



**No To
Violence**

Male Family Violence
Prevention Association

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**Men's
Referral
Service**

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**STRENGTHENING PERPETRATOR ACCOUNTABILITY
WITHIN THE
VICTORIAN FAMILY VIOLENCE SERVICE SYSTEM
JUNE 2015**





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Executive Summary

No To Violence (NTV) and the Men's Referral Service (MRS) both exist to ensure the safety of women and children through interventions with men who choose to use family violence, and efforts to engage men more broadly in Victorian communities.

Recognised nationally for our leadership in this work and drawing upon international best practice, we believe we are best placed in Victoria to advise on approaches, programs and strategies for working with men which reduce harm and are most likely to be effective in long term behaviour change.

We began by asking the question: "How do we engage with more men, more often and more consistently as we encourage them to deal with the consequences of their choices to use family violence, and thereby improve the response of the whole system?"

MRS engages with over 5000 perpetrators per year in Victoria and NSW and provides the follow up to weekend police incidents in Victoria – 13,000 per year and rising. NTV oversees 2000 places in Men's Behaviour Change Programs - through 30 provider Men's Behaviour Change Programs - and provides specialist training to ensure that practitioners are best placed to work with this particularly challenging client group.

This submission identifies what needs to be done to strengthen perpetrator accountability within an integrated Victorian family violence service system. We believe a *web of perpetrator accountability* – where accountability is defined as something far greater than just punishment - must be enhanced, strengthened and integrated so that men who use violence against women no longer slip through the current gaps. This will ensure our ultimate goal: greater safety of women and children.

In this submission we apply our learning from the last 20 plus years to propose a greater level of integration of perpetrator interventions and accountability, within a reformed Victorian family violence service system, so that each integral piece of the FV system connects and communicates with each other in a continuous loop; sharing information and reviewing risk.

In consultation with our members, we have identified ten key issues, representing the gaps or barriers in the present system of holding men to account and supporting effective change. These are:

1. Information sharing;
2. Tracking perpetrators;
3. Integration of women's, men's and children's services;
4. Responding to children's experience;
5. Accessibility and adaptation;
6. Resources and integration of men behaviours change programs (MBCP);



7. Quality standards, accreditation and accountability in all parts of the system;
8. Workforce development;
9. Developing the Evidence base; and,
10. Community responsibility and accountability.

Our submission proposes a series of recommendations to address these issues and identifies which can be tackled in the short term. In making our recommendations for change, we have taken a systematic view of Family Violence and our specialist role within it, and proposed a series of steps which the Victorian government can take.

Our recommendations include:

- State-wide intake for perpetrators in Victoria;
- Strengthened case management and planning to improve tracking of perpetrators;
- Enhanced data collection and sharing to understand patterns of behaviour and risk;
- Increased resourcing for longer MBCP's and a strengthened evaluation framework;
- Training and skill development across the sectors which interface with Family Violence – from introductory to more specialist work;
- Strengthening family Violence systems agencies capacity and skills to hold perpetrators accountable;
- Adoption of the “Safe and Together” approach as outlined by David Mandel in Appendix 4;
- Professional development opportunities for key professionals e.g. Child protection, Court staff, Police – enabling them to review practice, outcomes and strategies for effective intervention;
- Registration and accreditation of specialist practitioners who are safe to work with men and Family Violence; and,
- Review of NTV Standards and quality accreditation processes for all MBCP's.

With every key step, NTV/MRS will continue to work closely with specialist women's family violence services, ensuring we remain accountable and continue to put the safety of women and children at the heart of everything we do.

In that sense this submission is a continuation of a dialogue about how the different aspects of the web of accountability can be strengthened and integrated further in Victoria in the decades ahead. We will continue to be part of the alliances and community-based initiatives aimed at changing attitudes and preventing violence before it occurs.

We know family violence is a gendered issue, as men seek to exercise entitlement privilege power and control over women and children. We believe that until gender inequity is fully addressed at every level of society we will continue to see men's violence and abusive behaviour towards women and children.

Alongside this and strengthened governance we have the opportunity to better hold men to account in Victoria.



No To Violence & the Men's Referral Service (NTV/MRS)

No To Violence and the Men's Referral Service support the Victorian Government's understanding of the importance of the gender-based nature of family violence. We also emphasise the need for a feminist understanding to occupy a central role in family violence policy and practice.

In pursuing our aims at No To Violence and the Men's Referral Service, we believe that:

- Men's violence is unacceptable,
- Addressing men's violence must be done through a pro-feminist lens,
- Individual change is not enough,
- Our responses need to be accountable to women and children,
- Change is not something that men can do privately, on their own,
- A high level of specialist skills is needed to work safely with men, and
- Investment in quality standards of professional practice is required.

NTV/MRS is part of the No More Deaths Alliance, and agrees with the fundamental principles on which the Victorian family violence system should be built.



No To Violence (NTV), the Male Family Violence Prevention Association, is the Victorian state-wide peak body of organisations and individuals working with men to end their violence and abuse against family members.

NTV has over 100 members who come from a wide range of professional and community backgrounds and work in a range of settings including government, community-based settings and private practice. DHHS contributes \$140,000 per annum to the operation of No To Violence.

We are the leading voice and specialist agency in Victoria (and beyond into other jurisdictions in Australia) on the challenges of, and skills required in, working with men who choose to use violence against women and children.

NTV provides leadership and participates in policy, practice, and resource development, service delivery, and advocacy to respond to and prevent male family violence by addressing men's use of violence, power and privilege.



NTV members deliver over 35 Men's Behavior Change Programs across Victoria, funded to work with approximately 2,000 men per year but in reality considerably more. NTV oversees the standards of practice for these programs ensuring that the safety of women and children is at the heart of the work.

We are the only NGO in Australia focusing specifically on strengthening interventions and accountability systems involving perpetrators of family violence.

NTV is consistently sought after as a major stakeholder in national-level processes focusing on perpetrator accountability and perpetrator interventions, through various projects related to the National Plan of Action to Reduce Violence against Women and their Children, ANROWS, etc.

NTV hosted Australia's largest ever conference in 2012 specifically focusing on responding to men who perpetrate family and domestic violence ('Australasian Conference on Responses to Men's Domestic and Family Violence'), with approximately 400 attendees¹.

By April this year NTV had developed approximately 150 practice resources, reports and articles specifically designed for family violence practitioners, for use across Australia.

NTV was invited to co-facilitate a plenary session on international perspectives at a 2015 international conference on domestic violence perpetrator programs held in the USA².

Our consultancy, advisory and interstate works includes:

- Development of Australia's most comprehensive practice guide for men's behaviour change program providers (Towards Safe Families) for the New South Wales government.
- Development of Australia's first detailed practice guide on strengthening perpetrator accountability in child protection, for the Western Australian government.
- Consultancy support to strengthen men's behaviour change program provision in Western Australia, and to develop the first community-based men's behaviour change program in the Northern Territory.
- Provision of over 50 days of interstate training on perpetrator interventions and primary prevention responses in WA, SA, NT, NSW and Tasmania.
- Responses to frequent requests by agencies across Australia seeking information or advice on perpetrator interventions and accountability.
- Active participation in a number of state government committees and working groups with DHHS, Department of Justice and Magistrates Court Victoria, that focus on strengthening family violence service system integration.
- Rodney Vlasis of NTV is regularly asked to speak at high profile state and national conferences and events.

¹ <http://ntv.org.au/conference/>

² <http://notoviolenceaustralia.tumblr.com/>



The Men's Referral Service (MRS) has been focused on the safety of women and children for 22 years, having over 120,000 conversations with Victorian men about their use of violence in that time.

- In addition to the phone service, MRS operates the state-wide After Hours Service (weekends and public holidays) which processes L17 police referrals for incidents involving male family violence.
- The MRS 1300 number takes approximately 7,000 calls per year.
- For many men, a conversation with MRS is amongst their first small but important steps towards addressing their use of violence, power and control.
- MRS respectfully challenges men's violence-supporting narratives that they use to minimise and justify their behaviour.
- The MRS After Hours Service responds to over 13,000 detailed police reports annually from across Victoria, referred from Friday to Sunday and all public holidays. As police do not require consent to make these referrals, highly specialised Telephone Referral Workers 'cold call' the men assessed by police to be perpetrator of violence in these incidents.
- These calls provide an opportunity for men to start taking responsibility for their behaviour, through the provision of referrals to Men's Behaviour Change Programs and other services where appropriate.
- NTV and MRS take a proactive view of preventing men's violence before it occurs, providing presentations, training, consultation and expertise across the community ranging from schools and tertiary institutions, to governments, NGOs and community sector organisation. NTV actively seeks out, reports on and provides solutions for systemic gaps, while piloting innovative measures towards primary and secondary prevention.

Our Unique Training Offering

NTV has substantial expertise in facilitation and training and brings a wealth of knowledge, experience and skills in family violence issues from primary prevention to response; including advocacy, policy and service systems integration to meet the needs of organisations both in Victoria and across Australia.

Higher Education and Accredited Training Courses

Unique to Australia NTV offers the Graduate Certificate of Social Science: Male Family Violence in conjunction with Swinburne University. To date we have trained approximately 300 facilitators of Men's Behaviour Change Programs.



Through our Course In Telephone Counselling: Male Family Violence (in conjunction with Swinburne University of TAFE) we have trained approximately 380 volunteer telephone counsellors.

We conduct one-day and two-day professional development workshops for agencies and workers who come into contact with men who use family violence within their job role but who are not male family violence specialists. This is funded through the previous state government's Action Plan to End Violence against Women and their Children.

Over 1,000 people have attended these sessions from a variety of sectors including employees from Child Protection, Child First, Family Services, AOD, Mental Health, Justice, Housing, Homeless, Counsellors and Police.

NTV is ideally placed to conduct these workshops due to our work across the intervention continuum, from primary prevention to response.



Introduction

Web of accountability

No To Violence and the Men's Referral Service believe that government policy and service system development should focus on a web of accountability concept. This concept has been influential both in Victorian Government policy concerning perpetrator accountability and also is being considered in the US.

A web of accountability around a man potentially comprises strands based on:

- attempts to hold him accountable through the formal criminal justice, civil justice and child protection systems (involving informed, consistent and coordinated actions by police, courts, corrections and child protection, where appropriate)
- the actions of non-mandated service systems that attempt to engage him through proactive, assertive outreach (for example, at court through a Respondent Worker or other front-end service system initiatives)
- women's (and in some cases, a community's) own informal attempts to 'draw a line in the sand' about his behaviour, and to hold him accountable to the promises he might have made to change his behaviour, and to her and her children's needs for safety and dignity.

The perpetrator's experience, and the reality of, perpetrator accountability systems are strongest when formal and informal accountability processes work together to form a web of accountability around the man. We believe that women and children, and the services which support them, perform a central role in this web of accountability; equally we believe they are not responsible for holding men accountable.

In addition to women's efforts towards holding their partner accountable, in some contexts, community-based processes of accountability are present to contribute towards the web. This might be the case with some Indigenous, ethno-cultural or religious communities, using well-established or newly evolving processes to support victims and assist perpetrators to understand the harm they are causing their families and the community. While these informal processes of accountability can sometimes act as enablers or barriers towards the safety of women and children, the important point again is the consistency between these formal and informal efforts towards accountability. Family violence will not end until friends, family members and community support networks and structures develop the skills to both support and advocate for victims, and scaffold/ support perpetrators towards journeys of accountability and nonviolence.

Women and children, and the services which support them, therefore perform a central role in this web of accountability. While they are not responsible for holding men accountable, they are not passive victims, and accountability is strongest when their existing efforts to



hold men accountable are supported, and not undermined, by formal accountability measures. It is vital for family violence systems agencies to listen to, and understand, women's and children's needs and voices in our efforts so support their struggle against the violence, and their (or our collaborative struggle) towards their safety and perpetrator accountability.

Unpacking perpetrator accountability

The term 'perpetrator accountability' is one of the most oft-used words in family & domestic violence policy circles in Australia. Without clarification of the meaning of the term, or of the meaning in a particular context, perpetrator accountability can drift towards the default option of a 'neoliberal law and order approach' based on a 'punishment as deterrent' paradigm. This 'tough on crime' approach is problematic for a number of reasons.

There are important primary prevention reasons why the criminal justice system has a crucial role to play in ending men's violence against women and children. Without sufficiently strong police, court, judicial and corrections responses to family violence, including sufficient sentencing for family violence related crimes, the community will not understand the message that family violence is unacceptable and is as important a social issue as other interpersonal crimes.

Incarceration for short- or long-term periods is the only option, in some situations, to provide safety for a man's family due to the substantial/severe risk posed by a particular perpetrator. Furthermore, swiftly implemented, short and 'sharp' criminal justice system consequences for offenders, particularly those with a high stake in conformity, can act as a deterrent for prosecutable forms of family violence for some men. However, there is no evidence that incarcerating offenders for lengthy periods of time works in itself to produce behaviour change or to lower risk after release back into the community.

'Tough on crime', 'three strikes and you are out' and other punitive policies carry a range of other disadvantages. They sweep marginalised communities due to Indigeneity, ethnicity, poverty, cognitive impairment or other factors into highly disproportionate incarceration rates compared to more privileged groups, accentuating cycles of entrenched disadvantage correlated with family violence and other interpersonal crime. Incarceration is incredibly expensive – the costs of running a men's behaviour change program for 100 men in an urban setting for a year is less than the annual cost of incarcerating three offenders. 'Tough on crime' philosophies go against the increasing trend of justice reinvestment approaches that are saving Republican state or county-level administrations in the U.S. hundreds of millions of dollars.



Fundamental aim of response and prevention work

No To Violence and the Men's Referral Service see the fundamental aim of family violence response and violence against women prevention systems and initiatives to work towards the liberation of women and children from men's attempts to violate their human rights through coercive control. While women's and children's rights based on physical, sexual and emotional safety are obviously crucial here, men's coercive control of women's and children's lives goes further to limit their space for action, dignity, freedom and in many situations to meet their basic needs for physical and emotional health, economic sufficiency, personal and collective identity, connection and a meaningful life.

In this sense, family violence is conceptualised as a series of tactics (physical, sexual, emotional, social, financial, spiritual) that men use to control and entrap women and their children, violating not only their right to safety, but many of their human rights and basic needs. Family violence service systems therefore need to work towards the safety of women and children in the context of this broader human rights struggle for women and children to lead meaningful, satisfying and connected lives.

Rather than 'empowering' women and children, we believe that family violence service systems and violence against women prevention initiatives can act as allies to their existing struggles towards freedom from coercive control. In essence, this involves three interdependent and overlapping 'threads':

- Service system responses that place women's and children's needs at the centre, and which provide continuous specialised family violence women's advocacy to not only assist with risk assessment and risk management through crisis and case management responses, but also to help her navigate the many complex economic, social, legal, educational, health and other systems that she needs to interface with over months to rebuild her life, connections and space for action, and a developmental ecology supporting her children's safety, stability and development.
- Perpetrator accountability processes and interventions based on an understanding of each individual perpetrator's patterns of coercive control, and what those affected by his use of family violence need from him (to stop doing, do differently, or do or do more of) so that they have space for action in their lives,
- Broader prevention initiatives that assist men to identify and transform sexist attitudes and behaviours, the use of male privilege and entitlement, and structural reinforcement of gender inequality that all maintain gender-based oppression.
- No To Violence and the Men's Referral Service believe that perpetrator accountability processes and interventions should operate within this context to contribute to coordinated community responses assisting women and their children to live safe, free and dignified lives. These accountability processes and interventions are not stand alone initiatives that men are subjected to or put through with the expectation of the same outcome for each man.



The reasons for enacting perpetrator accountability processes and interventions , with any particular man, can involve any combination of the following:

- Augmenting initial and ongoing risk assessments.
- Assisting with risk management during higher risk periods.
- Monitoring and 'keeping track' of the perpetrator's engagement of the service system.
- Addressing criminogenic needs that aren't the cause of the man's use of violence.
- Placing restraints around the man's opportunity to use violence.
- Improving the man's interactions with his children (and the risk he poses directly to them).
- Contributing to direct work with women and children.
- Engaging the man in behaviour change goals.
- Working towards long-term, sustainable changes in the man's behaviour.

The above analysis of the multiplicity of objectives for perpetrator accountability processes and interventions has important implications for evaluation and how success is measured. Singular measures of recidivism through data held by statutory authorities are inadequate in this respect, and are not suited to an evaluation approach matched to victim-survivor needs. The Project Mirabal evaluation measures represent leading work towards a more victim-centred approach. The evaluation showed that women placed importance on more than just the stopping of violence³.

Operationalising accountability

Accountability for male users of family violence relies on local, regional and statewide integrated family violence service systems to:

- identify men who use family violence,
- effectively engage with men during the 'windows of opportunity' in the days and weeks following identification, where men might have more openness to start a behaviour change process due to their sense of crisis resulting from service system identification (for example, exclusion by police from the family home, with Family Violence Safety Notice and subsequent Intervention Order conditions restricting access to their children) ,
- refer men to appropriate services,
- make use of any applicable and appropriate external motivators or mandates to hold men's participation in these services,
- support internal motivations towards change,
- monitor risk on an ongoing basis, and manage significant risks through coordinated community responses, and

³ <https://www.dur.ac.uk/resources/criva/ProjectMirabalfinalreport.pdf>



- share relevant information pertaining to any or all of the above with women's and children's services, police, courts and others involved in supporting women's and children's safety and wellbeing.

Perpetrator accountability: a cautionary note

It is important to comment on the oft-used term 'holding men accountable'.

NTV believes that this can be a problematic term, as family violence service systems, including criminal justice system components, cannot force accountability. They can punish perpetrators, but punishment is not the same as accountability. Genuine accountability requires the operationalisation of what accountability means for that specific perpetrator, based, as outlined above, on what those affected by his violence need to see change about his specific patterns of coercive control. Men can be invited to act more accountably, and family violence service systems can have important roles to play in mandating men's attendance and providing 'non-voluntary' interventions as a means to 'hold' men in a journey towards accountability. However, service systems cannot make men accountable, only attempt to mandate, scaffold and hold them in intervention contexts that might lead some of these men towards behaving in ways that are more accountable to what their family needs from him.

Family violence service systems can place restraints around the man's violent and controlling behaviours. They can use incarceration, monitoring, supervision and predict consequences if the man does not change his behaviour, as means to place restraints around his behaviour and tighten the web of accountability around him. These are important and legitimate actions with many perpetrators to reduce risk.

However, this is not the same as holding the man accountable. Ultimately, accountability needs to be *internalised* by the perpetrator on a journey of change – he can be scaffolded and supported on this journey, but he cannot be *made to be* accountable.



Member Consultation: Gaps & Issues

Following the announcement of the Royal Commission into Family Violence, No To Violence consulted its members. Group and individual member consultations were conducted in addition to (regional) agency visits during April and May 2015. Due to time constraints, member input was also sought via SurveyMonkey and e-mail. In total, seventy-seven members from across the state were consulted for this submission. [Figure X gives a breakdown]

Key consultations included Relationships Australia (VIC & WA), Anglicare, Lifeworks, Kildonan, Ballarat CAFS, Centre for Non-Violence (Bendigo) and Gold Coast Prevention. (See Appendix 3 for Members Consulted)

NTV members consultation about the NTV/MRS Royal Commission into Family Violence submission		
NTV Members consulted	Response count	Response per cent
Agency	22	45.8
Individual member	18	29.2
MBC provider	31	20.8
Practitioner	6	4.2
Total	77	100.00

Table 1. NTV member consultation about the NTV/MRS Royal Commission into Family Violence submission: responses by member type



Gaps & Issues: NTV Member Perspectives

1. Information related to perpetrator dangerousness is shared inconsistently between agencies responsible for managing risk, due to the lack of a strengthening risk management framework, inadequate database investment, and the siloed nature of service delivery.

What our members said:

Members consistently commented on the need to implement an improved framework – a database that works with other services. One that is centralized and captures all data. Some agencies members find the current database: IRIS, somewhat clunky, the SHIP database is seemingly easier for case management and tracking clients used in the housing sector and many clients who can tell their story.

2. Perpetrator interactions with the family violence service system is not tracked, resulting in multiple opportunities for them to opt out of and be 'lost' to the system.

What our members said:

“There is integration at this local level, a case management model that works across the community. The high risk man and medium to low risk is contacted, directly. We have a hands on approach used as an assertive way to “engage/reach men’, to eliminate the risk of these men slipping away.

“It may be perceived as minor case management, essentially it is assertive outreach. This includes driving men; clients to appointments; mental health or GPs, DOA appointments and arranging housing.”

3. Men's behaviour change programs and other perpetrator interventions are not integrated sufficiently, or holistically, with specialist women's and children's family violence services, nor with child protection and family services systems.

