

**House of Representatives Standing Committee on**

**Social Policy and Legal Affairs**

**Inquiry into family, domestic and sexual violence**

**Submission**

**July 2020**

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The MAV is the statutory peak body for local government in Victoria. The MAV would like to acknowledge the contribution of the 24 councils who responded to our request for their comments and advice during this project. While this submission aims to broadly reflect the views of local government in Victoria, it does not purport to reflect the exact views of individual councils.

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# Acknowledgements

The MAV acknowledges Aboriginal and Torres Strait Islander peoples as the traditional custodians of the land, and we offer our respects to their Elders past, present and emerging.

The MAV appreciates the examples and feedback provided by councils who were able to review the draft submission.

# Executive summary

Violence against women and all forms of gender-based violence can be prevented. As a seriously complex public health problem, prevention will necessarily take an equally complex whole-of-community approach. The problem needs to be tackled from many sides and responses need to be nuanced.

The Municipal Association of Victoria (MAV) welcomes the opportunity to provide feedback and to make recommendations on how the response to the wicked problem of family, domestic and sexual violence can be improved to meet the needs of all Australian women and families.

These recommendations arise from the collective experience of, and lessons learnt by, Victorian councils working for over a decade to prevent violence against women and to promote gender equality.

**The role of the MAV**

The MAV is the peak representative and advocacy body for Victoria's 79 councils. The MAV was formed in 1879 and the *Municipal Association Act 1907* appointed the MAV the official voice of local government in Victoria.

Today, the MAV is a driving and influential force behind a strong and strategically positioned local government sector. Our role is to represent and advocate for the interests of local government; raise the sector's profile; ensure its long-term security; facilitate effective networks; deliver capacity building programs; support councillors; offer policy and strategic advice; and provide insurance services to local government.

We do all this across the gamut of local government focus areas, from procurement and communications to human services including preventing violence against women and promoting gender equality.

**Primary prevention**

In 2011 the Victorian government funded the MAV to deliver the Local Government Prevention of Violence Against Women (PVAW) Project for an initial two years. This funding has continued year by year to the present day enabling the MAV to employ a dedicated PVAW Policy Adviser.[[1]](#footnote-2)

The MAV and the PVAW Policy Adviser play an essential role in facilitating Victorian local government engagement in PVAW and promoting gender equality by:

* Coordinating information exchange and knowledge transfer between councils across Victoria; and between councils and other agencies, including Commonwealth and state/territory governments, non-government and community organisations.
* Connecting council officers working in PVAW and gender equality, providing opportunities to share experiences and for peer support.
* Acting as a critical friend or sounding board for council officers to test new ideas, learn from the past and explore options that best fit their local context thereby improving efficiency and effectiveness of local government PVAW and gender equality work.[[2]](#footnote-3)
* Advocating to ensure local government is best positioned to undertake PVAW and gender equality work, and to ensure that state government initiatives are responsive and understanding of the needs of local government.
* Sharing the Victorian experience with other local government state associations and our national peak, the Australian Local Government Association (ALGA).

Without this central role, it is unlikely that the [MAV Promoting Gender Equity Prevention of Violence Against Women Leadership Statement](https://www.mav.asn.au/__data/assets/pdf_file/0013/7240/Prevention-of-violence-against-women-leadership-statement.pdf) would have been developed and adopted by MAV in 2012. Nor would the Victorian local government PVAW and gender equality work have progressed as far and as fast as it has – from one council having a stand-alone PVAW strategy in 2007 to 23 councils in 2015, to 30 in 2018.[[3]](#footnote-4), [[4]](#footnote-5)

**Early intervention and response**

In addition to this dedicated prevention role, the MAV has a [Memorandum of Understanding](http://www.mav.asn.au/__data/assets/pdf_file/0013/23233/MCH-MOU-DET-MAV-2017-2020-signed-1-May-2017.pdf) with the Victorian Department of Education and Training which guides the partnership between state and local government for the planning, funding and provision of Maternal and Child Health (MCH) services.   The MAV also has a [Partnership Agreement with Department of Health and Human Services](http://www.mav.asn.au/__data/assets/pdf_file/0014/22037/Partnership-Agreement-between-the-Department-of-Health-and-Human-Services-and-the-Municipal-Association-of-Victoria-2018-2023.PDF) that includes our shared interest in family violence prevention. Since the recommendations from the Victorian Royal Commission into Family Violence were handed down, the MAV has facilitated the implementation of some of the cornerstones of the Victorian family violence reforms – a common risk assessment framework and information sharing protocols.

**The role of local government**

As the level of government closest to the people, local government is in a unique position to effect change.

Victorian councils:

* **Lead** by ‘walking the talk’, implementing organisational change to prevent violence against women and advance gender equality within their workplace and their communities, thereby setting an example to others
* **Deliver** a wide range of services and programs in different settings, which create opportunities to connect with and support people of all ages and situations
* **Fund** community-led events and projects through community grant schemes
* **Advocate** for the necessary behavioural and social change to advance gender equality and prevent violence against women – and for the resources required to achieve this.

**Primary prevention**

The position of councils as pivotal players in prevention efforts is recognised in Victoria through the [Building from Strength: 10-year Industry Plan for Family Violence Prevention and Response](https://www.vic.gov.au/centre-workforce-excellence).

At the national level, the role of councils is articulated in Change the Story, the national prevention framework developed by Our Watch and through the Department of Social Services’ investment in the development of a [local government toolkit](https://handbook.ourwatch.org.au/localgovtoolkit/). While the generic nature of this toolkit makes it accessible to councils and other organisations starting out on their PVAW journey, there is an opportunity to further tailor the toolkit and resources to reflect the unique role of local government in primary prevention.

With appropriate resourcing, state associations like the MAV are well placed to lead this work as they provide a cost- and time-effective way to connect with councils across the country, particularly small, rural and remote councils. For example, the MAV’s [Promising Practice Portal](https://www.mav.asn.au/what-we-do/policy-advocacy/social-community/gender-equality/promising-practice-portal) is an information hub through which councils can share their work and learn from others.

**Early intervention and response**

Ninety-four per cent of Victorian councils directly deliver MCH services (74 out of 79 councils). MCH follow up on every birth notification which means they can potentially connect with every family in their local government area (assuming the birth is registered); which provides the opportunity for women with young children to disclose experiences of domestic and family violence to a trusted health professional.

Through MCH services, councils are leading the rollout of key Victorian family violence service system reforms, namely the Multi-Agency Risk Assessment and Management Framework (MARAM), the Family Violence Information Sharing Scheme (FVISS) and the Child Information Sharing Scheme reforms (CISS). MARAM offers an opportunity for councils to review organisational policies, processes and capabilities and data retention systems in order to improve responses to family violence and child protection.

**Guiding principles and method**

**Intersectionality and social privilege**

People are multi-dimensional; and the groups listed in issue h) are not homogenous, namely Aboriginal and Torres Strait Islander women, rural women, culturally and linguistically diverse women, LGBTIQ people, women with a disability, and women on temporary visas.

Rather than just listing different ‘at risk’ groups there needs to be a focus through all prevention and response efforts on intersectionality and social privilege. Policy writers, legislators, academics, practitioners – anyone working in the sector - need to think about and respond to the compounding effects of multiple risks and forms of disadvantage, inclusion and exclusion. They / we also need to understand the insidious impact of unearned advantage based on race, age, gender identity, culture, sexuality, etc.

There also needs to be concurrent understanding that while the ‘at risk’ framing may be based on evidence (data or experience); it is determined by people in power and may not be the way communities and groups would describe themselves. Those in power must recognise that factors that might increase risk, can also be a source of strength and resilience.

**Community development principles**

Community development is a process where community members are supported by organisations to identify and take collective action on issues that are important to them.

The best way to mobilise our communities to work with government and other organisations to address wicked problems like gender inequality, family, domestic and sexual violence is to apply the community development principles of empowerment, human rights, inclusion, social justice, self-determination and collective action.[[5]](#footnote-6)

**Action learning approach**

Action learning is an approach to problem solving. It involves taking action and reflecting on the results. When acting to prevent violence against women and promote gender equality, this approach needs to be tempered with the principle of ‘do no harm’.

Many councils working to prevent violence against women and promote gender equality apply this approach. We believe this is the fifth national inquiry into domestic and family violence. We therefore recommend that the federal government will similarly apply this cumulative learning to the development of the next National Plan and accompanying Evaluation Plan and action plans.

**Terminology**

We have used:

* ‘Primary prevention’ to mean preventing violence before it occurs.
* ‘LGBTIQ people’ as a more accurate term than ‘LGBTQI women’ because people who are born intersex (the I in the acronym) and people who identify as queer or questioning (the Q in the acronym) may not identify as women (or men). As noted in l), we are advocating for a more inclusive definition of gender and for the next National Plan to apply the principles of intersectionality as we have tried to do with this submission. The Victorian government-funded [*Pride in Prevention: A guide to primary prevention of family violence experienced by LGBTIQ communities*](https://rainbowhealthvic.org.au/news/launch-pride-in-prevention-evidence-guide), provides a strong rationale for taking this approach.

