

DOMESTIC
VIOLENCE
VICTORIA

Monitoring the Family Violence Reforms

Submission

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YOUR VOICE AGAINST VIOLENCE

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1. About Domestic Violence Victoria (DV Vic)

Domestic Violence Victoria (DV Vic) is the peak body for specialist family violence response services for victim-survivors in Victoria. As such, DV Vic is recognised as the statewide voice of Specialist Family Violence Services (SFVS) responding to victim-survivors. DV Vic is a membership-based organisation and is accountable to its members, who also comprise its Board of Governance. DV Vic's core membership comprises statewide and regional specialist agencies working with victim-survivors of family violence across Victoria. DV Vic is an independent, non-government organisation that leads, organises, advocates for, and acts on behalf of its members utilising an intersectional feminist approach. However, the organisation is ultimately accountable to victim-survivors of family violence and works in their best interests.

DV Vic's work is focused on advocating for, supporting, and building the capacity of specialist family violence practice and service delivery for victim-survivors; system reform; and research, policy development and law reform. DV Vic analyses the views and experiences of member organisations, the evidence on family violence, and the lived experience of victim-survivors, and translates this into innovative and contemporary policy, practice, and advocacy.

DV Vic holds a central position in the Victorian family violence system and its strategic governance and is one of the key agencies with responsibility for providing family violence subject matter expertise, technical assistance, capacity building, and policy and practice advice to the SFVS sector, broader sectors, government, and other partners and stakeholders.

2. Language and Terminology Used

Family Violence

DV Vic recognises family violence as any behaviour that occurs in family, domestic or intimate relationships that is physically or sexually abusive; emotionally or psychologically abusive; economically abusive; threatening or coercive; or is in any other way controlling that causes a person to live in fear for their safety or wellbeing or that of another person. This definition includes violence within a broader family context, such as extended families, kinship networks and 'family-like' relationships which can include a paid or unpaid carer for people with disabilities; families of choice for LGBTIQ people; and cultural kinship networks.¹ In relation to children, family violence is defined as behaviour by any person that causes a child to hear or witness or otherwise be exposed to the effects of the above behaviour.²

Victim-Survivor

DV Vic uses the term victim-survivor to refer to both adults and children who experience family violence.³ The term victim-survivor includes all individuals and groups of people who are primarily

¹ Domestic Violence Victoria. (2020). *Code of Practice for Specialist Family Violence Services for Victim-Survivors* (2nd ed.). Domestic Violence Victoria. <http://dvvic.org.au/members/practice-development/>; *Family Violence Protection Act 2008* (Vic) s.5. http://www8.austlii.edu.au/cgi-bin/viewdb/au/legis/vic/consol_act/fvpa2008283/

² *ibid*

³ Domestic Violence Victoria, 2020.

targeted and affected by family violence. This is a gender-inclusive use of language is applied to acknowledge the disproportionate harms of family violence against people who identify as women and their children, while at the same time recognising that family violence impacts people across a diversity of gender identities, sexual identities, social and cultural contexts, and within various intimate partner and family and family-like relationships.⁴ DV Vic acknowledges the emerging evidence-base that is articulating the ways in which gender diverse and gender non-binary communities are targeted and affected by family violence, and which have been under-researched to date. DV Vic also acknowledges that intersecting systems of privilege and oppression translate to diversity in experiences and affects for different groups of victim-survivors.

Perpetrator/User of Violence

The terms ‘perpetrator’ and ‘user of violence’ are used interchangeably to refer to adults who use family violence. DV Vic acknowledges that across the spectrum of experiences and relationships in which family violence is perpetrated, family violence is most frequently and severely perpetrated by men. DV Vic understands this to be a manifestation of gender inequality and gender hierarchies in Australian society, and that people perpetrating violence also experience intersecting systems of both privilege and oppression.

3. Introduction

The years since the Royal Commission into Family Violence (Royal Commission) have been an exciting time to be part of the family violence sector in Victoria. Family violence has been firmly established as a priority social issue across the human and community services spectrum, as well as in the consciousness of Victorians. The Victorian community is more invested in ending family violence than ever before, and the mantra that ‘family violence is everyone’s responsibility’ is increasingly being embraced across all levels of society. Family violence is now part of the public discourse in Victoria in a way that it was not prior to the Royal Commission, as we all grapple with how victim-survivors of family violence – primarily women and children - can live lives free from family violence and how those who choose to use violence – primarily men – should be held to account and helped to change their behaviour. This has been particularly evident through the attention given to family violence in the aftermath of recent high-profile family violence homicides, as well as during the prolonged period of emergency wrought by the 2019/2020 Australian bushfires and the coronavirus pandemic

The years since the Royal Commission have also been a period of unprecedented investment in family violence prevention and response, with the Victorian Government investing nearly \$3 billion already to implement the Royal Commission’s recommendations. This investment has created rapid change reflective of an ambitious reform agenda, on a scale not previously attempted. The reform agenda has had a significant impact on the SFVS sector, as well as the broader systems that intersect with family violence such as civil and criminal justice, housing and homelessness, health, and child and family services. Some examples of success are emerging, primarily amongst them the strength of the Multi-Agency Risk Assessment and Management (MARAM) Framework⁵ and the Family Violence Information

⁴ *ibid.*

⁵ State of Victoria. (2018a). *The Family Violence Multi-Agency Risk Assessment and Management Framework*. Family Safety Victoria. <https://www.vic.gov.au/maram-practice-guides-and-resources>

Sharing Scheme (FVISS), and the flow on effects this has had on system-wide collaboration and coordination.

In many instances the impact of the immediate reforms is only just starting to be felt as the reform agenda moves from design to implementation and measuring outcomes. In this submission, DV Vic points to several areas requiring priority attention as the family violence reforms progress, chief amongst them being implementation coordination and planning, including greater transparency and accountability in reform governance. This submission also includes discussion of evidence emerging from the impact of the COVID-19 pandemic in relation to the agility and readiness of the family violence response system in Victoria to respond to whole of community crises.

DV Vic is grateful for the opportunity to provide our submission on the implementation of the Royal Commission recommendations to date. Our commentary primarily focuses on the impact of the reform implementation on SFVSs for victim-survivors, and the context within which SFVSs sit.

4. How the family violence system, and users' experience of it, changed since the Royal Commission.

The family violence response system is more inclusive:

DV Vic welcomed the broad suite of recommendations from the Royal Commission regarding developing a more inclusive and accessible SFVS sector and has been leading the sector in these reforms by championing inclusion and the adoption of an intersectional feminist approach. **Although there is significant progress yet to be made, several Royal Commission reforms have led to a more inclusive and accessible family violence response system for victim-survivors that is more aware of the structural barriers certain groups of victim-survivors face to accessing family violence support.**

Some examples of strengthened inclusion within the SFVS sector include:

➤ **More inclusive risk assessment framework**

MARAM risk assessment tools and practice guidelines regarding diverse communities has provided practitioners with a practical resource that guides them to consider the unique ways family violence risks manifest for different marginalised communities. However, the family violence risk assessment tool primarily draws from reports of family violence incidents in cis-gendered, heterosexual intimate partner relationships, and therefore further work needs to be done to expand the evidence base on risk factors associated with greater likelihood and/or severity of family violence for marginalised groups and develop accompanying risk assessment tools and guidelines.

➤ **Funding for SFVS targeting diverse communities**

Funding to increase capacity in the specialist family violence sector to work with client cohorts with specific needs has been increased. Funding for organisations which specialise in working with specific cohorts experiencing family violence, such as LGBTIQ organisations involved in the W/Respect Consortium, has also been increased. While these initiatives are in their early stages and have either not been fully implemented or fully evaluated for long term impact, DV Vic

welcomes the opportunity to further explore the potential of these initiatives and supports funding for these initiatives to secure sustainable systemic change.

➤ Inclusion capacity building for the SFVS sector

DV Vic has had some dedicated resourcing from Family Safety Victoria (FSV) to specifically work to build the capacity of the SFVS sector in the areas of Disability and LGBTIQ inclusion. As a result, **SFVSs have been supported to identify barriers to accessing support for people with disability and LGBTIQ community members, to compile and share practice resources and tools and to participate in communities of practice.** Awareness of the rights of people with disability and people who identify as LGBTIQ to access SFVSs has increased as a result of this inclusion capacity building work. Further, the duty for inclusive service delivery has been enshrined in the sector-led development and adoption of the strengthened DV Vic *Code of Practice for Specialist Family Violence Services for Victim-Survivors* (the Code).⁶

➤ Rainbow Tick Accreditation for SFVSs for victim-survivors

Recommendation 167 compelled SFVSs to obtain Rainbow Tick accreditation. Despite the resource-intensive nature of this work, **seven of the 20 SFVS funded to undertake the accreditation process have gained the Rainbow Tick, supported by the above LGBTIQ Inclusion role at DV Vic.** Further, Rainbow Tick How 2 training has been provided to over 100 organisations providing family violence response services. DV Vic recommends this work is continued via a sector-led, long-term capacity building approach that would ensure that LGBTIQ inclusion is owned and embedded in the sector.

➤ Specialist Family Violence Core and Cluster Redevelopment

The new 'core and cluster' model of specialist family violence refuge accommodation has strengthened the inclusive practices of refuge providers. With independent, disability accessible units and staff onsite to provide support, the core and cluster redevelopment is providing a built environment where victim-survivors with disabilities and complex needs such as mental health or substance abuse issues can be better accommodated. This work will be further enhanced by the specialist LGBTIQ-inclusive refuge project underway.

Further resourcing for SFVSs to embed inclusion in their work will enable this progress to continue, and it is important that it does continue as the changes intended by the Royal Commission recommendations are only just starting to be realised.⁷

The family violence response system has been strengthened through collaborative responsibility for addressing risk and safety:

Since the Royal Commission, the family violence service system has undergone immense change and reform. While much of this change is still underway and ongoing investment is required to achieve the

⁶ Domestic Violence Victoria, 2020.

⁷ Further details on specific examples of this can be made available to the Family Reform Implementation Monitor in follow up consultations.

full intent of the reforms, DV Vic has observed that the family violence response service system is increasingly focused on risk and safety and collaborative practice has been strengthened.

