

47 High Street
 PO Box 146
 Kyneton VIC 3444
 T: 03 5421 1666
 F: 03 5422 2161
 E: admin@cobaw.org.au
 W: www.cobaw.org.au

ABN: 35 823 252 867
 ACN: 136 366 722

28 May 2015

**Submission to the Royal Commission Into Family Violence Victoria
 By Cobaw Community Health Service Ltd.**

Cobaw Community Health Services Ltd. (Cobaw) provides services to the community within the Macedon Ranges Shire. We provide a broad range of services including Allied Health Services, Counselling, Alcohol and Other Drug Services, Housing and Homelessness support, Family Services, Children's Services, Youth Services, Social Support and Respite and other more targeted projects. As such, we see the impact that Family Violence has across the full range of age groups and demographics. Importantly, because of the range of services we provide, we see evidence of the impact of Family Violence in many aspects of people's lives. This includes the impact on physical health, child development and emotional well-being, housing and homelessness, finances, employment, drug and alcohol use, education, emotional well-being and mental health. Furthermore, Family Violence, on many occasions, impedes or interrupts our ability to deliver the service for which the client was originally referred, thus compounding the original issue. For a service such as Early Childhood Intervention Services for example, this can lead to children not having the chance to reach their full potential.

As a Community Health Service in a regional area, our community faces additional difficulties when experiencing Family Violence due to isolation, lack of transport and issues around everyone knowing each other in small communities.

In this submission, we have attempted to highlight a number of issues that affects the people with whom we work and our community and where possible, put forward recommendations as to how systems or services could be improved in order to address these issue. We have also included a number of case studies.

1. Housing Support and Crisis Housing

Housing resources are not readily available for women escaping Family Violence. Unless women are able to prove they are being actively threatened and are at immediate physical risk, they are not able to access refuge accommodation and are therefore directed back to Housing Support Services. Women are then too often financially under-resourced to leave and have little or no access to financial support due to Centrelink eligibility guidelines. In many instances according to their incomes, they should be financially resourced, but are not due to financial control by their partners/ex-partners.

Approximately 20% of people identify Family Violence as their first reasons for accessing housing services (see attached SHIP database report, Appendix A). Often Family Violence will be disclosed in the coming weeks rather than when a support period is first opened. Therefore this is a hidden reason that is not being noted when a client initially presents. There is no formal way to establish that a homelessness case has become a Family Violence matter. Updating SHIP to reflect this will improve recording of Family Violence cases.



Recommendation: The Housing Emergency Fund (HEF) budget needs to be increased to support clients who are experiencing Family Violence. New Transitional Housing THM's needs to be allocated for Family Violence, regardless of a women's income status.

A part of Housing Support work is to ask people to rely on their own networks i.e. family and friends. Economic abuse and social isolation however often means that women do not have these supports in place and workers are forced to rely more heavily on the extremely limited budgets for all homelessness clients and cannot prioritise those Family Violence clients.

Recommendation: More community visitors/volunteers need to be formally established to take the roles of aunts, mothers, and cousins when Family Violence has destroyed these relationships.

Very few women who are escaping ongoing Family Violence are either eligible for women's refuge, that is, they are not escaping IMMEDIATE danger, according to the CRAF assessment level 3. Often they feel they are not able to sever all ties with their local community and move to another area in the state. This means that the majority of women become a part of the larger homelessness community of clients as there is a lack of secure ongoing housing options.

Recommendation: Extending the type and range of refuges, crisis accommodation and housing options will improve women's access to the possibility of leaving their partner.

The whole population of middle income women are often precluded from accessing any form of housing support as their income is too high under Office of Housing Guidelines. We meet women who are listed on assets who have no access to them. These women are also isolated and do not have the usual supports of family and friends. Partner violence and damage contributes to women being unable to access a range of Office of Housing systems due to inherited debt.

Recommendation: Law reform commission could review legislation to enable there to be processes to repatriate partner accrued debt which would then support the process of establishing new tenancies.

The general cost of establishing the most basic tenancies (4 weeks bond, 4 weeks rent, removalist) is at least \$2,000 to 3,000. Those on Centrelink, who are living \$200 below the Henderson's Poverty line are usually unable to pull these resources together particularly whilst being traumatised and having a lack of support from the community due to isolation.

Recommendation: Provide increased funding to establish tenancies for women and children fleeing Family Violence.

