more to tell.

Even though its not very long after the FV response system changed, my situation of ongoing unreported violence is much less common than it used to be. The strong clear predictable approach taken by the **new Coordinator of FV for the Victorian Government** and our society/community to perpetrators has encouraged more women to report, and I reckon its put some blokes off using violence too. Of course there's still plenty like me that wanted to save him the hard learning. I really wanted the relationship to work and I believed he'd change. However in the back of my mind I did know that when I rang the crisis service and police that I would be kept safe from his retaliation. That's a big change from the old days. And I know that if we lived nearer to neighbours who could hear, someone else would've reported it by now, and the police and service approach would have been respectful of our fears and kept me and the kids safe from any lethal violence. The rate of murders of women by their partner has dropped significantly.

Another thing is that because of the new system of intensively managing perpetrators, keeping them visible and contained, services and the justice system don't talk about high/med *risk* factors as much as they used to. The categories of severity of violent actions and behaviours, and levels of perpetrator threat to the victims, have been researched and established based as much on the psychological elements of control and inducing fear as on physical harm, plus a review of the perpetrators other crime and capacity for the team to follow up on behaviours in past relationships.

One challenging aspect is the brave decision taken that Perpetrators have no ability/right to contest 'high threat' determinations. Protecting victims from severe injury and death was made such a high priority that everyone was willing to wear the flack, and once it started to become clear that the new system was really working the criticisms dropped off. The predictability of predetermined actions against perpetrators has made a real difference to managing safety and fear in children and their mothers. The threat is managed up front in a known clear way that we can all talk about. Victim blaming is much less prevalent than it used to be because it's so obvious that the perpetrators own the problem and are accountable. Risk management strategies these days are much more common in the low severity categories because the system wants to make sure that even if categorised as low threat, his violence does not escalate.

The Court still needs to mandate that the response system for each category should be enacted in each case, but it's a simpler process and more cases are easily managed per day by the trained magistrates and prosecutors. The specialist Court will, if I prefer, accept reports signed by all of my team, supported by the video they took on the night I reported. In my case, because my husband is in category 1 for legal purposes *Controlling violence/residential – high threat*; that means there are medically verified injuries, my husband carried out known high threat behaviours, there are photos & some audio I took on my phone app before the police came, and a police statement about the perpetrator interview (which will accompany the team's report to a Magistrate who focuses particularly on Category 1 cases). Category 1 cases no longer need to go through a court hearing with witnesses attending to make the system function. I can *choose* to go and stand in front of the judge though, I know my husband won't be there. I might want him to know I'm standing up for the kids and myself. He gives his evidence via technology with the VPC accompanying him, its up to me if I want to listen. I know he'll argue that he shouldn't be put through this process and he won't do it again, but that's old thinking, magistrates no longer let perpetrators away with that excuse.

Of course the guys all wish it was like the good old days when they could stay invisible and keep managing their own lives and keep control no matter what happened to their partners and kids. But this way is much better. I'm broken and upset and angry, and really wish he'd got help earlier but I'm not ashamed and I know exactly what will happen at each phase of the system. I can't be sure of what he will do but I don't have to worry about not understanding everything else around me and I can get help immediately if he finds some sneaky way to still try to control me. If he 'escapes' from any of the holding situations the system protects the kids and me immediately, even before they look for him. The publicity and inconvenience, the new experience of having their power taken away in this new public rehab system has actually led to fewer men being violent anyway. Its still a big social problem but many more men are putting their hand up early and asking for help from the Change Service (online, phone, counselling) – there are at least 5 options for the kind of

help they can get if they take responsibility for their potential violence and ask for help before they are reported. The men asking for help are not automatically reported or charged unless they fit the high severity/high-med risk assessment category. For all other participants, the Change Service will also report men to the police if they feel anyone is unsafe. (Options for help could include time-out houses with support and education about controlling behaviours). The Participants in any options supervised by the Change Service, have to contribute financially or do a range of allocated tasks no matter which choice they take, and sign a contract with their partner and family that's witnessed by police.

The specialist companion worker (SCW) that comes to see me the next day in the hospital listens to (and records with my permission) the whole story of our sorry relationship; I need her to especially understand the ways he terrifies us and that all the patterns in our relationship have led to this time, and that I have loved him. She finds out I was also in another violent relationship, as was my husband and says we can talk about that next time. She confirms that no matter whether I want them to or not, the system must now follow through with my husband's accountability because he's a Notified High Threat Perpetrator. It scares me but I do know that's the deal. She explains that they can help me best if she shares our conversation with the team and I'm ok with that. I sign off on having the Kids Advocate go to my aunts to tell my little one what's happening and she arranges for the maternal nurse to come and talk to me about feeding my baby while I'm in hospital. She calls the CLC worker they have teed up and we talk to the lawyer about my options on Skype. They say I need to get family law orders for this situation now as well as the ones I already have and that they will set that process in motion. The CLC reviews the family law orders for both kids and immediately sends an update to the family court, which is copied to the Police and my service with my permission.

I need a bit of help to accept that we've all been at such risk until now. It's because of our past history, and the fact that I'm in hospital with damage to my neck, plus he has always threatened to kill the kids if I reported him. We make a safety plan for all our family's regular activities - even though I know he's not out in the world, I'm still a bit worried about his brother coming over to yell at me. I'm so relieved that that my husband is in flash incarceration to cool down and realise he's going to have to face this. I'm also grateful to know that the high-risk offender part of the rehab will be locked and guarded because I know he'll fire up again. My SCW makes sure I am clear about the range of options I have if he breaches the IVO either before during or after he is in the rehab program, and I choose a technological option that gives me fast access to police.

I don't want to do it myself because I'm exhausted and vulnerable so the SCW calls my employer, explains I'm unwell and books a time for me/us to come and talk about some leave. I know my workplace has DV leave and so does my husbands so that should not be a problem but I still feel worried about not being able to finish the piece of work I was doing. Making sure all workplaces were set up so that violent perpetrators could get leave to be managed this way, and weren't able to be discriminated against in the workplace because of being part of an improvement program were big changes back in 2016 too.