Impact of Risk Assessment and Management Reforms

Three interrelated reforms have been instrumental in improving risk assessment and management processes - the MARAM Framework, FVISS, and the establishment of the Central Information Point (CIP).

➤ MARAM Framework

The Royal Commission into Family Violence outlined how reform of the service system could provide consistent, collaborative approaches to risk identification, assessment, and management. The MARAM Framework⁸ is a crucial legislative instrument under Part 11 of the *Family Violence Protection Act 2008 (Vic)*⁹ (the FVPA) that enables the service system to appropriately respond to family violence in Victoria. With more than 855 organisations and 37,500 professionals currently prescribed to align their policies, procedures, practice guidance and tools to the MARAM Framework, **the Framework creates the system architecture and accountability mechanisms required to establish a system-wide approach to family violence risk assessment and management, and has been a vital mechanism to keep perpetrators in view and hold them accountable for their actions and increase the safety of victim-survivors.**

DV Vic member services have reported that the Framework has **supported a shared language of family violence, and an increased understanding of evidence-based risk factors from other sectors.** Importantly, the Framework sets expectations of practice across the service system and **is resulting in more consistent and collaborative service responses.** This has been a valuable tool to support specialist family violence services to advocate for victim-survivors and highlights to other organisations and sectors their legislated role in family violence risk assessment and risk management practice. The Framework incorporates a broad range of experiences and spectrum of family violence, including for Aboriginal and diverse communities, children, young people and older people, across identities, and family and relationship types. This has supported the service systems understanding of family violence across the community and provides foundational knowledge which can inform more inclusive and accessible services.

The framework has supported an emerging shared understanding of one of the key tenets of the Victorian family violence reforms - a tilt in focus to the perpetrator. This is articulated through the inclusion of evidence-based risk factors related to the perpetrator choice and actions and is further supported through use of the FVISS. The MARAM Framework creates a shared responsibility between individual professionals, services and whole sectors. The Framework supports a system-wide approach to enable perpetrator accountability and includes the efforts of all practitioners and services in the family violence response system, even if they are not involved in working directly with perpetrators. This allows the service to

⁸ State of Victoria, 2018a.

⁹ *Family Violence Protection Act 2008 (Vic)*. http://www8.austlii.edu.au/cgi-bin/viewdb/au/legis/vic/consol_act/fvpa2008283/

provide more options to keep victim-survivors safe, and for a stronger, more collaborative approach that can keep perpetrators in view and accountable for their actions and behaviours.

➤ **Family Violence Information Sharing Scheme**

Linked closely to the MARAM Framework is the FVISS, **a crucial mechanism that enables sharing of risk relevant information for the purpose of informing risk assessment and risk management.**

Created through the new Part 5A of the *FVPA*¹⁰, the FVISS aims to create a cultural shift in information sharing practice through change to the authorising environment. The aim of this shift is to support effective and enhanced assessment and management of family violence risk through information sharing between prescribed entities. The Scheme provides an often more complete picture of risk posed by the perpetrator of family violence. Where previously, individual professionals and organisations may have been reluctant or refused to share information due to an environment that prioritised perpetrator privacy over victim-survivor safety, in which shared responsibility for managing family violence risk was not established, and in which people may not have been able to seek information in an effective and timely way, **they are now compelled to contribute and share risk-relevant information.**

SFVSs report that **the introduction of the FVISS has been incredibly beneficial and is often hailed the most significant and impactful of the Royal Commission reforms.** Under the Scheme, SFVSs have access to or can request information that was often previously unavailable and invisible to the professionals responsible for managing victim-survivors safety. This informs risk assessment and at times has changed or escalated the assessment of the level of family violence risk to a victim-survivor and children. Risk-relevant information gained from Victoria Police (VicPol), Child Protection, Corrections Victoria, and services working with perpetrators is commonly shared and identified as being incredibly valuable to support victim-survivors safety and actively manage risk. As use of the Scheme becomes increasingly embedded across sectors and into practice, information from other services and sectors prescribed under the Scheme will further enhance family violence risk assessment and promote a shared responsibility between services.

Importantly, **information gained from other services greatly informs risk management activities.** Managing risk involves removing, reducing, or preventing the escalation of risk. As risk is dynamic and can change over time, it is important that information continues to be shared in an ongoing way to ensure risk management activities are appropriate. **The information gained through the FVISS is valuable in supporting informed decision making with victim-survivors and developing appropriate safety plans.** Where safe and appropriate, the information attained through the Scheme is often shared with the victim-survivor, such as information relating to previous family violence intervention orders (FVIOs)/breaches, and criminal history and prison release dates. It is not uncommon for this to be new information for the victim-survivor, yet it is essential to their safety planning.

When coupled with robust safety planning, **victim-survivors have reported a range of positive benefits of having access to the information provided under the FVISS, including feeling more**

¹⁰ *ibid.*

confident in the SFVS, having the ability to take back control of their life, an improved sense of safety and stability, and reduced anxiety and improved mental health.

➤ **Central Information Point**

The introduction of the CIP has heralded a transformational change in the way that victim-survivor, perpetrator response, and children and family services undertake their work in assessing and managing family violence risk. The CIP is a key feature of the FVISS that allows 'risk relevant' information to be shared quickly and effectively between systems and organisations. By providing family violence practitioners with a consolidated report of a perpetrator's history and level of risk, the CIP report contributes to the overall aims of the information sharing reforms in keeping perpetrators in view and accountable and promoting the safety of victim-survivors of family violence.

DV Vic members that have had access to CIP Reports to date consistently report that the information accessed from Corrections, Police, Courts and Child Protection databases that is contained in CIP reports is critical to assessing family violence risk for victim-survivors (including children) and informing risk management and safety planning. Information that informs a risk assessment is time critical and the responsiveness of the CIP and capacity to generate a comprehensive summary report rapidly has enhanced risk assessment processes.

Currently, CIP reports are only available to intake and assessment practitioners delivering services within the Support and Safety Hub model. As the Hubs are just one part of the family violence response service system, **for the value of the CIP to be fully realised, CIP reports must become available to rest of the SFVS service not being delivered within the Hub, as well as those SFVSs not yet participating in a Hub.** This would support consistent practice across the system and ensure timeliness of risk assessment no matter where the victim survivor enters the family violence response system.

Support and Safety Hubs¹¹

One of the key recommendations made by the Royal Commission was the introduction of Safety and Support Hubs, to be established throughout Victoria. These have been implemented under the brand of The Orange Door, and bring together a number of community service organisations (CSOs), including SFVSs, child and family services, perpetrator services, Aboriginal services, and community-based Child Protection to provide a multi-disciplinary, coordinated, holistic response to adult and child victim survivors and perpetrators across a range of safety and wellbeing issues.

While several multi-agency family violence service delivery models were in place prior to the Royal Commission and still exist in regions where Support and Safety Hubs have not yet been established, **the introduction of the a co-located space for multi-agency and multidisciplinary service delivery has provided a new opportunity to further strengthen a coordinated and collaborative family violence response system.** Underpinned by the principles and processes of partnership, information sharing, and joint case planning, **the Hubs model allows practitioners to learn from their colleagues in other**

¹¹ A comprehensive discussion of DV Vic's position on the design, implementation and evaluation of the Support and Safety Hubs can be found in the forthcoming *Position Paper on the Support and Safety Hubs Model & Implementation (2nd Edition)*.

disciplines, foster improved working relationships, and combine expertise to respond holistically to client needs. This collaborative approach to assessing and responding to family violence risk has particularly benefitted from the information made available via the CIP, equipping practitioners with timely, relevant information to assess and manage risk.

Risk to children from family violence is a focus but further investment in cross-sectoral collaboration required:

The MARAM Framework and accompanying practice guidance (foundational and responsibility-based), provides detailed guidance to practitioners to recognise children as victim-survivors in their own right and to acknowledge their unique experiences, vulnerabilities and needs, including the effects of trauma and cumulative harm arising from family violence, whether they were directly or indirectly exposed to it.

The safety and well-being of children and young people affected by family violence has always been at the forefront of specialist family violence service delivery, and SFVS in Victoria have for decades developed strategies to support children and young people affected by family violence. Child-centred practice is a key feature of SFVS practice, including advocating and supporting other sectors to understand the impact of perpetrator's use of violence on the child. **The MARAM Framework builds on the existing good practice in the SFVS sector and complements and enhances best practice approaches to assessing and managing family violence risk to children and young people.**

Importantly, children's unique risks and needs are assessed independently, as well as in the context of the needs and risks of the adult victim-survivor and other family members. The MARAM Child Risk Assessment Tool allows this to be done directly with the child if age and developmentally safe and appropriate, or indirectly through the adult victim-survivor or parent/carer.

The MARAM Child Risk Assessment Tool supports practitioners across the service system to understand and ask questions about children's risk, well-being, and impact of family violence. When risk to a child is assessed through the parent/carer – this not only helps the practitioner understand their risk and situation better but also helps parent/carers reflect on children's experiences and provides an opportunity to provide psychoeducation and support.

As more workforces that have responsibility for child safety implement and align practice to MARAM, it will enable greater collaboration and shared responsibility for children's safety and management of family violence risk. Further development of statutory and non-statutory workforces is required to enable shared understanding and professional collaboration across family violence, Child Protection, child, youth and families and education sectors.

Flexible brokerage and support funds have made a major difference to the lives of victim-survivors:

While Family Violence Flexible Support Packages (FSPs) and the Personal Safety Initiative (PSI) (a key element of a Safe at Home approach) were in existence prior to the Royal Commission, the Royal Commission recommended the expansion of both initiatives.

The introduction of statewide access to FSPs has revolutionised the nature and timeliness of specialist family violence support. The inherently flexible nature of the packages mean that support can be

tailored in a more responsive and agile way to address the unique risks, needs, and impacts of family violence for each individual victim-survivor, including children. FSPs provide options for accessing immediate safety for victim-survivors that were not available historically, such as facilitating access to alternative short- and long-term accommodation or being able to safely stay at home through the purchase of security measures via the PSI, thus avoiding clients having to go into crisis accommodation and/or rely on insecure housing arrangements. **FSPs enable mitigation of family violence crisis and can prevent adult and children victim-survivors from experiencing significant disruption and dislocation that living with family violence typically creates.** They have been crucial to meeting the rights and needs of victim-survivors with temporary visas.