# MAV Recommendations

1. Use and leverage the breadth and depth of engagement that councils already have with their communities as civic leaders, service providers and workplaces to deliver contextualised, appropriate, and sustained action across the spectrum of prevention, early intervention and response.
2. Provide sustained resourcing (funding, tools and training opportunities) to local government who have the networks and existing engagement to work with communities across the life-course in primary prevention, early intervention and response (e.g. three-year funding compared to one year) to ensure the councils are able to commit, plan and invest.
3. Listen to and learn from existing reform processes (such as in Victoria), including the 10+ years of experience and expertise of Victorian councils working in primary prevention, early intervention and response across the life-course of their community members.
4. Support coordination and capacity building for the local government sector, e.g. through the relevant State Local Government Associations and the national peak body, the Australian Local Government Association. This could include resourcing to lead the roll out and enhancement of the Prevention Toolkit for Local Government.
5. Invest for the life of the next National Plan in:
6. Stronger collaboration at local government area level between all partner agencies and across sectors.
7. Better coordination of effort between levels of government, across the response and prevention parts of the sector and between sectors (e.g. Cross-sector collaboration between disability and family violence response sectors).
8. Evidence-based, nuanced and inclusive policy responses to preventing violence against women and improving gender equality.
9. In the next National Plan and associated Evaluation Plan, define ‘accessibility’ as ‘approachable, acceptable, appropriate, affordable, and available’ and support organisations to understand and use this broader definition.
10. When developing the next National Plan give consideration as to how the universal nature of council services such as MCH, libraries, animal management and customer services can be used to respond to family violence in ways that reduce barriers experienced by women wanting to leave a violent situation. Provide support to expand capacity of these roles and other universal services and to assist with access referral pathways for community members and clients.
11. An intersectional lens should be applied by those involved in developing:
12. the next National Plan and associated Evaluation Plan in order to fully understand and respond to what impacts a woman’s and/or LGBTIQ’s person’s ability to escape domestic and family violence.
13. Commonwealth policies, services, communications, grant programs, service funding etc.
14. The next National Plan should place greater emphasis on the planning and provision of appropriate legal and social support including emergency accommodation and social housing for victim survivors, in their local community where appropriate.
15. Invest in targeted media campaigns that build awareness of the different types of family violence (i.e. elder abuse, carer abuse, young person to parent abuse and abuse within kinship relationships), and in resources that reinforce messaging and facilitate conversations, including through local government networks.
16. As actions under the next National Plan, advocate for the Australian Bureau of Statistics to:
17. Update their standard for sex and gender variables as outlined in this submission
18. Take the lead in developing an agreed standard for sexuality variables[[6]](#footnote-7)
19. Invest in and align data collection frameworks and methods across local, state/territory and Commonwealth governments. This includes supporting the application of the revised National Data Collection and Reporting Framework, including the involvement of representatives from different cohorts in the evaluation and revision.
20. Those involved in planning for the next National Plan and associated Evaluation Plan need to recruit a representative group of people to oversee development who should:
21. Recognise that factors that might increase risk, can also be a source of strength and resilience.
22. Apply an intersectional lens and a privilege lens – to think about and respond to the compounding effects of multiple risks and forms of disadvantage, inclusion and exclusion; and to identify and take steps to rectify the impact of unearned advantage based on race, age, gender identity etc.
23. Co-design consultation and communication plans with more representatives from each at risk group and listen to different voices within each group to understand what they need and how they think their needs could be met.
24. Those involved in planning for and responding to emergencies and natural disasters need to include, as part of standard community messaging, more explicit information about family violence at the time of disaster for all cohorts.
25. Review emergency management frameworks, planning and responses, including local government’s role, to increase accountability, gender responsive policies and practices. This review could draw on local government’s ability to contribute to effective and tailored responses through both universal and tailored services and messaging.
26. Ensure the purpose and scope of any audit leads to improvement in practice and sharing of promising practice knowledge, including giving consideration to expanding the scope of the National Prevention Hub to host audit findings.
27. Include ‘local government’ in the next National Plan and associated Evaluation Plan and action plans wherever there is a reference to ‘Australia’s governments’ to recognise:
28. local government’s lead role in preventing violence against women and improving gender equality; it is not just a setting for action.
29. the achievements of local government, particularly in Victoria, in supporting victim survivors; working to prevent violence before it occurs; and in advancing gender equality (both as workplaces and within their communities).
30. As an action under the next National Plan, advocate for the Australian Building Codes Board to revise the definition of gender in the Building Code of Australia and to include gender neutral toilets.

# MAV Responses to the issues raised in the inquiry’s terms of reference

**Comments on the inquiry’s terms of reference**

We believe this is the fifth national inquiry into domestic and family violence. It is the second one this year. Councils have questioned how this inquiry relates to the Senate Standing Committee on Legal and Constitutional Affairs References’ [inquiry into domestic violence with particular regard to violence against women and their children](https://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Legal_and_Constitutional_Affairs/DV/Terms_of_Reference) which occurred earlier this year and for which a report has already been tabled.

Greater Shepparton City Council commented that the issues raised in the inquiry’s terms of reference are largely focused on secondary and tertiary prevention of violence against women. Greater Shepparton argues that while this is undeniably important, the inquiry should have placed greater emphasis than it does on “exploring primary prevention and the culture that enables perpetrator behaviour”.

Issue d) in the terms of reference lists a mix of potential barriers at the individual and system level, which, while confusing, highlights the complexity facing many victim survivors. The list appears to come from the terms of reference for the Senate Standing Committee on Finance and Public Administration References’ 2014 [inquiry into domestic violence in Australia](https://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Finance_and_Public_Administration/Domestic_Violence) (with the addition of ‘health’ and ‘access to services’). Councils have questioned what has, and has not, been included in the list.

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| **Issue** | 1. **Immediate and long-term measures to prevent violence against women and their children, and improve gender equality.**
 |

1. **There needs to be sustained action across the spectrum, from primary prevention through improving gender equality to early intervention and response.**

Local government is in a unique position working as it does in partnership with other agencies and their communities to support people across the life-course from birth to old age. Local government not only provides services, facilities and infrastructure; it also leads by example.

For over ten years Victorian councils have demonstrated how local government can work across the spectrum from primary prevention to response.

**Example 1: Local government working across the spectrum – metropolitan council**

Three of the five priorities in **Brimbank City Council’s** [Fairness, Equality and Respect 2019-2023](https://www.brimbank.vic.gov.au/community/family-violence-and-gender-equity) strategy reflect their commitment to working across the spectrum, namely promote gender equality; primary prevention of family violence and violence against women; and early intervention of family violence and violence against women

* Actions to promote gender equality and in primary prevention in the community occur across a range of services including leisure and community facilities; neighbourhood houses; youth services; connected communities; MCH; communications as well as internally focused work through people and performance.
* Brimbank City Council’s early intervention work occurs through the MCH and early years services. Like Melton in example 4, Brimbank has created a dedicated role, a Family Violence Practitioner, who works with the MCH and Early Years teams to build their capacity and to directly support women and children who are experiencing violence through doing risk assessments, safety planning and referrals.

**Example 2: Local government working across the spectrum – peri-urban council**

**Nillumbik Shire Council’s**:

* Actions to promote gender equality include conducting gender equity audits at MCH centres and Council-run childcare centres to improve service delivery and create gender-equitable spaces. Nillumbik has also included a requirement for Gender Equity policies in the Service Level Agreements with Early Years’ service providers using Council buildings.
* Actions to support response include training office-based and community-facing staff in MCH, Early Years, Youth, Aged, Disability, Community safety and Animal management in ‘Identifying and Responding to Family Violence’. Volunteers working with families with young children have also received this training. Supervisors and managers have been trained to identify and respond to staff experiencing family violence.

As these examples show, it is the breadth of entry points for action across the prevention spectrum, both internally within its workforce and externally with the community, which makes local government so effective and central to this work.

While not all councils have capacity to work across the spectrum, they can still make a difference in primary prevention and promoting gender equality. For example, Hepburn Shire Council is one of four rural Victorian councils that have outsourced their MCH service. They are therefore not directly involved in early intervention and response. Hepburn Shire Council notes, “*Our role as a small rural council is best placed in referral, leadership and advocacy*.”

1. **Many councils have expanded their focus on primary prevention of violence against women to encompass gender equality.** This is in part due to increased understanding of the underlying drivers of violence against women but also because talking about gender equality can be more accessible and/or palatable.

**Example 3: Local government’s expanded focus**

**Kingston City Council’s** [Prevention of Family Violence Action Plan 2019-2021](https://www.kingston.vic.gov.au/Services/Support-and-Counselling/Prevention-of-Family-Violence) encompasses action to promote gender equality:

* Kingston convenes the Family Violence Working Group which includes local victim survivors, partner organisations that provide family violence support as well as prevention agencies (Women’s Health in the Southeast, Central Bayside Community Health Services)
* Funding to support operations and programs of the Emerge Women’s and Children’s Network
* Pit Stop program: Behavioural change programs for fathers
* Strengthening and Raising Healthy Families program
* Funding via annual community grants
* Annual Kingston Woman of the Year awards which celebrate and support local women making an outstanding contribution to industry, community and humanity.
* A gender equality sub-group was added to Kingston’s Diversity and Inclusion Working Group
* Training for employees (bystander, eModules)

**Example 4: Local government’s expanded focus**

**Melton City Council’s** [Equality and Respect 2030: A strategy to prevent violence against women by promoting gender equity in the City of Melton](https://www.melton.vic.gov.au/Services/Health-safety-and-wellbeing/Health-and-Wellbeing/Equality-and-Respect) demonstrates their long-term commitment to violence prevention via dedicated resourcing and mutually reinforcing actions across the spectrum.

* Actions to promote gender equity include Baby Makes 3 program, equitable representation of parents in external communications, programs for men and their children, dads’ playgroups, STEM programs for girls, promoting girls and women in sport, acknowledging women’s leadership through Community Achievement Awards, and women’s only swimming program.
* Early intervention actions include organising ‘Recognise, Respond, Refer’ training for community facing staff, MCH screening tools and family wellbeing support programs.
* Response actions include council-funded Family Violence Service Navigation position in the MCH team. This worker provides outreach services to families; supports the development of risk assessments and safety plans; provides specialised short term support, information and advocacy for families; liaises with and refers to specialist family violence services; and provides secondary consultation to MCH nurses. This worker supports women through the referral process and helps them determine the most appropriate services for them (noting that sometimes women prefer to access mainstream rather than specialist services to ensure confidentiality within their community group). The council has also been involved in a family violence housing pilot, supporting women experiencing family violence to gain secure and safe housing.
* Specialist family violence services are in neighbouring municipalities, namely Sunshine (Brimbank) and Footscray (Maribyrnong). Therefore, Melton City Council works hard to attract an array of services to the municipality through the Community Services Capacity and Attraction Framework. One way they do this is to offer office space within council facilities at either low rent or no cost. This has resulted in the municipality receiving outreach legal, migrant, refugee and family support services.

**Example 5: Local government’s expanded focus**

**Wyndham City Council** recently adopted its draft Towards Equality Policy Statement and Action Plan “Towards Equality” which:

* aims to ensure Wyndham is recognised as a safe and inclusive community where women, men and gender diverse people across all ages and life stages feel they have equal access to power, resources and opportunities.
* was developed following extensive community, partner agencies (e.g. Women’s Health West and West Justice) and staff consultation and addresses three core goals:

|  |  |
| --- | --- |
| Goal 1 | To work together to build a city that is healthy, strong and inclusive of all. |
| Goal 2 | For Wyndham City Council to be gender equitable, safe, inclusive and a leader in equality. |
| Goal 3 | Gender-based violence is reduced and our response is strengthened. |

* The Policy Statement is further supported by a one-year plan of actions and activities Wyndham will undertake to improve gender equality and significantly reduce incidence of family violence across the Municipality.

**Example 6: Local government’s expanded focus**

**Yarra City Council’s** [0-25 Years Action Plan 2018-2022](https://www.yarracity.vic.gov.au/services/family-and-children) includes a focus on gender equitable parenting as well as family violence prevention and support.