I call my friend and my aunt who are the people I most want to support me just now, and arrange for them to visit. The SCW emails each of them a summary of our plan so far so they are kept in the loop.

Because I really want to, the SCW helps me write a letter to my husband explaining that if he is able to stop the cruelty, the threats and the violence (all of it not just the physical stuff), and if I can be sure that I and kids will be safe, we may be able to consider getting back together, with some help and oversight. I also let him know I might find I've had more than enough of him or cant feel ok with the relationship and not want to get back. He needs to do the program because its *right*, not to get me back. Because everyone in Victoria knows or quickly finds out how this system works he already knows he cant see the kids till he is signed as suitable (for either supervised or non supervised access).

When I'm discharged in a couple of days I'll meet with the whole team at our home and we'll make a plan for a longer period. The IVO may be extended then – we can get automatic approval by Skyping into the Court officer - and we might decide it's best for my older child to have some counselling and support for their fears. The SCW has already suggested we add the maternal and child health worker to the team. I'm really glad the Violent Partner Companion (VPC) is going to hear what I say early on in the process because I know my husband will try to minimise or lie to him. I also know that the unique features of our power imbalance dynamic (revealed by my 2nd day taped whole story) have been analysed by the team and will be used in interviews with my husband. I've given permission for my medical records from the 4 previous hospital admissions to be added to the computer system they all share, and a nurse that's been with me a few times has asked if she can write in the shared notes what she observed about our family, I want to read it first but I trust her, she's kind, so I'll probably say yes. I think I'll apologise to the nurse I like for lying to her about my injuries before. I know she was concerned. Medical staff has the choice to report a suspicion of adult violence through the central Health, Education, Welfare, Community notification portal, (HENWNP) but I think she wanted to be my friend and let me come to it on my own. I'm glad at this point but I guess it could've gone wrong.

The plan we've made is for the team as well as for me, so they can structure their time and be clear about who does what when. We all agree together how often to be in contact and what the purpose will be and they leave me a copy of the agreement – I choose who I share it with but I have to agree not to share it with my husband. So I know how, when and why to contact any of them and that we will all use the hub to communicate. I can ask through my GP/Medicare for FV counselling services through the Victorian Statewide Combined FV Response Service that employs all SCWs, HAWs and KAs. The VPCs work for them too but in a different area. Other than planned meetings we will only all meet again if there's another significant change (eg if my husband wants to leave the rehab and go to court/jail instead, if he 'escapes' or if his family are aggressive)

Next planned time to meet is just before the end of my husband's time in rehab to determine what our ongoing safety needs and housing needs and relationship plans are. Both the team and I will submit a 'report' through the VPC to the rehab about what I want – If the team members feel I will be unsafe due to my decision, they can submit a statement saying that too. Once the rehab sign off on his completion, a legal document is signed by all parties so that we all know what has been agreed and consequences of breaching agreement. I think its valid for between 1-5 years depending on agreement and advice.

Ongoing;

Any breach or if I am feeling unsafe I call 000 and my team are alerted. I can also use my technological option and/or communicate via an alert system on my hub. It will get a fast legal response – A dedicated central court responds to this kind of situation. If he's missing, I am immediately told and one of the team will come to be with me until my abuser is picked up. Perpetrators must be transported straight to a holding cell whilst processes are finalised; a second round of rehab is *not available* as an option for perpetrators until a minimum jail term has been served.

My password activated hub on the shared system will stay open for 24 months and is only closed by agreement based on my family's safety. Team members can enquire how I am, or I can leave feedback or updates that do not need prompt police or service action. This will generate an email or sms to the team member or me; we can then visit the hub to see the message. Misuse of the hub by anyone would jeopardise access of course. There are processes in place to manage inappropriate use or over-use of any of the victim supports.

Postcsript; I'm one of the lucky ones, my husband finishes the program to our satisfaction, and we agree to separate. He decides to move to Qld. He knows his name and the number of the VPC Liaison team is on the national register of med-high severity, med-high threat perpetrators if any future girlfriend wants to check up. So far it he seems like he's choosing to use the Qld supports well, I am using an intermediary to arrange access at the moment but if I feel safe that can change. I agree to supervised access for the first 6 months when he visits, and then graduated access. The Kids Advocate has ensured the children are linked in the Children's Champion support organisation, they keep an eye out for the kid's welfare, offer some activities and I can talk with them if I'm worried. It's paid for through the Temporary FV levy that has been needed to get this whole epidemic of FV under control. Its up for review in a couple of years and hopefully this new system will show such success that governments invest in it as business as usual.

I meet with my team once more at an annual review and they can see our family are on track for better choices. The system was so good, and because we could all be in the room or in my records at the same time I reckon it saves the services time too.

I have met some other women in potentially dangerous situations along the way and I think about what I wish I'd had in the past, even before I met him. I'm so glad I can tell them that calling the crisis line *does* make it possible to get help straight away because its funded well. The system is pretty tight and uncompromising, but also very clear so everyone knows where it's at. Its just taking women a long time to truly believe its possible to be safe and that society is no longer blaming them. All schools and power companies have agreed to have the **crisis line number on their documentation** so its easy to find it there as well as online.

Some women are still worried about 'making' their partners /ex-partners go into the rehab system (or jail if the men refuse). They don't want to hurt them or shame them. But there are enough people speaking out, government has clearly showed this is not ok, there are campaigns, movies, books, posters and media all the time now reminding us that control, nastiness and fear are not the basis for a healthy loving relationship, that violent perpetrators are the ones responsible for

their actions, they didn't worry about hurting us or shaming us or scaring/damaging their children, and that in the end reporting helps everybody become better and happier.

I know there was a lot of opposition and concerns about men's/perpetrators rights back at the beginning, especially the public naming, and courts were worried that the change was too big and people are innocent till proven guilty etc. I think the public naming has gone a really long way towards making violent men think, that and the time off work. It puts them back into the situation of making a choice not to harm their families if they don't want those predictable consequences. And now they are more ways to get help to interrupt their violence. Others were worried about reducing the focus on risk assessment and on centring the bulk of funded systems around victims. The manner of proof and burden of proof had to change to support it all, and the broad sweep of public and workplace education campaigns about the dynamics of FV helped.