FSPs also increase the dignity and choice of victims-survivors when they are rebuilding their lives as a result of family violence. They enable them to buy good quality material items to assist with their recovery, as well as purchase specialised counselling, training and education courses and materials, and pay off bills and debts that would have otherwise inhibited their recovery from family violence. **Children benefit due to the safety and stability gained by a safe parent and can also access funds directly for their own needs, such as resources for education and connection to community via after-school clubs.** FSPs assist victims-survivors to regain autonomy and independence in the face of family violence and have become an integral intervention option in the SFVS support model.

The introduction of FSPs has also improved efficiency within the system. Case workers no longer have to use valuable hours searching for charities and donated goods to fill gaps in service provision to victim-survivors, meaning they can dedicate more time to frontline, direct support for other clients. **SFVSs report that FSPs provide greater opportunities for stabilising a victim-survivor's situation earlier, thus preventing cases from escalating to more complex situations and minimising client churn through the system, retaining more whole of system resources overall.** The introduction of this flexible, individually tailored support option has potentially prevented costs snowballing in other areas, including within the homelessness service system.

In particular, the PSI has been integral in ensuring victim-survivors and their children can remain safely in their homes and communities, decreasing the likelihood of homelessness, unemployment, and loss of community connection. The ability of a PSI technological response to gather evidence of perpetrator illegal activity supports the systems tilt towards perpetrator accountability. Additionally, increasing victim-survivors' sense of actual and perceived safety embeds independence and empowerment, aiding them to move on from the abuse. PSI, FSPs, and the broader Safe at Home programs must be embedded as permanent elements of the family violence service system.

Specialist Family Violence Service practice has been enhanced through investment in specialist capacity building:

In its practice leadership role, DV Vic works to improve professional practice, support service and program development, and provide expert advice to practitioners across the SFVS sector. DV Vic's Practice Development Unit also has a secondary role in providing specialist advice in family violence practice to non-specialist service sectors.

Specialist workforce development, training and education sits with the Domestic Violence Resource Centre Victoria. With the merge of DV Vic and DVRCV in 2020/21 the integration of the key practice and workforce development functions that currently sit across both bodies extending our reach and

engagement with members and stakeholders and will build the capability of existing and emerging workforces to prevent and respond to family violence.

As both a direct and indirect result of recommendations made by the Royal Commission, **DV Vic has been funded to significantly increase its capacity building activities in the specialist family violence sector. This has enabled DV Vic to develop and refine practice responses in services across Victoria.**

Most notably, DV Vic has been enabled to expand its coordination of statewide programs to three programs; the Risk Assessment and Management program (RAMP), the PSI (and FSP program), and the Family Violence Advisor program which operates in alcohol and other drug and mental health settings. **The statewide coordination of these programs ensures consistency and quality across geographical regions and the continual refinement of the program design which is informed by the program providers and by broader system reform processes.**

Maintaining program model fidelity and statewide consistency ensures accountability, accessibility and quality for all program clients in Victoria. Statewide coordination also enables the identification and analysis of local area and statewide issues, and advocacy and liaison with key stakeholders to resolve issues.

Underpinning DV Vic's work to strengthen SFVS practice and service delivery in the reform environment is the second edition of the *Code of Practice: Principles and Standards for Specialist Family Violence Services for Victim-Survivors*,¹² accompanied by a comprehensive implementation plan. The review and strengthening of the *Code* – the first of its type when initially published in 2006 – was an independent project resourced by DV Vic, which reflected Recommendation 40 of the Royal Commission to redevelop relevant policy frameworks and service standards for key health and human services that respond to family violence.

Investment in coordination of statewide programs and embedding the *Code* across the full spectrum of SFVS service delivery and practice are key elements to enhancing the quality and capability of the SFVS sector now and into the future, ensuring the sector is equipped to respond to the increasing complexity of the work. **Continued investment in DV Vic's role and expertise in leading the SFVS sector in practice development will significantly assist the vision of the Royal Commission recommendations to be realised.**

5. Looking forward: What is still required of the family violence reforms.

Planning and coordination of the reforms is still a critical issue:

DV Vic endorses previous findings of the Family Violence Reform Implementation Monitor (FVRIM) that planning and coordination of the Royal Commission reforms is a critical issue. DV Vic recognises the inherent challenges of administering a reform of this scale according to the timelines set by the Royal Commission. However, **the approach taken by Government to the implementation of the reforms**

¹² Domestic Violence Victoria, 2020.

throughout the last four years has been impeded by a lack of planning, mapping of interdependencies and sequencing, and coordination.

Reform governance structures must be more effective:¹³

While there are complex whole-of-government governance structures in place to oversee the family violence reforms, **these are difficult to navigate and have not translated into effective implementation of the reform agenda. It is unclear who is overseeing the entire reform and how, and where the authority and responsibility sits for whole-of-government coordination of the reform implementation.** As a result, government departments with responsibility for implementing Royal Commission recommendations are doing so in silos - without attending to inter-department interdependencies and being accountable to the vision for a coordinated, whole of system response to family violence. This has significantly contributed to the fragmentation in reform implementation planning and sequencing, which in turn has made it difficult for the non-government sector to participate, navigate, and effectively implement reforms in the context of their own sectors.

The Royal Commission recommended an independent Family Violence Agency be established by statute as the 'system-owner' of the family violence reforms. DV Vic believes that **the absence of such a body to oversee the reform implementation has undermined the success of Royal Commission reform agenda.**¹⁴

The Family Violence Steering Committee has not been able to mitigate the gaps in reform governance and create more effective steering of the reforms and gain accountability from government, as it functions as a stakeholder advisory group rather than a true governance mechanism. **DV Vic is confident that if the Victorian Government is open to engaging and collaborating with the non-government sector in the development of more effective governance structures, the expertise and evidence-based held in the non-government sector will be critical to setting and achieving the strategic directions of the reform agenda.**

As an agency within the Department of Health and Human Services (DHHS), FSV has a dedicated focus on delivering family violence reform with a specific remit related to service responses to family violence, risk assessment and risk management, and workforce development.¹⁵ FSV also has a cross-government and cross-sector role related to family violence practice responses.¹⁶ However, **FSV cannot compel other government agencies to work collaboratively to implement the family violence reforms in a coordinated way. Additionally, tensions in governance and program management related to SFVS reform, funding, and service delivery have developed.**

Acquittal of recommendations without a focus on outcomes:

Interconnected to the previous two points, **there has been a focus in implementation of the reforms on 'acquitting' the Royal Commission recommendations rather than on whether the intended outcomes of the recommendations have been achieved.** This 'tick-box' approach to implementing the reforms has and will continue to impede the creation of systemic and sustainable change in the

¹³ Further details can be provided in subsequent consultations or supplementary submissions to the FVRIM.

¹⁴ Further details can be provided in subsequent consultations or supplementary submissions to the FVRIM.

¹⁵ Victoria State Government. (2018). *Family Safety Victoria*. DHHS. <https://www.dhhs.vic.gov.au/family-safety-victoria>

¹⁶ *ibid.*

prevention and response to family violence and limits achieving the true vision of the Royal Commission focused on transforming the family violence system in Victoria.

The family violence response system is yet to pivot towards the perpetrator:

The Royal Commission stated the importance of collective response and responsibility across all relevant government and non-government agencies to improve perpetrator interventions and keep perpetrators in view and accountable. However, despite progress emanating from recommendations related to interventions with perpetrators, the family violence response system is yet to pivot towards the perpetrator.

Responsibility Remains with Victim-Survivors

The Centre for Innovative Justice wrote that ‘while victims of family violence must remain our priority, these victims will also remain at risk unless we step back and widen our gaze.’¹⁷ Yet, **it is still common across the family violence response system for the focus of interventions to be on the choices and actions of victim-survivors rather than perpetrators.** For example, within the Child Protection system where – despite the acquittal of many Royal Commission recommendations within the children and families system - SFVSs still report that mothers are expected to take responsibility for keeping their children safe by keeping the perpetrator out of the household, rather than the statutory and non-statutory systems engaging perpetrators to take responsibility for the effect their behaviours have on their family. Additionally, there are numerous examples of ways the justice system colludes with perpetrators of family violence to enable them to leverage the justice system to perpetrate family violence. As a result, **DV Vic remains concerned that key professionals in the coordinated family violence response system continue to collude with perpetrators.**¹⁸

MARAM Implementation

SFVS have continually taken an educative role with other services, including Child Protection, highlighting perpetrator patterns and impact of violent behaviour, advocating on behalf of victim survivors, challenging attitudes that collude with the perpetrator and supporting services to tilt to the perpetrator. **This illustrates the importance of implementing the FVISS and delivering MARAM training and ongoing coaching and consultation from family violence technical experts to all sectors with an emphasis on how to keep perpetrator in view and accountable to protect adult and child victim-survivors in a coordinated way.** This will be particularly important when implementing the forthcoming MARAM practice guidance for working with perpetrators of family violence, particularly with broader community services responding to family violence.

Under-Investment in Specialist Family Violence Services for Perpetrators

Funding has increased for services for perpetrators, including counselling and behaviour change programs, and a case management guide for supporting perpetrators has been developed. These

¹⁷ Centre for Innovative Justice. (2015). Opportunities for Early Intervention: Bringing Perpetrators of Family Violence into View. RMIT University, p. 6. <https://cij.org.au/research-projects/opportunities-for-early-intervention-bringing-perpetrators-of-family-violence-into-view/>

¹⁸ Centre for Innovative Justice. (2016). Pathways Towards Accountability: Mapping the Journeys of Perpetrators of Family Violence. RMIT University, p. 18 <file:///C:/Users/Lesly%20Zambrano/Desktop/Perpetrator%20literature/Pathways%20towards%20accountability%20November%202016.pdf>

resources increase accessibility to support for people perpetrating family violence and pave the way for improved responses to perpetrators in Victoria, including increasing the capacity of SFVSs for perpetrators contribute to the coordinated, whole of system response to family violence.