2. Financial Counselling

Within the Macedon Ranges Shire, there is very little financial counselling available. As with other services, St. Luke's, an organisation largely based outside the region, will provide a satellite outpost on a needs bases when possible. This is not adequate and is difficult to arrange and access.

Recommendation: Increase access to Family Violence specific Financial Counselling

3. Case Management Support

Women and their children who have experienced Family Violence often need case management services after the initial crisis/survival period. Cobaw's services can provide support around particular issues such as Housing which can only be involved up to the point where the crisis has been resolved i.e. housing secured. Family Services are available for women with children and there is one part-time Centre for Non Violence worker available in the Macedon Ranges. There are however no other ongoing supports or case management options for women post the crisis period. It appears that there is acknowledgement by government and the community of the immediate effects of Family Violence however there is little recognition of the long term effects such as those associated with having to relocate, change schools, link in with new supports etc. This is evident in Family Violence support services being targeted almost exclusively to the crisis period (See attached newspaper article on one local woman's experience separating from her violent partner – Appendix B).

Recommendation: There is a need for wrap around services that respond to the needs of families that better reflect the longer terms needs of those who have experienced Family Violence.

4. Court Facilities

Rural and Regional courts such as the Kyneton Magistrate's Court cannot accommodate a separate place for women to go before and after a hearing to ensure they are protected from perpetrators. This means that women and their support workers if there are any, are vulnerable to abuse and intimidation from perpetrators thus making the process of applying for intervention orders even more difficult than it is when applying in larger courts.

Recommendation: A separate space needs to be provided that protects women and helps them feel safe when at court. Furthermore, there needs to be adequate security in smaller courts in regional and rural communities.

5. Access to Legal Support

Many women have had great difficulty accessing legal support, in many cases having to represent themselves in court, particularly in the Family Court. We have seen cases in which a male who has used violence has contacted every legal service in the area seeking support for himself, thus the services were then unable to support the woman on 'conflict of interests' grounds. This is viewed as a tactic of power/control.

Recommendation: A women's only legal service in the region is needed to ensure women have access to legal support.

6. Early Intervention and Screening

Many workers may be the only service involved with women or children who are experiencing Family Violence and often do not have the training to enable them to assess risk and adequately support or refer. Relationships of trust are often developed between, for example, allied health services who may use physical touch in their treatments with the client. Workers need to be adequately trained in identifying and responding appropriately to Family Violence and its consequences. We have found that Mental Health workers have a tendency to focus on the presenting symptoms and do not always apply a lens of systemic issues such as Family Violence.

General Practitioners, Maternal and Child Health Nurses, Allied Health Practitioners and Mental Health workers need training in the CRAF or something similar, not necessarily to use, but to hold in mind when responding to presenting issues.

Recommendation: When GP's are developing Mental Health plans, the focus is usually upon symptoms and is largely individual. A separate Medicare item for Family Violence services could enable GP's to support patients to access other services and would also provide better statistic around the prevalence of Family Violence. Medicare item numbers that could enable GP's to support women to access psychological support, case management or material support as Family Violence Priorities would also fit with the model of the Social Determinants of Health.

7. Data Collection

Data collection around the prevalence of Family Violence can be very difficult, but is made more difficult by recording measures. For instance, within Cobaw there are many different reporting data bases used depending on funding stream/body, which makes it very difficult to collect accurate data about Family Violence. SHIP, the database used by the Housing Team for example, records presenting issues at the time of assessment. If however, Family Violence is disclosed after assessment, it will not be captured as an issue. Similarly, Alcohol and other Drug reporting records issues around substances used but does not allow for other issues such as Family Violence to be recorded and captured.

Recommendation: Review of all DHHS reporting systems with the view to improving consistency of reporting on Family Violence as a presenting issue. This may be best done at point of closure of a service rather than, or as well as at assessment.

8. Legal Guardianship of Children After Separation

Our current legal system gives perpetrators further opportunity to control victims, including children, by refusing to provide consent to access to services such as counselling. Many women report frustration that services, such as counselling services or therapeutic group programs cannot agree to support children without consent of both parents. This has the potential to further impact on the safety of women.

Recommendation: Review the issue of legal guardianship in other jurisdictions including those in other countries such as the USA with the view to amend legislation in relation to legal guardianship of children.

9. Access to Men's Behaviour Change Programs

There is no Men's Behaviour Change (MBC) Program in the Macedon Ranges. Men have to either travel to Bendigo or Sunbury although for reasons unknown, the MBC program in Sunbury has not, in our experience, been contacting partners. We are therefore reluctant to refer Men to this program. For many men, particularly those living in the south of the shire, travelling to Bendigo is not an option.