Its right that the system has been turned on its head and victims can be safer and helped whilst controlling perpetrators can't escape the consequences. Already more women are reporting earlier because they are getting to know sooner that violence and inequality in a relationship is not ok, they have broad social support to put their children's wellbeing and their own first, and for some its because they can see that maybe there is a way to keep the relationship but stop the violence. Kids and teens are telling their mums and dads that violence and fear in a family are not ok too because they learn it at school.

I've asked about what happens for families from other cultures, languages and diversity and it turns out the Police and Victorian Statewide Combined FV Response Service have many workers who are specialists in their area, also information is available in a lot of languages - plus they do their best to get a safe person (agreed to by the woman) on the team to help with translating, or at least try to get the same phone translator. If anyone in the family has a disability or an illness, or if there's been a lot of sexual assault, a knowledgeable person in the area that's needed is added to the team. It's always tough for people in rural areas but the government committed to having branches of the Victorian Statewide Combined FV Response Service collocated with Police as well as Men's rehabs in each major town of the Victorian regions. Increased use of Skype and new technologies is also helping and that might reduce the number of on-site workers needed in future.

This imagined approach also has the added benefit of automatically contributing to public, community and household dialogues about Prevention of MVAWC, the negative costs of gender inequality and the need for respectful relationships education. It all flows together.

WHAT COULD THIS IMAGINARY SYSTEM LOOK LIKE?

NGO sector

One big funded service - Victorian Statewide Combined FV Response Service - with layers of permission to access shared database and client hubs, plus all the governance, policy, standards etc that would be needed. There are no other FV services funded. Includes;

- Victorian Statewide Combined FV Response Service (Crisis) 24/7 telephone line
- (Perpetrator) Change Service (online, phone, counselling for men who don't want to be violent – only available before a report is made to police)
- o All response work for female victims and/or children
- o Children's Champion program.
- o All response work for male victims
- o Options for female perpetrator treatment
- Children's response orgs that are not child protection incl counselling services and groups
- o All Violent Perpetrator Companion–related work
- o Management and central liaison with the network of Men's Rehabs
- Subject matter experts in Disability, CALD, Koori, LTBTQI etc may have unique offices to help people feel comfortable
- Independent system of Client Advocates (for complaints, system going wrong, not being heard, advice)

Some co-location with police FVTeams where possible.

Three Peak bodies only are funded - Women, Men, Children

Their work covers

- Oversight and Action of new system making sure it all works re Response, Early intervention and Prevention
- Advocacy
- Visibility, fairness and justice for Priority Communities
- o Fine tuning new system, ongoing feedback loop to ensure its all functioning safely
- o Public face
- o Research wing
- Engagement with Governments, other states and territories, Federal and international as needed. Input to meetings, conferences, Royal Commissions!
- o Coordination of Community Education on FV
- Each peak body would be responsible for these fields of work for both victims and perpetrators. (Wouldn't prevent specialisation in range of fields)

Government Sector

CENTRAL FUNDING BODY & governance structure ACROSS ALL OF GOVERNMENT with a Senior position (equivalent to an Ombudsman or Commissioner) of **Coordinator of FV for the Victorian Government.**

Children's Commissioner has a unit to liaise with the Coordinator of FV.

Child protection – family violence (CPFV) becomes a specialist subset of organisation - all workers have some FV training but where children are referred in context of FV laws and FV policing – it must go to the specialist CPFV workers.

Needed legislative change to provide flexibility in context of the new FV system that keeps victims safe and perpetrators contained. Reporting FV to police does not lead to children being taken away.

Where a child/children is reported to CP *before* FV is reported to police or Victorian Statewide Combined FV Response Service (Crisis), (therefore before the new system is enacted) CPFV will report to police and therefore child is only in care until perpetrator is contained and team agree that its safe for child to go home. In some cases it may not be safe due to parent's situation.

Police response

Organised to suit police business but needs to be responsive to new system

Family violence teams (FVTs) become a larger part of police structure with permanent roles for those who want to become (or are) SMEs. Consider capacity to have unsworn SMEs belong to FVTs.

FVT members become key educators across the force & are the pool from which members of victim's response team are drawn.

Shared database requires some sharing of information previously kept confidential like past criminal history or previous violent relationships. Protections for all are legislated, and processes for permissions built in.

DoJ Courts

Explained in story to degree I am able

DoJ Corrections

A dedicated form of 'jail' to make the above system run smoothly eg 3 Purpose built FV perpetrator buildings (City, Regional West, Regional East), have holding cells, longer stay units, Violent Perpetrator Companion program liaison worker offices are on site. Provide short term education and awareness programs. Access to preloaded electronic devices that only play quality vids, games and movies that are respectful of gender equality, are non-violent, parenting skills, provide capacity for self-learning.

POST-RELEASE system – haven't thought that through yet!

PART TWO - Ideas and feedback for real life in 2015

The following significant issues cause our Victorian FV system to hiccup

1. Inconsistency between categories in FVPA 2008 legislation and the categories in the CRAF Common Risk Assessment Framework (on which the Victoria Police Risk Assessment and Risk Management process on VP Form L17 is also based).

The risk factors underlying the CRAF are only evidence-based in relation to 'classic' intimate partner, male to female, patterns of ongoing violence (or what was once called domestic violence).

Until recently this hasn't been clearly recognised across the Integrated FV System (IFVS) because of the way FV work has developed iteratively in Victoria. The issues arising potentially affect all of IFVS, including government funding decisions, service planning, evaluation, reviews, and reform.

We simply don't yet have any research evidence to tell us whether the CRAF risk factors are appropriate and hold true for the breadth of family and family –like relationships, FV incidents and life experiences that the Act covers and that Police investigate, services respond to and Courts prosecute.

I anticipate they won't hold true if research is conducted. (I don't know if any further research is being planned by ANROWS or anyone else to remedy this situation but it seems to me the discrepancy weakens the whole system, and it also means the whole system is inaccurate when it says our FV work is based on evidence based risk factors. It also impacts on any related education and training programs about FV.)