What our members said:

“Women’s services and Men’s programs need to stand to stand together. This is an absolute a not negotiable, for making improved systemic change”

“Over the years with sector changes and legislation, we have shifted our position; we can work with the perpetrator (the male using violence)

4. The experiences, needs and voices of children living through family violence still do not play a central role in perpetrator interventions and accountability processes.

What our members said:

“The Safe and Together model by David Mandel is something that all practitioners and programs can apply their work and ultimately make the safety paramount by focusing the role of the father rather than solely the mother (as primary caregiver and therefore responsible for the child’s abuse)”

“Rather than Men’s Programs facilitators or coordinators saying they “do” accountability, or



prioritise the safety of women and children, or do risk assessment (and respond to risk). Rather how do they demonstrate they do this?

5. It is far too difficult for perpetrators from particular geographical, cultural, identity or otherwise defined communities to access services that address their violent behaviour, and there are insufficient service adaptations to work with their particular circumstances.

What our members said:

“There are extended vulnerabilities in communities, in this basic family violence framework one size does not fit all – many are excluded, forgotten or remain at higher risks”

“There is isolation for young and older people in the regions and as expected coming forward and out with is compounded by the feelings of shame and sadness. Any intimate partner violence is not really intimate or private in a smaller community and for young people; this exacerbates the frustration always and lack of services in rural communities particularly for young women and men.”

6. Men's behaviour change program providers feel the burden of being expected to 'fix' the problem of violent men in the absence of a more nuanced narrative of what success means for this work, and in the context of significantly rising service demand.

What our members said:

“We (the MBC provider) are beleaguered by the risk of a man returning to his partner and harming his family, again. To what extent are we making him accountable? This burden, risk and accountability cannot only be placed on a MBC it needs to be shared with Courts, DHS, Victoria Police – this needs to be repaired now”

7. Men's behaviour change programs and other perpetrator interventions are not supported with up to date minimum standards, accreditation systems or sufficient professional development opportunities given the complexity and risks involved in this work.

What our members said:

“The peak body (NTV) need MORE resources, funding especially for NTV to be a real peak body with more teeth. A fresh set of standards and quality controls that includes all members and is accessible and can be implemented MRS/NTV does need to go nationwide and get in to that real political space. Get to COAG!”

8. The lack of a workforce development strategy for specialist men's family violence practitioners, including bicultural workers, constrains the scope and confidence that stakeholders have in this work.

What our members said:

“Can we work with a bigger scope? Let's develop course and train all community, staff in Family Violence”. There needs to be an experiential approach, a system where agencies have open pathways to each other



9. Australian state & territory governments have avoided investing research into perpetrator interventions and accountability processes at the front and back ends, and into localised evaluations to help build an evidence base of what works and why.

What our members said:

“This, the Royal Commission in to Family Violence is significant, it’s something we can all leverage from. It’s a community of practice and we all inform, impact upon, and learn from each other.”

“The Project Mirabal is an enormous positive step forward and indicative to of the progress in the last 5 years; could we (the sector) as a state-wide service could be funded to undertake evaluation here?”

10. Natural community networks and structures have not been equipped or supported to provide effective community responses that support a web of accountability, nor in assisting men to identify and transform male privilege, entitlement and structural gender inequalities at the local and broader levels to prevent violence before it occurs.

What our members said:

‘We need to do this at every level; a strong stance on by community leaders and the Commission on the vital part gender equity must take in the prevention of intimate partner violence – establish programs in schools, sport and the arts’

Our regional members continue the campaign: ‘Make the Link’ a direct connection on early intervention to violence against women - , to raise community awareness around gender inequity and notions of masculinity and what it means to be a young man, woman. This is imperative to for primary prevention – we need to make the link of gender roles to family violence“

“On privilege - Domestic Violence is a social problem residing in patriarchal attitudes of men not in the individual pathology of a man.”



Statewide Intake

Recommendation: Implement a single statewide service entry point.

Recommendation: Establish a statewide single service entry point that would facilitate a consistent – and more effectively monitored – response to all men engaging with the Victorian sector.

Front end and back end service system responses are terms increasingly used to differentiate between early intervention responses involving large volumes of perpetrators and the relatively smaller number who end up participating in a men's behaviour change program. In Victoria, front end service system responses are often associated with the aftermath of police attendance at a family violence incident, involving police intervention, police referral to a telephone-based assertive outreach response to the perpetrator, the perpetrator's attendance at a Magistrate Court as a Respondent to a Family Violence Intervention Order hearing, and if one is present, liaison with a Respondent Worker at the court.

The number of perpetrators who are identified by police or the courts as potentially appropriate to receive this or other form of front end system response is increasingly markedly, and could plateau at an annual number nearing or approximating 50,000 on a statewide basis over the next 3-5 years. This contrasts with the current number of funded places for men's behaviour change program work in Victoria, approximately 2,000 funded in total through the Department of Health & Human Services, Department of Justice and Corrections Victoria.

While these two systems overlap and are by no means entirely distinct – the statutory and non-statutory agencies that operate within these systems are largely the same – there are considerable benefits in differentiating them.

Victoria's current front-end service system responses to perpetrators following police call-outs are under-developed and overwhelmed. Telephone-based assertive outreach services through regional Men's Active Referral Services / Enhanced Service Intake responses, and the MRS After Hours Service, are responding to over 13,000 referrals on an annual basis (and rising significantly), over a half of whom choose not to be contacted (for example, through not responding to mobile phone calls) or appear non-contactable. The single reliance on telephone-based contact as the assertive outreach mechanism substantially constrains the ability of the front-end service system to meet the above objectives of augmenting risk assessments, addressing dynamic risk factors, keeping perpetrators on the radar, and strengthening inter-agency risk management responses. The service model developed by the then Department of Human Services in 2009 to construct a front-end service system approach urgently needs updating to reflect a more strategic approach to early intervention.



Perpetrators opting out of the system

The Victorian service system response to men who use family violence is predicated on the belief that men need to take responsibility for their use of violence and are thus responsible for their transition and engagement in the system. With no single service guiding or supporting a man through the sector, they are, in effect, required to manage their own intake.

This makes it difficult to track men through the system, provides opportunities for men to drop out or 'opt out' and makes it extremely difficult for the sector, organisations and the authorities to hold men accountable for their use of family violence. In short this can render the system 'optional' for perpetrators of family violence.

Implementing a telephone statewide single point based intake and referral system would allow a more assertive follow up to improve accountability for identified perpetrators. Rather than the individual managing their own intake the state-wide referral service would case manage the man's entry into the MFVSS.

Tracking men through the system

Men referred into the state's male family violence service system are not currently tracked through the system. Individual MBCPs provide Integrated Reports and Information System (IRIS) information back to DHHS, however this system does not identify specific men and track outcomes.

Information may be shared with local Risk Assessment and Management Panel (RAMP) services, although this is only when a woman is identified of being at high risk. A man may participate in two or more MBCP's but currently there is no way to identify this apart from the man's self-disclosure.

The proposal provides for a single statewide service to more effectively 'track' men as they move through the system, via a more consistent data flow structure and more effective feedback loops.

As MBCPs implement this, the sector will be able to identify all involvement a man may have with the sector. This will include his engagement and the outcomes of previous MBCP including attendance at assessment interviews. In this way men who move from area to area (place to place) or relationship to relationship will be more effectively tracked and therefore improve accountability.

Longer term the adaptation of a centralised data collection (eg Specialist Homeless Information Platform) could provide all service providers with access to information about a perpetrators past/present sector involvement.



NTV Members consistently commented on implementing an improved framework – a database that works that is centralised and captures all data. The current database where most members struggle with is IRIS, it is clunky, and the SHIP database is seemingly easier for case management and tracking clients.

Data collection

Data is collected at the moment across the sector by the DHHS IRIS system. This system allows for the collection of masses of anonymised sector-wide data however clear and concise individual client information and outcomes data is not collected or collated. For example, when a client who has attended a MBCP and dropped out of the program the program itself keeps this outcome as data but this is rarely shared between service providers or at regional or state level.

With a statewide intake service and effective feedback loop the sector can better track perpetrators and more precisely identify strengths and gaps in the sector. Also, the sector would be able identify trends, themes and challenges in the work such as locality, employment or AOD/Mental Health issues.

Links to Front-End Women's Services

The centralised intake service would require close working relationships with statewide and regional/local specialist women's family violence intake and crisis responses. In particular, appropriate information sharing with Safe Steps Family Violence Response Centre would enable considerably strengthened risk assessment and risk management responses with respect to women at particularly high risk of lethality, and with men who pose a highly dangerous risk.

Safe Steps captures a wealth of data on the particular patterns of coercive control and risks that highly dangerous men pose. Many of these perpetrators have used violence against multiple women and their children over a series of years, sometimes across different parts of Victoria. A centralised intake service, operating at a statewide level, would be in an ideal position to work with Safe Steps and regional/local women's services to develop an overall picture of risk in collaboration with police, corrections and child protection.

This close working relationship would also provide a capacity for any of the 17 RAMPs to escalate risk management processes regarding particularly dangerous men, where relevant information can be obtained across different geographical regions due to the man's mobility, to a centralised level.



Statewide Intake Benefits

A key component of this submission is the focus on a shift towards a centralised statewide referral service to respond to all referrals into the MFVSS. The centralised statewide intake service would work with other front-end services at local levels, as part of overall, front-end service system responses. A primary factor in the development of this model has been to improve and grow the web of accountability.

A statewide service would improve perpetrator accountability by:

- assisting significantly in improving coordination and information sharing related to perpetrators entering or re-entering the MFVSS,
- creating a single service entry so that men entering the MFVSS are not provided with multiple opportunities to avoid responsibility by opting out via complicated referral paths,
- through a series of feedback loops it allows for the tracking of men as they engage through each step of the MFVSS, and
- becoming a collection and collating point for all data relating to perpetrator engagement in the MFVSS.

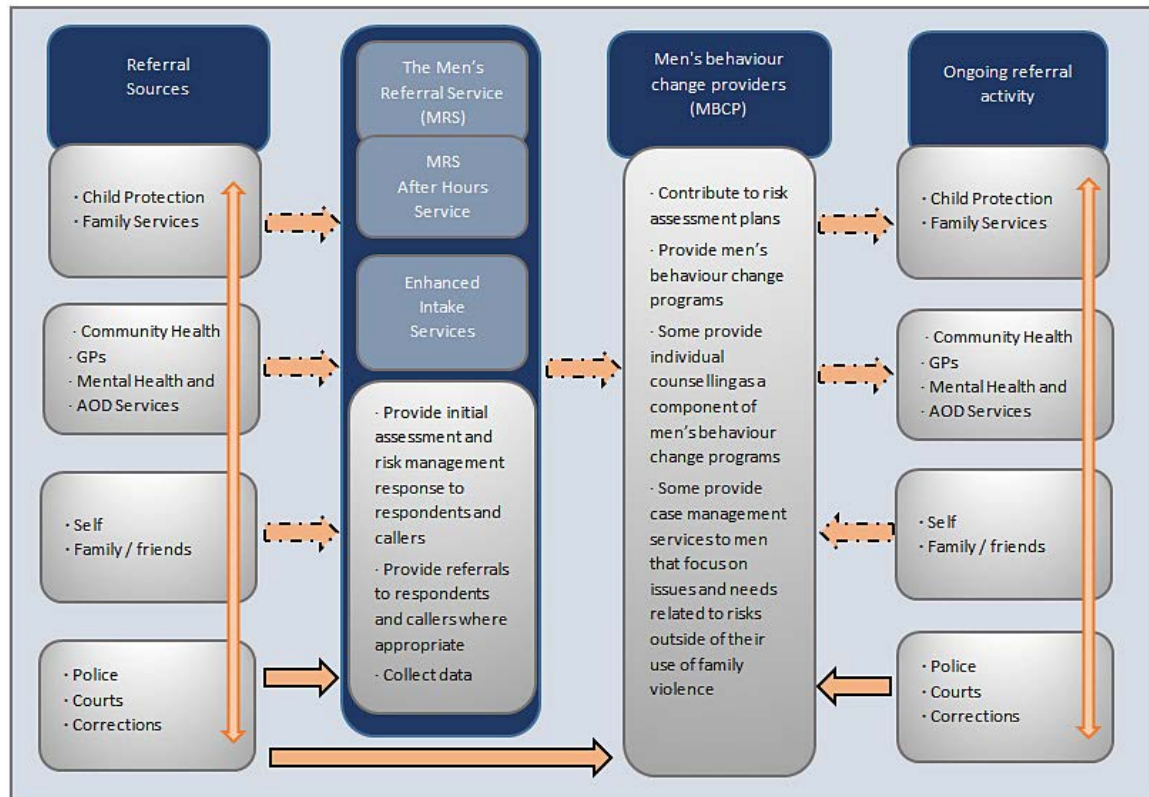
Flexibility

An important benefit of a statewide intake and referral structure is that the intake service would have the capacity to provide a range of flexible responses to the sector. The service could provide services depending on demand for these services and how the back end of the sector evolves.

These could include:

- telephone follow up to men waiting to engage with a local MBCP,
- telephone based case support for men with multiple needs, e.g. AOD and mental health, to ensure that addressing their use of family violence is followed up on after their engagement with these services,
- active tracking and following through with a man's referral processes and assertively explore any barriers to his engagement.

The Victorian male family violence service system in 2015



* Referral pathways may be mandated, active or warm, with opportunities for men to opt out in some situations but not others. For example, only some Magistrates' Courts are able to provide a mandated referral based on a civil law intervention order matter, whereas in most other circumstances, there are no consequences or sanctions if men do not comply with a Magistrates' Court referral. Victoria Police provide active referrals for a telephone based assertive outreach response but men can choose not to answer the call. Referrals provided by Corrections Victoria are generally mandated through Community Corrections Orders or parole conditions.

Figure 1. Victorian male family violence sector 2015: structure and interactions

Referral Pathways

Referral pathways for men identified as using family violence are as many as they are varied. As well as justice based referral paths such as police, courts and corrections, there are a range of other community based referral pathways which can include the Department Health and Human Services (DHHS), community agencies and self-referral. The Men's Referral Service (MRS) operates across the sector and state providing phone based, sector wide advice and referral information to men about services in with which they can engage and information and support to family/friends who are experiencing family violence.



Referring sources may direct a man to the MRS or directly to a men's behaviour change program (MBCP) or both. There is no single referral and tracking process that individuals and services are required to follow. This can, and does, result in many men falling through the cracks and being lost in the system.

Justice system referrals (in particular courts and corrections) can mandate a man to engage in a MBCP; however there are also significant number of men identified as using family violence who are not legally mandated but may be encouraged to engage in a MBCP (for example DHHS may request a man complete a program before access to his children is allowed. Alternatively, a partner may indicate she will leave the relationship if the man does not sign-up for a MBCP).

The Victorian service system response to men who use family violence is predicated on the belief that men need to take responsibility for their use of violence and are thus responsible for their transition and engagement in the system. With no single service guiding or supporting a man through the sector, they are, in effect, required to manage their own intake.

This makes it difficult to track men through the system, provides opportunities for men to drop out or 'opt out' and makes it extremely difficult for the sector, organisations and the authorities to hold men accountable for their use of family violence. In short this can render the system 'optional' for perpetrators of family violence.

The current intake procedures in response to police L17 referrals (an L17 referral is provided to is just one juncture where the male family violence prevention system can become optional for a perpetrator. This is what happens:

- Police attend a family violence incident on a weekend and refer the identified male perpetrator to the MRS After Hours Service (AHS) via and L17 Fax,
- AHS calls the man within a 24 hour period and explores safety issues relating to his family/ex-family members, as well as the perpetrator's interest in engaging in change,
- If the man is not interested his details are faxed through to the regional Enhanced Intake Service (EIS) who log the outcome,
- If the man is interested in engaging in support to change his behaviour, his information and a summary of his initial contact with MRS AHS is sent to the EIS,
- The EIS contact the man to further explore his desire to engage in support; if he still wishes to engage in supports the man's details are faxed through to the local MBCP,
- The MBCP receives the fax and the man then receives a call from the local MBCP; he and can either opt in or out of the program.

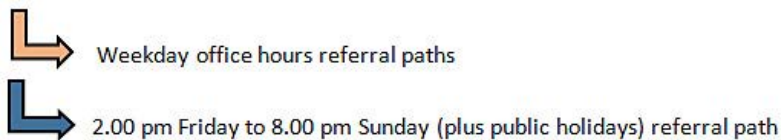
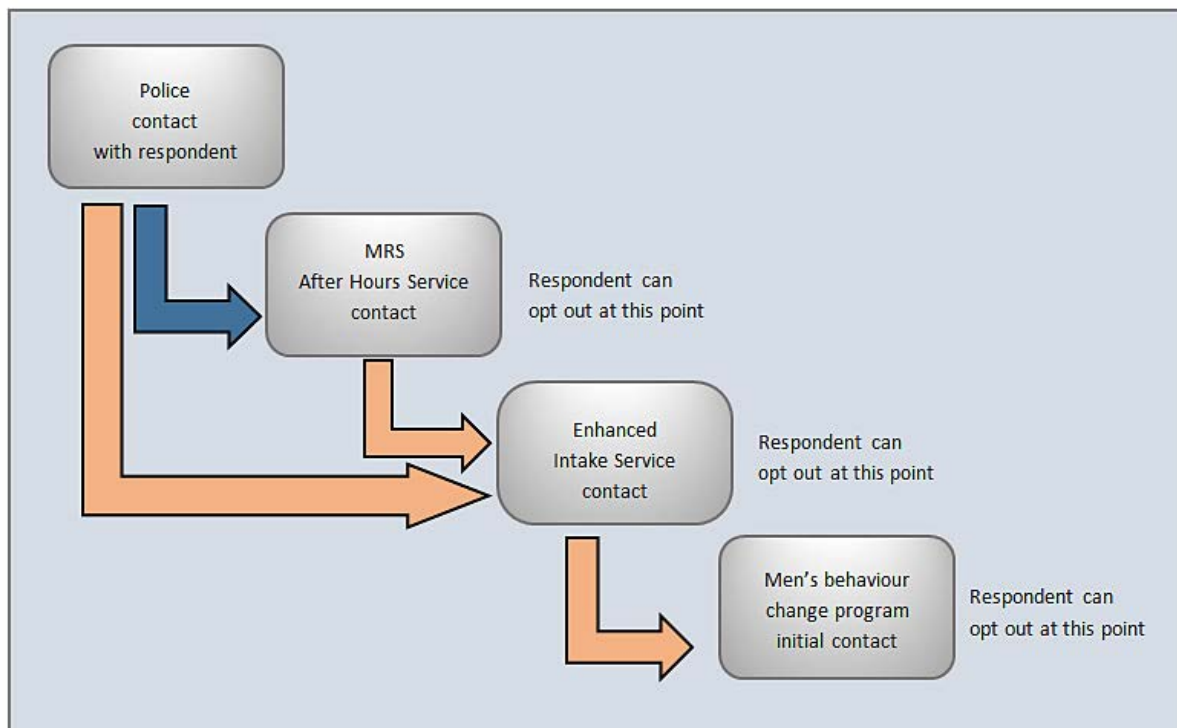


Figure 2: Path for Victoria Police Risk Assessment and Management Report (L17 form) referrals

As can be seen by Figure 2 above there are a range of steps a man must make before engaging with a MBCP. At each step an opportunity for a man to avoid responsibility for use of family violence is provided in the current system.

Male Victims

Recommendation: That within the proposed model of a single entry point statewide service, this service responds to all men involved in incidents of family violence, for specialised assessment, safe engagement, and appropriate referral whether identified as perpetrator or affected family member.

Of the 300 adult male Perpetrators referred to the Men's Referral Service (MRS) After Hours Service by Victoria Police every weekend, and the 600 incoming calls to the MRS helpline every month, many of these men initially present themselves as victims of family violence.

In Victoria, approximately one thousand men are assessed by police every month to be the victim of family violence, and all are referred to the Victims Support Agency, Department of Justice. The relationship types of those referrals differs significantly from referrals where



the female is the victim in that, consistently, only 53% of those men are referred as victims within a heterosexual intimate partner (and ex-partner) relationship, while the rest are from parent/child (25%), sibling (10%), other familial (10%), same sex (1%), and other(1%) relationship types where the person assessed by police as the perpetrator is also male in the vast majority of referrals. (see: Measuring Family Violence in Victoria, Victorian Family Violence Database, Volume

5: http://thelookout.org.au/sites/default/files/fvdb_1999_2000.pdf).

