

Submission to the *Inquiry into* family, domestic and sexual violence



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EXECUTIVE SUMMARY

- 1. Violence against men is both more prevalent and has greater burden of disease impacts than does violence against women. While men make up a minority of persons who experience family, domestic and sexual violence, they make up a significant proportion between one in five and almost half.
- 2. Children and young people are most likely to report witnessing two-way physical couple violence (14%) between their parents (which is the most damaging), followed by male-to-female (9%) and female-to-male violence (8%).
- 3. Women are a significant family violence risk to children.
- 4. The strongest predictor of a woman being a victim of intimate partner violence is her perpetration of intimate partner violence.
- The evidence for gender inequality being a contributor to the prevalence of domestic violence is weak and highly
 contested. Rather than focusing upon gender inequality, resources would be better put towards addressing other
 established risk factors.
- 6. While family violence legislation is gender neutral, discrimination against men exists in policy and service provision.
- 7. Male victims of family violence face many barriers to disclosing their experience of abuse. It is not the case that they fail to disclose because the violence experienced is minor or trivial.
- 8. Government policy and training materials teach members of the judiciary and service providers that heterosexual men who present as victims of intimate partner violence are probably perpetrators. This discrimination not only fails to support male victims, but increases the risk of them experiencing further violence and abuse.
- 9. In order to meet the needs of male victims of family violence, government-funded public awareness campaigns must be conducted alongside the establishment of publicly funded services for male victims (either integrated with existing services or gender-specific). Training should also be provided to workers in the health and welfare fields to enable them to respond effectively to male victims.
- 10. The most severe type of domestic abuse 'coercive control' is used by both male and female perpetrators. The most common domestic abuse 'couple violence' is by no means minor or trivial.
- 11. Since 1996, the ABS Personal Safety Survey has used a sample size of male respondents between 0% and 28% of the female sample size. This has led to the publication of insufficiently accurate data about male victims of family, domestic and sexual violence.
- 12. Health services across Australia screen all adult women for domestic violence but no screening is carried out for men.
- 13. Perpetrator programs based (loosely) on the Duluth Model of male patriarchal power and control are largely ineffective at preventing future violence, and may even lead to the escalation of violence for some men who take part. Instead we would recommend the trialling of evidence-based perpetrator programs for both sexes based on other models, such as a solutions-focused approach.
- 14. The experiences of male victims of family, domestic and sexual violence from diverse population sub-groups must be considered when tailoring appropriate services and support for these groups.
- 15. Men, as well as women, are affected by changes brought about by the COVID-19 pandemic and must be included in any additional support provided in efforts to combat increases in family and domestic violence.



16. Previously parliamentary reviews have recommended that better services and support be established for male victims of family and domestic violence. Only minor improvements have been implemented to date, while most recommendations are yet to be put into practice.

LIST OF RECOMMENDATIONS

RECOMMENDATION 1

We urge the Committee to consider including all victims of violence (or family, domestic and sexual violence) in any immediate and long term measures to prevent violence. To do otherwise is unjust and discriminatory. Even if this Inquiry is reluctant to include men in immediate and long term measures to prevent violence, any such measures must include the children of male victims of family, domestic and sexual violence.

RECOMMENDATION 2

There exists ample evidence that women are a significant family violence risk to children, and therefore any immediate and long term measures to prevent violence against women and children must include violence by women against children.

RECOMMENDATION 3

We urge the Committee to consider measures aimed at reducing women's use of violence, as a practical measure aimed at reducing levels of violence against women.

RECOMMENDATION 4

The evidence for gender inequality being a contributor to the prevalence of domestic violence appears to be weak and highly contested. Rather than examining measures to improve gender equality (which may of course be laudable in and of themselves), this Inquiry would best use taxpayer resources by instead addressing the proven risk factors for domestic violence and exploring solutions that have been proven to make a real reduction in prevalence rates.

RECOMMENDATION 5

Discrimination against men in policy and service provision must be stopped to bring it in line with gender neutral family violence legislation across Australia. Either both men and women who present as victims should be taken at face value, with their stories believed verbatim, or both men and women should have their stories questioned in order to determine whether they are actually victims, victim/perpetrators, or perpetrators of family violence.

RECOMMENDATION 6

Government funded public awareness campaigns should be conducted to raise awareness of intimate partner violence against men. Such campaigns need to be very carefully designed so as to complement campaigns about family violence against women and children and not to damage the effectiveness of those campaigns.