* Family, youth and children’s services staff receive gender equity training
* The Family Services team has undertaken a research project with fathers using their services with a view to understand gender equality in parenting from a service perspective.
* The MCH team has developed a ‘Healthy Relationships’ information sheet to promote healthy relationships, gender equality and prevention of family violence. This is used within the Key Ages and Stages consultations with all families.
* The Family Programs and Inclusion team develop, plan and deliver playgroups with a gender equity lens, including selection of toys, books and activities that challenge stereotypes. They encourage parents to not be so gender-biased with their children through discussions in groups etc. They also support a Rainbow playgroup.
* Children’s services have participated in a gender equity program ‘[Free to be me’](https://thewellresource.org.au/topics/family-violence/share/free-to-be-me) and they also ask educators to unpack gender stereotypes in books as part of shared pedagogical learning and practice.
* Youth Support Program works with individual young people living in family violence situations.

The examples highlight how Victorian councils deliver services directly and in partnership with other agencies; they advocate for their communities; and provide funding. The examples also touch on councils’ role as employers. Recommendations from the Victorian Royal Commission into Family Violence to implement best-practice workplace programs across the public sector, have resulted in local government placing a strong focus on workplace gender equality, early identification and response to family violence within the workplace. In 2019, 19 Victorian councils commenced implementing the Workplace, Equality and Respect Standards, developed by Our Watch.

Councils have developed policies and procedures detailing how they will support employees who are experiencing family violence. They have delivered family violence training to increase staff awareness and understanding. All 79 Victorian councils have family violence leave provisions in their Enterprise Agreements. Council staff also have access to counselling via Employment Assistance Programs.

In some cases, talking about gender equality has made it easier for councils to engage new audiences within their own organisations and within their community. For example, the City of Casey has trained small business owners in their active bystander program, ‘Standing up for equality and respect’.

Effective primary prevention efforts are underpinned by strong cross-sector partnerships (and long-term funding) at local and/or regional levels. Victorian councils have consistently demonstrated their capacity to work collaboratively with other organisations via prevention partnerships and family violence networks.

**Example 7: Local government working in partnership – local level**

**Mildura Rural City Council** supports the work of the local [Gender Equality Action Sunraysia](https://www.facebook.com/genderequityactionsunraysia/) group. This group is working towards systems mapping and the development of a co-designed Mildura PVAW/GE action plan. This will support the investigation and establishment of a Mildura Region PVAW/GE Governance structure to facilitate whole of community collaborative efforts and to advocate for resources and funding for implementation.

**Example 8: Local government working in partnership – regional level**

The [Preventing Violence Together (Western Metropolitan Region Partnership) is](https://whwest.org.au/health-promotion/prevent-violence/preventing-violence-together/) led by Women’s Health West. Seven of the 16 implementing partners are councils including the Cities of **Brimbank**, **Hobsons Bay**, **Maribyrnong**, **Melbourne**, **Melton**, **Moonee Valley** and **Wyndham**.

* 2010 - the first regional primary prevention partnership and action plan of its kind in Victoria.
* 2017 – second strategy, Preventing Violence Together 2030, developed following consultation with partners, service providers and communities of interest to ensure it is relevant and tailored to the unique needs and context of Melbourne’s western region
* 2019 – Shared Measurement and Evaluation Framework launched to enable the partnership to evaluate its impact and monitor its progress
* Working groups on women in sport, interfaith and men as allies
* Partnership ran a Preventing Family Violence Symposium to build capacity of the western region workforce in preventing family violence through gender equity.

The seven councils and Women’s Health West are also members of the Western Integrated Family Violence Committee.

Five of the seven councils are also members of the regional [Action for Equity](https://whwest.org.au/resource/action-for-equity/) partnership led by Women’s Health West. The Action for Equity partnership aims to redress the social determinants of sexual and reproductive health inequities including gender norms and violence supportive attitudes

Councils have reported that talking about gender equality has strengthened community awareness of family violence. For example, Kingston City Council has linked with local cafes and other businesses during their 16 Days of Activism against Gender-based Violence campaigns.

1. **Strategies need to suit the context and appropriate methods need to be used, there is no ‘one size fits all’ solution.**

As the closest level of government to the people, local government is best placed to understand what approach or method is likely to work with their communities. Councils are also more like to be able to connect with people or groups who are hard to reach, either directly or through partnerships with local agencies.

There is plenty of evidence to draw on to support the development of tailored strategies including, but not limited to:

* Our Watch’s [*Putting the prevention of violence against women into practice: How to Change the story*](https://www.ourwatch.org.au/resource/putting-the-prevention-of-violence-against-women-into-practice-how-to-change-the-story)
* Our Watch’s [*Changing the picture: A national resource to support the prevention of violence against Aboriginal and Torres Strait Islander women and their children*](https://www.ourwatch.org.au/resource/changing-the-picture)
* Our Watch’s [*Primary prevention of family violence against people from LGBTIQ communities – an analysis of existing research*](https://www.ourwatch.org.au/resource/primary-prevention-of-family-violence-against-people-from-lgbtiq-communities-an-analysis-of-existing-research)
* Rainbow Health Victoria’s [*Pride in Prevention: A guide to primary prevention of family violence experienced by LGBTIQ communities*](https://rainbowhealthvic.org.au/news/launch-pride-in-prevention-evidence-guide)
* Our Watch’s [*Challenging gender stereotypes in the early years: the power of parents*](https://www.ourwatch.org.au/resource/challenging-gender-stereotypes-in-the-early-years-the-power-of-parents)
* Our Watch’s [*Men in focus: unpacking masculinities and engaging men in the prevention of violence against women*](https://www.ourwatch.org.au/resource/men-in-focus-unpacking-masculinities-and-engaging-men-in-the-prevention-of-violence-against-women)
* VicHealth’s [*Masculinities and health: a framework for challenging masculine gender stereotypes in health promotion*](https://www.vichealth.vic.gov.au/-/media/ResourceCentre/PublicationsandResources/Health-Inequalities/VicHealth-Masculinities-and-health-framework-JUNE-2020.pdf)
* Our Watch’s [*How sport can help Change the story: Preventing violence against women through sport*](https://www.ourwatch.org.au/resource/how-sport-can-help-change-the-story-preventing-violence-against-women-through-sport)
* Seniors Rights Victoria’s [*Preventing Elder Abuse*](https://seniorsrights.org.au/wp-content/uploads/2018/05/Preventing-Elder-Abuse.pdf)

**Example 9: Local government working in partnership – increased reach**

[MABELS](https://www.eclc.org.au/what-we-do/partnerships-and-projects/mabels/) is a Health Justice Partnership between Eastern Community Legal Centre, Boorndawan Willam Aboriginal Healing Service and **MCH teams from two Victorian local councils**\*. This is a unique early intervention program that enables women to receive advice and assistance at a much earlier point in their experience of family violence than they may have otherwise.

\*To protect the confidentiality of the MABELS Program, the two councils are not named.

**Example 10: Local government reaching culturally and linguistically diverse communities**

**City of Casey** has developed family violence referral information for specific groups. In response to COVID-19, they developed an information sheet on family violence, sexual and reproductive health and homelessness services that was translated into several languages; their Community Impact Assessment included sex, cultural background and family violence questions; and their communications campaign included examples of people from a range of backgrounds.



**Example 11: Local government reaching diverse communities**

**Kingston City Council**

* Platforms such as the [Derrimut Weelam Gathering Place](https://www.facebook.com/derrimutweelamgatheringplace/) and [Queer in Kingston](http://kingstonyouth.org.au/QIK) provide safe spaces for the development of community-led initiatives that foster a sense of identity, social inclusion and improved health and wellbeing.
* In 2019 Kingston City Council delivered the Victorian government-funded “Courage to Change” program which was created in response to community-identified need using a community-led, place-based approach. The program engaged up to 40 current and emerging cultural and faith-diverse community leaders in Westall, Clarinda and Clayton South in discussion-based workshops to increase their knowledge and skills around creating safe, equal and respectful relationships, gender equality and preventing family violence.

**Example 12: Local government reaching young people**

* **Maroondah City Council** identified a gap in responding to intimate partner violence in LGBTIQ relationships, particularly for young people. In response their Youth Services is co-designing a project with young LGBTIQ people called ‘Queer Conversations’.
* **Yarra City Council’s** Youth team provides safe spaces and programming for young gender-diverse people and young women, e.g. the DJ skills program was run at the request of young women and co-facilitating Queer Space program with the Drum Youth Services.

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| **Recommendations:**1. Use and leverage the breadth and depth of engagement that councils already have with their communities as civic leaders, service providers and workplaces to deliver contextualised, appropriate, and sustained action across the spectrum of prevention, early intervention and response.
2. Provide sustained resourcing (funding, tools and training opportunities) to local government who have the networks and existing engagement to work with communities across the life-course in primary prevention, early intervention and response (e.g. three-year funding compared to one year) to ensure the councils are able to commit, plan and invest.
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| **Issue** | 1. **Best practice and lessons learnt from international experience, ranging from prevention to early intervention and response, that could be considered in an Australian context.**
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Note: We do not plan to respond to this issue – we expect other more qualified agencies to do so (e.g. universities, Our Watch, ANROWS, VicHealth etc).

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| **Issue** | 1. **The level and impact of coordination, accountability for, and access to services and policy responses across the Commonwealth, state and territory governments, local governments, non-government and community organisations, and business.**
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1. **Service system coordination is a key factor for more effective outcomes for women and LGBTIQ people experiencing domestic, family or sexual violence.**

Local government provides a vast array of services and in Victoria is leading in prevention practice. It is also both part of and works alongside the domestic and family violence service system.

The MAV’s membership, being all 79 Victorian councils, provides us with the unique capacity to communicate and connect with all councils and at all levels – whether as elected representatives, CEO/Executives, MCH and Family services, Disability and Community Care workforce, librarians or Local Laws. We are in a position to promote and share promising practice and coordinate local level activity across the State effectively and efficiently.

Other state and territory associations in addition to our national peak body, the Australian Local Government Association (ALGA), provide an effective mechanism for reaching all communities across the country.