Adult males assessed by Victoria Police as the Affected Family Member (or victim) of family violence incidents require highly specialised training to accurately assess as to whether they are a genuine victim of family violence, or whether they are actually the predominant aggressor in their relationship having convinced both themselves and the police that they are the victim. That these assessments are complex is demonstrated by raw state comparisons alone where in Victoria police assess one in every five adult victims of family violence as male, while in NSW police assess one in every three adult victims of family violence as male.

In Victoria all women who are assessed by police as victims or perpetrators are all addressed within the same family violence services. However, men are currently assessed by several different services, with referrals divided according to initial police assessments. This means it is common for the same man assessed by police as a perpetrator of violence to be referred to multiple services as both a perpetrator, and as a victim across multiple incidents, depending in part upon the assessment skills of the individual police responding to each incident.

The typical counselling response to all people presenting as victims is empathy, but without specialised training in identifying the predominant aggressor and engaging without colluding, when that person is in fact the predominant aggressor, the counsellor's response can lead to colluding with a man's internal narrative that his partner is responsible for his behavior, reinforcing his use of violence, power and control, and further endangering women and children.

Organisations that respond to men referred as victims, including at the front-end to referrals generated through police call-outs or voluntary calls to a helpline, require staff who are highly skilled and trained in these areas.

These skills are most likely to be developed through existing specialist men's family violence services working with male perpetrators, who have the most capacity to engage in primary aggressor assessments. Organisations and individuals arising from the men's health sector, without this specialised background in family violence, are less likely to do this work safely and well.

In the U.K., the predominant service working with male victims of family violence, the Men's Advice Line, was established and is run by the peak body for U.K. domestic violence



perpetrator programs, Respect, which also runs a national referral service for perpetrators (similar to our own Men's Referral Service). Respect took the initiative of establishing a service for male victims as they identified the need for a feminist-based family violence organisation, with substantial experience working with men, to do this work. They established the service very carefully through foundational research on the first tranche of callers, to help tune a primary aggressor assessment finding that a significant number of callers who claimed to be male victims were actually perpetrators. This assessment was one of the inputs for our own practice resource that we developed to assist primary aggressor determination for men referred as or claiming to be victims (see <http://ntv.org.au/wp-content/uploads/docs/resources/121003-primary-aggressor-practice.pdf>).



Men's Behaviour Change Programs

An Introduction to Men's Behaviour Change Programs

Men's behaviour change programs (MBCPs) are one of the most commonly misunderstood elements of integrated family violence service systems and coordinated community responses. While they exist in part to work with men towards accepting responsibility for their violent and controlling behaviour, and to make attitudinal, behavioural and lifestyle choices towards nonviolence, other ways in which they contribute towards the safety and wellbeing of women and children are unfortunately not given the emphasis they deserve. Contributions to ongoing risk assessment and risk management, monitoring, partner support and advocacy, consideration of children's needs, and strengthening the capacity of perpetrator interventions and accountability processes initiated by other systems agencies all make investments in these programs worthwhile.

Importantly, these are not stand-alone interventions that men are put through in isolation to other accountability processes, justice system and/or otherwise. The most effective programs operate within the context of an existing, strong coordinated community response, of which the MBCP is only one part.

MBCPs predominantly utilise group-based interventions, however the potential to enhance effectiveness through supplementary one-to-one and case planning work is significant. For many men, the journey towards nonviolence is long and difficult, and unfortunately there are no 'quick fixes', short cuts or alternatives that can quicken this process. The work to invite resistant men towards attitudinal, behavioural and personal change is highly specialised and potentially risky if not done carefully.

Confidence in MBCP work has been constrained by the lack of investment in evaluating program effectiveness by Australian state and territory governments. This is further complicated by a narrow view of what success means through this work - a singular focus on recidivism and behaviour change goals at the expense of other potential outcomes towards the safety of women and children - and unrealistic expectations that anything less than full violence cessation represents failure. This impossibly high standard is not held in most other human services, health and justice concerns - governments invest in cancer research, for example, even though the objective might be to prolong a patient's quality of life rather than expecting a total cure.

There is no research, even at a speculative level, suggesting what 'types' of men might benefit most from MBCP participation. Certainly, there is a developing understanding that referral to a MBCP might not be indicated for the most severe 10-20% of family violence offenders, those with particularly high levels of psychopathy and extensive histories of using violence in a range of situations (not only in family contexts). Furthermore, men with severe substance abuse or mental health issues, to the extent of interfering with their capacity to function effectively in a group environment, might not be appropriate for this work until



these issues are stabilised. However, apart from these exclusion criteria, there is no research suggesting with category/segment or otherwise grouping of men should be prioritised with MBCP interventions. The uncomfortable reality for funders is that MBCPs, run according to up to date minimum standards, are the only intervention of choice for the majority of family violence perpetrators.

Compared to other Australian states and territories, Victoria benefits from having the longest developmental history in MBCP work. Commencing less than ten years after the first such programs pioneered in the U.S., Victoria now has by far the greatest geographical coverage of any state or territory in terms of MBCP access. While there are still several areas of the state where men have to travel an unreasonable distance to access a program, and while the current and latent demand built into the system far outweighs the ability of programs to respond, the foundations for sufficient statewide coverage are present. Gradually and progressively extending the number of program intervention sites over a period of several years, concurrent with a workforce development strategy aligned with up to date minimum standards and a program provider accreditation system, could see few excuses for men almost anywhere in Victoria to not participate in a program due to location.

Addressing demand for men's behaviour change programs

Recommendation: The Victorian Government commissions an analysis of the number of funded places required to meet both current demand and the latent, in-built future demand growth in the system, projected as a rising number of funded places over the next seven financial years, with projected increases differentiated according to each of DHHS's 17 regions. Furthermore, that the Victorian Government commits to funding the family violence sector to meet this projected demand across this time period.

Short Term: The Victorian Government provides an immediate 50% increase in the number of funded men's behaviour change program places, with two-thirds of this increase provided through the Department of Justice to reflect the substantial role of civil and criminal justice system agencies in contributing towards demand.

We have previously documented, the intense demand pressures on MBCP providers, which have been building over the past five years. In 2011 we recommended an immediate one-third increase in funded places, and a re-formulation of the unit cost funding per place, to meet rising demand and to increase the capacity of program providers to provide sufficient partner contact and individualised case planning. Two years later we documented escalating demand pressures requiring one-half of program providers in Melbourne's metropolitan area to close their books to new referrals in the spring of 2013. Since then the Project Mirabal study, the most sophisticated study into the effectiveness of domestic violence perpetrator programs to date, has provided strong evidence of the effectiveness of these programs in working towards the safety of women and children.



In the process of researching this submission we obtained updated statistics on wait list times and numbers across Victoria's men's behaviour change program providers in the late summer and early autumn of this year (See Table 2 on the following page). While we can provide the exact figures on request, a summary of demand pressures facing each of the nine family violence regions in Victoria are summarised below. These statistics reflect the situation of data collection earlier this year, and hence are not necessarily current statistics, and are rounded to the nearest five.

Victorian men's behaviour change groups: wait-list numbers and wait times				
Region	No. men on a wait list for a comprehensive assessment to determine suitability/eligibility to start the program	Wait times for comprehensive assessment	No. men on a wait list to start the program who have been assessed as eligible and suitable	Wait times to start program
East metropolitan ⁱ	50	2-12 weeks	10	4-16 weeks
South metropolitan ⁱⁱ	260, mostly in the outer south-east or outer-south ⁱⁱⁱ	Up to 7 months	35	Up to 16 weeks
North metropolitan ^{iv}	40	Average of 4 weeks	50	3-6 months
West metropolitan ^v	50	1-2 months	20	2-8 weeks
Barwon South-West	75	Most 3-6 months	10	6 weeks-6 months
Grampians ^{vi}	5	3 weeks-3 months	10	Up to 12 weeks
Loddon Mallee	50	Up to 7 weeks	40	3-12 weeks
North East Victoria	170	Up to 6 months	0	N/A as currently no wait list
Gippsland	Only incomplete data obtained from this region: 50 men on a wait list to commence a program after assessment. Data obtained from previous two financial years suggests that Gippsland program providers work with approximately 50-100% of men above funded service targets.			

- i. One of the region's smaller programs was closed to new referrals
- ii. This includes the south-east corridor of Dandenong / Cranbourne etc. which has recently been moved into the Gippsland Region
- iii. By far the largest program in the region was closed to new referrals
- iv. By far the largest program in this region was also closed to new referrals
- v. The largest program in this region was closed to new referrals
- vi. The region's largest program was closed to new voluntary referrals

Table 2. Victorian men's behaviour change programs: wait-list numbers and wait times, March 2015



The statistics in Table 2 demonstrate that in a snapshot of time earlier this year, approximately 700 Victorian men, plus an unspecified number in the Gippsland region, were on a wait list for a few weeks to several months for *an initial appointment* for a comprehensive assessment for a MBCP. Approximately 225 men were on a wait list of a few weeks to a few months to commence the program after being assessed as suitable and eligible.

It is important to note three factors that make the demand pressures even worse than these figures represent:

- Demand pressures build as the year progresses. Spring is often the worst time for program providers, as in 2013 when nine metropolitan programs needed to close their books to new referrals, many of them not in a position to take new referrals until six months later into the new year,
- When large program providers close their books or have a wait time of several months before they can respond to new referrals, family violence systems agencies – particularly Magistrates and child protection practitioners – temporarily stop referring to them. Hence in addition to the near 1,000 Victorian men waiting to be assessed or to commence the program, an unspecified further number of men who could have been referred weren't,
- Demand pressures will continue to escalate as family violence systems agencies – police, courts, child protection and corrections – continue to improve in their ability to identify, assess and respond to family violence. Only a very small proportion of Family Violence Intervention Orders, for example, include a condition to attend a men's behaviour change program (approximately 1,000 per year according to data obtained in 2010-11 and 2011-12), with potential for this to literally multiply if places become available. The latent demand in the system for child protection driven referrals is also substantial, with the likelihood of system-wide 200-300% increases in referrals as perpetrator accountability practices in child welfare systems tighten. With Corrections Victoria improving its practices to identify family violence both as the index offence and amongst men on Community Corrections Orders for other offences, referrals from this source will also increase, as will demand driven by continued improvement in police responses both through call-outs and follow-up responses by specialised Family Violence Teams.

Significant wait times result in men losing motivation and opting out of the service system, defeating the purpose for referring these men to a men's behaviour change program in the first instance. Men's internal motivations to participate in a service are very fickle, and can easily evaporate with an extended wait. Furthermore, men who are mandated or strongly encouraged by a statutory authority to attend a program are given contradictory messages about the unacceptability of their behaviour when they need to wait many months to commence the program they are referred to.

The Department of Health and Human Services funds approximately 1440 places per year for men to participate in a men's behaviour change program, in addition to slightly over 300



from the Department of Justice through the Family Violence Court Intervention Program, and intermittent funding of a few hundred places by Corrections Victoria. This overall funding level of approximately 2,000 places per year is far too low. Even without considering issues of increasing demand pressures during later times in the year, the potential referrals foregone due to referrer lack of confidence in being able to find a place, and the major in-built, latent demand in the system, for every two funded places in a program, there is currently one man on a wait list to be assessed or to commence a program.

Placement of men's behaviour change programs

***Recommendation:* The Victorian Government diversify eligible men's behaviour change providers to include specialist women's family violence agencies, and encourage the development of new programs more closely connected to child protection and family services contexts.**

The necessary expansion of men's behaviour change program places in Victoria provides an opportunity to 'think outside of the box' in terms of where these programs are situated, and the types of agencies who runs them. We believe there are significant benefits in some of the sector's growth to result in programs located with the following agencies:

Specialist women's family violence agencies: the Gold Coast model, described elsewhere in this submission, involves at its core close collaboration between the Domestic Violence Prevention Centre (a specialist women's family violence service) and Queensland Corrections.⁴ Examples of specialist women's services running men's family violence interventions can also be found in New Zealand⁵ and the US. While the program would not operate on the premises of the women's service, advantages of specialist women's family violence providers operating perpetrator programs include the strong focus on ongoing risk assessment and management and partner support. These arrangements also strengthen the accountability of perpetrator programs to women's services, and provide women's advocates with a stronger say in how these programs are run.

Child protection and family services settings: in the UK, domestic violence perpetrator programs receive about one-third of their referrals from the child protection system, and a similar proportion of referrals through the family court. An increasing number of programs are being funded directly through child protection authorities in the UK.

⁴ O'Malley (2014).

⁵ See <http://www.avivafamilies.org.nz/Services/ReachOut-Mens-Services/>



Unit cost funding

Recommendation: The Victorian Government increases the unit cost formula to the amounts determined through the No To Violence financial cost analysis report, differentiating between small rural, medium-sized regional and relatively large urban programs. The Victorian Government also works with No To Violence to determine what proportion of this unit cost can be recovered through participant fees.⁶

In addition to the need to project the inevitable increase in demand for men's behaviour change program places across time, and to commit to funding a sufficient number of places to match this projected increase, the unit cost funding for each program place needs to be reformulated. The initial unit cost formula, resulting in the approximate \$2,100 per place currently provided through the Department of Health and Human Services, was developed ten years ago based on now outdated industry views concerning how these programs need to be structured and run to contribute effectively towards the safety of women and children.

There have been several major developments in industry understanding and expectations of effective practice in men's behaviour change program work over the past ten years, as outlined in a recent No To Violence paper. Each of these have implications for the unit cost formula:⁷

- There is growing international consensus that the minimum intervention length needs to be six months and 50-60 hours of intervention. The DHHS unit cost formula used to fund Victorian programs is based on half this intervention length,
- Industry expectations concerning the purpose, modality and longevity of partner contact/support components of these programs have grown considerably over the past ten years. As a result, Victorian program providers are under intense pressure and constraints within the current funding formula to provide a sufficient, let alone optimal, partner support service,
- Individualised case planning is widely recognised as a must for domestic violence perpetrator program work, rather than the 'one size fits all' approach of relying solely on 'churning' men through groupwork without attention to each perpetrator's risk profile, motivating factors or criminogenic needs. This requires some degree of supplementary individual work or case management for some men, case reviews, and individual monitoring for how each man is journeying through the program. The current unit cost formula provides little room for an individualised approach,

⁶ This proportion is likely to be quite small, probably in the 10 – 25% range. However, as outlined in our men's behaviour change program financial cost analysis report, cost recovery is generally at the lower end of this range, and there is scope in some circumstances to expect perpetrators to pay more for participation in the program.

⁷ See *Ten Challenges and Opportunities for Domestic Violence Perpetrator Program work* at <http://ntv.org.au/wp-content/uploads/141022-NTV-10challenges-final.pdf>



- Assessing the risk of the perpetrator's use of violence on each child's safety, stability and development, and integrating specific interventions for men as fathers (including fathering 'after' violence programs), were not factored into the unit cost formula, yet are an increasing expectation for program providers⁸,
- Over the past ten years, expectations for program provider collaboration with other family violence systems agencies, such as through RAMP processes, local coordination or regional integration meetings, providing feedback to referrers, etc. have increased significantly, and are not incorporated sufficiently into the unit cost formula,
- The unit cost formula underestimated the amount of time and resources program providers require to run even limited, internal evaluations of their program. Over the past few years, new tools have developed to enable standardised yet nuanced program evaluations, such as those developed through the UK Project Mirabal9 study and the European Work with Perpetrators network.¹⁰ An update of the unit cost formula is required to support program providers to use these tools to collect evaluation data, even on a periodical basis,
- The unit cost formula did not take into account the substantially greater costs in program provision for smaller rural, and to a lesser extent regional, programs.

Fortunately, the work to update these unit formula costs has already been done, through a financial cost modelling process conducted by No To Violence over the past year.¹¹ This project engaged in thorough consultation and research processes to establish overall costings and unit cost amounts for three hypothetical programs: a small rural program working with 35 men per annum and their family members, a medium-sized regional program with 60 men, and a relatively large urban program with 110 men. The costings were based on contemporary industry expectations concerning what's required to do domestic violence perpetrator program work well.

⁸ The Fathering Challenges ARC Linkage Project, drawing academic and NGO participation from Victoria, South Australia and Western Australia, will help to establish specific policy and practice benchmarks for the continued development of these interventions.

⁹ See <http://ntv.org.au/wp-content/uploads/150210-project-mirabal-aus.pdf>

¹⁰ <http://www.impact.work-with-perpetrators.eu/index.php?id=16>

¹¹ See *Running a Men's Behaviour Change Program in Australia – A Financial Cost Analysis* at <http://ntv.org.au/wp-content/uploads/150210-mbcp-costmodelling-report-final.pdf>



Program accreditation and minimum standards

Recommendation: The Victorian Government, through COAG and other negotiation processes, works towards an agreement for the Australian Government to fund a national accreditation system for men's behaviour change program providers.

Short Term: The Victorian Government funds an update of the No To Violence minimum standards for running men's behaviour change programs, to reflect contemporary industry expectations for the minimum requirements of these programs.

Short Term: The Victorian Government funds No To Violence to assist existing and new program providers to meet these raised minimum standards, through professional and practice development strategies, and to provide a consultation and technical assistance service to support providers to expand capacity.

Short Term: The Victorian Government funds No To Violence to develop and implement an interim auditing tool to determine whether existing and new program providers have sufficiently expanded practice management, supervision, inter-agency collaboration, program design methodology, to meet the new minimum standards.

Short Term: The application of the new unit cost funding formula recommended by No To Violence's MBCP financial cost analysis report for any particular program provider be predicated on a successful auditing outcome.

No Australian state or territory runs an accreditation system for community-based domestic violence perpetrator programs. The New South Wales government requires program providers to be registered in order to receive referrals from government systems agencies. The providers must submit documentation to provide indirect evidence of compliance with state minimum standards. The Victorian Government is tasked with monitoring program provider compliance with the No To Violence minimum standards as part of each provider's funding service agreement review and renewal process. However, such monitoring is generally quite superficial at best and often non-existent. The lack of specific expertise in domestic violence perpetrator work amongst those responsible for monitoring such agreements is a major limitation.

Across the Tasman, New Zealand community-based Stopping Violence Services, which takes the majority of referrals through corrections, has until this year been accredited through an approval panel run by the Ministry of Justice. The panel was populated by very senior practitioners, leaders and policy workers in the domestic violence field, many with



considerable expertise in domestic violence perpetrator interventions. In the US, state governments run certification processes for Batterer Intervention Programs (BIPs), often requiring the program provider to submit documentation concerning its ability to meet state-based certification standards, in some cases followed by an on-site audit process. The Texas Council on Family Violence, for example, conducts rigorous bi-annual audits on state-funded BIPs.¹²

Respect, the peak body for community-based domestic violence perpetrator programs in the UK, runs a two-tier accreditation system which program providers can be subject to on a voluntary basis. The Respect accreditation system is one of the most intensive and rigorous, at least in English-speaking countries, and represents a significant step up from certification processes in the US. At the first level, program providers are assessed according to their capacity to achieve the Safe Minimum Practice Standard (Respect, 2012a). Programs that achieve this level are deemed to be safe in terms of their ability to assess and respond to risk, but are not accredited. The second level involves a much more rigorous process using the Respect Accreditation Standard (Respect, 2012b).¹³

In the UK, specific domestic violence perpetrator program accreditation is considered an important process for governments, stakeholders and consumers to have trust in both individual programs and in the perpetrator program field as a whole. Furthermore, the accreditation process is enabling a relatively inexpensive process (in terms of dollars, not time) for agencies to conduct a thorough reflective practice process towards program consolidation and improvement. Of crucial note, all of the domestic violence perpetrator programs researched in the Project Mirabal study, which demonstrated very positive results for program effectiveness, achieved accreditation through Respect.

In Victoria at least, women's family violence services are required to participate in an extensive accreditation process to ensure trust in service quality. It can be argued that the absence of a similar process for the men's behaviour change program sector can leave the field vulnerable.

This is especially as the accreditation process focuses mostly on the capacity of the agency to run a high-quality program through all the challenges and complexities that can occur over time due to internal and external changes and pressures. A program's effectiveness can be fickle if it depends on the passion, commitment and gender awareness of particular individuals – an accreditation process focuses on the program's capacity to embed quality practice without relying on any given practitioner.

Embarking on a high-quality accreditation process is time consuming both for program providers and the accrediting body. As the UK experience demonstrates, years of

¹² www.tcfv.org/our-work/information-for-batterers/bipp-accred

¹³ See <http://respect.uk.net/work/work-perpetrators-domestic-violence/accreditation/> for further information on the Respect accreditation process.



developmental work are often required to establish a quality accreditation process, and to support program providers to become accreditation ready. Accreditation also needs to be reviewed on a regular basis. Furthermore, accreditors need to have quite specialised knowledge of domestic violence perpetrator programs in order to avoid a simple 'tick and flick' process.