However, funding to SFVSs for perpetrators is fragmented and insufficient. As a result, there are inconsistencies in program quality and requirements, and significantly long waitlists for perpetrator behaviour change programs. To date, there are no systemic responses to the accommodation needs of perpetrators. **This manifests as an inability to rapidly respond to the safety of victim-survivors including children through prompt intervention with perpetrators.**

Expert Advisory Committee on Perpetrator Interventions Report

In their 2019 report, the Expert Advisory Committee on Perpetrator Interventions (EACPI) made 22 recommendations for creating a family violence response system that keep perpetrators in view utilising a victim safety-centred approach which DV Vic endorses. **While some of the recommendations have been progressed, it is not clear if it is the Victorian Government's intention to fully implement the EACPI recommendations.** DV Vic supports the establishment an Expert Reference Group to provide oversight and guidance to the implementation of the recommendations and perpetrator interventions within the overall statewide family violence governance architecture.

Intersectionality needs to be properly understood and applied:

DV Vic has consistently advised the Victorian government that an 'intersectional approach' to the family violence reforms is being misinterpreted in policy and misapplied in practice guidelines. DV Vic and our members have feedback to government that the core elements of intersectional theory are being co-opted through the Victorian government's policy framework, and the roots of intersectionality in Black Feminist activism and the work of Kimberlé Crenshaw has been obscured, diluting the inherently radical and feminist underpinnings of the intersectional approach.

Intersectionality as represented through *Everybody Matters: Inclusion and Equity Statement*¹⁹ (the Statement) is used as a proxy for diversity and inclusion without any analysis of power, privilege and exclusion. The accompanying blueprint for implementation of the Statement has not been released, meaning that there has been no overarching statewide plan put in place to embed 'intersectionality' as it is articulated in the Statement, in the family violence reforms (including the ongoing approach to SFVS sector capacity building), as well as no means for monitoring or evaluating the effectiveness of the Statement or its outcomes.

Where there have been attempts to provide practice guidance for practitioners on the implementation of the Statement, including for example, *Embedding inclusion and equity: An intersectionality framework in practice (Draft)*,²⁰ a practice guideline for the SFVS sector on implementing intersectionality, this has required extensive feedback from DV Vic and the SFVS sector, to improve the interpretation of intersectionality. FSV's work on finalising the framework has stalled since September 2019, and **it is DV Vic's view that ultimately it is the SFVS sector that should lead the development and implementation of technical resources such as this with government's support.** DV Vic believes that if

¹⁹ Family Safety Victoria. (2018). *Everybody Matters: Inclusion and Equity Statement*. State Government of Victoria. <https://www.vic.gov.au/everybody-matters-inclusion-and-equity-statement>

²⁰ Family Safety Victoria. (np). *Embedding inclusion and equity: An intersectionality framework in practice (Draft)*. State of Victoria.

the family violence sector is resourced to undertake reform activities of this sort itself, the tools will be better informed by the expertise and experience of the sector, connection to practice and more successfully implemented.

Support & Safety Hubs have not improved responses to victim-survivors or perpetrators of family violence:

The sector recognises that the introduction of the Support and Safety Hubs model of coordinated and co-located service delivery is a significant systemic change to family violence service delivery, that requires meaningful and iterative reflection and corresponding collaborative development. DV Vic, as the peak body for the SFVS sector, has continually contributed its expertise to the design of the Hubs.

However, it is the view of DV Vic and our members that **the Hubs require significant changes to improve responses to family violence**, which significantly aligns with the recent findings of the Victorian Auditor General's Office finding on the implementation and establishment of the Hubs to date in Victoria. DV Vic outlined the sector's assessment on the design and implementation of the first five Hubs in a position paper published in 2019.²¹ This paper outlined model and implementation issues related to purpose, governance, service delivery and practice, and continuous improvement and evaluation and made many recommendations for change and greater engagement with sector experts.

A second edition of this position paper is under development, and in-depth consultation with SFVSs delivering support within the Hub model has indicated there are no significant improvements since the first paper was published.²²

Implementation of MARAM across universal services:

While the MARAM Framework and MARAM Victim-Survivor Practice Guides have been released, implementing the Framework requires significant culture change and system reform which will take additional time and effort at all levels of the service system.

MARAM Alignment

The alignment timeframe for MARAM implementation is described as a 'maturity model'. Government advises this approach recognises the complexity of the service system and the variable starting points and stages of family violence practice literacy across different sectors. It is intended that the maturity model will provide flexibility so that organisations can begin the alignment process in the way that is most appropriate for their current level of maturity, and to be supported to progress to higher levels.

However, the complexity of the cross-system nature of the MARAM reforms, as well as the use of the 'maturity model' has **resulted in poor sequencing of reforms, lack of resources and practice guidance to accompany implementation, absence of guidance on what constitutes MARAM alignment and lack of workforce development even 18 months after organisations were prescribed**. Of concern, if there is a serious incident or death, it is prescribed services that carry the burden of responsibility and will be liable if risk assessment and management responsibilities under the MARAM have not been met. It is

²¹ Domestic Violence Victoria. (2019). *Position Paper on the Support and Safety Hubs Model & Implementation*. DV Vic.

²² In order to provide a comprehensive overview of the position of DV Vic and the SFVS sector on the Support and Safety Hubs, the second edition of the position paper will be provided separately to the FVRIM's Office in September 2020.

vital that prescribed workforces understand their accountability and have timely access to the resources, training and ongoing capability building they need to support alignment to MARAM - without which, the full intent of the reforms will not be achieved. To support this, **MARAM alignment needs to be clearly articulated, incorporated into service agreements and be considered as part of the Human Services Standards.** Further, **sustained and specialist-led practice and organisational development focused capability building should be a core element of the future implementation strategy.**

MARAM Resourcing

Since the commencement of the reforms, DV Vic and our member services have seen the beginnings of a cultural shift across workforces. For sectors that did not previously see family violence as 'their work', this cultural shift is underway, and practitioners and clinicians are beginning to recognise and identify family violence and understand their respective roles within the family violence system. DV Vic members advise that referrals to SFVSs have increased from these workforces as a consequence. However, **concerns remain regarding the family violence knowledge and practice in these workforces.** These include referrals made to SFVSs that have not been discussed with or consented to by the victim-survivor and level of risk not identified.

This appears to stem from a lack of risk assessment capability and confidence in appropriately identifying levels of family violence risk. This is understandable considering that these workforces were prescribed in September 2018 but were unable to access the relevant MARAM Brief and Intermediate Training until early 2020 due to delays in funding and confirmation of practice guidance by the Victorian Government. The Centre of Excellence in Child and Family Welfare has 6,000 training spaces between February - October 2020 for mental health services, alcohol and drug services, child and family services, homelessness, and maternal child health services. Even with training commencing, **this is insufficient to meet the demand of the large workforces, and there is no concrete plan that has been communicated to the peak body DV Vic or the statewide training organisation Domestic Violence Resource Centre Victoria (DVRCV) that describes how the ongoing training needs of currently prescribed workforces will be met.** Additionally, messaging from government has been clear that practitioners should not use the MARAM tools without completing training. Consequently, **there are entire workforces prescribed that are unable to meet their responsibilities, and there is inconsistent understanding, practice, and tools in use across the service system.**

As practitioners and clinicians are able to access the training, and alignment work is undertaken in their organisations, we anticipate an eventual uplift in capability. However, **additional capability building activities and support (not just in the form of education and training) are required to embed the MARAM framework into practice and organisational policies and procedures.** As a family violence reform, **this work needs to be led by those with appropriate family violence expertise, to ensure the intent of the reforms are maintained.** It is imperative that education, training and support to align and embed the framework delivered to current workforces across the state (including the workforces within the Victorian government) has been developed and informed by those with specialist expertise in family violence and is delivered by similarly qualified and skilled trainers. Further, **it is essential that the content of training packages reinforces the roles, responsibilities and skills required at each stage of practice, and that the consistency of training packages is ensured across the state** in line with the requirements of having a common and statewide risk assessment and management framework.

Resourcing and Support of MARAM Phase Two

Key universal workforces, with a role in identifying and responding to family violence, such as hospitals, health and education workforces will come into scope as MARAM Framework prescribed organisations in 2021. This represents huge workforce numbers and as a result, the demand for training and capacity building activities will only increase. This is of great concern, particularly considering that current demand has not been adequately met. If phase two implementation is poorly planned, communicated and implemented, this will risk the success of the reforms, and ultimately the safety of victim-survivors. **It is vital that this work begins immediately, and that learnings from Phase 1 implementation are used to inform and improve the implementation approach and process.**

There is much to be learnt from the implementation of Phase 1 of these reforms. The Family Violence Reform Implementation Monitor report released in March 2019 highlighted the lack of a systemic approach to design and implementation of family violence reforms. The sequencing and scheduling of activities for the Phase 1 implementation is a clear demonstration of this. **The development of a comprehensive cross departmental implementation plan with key stages and change management activities is crucial for Phase 2 implementation.** Consistent and coordinated cross-departmental communications is required for sectors detailing a clear schedule of activities and capacity building strategies. This will enable organisations to effectively plan for the large workforce numbers coming into scope and be informed of what support and activities to expect. Additionally, with such a large workforce prescribed in Phase 2, consideration needs to be given for how these workforces are targeted for training. Within the current statewide training pool, TAFEs, registered training organisations and other organisations are now competing for the same small pool of trainers resulting in a shift of deficit from one sector or workforce area to another.

As with the Tier 1, 2 and 3 workforces, it is imperative that education and training delivered to current workforces across the state has been developed by those with specialist expertise in family violence. However, given the expanse of the workforces who are prescribed under this phase of the MARAM framework and the limited pool of specialist family violence trainers, a modified approach to delivery will be required. **DV Vic strongly encourages the use of a trainer capability building model led by a specialist family violence agency with a strong knowledge of the MARAM framework, adequate family violence expertise and training experience.** This trainer capability building model should seek to engage specialists who already work in universal services and training workforces who already understand these sectors and services, and work to build their confidence and comfort in the MARAM framework, the dynamics of family violence, and the issues associated with safety planning in a universal services context. A key element of this model would be ensuring quality of training provision and support for trainers across these service systems, and seek to have ongoing connection with these trainers as well as connect these universal services trainers with the specialist pool of trainers who have delivered training under phase 1 and 2 rollouts.