The jigsaw pieces don't quite fit together because -

- The evidence based risk factors underpinning the CRAF were developed from research about primarily male to female intimate partner (or ex-partner) violence over time, and they include a comprehensive typology of forms of violence that may be found in a situation of coercive control in a domestic setting (& following separation). The risk indicators are robust within that context.
- The FVPA 2008 talks about a range of family and family like relationships where a perpetrator of
 violence may also be a carer, adolescent child, sibling etc. The issue of relative power is not
 intrinsically considered, nor is the issue of male power. (Some examples of where I observe it doesn't
 work for police are two adult brothers of equal power have a fight and its reported as family violence,
 and probably a range of incidents where a female partner has assaulted a male, but it's not part of an
 ongoing pattern of behaviour)
- Where there is an ongoing pattern of power, coercion, intimidation and control over time present in family and family-like settings the guidance of the current CRAF-based risk assessment is likely to hold true (though we have no research to say so). But because the current justice systems respond to incidents not ongoing patterns, they implicitly contradict this definition.
- I believe any new legislation, or adaptation of existing legislation, in FV context should only cover
 the situation Where there is an ongoing pattern of power, coercion, fear, intimidation and control
 present in family and family-like settings. This would also mitigate against women having orders
 taken out against them or being charged for a single incident of violence in self defence against a
 violent partner.
- 2) A publicly available and promoted Risk of Lethality measure is urgently needed (some countries have them) that includes a 'possible threat of filicide' section. International research and development are placing increasing emphasis on perpetrator violence that is motivated by jealousy and revenge, and that includes forms of stalking or strangling. They appear to be highest risk factors for a man causing serious injury or death

to a partner, ex-partner or children. Friends and family need to have the capacity to recognise these elements and report danger as well as professionals coming into contact with the family.

3) CRAF - Imbalance of perpetrator and victim, risk and threat, assessment

Perpetrators tend to be less visible or even less interesting to services in the process of responding to family violence. Whilst keeping victim's safe, and a focus on women and children's needs will always underlie responses, I believe the focus of IFVS immediate response (by any frontline worker who comes in contact with FV, including police) needs to be reoriented as a priority to

- assessing perpetrator threat levels
- · interrogating risk factors related to specific life-circumstances and
- obtaining a close-friends- and-family rating of perceived levels of danger.

The unique vulnerabilities of victims will of course be identified in interviews and utilised to help target the support they need, but *in my view, including women and children's risk factors as such in the risk assessment has an unintentional link to victim-blaming.*

If the CRAF is to continue it needs to be a responsive live document reviewed annually for relevance and developed as a weighted tool to highlight *combinations of factors* that create highest risk situations. Some thoughts;

- Since last publication there have been many changes in technological and digital forms of violence that are not yet represented in risk assessment
- Family law matters as life circumstances risk indicator(s) is needed
- Recent research reports have stated unique life circumstances indicators that may apply are not yet well enough incorporated into assessments (eg multicultural, new migrants, disability...)
- Risk of future harm to children is being assessed within both traditional 'DV' and other forms of FV under the Act. Not yet integrated into most professionals 'practice.
- 4) Responding to children
- Establish and fund a new role set of Child Advocates for FV

They would work across sectors; employed and coordinated by a well funded and supported Children's Commissioners office. Child Advocates included in discussions about children's welfare in any case where a report to police has been made. They would have a strong voice in decisions, can negotiate with child protection and have oversight of child's wellbeing across all that's happening for them. (Closer to child counsellor-role but not needing that level of skill or education for ongoing psychological work with kids).

Child Protection, Child First and DHS Services Connect workers **urgently need education** on dynamics of FV, Cycle of FV, risk indicators, Children's CRAF and how issues can be entwined.

Some ideas for integrating PREVENTION OF VAWC in Victoria

Possibilities for WORKPLACE SYSTEM interventions

 Introduce a centrally mandated certification system with approved standards (like 1st Aid Certificates) "Understanding shared power and mutual autonomy in relationships" Certificates, levels 1,2,3 and Train the Trainer. Certain levels of Certificate would be required to advance in career, and in some cases before being permitted to do certain work. Position descriptions to require certain levels of attainment, others will say candidates with that qualification will be highly regarded.

Roll it out into male dominated workplaces - both government and non government, including business and boards.

Core approved content for each level which could be obtained and taught in a range of ways eg

- Dedicated training courses established through tertiary Educ orgs
- Year 11 and 12 can obtain levels 1 and 2
- Integrated in some orientation or recruit training
- May equate to certification for CRAF training 2 modules or acceptance as White Ribbon Ambassador via training and interview, etc
- Professional education at universities eg psychology degree should not be transferrable learning

To continue to receive certain benefits, workplaces must have KPIs like 25 % of workplace is certificated to level 2. Could build collaborative/competitive relationships between government and non government orgs (eg like having a buddy who gives up drinking or smoking with you – for example Treasury, CLCs and IT company all do it together and could be covered by a media event). Could be backed up by Online Communities of Support and Education.

2) An approach to promotions, board membership and seniority.

In the same way that OHS and organisational values are now, the capacity to understand and communicate accurate and held-in-common messaging on gender equality/respectful relationships/ FV/VAWC should be increasingly established and integrated as desirable or required core content for any manager seeking promotion.

3) Comms and media

Wherever a position anywhere in government funded or government organisations includes the possibility a worker may have to talk to media, understanding of FV dynamics, gender inequality as a contributor to FV, and strategic messaging on VAWC, should be part of orientation (or selection process). Encourage related organisations to do the same.

4) State-wide system of shared public-education teams

Eg for schools and other Respectful Relationships settings (central coordination of pool of skilled and trained teams of police, DHS, Crisis services etc)

Remember prevention messaging for the resistant, the violent, the victims.

(Useful feedback for OurWatch as well as local initiatives)

We need to be cleverer and more diverse about transmitting key prevention messages indirectly as well as directly. So that information and ideas across to anyone who avoids (or is prevented from accessing) anything that includes the words Family violence, domestic violence, sexist attitudes or gender equality attached (eg violent and or sexist men who are deliberately not watching or interacting with FV news, and victims who are having their access to supportive material curtailed by controlling partners).