Nevertheless, accreditation, in different shades of intensity and rigour, appears to be a feature of perpetrator program monitoring in many jurisdictions outside of Australia. Its absence in Australia communicates that referrers, systems agencies and consumers/clients should take it on good faith that they can trust all existing programs all of the time to meet or exceed relevant minimum standards. This is an unusual ask for such a complex health and human services matter.

The No To Violence minimum standards for running men's behaviour change programs were researched in 2004 and 2005, and published in 2006. Industry perspectives concerning the running of these programs have evolved considerably over the past ten years. While these standards are not obsolete, several are now considerably outdated, and as a collection of standards as a whole, miss several emerging areas of practice that now require minimum specifications.

Developing new standards

***Recommendation:* NTV and MRS consult with the FV and broader community sector to develop minimum standards for working with these emerging issues in the community. This would involve translating where possible, the relevant MBCP minimum standards to focus on both adolescent violence and elder abuse. This would take into account expertise developed over the past few years by agencies working in this space.**

The development of online facilities for working with men's violence requires due diligence and attention to the safety of women and children. This would involve developing additional risk assessment and safety planning in collaboration with women's services.

One of the many issues that would require exploration and clarification through a minimum standards update process is the potential appropriateness and safety of providing online engagement methods for men who perpetrate family violence. No To Violence is not aware of any registration or accreditation systems in the U.S., U.K., New Zealand, Canada or Australia that considers online engagement to meet minimum standards as an alternative to face-to-face group work or one-to-one interventions. However, it might be possible for online methods of engagement, either one-to-one or as part of a virtual group arrangement, to supplement face-to-face modes of delivery, for example as an initial engagement and holding environment while men wait for a face-to-face intervention, or to provide a second



weekly 'check-in' session additional to weekly face-to-face group based sessions as a means of increasing engagement frequency and the overall intensity of the program.

As the Victorian police increase their attention on family violence, their ability to perceive more covert types of coercive control also has increased. The rising awareness of both adolescent violence in the home (AVITH) and elder abuse within the justice system and the broader community, requires the development of appropriate responses from the FV sector. Currently there are very few specialised services to respond to this growing trend.

Likewise, with the increase in the use of online services, there are access and equity issues to be attended to that could be partially responded to by online services. It is clear that this is an area that requires great sensitivity in the development of resources. It is NTV's belief that the safety of women and children must be privileged in this process.

Individual, violence focused counselling

***Recommendation:* A project to update the No To Violence minimum standards for running men's behaviour change programs includes a significant component on the translation of key standards relevant to individual, violence-focused counselling, both within and external to MBCPs as a starting point to improve practice in these contexts.**

***Recommendation:* The Victorian government fund MBCPs to increase their capacity to provide individual counselling and support work to perpetrators as they move through the MBCP.**

A significant issue for MBCP providers is the lack of capacity to provide individual support and follow up to perpetrators within the program. Often individuals are unable/unwilling to explore personal experiences that may relate to their use of family violence because of the context of a group setting eg feeling unsafe, embarrassed etc. By providing individual follow up programs will be able better support safety and accountability processes through a more holistic, Group, individual and case management response.

Inevitably, a large number of family violence perpetrators at any point in time are being seen by counselling or other practitioners in individual, one-to-one settings. The Better Outcomes in Mental Health Care program, providing rebates for psychological services arranged through GP-based mental health care plans, has made the use of private practitioners to work with perpetrators of family violence more affordable for some. In some rural and remote areas where there might be a significant wait for the next available places in a men's behaviour change program, counsellors in generic counselling services might be the fall-back option to provide interventions with perpetrators in the absence of other options. Furthermore, there are situations where one-to-one interventions with perpetrators might need to be performed by MBCP providers due to the man's inability to participate appropriately in a group-based setting.



Psychologists, social workers, psychotherapists and generalist casework counsellors receive very little training in family violence in the course of obtaining foundational qualifications.

As a result, the potential for one-to-one interventions with family violence perpetrators to cause harm and accentuate risk is significant. The vast majority of this one-to-one work is being conducted without any associated partner support, is devoid of inter-agency risk assessment and risk management contexts, and without great care is likely to be collusive with perpetrators' violence-supporting narratives.

***Recommendation:* Provide an intensive 5-day training program that will support Counsellors, Psychologists and Social Workers in their understanding of men's violence against women and children, men's victim blaming narratives, working without collusion, men's accountability, safety planning and the safety of women and children.**

***Recommendation:* Provide a train the trainer element for this training to continue widely across Victoria from suitably qualified professionals.**

Men's behaviour change programs cannot and should not be the sole community based response to holding men accountable for their use of family violence. Not all men who use family violence are suitable for a group engagement environment due to a lack of cognition ability, language barriers, distance to services and other mitigating factors. However, being able to refer men to services where his behaviour will be addressed appropriately with consideration to the safety of his partner and children is problematic due to the lack of understanding around the cause and nuances of family violence from professionals outside of the family violence sector.

We would further add that individual, violence focused counselling is only safe and appropriate when integrated with some form of partner contact and support by a specialised family violence agency.

Perpetrator interventions for particular communities

***Recommendation:* The Victorian Government design and invest in a workforce development strategy to recruit, train and support bicultural men's family violence workers.**

Safe Steps Family Violence Response Centre and No To Violence have commissioned expert consultants in the area of LGBTIQ intimate partner and family violence to construct a submission focusing on these communities. We will not repeat the recommendations of that submission here.



Victoria has pioneered the development of men's behaviour change programs in languages other than English or focusing on particular ethno-cultural regions, through the development of Vietnamese-speaking and South Asian (in English) programs, and the forthcoming Arabic-speaking program. Of crucial importance to the further development of language or culturally-specific programs is the development of bicultural men's family violence workers. These bicultural workers would not only be available to conduct assessments, co-facilitate group sessions and where appropriate engage in partner contact/support, but could also assist with front-end service system responses to men in their particular language or cultural group, either directly providing telephone-based or face-to-face early interventions men following police call-outs, or providing secondary consultations to other men's family violence workers to do the same.

***Recommendation:* The Victorian government invest in specialised and culturally-specific men's family violence training to expand the number of Aboriginal men and women practitioners who are qualified and skilled to work with Aboriginal perpetrators of family violence.**

Recent years have seen the development of some promising Aboriginal men's family violence program initiatives in different parts of Australia, including the men's behaviour change program operated by Tangentyere Council in Alice Springs, the Cross Borders Program in remote communities in the NPY Lands, the Gatharr Weyebe Banabe Program in Central Queensland, and the CHOICES program in Victoria. Attempting to weave together standard, feminist-influence men's behaviour change program practice with culturally-based approaches based on healing and re-connection due to colonisation and attempted genocide of Aboriginal nations and lands, the potential for greater connection and skill-sharing between programs and initiatives is significant.

***Recommendation:* Behaviour change programs modelled on those available for male perpetrators are not developed for women nor funded by the Victorian Government. Rather, the development of a pilot program working with women who use force be considered and modelled on initiatives in the US.**

Proactive arrest policies are resulting in an increasing number of women arrested for family violence offences. Research in the US, New Zealand and Australia demonstrate that the majority of these women are victims of their male (ex)partner's primary aggression or use of coercive controlling tactics.¹⁴ In this context, attempting to establish behaviour change programs for women aggressors modelled on programs for men are inappropriate and counter-productive.

In recognition of this, to work with female offenders convicted of family violence crimes, a series of intervention programs for *women using force* have been developed in the US. These draw upon research evidence demonstrating that most participants are likely to be

¹⁴ See <http://ntv.org.au/wp-content/uploads/docs/resources/121003-primary-aggressor-practice.pdf>



victims of substantial family violence and coercive control from their male intimate partner, and are designed to explore their use of force within the context of this victimisation.

Recommendation: MBCPs are sufficiently resourced to develop and implement individual-based, tailored interventions for men with an intellectual disability, and where appropriate, to support their ability to learn from groupwork.

Short Term: Based on learnings from the sexualised offender treatment field, tailored approaches to men with intellectual disabilities are piloted and evaluated for family violence perpetrators.

Short Term: Qualifications and training for MBCP work include a specific component to assist MBCP practitioners to (i) adapt their programs and interventions for men with intellectual disabilities, and (ii) to understand the experiences and needs of women with disabilities experiencing family violence so as to strengthen MBCP related partner support work with this cohort, and to enhance identification of the specific tactics that perpetrators commonly use to coercively control women with disabilities.

MBCPs are currently not well-equipped to work with men with intellectual disabilities. Current levels of funding for MBCP work limit their capacity to offer anything more than standard groupwork interventions, which do not suit some men with intellectual disabilities who require more of an individualised approach. As a result, very few men with intellectual disabilities are referred to MBCPs.

Furthermore, little attempt has been made to adapt MBCP curricula or intervention methods for men with intellectual disabilities. This is despite a significant volume of work over the past 35 years focusing on intervention programs for men with intellectual disabilities who commit sexualised offences, which could be adapted for the family violence field.

Strengthening Perpetrator Accountability within an Integrated Family Violence Service System

Bringing It Together

This section will focus on the intersect between the front end or intake and referral pathway and the back end which includes the community based responses to men who use family violence.

We identify and propose changes to the current front and back ends of the system taking into account sector demands and processes that will improve perpetrator accountability. We also provide details of a more effective structure and clearer system pathways to better enable perpetrators to address their use of family violence and support them while they do so.

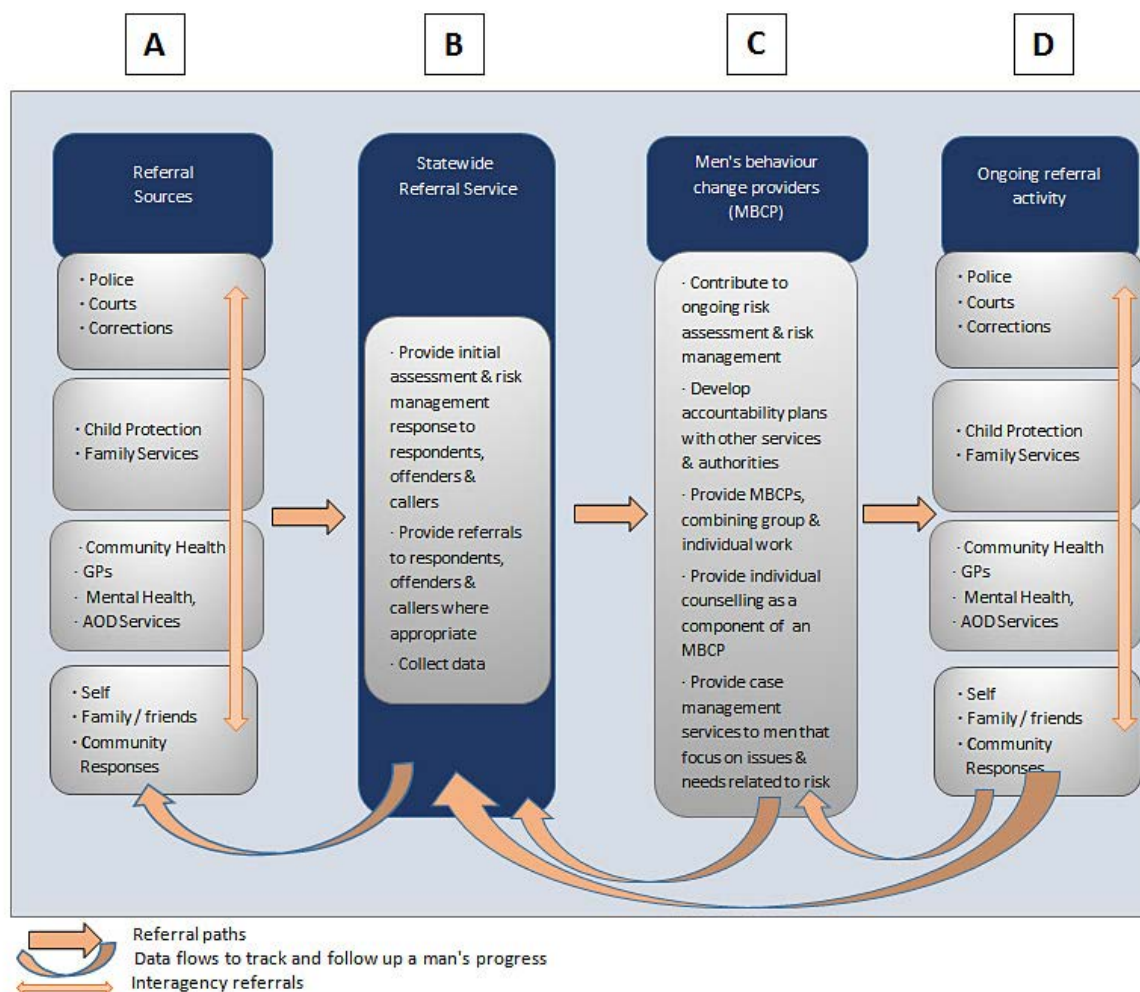


Figure 3. Proposed statewide male family violence referral service: structure and interactions



The Process in Action

The following three scenarios indicate how a statewide intake service (as proposed) could effectively deal with a referral (perpetrator), track his progress and follow up needs other agencies, he or his family/friendship circle, might identify.

Scenario One

1. J■■ is referred to the statewide service (B) by police (A) following an act of family violence
2. The statewide service (B) contact J■■ and do an initial risk assessment. With J■■'s permission he is referred to his local MBCP (C).
3. The statewide service (B) contacts the MBCP (C) and provides the MBCP with the initial risk assessment and appropriate referral information.
4. The statewide service (B) provides feedback to the police about the outcome to this point.
5. The MBCP (C) have an assessment interview with J■■ and deem him appropriate to join the MBCG (C). J■■'s partner is also contacted and engages in support with the MBCP Partner Contact worker.
6. After J■■ completes the MBCG (C), the MBCP provides feedback to the service (B).
7. The statewide service (B) provide outcome feedback to Referral Source (A).

Scenario Two

1. G■■■■ is referred to the statewide service (B) by Child Protection (A) following an investigation.
2. The statewide service (B) contact G■■■■ and do an initial risk assessment. With G■■■■'s permission he is referred to his local MBCP (C).
3. The statewide service (B) contact the MBCP (C) and provide them with the initial risk assessment and appropriate referral information.
4. The statewide service (B) provides feedback to Child Protection (A) about the outcome to this point.
5. The MBCP (C) have an assessment interview with G■■■■ and it is deemed that because of his significant AOD issues he will not be able to engage in a MBCG. G■■■■'s partner is also contacted in engages in support with the MBCP Partner Contact worker. G■■■■ will be provided with Case Management support to engage with AOD counselling (D).
6. G■■■■ engages with AOD (D) with ongoing support from the MBC Case Manager (C). After his AOD is completed G■■■■ is enrolled in the MBCG (C).
7. After completing the MBCG (C) the MBCP provide feedback to the statewide service (B).
8. The statewide service (B) provide outcome feedback to Referral Source (A).



Scenario Three

1. J■■■ is referred by police (A) following an act of family violence.
2. The statewide service (B) contact J■■■ and do an initial risk assessment. J■■■ does not wish to engage with a MBCP (C) and is very blaming of his partner. He will however accept support around his housing concerns.
3. J■■■ is referred to a housing service (D) by the statewide service (B).
4. The statewide service (B) provides feedback to police (A) about the outcome to this point.
5. While J■■■ is engaged with the housing service (D) the statewide service (B) continue to provide accountability follow up to him through regular contact.
6. J■■■ agrees that a MBCP (C) referral would be appropriate.
7. The MBCP (C) have an assessment interview with J■■■ and deem him appropriate to join the MBCG (C). J■■■'s partner is also contacted in engages in support with the MBCP Partner Contact worker.
8. After completing the MBCG (C) the MBCP provide feedback to the statewide service (B).
9. The statewide service (B) provide outcome feedback to Referral Source (A).

Early Intervention Opportunities

As outlined by the Centre for Innovative Justice report, a wider variety of early intervention opportunities exist. Targeted, tailored interventions can be designed, piloted and rolled out in the aftermath of police call-outs (and where applicable to other entry points into the system):

- Where appropriate during police call-outs, local men's family violence practitioners can attend with police to provide initial engagement with the perpetrator, as being trialled in some areas of Melbourne's South Metropolitan Region. When the man is excluded from the family home through the Family Violence Safety Notice exclusion clause or bail conditions, the men's family violence practitioner can attempt to follow-up with the man while he is in temporary accommodation.
- A telephone-based assertive outreach service, based on a centralised, statewide intake service, can attempt to make contact with the perpetrator within the 24-48 hours following police call-out, to ascertain immediate/acute issues that might increase the risk of the man re-offending, improve his understanding of Family Violence Safety Notice or bail conditions, conduct some court preparation for the upcoming Intervention Order hearing, etc.
- Court Respondent Worker engagement with the man when he appears soon after at a Magistrates Court can provide an opportunity to deepen the inter-agency risk assessment process through liaison with the Applicant Support worker, strengthen his understanding of interim or final Intervention Order conditions, commence motivational



interviewing with the perpetrator to support his uptake of referrals, assist with preliminary case planning, etc.

- Telephone-based and face-to-face outreach can continue in the weeks after court appearance conducted by local and regional men's behaviour change program providers or other specialised men's family violence services, drawing upon the Ontario and Christchurch examples outlined in the Centre for Innovating Justice report. As some Victoria Police Family Violence Units attempt regular, proactive visits with perpetrators they are most concerned about in terms of risk in the weeks following police call-out, there is the potential to extend this through joint visits conducted by Family Violence Unit members and specialised men's family violence practitioners.

Collectively, these four intervention points – during and the immediate aftermath of police call-outs (including immediate re-accommodation where appropriate) or other significant interaction with the service system such as initial contact by child protection, the 24-48 hours following police call-out or other first responder service system intervention, Magistrates Court appearance concerning Intervention Order applications or criminal matters concerning his use of family violence, and post-Court follow-up – all offer windows of opportunity that cannot be captured by the current system's reliance on telephone-based assertive outreach alone. Rapid information sharing between these intervention points, police and other statutory and non-statutory agencies involved in assessing and reducing the risk posed by the perpetrator is crucial, so that each intervention can build on the information obtained and momentum provided at previous points.¹⁵

Case Management

Recommendation: The Victorian Government invests in a major re-development of the 2009 Enhanced Service Intake Model towards a more comprehensive, multi-pronged early intervention front-end system designed to address specific windows of opportunity to engage men and augment ongoing risk assessments in the weeks following police call-outs.

Short Term: The Victorian Government identifies opportunities to pilot, and carefully evaluate, a wider range of assertive, early intervention opportunities, including the co-location of men's family violence practitioners within Victoria Police Family Violence Teams to assist assertive engagement with higher-risk perpetrators in the weeks following police call-out, and adaptations of the Ontario second responder and North Canterbury (NZ) ReachOut face-to-face engagement models.

¹⁵ It is important here, where possible, to maximise opportunities for the same practitioner and service to provide interventions at different points. For example, Court Respondent Workers who are employed by a local men's behaviour change program provider can potentially provide post-court follow-up with the perpetrator.



While not all family violence respondents and offenders can be offered all four intervention opportunities – the numbers of perpetrators are too vast – proper investment in a front-end service system is required, backed by a centralised intake process, to prioritise and coordinate these potential interventions. The centralised statewide intake service would work closely with local front-end responses to coordinate this overall front-end system response.

Much of the work involved in these local front-end responses would be conducted through men's case management workers employed by men's behaviour change program providers, through a significantly strengthened investment in this local front-end work replacing current and inadequate funding provided to men's Enhanced Service Intake workers. These men's case management positions would interface with the back-end men's behaviour change program provision conducted by the same providers, however, only a proportion of those men engaged locally through front-end responses are likely to engage in a men's behaviour change program.

Nevertheless, these front-end responses can still provide some important outcomes with respect to augmenting risk assessments, tracking and where appropriate assisting responses from police, courts, corrections and child protection to place some restraints around the man's potential to continue his use of violence.

Case management and case planning is a central consideration across all these intervention points, in the sense that:

- The centralised statewide intake service commences a process of case managing perpetrator movement into the system, information sharing and tracking as outlined later in this submission, as the initial part of a front-end process of engagement.
- MBCP providers continue with more localised case management responses to continue this front-end response, working with other family violence service system agencies at the local level such as Police Family Violence Teams,
- For those perpetrators who commence a MBCP, as outlined later in this submission, this case management process needs to continue to ensure that the program approach is individually tailored to that particular perpetrator's patterns of coercive control and risk that he poses to family members.

***Recommendation:* The state government to fund the statewide intake service to provide intake case management follow up to perpetrators making initial contact with the MFVSS.**

The state government to provide funding to all MBCP's across the state to increase capacity to provide Case Management support to perpetrators to address issues impacting on their use of family violence.