Recommendation: The Macedon Ranges need funding for a MBC program within the shire. This needs to be able to operate at No To Violence standards and be funded adequately. Furthermore, we suggest that there could be great value in funding fathering programs for fathers who have been through MBC and have access to their children, those that are seeking greater access or would like access in the future.

10. Children's Family Violence Counselling

Cobaw has a small Children's Counselling and Group Work program that has been in operation for 2-3 years with support from the Centre for Non Violence. This program has been very successful and beneficial to the children involved however, there is a lack of state-wide coordination of children's counselling services and opportunities for networking to develop consistent best standards practice. There is inconsistent funding for children's counselling across regions leaving some children with little access to counselling support.

Recommendation: Fund state-wide Children's Family Violence Counselling coordination to ensure consistent best practice in Children's Family Violence Counselling across the state.

11. Workers Experiencing Family Violence

Women in the workplace are also experiencing Family Violence and often the pressure to hold down employment whilst dealing with the effects of Family Violence.

Recommendation: Review what more could be done at a legislative level or within employment awards and contracts to support people experiencing Family Violence, for example special Family Violence leave entitlements.

12. Police Response

Many women with whom we work report negative experiences when reporting Family Violence to the police. Police attitudes reflect broader community attitudes such as 'why won't she leave' or 'she'll just go back'. It seems that police responses vary greatly depending on which officer the report is made. Negative or dismissive attitudes by police can then deter women from making future reports. Women are also not always receiving accurate information from the police about their rights. In one recent example a woman was told that she could not make a report about past cases of Family Violence unless her very young children also made statements. It seems that the Special Police Family Violence Units within Victoria Police within our region are not seen as attractive within the police force and thus, officers rotate in and out of them which limits the ability for expertise to be developed in the area of responding to Family Violence.

Recommendation: Co-locate a Family Violence worker (non- police) within every 24 hour police station working collaboratively with police. This worker could sit with women whilst making statements and assist in the professional development of police. This could work to improve police culture and language use around issues of Family Violence.

13. Community Attitudes

Women often report great feelings of shame about experiencing Family Violence which can thus prevent them from seeking support and increase isolation, potentially increasing danger to herself and children.

Recommendation: Implement Family Violence ambassadors and bystander training to local sporting clubs, social clubs and major employers in the Macedon Ranges.

14. Supervised Access

There are no local Children's Contact Centre services within the Macedon Ranges. The closest service is Fairground in Bendigo has significant waiting lists. Women must also bear the cost of travel to transport their children to a contact centre; this being in Bendigo can impose significant time and cost pressure for women.

Recommendation: There is a need for an increase in funding for supervised access programs, particularly for the Macedon Ranges which does not currently have any services within our shire. These programs require highly trained staff who understand issues of power and control. Ideally, parenting education for fathers would be incorporated into these services.

15. Transport

Many women, particularly younger women, may not have a driving license making escaping Family Violence particularly problematic. We have seen cases where this significantly increases the risk to women and children experiencing Family Violence, particularly those in isolated areas characteristic of parts of our community.

Recommendations: Fund a program such as the L2P program which supports disadvantaged young women to get their license. This program recruits volunteer driving instructors who can also act as mentors. These instructors would need specific Family Violence training such as training in the CRAF.

Provide a bus service to take clients from the Macedon Ranges to Bendigo where many services are located such as the Centre for Non-Violence, Centrelink, tertiary study options, Anglicare and Salvation Army. Funding for travel on train or taxi vouchers would also help to address this issue.

16. Child Protection Practices

Cobaw Family Services program, Counselling program and other programs are often involved with families where Child Protection Services are also involved due to Family Violence. In our experience, it is often the case that Child Protection is not perpetrator focused, but rather puts the onus on women to remove themselves from the environment of Family Violence. We believe that Child Protection workers are often themselves intimidated by perpetrators and are not skilled enough to address issues of power inequities, thus placing the responsibility of a man's behaviour onto the women.

Recommendation: Enhance training for Child Protections Workers around issues of power and control and develop protocols around intervening in Families where Family Violence is an issue

17. Safety of Family Violence Workers

Family Violence Outreach Workers generally work alone, particularly in rural and regional settings. In Victoria, we have recently seen changes that require police officers to always operate in pairs. Family Violence Workers often experience abuse and aggression toward them in the course of their work. It is also not feasible that there be only one person available to work with a client in a crisis situation.