Victoria’s statutory prevention agency, [Respect Victoria](https://www.respectvictoria.vic.gov.au/), has acknowledged the benefits of investing in the MAV’s coordination capacity and the reach of local government through the 16 Days of Activism Against Gender Based Violence campaign initiative (25 November – 10 December). The MAV’s coordination of this campaign in 2019 achieved 100% participation by Victorian councils for the first time, and alongside 11 community organisations, facilitated 288 activities in more than 100 locations across Victoria, attended by more than 17,000 people. The MAV has again been successful in our submission to coordinate the 2020 16 Days initiative on behalf of Respect Victoria. Whilst we will build on the successes and learnings from 2019, we will need to identify and support creative means to achieve community conversations around the active bystander theme Respect Women Call it Out in the context of COVID-19.

Through their MCH services, councils are leading the rollout of key Victorian family violence service system reforms, namely the Multi-Agency Risk Assessment and Management Framework (MARAM), the Family Violence Information Sharing Scheme (FVISS) and the Child Information Sharing Scheme reforms (CISS).

The MAV recently made a submission to the Victorian Family Violence Reform Implementation Monitor, sharing the lessons learnt by MCH teams and council staff working with families. Since implementation of the reforms started, councils have noticed signs that service system coordination is improving, for example:

* Quicker Victoria Police response times to family violence reports
* Concerted efforts on the part of the judicial system to support victim survivors, for example taking evidence via audio
* Centrelink staff supporting victim survivors to access support.
* workers across the sector meeting more frequently and building stronger relationships.

Councils have also identified new Victorian government funding streams for victim survivors of family violence as a key positive. One council provided an example of a culturally and linguistically diverse family who secured assistance through the [Family Violence Flexible Support Package](https://www.vic.gov.au/funds-to-support-victims-of-family-violence). The family had been subjected to violence by the father/husband and were without family support in Australia to help them escape the violence or seek support. The package was instrumental in helping them to return to their home of origin, paying for transitional housing (during COVID-19) and covering the cost of the children's passports.

Service systems can be very difficult for people to understand and to navigate. The more coordinated they are, the easier they are to understand. Councils play a critical role in helping women and LGBTIQ people navigate the specialist family violence service system. MCH nurses help their clients navigate the family violence service system. Some councils have even funded a position within their MCH team that focuses on service system navigation, such as Brimbank and Melton City Councils.Yarra City Council employs bilingual workers in family services who work collaboratively with local services to respond to and support Vietnamese women.

1. **Consistent and nuanced policy responses across all three levels of government would facilitate service coordination and accessibility.**

In Victoria, family violence prevention and response activities have been supported and enabled by coordinated and consistent evidence-based policy frameworks at all three levels of government.

Nationally the work of Our Watch and ANROWS provides a solid evidence base and practice frameworks for the prevention of family violence and violence against women as well as evaluation frameworks to monitor effectiveness, while the National Plan informed the development of the MAV’s Leadership Statement.

The Victorian State Government policy frameworks developed following the Royal Commission into Family Violence such as *Safe and Strong* and *Free from Violence* provide the roadmap for Victoria to end violence against women. These frameworks provide clear targets and promote sustained investment in prevention and response activities.

Since 2006 an increasing number of Victorian councils have developed their own strategies to promote gender equality and prevent violence against women. These align with Change the Story and other Commonwealth policy as well as the Victorian legislative and policy context. This includes the requirement in the Victorian Public Health and Wellbeing Act 2008 that councils “report on the measures they propose to take to reduce family violence and respond to the needs of victims” in their municipal public health and wellbeing plans (section 26, clause (2) (ba)). Councils also align their strategies and plans with regional strategies and plans.

In Victoria, the introduction of the Gender Equality Act (2020) will see the establishment of the Public Sector Gender Equality Commission and a requirement for all councils to develop four-year Gender Equality Action Plans by 31 October 2021, and report on their progress through undertaking workplace gender audits and gender impact assessments every two years.

1. **‘Accessibility’ is more than providing physical access: “services must be approachable, acceptable, appropriate, affordable, and available”[[7]](#footnote-8).** This includes mainstream services provided by local government such as MCH, kindergarten, youth and positive ageing, arts and culture, sport and recreation; as well as specialist services provided by domestic and family violence response agencies.

**Example 13: Local government supporting accessibility**

Three of the ten principles guiding **Brimbank City Council’s** Physical Activity Strategy are Accessibility and Equity; Social and Economic Inclusion; and Availability and Affordability, all of which reflect the broader definition of ‘accessibility’. This strategy was developed with significant input from Growing Brimbank, an applied research project focusing on the social determinants of health to prevent and reduce chronic conditions that affect the health, wellbeing and prosperity of Brimbank residents. The focus on accessibility in the strategy has broadened the approach to physical activity from leisure facilities to also include broader active recreation in the community. This has gender equity implications since women are less engaged in formal sporting clubs and facilities and are more likely to engage in physical activity in informal and casual physical activity opportunities.

Melton City Council tries to provide programs and services for no or low charge. Councils commented that the COVID-19 pandemic and associated restrictions had resulted in many programs being adapted, which meant they were more accessible to new participants via online streaming and videos (and potentially less accessible to others who do not have the required data or technology).

Yarra City Council recently restructured their Family services department to include a ‘Family Programs and Inclusion’ team to directly address this issue as well as to include fathers, promoting equitable parenting. The Family services department view all services through an inclusion lens, to ensure they reduce biases as much as possible.

1. **Cross-sector collaboration, for example between family violence and disability sectors, is a key factor for more effective outcomes for women and LGBTIQ people experiencing domestic, family or sexual violence.** Cross-sector collaboration is a practical application of the concept of intersectionality and would lead to more nuanced and appropriate policy and service responses.

Councils are familiar with the many different communities or cohorts within their geographical area of responsibility and are therefore well placed to work with women and LGBTIQ people from those communities to advocate for a cross-sector approach.

Aboriginal and Torres Strait Islander women, women with a disability, women from non-English speaking backgrounds, women facing other forms of discrimination and LGBTIQ people may have an understandable fear of further discrimination when using a mainstream service. Strong partnerships and collaboration between councils and tailored services are vital to ensure appropriate and accessible responses and choices are available to all women and LGBTIQ people.

Victorian councils have identified that the Royal Commission into Family Violence has led to improved cross-sector collaboration between family and children’s services and family violence services, establishing a clearer understanding of roles and better teamwork in supporting families in need.

For example, Bass Coast Shire Council works in partnership with Gippsland Women’s Health and Gippsland Centre Against Sexual Assault to support the local delivery of Sexual Lives & Respectful Relationships for people with intellectual disability.

**Example 14: Local government leading cross-sector collaboration**

* Three of the five Local Family Violence Networks in the northern metropolitan region are convened by councils, **Banyule/Nillumbik** (joint), **Darebin** and **Moreland**.
* **Melton City Council** coordinates a Preventing Family Violence Advisory Committee which includes service representation across a range of sectors, including youth, migrant and refugee, disability, women’s health, Aboriginal and Torres Strait Islander, and Victoria Police. This committee advises Council on how to prevent family violence through a range of strategies and advocacy opportunities.
* **Wyndham City Council** supports and facilitates the Wyndham Family Violence Network which has a membership base representing 142 individuals from approx. 32 local agencies across sectors. The network provides an opportunity to bring together service agencies to information share, collaborate and build partnerships that inform and improve service delivery. The network meets bi-monthly with regular online communication between meetings, addressing issues associated with family violence within Wyndham and the Western region

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| **Recommendations:**1. Listen to and learn from existing reform processes (such as in Victoria), including the 10+ years of experience and expertise of Victorian councils working in primary prevention, early intervention and response across the life-course of their community members.
2. Support coordination and capacity building for the local government sector, e.g. through the relevant State Local Government Associations and the national peak body, the Australian Local Government Association. This could include resourcing to lead the roll out and enhancement of the Prevention Toolkit for Local Government
3. Invest for the life of the next National Plan in:
4. Stronger collaboration at local government area level between all partner agencies and across sectors.
5. Better coordination of effort between levels of government, across the response and prevention parts of the sector and between sectors (e.g. cross-sector collaboration between disability and family violence response sectors).
6. Evidence-based, nuanced and inclusive policy responses to preventing violence against women and improving gender equality.
7. In the next National Plan and associated Evaluation Plan, define ‘accessibility’ as ‘approachable, acceptable, appropriate, affordable, and available’ and support organisations to understand and use this broader definition.
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| **Issue** | 1. **The way that health, housing, access to services including legal services, and women’s economic independence impact on the ability of women to escape domestic violence.**
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The reasons women and LGBTIQ people can’t leave a domestic violence situation are complex, inter-related and multi-layered, and are significantly compounded by the fact that victim survivors are at increased risk of death when they attempt to leave.

The reasons implied by the list in issue d) above, namely poor health and injury, lack of crisis accommodation and alternative housing, risk of homelessness, limited access to money or transport, physical isolation, limited access to services are just some of the many.

Observations from Victorian council staff working in early intervention, response and prevention are included below.

**Additional supports**

Access to additional support services, such as financial counselling, legal advice and housing all incur long wait lists. These support services play a key role in mitigating the risks associated with leaving a violent situation. It is also critical that access to support services is not means-tested, regardless of family assets or income, as victim survivors of family violence often do not have access to the family income and/or need to maintain confidentiality when accessing services.

**Legal services**

The prohibitive cost of legal support continues to be a barrier for victim survivors of family violence, particularly if they are not eligible for Legal Aid. Similarly, victim survivors of family violence are often placed in the extreme and dangerous circumstance of being advised by their legal advisor to remain in the home with the perpetrator in order to position themselves as best as possible in the eyes of the family court, who may inadvertently penalise the victim survivor in a financial settlement if she has already left the family home.

**Housing support**

Housing has been cited as a major issue facing women and children who are experiencing family violence. The lack of housing options, including emergency accommodation, places families at risk of ongoing abuse and an inability to escape the perpetrator. In some rural municipalities access to emergency or crisis accommodation can be hours away. This impacts greatly on children and women who can lose contact with school, friends and support networks. Geographical isolation can sometimes result in victim survivors returning to the home where the perpetrator lives. This has been particularly apparent in culturally and linguistically diverse communities.

While local government has some measure of control over the type of housing stock available through administration of the local planning scheme – this does not help people in crisis.

In Brimbank, access to affordable housing is seen as a major barrier for women wanting to escape family violence. This is compounded by the fact that many women in Brimbank experiencing family violence are on partner visas and the lack of affordable housing as well as not being able to access to government services means they feel they cannot leave. Since the introduction of the family violence visa following the Victorian Royal Commission into Family Violence this has changed women’s options but many women from overseas on partner visas appear to be unaware of this option. Maroondah City Council agrees; and notes that fear of losing visa status is a barrier to many culturally and linguistically diverse women disclosing their experiences of family violence.