***Recommendation:* The 2010 Victorian Government initiative to develop a Strengthening Risk Management Framework outlining the roles and responsibilities of each family violence systems agency to work towards family violence risk management, but with a greater focus on perpetrator accountability, and with more central involvement from family violence peak and statewide non-government agencies.**

The web of accountability concept has a number of important implications. First, women's and children's informal efforts towards resistance and accountability vary, and sometimes strengthen, over time. Due to the risks involved in these efforts, family violence support for women and children needs to be of sufficient duration to assist beyond crisis intervention. MBCP partner contact services, and specialist women's and children's family violence services, therefore need to be sufficiently funded to work with women beyond the crisis intervention phase, and often beyond the man's participation in a MBCP. Without this, the web of accountability can have significant holes that perpetrators can exploit.

Second, men who use family violence are very adept at making use of whatever gaps or inconsistencies are present in service system responses – gaps in the accountability web – to extend their control over family members. They can threaten to involve the child protection system to 'out' her as a bad mother, draw systems agencies workers into colluding with their violence-supporting narratives, and use evidence of inconsistent responses by systems agencies to convince her that it is all her fault. A strong web of accountability, built on the fundamentals outlined in the previous section, is crucial to reduce the men opting out of accountability for their behaviour.

In this sense, perpetrator accountability is as much about the accountability that each family violence service system has to each other, and to women and children, to minimise holes in the accountability web. Within the context of coordinated community responses, perpetrator accountability is strengthened when each family violence systems agency – police, courts, corrections, child protection, family services, specialist non-government family violence agencies, health services (such as primary care, alcohol-and-other-drug, mental health), child contact centres and the like have defined and transparent roles and responsibilities concerning strengthening the web of accountability around perpetrators. These roles and responsibilities define how each systems agency will work with each other towards a coordinated approach in strengthening webs of accountability.

Strengthening Risk Management frameworks therefore require these roles and responsibilities to be delineated both at statewide and local coordinated community response levels. Unfortunately, there is no such framework guiding a coordinated, integrated approach to strengthening risk management from the perspective of perpetrator accountability in Victoria, resulting in disparate and somewhat uncoordinated interventions occurring in some localities and not others.



Family Violence Systems Agencies: Strengthening Perpetrator Accountability

The next section makes recommendations, for each core and non-core agency constituting family violence service systems at the local or broader levels, concerning evidence-based or promising perpetrator interventions and opportunities to strengthen perpetrator accountability. We refer to the web of accountability concept and our unpacking of the term 'perpetrator accountability' outlined elsewhere in this submission, as the fundamental bedrock underneath these recommendations.

We have commenced with child protection and family services as we believe that this is where some of the greatest impact can be made to strengthen perpetrator accountability systems.

Child protection and family services

Recommendation: The Victorian Government utilise the Safe and Together model to improve the competence of the child protection and family services systems to work with family violence, in the domains of systems development and design, interagency collaboration, policy, practice development and data monitoring & evaluation systems.

Short Term: The Victorian Government commissions an audit of DHHS child protection and non-government family services systems to determine shortfalls and problems in the above domains that the Safe and Together model would need to address, using the model's Continuum of Domestic Violence Practice and case reading tools.^[1]

Short Term: The Department of Health and Human Services funds specialist men's family violence practitioners to work within particularly high volume metropolitan and regional child protection offices, and within key non-government family services providers, to promote the capacity of child protection and family services systems to skillfully engage family violence perpetrators, and to improve the interface with men's behaviour change programs.

Short Term: The Victorian Government investigates the potential of the Western Australian Family & Domestic Violence Response Teams, a co-located intake process for family violence referrals involving police, child protection and specialist non-government family violence service collaboration, for the Victorian context.

We believe that the adoption of the Safe and Together model will be the most efficient means for the Victorian Government to improve Victoria's child protection system from its current position in the above-mentioned continuum – likely to be a combination of Domestic Violence Destructive, Domestic Violence Incompetence, Domestic Violence

^[1] <http://endingviolence.com/our-products/training/safe-together/case-reading-process/>



Blindness and Domestic Violence Pre-competence depending on location and context – to Domestic Violence Competence if not Domestic Violence Proficiency. While this would involve an investment of several million dollars over a number of years, given that the model addresses possibly the biggest drivers of child protection and family services work – family violence, substance abuse and mental health issues – the potential return on investment in reducing Out of Home Care and other child welfare system costs is considerable.

Due to the highly advanced nature of this model, No To Violence has commissioned David Mandel to write an appendix to our submission focusing specifically on the goal of making child protection and child welfare systems more competent and proficient in responding to domestic violence. Appendix 4 outlines the Safe and Together model, provides evidence demonstrating its effectiveness in achieving positive child protection outcomes, and makes specific recommendations based on David's three visits and 30 consulting and training days to Australia over the past 18 months.

Family law system and child contact centres

***Recommendation:* The Victorian Government pursues through COAG and other means opportunities to adopt the UK CAFCASS system in Australia.**

***Short Term:* The Victorian Government pursues through COAG and other means the development of an ongoing training program focusing specifically on perpetrator accountability for Federal Circuit Court judges and other family law practitioners, building upon but significantly extending previous AVERT training.**

The family law system is a source of horrible victimisation for women and children experiencing family violence. Perpetrators frequently manipulate family law and child contact systems to cause enormous difficulties for and impacts on women and children. Family law processes can be used by the perpetrator to accentuate tactics of financial abuse (driving her further into debt through elongating family law contests), sabotage the children's relationship with their mother (through manipulation tactics during unsupervised child access), monitor the mother's movements and social connections, and much more.

In the UK, approximately one-third of referrals to domestic violence perpetrator programs arise through the family court, through a Judge ordering a perpetrator for participation in a program prior to decisions or progressions in child access or parenting order arrangements. These are managed through the Children and Family Court Advisory and Support Service (CAFCASS).¹⁶ This is a major untapped source of referrals for family perpetrators in Victoria and elsewhere in Australia, at a time where women are at high risk of being forced, through the family law system, to provide higher levels of perpetrator access to their children than what might be in the child's best interest in terms of their safety, stability and development. MBCP providers could potentially be an important ally to Federal Circuit Court Judges in

¹⁶ <https://www.cafcass.gov.uk/about-cafcass/commissioned-services-and-contact-activities/dvpp.aspx>



their decision-making concerning child access and parenting orders, as well as attempting to address the risk that perpetrators pose to their families during this time of extending their coercive control tactics.

Recommendation: The Victorian Government funds a research and development project to determine recommendations for promoting the capacity of child contact centres to contribute towards perpetrator accountability, and agrees to fund these recommendations.

Short Term: The Victorian Government funds a 2-day training program for non-government and private child contact centres to improve their understanding of family violence and response to violent, controlling and manipulative behaviours used by perpetrators during child access.

Child contact centres are a potentially major source of assessment and intervention for family violence perpetrators who have only supervised access to their children due to child protection or family court stipulation.¹⁷ However, child contact centre practitioners, whether part of not-for-profit or private system centres, have little or no training in family violence fundamentals nor in opportunities to assess and intervene when perpetrators use these contacts to engage in emotionally abusive or manipulative behaviour either directly to their children or indirectly through the children targeted at their mother.

Victoria Police

Recommendation: All Victoria Police members, current and future, participate in a minimum two-day post-Academy introductory training on family violence, including components on perpetrator engagement. Furthermore, that this training be refreshed through one-day booster trainings on a two-yearly basis.

Recommendation: Victoria Police develop appropriately detailed practice guidance documentation and support processes to strengthen their ability to determine the primary aggressor, in situations where they might otherwise be tempted to pursue dual arrest or the arrest of the primary victim.

Recommendation: Victoria Police perform an audit of innovative perpetrator accountability strategies at local and regional levels, including those exhibited by specialised Family Violence Teams, to determine which should be rolled out on a statewide basis.

Recommendation: Victoria Police conduct a review of the use of specialised domestic violence evidence kits and other pro-arrest aids to support strengthening police practice in converting a higher proportion of family violence incident attendances into arrests.

¹⁷ <http://www.ssw.umich.edu/about/profiles/saunddan/CustodySaundersVAW-net.pdf>



Recommendation: Victoria Police engage in a considerably more consultative process in its current deliberations on how to triage and develop a response system based on the degree of risk.

Short Term: The \$3.4m allocated by the previous government towards the redevelopment and strengthening of the Victorian Family Violence Risk Assessment and Risk Management Framework (the CRAF), a project initiated in recognition of the CRAF's limitations in a number of areas, be re-instated, and Victorian Police efforts to redevelop their risk assessment tools and work towards a triaging process be embedded within this broader project.^{18,19}

Victoria Police have performed a crucial role in the development of family violence service system integration reforms over the past 11-12 years. Innovations in strengthening perpetrator accountability have continued to progress in recent years, including the vital development of over 30 specialised Family Violence Teams across the state.

However, a number of barriers and impediments remain that currently constrain the capacity of Victoria Police to take its roles and responsibilities in perpetrator up to a new and more consistent level:

- the absence of any dedicated and specialised training for police members on family violence, post-Academy,
- missed opportunities to work collaboratively with family violence peak and statewide agencies, and
- variable practice across Victoria Police/state.

New Zealand, with a population approximately 80% that of Victoria, generates approximately 50% more policy family violence attendances, and this is not likely to be due to difference in prevalence or incidence between the two countries.

As a result, NZ Police have developed a differentiated model based on the use of an actuarial tool (the Canadian ODARA), and importantly, have developed an aid memoir to assist police to make assessments of the potential impact of the perpetrators' use of family violence on children.

¹⁸ See <http://www.dcp.wa.gov.au/CrisisAndEmergency/FDV/Pages/FamilyandDomesticViolenceResponseTeam.aspx>

¹⁹ These limitations include the relatively poor ability of the CRAF to differentiate high from severe risk, focus on perpetrator dangerousness, separate out immediacy from severity of risk, and assess risk to children. The CRAF also offers little to inform risk management strategies.



Early intervention opportunities following police call-outs

Recommendation: The Victorian Government adopts the recommendations outlined in The Centre for Court Innovation (check name) report *Opportunities for Early Intervention: Bringing Perpetrators of Family Violence into View*, which outlines a wider variety of early intervention opportunities exist.

Corrections Victoria

Recommendation: Corrections Victoria develop a specialised stream of supervision for family violence offenders, recruiting, training and supporting specialised Community Corrections Officers and Parole Officers who focus on family violence and sexual assault.

For many years, Corrections Victoria have not had a differentiated response to family violence compared to other crimes against the person. The ability of corrections systems – both custodial and community-based – to detect and effectively respond to the particularities of family violence has been low.

In the context of the impediments and limitations we make the following recommendations to strengthen the roles and responsibilities of Corrections Victoria in strengthening perpetrator accountability.

Recommendation: The training provided to all Community Corrections Officers, Leading Community Corrections Officers and Parole Officers on family violence issues be increased to a minimum of four days.^{20,21}

Recommendation: The frequency of Community Corrections supervision for family violence offenders be significantly increased in the early stages of supervision, given the likelihood that those offenders who will re-offend are likely to do so sooner rather than later after arrest.^{22,23}

Recommendation: Given that the risk of re-offending is highest within the first few to several months after the offender's arrest, and the length of the ensuing court trial process before sanctions and Corrections-based supervision can be arranged, Corrections Victoria consider an adaption of Tasmania's Defendant Health Liaison Officer model to work with the offender's criminogenic needs

²⁰ No To Violence and the Domestic Violence Resource Centre collaborated to provide four days of training to Home Detention Corrections Officers in 2010 before the Home Detention provisions were disbanded, and this experience demonstrated this length of training as the minimum required.

²¹ The training provided to specialised family violence and sexual assault Community Corrections Officers would be considerable more than four days, due to the need to cover a range of issues involved in specialised supervision.

²² Klein, A.R. (2015). *Practice implications for domestic violence research for probation officers and administrators*. Battered Women's Justice Project.

²³ It is important to note that family violence perpetrators are likely, even after arrest, to continue much of their use and range of coercive controlling tactics. Terms such as 're-offending' and 'recidivism' in this context refers to arrestable forms of family violence only.



(substance abuse, mental health issues, problem gambling, employment, housing, etc.) related to his risk of re-offending simultaneous to the court trial process.

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Recommendation: Corrections Victoria consider options to introduce pre-trial monitoring of high-risk family violence offenders, given that the risk of re-offending is highest within the short-term after arrest.

Recommendation: Corrections Victoria improves its data collection and data sharing processes, so that specific family violence related risk assessments for offenders – both incarcerated and those on Community Corrections Orders – be based on information obtained from Victoria Police, Magistrates Courts, child protection and other sources, rather than reliance on the offender's self-identification and self-reports of his use of violence.²⁵

Recommendation: The Victorian Government adopts the Gold Coast model as the primary referral pathway for family violence offenders on Community Corrections Orders, except for those men with high levels of psychopathy. Both men's behaviour change program providers and specialised women's family violence services are approached to tender to provide this program in close collaboration with Corrections Victoria, with strong partner support and children's assessment and advocacy components.

Short Term: Corrections Victoria extends funding for offenders referred to men's behaviour change program providers as part of their Community Corrections Order conditions to enable minimum six months interventions, rather than the current practice of 12 sessions / three months.

We recommend that Corrections Victoria adopt a different two-tiered approach to guide the choice of treatment conditions on Community Corrections Orders for family violence offenders. A relatively small proportion of offenders, who have high levels of psychopathy and significant criminal histories, might not benefit from standard domestic violence perpetrator program approaches including men's behaviour change programs, and indeed, participation in these programs might increase their risk of re-offending. For these offenders, alternative treatment options for psychopathic men such as those being developed through Portland's Allies for Change agency should be considered.²⁶

We recommend that all other domestic violence offenders on Community Corrections Orders be referred to minimum six-months interventions based on the Gold Coast model. This victim-centred model is based on a close collaboration between the specialist women's family violence service Domestic Violence Prevention Centre and Queensland Corrections, and works closely with Queensland Police, Department of Child Safety, and Southport and

²⁴ See <http://ntv.org.au/conference/wp-content/uploads/2012-ntv-conference-workshop-9h.pdf>

²⁵ Historically, no specialised family violence risk assessment tools have been used to determine risk for family violence offenders in the Corrections system, with a reliance on tools focusing on the risk of general reoffending (of any type). While Corrections Victoria are introducing the Spousal Assault Risk Assessment Guide, this will be administered mainly to offenders, who are likely to minimise and distort self-disclosures of their use of violence. Basing risk assessments on collateral information obtained from other systems agencies involved in prior and current responses to the risks posed by the offender is therefore crucial.

²⁶ See <http://www.biscmi.org/wp-content/uploads/2015/02/Criminally-oriented-group-BISCMi-handout.pdf>



Coolangatta Magistrates Courts. While the program is administered by the Domestic Violence Prevention Centre, with a very strong partner support focus and a significant component on addressing men's violent fathering, probation officers have a crucial role in providing regular, specialised supervision, participating in case reviews, and using motivational interviewing and other processes to support the development of the man's internal motivation to make changes through the program. The model adopts a case management approach addressing the offender's other criminogenic needs related to the risk of re-offending, such as substance abuse and mental health issues.

Importantly, probation officers also swiftly return men back to court for judicial monitoring, oversight and sanctions when they do not comply with their probation conditions to participate in the program.²⁷ The frequency and intensity of probation supervision varies with the degree of risk and depending on the man's case plan, mirroring the UK context.²⁸

The Gold Coast model is under no illusion that their MBCP will significantly change the behaviour of all men. Rather, the program sits within a Domestic Violence Integrated Response that uses the man's participation in the program, assessment through the partner support component and collateral information obtained through Queensland Police, Child Safety or other sources, to engage in ongoing assessment concerning the degree of risk posed by the man, and any changes (in either direction) over time. This confers with US evidence that the value of court-ordered domestic violence perpetrator programs rests as much with the opportunities they create for highly valuable ongoing assessment as with their potential to result in sustainable behaviour change.²⁹

***Recommendation:* Corrections Victoria conducts a review to determine opportunities for community-based organisations offering correctional post-release, throughcare and transitional services, to identify opportunities for funding interventions to address the risk of family violence re-offending.**

Community-based organisations offering services for offenders transitioning from custodial institutions to the community, or who those at risk of becoming embroiled in the criminal justice system, are funded to work with a wide variety of issues related to the potential for re-offending – homelessness, substance abuse, disability, mental illness, etc. Funding to address the potential for family violence reoffending, however, is almost non-existent. This is particularly problematic given that the recent Victorian Government parole reform measures have significantly reduced the number of offenders who are released from custody with parole conditions, thereby limiting the ability of Corrections Victoria to engage in perpetrator accountability measures with these offenders. Chapter five of the Centre for Innovative Justice report outlines some initiatives, including Circles of Support and

²⁷ O'Malley, R. (2013). CollaborACTION. *Ending Men's Violence Against Women and Children: The No To Violence Journal*, Spring, 51–71.

²⁸ Kholia, C. (2014). Managing domestic violence offenders in the UK. *Ending Men's Violence Against Women and Children*, The No To Violence Journal, Spring 2013, pp. 127-134.

²⁹ Klein, A.R. (2015). *Practice implications for domestic violence research for probation officers and administrators*. Battered Women's Justice Project.



Accountability (COSA) initiatives, to promote community accountability after offenders' release from custodial institutions.

Magistrates Courts

***Recommendation:* Magistrates Court Victoria adopt the Western Australian practice of protective bail risk assessment reports to assist with judicial bail decisions concerning moderate to high risk perpetrators. This should draw upon inter-agency sources of information as outlined in the emerging Domestic Violence Response Team approach of the Gold Coast Domestic Violence Integrated Response. These assessment reports should be designed not only to assist in judicial decision-making concerning the granting of bail, but also to help determine the specifics of protective bail conditions.**

Chapter four of the Centre for Innovative Justice outlines a number of important court-based innovations with the potential to strengthen perpetrator accountability and promote victim safety. The following picks out and elaborates on some of these – we stress, however, that we see considerable merit in many of the initiatives highlighted in this chapter, and in the report in general, that we do mention or elaborate in our submission.³⁰

³⁰ Due to time constraints and therefore the necessary brevity, there is a substantial number of important issues concerning promising and evidence-based court-based processes to promote victim safety and perpetrator accountability that we have not had time to address.



Recommendation: The Victorian Government expands its investment in Court Respondent Workers beyond headquarter courts, as part of an integrated front-end service system approach linked as part of a coordinated process with prior and subsequent early intervention strategies to engage men.

Short Term: The Victorian Government evaluate the relative advantages and disadvantages of these Respondent Workers being court-appointed or employed by community-based men's behaviour change program providers.³¹

As outlined the Centre for Innovative Justice report and elsewhere³², court-based Respondent Workers can result in a number of perpetrator accountability benefits through reducing men's aggression in court, increasing acceptance with protection order conditions and enhancing uptake of men's behaviour change program and other referrals.

Recommendation: The Victorian Government funds the continuation and extension of training for Victoria Legal Aid lawyers to strengthen their understanding of and response to family violence.

Recommendation: The Victorian Government initiates a project – in partnership with Victoria Legal Aid, Victoria Law Reform Association and other relevant bodies – to identify opportunities to train private solicitors in understanding and responding to family violence.

No To Violence partnered with Victoria Legal Aid in 2013 to provide a training project to increase duty lawyer and other solicitor understanding of and responses to family violence. Victoria Legal Aid have subsequently engaged in other processes to strengthen their capacity to respond to family violence, which can be built upon and more fully supported by the Victorian Government.

Recommendation: Magistrates Court Victoria extends its current focus on strengthening responses to family violence by conducting a review of judicial leadership, imprimatur and courtcraft initiatives and strategies conducted in other Australian and overseas jurisdictions, including through the New York Centre for Court Innovation³³

The Centre for Innovative Justice report outlines opportunities to strengthen judicial leadership and enhance 'courtcraft' to promote perpetrator engagement and accountability, such as the pre-court review process used in Western Australia. This sub-

³¹ Community-based Court Respondent Workers have the potential to offer greater consistency between courts and men's behaviour change program providers – for example, the same practitioner can engage with the man both at court and through follow-up by the community provider. Court-appointed Respondent Workers, however, also come with particular advantages.

³² <http://ntv.org.au/conference/wp-content/uploads/2012-ntv-conference-workshops-7a-and-8a-engaging-men-at-court.pdf>

³³ One of our staff members recently attended a presentation by the Centre for Court Innovation at a U.S. domestic violence perpetrator program conference, focusing on a range of initiatives and innovations to promote perpetrator accountability through the court system.



section of chapter four in the report is the start of what could become a comprehensive review into these possibilities.