In addition to this trainer capability building model, **DV Vic recommends a combination of skilling and resourcing change champions within organisations as well as online resources to support practice and face to face and online training.** Future training and capacity building activities also need to have a greater focus on safety planning once family violence has been identified.

Finally, training alone is not enough to ensure the implementation of MARAM and the Information Sharing Schemes across prescribed workforces. **Successful implementation of the interrelated reforms**

requires significant organisational and cultural change management. This change should be led and coordinated by organisations with family violence expertise, without which the cultural change required will be compromised. Consequently, adequate on-going investment is required to support sustainability of the reform.

The full effect of the family violence reforms will never be achieved without long-term housing security for victim-survivors:

The Royal Commission found a strong link between being able to access long-term housing and victim-survivors' ability to recover from family violence²³ and subsequently made a series of recommendations to increase access to housing for victim-survivors of family violence. In response to these recommendations, the Victorian government funded the Family Violence Housing Blitz, increased funding for private rental assistance and flexible brokerage support programs like Flexible Support Packages (FSPs) and the Personal Safety Initiative (PSI), began investment in redeveloping family violence refuges into a core and cluster model, and initiated reforms to the Residential Tenancies Act.

Despite this dedicated investment, the scale and systemic nature of the housing affordability crisis means that these initiatives have been able to do little to improve access to long-term housing for victim-survivors of family violence. Almost four years after the Royal Commission released its report, the lack of affordable housing in Victoria remains one aspect of the reform where there has been very little progress, creating a significant barrier to the effective implementation of many of the other family violence reforms and limiting the success of reform overall.

A Safe at Home Response and Private Rental Brokerage

The Royal Commission found that best housing outcome for many victim-survivors of family violence is to be supported to stay in their own home.²⁴ As a result, initiatives focusing on housing for victim-survivors since the Royal Commission have predominately focused on strengthening Safe at Home responses. This has been predominately done by bolstering flexible brokerage funding through FSPs and PSI, which are now the main vehicles for providing Safe at Home responses in Victoria.

DV Vic believes that as a principle, a Safe at Home²⁵ response should be the preferred housing response to victim-survivors of family violence and supports the importance placed on this housing response to victim-survivors. However, a Safe at Home response is not appropriate for everyone, particularly if the risk of family violence is high and a victim-survivor is assessed as not being able to stay at home due to safety concerns.

Safe at Home responses are also predicated on an assumption that a victim-survivor has a home they can keep living in and that they will be able to sustainably afford their rent or mortgage on a single income. For many victim-survivors, this is not the case. Gender inequality in employment, pay, working

²³ State of Victoria. (2016). Royal Commission into Family Violence: Report & Recommendations, Vol II, Parl Paper No 132 (2014–16), p. 38 <http://rcfv.archive.royalcommission.vic.gov.au/Report-Recommendations.html>

²⁴ *ibid.*

²⁵ Safe at Home refers to a variety of interventions that enable victim-survivors to remain in their home, while the perpetrator of the family violence leaves, often with an Intervention Order (IVO) that includes exclusion provisions. Safe at Home interventions are based on the principle that victim-survivors of family violence should not be further punished and disadvantaged by being forced to leave their home and that sanctions should be directed towards the perpetrator instead.

conditions, and disproportionate responsibility for caring, as well as economic abuse, can compromise victim-survivors' ability to cover their rent or mortgage repayment on a single income. **Without long-term reform, a Safe at Home response underpinned by short-term financial assistance for up to 12 months, may reduce immediate risk of homelessness but not guarantee long-term prevention of housing insecurity and future homelessness for victim-survivors in precarious economic situations who are currently living in private rental or own their own home.**

Where a Safe at Home response has been assessed as not possible, private rental brokerage to facilitate access to the private rental market is often considered the next option. However, private rental brokerage programs present a similar problem. Most programs funded to support victim-survivors to access private rental, such as those funded through the Family Violence Housing Blitz including the Rapid Housing Program and Private Rental Assistance Program, are short-term interventions that subsidise rent for up to 12 months. **Although these programs are focused on tenants achieving stability and capacity to manage financially once the program ceases, victim-survivors can still be at risk of losing their tenancies due to the long-term economic impacts of family violence, placing them at ongoing risk of housing insecurity and homelessness.**

Victim-survivors experiencing intersecting forms of oppression and marginalisation such as racism, ableism and homophobia are among the least likely victim-survivors to be able to access Safe at Home responses unless they are already living in community or public housing. Access to private rental brokerage programs presents a similar problem because these groups are more likely to be deeply excluded from the workforce and reliant on income support payments. As a result, they are unable to afford housing in the private market. Victim-survivors on temporary visas are at an even greater disadvantage as many victim-survivors on temporary visas have come to Australia on either a sponsored partner visa or as asylum seekers or refugees and usually do not have work rights, access to income support or Medicare. Without any income, accessing private rental either through a private rental brokerage or Safe at Home response is unaffordable for this cohort. **This is a significant cohort of clients for the specialist family violence sector, which is increasingly at high risk of homelessness, a risk that the family violence reforms have had little mitigating effect on.**

Homelessness and housing security among victim-survivors considered in isolation from broader system reform

The expansion of the FSP and PSI programs to increase Safe at Home responses and complement private rental brokerage capacity has provided significant, positive differences to victim-survivors. These initiatives are critical components of the family violence system's response to victim-survivors and should be continued. However, **these initiatives have largely been implemented in isolation from broader systems reform, particularly in regard to reform in the justice system and reforms to the supply of affordable housing:**

➤ **Justice:**

To truly keep a victim-survivor safe, Safe at Home responses require the housing and specialist family violence systems to work in a coordinated way with the justice system to ensure the needs of victim-survivors are met and perpetrators are held accountable. This is particularly true when it comes to victim-survivors' ability to access consistent legal and police protection, and their ability to get a FVIO to exclude the perpetrator from the home. However, for FVIOs

to be effective they must be enforced by police. Unfortunately, enforcement of FVIOs continues to be inconsistent and unreliable. However, **without a robust justice system that has pivoted towards the perpetrator, Safe at Home responses are likely to be reduced to a range of technological fixes which alone cannot provide victim-survivors with the security they need to remain safe or the ability to hold perpetrators accountable for their actions.**

➤ Social Housing

To be truly transformational, the family violence reforms need to address the chronic shortage of affordable housing. While the Family Violence Housing Blitz resulted in a small number of new social housing units, the majority of housing initiatives funded as part of the family violence reforms has focused on increasing Safe at Home responses and increasing access to the private rental system for victim-survivors. As discussed, while these responses produce positive outcomes for many victim-survivors, they are not suitable for everyone - particularly systemically marginalised groups of victim-survivors - and do not necessarily result in sustainable housing solutions.

Safe at Home responses and other private rental brokerage programs are not enough to counter the decades of under investment in community and public housing. Large-scale, sustained investment in social housing in Victoria is needed and would enable the Victorian Government to better deliver on the family violence reforms. In fact, without substantial investment in social housing, it is DV Vic's view that the efficacy of the family violence reforms will be limited. For instance, family violence refuges and other crisis accommodation still report that **victim-survivors are spending months in family violence refuge because there are no longer-term housing options to which they can exit clients.** For victim-survivors with specific housing needs, such as victim-survivors with a disability and accessibility requirements, these stays are much longer. **These extended stays in refuge and crisis accommodation results in less availability of family violence crisis accommodation, pushing many victim-survivors in motel accommodation for many weeks. Without an increase in safe and affordable, long-term housing options for vulnerable and complex victim-survivors of family violence, this is unlikely to change.**

DV Vic is a member of the Statewide alliance of Housing Peaks. As a member of this alliance we have **urgently called on the Victorian government to develop a social housing strategy and increase social housing stock by 6,000 properties (including 300 Aboriginal specific social housing properties) per year over 10 years in order to match the national average of social housing,** accounting for 4.5 per cent of total housing stock. It is our view that without this level of investment in social housing a whole of government family violence reform, as envisioned by the Royal Commission, will not be achieved.

The rights and needs of survivors of family violence with temporary migration status are not being met:

Women on temporary visas who experience family violence face systemic barriers and challenges if they try to leave a violent relationship. Temporary visa status can be used by perpetrators as an additional tool for coercion and control and if victim-survivors are in Australia with no family or friendship networks, it can result in them being exceptionally isolated and dependent on the

perpetrator. If victim-survivors leave a violent relationship, they are likely to have to navigate multiple complex and confusing systems (i.e. legal, migration, social security, family violence systems) with no guarantee that they will be able to access support and safety, as eligibility to access the family violence provisions in the *Migration Regulations 1994*²⁶ and for health, welfare, working and social security rights is dependent on the type of visa held, rather than safety. This creates confusion, complexity, and inequality for victim-survivors of family violence who may hold different types of temporary visas and provides further opportunities for perpetrators to exploit this uncertainty to continue to control and manipulate a victim-survivor.

DV Vic endorses the [Blueprint for Reform](#)²⁷ developed by the National Advocacy Group on Women on Temporary Visas Experiencing Violence which contains reforms to achieve safety for women on temporary visas and sets out three steps to improve women's and children's access to safety and justice. Specifically, it calls on the Commonwealth, and State and Territory governments to:

1. Improve Migration Law so that all women on temporary visas who experience domestic, family and sexual violence and their dependants can access protections, services and justice.
2. Ensure eligibility and access to services and government support are based on women's needs for safety and recovery, regardless of their migration status.
3. Ensure that women on temporary visas who have experienced domestic, family and sexual violence and their dependants have immediate and full access to safety, protection, justice and fully funded specialist support with demonstrated gender expertise and cultural competency.