The City of Casey presented at the Legislative Council Legal and Social Issues Committee’s Homelessness Inquiry, highlighting the social and economic issues faced by community members at risk of homelessness including the strong correlation between family violence and homelessness.

**Case study 1: Local government working to address barriers to leaving**

**Bass Coast Shire Council** is a member of the Change for Sam Committee, which was established in response to the alleged murder of a local resident, Sam Fraser, by her ex-partner. The Committee also includes representatives from health, legal and emergency service agencies.

The Committee is working towards establishing an outreach service of Orange Door to acknowledge the difficulties local women can face in leaving an abusive relationship – which includes the lack of local emergency housing options. An outreach service of Orange Door will also result in a more coordinated approach to the provision of health, legal, emotional and financial support for local women escaping family violence.

**Case study 2: Challenges women face when they leave – story from MCH nurse**

“Kate” disclosed to me that she was experiencing very serious family violence as were her two daughters.

She told me that she had tried to tell many people before me, including during her pregnancy, but she was not heard. She showed me photos of bruises to her daughter’s buttocks from thongs and bruises to her face. A child protection notification was made, and the family were moved to a motel.

They were moved to three different motels in five days. They were not given money or vouchers; the motel was given money ($30 per day) to provide food but that only covered breakfast and they went hungry till the Monday when they came to my office and I fed them and arranged Emergency relief.

I helped them get a private rental (a one bedroom for a family of three as there is no public housing available) and Centrelink and EDVOS engaged with the family. The family accessed funding but not enough for a car, so the family are driving an un-roadworthy car. English is not the client’s first language which created many problems particularly as she didn’t understand the laws or the system and even filling out forms was difficult.

This family have never gone back to their home to pick up their possessions. The ex-husband has all the money and has been able to engage top legal advice whilst my client is using Women’s Legal Service. Counselling for the child through ACF requires the fathers’ consent so this traumatised child was not able to access specialised counselling. This family is still struggling, and I feel like we haven’t done enough for her and her young daughters.

The list in issue d) above focuses on material resources failing to acknowledge the emotional and mental reserves required to escape domestic and family violence. In many cases victim survivors are socially isolated and have limited access to informal support networks. They may also be responsible for others including children, parents, pets, farm animals etc. For example, council Animal Management staff have identified that women may be unwilling to leave a violent situation for fear of leaving animals behind. (Noting that some councils have capacity to look after animals temporarily for women escaping violence when the pet’s safety is a barrier to leaving).

**Mental health services**

Access to mental health support services and therapeutic interventions for both women and children experiencing family violence continues to be a critical issue. There are excessive wait lists of up to, and in some areas more than, six months. Private mental health services are reported by some council services as easier to access but prohibitive in cost, even with a Mental Health Plan.

It is not just material resources and emotional reserves that stop a person from leaving – to understand the barriers facing a woman or LGBTIQ person, it is crucial that we apply an intersectional lens to their situation.

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| **Example 15:** **Applying an intersectional lens** Women living with a disability experience similar barriers to escaping domestic violence as women without disabilities; but they may also experience disability-based barriers:* dependence on their abuser as their carer
* societal attitudes towards people with disabilities that are discriminatory and lifelong – which is particularly the case for women with cognitive disabilities who are often perceived as being promiscuous and unreliable witnesses
* inaccessible buildings (crisis accommodation, police stations, courts)
* inaccessible information
* not meeting eligibility criteria for disability support (which would support their interactions with specialist domestic and family violence services)
* justifiable fear their children will be removed from their custody (particularly so for Aboriginal and Torres Strait Islander women with disabilities).[[8]](#footnote-9), [[9]](#footnote-10), [[10]](#footnote-11)

Services generally focus on accommodating women with physical disabilities, rather than women with “cognitive, sensory or memory impairments”1. |

Other victim survivors face discriminatory societal attitudes and stigmas such as older people, LGBTIQ people and people from culturally, linguistically and faith diverse communities.

Local government can advocate for change and increased services for victim survivors escaping domestic violence, either directly or indirectly through their participation in local prevention and health promotion networks and partnerships (refer Example 7 on page 10 and Example 8 on page 11).

**Case study 3: Local government supporting a woman to leave safely**

A woman arrived in Australia as a refugee with her husband and one child. The husband was violent and controlling toward her. He hid both her and the child’s passports, birth certificates and other important papers. He closely monitored her movements through her phone and FaceTime throughout the day. She was connected to a small ethnic group where she could not disclose her situation. The partner also attended most appointments her including MCH Key Ages and Stages visits.

On one occasion when he did not accompany her to an MCH appointment, the mother made a disclosure which followed with a safety plan. She was referred into the Supported Playgroup.

The partner attended several playgroup sessions, but quickly allowed the mother to attend without him. He did however, Face Time her regularly. All he ever saw was his wife chatting with other mothers, never the professionals behind the scenes, including Family Services professionals who worked with her to identify how she could leave her situation from the playgroup.

Shortly after that the mother found the identification documents.  The mother packed her things and made her way to playgroup as per her plan.  FV Services were advised and she was able to leave this very dangerous relationship.

MCH received a text message two weeks later informing them that she had successfully left and was in a safe place ready to start her new life.

The system needs to think differently about how we support victim survivors when they are in the “getting ready to make that step” stage.

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| **Recommendations:**1. When developing the next National Plan give consideration as to how the universal nature of council services such as MCH, libraries, animal management and customer services can be used to respond to family violence in ways that reduce barriers experienced by women wanting to leave a violent situation. Provide support to expand capacity of these roles and other universal services and to assist with access referral pathways for community members and clients.
2. An intersectional lens should be applied by those involved in developing:
3. the next National Plan and associated Evaluation Plan in order to fully understand and respond to what impacts a woman’s and/or LGBTIQ’s person’s ability to escape domestic and family violence.
4. Commonwealth policies, services, communications, grant programs, service funding etc.
5. The next National Plan should place greater emphasis on the planning and provision of appropriate legal and social support including emergency accommodation and social housing for victim survivors, in their local community where appropriate.
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| **Issue** | 1. **All forms of violence against women, including, but not limited to, coercive control and technology-facilitated abuse.**
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Domestic and intimate partner violence are gendered issues - the vast majority of perpetrators are men and victim survivors are overwhelmingly women. Domestic and family violence are about one person’s use of power and control to dominate another person and cause them to fear for their safety. Evidence suggests that perpetrators use any means available to control the other person including taking advantage of their vulnerabilities, as the below examples show.

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| **Example 16: Applying an intersectional lens**People with disabilities are often in situations where other people exercise power and control over their lives.This adds another layer of risk. Women with disabilities experience many of the same forms of violence as women without disabilities but they may also experience disability-based violence, including but not limited to, the withholding a mobility aid, a communication aid or medication and threats to do so; and threats of institutionalisation. [[11]](#footnote-12), [[12]](#footnote-13), [[13]](#footnote-14), [[14]](#footnote-15)  |

Most of what we know about domestic and family violence relates to heterosexual people and their families. Evidence suggests the general patterns and levels of domestic violence in LGBTIQ relationships are about the same as in heterosexual relationships, although there is some variance between the groups represented by the acronym.

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| **Example 17**: **Applying an intersectional lens**People who identify as LGBTIQ experience many of the same forms of violence as heterosexual, cisgender women but they may also experience LGBTIQ-specific violence, including but not limited to, ‘outing’ or threats to do so; withholding access to hormones or threats to do so; refusal to use a person’s preferred name or pronoun; insisting a partner has treatment to look more ‘male’ or more ‘female’; threatening a transgender person’s custody or relationship to their children and so on. [[15]](#footnote-16)  |

Council staff working with families have noticed that since the Victorian Royal Commission into Family Violence there is a heightened awareness of family violence and an increased understanding of the harm it causes to children and women. They have also noticed that people are more prepared to talk about family violence.

However there continues to be a lack of understanding across the community and even within the service sector of the many forms family violence can take. Councils with a higher population of culturally and linguistically diverse communities within their municipality report that further education and targeted resources around family violence are required.

For example, Brimbank City Council’s Family Violence Practitioner has identified coercive control is a major issue, reporting that it is harder for some women to identify and name their experience as violence and there is a need to communicate locally that the various forms of coercive control are illegal and not a cultural norm in Australia.

Council staff often see or hear of other examples of violence include harming or threatening to harm pets or farm animals; taking the car when a bushfire is nearby, so their partner is left behind without transport; destroying or threatening to destroy faith-based texts; and so on.

Melton City Council’s Animal Management staff have reported that sometimes when called to an animal welfare incident they have identified physical abuse of the woman. In response to this service gap, the MAV has recently offered Animal 3Rs (Recognise, Respond and Refer) training, in partnership with EDVOS, to council staff. This was very well received with feedback suggesting that training should be offered to council local laws/animal management staff across Victoria.

For many, the terms ‘violence against women’ or ‘family violence’ are synonymous with ‘intimate partner violence’, much like the term ‘gender equality’ is read as ‘equality for women’. There are other types of family violence – which don’t just impact women – that also need attention such as elder abuse, carer abuse, child abuse, sibling abuse, young person to parent abuse and abuse within kinship relationships.

Council staff working in aged care have observed that since the Victorian Royal Commission into Family Violence awareness of elder abuse has increased; however, they also acknowledge that much more needs to be done including the identification of local referral pathways and more training for community-facing staff.

City of Casey have been advised by local Victoria Police Youth Resource Officers that there is insufficient focus given to violence of young people towards parents. Young people are sometimes ‘shocked’ to hear that such behaviour falls within a definition of family violence.

Other types of family violence also emerged from Kingston City Council’s 2019 ‘Courage to Change’ program with cultural and faith diverse community leaders (refer Example 11 on page 12) including elder abuse by adult children or grandchildren to older family members and financial abuse (such as the person responsible for handling Centrelink payments withholding finances from their partner).

Greater Geelong City Council observed that occupational violence is also a gendered issue – council frontline workers in customer service, aged care, early education and retail are often subjected to hostile, aggressive, violent behaviour and the majority of these workers are women. This is an area that has not been addressed to date and needs further investigation.

Over the last ten years, Victorian councils have actively worked to raise community awareness of the different forms of violence victim survivors can experience. Media reporting emphasises physical abuse. Councils argue that other forms of family violence need to be recognised and highlighted in media campaigns.

