

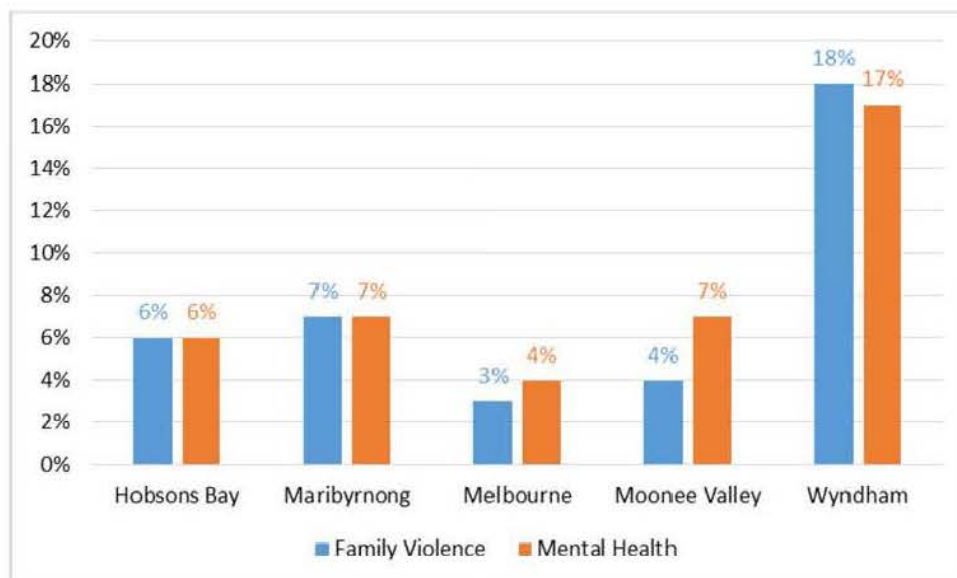
Submission to The Royal Commission into Family Violence

To the Royal Commissioners

The Western Melbourne Child and Family Services Alliance (The Alliance) represents Integrated Family Service Agencies (IFS), Anglicare Victoria, Bapcare, Caroline Chisholm Society, CatholicCare, cohealth, ISIS Primary Care, MacKillop Family Services, VACCA, Child FIRST, Child Protection and the five Local Government Councils across Western Melbourne. They include Melbourne, Moonee Valley, (as family service providers) and Maribyrnong, Hobsons Bay and Wyndham (as non-voting members). The Alliance affirms that every child has the right to feel safe, live in a safe environment and be protected from neglect and abuse (as enshrined in the UN Convention on the Rights of the Child).

There is strong evidence to suggest that Family Violence is having a significant impact on our local community. Children and young people exposed to Family Violence make up a high proportion of Child Protection reports in Western Melbourne. The DHHS Child and Family Alliance Catchment Report for Western Melbourne for 2014-15 identified that Family Violence was one of the top two issues facing families working with Family Services across all five local government areas in The Alliance. For Wyndham, Family Violence is the number one call out for Police.

The following table shows the top two issues by Category and by LGA in Western Melbourne of Client- Child FIRST:



The Alliance operates in alignment with the Best Interests Framework. The Framework is rights based and child focused. The Best Interests Framework considers three dimensions of

Western Melbourne Child & Family Services Alliance

a child's experience- their safety, stability and development- taking into account their age, stage, culture and gender. Alliance professionals engage with the child, young person and family in culturally respectful and helpful ways; the child and young person is entitled to develop safely, enjoy wellbeing and have a voice. The best interests of the child are paramount. Family violence assessments completed within our programs are holistic and safety from Family Violence is considered within the context of the overall needs of the unborn child, infant, child or young person.