***Recommendation:* The Victorian Government funds the Centre for Innovative Justice to partner with Magistrates Courts Victoria to develop specific recommendations on how best to direct increased investment in strengthening specialised and integrated family violence court arrangements and responses. Further, the Victorian Government allocates, through the forward estimates, amounts in the 2016-17 and subsequent financial years to spend on strengthening family violence specialisation and integration in the Victorian court system.**

The Centre for Innovative Justice's sub-section on specialised family violence courts, judicial monitoring of family violence perpetrators, therapeutic jurisprudence, early connection to perpetrator programs and the importance of court flexibility provides an excellent review of relevant issues and complexities. We believe that these complexities and nuances concerning how best to invest in court specialisation could be beyond the scope of the Royal Commission to determine definitive answers within the constrained time frame.

***Recommendation:* As part of a step up in commitment towards addressing family violence, the Victorian Government injects increased funding into the court system to relieve the pressure caused by increasing demand. This funding would flow into Community Legal Centres, Victoria Legal Aid and other court-allied non-government organisations in addition to court facilities and infrastructure and court-appointed staff.**

Central to all of the above recommendations, however, is expanding the capacity of Magistrates Courts to address family violence demand. The number of family violence court matters is increasing by 10-20% per annum in some Magistrates Courts, with Magistrates on some family violence listing days hearing up to 70 family violence matters, and Victoria Legal Aid solicitors advising 15-20 Respondents. Almost any significant recommendation to improve perpetrator accountability through the court system will have limited effectiveness unless capacity is expanded through the court system.

***Recommendation:* The Department of Health and Human Services funds early intervention programs expanding the capacity to respond to both victims and perpetrators of family violence in general practice, building upon the research of Kelsey Hegarty of the University of Melbourne, Angela Taft of La Trobe University, and Gene Feder of the University of Bristol.**

Time constraints prevent us from exploring the breadth of possibilities through strengthening perpetrator accountability and coordinated interventions through a variety of primary health care and other health domains. Opportunities are presenting themselves in a



variety of health contexts given recent broader public and community sector interest in family violence.

Health Services Providers

Recommendation: The Department of Health and Human Services provides a high-level authorising environment to drive systemic opportunities for family violence services and practitioners to train, learn from and skill-share with alcohol and other drug, mental health and problem gambling providers.

The last 12-18 months have seen an increasing number of forums at a state and national level exploring the intersect between family violence and frequent co-occurring health issues such as substance abuse, mental health and problem gambling. While there have also been some recent attempts to train these allied health sectors in family violence, and to connect them to Risk Assessment and Management Panels, a more systemic approach is required to explore how these sectors can better work together and learn from each other.



Primary Prevention

What our members said:

- I feel there is a huge gap in the way MRS engages with the community. I would hope to see an increased presence in MRS community training, workshops and talks. I feel like the more the organisation was involved with preventative work in people workplaces or schools, the more people would know us and hopefully resulting in more men calling. More engagement in the community is not only something I would like to see MRS do, but also something I would be interested in being involved with.
- We need to begin with making the link between gender inequity and family violence, and to engage and educate communities. Early intervention and primary prevention is the key, with men's programs and women's services working together where possible.

The primary prevention of men's violence against women (PMVAW) is a very young field. Over a relatively short period of time, the PMVAW field has developed and matured substantially. The continued pioneering efforts of VicHealth, adoption of systematic prevention approaches in a range of different settings, moderate but still notable levels of government investment, and the creation of Our Watch have all seen Victoria perform a leading role in PMVAW across Australia.

VicHealth, Our Watch and other stakeholders have helped tremendously during this time to develop frameworks and principles underlining effective prevention work. No To Violence fully endorses the statement of principles developed through Our Watch and signed by a number of key family violence response and prevention stakeholders submitted to the Royal Commission in late May.

Updating Primary Prevention work with men

***Recommendation:* NTV is resourced to be the primary prevention organisation that stakeholders want us to become; including looking globally, acting locally, establishing standards of practice for engaging men and boys in prevention approaches; allowing us to be more ambitious in our approaches.**

No To Violence believes that with the rapid development of the field in Australia, opportunities are present to extend prevention work in particular ways that better reflect what is considered optimal practice in some overseas contexts. While current prevention work in Australia, and Victoria in particular, should not be underplayed, we can learn from overseas experiences to strengthen our work in Australia, particularly with respect to the engagement of men.

First, there is growing criticism of primary prevention approaches that call upon 'real' or 'strong' men not to use violence. Many social marketing campaigns in the field have



attempted to draw upon or connect with stereotypically masculine traits in violence prevention messaging, thereby colluding with dominant narratives about masculinity, power and privilege that are at the roots of men's violence against women in the first place.

Second, Victorian PMVAW campaigns need to become more ambitious by focusing on structural gender inequality rather than predominantly on changing the attitudes and behaviours of individual men and boys. Not only do men need to interrupt sexist jokes and comments made by their peers that objectify women, they also need to spot opportunities to identify the ways in which gender inequality is embedded in the various communities in which they belong, and to work with other men and women to make changes. This is a very important part of the bystander intervention consultancy work that No To Violence currently offers to local government areas, community-based organisations and networks.

Third, primary prevention approaches possibly rely too heavily on training-based strategies, through recruiting people for one-off trainings on understandings, skills and capacities to engage in primary prevention activities (for example, bystander intervention). Leading PMVAW initiatives in South America, South Africa, India and the U.S., for example, envelope training strategies within ongoing community engagement approaches which realise that the identification of male power and privilege at the heart of men's violence against women and their children is a process that unfolds over time, and which needs various levels of scaffolding and support.

Our role in Primary Prevention: Supporting effective community responses

Recommendation: NTV is resourced to adapt internationally-recognised, effective community engagement campaigns, such as the Men Stopping Violence model of Atlanta, for Victoria.

Recommendation: NTV is resourced to establish a community engagement and training program, in ways that are fully accountable to women's services and women's advocacy organisations, that prepares men for how they can be effective accountability supports for other men who they care about in their lives who are perpetrators of family violence. Further, that this program takes bold but necessary steps in extending current community conversations about family violence into what men can do to identify the sexism, male entitlement and privilege that they and other men are perpetuating, and what they can do to challenge structural gender inequalities.

Australian research indicates that women who experience violence often first disclose at least some of what they are experiencing to a friend, family member or someone within their communities of belonging. Friends, family members, work colleagues, fellow members of clubs and community groups, therefore all have a very important role to perform in supporting women who disclose violence, and in creating opportunities for women they suspect might be victims to disclose.



Correspondingly, the ways in which friends, family members, colleagues at work or in community groups respond to a perpetrator of family violence can make a big difference to the steps he might take towards accepting responsibility for his behaviour, respecting Intervention Order conditions, and embarking on a behaviour change journey. It is most likely that most men, most of the time, receive unhelpful responses from their 'mates'.

None of us become 'naturally' equipped to respond well in these situations. While efforts to change community attitudes about family violence and challenge many of the prevalent myths are vital, this attitude change opens the door to a greater desire amongst many people to do 'the right thing' when responding to a situation in their family, friendship networks or natural communities. It doesn't necessarily provide them with the knowledge of exactly what this 'right thing' is, nor the skills to be a helpful ally to victims or to assist in supportive accountability processes for perpetrators. Furthermore, it doesn't necessarily help men to identify what they can, and need to do, to behave in ways that undermines sexism more generally in how women are perceived and treated, and that undermines structural gender inequalities.

There is a very important role to play here in preparing men for the likelihood that at some point in their lives, they will have an opportunity to be an *accountability support*, to assist with a web of accountability around a man who they love or care about, a male friend, relative or colleague, who is using violence. To assist in responding appropriately to that man, sensitively over time, that does not collude with his violence-supporting narratives, but helps to 'nudge' him towards accepting responsibility for his behaviour and to make genuine attempts towards change and reducing the risk he poses to family members. These opportunities are likely, given the prevalence of family violence, that men should be supported to not wait until the moment occurs, but rather to be prepared.

There is some very important prevention and community engagement 'territory' here that needs bold, courageous projects coming from a men's organisation in ways that are fully accountable to women and women's services. This is not work that men's organisations should just go off and do on their own. Nor is it work that can be performed through a predominant social marketing, public awareness-raising lens of the nature of White Ribbon. Rather, it requires, bold but sensitive conversations in a community engagement context, backed up by accessible resources on what men can do, and how to go about doing it (e.g. without pretense that some simple actions can help fix the problem).

This approach also requires innovative options to help men develop the *skills* to be effective accountability supports to a perpetrator of family violence, and to confront their own attitudes and beliefs that might get in the way and lead them more towards collusion with their friend or family member's violence-supporting narratives rather than supporting a journey of responsibility.

Further, there is also a strong need to help men know what they can do to identify the



sexism that they and their mates are engaging in, and how they are using male entitlement and privilege to the detriment of women and children, including those who they love in their lives. It is not simply enough for men to say "I don't perpetrate violence, therefore I'm not part of the problem, I don't need to do anything." All men, to a greater or lesser extent, and intersecting with other forms of privilege (or lack there-of), use gender-based entitlement and power. Now is the time for prevention work to take bold and courageous steps towards helping men to identify, in concrete ways, how they use this entitlement and privilege in their everyday life, and to make changes.

Our role in Primary Prevention: Supporting effective community responses

***Recommendation:* No To Violence be resourced to work in partnership with existing providers of school-based primary prevention approaches, to adapt internationally-recognised, effective school-based programs to tackle gender inequity, and dominant views of masculinity that support MFV/MVAW.**

There are currently many types of “respectful relationship” educational programs running across all types of schools. These vary in depth and quality, with some of the most intensive approaches showing promise as vital primary prevention activities.

There are opportunities to build upon this important work done to potentially enhance effectiveness. First, to increase boys and young men’s understanding about what constitutes sexism, gender inequality and violent behaviour, school-based approaches can invite boys and young men to reflect upon the reinforcers they are exposed to on a daily basis. Some of this exposure is by choice, seeking out pornographic web sites on phones, watching footage of violent and/or demeaning acts online; and some is incidental to their lives, the objectification of women and the role modelling that they are exposed to on sporting programs.

This should start in primary school on a simplified level, allowing children to identify behaviour in their homes and school that is violent. In secondary school, it should be based around similar principles that underlay the provision of MBCPs – addressing men’s entitlement, and creating an understanding of the impacts of men’s abusive behaviours on women. Furthermore, secondary school approaches can integrated respectful relationship education with other efforts towards challenging homophobia and transphobia, to help young men and boys accept the plurality of ways in which they can be build their gender identities and sense of masculinity – the processes through which boys and young men denigrate women in order to prove themselves as the ‘strong man’ are intimately connected with the denigration of people whose sexual attraction preference and gender identity does not conform with heterosexist and gender binary ‘norms’.

Furthermore, some existing school-based approaches could enhance their effectiveness by addressing some of the environmental influences that reinforce dominant masculinities. Respectful education approaches that rely predominantly on individual attitude change



minimise the role of environmental and structural drivers of sexism, thereby potentially limiting their effectiveness. As just one example, changing the mix of sporting opportunities available to and encouraged for boys, with a greater emphasis on sporting curricula that de-emphasises male superiority and competitive strength (e.g. to include a focus on circus skills), could potentially have as much impact on promoting an acceptance of a plurality of masculinities than a respectful relationships education course.

This is not a quick fix. This will take time. This is a long term educational process similar to the campaigns against drink-driving and smoking. They have had remarkable success over an extended period.



Recommendations

Statewide Intake

Recommendation: Implement a single statewide service entry point.

Recommendation: Establish a statewide single service entry point that would facilitate a consistent – and more effectively monitored – response to all men engaging with the Victorian sector.

Male Victims

Recommendation: That within the proposed model of a single entry point statewide service, this service responds to all men involved in incidents of family violence, for specialised assessment, safe engagement, and appropriate referral whether identified as perpetrator or affected family member.

Men's Behaviour Change Programs

Addressing demand for men's behaviour change programs

Recommendation: The Victorian Government commissions an analysis of the number of funded places required to meet both current demand and the latent, in-built future demand growth in the system, projected as a rising number of funded places over the next seven financial years, with projected increases differentiated according to each of DHHS's 17 regions. Furthermore, that the Victorian Government commits to funding the family violence sector to meet this projected demand across this time period.

Short Term: The Victorian Government provides an immediate 50% increase in the number of funded men's behaviour change program places, with two-thirds of this increase provided through the Department of Justice to reflect the substantial role of civil and criminal justice system agencies in contributing towards demand.

Placement of men's behaviour change programs

Recommendation: The Victorian Government diversify eligible men's behaviour change providers to include specialist women's family violence agencies, and encourage the development of new programs more closely connected to child protection and family services contexts.

Unit cost funding

Recommendation: The Victorian Government increases the unit cost formula to the amounts determined through the No To Violence financial cost analysis report, differentiating between small rural, medium-sized regional and relatively large urban programs. The Victorian Government also works with No To Violence to determine what proportion of this unit cost can be recovered through participant fees.³⁴

³⁴ This proportion is likely to be quite small, probably in the 10 – 25% range. However, as outlined in our men's behaviour change program financial cost analysis report, cost recovery is generally at the lower end of this range, and there is scope in some circumstances to expect perpetrators to pay more for participation in the program.



Program accreditation and minimum standards

Recommendation: The Victorian Government, through COAG and other negotiation processes, works towards an agreement for the Australian Government to fund a national accreditation system for men's behaviour change program providers.

Short Term: The Victorian Government funds an update of the No To Violence minimum standards for running men's behaviour change programs, to reflect contemporary industry expectations for the minimum requirements of these programs.

Short Term: The Victorian Government funds No To Violence to assist existing and new program providers to meet these raised minimum standards, through professional and practice development strategies, and to provide a consultation and technical assistance service to support providers to expand capacity.

Short Term: The Victorian Government funds No To Violence to develop and implement an interim auditing tool to determine whether existing and new program providers have sufficiently expanded practice management, supervision, inter-agency collaboration, program design and practice enhancement, and a sufficiently robust program evaluation methodology, to meet the new minimum standards.

Short Term: The application of the new unit cost funding formula recommended by No To Violence's MBCP financial cost analysis report for any particular program provider be predicated on a successful auditing outcome.

Developing new standards

Recommendation: NTV and MRS consult with the FV and broader community sector to develop minimum standards for working with these emerging issues in the community. This would involve translating where possible, the relevant MBCP minimum standards to focus on both adolescent violence and elder abuse. This would take into account expertise developed over the past few years by agencies working in this space.

The development of online facilities for working with men's violence requires due diligence and attention to the safety of women and children. This would involve developing additional risk assessment and safety planning in collaboration with women's services.

Individual, violence focused counselling

Recommendation: A project to update the No To Violence minimum standards for running men's behaviour change programs includes a significant component on the translation of key standards relevant to individual, violence-focused counselling, both within and external to MBCPs as a starting point to improve practice in these contexts.



Recommendation: The Victorian government fund MBCPs to increase their capacity to provide individual counselling and support work to perpetrators as they move through the MBCP.

Recommendation: Provide an intensive 5 day training program that will support Counsellors, Psychologists and Social Workers in their understanding of men's violence against women and children, men's victim blaming narratives, working without collusion, men's accountability, safety planning and the safety of women and children.

Recommendation: Provide a train the trainer element for this training to continue widely across Victoria from suitably qualified professionals.

Perpetrator interventions for particular communities

Recommendation: The Victorian Government design and invest in a workforce development strategy to recruit, train and support bicultural men's family violence workers.

Recommendation: The Victorian government invest in specialised and culturally-specific men's family violence training to expand the number of Aboriginal men and women practitioners who are qualified and skilled to work with Aboriginal perpetrators of family violence.

Recommendation: Behaviour change programs modelled on those available for male perpetrators are not developed for women nor funded by the Victorian Government. Rather, the development of a pilot program working with women who use force be considered and modelled on initiatives in the US.

Recommendation: MBCPs are sufficiently resourced to develop and implement individual-based, tailored interventions for men with an intellectual disability, and where appropriate, to support their ability to learn from groupwork.

Short Term: Based on learnings from the sexualised offender treatment field, tailored approaches to men with intellectual disabilities are piloted and evaluated for family violence perpetrators.

Short Term: Qualifications and training for MBCP work include a specific component to assist MBCP practitioners to (i) adapt their programs and interventions for men with intellectual disabilities, and (ii) to understand the experiences and needs of women with disabilities experiencing family violence so as to strengthen MBCP related partner support work with this cohort, and to enhance identification of the specific tactics that perpetrators commonly use to coercively control women with disabilities.

Strengthening Perpetrator Accountability within an Integrated Family Violence Service System

Case Management



Recommendation: The Victorian Government invests in a major re-development of the 2009 Enhanced Service Intake Model towards a more comprehensive, multi-pronged early intervention front-end system designed to address specific windows of opportunity to engage men and augment ongoing risk assessments in the weeks following police call-outs.

Short Term: The Victorian Government identifies opportunities to pilot, and carefully evaluate, a wider range of assertive, early intervention opportunities, including the co-location of men's family violence practitioners within Victoria Police Family Violence Teams to assist assert engagement with higher-risk perpetrators in the weeks following police call-out, and adaptations of the Ontario second responder and North Canterbury (NZ) ReachOut face-to-face engagement models.

Recommendation: The state government to fund the statewide intake service to provide intake case management follow up to perpetrators making initial contact with the MFVSS.

Recommendation: The state government to provide funding to all MBCP's across the state to increase capacity to provide Case Management support to perpetrators to address issues impacting on their use of family violence.

Recommendation: The 2010 Victorian Government initiative to develop a Strengthening Risk Management Framework outlining the roles and responsibilities of each family violence systems agency to work towards family violence risk management, stalled and eventually discontinued in 2011 prior to its completion, should be resumed, but with a greater focus on perpetrator accountability, and with more central involvement from family violence peak and statewide non-government agencies.

Child protection and family services

Recommendation: The Victorian Government utilise the Safe and Together model to improve the competence of the child protection and family services systems to work with family violence, in the domains of systems development and design, interagency collaboration, policy, practice development and data monitoring & evaluation systems.

Short Term: The Victorian Government commissions an audit of DHHS child protection and non-government family services systems to determine shortfalls and problems in the above domains that the Safe and Together model would need to address, using the model's Continuum of Domestic Violence Practice and case reading tools.^[1]

Short Term: The Department of Health and Human Services funds specialist men's family violence practitioners to work within particularly high volume metropolitan and regional child protection offices, and within key non-government family services providers, to promote the capacity of child protection and family services systems to skilfully

^[1] <http://endingviolence.com/our-products/training/safe-together/case-reading-process/>



engage family violence perpetrators, and to improve the interface with men's behaviour change programs.

Short Term: The Victorian Government investigates the potential of the Western Australian Family & Domestic Violence Response Teams, a co-located intake process for family violence referrals involving police, child protection and specialist non-government family violence service collaboration, for the Victorian context.

Family law system and child contact centres

Recommendation: The Victorian Government pursues through COAG and other means opportunities to adopt the UK CAFCASS system in Australia.

Short Term: The Victorian Government pursues through COAG and other means the development of an ongoing training program focusing specifically on perpetrator accountability for Federal Circuit Court judges and other family law practitioners, building upon but significantly extending previous AVERT training.

Recommendation: The Victorian Government funds a research and development project to determine recommendations for promoting the capacity of child contact centres to contribute towards perpetrator accountability, and agrees to fund these recommendations.

Short Term: The Victorian Government funds a 2-day training program for non-government and private child contact centres to improve their understanding of family violence and response to violent, controlling and manipulative behaviours used by perpetrators during child access.

Victoria Police

Recommendation: All Victoria Police members, current and future, participate in a minimum two-day post-Academy introductory training on family violence, including components on perpetrator engagement. Furthermore, that this training be refreshed through one-day booster trainings on a two-yearly basis.

Recommendation: Victoria Police develop appropriately detailed practice guidance documentation and support processes to strengthen their ability to determine the primary aggressor, in situations where they might otherwise be tempted to pursue dual arrest or the arrest of the primary victim.

Recommendation: Victoria Police perform an audit of innovative perpetrator accountability strategies at local and regional levels, including those exhibited by specialised Family Violence Teams, to determine which should be rolled out on a statewide basis.

Recommendation: Victoria Police conduct a review of the use of specialised domestic violence evidence kits and other pro-arrest aids to support strengthening police practice in converting a higher proportion of family violence incident attendances into arrests.



Recommendation: Victoria Police engage in a considerably more consultative process in its current deliberations on how to triage and develop a response system based on the degree of risk.