Recommendation: A minimum of 2 Family Violence Workers work together in court settings. This could allow for peer support and debriefing. In a crisis situation, it would also allow for two people to be available for crisis management. At a minimum, increased security services for women and workers is an immediate requirement.

18. Independent Children's Lawyers (ICL's)

Women and their support workers are not able to speak directly with ICL's, having to go through their lawyers to seek clarification on orders and recommendations. Furthermore, we have worked with families where the ICL has ordered counselling for the family or for the children but want the therapist to report back on sessions and progress. It is very difficult to find counsellors willing to take on clients where reporting back to an ICL is required. It is very difficult to establish a therapeutic relationship of trust when clients are aware that what they say will be reported back to the ICL.

Recommendation: In cases where ICL's recommend counselling that they are very clear and explicit with the family and the counsellor or what specific type of information they will be seeking from the counsellor prior to the work commencing. Mothers have the ability for some direct contact with ICL's in cases where they just need to seek clarity around for example, what required of them.

Thank you for the opportunity to contribute to the Royal Commission.

Yours faithfully,



Margaret McDonald
CEO
Cobaw Community Health Service

Attached: Appendix A
Appendix B
Case Study 1
Case Study 2
Case Study 3
Case Study 4
Case Study 5

Appendix A

Main Presenting Reason by Sex				
	Male	Female	Total	Percenta
Financial difficulties	10	18	28	14.60%
Housing affordability stress	11	15	26	13.50%
Housing crisis	21	23	44	22.90%
Inadequate or inappropriate dwelling conditions	6	10	16	8.30%
Previous accommodation ended	7	4	11	5.70%
Time out from family/other situation	0	1	1	0.50%
Relationship/family breakdown	11	20	31	16.10%
Sexual abuse	0	0	0	0.00%
Domestic and family violence	2	8	10	5.20%
Non-family violence	0	0	0	0.00%
Mental health issues	2	4	6	3.10%
Medical issues	1	0	1	0.50%
Problematic drug or substance use	2	2	4	2.10%
Problematic alcohol use	2	1	3	1.60%
Employment difficulties	0	0	0	0.00%
Unemployment	0	0	0	0.00%
Problematic gambling	0	0	0	0.00%
Transition from custodial arrangements	0	0	0	0.00%
Transition from foster care and child safety residential placements	0	0	0	0.00%
Transition from other care arrangements	1	1	2	1.00%
Discrimination including racial and sexual	0	0	0	0.00%
Itinerant	1	0	1	0.50%
Unable to return home due to environmental reasons	0	0	0	0.00%
Disengagement with school or other education and training	0	0	0	0.00%
Lack of family and/or community support	2	0	2	1.00%
Other	1	3	4	2.10%
Don't know	0	2	2	1.00%
<i>Missing</i>	0	0	0	-
Total	80	112	192	100%

Mr Star Weekly Smay

Impetus to anti-violence

By Matt Crossman

A Woodend woman who was abused by her former partner is urging people to write to the Royal Commission into family violence.

The commission, which will recommend how Victoria's responses can be improved, is accepting until May 29 submissions from people affected by family violence. Its report and recommendations are due for presentation to the state government by February next year.

Woodend's Belinda Spence said the commission was a great opportunity for the community to talk about the issue.

"It needs to be brought out in the open," she said. "There also needs to be more services for every victim, not just those who have drug and alcohol problems."

Ms Spence was traumatised by her former partner throughout their two-year relationship.

The man, who was much larger than her, regularly yelled at and cornered her. He also stopped her from socialising with family and friends and racked up large bills in her name.

The final straw came when the man, who has since died, brutally killed her daughter's cat.

"I ended up packing my things and doing a midnight flip when he was at work," Ms Spence said.

However, the hard road had only just begun, with overstretched support services turning her away because she did not also have a drug or alcohol problem.

"It's a real problem that, when you walk away, there's so few places to go," Ms Spence said. "As a state, we are behind a lot of others."

Almost two years' later, Ms Spence is still trying to rebuild her life. "Sadly, I'm far from being the only one," she says.

In March, *Star Weekly* reported that, on average, more than one family incident was



Senior Constable Leanne Wyatt, survivor Belinda Spence, Cobow chief executive Margaret McDonald, MP Mary-Anne Thomas and lawyer Bonnie Renou. (Joe Mastroianni)

made known to police every day in 2014. Meeting with Ms Spence and other family violence professionals last Thursday, Macedon Labor MP Mary-Anne Thomas said the problem was having catastrophic effects on the community.