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| **Recommendations:**Recommendation 8 also applies to this issue and should consider all forms of violence.1. Invest in targeted media campaigns that build awareness of the different types of family violence (i.e. elder abuse, carer abuse, young person to parent abuse and abuse within kinship relationships), and in resources that reinforce messaging and facilitate conversations, including through local government networks.
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| **Issue** | 1. **The adequacy of the qualitative and quantitative evidence base around the prevalence of domestic and family violence and how to overcome limitations in the collection of nationally consistent and timely qualitative and quantitative data including, but not limited to, court, police, hospitalisation and housing.**
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The current evidence base on the prevalence of domestic and family violence is inadequate in that it does not fully or consistently represent Australian communities. The type of demographic data collected is basic which therefore limits the ability of researchers, policy writers, decision-makers, service providers etc. to come up with nuanced responses to the ‘wicked’ problem of domestic, family and sexual violence.

1. **The evidence base on prevalence appears to be built mainly on quantitative administrative (crime, justice, hospital etc.) and survey data (Personal Safety Survey).**

The National Data Collection and Reporting Framework (DCRF) was an output of the first Action Plan 2010-2013. Developed by the Australian Bureau of Statistics, the DCRF is meant to provide a basis for consistent collection of administrative data by organisations in the family violence sector. It includes a list of key data items relating to the individual experiencing violence, the incident of violence, the type of response and the outcomes of the response.

While the list of potential data items relating to the individual is quite comprehensive; the data available is not. This suggests the IT and operational challenges involved in applying the DCRF have been too costly.

1. **‘Nothing about us without us’ - research into a particular ‘cohort’ needs to be respectful, ethical and involve representatives from the cohort in the design and collection of qualitative and quantitative data.**
2. **We need gender-disaggregated rather than sex-disaggregated data.**

Sex relates to biology (as determined at birth by medical professionals); gender relates to identity (as determined by the person). Unless there is some medical reason for doing so, organisations – whether government, non-government, community-led, businesses etc. – do not need data on a person’s biology. How a person identifies determines how they interact with the world and that is the data we should be collecting.

The Victorian Gender Equality Act 2020 calls for the collection of gender-disaggregated data. This change in how data is collected should be accompanied with appropriate training and education.

1. **Inconsistencies exist between the local, state and Commonwealth government levels in relation to what, how and when data is collected.**

Particular issues include:

* + how gender and/or sex disaggregated data is defined and described, for example not aligning with best practice descriptors or definitions, and being unclear and inconsistent;
	+ the collection of data without a clear purpose or application.
1. **The way in which we ask about gender must be respectful.**

The Australian Bureau of Statistics (ABS) released their standard for sex and gender variables in 2016[[16]](#footnote-17). They use the same labels and codes for both sex and gender: Male I Female I Other[[17]](#footnote-18) or M/F/X. While ABS provides definitions for each label / code, using the same terms is confusing; and asking people to describe themselves as ‘Other’ is not respectful. More accurate response options to a question about sex are Female I Male I Intersex. More accurate response options to a question about gender are Man/Boy I Woman/Girl I Self-described, please specify.

Changing response options also means changing forms and the databases that sit behind them; but rethinking the way we ask people about their gender is symbolically and materially important and demonstrates respect. Recognising this, Victorian councils may wish to change the way they ask about gender when collecting information as part of service delivery, but in many cases are constrained by the restricted response options in databases issued by the Commonwealth or Victorian governments (e.g. My Aged Care (Cth); the MCH database, CDIS (Vic); the immunisation database, IMPS (Vic)).

1. **In order to understand prevalence among different cohorts (and to help councils to identify and craft local solutions) we also need to be able to disaggregate and cross-tabulate national, state and local government area data sets by other demographic variables, including but not limited to**:
* geography (at least to LGA-level data)
* Aboriginal and/or Torres Strait Islander identity
* cultural identity
* language spoken at home
* age
* LGBTIQ identity
* living with a disability
1. **Biases within research needs to be acknowledged and addressed – who gets to decide what evidence is credible?**

It appears that different weight or value is given to research conducted by academic institutions compared to story collecting or anecdotal research by local government, non-government and community organisations.

For example:

* Yarra City Council maintains that the politics of research are gendered because research is gendered. The main research agendas are largely controlled by men, particularly in medical research.
* Loddon Campaspe Community Legal Centre’s “Will somebody listen to me?” that identifies new approaches to family violence legal services through conversations with women victim survivors.
* Kingston City Council deems qualitative data, including stories and anecdotes from people with lived experience, equally important to other forms of data.

Fund the development of a mechanism for sharing qualitative and quantitative data collected by other state, territory and local governments as well as non-government and community organisations, providing for richer data analysis and more nuanced policy and service response.

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| **Recommendations:**1. As actions under the next National Plan, advocate for the Australian Bureau of Statistics to:
2. Update their standard for sex and gender variables as outlined in this submission
3. Take the lead in developing an agreed standard for sexuality variables[[18]](#footnote-19)
4. Invest in and align data collection frameworks and methods across local, state/territory and Commonwealth governments. This includes supporting the application of the revised National Data Collection and Reporting Framework, including the involvement of representatives from different cohorts in the evaluation and revision.
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| **Issue** | 1. **The efficacy of perpetrator intervention programs and support services for men to help them change their behaviour.**
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Local government is not usually directly involved in perpetrator intervention programs and support services for men to help them change their (violent) behaviour.

Several councils have observed that referral pathways for perpetrators are limited. There is a lack of creative initiatives for men who use violence, with only ‘men’s behaviour change’ programs available. The three main challenges with the ‘men’s behaviour change’ programs are that council staff working with families were unable to do ‘warm referrals’ because the program did not accept them; there are very long wait times; and (conversely) high dropout rates.

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| **Issue** | 1. **The experiences of all women, including Aboriginal and Torres Strait Islander women, rural women, culturally and linguistically diverse women, LGBTQI ~~women~~ people, women with a disability, and women on temporary visas.**
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Please also refer to sections d), e) and f) and recommendation 8.

1. **The examples provided for issues d) and e) demonstrate that women experience different levels of risk; forms of violence; or barriers to accessing services etc. depending on their identity, situation, location and socio-economic status.**

One council reported hearing that their local specialist family violence services were delivering disclaimers on privacy, confidentiality and child protection to potential clients. Understandably, these disclaimers have been misunderstood by some Aboriginal women and by some culturally and linguistically diverse women. These women have not accessed the services they need, because they fear child protection involvement.

For migrants and refugees, non-English speaking community members or where English is not the first language, social isolation and language barriers can prevent the uptake of family violence information and support services.

Crisis accommodation, including transitional and private properties, is not always accessible for women or children with disabilities, including but not limited to wheelchair access.

From a workplace perspective, Yarra City Council has observed the experience of contractors engaged by councils, such as agency cleaning staff, who are often ineligible for family violence entitlements that are available to permanent staff. (In some councils, casual staff are also ineligible for family violence entitlements).

1. **People are multi-dimensional; and the groups listed in issue h) above are not homogenous.**

Planning, and development and provision of service responses should go beyond listing ‘at risk’ groups to incorporate a focus through all prevention and response efforts on intersectionality and social privilege. Policy writers, legislators, academics, practitioners – anyone working in the sector - should think about and respond to the compounding effects of multiple risks and forms of disadvantage, inclusion and exclusion. They / we also need to understand the insidious impact of unearned advantage based on race, age, gender identity, culture, sexuality, etc.

There should also be an understanding that while the ‘at risk’ framing may be based on evidence (data or experience), it is determined by people in power and may not be the way communities and groups would describe themselves. It should be recognised that factors that might increase risk, can also be a source of strength and resilience.

As an example of how this approach can be encouraged, councils applying for funding under the Victorian *Free from Violence* local government project were required to demonstrate how they would apply an intersectional lens to their community-facing or workplace-based initiative.

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| **Recommendation:**1. Those involved in planning for the next National Plan and associated Evaluation Plan need to recruit a representative group of people to oversee development who should:
2. Recognise that factors that might increase risk, can also be a source of strength and resilience.
3. Apply an intersectional lens and a privilege lens – to think about and respond to the compounding effects of multiple risks and forms of disadvantage, inclusion and exclusion; and to identify and take steps to rectify the impact of unearned advantage based on race, age, gender identity etc.
4. Co-design consultation and communication plans with more representatives from each at risk group and listen to different voices within each group to understand what they need and how they think their needs could be met.
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| **Issue** | 1. **The impact of natural disasters and other significant events such as COVID-19, including health requirements such as staying at home, on the prevalence of domestic violence and provision of support services.**
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1. **Violence against women increases at times of disaster.**

This can include an increase in severity for women already experiencing domestic or family violence, or first-time occurrences. This can impact residents and volunteers/employees of emergency response agencies.

During and after a disaster, the risk for vulnerable women and LGBTIQ people increases.

The Gender and Disaster Pod (GAD Pod), an initiative of Women’s Health Goulburn North East; Women’s Health in the North; and Monash University Disaster Resilience Initiative, is leading the way in Victoria. The GAD Pod has developed National Gender and Emergency Management Guidelines and checklist – these tools provide advice on how to apply a gender lens in practice. The GAD Pod has also developed training packages and a raft of other resources.

Local government plays an important role in emergency management – encouraging their communities to plan and prepare for natural disasters; and facilitating immediate relief for, and long-term recovery of, impacted communities.

The [MAV’s gender and emergency management](http://www.mav.asn.au/what-we-do/policy-advocacy/emergency-management/gender-and-emergency-management) resources are helping to raise awareness and provide councils with practical advice on how gender and emergency management interact.

Councils that consider prevention of violence against women in emergencies draw on these resources and those of the GAD Pod to raise awareness among volunteers/employees of emergency response agencies (so they can recognise the signs and make appropriate referrals) as well as the broader community (so they can offer support and know about available services).