SOME OTHER IDEAS FOR VAWC initiatives in Victoria

To repair the societal and personal damage caused by past approaches of 'just a domestic' / behind closed doors

Set up and fund a range of multidisciplinary 'Cold case' teams made up of police, intel officers, counsellors and sector SMEs . It could have a range of functions depending on what the women want. Some may just want a Listening post, or eg someone to write their story for their kids. Others may want historical investigation so that their ex may go to jail.

Women and/or (adult) children who were not able to get help to stop the violence historically can still apply to tell their story, can choose to go to court if they want, potentially receive justice, have men held accountable. The purpose is repair and acknowledgement not about finding fault with past social attitudes, we all accept it was wrong.

ACCESSING HELP fast

A woman who is fearful for her own or child's safety, a grandmother who is worried for her adult child that seems to be afraid of their partner, a neighbour who needs to know what will happen if they report loud noises from next door to the police, or a man who says I don't want to hurt my loved ones, should have a single number to call, and/or an identified social institution to approach, wherever they live in Victoria and whatever their age, income, circumstances. Existing state options are each targeted to particular interest groups or localities. It's too much to ask stressed and distressed people to figure out who they need to call.

That single entry point should come up first in a google search where a person's location is Victoria and key words associated with DV are entered. People should not have to open lots of internet pages, figure out whether they fit criteria or be told they need to call someone else (see attachment of despairing dummy google search for help)

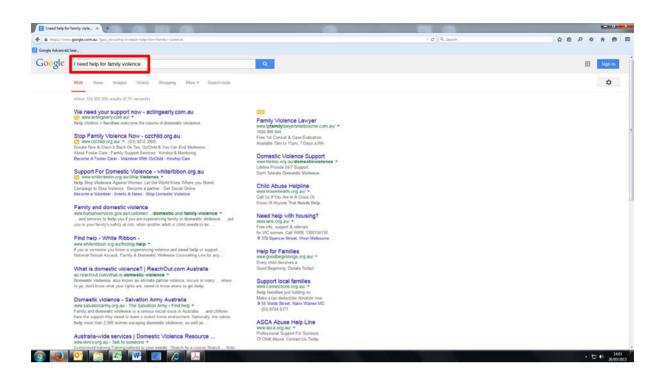
Any one-stop shop/single entry point must be funded to continue, grow and adjust to developing needs. EG The Lookout website one stop online for professionals was funded for establishment but not prioritised for funding to be regularly managed and updated, or to be responsive.

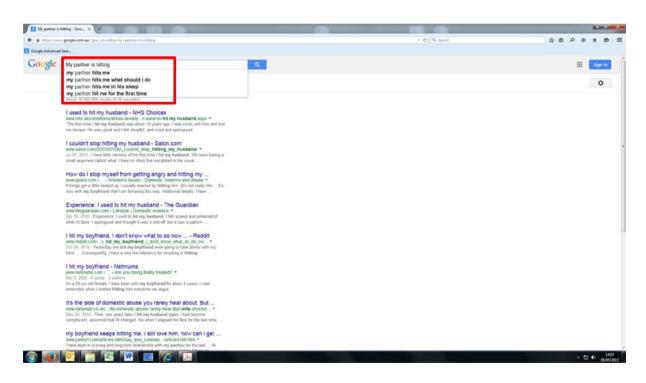
Making language accessible to the distressed

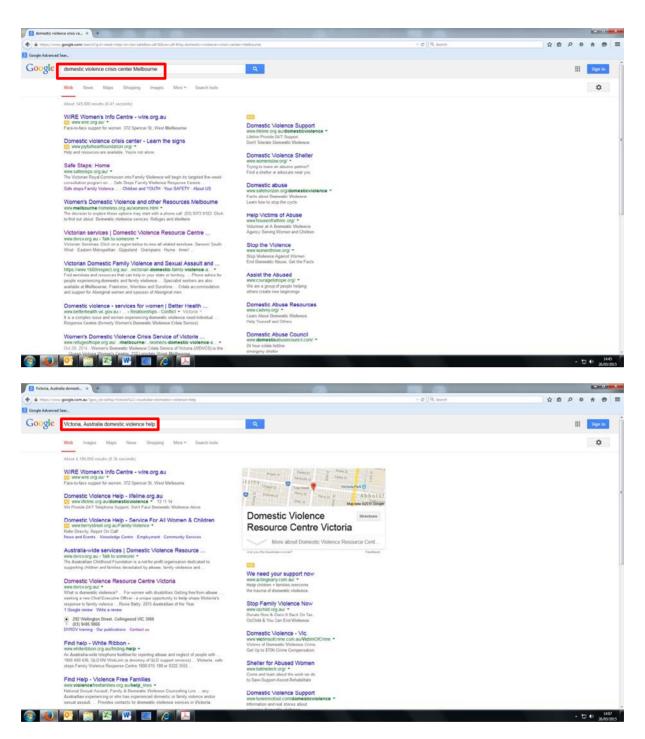
Websites and brochures often use language that's meaningful to sector, the funders or those familiar with FV but may not make sense to the person needing help. I would love to see greater commitment from Government and non-government to plain English material, seen through victims' eyes. A recent example from ABC online piece about 1800 RESPECT included this scenario-

I said to her 'Are you experiencing domestic violence?' and she said 'No'," Ms Mangan remembers. And I thought, she has rung the DV line, I better ask this question another way.

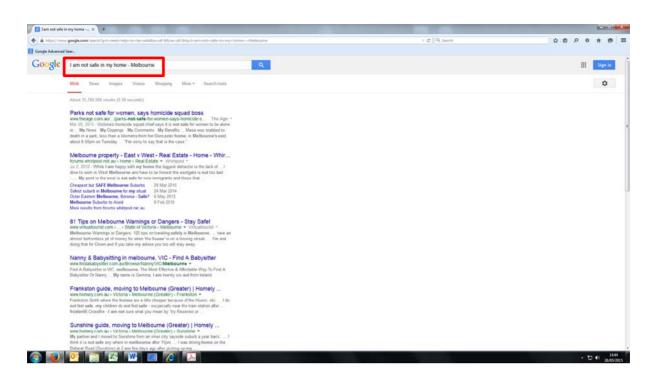
So I said 'Can I ask you why you phoned?' and she said, 'He's going to kill me."