"I urge anyone in our community who has

been affected by this issue and has insights to share, whether personally or through their work, to make a contribution," Ms Thomas said.

Ms Spence said the key to ending family violence was education. "And from a young age. As a society, we've got to make it absolutely clear that this is not appropriate."



Submission to the Royal Commission Into Family Violence Victoria

By Cobaw Community Health Service Ltd.

Case Study 1

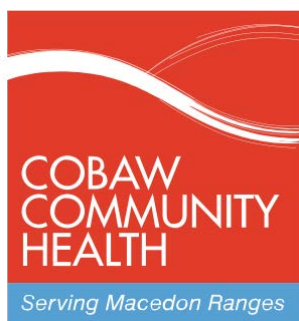
The following is a case study example highlighting how a perpetrator of family violence attempted, and at times succeeded, in using a range of systems to continue to exert power and control over a woman and her children.

The woman concerned left the violent relationship with 4 children after experiencing approximately 10 years of psychological, verbal, financial, social and physical abuse. The abuse has now continued for 10 years post separation taking many forms including threats to the woman's physical safety and threats to make the children "disappear". The man was able to use family law and legal systems and attempt to use the service support system to limit the woman's access to support, impede her power to make choices, disrupt her and the children's relationships and maintain a sense of fear. The following are examples of how he has been able to perpetrate family violence through the use of systems:

- As the custody/access and settlement proceedings commenced the woman struggled to obtain legal counsel. This was due to the father having contacted all except one of the private and community funded legal services in our region creating a conflict of interests meaning the woman was unable to access any of these legal supports. The woman now, after the man has again initiated family law proceedings, has engaged legal support through a legal firm located an hour's travel from her home.
- The man continues to initiate family law court proceedings to have the final parenting order reviewed thus using the legal system to harass the woman and destabilise the children. He has taken opportunities at the court house to find the woman alone and to threaten and verbally abuse her.
- The man has withheld the children on several access visits, leaving the woman to seek recovery orders on three separate occasions. The man has not been held accountable by the courts for this behaviour and the impact this has on the woman or the children. He is merely ordered to return the children thus he has continued to use withholding the children as means of maintaining the woman's fear for her children's safety and leaving her feeling that she and the system are powerless to prevent this occurring.
- The man has contacted local police on two occasions when the woman and her teenage daughter have argued about the child's school refusal. This has led to police attendance at the home and brief investigations. This further eroded the woman's sense of capacity and ability to parent her children.
- The man has been reported to coach and emotionally manipulate the children during access visitations. This has taken the form of undermining the woman's authority as a parent and questioning her love and care for the children. Since the court has ordered that visitation is supervised through a registered organisation this emotionally abusive behaviour has been witnessed and documented.

- The man has contacted our agency regularly through our Service Access team and sought information on the services and workers involved with the woman and the children, attempted to refer himself and the woman to programs without her consent and to express his view that the woman is unstable and an incompetent parent. Through the use of our client data systems and internal conversation an agency-wide alert and procedure was put in place to prevent the man using our services as a means of further asserting power and control over the woman and children.
- The man has also recently begun making reports to Child Protective Services about concerns he holds for the children. None of these notifications has warranted further action. The woman, the children's schools and our agency are contacted and required to explain the circumstances and context of family violence on each occasion. However, the man has not been contacted in relation to any of these reports and has not been questioned in regard to his accountability as a parent using family violence and the impact on his children.

This case highlights that there are process inherent within our legal, family law and service systems that unwittingly allow men to continue to perpetrate family violence against their ex-partners and children, through harassment and misplaced accountability. Appropriately placed accountability, shared knowledge and clearly documented communications/evidence appear to minimise the chances of perpetrators continuing to use power and control.



Submission to the Royal Commission Into Family Violence Victoria

By Cobaw Community Health Service Ltd.

Case Study 2

This case study relates to a child with a diagnosed disability who was accessing multiple supports and services such as Maternal and Child Health, Paediatrician, Royal children's Hospital, social workers etc. Cobaw Children's Services Practitioners were working with the parent(s) in the family home.