Short Term: The \$3.4m allocated by the previous government towards the redevelopment and strengthening of the Victorian Family Violence Risk Assessment and Risk Management Framework (the CRAF), a project initiated in recognition of the CRAF's limitations in a number of areas, be re-instated, and Victorian Police efforts to redevelop their risk assessment tools and work towards a triaging process be embedded within this broader project.^{35,36}

Early intervention opportunities following police call-outs

Recommendation: The Victorian Government adopts the recommendations outlined in The Centre for Court Innovation (check name) report *Opportunities for Early Intervention: Bringing Perpetrators of Family Violence into View*, which outlines a wider variety of early intervention opportunities exist.

Recommendation: The Victorian Government adopts the recommendations outlined in The Centre for Court Innovation (check name) report *Opportunities for Early Intervention: Bringing Perpetrators of Family Violence into View*, which outlines a wider variety of early intervention opportunities exist.

Corrections Victoria

Recommendation: Corrections Victoria develop a specialised stream of supervision for family violence offenders, recruiting, training and supporting specialised Community Corrections Officers and Parole Officers who focus on family violence and sexual assault.

Recommendation: The training provided to all Community Corrections Officers, Leading Community Corrections Officers and Parole Officers on family violence issues be increased to a minimum of four days.^{37,38}

Recommendation: The frequency of Community Corrections supervision for family violence offenders be significantly increased in the early stages of supervision, given the likelihood that those offenders who will re-offend are likely to do so sooner rather than later after arrest.^{39,40}

³⁵ See <http://www.dcp.wa.gov.au/CrisisAndEmergency/FDV/Pages/FamilyandDomesticViolenceResponseTeam.aspx>

³⁶ These limitations include the relatively poor ability of the CRAF to differentiate high from severe risk, focus on perpetrator dangerousness, separate out immediacy from severity of risk, and assess risk to children. The CRAF also offers little to inform risk management strategies.

³⁷ No To Violence and the Domestic Violence Resource Centre collaborated to provide four days of training to Home Detention Corrections Officers in 2010 before the Home Detention provisions were disbanded, and this experience demonstrated this length of training as the minimum required.

³⁸ The training provided to specialised family violence and sexual assault Community Corrections Officers would be considerable more than four days, due to the need to cover a range of issues involved in specialised supervision.

³⁹ Klein, A.R. (2015). *Practice implications for domestic violence research for probation officers and administrators*. Battered Women's Justice Project.

⁴⁰ It is important to note that family violence perpetrators are likely, even after arrest, to continue much of their use and range of coercive controlling tactics. Terms such as 're-offending' and 'recidivism' in this context refers to arrestable forms of family violence only.



Recommendation: Given that the risk of re-offending is highest within the first few to several months after the offender's arrest, and the length of the ensuing court trial process before sanctions and Corrections-based supervision can be arranged, Corrections Victoria consider an adaption of Tasmania's Defendant Health Liaison Officer model to work with the offender's criminogenic needs (substance abuse, mental health issues, problem gambling, employment, housing, etc.) related to his risk of re-offending simultaneous to the court trial process.⁴¹

Recommendation: Corrections Victoria consider options to introduce pre-trial monitoring of high-risk family violence offenders, given that the risk of re-offending is highest within the short-term after arrest.

Recommendation: Corrections Victoria improves its data collection and data sharing processes, so that specific family violence related risk assessments for offenders – both incarcerated and those on Community Corrections Orders – be based on information obtained from Victoria Police, Magistrates Courts, child protection and other sources, rather than reliance on the offender's self-identification and self-reports of his use of violence.⁴²

Recommendation: The Victorian Government adopts the Gold Coast model as the primary referral pathway for family violence offenders on Community Corrections Orders, except for those men with high levels of psychopathy. Both men's behaviour change program providers and specialised women's family violence services are approached to tender to provide this program in close collaboration with Corrections Victoria, with strong partner support and children's assessment and advocacy components.

Short Term: Corrections Victoria extends funding for offenders referred to men's behaviour change program providers as part of their Community Corrections Order conditions to enable minimum **six** months interventions, rather than the current practice of 12 sessions / three months.

Recommendation: Corrections Victoria conducts a review to determine opportunities for community-based organisations offering correctional post-release, throughcare and transitional services, to identify opportunities for funding interventions to address the risk of family violence re-offending.

Magistrates Courts

Recommendation: Magistrates Court Victoria adopt the Western Australian practice of protective bail risk assessment reports to assist with judicial bail decisions concerning moderate to high risk perpetrators. This should draw upon

⁴¹ See <http://ntv.org.au/conference/wp-content/uploads/2012-ntv-conference-workshop-9h.pdf>

⁴² Historically, no specialised family violence risk assessment tools have been used to determine risk for family violence offenders in the Corrections system, with a reliance on tools focusing on the risk of general reoffending (of any type). While Corrections Victoria are introducing the Spousal Assault Risk Assessment Guide, this will be administered mainly to offenders, who are likely to minimise and distort self-disclosures of their use of violence. Basing risk assessments on collateral information obtained from other systems agencies involved in prior and current responses to the risks posed by the offender is therefore crucial.



inter-agency sources of information as outlined in the emerging Domestic Violence Response Team approach of the Gold Coast Domestic Violence Integrated Response. These assessment reports should be designed not only to assist in judicial decision-making concerning the granting of bail, but also to help determine the specifics of protective bail conditions.

Recommendation: The Victorian Government expands its investment in Court Respondent Workers beyond headquarter courts, as part of an integrated front-end service system approach linked as part of a coordinated process with prior and subsequent early intervention strategies to engage men.

Short Term: The Victorian Government evaluate the relative advantages and disadvantages of these Respondent Workers being court-appointed or employed by community-based men's behaviour change program providers.⁴³

Recommendation: The Victorian Government funds the continuation and extension of training for Victoria Legal Aid lawyers to strengthen their understanding of and response to family violence.

Recommendation: The Victorian Government initiates a project – in partnership with Victoria Legal Aid, Victoria Law Reform Association and other relevant bodies – to identify opportunities to train private solicitors in understanding and responding to family violence.

Recommendation: Magistrates Court Victoria extends its current focus on strengthening responses to family violence by conducting a review of judicial leadership, imprimatur and courtcraft initiatives and strategies conducted in other Australian and overseas jurisdictions, including through the New York Centre for Court Innovation.⁴⁴

Recommendation: The Victorian Government funds the Centre for Innovative Justice to partner with Magistrates Courts Victoria to develop specific recommendations on how best to direct increased investment in strengthening specialised and integrated family violence court arrangements and responses. Further, the Victorian Government allocates, through the forward estimates, amounts in the 2016-17 and subsequent financial years to spend on strengthening family violence specialisation and integration in the Victorian court system.

Recommendation: As part of a step up in commitment towards addressing family violence, the Victorian Government injects increased funding into the court system to relieve the pressure caused by increasing demand. This funding would flow into Community Legal Centres, Victoria Legal Aid and other court-allied non-government organisations in addition to court facilities and infrastructure and court-appointed staff.

Recommendation: The Department of Health and Human Services funds early intervention programs expanding the capacity to respond to both victims and

⁴³ Community-based Court Respondent Workers have the potential to offer greater consistency between courts and men's behaviour change program providers – for example, the same practitioner can engage with the man both at court and through follow-up by the community provider. Court-appointed Respondent Workers, however, also come with particular advantages.

⁴⁴ One of our staff members recently attended a presentation by the Centre for Court Innovation at a U.S. domestic violence perpetrator program conference, focusing on a range of initiatives and innovations to promote perpetrator accountability through the court system.



perpetrators of family violence in general practice, building upon the research of Kelsey Hegarty of the University of Melbourne, Angela Taft of La Trobe University, and Gene Feder of the University of Bristol.

Health Services Providers

Recommendation: The Department of Health and Human Services provides a high-level authorising environment to drive systemic opportunities for family violence services and practitioners to train, learn from and skill-share with alcohol and other drug, mental health and problem gambling providers.

Primary Prevention

Updating Primary Prevention work with men

Recommendation: NTV is resourced to be the primary prevention organisation that stakeholders want us to become; including looking globally, acting locally, establishing standards of practice for engaging men in prevention approaches; allowing us to be more ambitious in our approaches.

Our role in Primary Prevention: Supporting effective community responses

Recommendation: NTV is resourced to adapt internationally-recognised, effective community engagement campaigns, such as the Men Stopping Violence model of Atlanta (footnote), for Victoria.

Recommendation: NTV is resourced to establish a community engagement and training program, in ways that are fully accountable to women's services and women's advocacy organisations, that prepares men for how they can be effective accountability supports for other men who they care about in their lives who are perpetrators of family violence. Further, that this program takes bold but necessary steps in extending current community conversations about family violence into what men can do to identify the sexism, male entitlement and privilege that they and other men are perpetuating, and what they can do to challenge structural gender inequalities.

Our role in primary prevention: supporting effective community responses

Recommendation: No To Violence be resourced to work in partnership with existing providers of school-based primary prevention approaches, to adapt internationally-recognised, effective school-based programs to tackle gender inequity, and dominant views of masculinity that support MFV/MVAW.



Appendix 1: Glossary and Terminology

Glossary

AHS	After Hours Service
AOD	Drug and Alcohol
BIPS	Batterer Intervention Programs
CIJ	Centre for Innovative Justice
CRAF	Common Risk Assessment Framework
DHHS	Department of Health and Human Services
EIS	Enhanced Intake Service
IFVSS	Integrated Family Violence Service
IRIS	Integrated reports information system
MBCG	Men's Behaviour Change Group
MBCP	Men's Behaviour Change Provider
MFVSS	Male Family Violence Service System
PMVAW	Prevention of Men's Violence against Women
RAMP	Risk Assessment Multidisciplinary Panel
SHIP	Specialist Homelessness Information Platform

Terminology

As a feminist organisation, No To Violence and the Men's Referral Service align ourselves as allies in the struggle to end men's violence against women and their children. As such, we believe that efforts to respond to and prevent family violence need to be situated within this broader social justice endeavour. We therefore use the term *violence against women* at various points in this submission.

Our submission uses the terms *victim-survivor* and *women experiencing family violence* interchangeably. Much has been written and debated about the relative advantages and disadvantages of each term, and as such, we will use both.

Similarly, there is no consensus on the 'best' term to use to refer to perpetrators, and as such, our submission refers interchangeably to *perpetrators*, *men who perpetrate family violence* and *men who use family violence*. While we have historically privileged the latter term, we recognise the arguments against the use of this term.

Systems agencies is used to refer to statutory authorities and non-government organisations that perform pivotal or important roles in coordinated community responses. These include specialist women's family violence services, men's behaviour change program providers, child protection agencies, family services providers, police, courts, corrections and some health providers (alcohol and other drug, mental health and problem gambling).⁴⁵

⁴⁵ It could be argued that other health providers – such as GP practices, child and maternal health centres and hospital emergency departments, could also be considered part of this central group of systems agencies.



The term systems agencies reflect the role of these agencies in contributing towards systemic responses to family violence.

Front end and *back end* service system responses are terms increasingly used to differentiate between early intervention responses involving large volumes of perpetrators and the relatively smaller number who end up participating in a men's behaviour change program. In Victoria, front end service system responses are often associated with the aftermath of police attendance at a family violence incident, involving police intervention, police referral to a telephone-based assertive outreach response to the perpetrator, the perpetrator's attendance at a Magistrate Court as a Respondent to a Family Violence Intervention Order hearing, and if one is present, liaison with a Respondent Worker at the court.

The number of perpetrators who are identified by police or the courts as potentially appropriate to receive this or other form of front end system response is increasingly markedly, and could plateau at an annual number nearing or approximating 50,000 on a statewide basis over the next 3-5 years. This contrasts with the current number of funded places for men's behaviour change program work in Victoria, approximately 2,500 funded in total through the Department of Health & Human Services, Department of Justice and Corrections Victoria.

While these two systems overlap and are by no means entirely distinct – the statutory and non-statutory agencies that operate within these systems are largely the same – there are considerable benefits in differentiating them. Our submission will argue that front-end perpetrator interventions and service system accountability processes are very under-developed in Victoria, rely too heavily on telephone-based assertive outreach, and miss numerous opportunities for a wider range of family violence systems agencies to participate in an early intervention response.

We maintain the term *men's behaviour change program* to refer to specialist medium- or long-term group-based intervention programs with family violence perpetrators. We have argued elsewhere that while this was an appropriate choice of term for the evolution of these programs to focus on the goal of behaviour change as distinct from anger management, that more recent evolutions in understanding the purpose of these programs within the context of coordinated community responses reveals this to be a narrow term privileging some objectives of this work over others.⁴⁶ No To Violence therefore supports the development of an alternative term that more fully expresses the range of objectives that these programs strive for; however, in the interim and to assist with reader familiarity, we will continue the use of this term in our submission.

The difference between *regional integrated systems*, exemplified by Victoria's Family Violence Regional Integration Committees, and more local *coordinated community responses*, is referred to often in our submission. The Victorian Government over the past

⁴⁶ See <http://ntv.org.au/wp-content/uploads/141022-NTV-10challenges-final.pdf>



ten years has invested in the systems architecture of regional coordination committees to assist the uptake of government-led reform initiatives, and to support statutory and non-statutory agencies to develop partnerships to assist in the integration process. Our submission will argue that this regional architecture is indispensable and requires strengthening with more authority and resources provided to Family Violence Regional Integration Coordinators to perform this function.

Coordinated community responses, however, operate on a much more local scale than these regional committees. While a region defines a population of a few to several hundred thousand, the geographical scope of local responses is much smaller, focusing on tens of thousands. Coordinated community responses involve systems agencies working together at a much more operational level than the regional governance focus of the integration committees. Both are crucial.



Appendix 2: Overlapping reasons for enacting perpetrator accountability processes and interventions

Overall, the (overlapping) reasons for enacting perpetrator accountability processes and interventions, with any particular man, can involve any combination of the following.

Augmenting initial and ongoing risk assessments. While information obtained from and observations of the perpetrator are generally not sufficient or reliable to base risk assessments solely on (except when the perpetrator displays evidence of high risk indicators), such information and observations can assist in augmenting a risk assessment based on other sources of information. The ongoing nature of these risk assessment opportunities are notable, as risk can fluctuate based on factors that evolve or appear over time (e.g. separation or other measures by the victim-survivor to regain control over her life)

Assisting with risk management during higher risk periods. While long-term behaviour change goals might or might not be achievable with a particular perpetrator, accountability processes and interventions can assist in some situations to lower or stabilise risk at particular times (for example, when a hostile man is about to attend court, or if a man has unrealistic expectations of an upcoming family law process in terms of access to his children). It is important to note however, that for some men and in some circumstances, perpetrator accountability processes and interventions can in themselves represent a risk for escalation in the perpetrator's violence and tactics of coercive control.

Monitoring and keeping track of the perpetrator's engagement of the service system, of major circumstances and changes in his life, and of factors in the man's life that might escalate risk (e.g. substance use, mental health or homelessness), or in some cases his whereabouts.

Addressing criminogenic needs that aren't the cause of the man's use of violence, but which might nevertheless be correlated with increased risk (substance use, unmet mental health issues, the actual or felt sense that the economic and social circumstances of his life are unravelling, etc.). Individual case management work with perpetrators, who are not (yet) willing to directly work on their violent and controlling behaviour, can potentially reduce risk to some extent in the short-term, while providing the man with a potentially positive engagement with the service system and a stepping stone towards behaviour change work.

Placing restraints around the man's opportunity to use violence, through measures such as ensuring that men with high stake in conformity (that is, men who have something to lose in terms of employment, reputation or other forms of status through potential involvement in



the criminal justice system) are aware of the consequences of continued use of violence, through to incarceration.

Improving the man's interactions with his children (and the risk he poses directly to them), and addressing the ways in which he attempts to sabotage his (ex)partner's sense of worth as a mother and the bond she has with her children.

Contributing to direct work with women and children through the partner support services associated with men's behaviour change programs or provided externally by specialised women's services, child support services when they are integrated with a behaviour change program or other perpetrator intervention, etc. For example, a partner's realisation that her current partner is not serious about engaging in a change process (through discontinuing with a MBCP or not taking the program seriously) can be an important milestone for her decision-making about what to realistically expect from her partner as part of making future decisions about her family.

Engaging the man in behaviour change goals through MBCPs or individual, violence focused counselling⁴⁷, with the focus on reducing or eliminating as many of his tactics of coercive control as possible.

Working towards long-term, sustainable changes in the man's behaviour through MBCP work and other processes that facilitate secondary desistance.

It is important to note that in addition to the above (overlapping) strategic objectives or reasons for perpetrator accountability processes and interventions, there can be additionally important *systems-level* objectives. Examples include increased skill by child protection and family services practitioners in motivational interviewing processes with perpetrators due to close collaboration and working relationships with MBCP providers, with the latter also benefitting through strengthening risk assessment processes for children and understanding more deeply what is involved in focusing on the paramount safety of children. Front end service system responses to family violence Respondents has supported police skill in family violence risk assessments through feedback from men's enhanced service intake providers.

The above analysis of the multiplicity of objectives for perpetrator accountability processes and interventions has important implications for evaluation and how success is measured. Singular measures of recidivism through data held by statutory authorities are inadequate in this respect, and are not suited to an evaluation approach matched to victim-survivor needs. The Project Mirabal evaluation measures representing leading work towards a more victim-centred approach.

⁴⁷ Individual violence-focused counselling involves processes to approximate the work of MBCPs through one-to-one counselling, in situations where a MBCP might not be available (Western Australian Department of Child Protection, 2013). Unfortunately, practice guidance, guidelines or standards for individual work with family violence perpetrators focusing explicitly on their use of violence do not exist in Australia.



Appendix 3:

NTV Member Consultations: Royal Commission into Family Violence

Group and Individual Consultations completed with members April and May 2015

Every MBC provider, agency and individual was contacted via telephone in addition to group and follow up individual emails

The following list separate to the Survey monkey completed by members and collated 15/05/2015

1. Relationships Australia HQ: Robyn McIvor
2. Relationships Australia Shepparton: Shelley Watson
3. Lifeworks HQ and Wyndham: Margaret Hodge
4. Kildonan : Zoe and Penny
5. Family Life : Amanda G
6. Child and Family Services Ballarat: Michael Brandenburg Bob Maika#
7. In Touch: Roshan B
8. Djerriwarrh Health Services: Joan Eddy
9. Springvale Community Advice Bureau – Zoe and Jantina
10. MonashLink Community – Helen Wirtz
11. Gippsland Women's Health – Jodie Martin#
12. Anglicare Yarra Ranges: Jim Allen
13. Nexus Community Health: Kathryn S
14. Gippsland Lakes: Damian
15. David Ellis
16. Stephen Herd
17. Alan Thorpe
18. Centre for Non Violence: Margaret Augerinos, & Staff
19. Chris Grace
20. Gold Coast , Queensland: Rosemary O'Malley
21. Tangenteyre Council, Alice Springs NT: Maree Corbo
22. Relationships Australia: Western Australia: Robert Andrews
23. Rod G
24. Mark Kulkens
25. Hilary Ash
26. Andrew Compton
27. Graham B

surnames have been omitted for confidentiality and some agency protocol



Appendix 4: David Mandel's Discussion Paper, The Safe & Together Model

The mission of child protection systems around the world is the safety, well-being and permanency of children. These systems are intended to be the guardians of last resort, protecting children from intimate harm by their parents, other caretakers and trusted members of the community. The social workers in these systems stand on the frontlines of some of the most darkest betrayals of love and trust, and the most horrific breakdowns of the bonds of care and connection in our societies.

More and more policy makers and practitioners in child protection systems are realizing that domestic violence is one of the most serious threats to the safety and well-being of children. 2008 child protection statistics from Canada reported 34% of all substantiated child protection investigations included exposure to intimate partner violence as the primary category of maltreatment. (Public Health Agency of Canada, 2010) A recent New South Wales' review of six years of child deaths in child protection involved families found that 61% of child deaths were correlated with the presence of domestic violence. The study also found that the co-occurrence rates of domestic violence and other issues such as poverty or parental substance abuse was often twice the rate of the families without domestic violence. Similarly, Aboriginal and/or Torres Strait Islanders child death rate in the cases involving domestic violence was 1 in 3 as compared to a rate of 1 in 6 in cases not involving domestic violence. (New South Wales Government Family and Community Services, 2013)

Child death is not the only concern related to domestic violence. Data from a major US study shows that there is "a pronounced impact of domestic violence on family functioning, the caregiver's general health and wellbeing, and the quality of the caregiver's interaction with the child, which in turn are significantly associated with decrements of child functioning related to behavior problems and health." (English, Marshall, & Stewart, 2003) Research also suggests that despite the high prevalence rates, strong associations with child death and overall child and family functioning, child protection may actually intervene with families with domestic violence at a lower rate than other types of referrals. And children from these families may also go into care at greater rates and stay in care longer than children from other families. (Devaney, 2008) (Irwin & Waugh, 2007)

Despite the rising recognition of the problem, child protection systems are extremely ill-equipped to deal with the problem in a comprehensive, holistic, family-centered manner. The systems weren't designed with this problem in mind and continue to be flummoxed around how to truly respond in a child-centered manner. Consistent policy, data collection and training is often non-existent. As late of 2007, one study found that only 43% of the child welfare protection agencies engaged in universal screening for domestic violence. Less than a quarter indicated that screening occurred at all stages of the case flow. Just over fifty percent indicated that they had written policy related to domestic violence. Less than twenty percent of these agencies required workers to receive domestic violence training. (Hazen, et al., 2007) Workers are rarely supported in working through their biases and fears,



particularly as it relates to engaging and working domestic violence perpetrators. One author describes this as “professional ignorance and avoidance of the issue of domestic violence within practice....and the lack of an organizational mandate and support for frontline staff in this area of work...” (Devaney, 2008).