Whilst acknowledging the Victorian Government's commitment in elevating this issue at the Commonwealth level and for funding initiatives such as the grants for victim-survivors on temporary visas in refuge and the additional funding recently provided to InTouch,²⁸ more remains to be done to ensure that all women on temporary visas who experience family violence have full access to the safety, protection, justice, and service responses they require. **This includes reassessing whether Recommendation 162 has been fully 'implemented' or is still 'in progress'**, as it has not resulted in victim-survivors who experience violence perpetrated by a family member other than a person's spouse being able to access the family violence provisions in the *Migration Regulations 1994* (Cth). This was the intended outcome of Recommendation 162 and **illustrates again the focus on acquitting recommendations based on an 'output' rather than whether implementation has resulted in a desired outcome.** Long-term structural change and collaboration from all levels of government is required to address the systemic barriers women on temporary visas currently encounter and to ensure that they

²⁶ *Migration Regulations 1994* (Cth), Division 1.5 - Special provisions relating to family violence. http://classic.austlii.edu.au/au/legis/cth/consol_reg/mr1994227/

²⁷ National Advocacy Group on Women on Temporary Visas Experiencing Violence. (2019). *Blueprint for Reform: Removing Barriers to Safety for Victims/Survivors of Domestic and Family Violence who are on Temporary Visas*. AWAVA. https://awava.org.au/2019/10/02/research-and-reports/blueprint-for-reform?doing_wp_cron=1586832267.3699860572814941406250

²⁸ InTouch June 2020 Newsletter: Funding provided for brokerage to support women in crisis and to support their in-house community legal centre.

are never placed in the impossible situation where they return to a perpetrator because their visa status makes them ineligible to access long-term support and safety.

The sustainability of the specialist family violence workforce is under threat:

The SFVS sector is experiencing severe workforce shortages. There are not enough qualified and experienced workers to fill existing and emerging roles, and SFVSs report ongoing difficulties retaining existing staff due to institutional inequalities related to gender, pay and conditions, and role complexity. As a result, it continues to be impossible to meet client demand in a timely way. This is occurring at the same time as demand for services is increasing, the system is becoming more complex, and services are expected to respond to constant change and systemic transformation. The Royal Commission recognised that ‘specialist family violence services are overwhelmed by high levels of demand’ which affects their ability to provide services to everyone who needs them. This is as true today as it was in 2016.

FSV and the family violence sector have been working to address workforce shortages through the *Building from Strength: 10-Year Industry Plan for Family Violence Prevention and Response* (the Industry Plan)²⁹ and associated qualification, recruitment, and retention initiatives. However, the increased awareness of family violence and associated demand, combined with the time it takes to recruit, train and orient new staff and the time required for the new workforce reforms to come into effect (for example, implementation of the qualifications framework related to Recommendation 209) means that the results of these efforts have yet to be felt.

A number of pressure points have developed that particularly threaten the sustainability of the SFVS workforce, including:

- Increasingly complex and high-risk presentations of family violence, which put added pressure on case workers and extends the amount of time needed to be spent on each case.
- Decreasing capacity for early intervention & secondary prevention with victims-survivors assessed as low risk and low need, which anecdotal evidence suggests translates to higher longer-term demand when many of those clients re-present within the system at higher risk, contributing to complexity described above.
- Recruitment of newly qualified and/or inexperienced staff requiring additional & intensive support, training and supervision in order to meet client demand immediately.
- Lack of structural support (i.e. via adequate funding) resulting in gaps in middle management roles and resources required to manage and lead larger teams, undertake capacity building of newly qualified and/or inexperienced staff, backfill gaps in workforce, lead change, and support senior leadership.
- Increasing demands on senior leadership to participate in reform activities and be stewards of large-scale change & alignment within their services/organisations.

All of the above points are significantly contributing to workforce burnout and attrition. This in turn creates instability in organisational continuity and culture which can further exacerbate pressures on remaining staff. In addition, in the reform environment, family violence skills and experience have become highly sought after by other sectors (including the public sector) that can offer better wages and conditions. This has led to further attrition of specialist family violence staff - particularly

²⁹ Family Safety Victoria. (2017). *Building from Strength: 10-Year Industry Plan for Family Violence Prevention and Response*. State of Victoria. <https://www.vic.gov.au/building-strength-10-year-industry-plan>

experienced staff - to other sectors, leaving the family violence sector desperate for more staff at a time when demand has never been higher.³⁰

Recruitment and retention issues place further pressures on operating costs and resources. This is particularly acute in rural and regional areas, where unfilled positions and the pressure of inducting inexperienced and sometimes unqualified staff has a greater impact on smaller organisations covering large geographic areas.

DV Vic considers current workforce shortages in the specialist family violence sector to be another symptom of the lack of coordinated sequencing and prioritisation within the overall reform agenda. Initiatives such as MARAM, the Support and Safety Hubs, and public awareness campaigns about family violence are all designed to facilitate victim-survivors' access to the family violence system. This leads to an increase in demand which requires a suitably capable workforce to respond. However, **these reforms were not sequenced in a way that has successfully planned for and fostered the workforce necessary to meet future demand.**

Additionally, the SFVS sector has consistently pointed to the structural issues related to pay parity and conditions, and market competitiveness of the sector, as being the priority issue for the Victorian Government to address to assist with specialist family violence workforce sustainability – primarily via **funding levels that allow for the workforce to be classified at a higher rate that reflects the technical skills and responsibilities of specialist family violence roles and are comparable to roles in other similar sectors** (an issue affecting both recruitment *and* retention of the workforce) - but despite the Government's investment in family violence industry development to date, this fundamental issue has not been addressed. In addition, client presentations continue to become more complex and workers are being asked to sit with greater responsibility for family violence risk, yet the level of funding to the specialist family violence sector does not enable professional classifications and salary that reflect the level of qualification, skills, and technical experience required by the roles.

Finally, **the ongoing prevalence of fixed-term contracts continues to undermine job security for family violence workers.** DV Vic members persistently report the challenges faced in retaining skilled, trained, and experienced staff as the end of non-recurrent funding approaches and ongoing contracts cannot be guaranteed.

Given the highly gendered nature of the family violence workforce, disparities in pay, pay that does not reflect the level of skills needed, and lack of job security, it is DV Vic's view that despite all the investment, **the reforms continue to perpetuate a devaluing of women, women's work, and women's expertise.** If the contribution of the Royal Commission to creating gender equality is to be realised, these workforce incongruities must be addressed.

There is still more demand for support from specialist family violence services than can be met within the current resources provided by Government:

Closely related to workforce shortages and sustainability, funding is another aspect of the family violence reform which is impacting on the specialist family violence sector's ability to respond to demand.

³⁰ Issues regarding funding are discussed in more detail in subsequent sections of this submission.

Historically, SFVSs have been dramatically underfunded and until relatively recently, largely overlooked within the broader community services system. Since the Royal Commission, a significant amount of funding has been dedicated to specialist family violence service delivery. However, the historic funding model for the SFVS has meant that **demand for services has significantly outweighed capacity to respond, and discrepancies in funding levels between SFVS and other community service sectors have yet to be resolved.**

In addition to the instability that persists in the family violence workforce, the impact of previously invisible yet crucial operational costs that are critical to the delivery of SFVSs have also become more acute. Even despite recent increased funding, **the lack of investment in the infrastructure and resources required to support service expansion & reform alignment – such as middle management roles, compliance and accreditation costs, and managing new as well as ongoing programs (such as administration of FSPs and PSI) - are being felt in the rapidly changing and demanding reform environment.** Increasing compliance and accreditation costs require budgets to be redirected from other areas such as professional development. **If the family violence reforms are to be implemented well, operational and administrative costs must be recognised and resourced.**³¹

The voices of people with lived experience of family violence are not structurally embedded within the family violence system:

The improvement of family violence prevention and response is ultimately measured by the Victorians who access the family violence system – both in terms accessibility and the quality of the service they receive. Within the family violence sector, there are many examples of innovative work done over the decades to embed the voices of victim survivors in how the sector does its work. However, **this work has never been supported by an overarching framework nor has it ever been adequately resourced.**

Ensuring the centrality of victim survivor voices and responding to the needs and experiences of clients from different communities and client groups was a key message delivered by the Royal Commission (for example, see Recommendation 201). In response, the Victorian Government established the Victim Survivor Advisory Council (VSAC), to work with government on its family violence work. This model of integration of voices of people with lived experience of family violence is important in reflecting lived experience in Government's implementation of the family violence reforms, but has limited applicability beyond the Victorian Government.

The time has come to embed the voices of victim survivors in the design, delivery, evaluation and governance of the family violence response system in a more systemic, consistent and sustainable manner. To support this, a network of philanthropic funders, DV Vic, the University of Melbourne and the University of Melbourne WEAVERS collaborated to develop The Family Violence Experts by Experience Framework. This framework will support specialist family violence services to embed victim survivor voices in the design, delivery and evaluation of their services.

The research team at the University of Melbourne and the WEAVERS have been working with DV Vic on a program of work to support the implementation of the framework. This has included the developing a program of co-facilitated workshops with DV Vic's membership, a contract with the Essential Services Commission to deliver an Implementation Plan and Guidelines to support their engagement with victim survivor advocates in the course of their regulatory work with utilities

³¹ For further details and recommendations, please see DV Vic's [2020/21 Budget Submission to the Victorian Government](#).

companies, and scoping opportunities to establish a victim survivor advocacy mechanism within the peak body for SFVSs for victim-survivors.

One of the key recommendations coming out of this action research project was for **a victim survivor advocacy industry body, run for and by victim survivor advocates, an equivalent of VSAC that is embedded outside government and within the community sector**. DV Vic endorses this as an essential requirement for the future of the Royal Commission reforms.