The mother disclosed Family Violence to the Cobaw practitioner. She outlined the history and said that she had sought help from other agencies such as the police, the Centre for Non Violence and a Cobaw Counsellor. The mother could not access additional support services as she was focused on the needs of her child. Seeking support for herself meant extra appointments and increased her stress levels and risk of violence in the home. The Mother's heightened anxiety impacted on the relationship with the Cobaw practitioner. The father was often present when the practitioner was conducting the home visits and the practitioner was blocked from giving the father any information about his child's development. The mother made the practitioner feel uncomfortable when she explained things to the father, the mother would say he was doing it wrong. The situation escalated a number of times with the police becoming involved at the request of both the mother and the father. The mother handed a secret note to the practitioner to explain she felt unsafe and was going to leave.

The impact on the practitioner was stress, concern for the child and mother and feeling unsafe visiting the home alone. This caused greater stress to the family as, for safety reasons, two practitioners would visit instead of one. This put significant pressure on resources of an already stretched service organisation. Further to this, additional supervision and peer support resources were needed to support the practitioner. Additional professional development was also needed for the Cobaw the staff member.

After 10 months of service, the mother left the family home with her child, creating difficulties linking the client into new services as the move was sudden and to a new area. This meant the client would have had a lag in linking into disability support service provision for her child in the critical early years. The usual transfer processes were not able to be followed because of the suddenness of the move due to the risks involved.

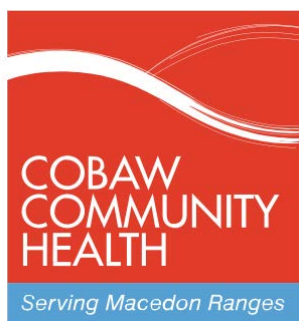
Ongoing professional support was needed for the Cobaw practitioner and the team who do not specialise in family violence.

This case study highlights a number of not uncommon issues which impacts upon Cobaw's ability to deliver effective services to clients as a result of Family Violence. A large part of the therapist's role is to work with parents and carers so that they can implement therapies and strategies on a day to day basis in the home. Clearly, this will be most effective when parents are able to focus on these needs as a priority. The impact of Family Violence in this situation meant that the parents were not as capable of providing consistent and clear interventions, thus impacting on the child's development.

Due to the need to escape Family Violence, the therapy that Cobaw was providing ceased suddenly which meant no service transition plan was in place. This meant that the child had no services in place when moving.



Furthermore, the extra strain on the resources of Cobaw Community Health due to Family Violence was significant, as was that on the worker involved. Where the risk to a worker is too high, some clients will not be able to receive home visits, thus again reducing our ability to support women and children around the issues for which they were originally referred.



Submission to the Royal Commission Into Family Violence Victoria

By Cobaw Community Health Service Ltd.

Case Study 3

This case study is written by a Cobaw Community Health practitioner and details the preventative nature of group work with very young children who have experienced Family Violence:

I write in the capacity of the Children's Individual and Group Counsellor for children aged 0-18 who have experienced Family Violence in the Macedon Ranges Shire. Prior to April 2014 I developed and ran the philanthropically funded Play Connect* Family Violence program, which worked on an individual and group basis with women and children under five who have experienced family violence.

Each term I run a group for children under five with their mothers who have experienced family violence. These groups are arts and play-based and focus on therapeutic interventions that enhance attunement. In the 0-5 groups I witness difficult power dynamics where the mother feels she has little power and their children will chose their mother's musical instrument, paint brush, food and seat. Conversely I witness the opposite, where children have no power or freedom of expression. I have spent time with many families where children believe they have created the violence and mothers experience debilitating guilt at their children's trauma and are unable to support their children to develop a healthy understanding of their experiences. In one group I met a mother of a very new infant who read her baby's very normal startle reflex as a trauma response to the violence she experienced in utero, therefore defined her child by her experience of violence. All of these experiences and many more are all very normal responses to the abuse of power and control. With support and gentle challenging a group space can be created within these relationships where a new understanding of self and other is possible. Women who become more attuned to their children's needs develop a greater capacity to protect their children from further experiences of violence. Children who feel they are safe and will be heard can develop greater confidence in themselves and their adult relationships.

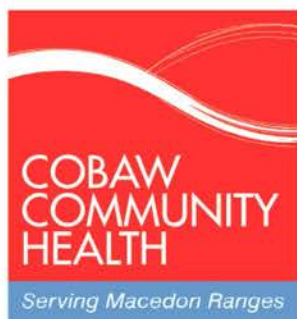
There is so much potential for skilled professionals to have a positive influence on relationship dynamics where the children have experienced Family Violence. Best Practice programs such as the Royal Children's Hospital's Peekaboo and Dads on Board programs and the Play Connect program did not receive ongoing government funding.