RECOMMENDATION 7

Consideration should be given to providing publicly-funded services specifically for male victims of intimate partner abuse.

RECOMMENDATION 8

Consideration should be given to how services for male victims of intimate partner abuse can be integrated with services for female victims and general services for victims of family violence in all its forms. It is likely that some types of service can be effectively integrated while others will need to be gender-specific.



RECOMMENDATION 9

Workers in the broader health and welfare fields should be provided with training to assist them to respond effectively to male victims of intimate partner abuse. In particular, these workers need training in how to dismantle the barriers to men disclosing their abuse and strengthening the factors that facilitate men's disclosure of their abuse.

RECOMMENDATION 10

We strongly urge the Committee to consider recommending equal sample sizes of males and females for the the next ABS Personal Safety Survey so that robust data is available on the experiences of all Australians.

RECOMMENDATION 11

We urge the Committee to consider expanding the use of domestic violence screening tools to include males as well as females so that a more accurate picture of domestic violence can be captured for all Australians.

RECOMMENDATION 12

We urge the committee to consider recommending that organisations using public funds to capture data on family, domestic and sexual violence survey a proportionate number of women and men.

RECOMMENDATION 13

We urge the Committee to consider recommending that male perpetrator programs based (loosely) on the Duluth Model of patriarchal power and control be abandoned in favour of evidence-based perpetrator programs for both sexes based on other models such as the solution-focused approach.

RECOMMENDATION 14

We recommend that when tailoring services and support for diverse population sub-groups, the experiences of both female and male victims be taken into account.

RECOMMENDATION 15

We urge the Committee to ensure that any extra funding and support made available to assist victims of family and domestic violence during the COVID-19 pandemic are made available to all Australians.

RECOMMENDATION 16

We urge the Committee to follow through with the recommendations for male victims from previous parliamentary inquires to ensure they are implemented properly.



ABOUT THE ONE IN THREE CAMPAIGN

One in Three is a diverse group of male and female professionals – academics, researchers, social workers, psychologists, counsellors, lawyers, health promotion workers, trainers and survivor/advocates. The Campaign aims to raise public awareness of the existence and needs of male victims of family violence and abuse; to work with government and non-government services alike to provide assistance to everyone affected by family violence; and to reduce the incidence and impacts of family violence on Australian men, women and children.

One in Three is primarily a lobbying and advocacy organisation. While we would love to do more, and there is a desperate need for additional services, we lack the resources to provide our own services or work extensively with other NGOs in providing services.

The main resource we provide is our website <u>oneinthree.com.au</u>. It provides:

- information about the experiences of male victims and the barriers they often face to disclosing;
- research and statistics about male victims;
- opportunities for men to tell their own personal story and read over 200 stories from other men;
- news from around the globe; and
- a comprehensive list of national and international resources.

We have produced some powerful videos¹ of men telling their personal stories of family violence and abuse. We regularly give conference presentations, provide research assistance to students, and give talks at high schools. We have produced a series of seven free digital poster designs² aimed at educating boys and young men about respectful and healthy relationships. Unless we give men and boys the courage and support to disclose their experience of family violence, they will continue to suffer in silence.

We have collaborated with various NGOs to establish better services for male victims, most notably working with *Victims* & *Witnesses of Crime Court Support* (VWCCS), *NSW Police* and *Women's Domestic Violence Court Advocacy Service* to develop the *Insight* trial court support scheme for male victims of violence at the Downing Centre and Parramatta Courthouses in inner and western Sydney. The scheme operated between 2013 and 2015. Unfortunately, because of issues such as resistance to the scheme from other agencies including the Police, who failed to help advertise or promote the service, the work of the program was eventually folded into the day-to-day work of VWCCS.

Some other examples of collaborative work with other NGOs include:

- assisting the *Men's Advocacy Network* in WA in developing the groundbreaking 2010 *Intimate Partner Abuse of Men*³ report conducted by researchers from the School of Psychology and Social Science at Edith Cowan University
- collaborating with the Western Sydney Men's and Relationship Services Network to produce a poster⁴ listing
 domestic violence services available to male victims, which was distributed widely amongst service providers in
 Western Sydney.