6. The impact of the COVID-19 pandemic.

DV Vic, FSV, and the SFVS sector all worked quickly to adapt during the initial wave of the pandemic to ensure service continuity to victim-survivors. Family violence services moved rapidly to establish remote service delivery arrangements with agencies providing crisis interventions, case management and other services remotely. DV Vic worked closely with FSV to support the sector to develop service continuity plans that considered various stages of lock down and workforce shortages. The advice of the Victorian Chief Health Officer's was translated into SFVS settings, supported by practice guidance documents for responding to different cohorts of victim-survivors while delivery services remotely. Several sector forums were co-hosted between DV Vic and FSV to bring the SFVS sector together to share information on emerging trends on the rates and types of family violence occurring during the pandemic, how the nature of violence perpetrated shifted during the initial phase of lockdown, and service delivery methods for (re)engaging clients. This information was used to help FSV and the Victorian Government understand emerging needs and to allocate resources that supported family violence services as they moved to remote service delivery. The additional funding provided by the Victorian Government during this period demonstrated the commitment to mitigating the impact of the pandemic emergency on family violence.

COVID-19 exposed gaps within specialist family violence service delivery:

COVID-19 presented extraordinary challenges to the specialist family violence sector. Despite this significant work, the 'stay at home' and social distancing measures put in place during the pandemic have brought pre-existing gaps and issues within the SFVS sector into view and presented new and additional barriers which have made it increasingly difficult for victim-survivors of family violence to access support and safety. While the SFVS sector and the Victorian Government have moved quickly to adapt service responses throughout the COVID-19 pandemic, **victim-survivors of family violence who faced pre-existing structural exclusions and discriminations have been disproportionately affected and encountered additional barriers to accessing support services**. This has made it more apparent that when assessing the impact of the COVID-19 pandemic on the family violence service system that victim-survivors are not considered or treated as one homogenous group to ensure that a broad range of experiences are considered.

The most significant gaps faced by the SFVS sector during the pandemic have included:

- Inadequate technological infrastructure in services to support remote service delivery.
- Workforce capacity.
- Lack of capacity to scale up to increased demand caused by an emergency.
- An over reliance on victim-survivors' ability to contact family violence services by phone.

Inadequate Technological Infrastructure

Many specialist family violence services reported that their ICT systems were not prepared to support the rapid adaptation to remote working arrangements for staff that was required in the early weeks of the pandemic. Services reported a shortage of work laptops and phones for staff to take home. This meant many staff had to use their personal devices to work from home, raising serious privacy and confidentiality issues for staff and clients. Many services also lacked the technological infrastructure to support staff members' access to clients' confidential files and other information needed to support service provision, and there was little to no pre-existing guidelines to assist with this. This was most pronounced in smaller organisations and was exacerbated where staff were trying to access secure work systems from their personal devices.

These issues highlighted **pre-existing pressures on specialist family violence services related to under-funding of 'invisible' service delivery costs such as equipment and ICT infrastructure and support** (as discussed earlier in this submission).³² The Victorian Government responded to this with a COVID-19 funding announcement that provided funding to purchase equipment and build ICT infrastructure. This was welcome funding, and speaks to **the need for further, ongoing funding that recognises the vital element that ICT infrastructure and systems play in the growth and sustainability of specialist family violence service delivery outside of pandemic conditions.**

Workforce Capacity

Specialist family violence workforce issues were also exacerbated by COVID-19. Workforce shortages within the specialist family violence sector was already obvious prior to the pandemic. FSV and the sector have been working to address this through the Industry Plan and associated qualification, recruitment and retention initiatives. However, increased awareness of family violence has resulted in extraordinary demand for family violence support even prior to COVID-19. The time it takes to recruit, train and orient new staff to the sector means that efforts to build the workforce to a level that can respond to this demand have not yet come to fruition. **COVID-19 exacerbated these existing workforce shortages and highlights the lack of improvements resulting from the Royal Commission reforms addressing this problem to date.**

In the initial weeks of the pandemic, the sector was anticipating as much as 60-80% of their workforce being taken offline either due to illness or family and caring responsibilities. Fortunately, this did not eventuate. However, if it had, it was clear that there was very little capacity to recruit casuals and additional staff into the sector and that service provision was likely to be scaled down significantly. This would have been to the detriment of victim-survivors' safety. In addition and for a variety of reasons referred to elsewhere in this submission, SFVS are managing a near-constant cycle of recruitment, induction, and turn-over that has resulted in a significant proportion of the sectors' workforce constituting relatively new and inexperienced staff. Working remotely highlighted the challenges of recruiting qualified and experienced practitioners and presented unique challenges for services to provide adequate induction, training, monitoring and supervision to these staff when working from home. **Ongoing reform efforts must address the pressures of demand, recruitment, and retention within the specialist family violence workforce to mitigate these challenges and organisational risks going forward.**

³² See also DV Vic's [Victoria State Budget Submission 2020/21](#).

Capacity to Meet Demand During an Emergency

The fact that the specialist family violence sector was already at capacity prior to COVID-19 raised concerns about the sector's ability to scale up service delivery to meet the expected surge in demand due to COVID-19. In the first months of the social isolation restrictions the SFVS sector did not see the increase in demand that was anticipated. However, based on international experiences in countries where COVID-19 had presented earlier and other research concerning family violence and natural disasters, the sector predicted that rates of family violence would increase.

The low level of demand for support during the initial weeks of the pandemic raised concerns that many victim-survivors were unable to contact services for help due to being isolated with their perpetrator and associated increased monitoring and surveillance. As social restrictions have eased, **demand has increased to pre-COVID levels, and in many cases has now exceeded these levels.** This has been reflected in recent research that found that COVID-19 'coincided with the onset or escalation' of family violence.³³

Services are anticipating further increases as a result of the second lockdown in Melbourne and as restrictions lift. Across the board, both specialist family violence and broader sector services are anecdotally reporting that **victim-survivors are presenting with more complex and severe experiences of family violence, including increased strangulation, physical violence, and sexual assault.** This is very concerning, and **it is uncertain that SFVSs have the capacity or resources to respond to any but those at highest risk.**

Workforce shortages and the inability to meet demand prior to COVID-19 illustrate how these gaps prevent the sector from being able to scale up to respond to emergency situations. The bushfires earlier this year are another example of the **need to build surge capacity into the specialist family violence response.** Research into the rates of family violence following the Black Saturday Bushfires had significantly increased awareness in the community and within Government of the impacts natural disasters and other emergencies have on rates of family violence. However, this has not translated into SFVS funding and infrastructure investment. **Until surge capacity is built into the system and the family violence sector is seen as being an integral element of the emergency response, the family violence sector will continue to struggle to increased demand for services at these critical times.**

Overreliance on Telephone-Based Access

The SFVS sector's reliance on victim-survivors' ability to contact a service by phone quickly became obvious and problematic as a result of the pandemic. For both initial contact and ongoing support and information sharing, telephone contact with victim-survivors has been key and for the most part the entire SFVS case management model and the broader coordinated family violence systemic response is built around being able to contact victim-survivors by phone (including via text message, and increasingly via messaging applications using smartphones).

The realisation that this lifeline to SFVSs and other related services was going to be severely impacted by perpetrators being in the home and a higher likelihood that victim-survivors' phone and other devices being monitored by perpetrators during the periods of 'stay at home' social restrictions soon

³³ Boxall, H., Morgan, A. & Brown, R. (2020). *The prevalence of domestic violence among women during the COVID-19 pandemic.* Australian Institute of Criminology. <https://www.aic.gov.au/publications/sb/sb28>

emerged. As a result, SFVSs for the most part did see a significant drop in referrals and contact from victim-survivors in the initial weeks of the pandemic and lockdown.

In the absence of a statewide approach to addressing this issue, individual specialist family violence services are working hard to establish new ways for victim-survivors to contact support services. This includes via webchat, online platforms, and through building collaborative practice partnerships with local services where victim-survivors are more likely to still be allowed to go, such as supermarkets, chemists, general practitioners, drug and alcohol services, and childcare centres. **The value of collaboration in identifying, assessing, and responding to family violence realised during the social restrictions must be capitalised upon beyond the COVID-19 pandemic.**

To date, DV Vic is aware of two specialist family violence services who are either actively working towards implementing or have implemented a webchat function into their intake and assessment teams. One of these services is the statewide crisis service, Safe Steps, whose webchat function went live in May. This is a positive development. However, **it also raises questions about how to safely implement a webchat function, how to integrate it with existing service delivery and the statewide coordinated response, and what new ways of working and specialist skills are required to safely implement these pathways to specialist family violence support.** While these new ways of working may open doors to support for some victim-survivors, they also present new potential risks to victim-survivors and there is little knowledge related to what victim-survivors from different populations expect from these online systems of service delivery. **These new solutions have great potential and reflect rapid innovation and adaptation that might otherwise have taken years to evolve, but they need to be carefully designed, implemented and evaluated to ensure that they provide the best possible responses to victim-survivors.**

There is still no easy way to find comprehensive, accurate family violence data:

Having access to an evidence base on which to inform strategic planning and decisions related to family violence policy and programming is critical, and due to the complexity of family violence data and resource limitations, **not being able to quickly access a complete dataset is a perennial vulnerability for the family violence sector.** This has been felt acutely throughout the pandemic, as **a lack of comprehensive, real time data sets related to family violence frequency, types, demand, and service responses across the state meant the sector was reliant on anecdotal evidence about fluctuations in demand and service responses at a critical and high risk time for victim-survivors, and when the community and media needed to know about and understand family violence the most.**

A lack of accessible and complete data sets, data fragmentation, and limited capacity to share data and/or low data literacy skills within the sector are longstanding issues. The Royal Commission made recommendations with respect to improving data, research and evaluation [Recommendations 203 – 206], but the pandemic experience showed that little progress has been made.

In 2018, philanthropic funding enabled DV Vic to support the Melbourne Research Alliance to End Violence against Women and their Children (MAEVe) at the University of Melbourne to develop the recently launched Monitoring, Research and Evaluation Framework for Family Violence Regional Integration Committees. This framework points to opportunities for gathering and using family violence data generated by SFVSs to support more evidence-informed decision-making. One of the project recommendations is for **a family violence data analyst to be resourced at DV Vic to access, assess, and**

utilise the publicly available family violence data sets to inform specialist and broader family violence policy and practice.

This is just one option for addressing the **critical gap in the coordination and accessibility of family violence data in Victoria**.