The child protection response to family violence across Australia and the other Western country jurisdictions has been dominated by a set of practices that often ignored the domestic violence perpetrator, who is the source of the domestic violence-related child and family safety and risks concerns. This, in turns, leads to them making unrealistic and potentially dangerous demands of the adult domestic violence survivor. “Domestic violence destructive” child protection practices are norm, where “domestic violence destructive” is defined as policy and/or practice which actually increases danger and negative effects of the domestic violence for the child and family and/or increases their isolation from services and assistance.

In ‘domestic violence destructive’ systems the adult domestic violence survivors are expected to control the behavior of the domestic violence perpetrator or face increased interventions and/or the loss of their children. A classic example of this is expecting the adult survivor, regardless of the perpetrator’s pattern abuse, to demonstrate her commitment to child safety by getting a protection order even when it might not cover the children and might actually increase the danger for separation-based violence. Case practice like this is rampant in child protection systems. It is often tied to a “Failure to Protect” approach to domestic violence cases where the adult survivor’s decision making and parenting quickly becomes the focal point of intervention versus the domestic perpetrator’s decision and parenting. (Mandel, 2013)

This “Failure to Protect” approach is interwoven with a series of other child protection system characteristics such as poor or non-existent assessment of the role of males in the family, weak documentation of protective behaviors on the part of the domestic violence survivor and a failure to translate existing research knowledge into a comprehensive assessment of the harm caused by domestic violence perpetrators to child and family functioning. Each of these items hinder the creation of strong and meaningful partnerships with adult domestic violence survivors, child protection’s natural ally in these cases, around the safety and well-being of their children.

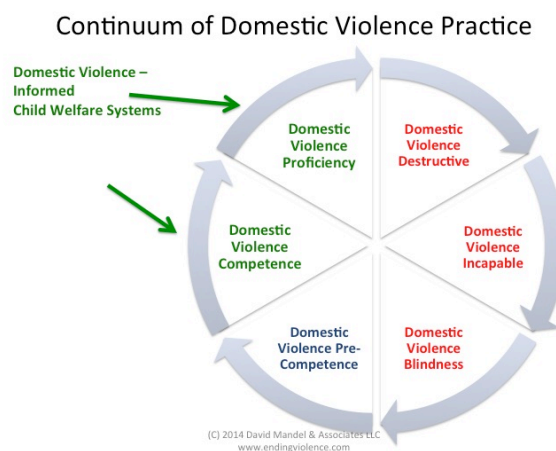
Perpetrator Pattern-Based Approach and the Move to Becoming 'Domestic



Violence-Informed'

The alternative to 'domestic violence destructive' and the 'failure to protect' approaches is a move toward 'domestic violence-informed' child protection policy and practice. This requires systems to adopt a perpetrator-pattern, child-centered, survivor strength-based approach to improve outcomes with children and families exposed to domestic violence perpetrators' behavior. This shift is characterized by a number of factors. First, it requires a clear understanding that the perpetrator's behavior pattern, not the adult survivor's behavior, is the source of the child risk and safety concerns related to domestic violence. This clarity of responsibility leads child protection to no longer make their assessment of child safety based on whether the couple is together or not, nor the presence of protection order. It leads to assessments that are made on the basis of perpetrator's pattern and how those behaviors are a concern for child safety and well-being.

Second, it requires a comprehensive articulation of the nexus between perpetrator's behavior pattern and child and family functioning. This leads to a more comprehensive child safety assessment related to domestic violence. The assessment starts with the traditional points of concern (physical danger, traumatic impact). But it continues with an fuller assessment of the perpetrators impact on the overall family functioning including housing instability, maternal mental health and substance abuse, child mental health and substance abuse, disruption of kin network, medical care, employment and educational stability. Such a comprehensive assessment is required to connect the dots between the domestic violence, substance abuse and mental issues, all three of which are prevalent in many child protection-involved families. For example, child protection systems need to actively assess for whether the domestic violence perpetrator has any history of interfering with other family members receiving medical and mental health care, particularly when substance and mental health are child protection concerns.



Third, and lastly, child protection systems need to increase their assessment and engagement of men as parents and improve their ability to more comprehensively assess the protective capacity of the adult domestic violence survivor. Improved gender-based practice is essential to any efforts to improve any child protection system's response to domestic violence. Higher expectations for men as parents, and seeing domestic violence perpetration as a parenting choice, whether the children witness the violence or not, is essential to improved assessment and case planning. Similarly, better assessment of the strengths of the adult domestic violence survivor is also critical to the development of more effective case plans and safely reducing or limiting the number of out-of-home placements



for children from these homes.

To help systems make the shift from a “Failure to Protect” approach to a perpetrator pattern, child-centered, survivor strength-based approach, David Mandel & Associates developed a Continuum of Practice framework that distinguishes between problematic and positive policy and practice in child protection systems. The framework identifies six systemic stages for child welfare systems related to domestic violence. The stages can roughly be divided between domestic violence-incompetent (Destructive, Incapable, Blindness) and domestic violence-informed (Competent, Proficient) with Pre-Competence separating out the two major areas. The purpose of the framework is to provide a method of self-evaluation and a road map for change for child welfare and their partners.

These stages can be applied to a variety of factors when assessing the state of the child welfare system and developing a plan for becoming more “domestic violence-informed.” These factors can be grouped together into different areas: Paradigm, Policy and Practice (which includes data, definitions, forms and tools), Training and Supervision, Legal, Services, Coordination and Collaboration, Institutionalization and Integration. Systems that become “domestic violence proficient” apply the perpetrator pattern-based approach to all these areas.

The Safe and Together Model

The Safe and Together model was developed as a methodology for helping child protection systems move become more “domestic violence-informed.” It has been applied in numerous US states and recently expanded to the UK and Australia. Its implementation is flexible yet strong and consistent in its core concepts. It has been adopted as the official state model in an number of US states including Michigan, Oregon, Florida, Ohio, Iowa and the District of Columbia. Implementation has taken different forms, always with an emphasis on sustainability and positive outcomes for children and families. For example Ohio and Michigan have adopted a train the trainer model where local staff become Certified Safe and Together trainers who deliver core training modules to social workers and others across the state. In Florida, the model has been integrated with the state’s child protection agency’s practice model providing workers with a map for integrating the model’s principles and critical components into their overall assessment of families. In the District of Columbia, implementation started with an organizational assessment which led to series of recommendations related to policy,

Safe and Together™ Principles



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practice and staffing changes. Through the National Safe and Together Model Advocacy Institute, women's sector workers in five different states have been trained to apply the model to enhance their collaboration with child welfare.

Using a perpetrator pattern-based approach as its foundation allows child protection agencies to shift to Domestic Violence Competence and Proficiency, making policy and practice changes in a number of different directions simultaneously.

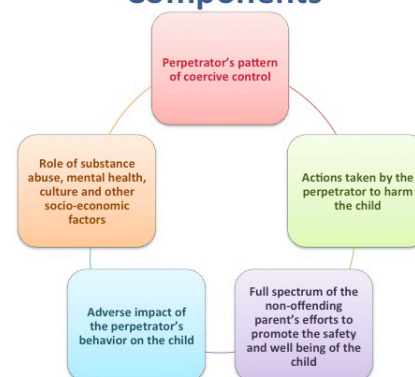
Developed originally for child protection systems, it has implications for a variety of professionals and systems including domestic violence advocates, family service providers, courts, evaluators, domestic violence community collaboratives and others. The behavioral focus of the model highlights the 'how' of the work, offering practical and concrete changes in practice.

Safe and Together™ model: Better Outcomes for Families and Systems



The model is specifically designed to focus on promoting the best interest of children including safety, permanency and wellbeing, and in this way is designed with the mission of child protection in mind. The model's use of a perpetrator pattern creates a whole family approach that guarantees a more comprehensive assessment of risk, safety and protective factors and increases the effectiveness of the system in engaging men to become better fathers. As it relates to domestic violence survivors, the model keys assessment and partnership specifically to the safety and wellbeing of children. Instead of a focus on generic strengths, the model directs the system to articulate the specific actions the adult survivor has taken to promote the safety and wellbeing of the children.

Safe and Together™ Critical Components

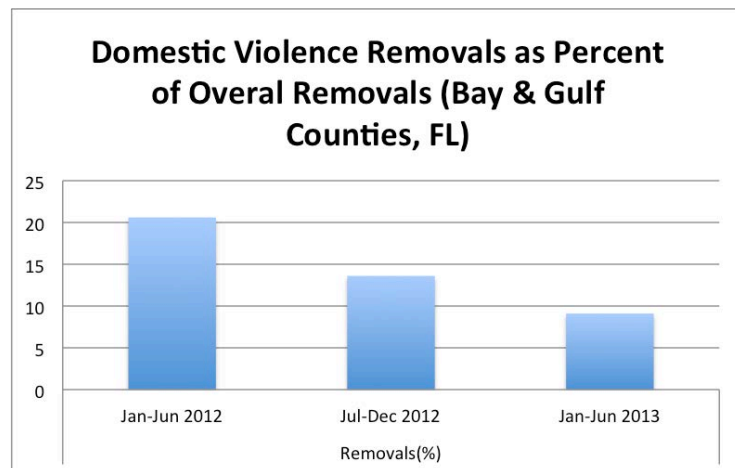


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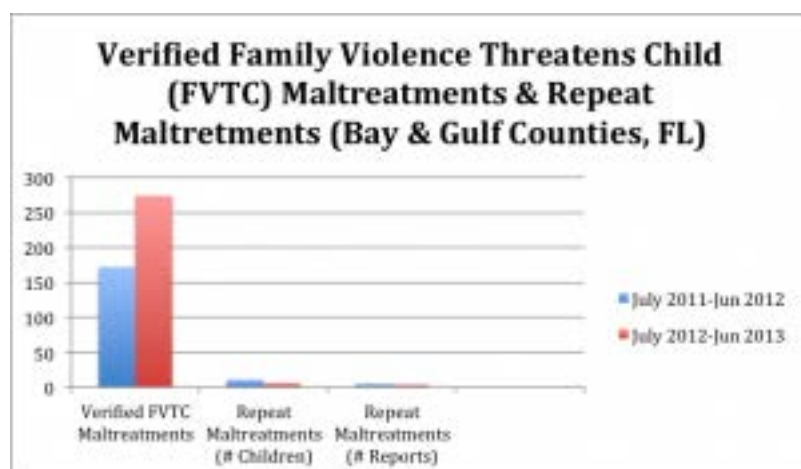
In the US , its been associated with improved child protection practice, improved assessment, and significant decreases in out of home placements. (Steinmann & Jones, 2014) (David Mandel & Associates LLC, 2013) In Florida, David Mandel & Associates has been collaborating with both the Florida Coalition for Domestic Violence (FCADV) and the Florida Department of Children and Families for the past seven years. Recently the Child Protective Investigator/Safe and Together project site in Northwest Florida reported strong results from this approach. From January 2012 through June 2012, domestic violence related removals represented 20.6% of removals in Bay and Gulf Counties. This was the first six months of the project when co-located advocates were hired and the staff was receiving Safe and Together Model training. During the next six months, from July 2012 to December 2012, the removal rate dropped to 13.6%. For the most recent six month period, January 2013 to June 2013, the removal rate dropped even more to 9.1%.

From July 2011 to June 2012 (which includes the benchmark period of Jan to June 2012), there were 172 verified domestic violence specific maltreatments (Family Violence Threatens Child or FVTC). 11 children in those cases had repeat maltreatments, which mean there were two separate verified reports for FVTC. These children represents five families/five reports of repeat maltreatment.



From July 2012 to June 2013, there were 274 verified maltreatments of FVTC. This represents 6 children from four families/four reports of repeat maltreatments.

While this data is only correlative and data collection needs to continue, the increase in verified domestic violence maltreatments (by almost 60%) combined with a serious decrease in removals (over 50%) and a stable raw number of repeat maltreatments is exactly the kind of results we expect to come from improved child protection practice and community collaboration in domestic violence cases where children are involved.



This data tracks similar data supplied by the Florida Department of Children and Families for the period when the Safe

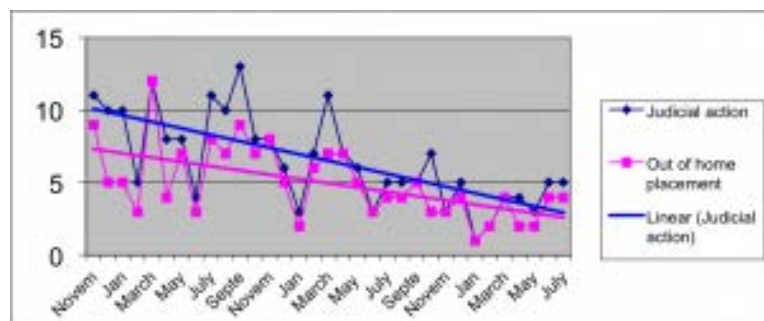


and Together model was implemented in the Jacksonville area. This training involved child protection staff, local domestic violence advocacy center staff, Children's Legal Services and community partners. Over almost a three year period similar efforts in Florida Department of Children and Families' Circuit 4 produced an approximately 70% drop of neglect filings in domestic violence cases and an approximately 50% reduction in removals of children in domestic violence cases.

Circuit 4 Domestic Violence Judicial Action/Out of Home Placement: October 2007-July 2010

In Ohio, the National Center for Adoption Law and Policy (NCALP), the Healthpath Foundation of Ohio and Ohio Department of Jobs and Family Services collaborated to

conduct a third party evaluation of the Safe and Together trainings in Ohio including the certified trainer model being used to extend Safe and Together training to all 88 Ohio counties. The evaluators, Sheri Chaney



Jones and Kenneth Steinman, organized the evaluation around "5 data collection activities: (1) an online pre/posttest survey of 837 caseworkers and supervisors; (2) semi-structured interviews with 16 supervisors; (3) semi-structured interviews with 8 community stakeholders; (4) desk reviews of 191 case files; and (5) review of written policies from 15 counties that had completed Safe and Together training." They collected data from 12 of the counties trained during 2013, as well as 12 Ohio counties that had participated in Safe and Together training during previous years, and 7 local child protection agencies from counties that had not yet participated in the training.

The evaluation showed very positive results, demonstrating important, clear and positive movement towards a more "domestic violence-informed" child protection system. Consistent with the Safe and Together model, there were changes in child welfare's practice associated with the entire family (adult survivor, child survivor and perpetrator). The results not only demonstrated significant attitude changes (less victim blaming) towards adult domestic violence survivors, but strong changes in on-the-ground case practice. The desk reviews, interviews and surveys indicated that key child welfare practices such as screening and assessment for coercive control were improved. As a result of the training, child protection became better at partnering with adult victims in order to assess victims' protective capacities and efforts to keep children safe. Because the movement toward a



“domestic violence-informed” child protection system requires enhancements in practice related to perpetrators, we were especially pleased with the changes related to case work with perpetrators. Social work staff reported that engagement and interviewing of perpetrators had become more valued. From a practice perspective, perhaps most importantly, the evaluation showed that the participants trained in Safe and Together were able to better assess and document the impact of perpetrators’ patterns of behavior on children.

Strong evidence that:

- CPS staff assign less blame to victims for staying in a violent relationship;
- CPS staff increase their concern about, and documentation of the effects of children witnessing domestic violence.

Mixed Evidence:

- CPS staff increase their understanding of coercive control;
- CPS staff enhance safety planning for victims and children;
- CPS staff increase perpetrators’ accountability.

Little evidence that:

- CPS agencies change written policies; and
- Community stakeholders become more receptive to Safe and Together policies and principles.

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The behavioral nature of the approach can also help to reduce stereotyping based on race, class, ethnicity and other socio-economic indicators. This can be valuable in addressing the concerns of the Aboriginal and/or Torres Strait Islander communities regarding the involvement of child protection in their communities, and the related issues of overrepresentation of these groups on the child protection case load.

Recommendations for the Royal Commission

Based on our knowledge, expertise and familiarity with Australian child protection practice we respectfully submit the following recommendations for the Royal Commission’s consideration:

1. Review and amend policy and practice across statutory child protection, child welfare NGOs and related systems to reflect a “perpetrator-pattern” instead of “failure to protect” based approach to the issue of domestic violence and children. This approach would ensure better assessment of child and family safety and well-being in domestic violence cases, and promote better case planning and cross systems collaboration. It would also promote better partnerships with the non-offending parent related to child safety and well-being and better attention to issues of domestic violence in multi-problem families. It would also ensure that the focus of assessment of domestic violence concerns is driven by perpetrator behaviors instead of race, ethnicity, relationship status, living arrangements or other socio-economic markers.

Such new policy and practice would affirmatively articulate that a) domestic violence is a pattern based problem that involves coercive control and actions taken to directly and indirectly harm children, b) domestic violence



perpetrators, not domestic violence victims, are acting negatively in their parental or caregiving role when they are engaging in patterns of coercive control toward their ex (partner) and family, and c) that the adult domestic violence survivor should be seen as the system's natural ally, not an obstacle, to child safety and well-being and the system should organize itself to partner with her toward that end.

It is suggested that this review utilize the Continuum of Practice framework and the Safe and Together model as the foundation of the review process. Included in this review is how domestic violence is or isn't addressed in other priority child protection initiatives such as trauma informed initiatives or Protecting Children Together.

2. Review and amend child protection data collection procedures to ensure that a) it, as accurately as possible, captures the presence of domestic violence on its caseload including domestic violence identified after the case family has entered into the system for other issues and b) enables the government and NGOs to describe the relationship between the domestic violence perpetrator's behavior, family functioning, domestic violence interventions with families, desirable family outcomes and priority systems goals, e.g. maintaining children safely in their own homes/communities.
3. Review and amend current working training in order to skill up social workers, health visitors and other professionals to ensure that have the knowledge, skills and attitudes to implement a perpetrator pattern, child centered, survivor strength based approach. This would involve mandatory training for all new workers, regularly in-service training for existing workers, and specialization training for supervisors, managers, legal staff and others. This would include both statutory and NGO workers. The Safe and Together Model Core Practice Training would be one way to go about this process.
4. Review and amend current working training in order to skill up social workers, health visitors and other professionals to ensure that have the knowledge, skills and attitudes to ensure that their work is based high expectations for men as parents. This is an essential aspect of any successful attempt to address domestic violence and children. This means tackling how domestic violence perpetrator's who are fathers or male caregivers have "benefited" from low expectations of men as parents/caregivers. The training for social worker, health visitors and other professionals for working with men as parents should have an explicit orientation that a) men's treatment of their partners are a central part of their any definition of good fathering and b) it's men parenting choices and behavior that matter to outcomes to children (versus the simple involvement of a father). Currently



David Mandel & Associates is seeking a pilot side for an curriculum that would teach professionals working with families some of the key skills needed to engage and assess men as parents.

5. Investigate whether the Judiciary in family and juvenile matters are “domestic violence-informed.” This review might include a) reviewing court safety procedures for high risk domestic violence cases, and b) determining if the court is receiving the necessary the domestic violence-informed expertise from evaluators and others providers input on family violence-related matters.
6. Investigate whether the development of a domestic violence specialist within the child protection system, as it done in significant portions of the United States, would benefit case decision-making.
7. Investigate whether the current child welfare service delivery system (the NGO sector) is “domestic violence-informed.” This investigation might include a) reviewing how well child welfare prevention and intervention services are addressing domestic violence from a perpetrator pattern-based approach, b) assessing the underreported value the women’s service sector services are providing to families involved in child protection, c) examining the potential benefits to child protection of increases funding of women’s services as means of improving child safety and well-being, and d) examining the existence of child safety inclusive domestic violence perpetrator programming.



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