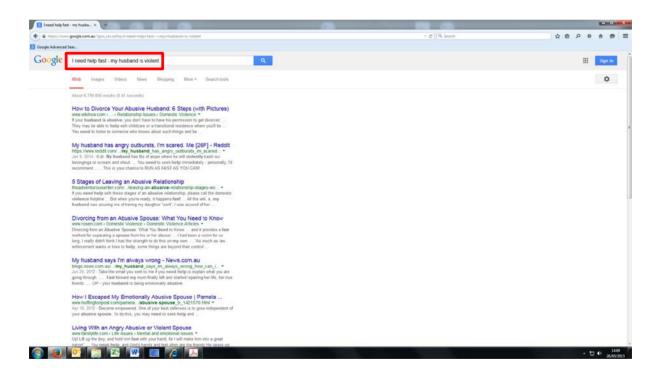


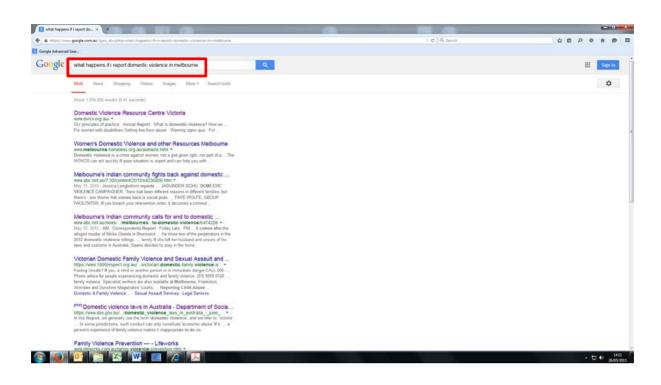


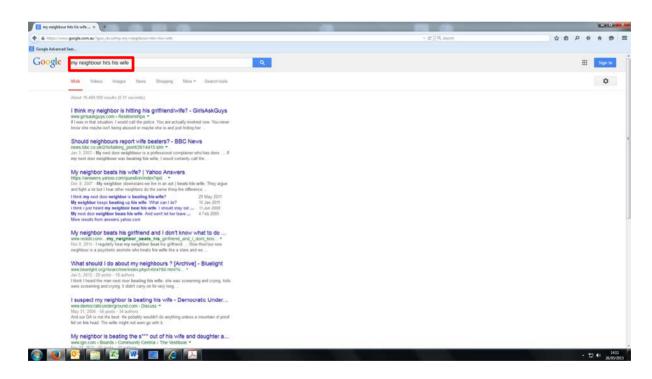


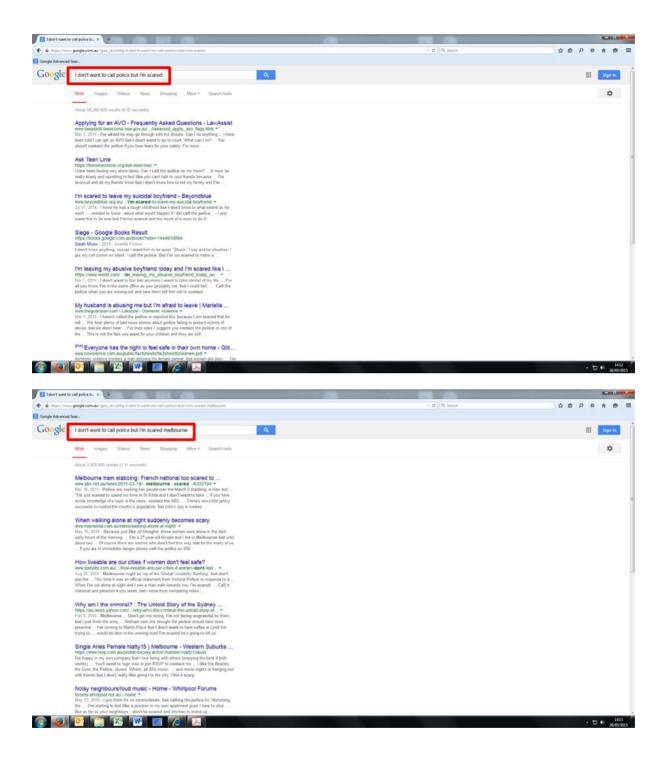
Get best results if you use the words that sector use (crisis, services) not ordinary language. So need to be educated about FV supports before you can find family violence supports