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| **Example 18: Preventing Violence Against Women in Emergencies** A leading council in this area is Macedon Ranges Shire Council, who in 2015 developed their Preventing Violence Against Women in Emergencies Action Plan, in partnership with emergency management agencies. This was the first plan of its kind at a municipal level in Victoria. In 2017/18, they further developed and produced the 'disaster is no excuse for family violence...' [suite of materials](https://www.mrsc.vic.gov.au/files/assets/public/live-amp-work/healthy-living/macedon-ranges-no-excuse-for-family-violence-materials-2018-d18-60710_1.docx) including A3 poster, DL flyer and wallet card (drawing on GAD Pod resources). These materials aim to raise awareness of the probability of increased family violence after natural disasters and to provide information on where people can find help and support. These materials are designed to be used after an emergency in relief and recovery centres, and other locations in the affected district. Their [2019–20 Action Plan](https://www.mrsc.vic.gov.au/About-Council/Our-Council/Strategies-Plans/Prevention-of-Violence-Against-Women-in-Emergencies-Action-Plan) identifies a range of multi-agency actions that aim to prevent violence before it occurs in the context of emergencies. |

1. **COVID-19 is unprecedented and quite different to other natural disasters:**
	* Although the impacted area can cover multiple local government areas, the effects of a natural disaster such as a bushfire, are generally contained to a relatively small segment of the total population; COVID-19 affected the entire country
	* The key message for bushfires is to leave early; with COVID-19 we were told to stay at home as much as possible – which increased the danger for women and LGBTIQ people already experiencing, or at risk of, domestic or family violence.
	* People impacted by bushfires can seek help in a public relief or recovery centre; assuming they can get to the centre, this provides greater protection and access to support services for women experiencing domestic or family violence. This may not be the case for LGBTIQ people, it depends on how welcoming the centre and staff are.
	* Telephone helplines set up by councils to respond to COVID-19 do not offer the same opportunities for disclosure as face-to-face recovery centres. In addition, other common avenues for people experiencing family violence to disclose their experience and seek support have been shut down or limited during COVID-19. This includes libraries, workplaces, community hubs, school networks, in-person GP appointments and services such as hairdressing and dentists.
	* While domestic and family violence services continue to operate during COVID-19, this may not have been clear to women and LGBTIQ people already experiencing violence; and even if it was, their access to services was potentially restricted by the constant presence of their abuser.
	* The extent of support provided by Victorian councils has been much greater than that provided in a bushfire or flood, including:
		+ supporting and keeping their communities connected by continuing essential services such as MCH, childhood immunisations, early education and childcare, outreach to vulnerable community members, and aged services. For many women living with a perpetrator for whom it has not been safe to contact specialist family violence services, these essential council services may have been the only outside support they’ve had access to during this time.
		+ developing specific programs to support their communities during COVID-19 such as community grants, redeployment of council staff, setting up drop-in services using council facilities, and community messaging campaigns tailored to their community’s needs. More information is available on the [MAV website](http://www.mav.asn.au/what-we-do/policy-advocacy/councils-response-to-covid-19).
	* The long-term impacts of COVID-19 for the primary prevention of violence against women are yet to be fully felt, but early indications about the gendered nature of impacts and the implications for gender equality are concerning. There is growing evidence that the increased burden of unpaid work is disproportionately falling on the shoulders of women because of caring responsibilities. Women are also losing access to paid work due to these responsibilities and to workplace and government policy, for example, choosing to reduce their hours in paid work due to having less access to childcare. This is of concern to Victorian councils both as employers committed to workplace gender equality but also as service providers, including in early education and childcare.

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| **Issue** | 1. **The views and experiences of frontline services, advocacy groups and others throughout this unprecedented time.**
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**Victorian MCH teams – on the frontline**

Council staff report both significant challenges and unexpected benefits of the new and additional service delivery models they have had to set up in response to COVID-19 pandemic and associated restrictions.

**Unexpected benefits include**:

* ‘Telehealth’ service delivery has increased the reach of MCH services as it provides easier access for families, especially those in remote/rural areas
* Service providers including MCH and Child Protection have made concerted efforts to make the most of available resources to ensure families are supported
* MCH staff report their confidence in using technology has increased
* MCH staff report their active listening skills have improved because in using telehealth they are more focused on the nuance of their interactions with women
* The shared realisation that technology can be used to strengthen the service system by facilitating timely and regular communication between service providers.

For example, attendance rates at worker network and case management meetings are at a peak during this time due to the reduction in travel and improved technical capacity. Boroondara City Council reports that ‘*the local Family Violence Network Meeting via Microsoft Teams recently had the highest attendance in the last few years.’*

**Challenges include**:

* Some MCH nurses have reported an increase in child protection reports and domestic violence incidents since stay-at-home restrictions commenced.
* Other MCH staff suspect family violence incidents have increased during the “lockdown” period, beyond what has been reported to police or other services. MCH teams are concerned about the growth in ‘silent family violence cases’ with many women waiting for post-COVID life to seek support services, because they have nowhere to turn to while restrictions remain in place. They are expecting an increase in disclosures after lockdown ends.
* Some MCH nurses have noticed a decrease in early identification and disclosures of family violence through the telehealth consults. It has been difficult to screen for family violence, particularly if the perpetrator is home and observing or controlling their client’s interactions, conversations and responses. It was often difficult to safely identify a safe time to talk or to organise a follow-up call. This is unique to the COVID situation as in face-to-face appointments clients often feel safe to speak freely about relationship issues if attending without partner, and nurses can also identify physical violence.
* Engaging interpreters to work side-by-side with MCH staff to support families has presented a barrier to disclosures from women from small culturally and linguistically diverse communities. ‘*At times if the client knows the interpreter clients may not be willing to confirm issues with family violence as they do not want the interpreter to know about family violence*.’ Council Officer, City of Greater Dandenong

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| **Example 19**: Brimbank City Council’s Family Violence Practitioner initially reported a spike in referrals during the last two weeks of March 2020, followed by a plateau in April that has continued throughout May. Since the easing of restrictions in June there has been a new spike in family violence cases. The Family Violence Practitioner reports that since restrictions have been in place, seven clients who had previously exited the service reconnected because of escalating violence or breaches. This highlights that how existing relationships with the MCH service has made the process easier for these women to seek help. The COVID-19 crisis is severely limiting women’s ability to have time away from the family home. MCH appointments, which are now mandatory for the first eight weeks, is a critical point of contact to assess women.The Family Violence Practitioner also reported that cases have become more complex. These include a teenage perpetrator and several new parents of young babies. In addition, several cases included serious mental health issues exacerbated by social isolation, and these have required tertiary interventions. |

* A range of unintended consequence of COVID-19 restrictions include:
	+ Council staff working with families have observed that COVID-19 has increased the opportunity for perpetrators to exert control, with reports of some using new tactics linked to the pandemic to isolate and control women. For example, the perceived ‘need’ for regular (i.e. hourly) cleaning despite no-one leaving the family home; and using COVID as a pretext for needing to know the person’s whereabouts at all times and who they met.
	+ Slower response times from specialist FV services.
	+ Child protection and specialist family violence and other support services have reduced the level of face-to-face support they provide. This has
		- * increased demand for MCH services as one of the few services still delivering face-to-face support to families.
			* reduced the ability for services to undertake comprehensive family violence screening and risk assessments which has increased the risk facing women and children
			* placed additional stress on MCH nurses, and in some cases has placed them at increased risk.
	+ Loss of employment and income has increased stress in many families with some women finding themselves at risk of increased violence or experiencing violence for the first time.
	+ Limited access to support services and (often) reduced support networks throughout COVID-19 has heightened existing risks and barriers experienced by victim survivors who were planning to leave their abusive partner.
	+ Lack of external support services (e.g. legal, applicant worker, court network) for clients attending the courts for intervention order matters, resulting in clients often leaving the court confused.
	+ Support programs, behaviour-change and parenting programs have discontinued during COVID-19. Such programs are positive platforms for behaviour change, education and social connection.

**Examples of council responses to challenges:**

1. The reduction of specialist family violence service capacity during COVID-19 restrictions has had a flow-on effect for MCH nurses, who are consequently ‘holding’ more vulnerable clients (as noted above). Recognising the impact of this on their nurses, City of Casey organised vicarious trauma training for their MCH teams; and Maroondah City Council increased MCH nurses’ access to clinical supervision to enable them to discuss, debrief and seek support on the many complex cases they are dealing with.
2. Kingston City Council is facilitating a meeting with their Family Violence Working Group, local member and the Minister for the Prevention of Family Violence to discuss the importance of applying a gender lens to disaster recovery and the disproportionate impacts disasters such as COVID-19 can have on women and on their finances, safety and mental health.
3. The City of Casey recently provided family violence training to office-based and frontline staff which covered different forms of abuse, including that specific to COVID-19 pandemic. Their ‘Family violence during COVID – how to manage disclosures’ training aims to prepare staff and also to strengthen internal processes and referral systems.

**Awareness raising**

Victorian government messaging during stage 3 restrictions was very clear and easy to understand – there were only four reasons to leave home during the lockdown to reduce the spread of coronavirus COVID-19:

1. Shopping for food and supplies
2. Exercise
3. Medical care and caregiving
4. Work and education – if necessary

However, we don’t know if it was initially clear to women and LGBTIQ people experiencing, or at risk of, family violence that they could leave home to escape harm and not be fined. For example, the Victorian government’s [Stay at Home Directions (No. 3)](https://www.dhhs.vic.gov.au/sites/default/files/documents/202004/Direction%20-%20Stay%20at%20Home%20No.3%20%28signed%29.pdf) listed *‘to escape harm or the risk of harm, including harm relating to family violence..’* under “Leaving premises for care and other compassionate reasons” (Part 3 – Reasons to leave premises, 7(1)(i), page 4 of 9). The Victorian Department of Health and Human Services’ website has a [section for people experiencing family violence](http://www.dhhs.vic.gov.au/family-violence-crisis-response-and-support-during-coronavirus), but it is not easy to find.

We cannot assume that people experiencing domestic or family violence will have the chance to read the detail. With the Stay at Home Directions, victim survivors are even more at risk. The perpetrator has more chance to control their access to information; their phones; the internet; to family and friends.

Throughout the lockdown, many Victorian councils were actively involved in raising community and staff awareness of family violence and promoting the helplines of support services.

For example, Melton City Council provided information to staff about support available for those who may be experiencing family violence, including highlighting the Family Violence Policy and leave access, various specialist family violence services, and the offer to ensure staff could safely access the council site to work if working from home was deemed unsafe. In addition, information was provided to the community during COVID through social media campaign highlighting “no excuse for violence” in partnership with western region councils through Preventing Violence Together.

Maroondah City Council contributed to the development of the ‘[Together for Respect at Home’](http://whe.org.au/tfer/wp-content/uploads/2020/04/2020.04.30-RRSM-Comms-Guide.pdf), a regional respectful relationships campaign run during COVID.

Nillumbik Shire Council’s Community Support Services for older people contacted all their clients several times to conduct a wellbeing check which included asking if they felt safe at home (if the telephone conversation allowed it). Family violence services were promoted on the [webpage](https://www.nillumbik.vic.gov.au/Living-in/Coronavirus-COVID-19/COVID-19-community-support) with information about family violence increasing during emergencies/pandemics. This included information about elder abuse.

Mitigate risk created by Stay at Home Directions (or similar) by making it clear in all communications that people can leave ‘In an emergency and to escape family violence’ and that domestic and family violence services are still operating.