Recommendation:

Group programs for very young children who have experienced Family Violence can make a significant impact on generational cycles of violence. Statewide ongoing funding is required to ensure skilled professionals are engaged to deliver specialised therapeutic groups for very young children and their parents.

**There are two similarly named programs – Play Connect, the Family Violence program and PlayConnect, a group program for children who have autism. Play Connect was largely funded by the William Buckland Foundation and auspiced by the Loddon Mallee Homelessness Network (LOMA).*





Submission to the Royal Commission Into Family Violence Victoria

By Cobaw Community Health Service Ltd.

Case Study 4

This case study is written by Julie Sutcliffe, AOD/General Counsellor at Cobaw

(Client's name has been changed for confidentiality)

George is a 33 year old male who was referred to me for alcohol and other drug counselling in [REDACTED] 2014. He was a polydrug user who had enacted family violence towards his partner when under the influence of alcohol. George was facing legal charges related to breaching an intervention order in relation to the violence at this time. George had a long history of alcohol related offences and more than one driving offence whilst under the influence of alcohol. He had no previous experience of counselling for his substance use and/or addressing underlying psychosocial issues. He had poor insight into his behaviours and the consequences of them and had demonstrated little impulse control and capacity to manage distress.

George expressed remorse for his violent behaviour and damage to property. He identified that there was a direct connection between alcohol use and his offending behaviour. He identified early in our work together that an important priority for him was to be a good father to his 3 year old [REDACTED] who he currently lives with along with his partner.

Outcome of court proceedings –

Community based order – 100 hours of community work (Completed)
Attend Men's Behaviour Change group (14 weeks)
Continues to engage in AOD Counseling
Regular reporting to corrections officer (until Sep 2015)
Agreed to engage in 'Cool Heads' and meet with victims of road trauma (still to occur)

Currently George is still attending counselling with the writer as a forensic client. He has also been concurrently attending Men's Behaviour Change group regularly. He states he has a beneficial relationship with his corrections officer in that he feels supported. He has completed his community based order and described it as beneficial and meaningful to him. The placement was at a [REDACTED] and matched his interests well, gave him some responsibility and has led to some part time work which he really enjoys.

With George's consent, the writer met with his partner to enquire about her current experience of living in a relationship with him. George's partner describes the following:

- He is a more responsive and active parent with their 3 year old [REDACTED]
- Has had no angry or violent outbursts in last few months
- He initiates discussions about how he's feeling and enquires about her needs for the first time in the [REDACTED] years she has known him
- She feels safe with him and states his reduced alcohol use and non-angry behaviour have contributed to this



George and I meet fortnightly for counselling and at this time have had [REDACTED] sessions since he appeared and was sentenced in court.

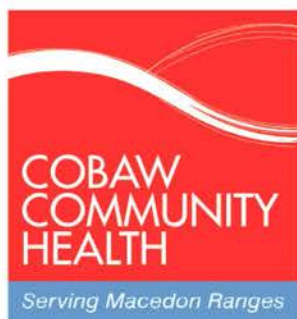
The writer has observed some significant changes in George's behaviours:

- Greater insight into the impact of his past behaviour and identification of regret. He has apologised to his partner and parents
- Improvement in managing his health and wellbeing
- Developing insight and improved self-awareness regarding underlying issues about alcohol abuse and angry, violent behaviour
- Speaks about raising issues for discussion and speaking more with his partner and others with more assertiveness – that is, identifying and expressing his needs, rather than suppressing them and then 'blowing up'

Final notes:

This case study has been presented because the writer believes and has observed that some success of George's story relate to a comprehensive assessment by his corrections officer which identified goals and initiation of tasks which have met his and his family's needs.

When assessed by the courts he was supported by a corrections officer who took the approach of putting appropriate services in place which treated George's needs as a 'whole person'. The combinations of attending Men's Behaviour Change, ongoing counselling, a supportive and insightful corrections officer and George's willingness and readiness to change, have contributed to a meaningful and improved outcome for both George, his partner and his [REDACTED]. George has also stated to the writer that he's looking forward to undertaking the 'Cool Heads' forum later this year.



Submission to the Royal Commission Into Family Violence Victoria

By Cobaw Community Health Service Ltd.