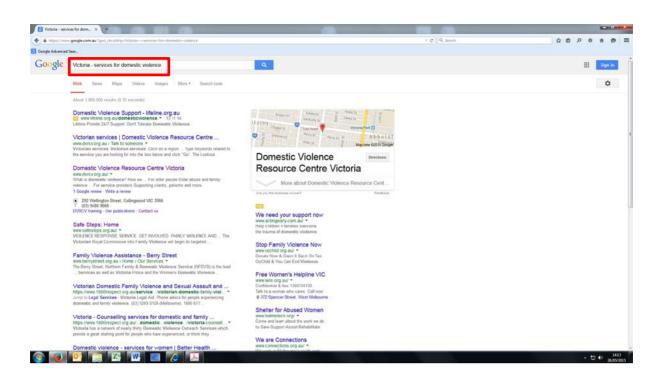


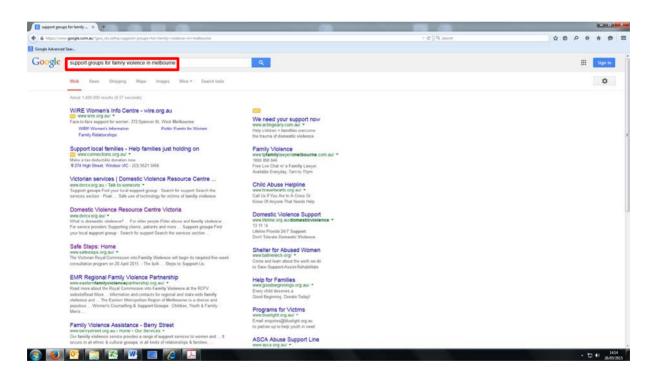


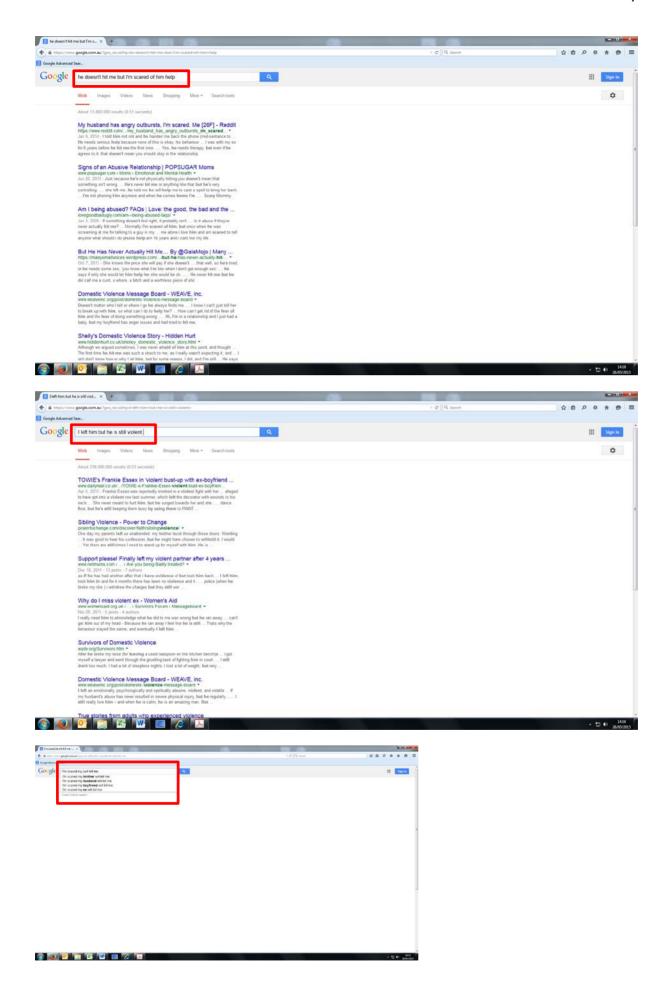


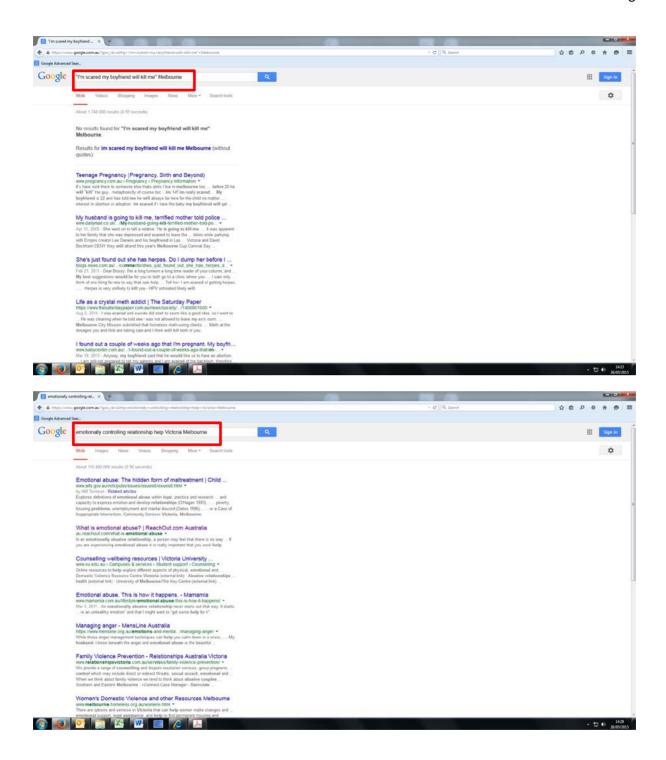


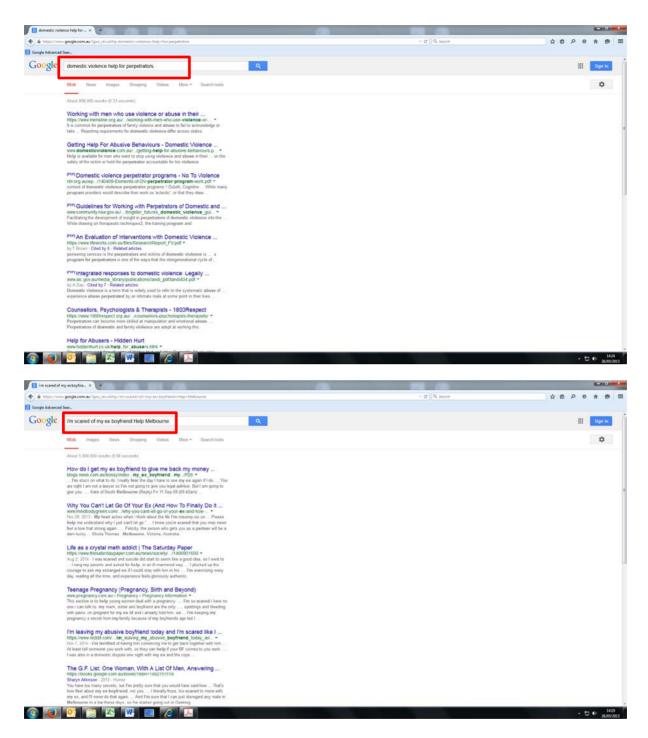






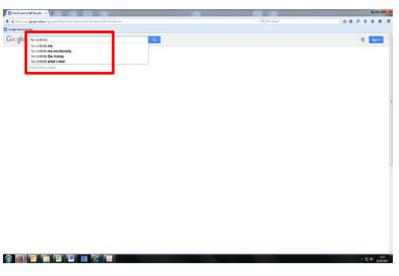


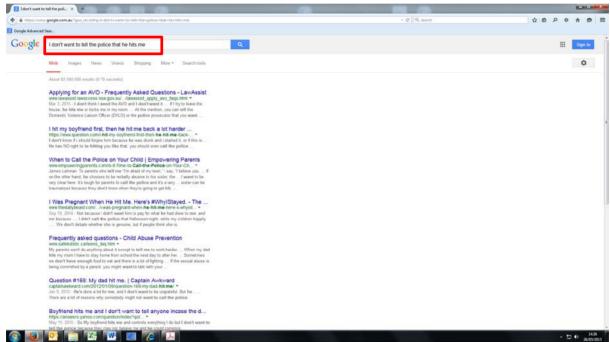


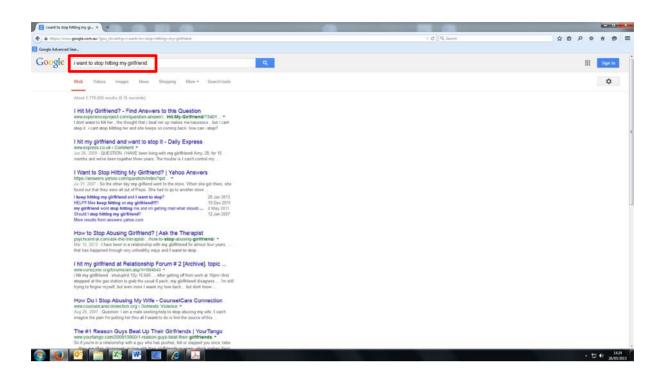


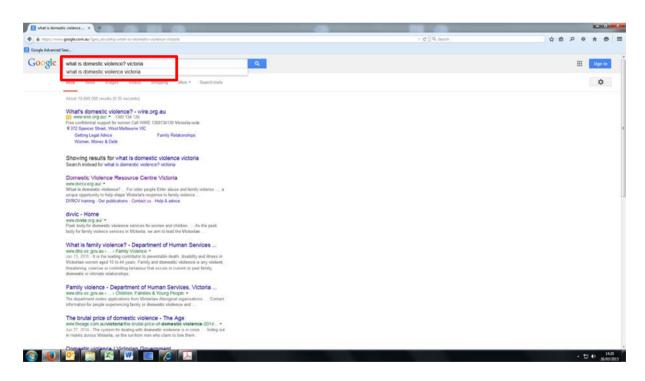
If they open more pages a searcher may find