The impact of COVID-19 has meant a delay in implementation of some Royal Commission reforms:

The impact of the coronavirus (COVID-19) pandemic has been significant and will continue to be felt by services responsible for responding to family violence and victim-survivors for an extended period of time, well beyond the easing of restrictions. While DV Vic has empathy and understanding of the challenge the Victorian Government has had to confront, and has valued the focus FSV in particular has had on ensuring continuity in specialist family violence service delivery and the provision of additional funding to support that, unfortunately the impact of COVID-19 has meant a delay in the implementation of some Royal Commission reforms. In this submission, we will focus on three in particular – delays related to MARAM Phase Two implementation, reduced access to MARAM training, and delay in the roll-out of funding reforms for specialist family violence and specialist sexual assault services.

Delay in Implementation of MARAM Phase Two

In response to the coronavirus pandemic, phase two of the implementation of MARAM, FVISS, and the Child Information Sharing Scheme (CISS) has been postponed. Originally planned for September 2020, implementation with Phase Two Organisations will now begin in the first half of 2021.

Phase two affects universal workforces such as hospitals and health, along with education workforces. Commencement of Phase Two reflects the critical role educators and universal health services play in identifying, assessing and responding to family violence risk in Victoria.

DV Vic recognises the huge impact COVID-19 has had on hospital, health and education workforces and supports this delay in implementation of the Phase Two MARAM reforms. However, **it is vital that phase two implementation remains a priority and that momentum for these particular reforms continues**. Additionally, **consideration needs to be given to how preparation for the commencement of Phase Two will be supported and resourced, including how learnings from Phase 1 implementation will be incorporated and how training needs will be met for such large workforces** (see earlier sections of this submission related to MARAM Phase 2 implementation).

Reduced Access to MARAM Training

As highlighted above, many workforces prescribed in September 2018 did not have access to MARAM training until 2020. Namely, those in Tier 2 and Tier 3 workforces such as mental health services, alcohol and drug services, child and family services, homelessness services, and maternal and child health services.

Understandably, COVID-19 has resulted in no face-to-face MARAM training for all workforces, including Tier 1 specialist family violence services and sexual assault services. Some MARAM training has been adapted and is being delivered virtually with further work underway to adapt additional MARAM packages, **however the delays to delivery as a consequence of COVID-19 and transitioning to online training has added to the already significant unmet demand for training**. Additionally, specialist family

violence services that have sought to recruit and increase their workforce pool as part of COVID-19 continuity planning have been unable to enrol new practitioners or casual staff in the appropriate MARAM Training. This has impacted their ability to have appropriately trained and skilled practitioners available. Conversely, DV Vic members in rural and regional areas have advised that the provision on online training has improved accessibility of MARAM training for their staff.

Currently, only the MARAM Brief and Intermediate Training and MARAM Renewing Practice Training are available online. However, **it is vital that all MARAM training modules are available in virtual formats while social restrictions are in place, and that consideration is given to how we can both evaluate and 'top up' the practice skills that are developed in an online context.** Further, a combination of online and face-to-face training should be available even when restrictions are no longer in place in order to meet demand and reduce other pre-COVID-19 barriers to accessing such as the travel from regional and rural locations, part-time employment, and people who experience physical accessibility barriers. Importantly, having online training options would assist with meeting the demand for training, both the backlog created by the pandemic and also with Phase 2 prescribed organisations coming into scope in 2021.

Whilst the current COVID context means that the sector is reliant on virtual delivery, **it is vital that this mode of training does not undermine the quality of the content or the skill development outcomes that is required to align with and implement the MARAM framework.** Any virtual learning in this context must maintain access to skill development through hybrid/blended learning models rather than relying solely on knowledge development via formats such as eLearn or webinars. The pressure to move all MARAM face to face training online without any additional resourcing, with the expectation that specialist trainers will have the skills and expertise required to develop virtual training content, has also been problematic. **It is important that training delivery organisations are resourced to respond to the urgent need to ensure online MARAM training is available across the state and that the speed of transition to an online context does not undermine excellence in embedding skills development in the curriculum, the quality of content and outcomes, and resourcing for the adaptation work.**

Implementation of funding reform for specialist family violence services

As a result of the pandemic, there has been a delay in announcing the 2020/21 Victorian State Budget, with current funding rolled over to October 2020. This delay has been accepted as unfortunate but necessary by the SFVS sector given the crisis the state has experienced. Nonetheless, the sector was anxious and frustrated with the delay from the Government in communicating their budget and funding intentions and plans clearly, further exacerbating their annual challenge with continuing service delivery under the shadow of non-recurrent funding, lapsing funding for additional programs and packages, and fixed-term contracts for staff.

The beginning of the 2020/21 financial year was supposed to see the implementation of a series of welcome funding reforms for the specialist family violence sector. These reforms were to include streamlining and simplifying funded activities in a way that better reflects specialist family violence service delivery, an increase in the unit cost for service delivery funding, as well as a transition to measuring performance based on hours of service.

While these reforms to funding are a step towards parity in funding models between the specialist family violence sector and other similar sectors such as Child, Youth and Families, they do not reflect

an overall increase in funding - the unit cost will increase, but the overall quantum of funding will not. The inevitable conclusion drawn is that SFVSs are being asked to 'do less with more,' therefore, **these funding reforms will do nothing to address the sector's ongoing pleas for an increase in funding to respond to ever-increasing demand for services and at a level that enables the specialist family violence workforce to be paid fairly and equitably.** While DV Vic supports the approach of government to building the evidence base on demand, throughput, and understanding the nature of support being provided to victim-survivors of family violence by SFVSs through this funding reform project, it ignores the ample anecdotal evidence of ever-increasing demand that SFVSs are advising that they are unable to adequately meet and requires SFVSs to sit with this level of demand until the data from the funding reform project is available.

Nonetheless, the sector is disappointed that the positive changes these reforms were to bring have been delayed, and **DV Vic urges FSV to work with the peak and its members in the interim to use this opportunity of funding reform to respond to the needs the sector has repeatedly identified as needing urgent redress.**

New challenges in maintaining the well-being on the Specialist Family Violence Workforce:

The COVID-19 pandemic has presented significant challenges for the specialist family violence sector workforce. As many practitioners face juggling caring responsibilities for children, elderly parents and/or other vulnerable members of their families, and remote teaching of children, while also delivery direct family violence support from their homes, **the 'stay at home' restrictions are exposing the incongruencies and tensions experienced by the specialist family violence sector, one which works towards gender equality yet is constituted by a highly gendered workforce impacted upon by deeply entrenched inequality in the domestic division of labour.**

Specialist family violence practitioners must also cope with their personal responses to COVID-19 – which may include fear and anxiety, grief and loss, frustration, or loneliness and isolation - while continuing to deliver family violence services from their homes. **This is an unprecedented situation within which new workforce well-being issues are emerging.**

In addition, **family violence managers and practitioners also report challenges to workforce wellbeing that specifically arise from undertaking family violence work at home.** These challenges predominately include suddenly having no boundaries between work and home, and an inability to 'switch off' and find new self-care strategies for 'living at work'. For example, most practitioners' homes are not set up for the delivery of private and confidential family violence services and support, and many staff report taking crisis calls and having challenging client support sessions in areas of their homes which were previously places of retreat from the stresses of their work. Staff also report concerns about their inability to regularly debrief about traumatic information received from clients with other staff when in isolation in their home, although many services have instigated additional remote supervision and debriefing in response to the remote working arrangements.

Specialist family violence practitioners have described distress from their sense that they are unable to work according to their ethical values and standards as a result of remote service delivery during the pandemic, which impacts on their mental health and well-being and contributes to increased feelings of burn-out. Practitioners also report feeling stress arising from their perception that they are not able

to deliver the same quality of service and support to victim-survivors in a remote working environment. Some victim-survivors find it more difficult to engage over the phone, and it can be particularly hard to remotely engage victim-survivors with complex needs. This results in practitioners feeling like they are not meeting their duty of care to their clients. **Practitioners also report concerns about their inability to adequately engage children while working remotely, and that they feel a higher burden than normal from carrying concerns for children's safety and wellbeing during this time with concerns raised any SFVSs about the lack of clarity and consistency related to child protection practice and service delivery during the pandemic in particular.**

Most specialist family violence services have put new systems and strategies for supervision, debriefing and worker well-being in place during the pandemic to mitigate the impact of the stressors described above on their staff, including purchasing additional Employee Assistance Program packages. However, many smaller organisations have limited resources to provide the support required, and none have the systems and resources available to provide the support required without diverting funding from frontline service delivery.

While a crisis of this type is unprecedented, **the impact of COVID-19 has highlighted that specialist family violence workforce well-being has not received any significant attention within the reform environment to date, and the sector was largely unprepared for the impact a disruption to 'business as usual' on this scale would have on the workforce.** Funded by FSV, DV Vic has developed a draft workforce well-being framework for the specialist family violence sector. Work to finalise and implement this has been delayed, however there is now renewed interest from FSV to revisit this work which DV Vic welcomes. **The experience of COVID-19 has demonstrated that investment in the well-being of the specialist family violence workforce is critical and overdue.**

7. Conclusion

The Victorian Government's Royal Commission family violence reform agenda is ambitious but essential. The vision of the Royal Commission and that outlined in the family violence policy landscape of a Victoria free from family violence requires a focus on both immediate and long-term, whole of system transformation and is worthy of the investment being made.

Progress is being made, and there are a number of ground-breaking developments emerging – such as the MARAM Framework, FVISS, and CIP – that are changing the way family violence is thought about and responded to in Victoria, in a way that is the envy of the rest of the world. DV Vic believes the Victoria's family violence reform can be credited with raising the community's overall awareness and understanding of family violence.

However, much remains to be done in both the acquittal of the Royal Commission recommendations and the planning and governance of the reform agenda to ensure the outcomes that are emerging are systemic and sustainable. In particular, DV Vic's submission has pointed to the impact a lack of effective governance and implementation planning has had on the reform agenda and the sector and urges the Victorian Government to work with the sector to address this. This will be particularly crucial in order to capitalise on the success of reforms such as the MARAM Framework as it enters the next phase of implementation.