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| **Recommendations:**1. Those involved in planning for and responding to emergencies and natural disasters need to include, as part of standard community messaging, more explicit information about family violence at the time of disaster for all cohorts.
2. Review emergency management frameworks, planning and responses, including local government’s role, to increase accountability, gender responsive policies and practices. This review could draw on local government’s ability to contribute to effective and tailored responses through both universal and tailored services and messaging.
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| **Issue** | 1. **An audit of previous parliamentary reviews focussed on domestic and family violence.**
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Councils agree that an audit seems sensible, providing it is not a rehashing of old ground. Presumably, it would be to identify learnings - to assess the extent to which the recommendations of past reviews have been implemented; identify what has worked well and what hasn’t and why etc – with the aim of improving practice.

Do successive inquiries form part of the evaluation of the National Plan?

Will the audit include a review of the:

* Senate Standing Committee on Finance and Public Administration References’ 2014 [inquiry into domestic violence in Australia](https://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Finance_and_Public_Administration/Domestic_Violence) as well as the lapsed 2015 [inquiry into domestic violence and gender inequality](https://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Finance_and_Public_Administration/DV_and_Gender_Inequality/)?
* House of Representatives Standing Committee on Social Policy and Legal Affairs’ [2017 parliamentary inquiry into a better family law system to support and protect those affected by family violence](https://www.aph.gov.au/Parliamentary_Business/Committees/House/Social_Policy_and_Legal_Affairs/FVlawreform)?

How does the audit relate to the Senate Standing Committee on Legal and Constitutional Affairs References’ 2020 [inquiry into domestic violence with particular regard to violence against women and their children](https://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Legal_and_Constitutional_Affairs/DV/Terms_of_Reference)?

Moonee Valley City Council argued that any audit of parliamentary reviews/inquiries should be complemented by action research to identify the barriers to successful implementation of recommendations from previous reviews.

Yarra City Council noted that any audit of past inquiries / reviews must tally the missed opportunities and use an intersectional lens to uncover any inherent bias in previous inquiries/reviews and to inform those to come.

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| **Recommendation:**1. Ensure the purpose and scope of any audit leads to improvement in practice and sharing of promising practice knowledge, including giving consideration to expanding the scope of the National Prevention Hub to host audit findings.
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| **Issue** | 1. **Any other related matters.**
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1. **Role of local government in preventing violence against women and improving gender equality**

Local government is the closest level of government to the people. This means that local government:

* is more flexible and responsive to ‘community’ needs than state or federal government
* advocates on behalf of their communities
* leads by example and exercising its power to implement equity measures
	+ directly delivers services, projects or programs in partnership with local services and their communities across the life-course where people live, learn, work, study and play
	+ invests in community-led action
* plays a major role in community education
	+ knows there are many communities within their geographical area of responsibility (by location, age, gender identity, sexual orientation, cultural identity – whether Aboriginal and Torres Strait Islander or other, people living with a disability, community group affiliation, faith, socio-economic status etc.)
	+ understands what approach or method is likely to work with their communities; and has closer relationships so can adjust the approach or method quickly if it isn’t working
	+ is more likely to be able to connect with people or groups who are hard to reach, either directly or through partnerships with local services
	+ facilitates discussion across the different stakeholders within their communities

Councils are also large employers, particularly in rural areas where many staff are also residents, which means they have significant capacity to influence and generate change through workplace-based efforts (including quotas across a range of demographics).

In 2017 the MAV commissioned an evaluation of the role of local government in preventing violence against women and promoting gender equality. The evaluation report highlights the “influence of local government in driving the social change necessary to achieve a society free from violence against women”[[19]](#footnote-20).

‘Local government’ is mentioned:

* Twice in the National Plan in relation to National Outcome 1: Communities are safe and free from violence:
	+ as a potential leader in promoting equal and respectful relationships in Strategy 1.1.
	+ as a setting for building primary prevention capacity in Strategy 1.2
* Once in the Evaluation Plan, as a potential stakeholder in review of the action plans
* Once in the Fourth Action Plan 2019-2022 (‘local councils’) as a setting for action
* Once in the Third Action Plan 2016-2019, as a co-designer with the Commonwealth government of “tools and resources …to engage with business, sporting organisations and community groups to promote action against violence and engage all levels of business to lead and collaborate on initiatives to drive a reduction in violence”[[20]](#footnote-21).
* Four times in the Second Action Plan 2013-2016 once, as a level of government that needs to address domestic and family violence related homelessness; once, as a contributor to the development of the National Settlement Framework via Australian Local Government Association; and twice as a setting for action.
* Once in the First Action Plan 2010-2013 as a setting for action.

Recommendation 94 of the Victorian Royal Commission into Family Violence was for the Victorian government to amend relevant legislation to “require councils to report on the measures they propose to take to reduce family violence and respond to the needs of victims”. The Victorian Public Health and Wellbeing Act 2008 was amended accordingly (section 26, clause (2) (ba)).

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| **Recommendation:**1. Include ‘local government’ in the next National Plan and associated Evaluation Plan and action plans wherever there is a reference to ‘Australia’s governments’ to recognise:
2. local government’s lead role in preventing violence against women and improving gender equality; it is not just a setting for action.
3. the achievements of local government, particularly in Victoria, in supporting victim survivors; working to prevent violence before it occurs; and in advancing gender equality (both as workplaces and within their communities).
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1. **Monitoring and evaluation of the next National Plan**

Recommendations 6, 8, 13 and 17 all relate to the next Evaluation Plan (repeated below).

1. In the next National Plan and associated Evaluation Plan, define ‘accessibility’ as ‘approachable, acceptable, appropriate, affordable, and available’ and support organisations to understand and use this broader definition.
2. An intersectional lens should be applied by those involved in developing:
3. the next National Plan and associated Evaluation Plan in order to fully understand and respond to what impacts a woman’s and/or LGBTIQ’s person’s ability to escape domestic and family violence.
4. Commonwealth policies, services, communications, grant programs, service funding etc.
5. Those involved in planning for the next National Plan and associated Evaluation Plan need to recruit a representative group of people to oversee development who should:
6. Recognise that factors that might increase risk, can also be a source of strength and resilience.
7. Apply an intersectional lens and a privilege lens – to think about and respond to the compounding effects of multiple risks and forms of disadvantage, inclusion and exclusion; and to identify and take steps to rectify the impact of unearned advantage based on race, age, gender identity etc.
8. Co-design consultation and communication plans with more representatives from each at risk group and listen to different voices within each group to understand what they need and how they think their needs could be met
9. Include ‘local government’ in the next National Plan and associated Evaluation Plan and action plans wherever there is a reference to ‘Australia’s governments’ to recognise:
10. local government’s lead role in preventing violence against women and improving gender equality; it is not just a setting for action.
11. the achievements of local government, particularly in Victoria, in supporting victim survivors; working to prevent violence before it occurs; and in advancing gender equality (both as workplaces and within their communities).
12. **Practical and symbolic recognition of the broad definition of gender**

Assigning a toilet as gender-neutral is a more inclusive approach to a ‘unisex’ toilet. Unisex toilet signs still use the binary male/female symbols which exclude people who identify as gender-diverse or non-binary. Gender-neutral toilet signs focus on the type of amenity rather than the potential user of the amenity.

**Gender neutral toilet sign example**[[21]](#footnote-22)



Recognising this, Victorian councils may wish to change the way they assign staff and community amenities within council buildings; however, they are constrained by regulations. The Building Code of Australia only counts toilets assigned male, female or unisex accessible when looking at the provision of amenities within buildings; it does not consider toilets assigned gender neutral.

Local government is usually responsible for public toilet facilities; and therefore, have more flexibility in the way they assign public toilets (depending on the layout of each site).

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| **Recommendation:**1. As an action under the next National Plan, advocate for Australian Building Codes Board to revise the definition of gender in the Building Code of Australia and to include gender neutral toilets.
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1. Nous Group for MAV (2017) *Evaluation of the role of local government in preventing violence against women* [↑](#footnote-ref-2)
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4. MAV, unpublished, Draft report on findings from the 2018/19 Gender equality/PVAW survey [↑](#footnote-ref-5)
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6. In 2014, the Australian Bureau of Statistics acknowledged that “identifying populations of interest such as Lesbian, Gay, Bisexual, Transgender and Intersex is a priority. However, there is currently no agreed standard for measurement of this data item and as such has not been included in the DCRF.” [https://www.abs.gov.au/ausstats/abs@.nsf/Lookup/by%20Subject/4529.0.00.003~2014~Main%20Features~Sex~5](https://www.abs.gov.au/ausstats/abs%40.nsf/Lookup/by%20Subject/4529.0.00.003~2014~Main%20Features~Sex~5), accessed 7.7.2020. The agreed standard for sex and gender variables is not an adequate response. [↑](#footnote-ref-7)
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15. Our Watch in partnership with GLHV (2017) *Primary prevention of family violence against people from LGBTI communities: An analysis of existing research* [↑](#footnote-ref-16)
16. Australian Bureau of Statistics, *1200.0.55.012 - Standard for Sex and Gender Variables, 2016* [↑](#footnote-ref-17)
17. The 'Male' response option is shown first due to tradition in the ABS and alignment with other collections, both in Australia and overseas. [↑](#footnote-ref-18)
18. In 2014, the Australian Bureau of Statistics acknowledged that “identifying populations of interest such as Lesbian, Gay, Bisexual, Transgender and Intersex is a priority. However, there is currently no agreed standard for measurement of this data item and as such has not been included in the DCRF.” [https://www.abs.gov.au/ausstats/abs@.nsf/Lookup/by%20Subject/4529.0.00.003~2014~Main%20Features~Sex~5](https://www.abs.gov.au/ausstats/abs%40.nsf/Lookup/by%20Subject/4529.0.00.003~2014~Main%20Features~Sex~5), accessed 7.7.2020. The agreed standard for sex and gender variables is not an adequate response. [↑](#footnote-ref-19)
19. <https://www.mav.asn.au/what-we-do/policy-advocacy/social-community/gender-equality>, accessed 4.7.2020 [↑](#footnote-ref-20)
20. Commonwealth of Australia (Department of Social Services) 2016 Third Action Plan 2016–2019 of the National Plan to Reduce Violence against Women and their Children 2010–2022 [↑](#footnote-ref-21)
21. [www.disabilityaccessconsultants.com.au/new-inclusive-gender-neutral-toilet-sign/](http://www.disabilityaccessconsultants.com.au/new-inclusive-gender-neutral-toilet-sign/) accessed 22 February 2019 [↑](#footnote-ref-22)