Trauma theory is a key consideration in our Best Interests assessment, planning and intervention with children, young people and families. Children and young people who are affected by family violence are especially vulnerable to trauma including:

- Death or injury as a result of assault or as an indirect consequence of an assault against a mother;
- Children and young people may also witness family violence which can involve directly viewing incidents or being aware in a range of ways of the violence occurring. It is therefore impossible for children to feel safe when they know that their mother is in danger;
- Significant trauma and cumulative harm are at high risk or suffering psychological and emotional trauma;
- Disrupted attachment, and
- Disrupted development.

Children exposed to Family Violence experience a range of emotional responses to their feelings including anger, sadness, shame, guilt, confusion, helplessness and/or despair. Children often find these feelings hard to talk about and experience low self-esteem and low self-confidence, which might be shown by not wanting to try new things. Play based activities as part of our intervention with children is one of the easiest and safest ways for children to express how they are feeling. Play can help them to develop their self-confidence and work through their uncertainties. The capacity of parents and families to effectively care, protect and provide for the long term development and wellbeing of children is limited by Family Violence. In the short term this can impact on the parent's capacity to play, interact and engage with their children. In the long term, it can have an effect on the child's overall development and wellbeing. Specialised programs that work with children and young people impacted by Family Violence are necessary to ensure the focus of intervention moves beyond the scope of the parent or the crisis and the children are not overlooked.

Family relationships are complex and patterns of violence are cyclical. The importance of understanding the effects of cumulative patterns of harm are given prominence in the Best Interests Principles and are considered in any decision making or action taken by Family Services where Family Violence is involved. Cumulative harm refers to the effects of patterns of circumstances and events in a child's life which diminish a child's sense of safety, stability and wellbeing; experiences that are compounded after multiple episodes of abuse or neglect. The chronic daily impact of Family Violence on the child or young person over critical developmental periods can have a significant influence across multiple dimensions of the child's life. For example older children and adolescents experiencing Family Violence (at a time when the maturation process is beginning) can be impacted directly as they grapple with models of behaviour and gender issues. In particular the concern may be that vulnerable young people begin to behave with violence in consequence of being exposed to it.

Western Melbourne Child & Family Services Alliance

Victim safety (most commonly the safety of women and children) is a critical concern for all Family Violence intervention programs. Family Services caseworkers assist women and children by conducting risk assessments, developing safety plans, supporting parents to work with the police and courts where necessary to remove a perpetrator from the home and providing support and advocacy to parents applying for protection orders or during family court proceedings. Many Family Violence specific services advocate for women and children to remain safely in the home and have the violent partner leave due to limited options for affordable housing and homelessness, often for good reason. However one of the unique aspects of the family services sector is that we provide support to women, children and young people who are still in a relationship with the perpetrator. This is principally because both partners still wish to remain together. Our fundamental aspiration is repair and recovery for those involved in Family Violence, but not at the expense of compromised safety to family members. We seek communities that are safe and free from violence, respectful family relationships and services that meet the needs of victims. We do not compromise on the physical and emotional standards of safety that all children and young people have a right to experience; we want perpetrators to stop their violence. We believe that Family Violence can be reduced and therefore its impact can be reduced. The safety of victims is paramount and can be optimised through a range of interventions, accountability measures and education strategies. It is important to acknowledge that quite often victims need to understand why Family Violence occurs and the risk factors associated with Family Violence before they can make an informed choice to leave a violent relationship. Separation and pregnancy are particularly vulnerable times for women and they often choose to stay with the perpetrator because they are financially dependent or have so much invested in raising the child. Supporting women and children to stay in their own home where it is safe to do so, to prevent homelessness and provide stability.

There are tensions and dilemmas involved in working with women who are still in a relationship with the perpetrator. However, options that are rigid and inflexible do not work for complex families. By working solely to encourage women to seek protection orders we risk losing genuine engagement with a victim and the perpetrator may still remain in the home. Instead of increasing safety, an unintended consequence is that we may decrease safety as we no longer have the trust and information necessary to properly intervene and provide support. Appropriate systemic responses to Family Violence must include community education about social norms that perpetuate violence, promotion of positive behaviours and respectful relationships for men and women in order to engage women who are still in a relationship with a perpetrator and rehabilitate perpetrators themselves.