¹ https://www.youtube.com/watch?v=h_VhEXei2s8

² http://www.oneinthree.com.au/posters

³ Tilbrook, E., Allan, A. & Dear, G. (2010), Intimate Partner Abuse of Men. East Perth: Men's Advisory Network, May 26, 2010.

⁴ http://www.oneinthree.com.au/storage/pdfs/Domestic_Violence_Services_for_Male_Victims_2015.pdf

One in Three Campaign



One in Three regularly lodges submissions, attends consultations and appears before government inquiries and royal commissions into family violence. As a result, many recent state and federal inquiries have acknowledged the existence and needs of male victims of family violence and have recommended that better support services be provided for them. These recommendations are outlined later in our submission.

One in Three receives no funding and operates on an entirely voluntary basis.

TERMS OF REFERENCE

We would like to address the following Terms of Reference of this inquiry:

- a) Immediate and long-term measures to prevent violence against women and their children, and improve gender equality.
- b) The level and impact of coordination, accountability for, and access to services and policy responses across the Commonwealth, state and territory governments, local governments, non government and community organisations, and business.
- c) All forms of violence against women, including, but not limited to, coercive control and technology-facilitated abuse.
- d) The adequacy of the qualitative and quantitative evidence base around the prevalence of domestic and family violence and how to overcome limitations in the collection of nationally consistent and timely qualitative and quantitative data including, but not limited to, court, police, hospitalisation and housing.
- e) The efficacy of perpetrator intervention programs and support services for men to help them change their behaviour.
- f) The experiences of all women, including Aboriginal and Torres Strait Islander women, rural women, culturally and linguistically diverse women, LGBTQI women, women with a disability, and women on temporary visas.
- g) The impact of natural disasters and other significant events such as COVID-19, including health requirements such as staying at home, on the prevalence of domestic violence and provision of support services.
- h) An audit of previous parliamentary reviews focussed on domestic and family violence.



IMMEDIATE AND LONG-TERM MEASURES TO PREVENT VIOLENCE AGAINST WOMEN AND THEIR CHILDREN, AND IMPROVE GENDER EQUALITY.

Violence against men is more prevalent and has greater impact

Immediate and long term measures to prevent violence against women and children are desperately needed. But why exclude men? One reason that could be offered to exclude men from immediate and long term measures to prevent violence is that more women than men experience violence. But this is not the case. The most recent ABS *Personal Safety Survey* 2016⁵ found that, in the last 12 months, 543,900 males (55%) and 444,700 females (45%) had experienced violence.

Another reason that could be offered is that violence against women does greater harm than does violence against men. But that is not the case either. The Australian Institute of Health and Welfare's most recent *Australian Burden of Disease Study* 2015⁶ found that the burden of disease from homicide and violence in Australia in 2015 for males and females was as follows:

	Males	Females
Disability-adjusted Life Years (DALY)	12,415	5,876
Years Lived with Disability (YLD	3,026	1,079
Years of Life Lost (YLL)	9,390	4,797
Deaths	203	99

A third reason that could be offered is that the concern of this Inquiry and the the National Plan to Reduce Violence against Women and their Children is not all kinds of violence, but only certain types of violence: specifically family, domestic and sexual violence. If that were the case, what would be the rationale for excluding other kinds of violence (besides a desire to help women and not men)? In doing so, one wouldn't just exclude men (who make up the majority of victims), one would also exclude the many women affected by other forms of violence. One would set up a tiered system where some types of violence matter more than others. What reason could be offered for this in a country that prides itself in equality before the law?

It is true that more women than men appear to be affected by family, domestic and sexual violence. The figures from the ABS Personal Safety Survey 2016 ⁷ for experiencing various types of violence in the previous 12 months are as follows:

	Males	Females
Sexual violence	62,700* (27%)	171,600 (73%)
Sexual assault	57,200 (28%)	148,100 (72%)
Violence by an intimate partner	113,900 (35%)	211,700 (65%)
Violence by a cohabiting partner	75,500 (33%)	155,900 (67%)
Violence by a current partner	56,000** (39%)	88,700 (61%)
Violence by a previous partner	16,400*** (19%)	69,100 (81%)

⁵ Australian Bureau of Statistics (2017). Personal Safety Survey, Australia, 2016 (Cat. No. 4906.0). Canberra: Australian Bureau of Statistics.

⁶ Australian Institute of Health and Welfare (2019). <u>Australian Burden of Disease Study 2015: Interactive data on disease burden</u>. Web report. Canberra: AIHW.