Case Study 5

This case study is written by Julie Sutcliffe, AOD/General Counsellor at Cobaw

(Names have been changed for confidentiality)

Jane is a 54 year old woman who was referred to me for family violence counselling and support in [REDACTED] 2014. Jane resided at that time in an isolated farm property outside of [REDACTED] with her 14 year old daughter Sarah, who has a developmental disability, and her husband Ben. Jane related that she had experienced 28 years of emotional, psychological and mental abuse from Ben, with occasional physical violence and constant threatening and intimidating behaviour. He has in the past threatened to kill her if she leaves him. Jane also reported that Ben is alcohol dependent, becomes progressively more abusive on a daily basis as his alcohol consumption increases, until he finally falls asleep in the evening, when she and Sarah can then relax to some extent.

Jane and Sarah both had chronic health issues which Jane was in the process of addressing, often needing to attend [REDACTED] hospital for Sarah. Jane was about to undertake [REDACTED] surgery for a chronic [REDACTED] injury when I first met with her. Jane had local part-time work with an employer who was supportive of some of her needs. When she was unable to attend work for her or Sarah's health and wellbeing needs, she was able to re-schedule her work for another time.

As a self-referred client Jane was able to be provided some wrap around service by Cobaw Community Health Services. Jane met with the Centre for Non-Violence (CNV) worker (based at Cobaw) and having completed a family violence checklist, identified that she has been living in a progressively disempowered state with Ben. She accessed counselling with the writer, was provided a housing worker to assist in a limited way with potential crisis housing needs (minor financial assistance). Her daughter Sarah was also able to access youth counselling at Cobaw. For around 4-6 months she and Sarah accessed support through Cobaw and CNV.

Jane is a resourceful woman, in spite of years of family violence, which by its nature often impacts on the capacity for self-efficacy. She has managed to maintain close relationships with some family and friends who she states are supportive of her and Sarah.

When Jane first met with the writer she was preparing to leave the marriage and home. She'd been stockpiling personal effects of the shared property, trying to accumulate some money for resettlement and their family home was on the market, pending sale. There was a tension between the need to leave (and how swiftly this may need to happen) for safety, and caring for the home, belongings, animals and pets.

A couple of weeks after initial meetings with the writer and CNV worker, Jane reported that Ben's violent behaviour was escalating. He was verbally threatening her and Sarah's lives and Jane reported that he had physically assaulted Sarah in a recent incident. At this time Sarah was meeting with a youth counsellor, who detailed assault and reported the incident to Child Protection Services. Following this, an interim intervention order was sought. Jane was advised by DHS and the CNV worker that she needed to make a statement to the police regarding the current and historic violence. CNV organised an appointment with the local police for Jane to make a statement. Sexual offence and child abuse unit (SOCAU) were meant to take her statement at one of the two 24 hour police stations in



our region. When Jane arrived at the police station she was turned away. The other 24 hour police station in the region realised what had happened and they were unable to follow up that day or night. The police then asked CNV to arrange to take Jane to the Magistrate's Court the next day to arrange an interim IVO. Ideally this would have been initiated by the police 24 hours earlier. There was then a crucial 24 hour period where the police did not do what they needed to do and this increased Jane's fear, confusion and risk due to the perpetrator not being held accountable for this period of time.

Some barriers and obstacles to Jane and Sarah leaving and relocating safely:

- Re-housing pets and animals safely – horses, cattle, dogs.
- Having no-one to stay with immediately – no emergency or crisis accommodation being available except for a motel in the local area
- One systemic response is to have the perpetrator removed from the home. This is often not the safest option in rural communities. Due to isolation, police response times and often ready access to weapons, the risk was assessed as too high for Jane and Sarah to remain in the home.
- Initially Jane minimised the history and severity of the violence
- Difficulty finding affordable housing – tension between remaining in local area for access to school and work requirements and existing social supports and the need to consider geographic change for safety
- Marital property located between two regional police stations and not clearly in jurisdiction of one or other of them.
- Because DHS notification was pending, onus was placed on Jane to act protectively and navigate the justice system whilst under extreme duress

Recommendations:

- **Police station first informed of issues should carry responsibility of organising and arranging legal requirements. Police initiated responses such as application for intervention order takes the responsibility and blame away from the woman. If Ben had contested the interim IVO, Jane may also have been required to fund a private lawyer to finalize the protection.**
- **More crisis housing in this local area (not just in region)**
- **Each 24 hour police station has a dedicated FV liaison officer that service providers can refer clients to**