Consideration also needs to be given to the implications of working with women who are still in a violent relationship to ensure the safety of workers who are supporting children, young people and families in the home environment. How can we more effectively and safely support women and children who remain in the home? We must consider the support and training requirements of staff who may be undertaking risk assessments in the home. The Common Risk Assessment Framework (CRAF) training has been successful in providing workers with information to help them identify Family Violence however further training is required to embed an options and intervention framework into common practice.

As well as investing in specialist services it is important that a range of services work in collaboration to respond to the needs of women and children who are experiencing Family Violence. Some of the models that are working well in terms of collaboration are the RAMPs, Think Child Working Group and the Child & Family Services Alliances. New approaches to build on these successes could be well co-ordinated and well-resourced. Multi-disciplinary

alliances, embedded locally and with enough flexibility to provide the most appropriate support to families experiencing Family Violence are required. These collaborations need to have a broad approach, be flexible and have the ability to respond to the many diverse needs of families experiencing complex issues.

It is increasingly recognised that an effective response to the prevalence of Family Violence and its overwhelming impact on its victims, must occur at multiple levels – Commonwealth and State/Territory governments, the criminal and civil justice systems, the family law system, the non-government and private sector, community organisations and services, and within families and individuals. We seek coordinated, appropriate, consistent responses aimed at enhancing victim safety, reducing the barriers for victims at risk or experiencing violence and holding perpetrators accountable for their violence. The Alliance advocates for the acknowledgement and resolution of tensions associated in working with women who remain in a violent relationship. We would like to acknowledge real-life issues and the complexity and cyclical nature of relationships affected by Family Violence; rigid and inflexible options do not work with complex families. Violence can be reduced at a primary, secondary and tertiary level and children should be at the centre of all decision making to ensure their rights to feel safe, live in a safe environment and be protected from abuse and neglect are upheld.

Recommendations:

1. Interventions provided by Child FIRST and Integrated Family Support (IFS) agencies that focus on supporting children, young people and families living with family violence need to be recognised as critical in the support, education and safety for families and these types of outreach interventions into people's homes should be funded and strengthened within the current service sector, with particular regard to ensure that services are able to allocate resources to adequately engage, respond and address complex family issues associated with Family Violence. Specifically there should more intensive and/or increased lengths of time allocated to these families.
2. Specialist workers/therapists with Family Violence experience should be embedded within IFS and Child FIRST teams focussing on children and young people and their short and long term needs. These workers should be prepared to work alongside Family Support workers within family units where the perpetrator has not left the family, providing specialist expertise and strategies to manage this issue.
3. Best practice models of working more systematically with family violence that protect victims AND hold perpetrators accountable for their behaviour need to be more clearly articulated and resourced, particularly where this work is undertaken concurrently.
4. That the issue of administration around IVOs is considered by the Commission, in particular the issue of lag in time from when the IVO is made and serving the order on perpetrators. Currently the IVO is not activated until the order has been served, which places children, young people and women at risk if orders cannot be served.
5. That the system to manage breaches of IVOs is considered and the police given more resources to manage this growing area.

Western Melbourne
Child & Family
Services Alliance

6. Post-violence support for mothers so they can deal with the trauma and parent more effectively. Groups facilitated by IFS that support mothers to deal with child and adolescent angst are very effective post violence but they are resource intensive.
7. The Common Risk Assessment Framework (CRAF) training has been successful in providing workers with information to help them identify Family Violence this should be offered to all community sector professionals.

The Alliance values the opportunity to contribute to the Royal Commission into Family Violence and thanks you for your consideration of our Submission.

Yours sincerely,



Claire Nyblom
Chair, Western Melbourne Child and Family Services Alliance
On behalf of the Western Melbourne Child and Family Services Alliance