Safe Steps Family Violence with their 24/7 crisis line: 1800 015 188.

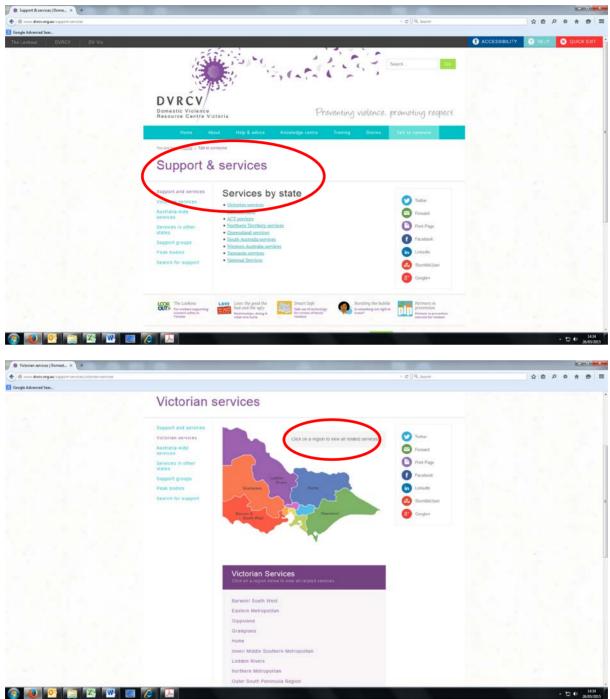


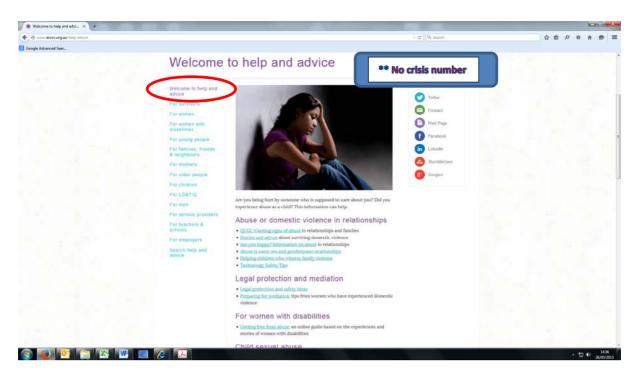




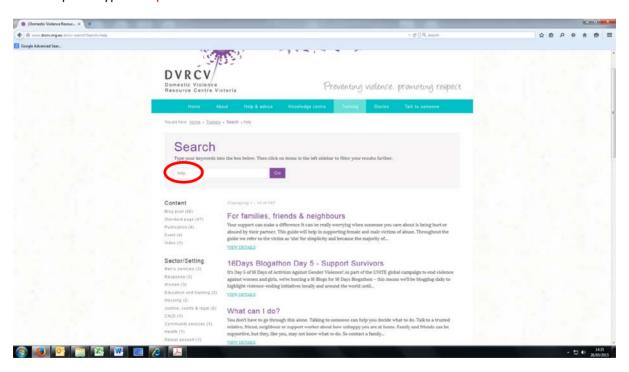


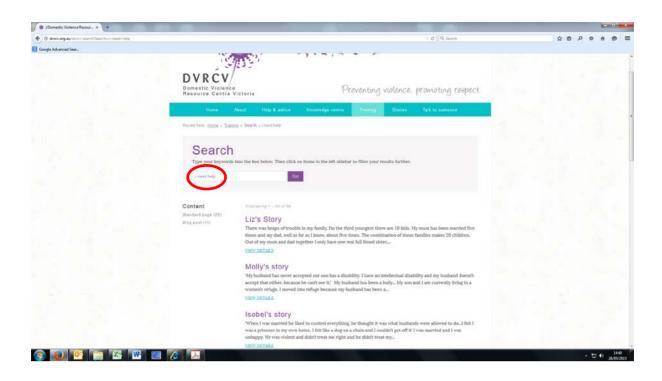
Searcher may find and open DVRCV site or the Lookout - however not everyone understands difference between a resource centre and a crisis service





I Gave up and typed Help





Gave up and typed Stop the violence