⁷ Australian Bureau of Statistics (2017). Personal Safety Survey, Australia, 2016 (Cat. No. 4906.0). Canberra: Australian Bureau of Statistics.



	Males	Females
Violence by a boyfriend/girlfriend or date	27,800**** (35%)	51,700 (65%)
Emotional abuse by a partner	381,200 (46%)	451,500 (54%)
Emotional abuse by a current partner	265,800 (47%)	298,700 (53%)
Emotional abuse by a previous partner	125,400 (44%)	161,200 (56%)
Sexual harassment	836,700 (34%)	1,622,100 (66%)
Stalking	153,600 (35%)	288,200 (65%)

^{*} Estimate has a Relative Standard Error (RSE) of 25% and should be used with caution due to the relatively small number of males surveyed by the ABS (20% of persons who experienced sexual violence since the age of 15 were male with no RSE warning).

The above figures demonstrate that while men make up a minority of persons who say they experience family, domestic and sexual violence, they make up a significant proportion indeed - between one in five and almost half, depending on the type of violence or abuse. Why should this significant proportion of Australians be excluded from immediate and long term measures to prevent violence against them, based solely upon their sex - something over which they have no control?

RECOMMENDATION 1

We urge the Committee to consider including all victims of violence (or family, domestic and sexual violence) in any immediate and long term measures to prevent violence. To do otherwise is unjust and discriminatory. Even if this Inquiry is reluctant to include men in immediate and long term measures to prevent violence, any such measures must include the children of male victims of family, domestic and sexual violence. There is ample evidence that children witness violence against their father or step-father in the home – and are hurt as a result – or experience direct violence from their mothers or step-mothers.

What do children and young people report?

The most recent Australian population survey on young people and domestic violence is *Young people and domestic violence – national research on young people's attitudes to and experiences of domestic violence*⁸ (YPADV). Published in 2001 by the National Crime Prevention division of the Commonwealth Attorney General's Department and the Department of Education, Training and Youth Affairs, the national research involved a quantitative survey of 5,000 young Australians aged between 12 and 20, and in-depth discussions with special groups, namely homeless youth, victims of domestic violence, and youth from different ethnic backgrounds. This is the largest and most recent sample of young people ever surveyed about their experience of and attitudes towards domestic violence in Australia or, most likely, the world. Regretfully the survey data is now 18 years old and hasn't been replicated since.

The survey looked at young people's experience of parental domestic violence. The principal aim was to provide a baseline measure of the extent to which young people in Australia are directly exposed to domestic violence between carers. Some of the results of the survey are presented in the following tables and graphs.

^{**} Estimate has a Relative Standard Error (RSE) of 25.5% and should be used with caution due to the relatively small number of males surveyed by the ABS (35% of persons who experienced violence by a current partner since the age of 15 were male with no RSE warning).

^{***} Estimate has a Relative Standard Error (RSE) of 26.7% and should be used with caution due to the relatively small number of males surveyed by the ABS (22% of persons who experienced violence by a previous partner since the age of 15 were male with no RSE warning).

^{****} Estimate has a Relative Standard Error (RSE) of 40.1% and should be used with caution due to the relatively small number of males surveyed by the ABS (20% of persons who experienced violence by a boyfriend/girlfriend or date since the age of 15 were male with no RSE warning).

⁸ National Crime Prevention (2001), <u>Young People and Domestic Violence</u>: <u>National Research on Young People's Attitudes to and Experiences of Domestic Violence</u>. Barton: Attorney-General's Dept., September 18, 2001.



Table 4.22: Young people's awareness of parental violence — male to female parent

Perpetrated against mother/stepmother by male partner

	NO	NOT SURE	ONCE/TWICE	MORE OFTEN
	%	%	%	%
Yelled loudly at her	24	14	30	28
Put her down/humiliated her	46	19	14	16
Not let her see her family or friends	74	11	5	6
Not let her have any money for her own use	75	10	5	6
Thrown something at her	69	11	8	9
Threatened to hit her	66	11	9	10
Tried to hit her	70	10	7	9
Hit her because she was hitting him	77	10	4	4
Actually hit her (even though she didn't hit him)	74	8	5	9
Threatened her with a knife or gun	84	5	2	4
Used a knife or fired a gun	87	5	1	2

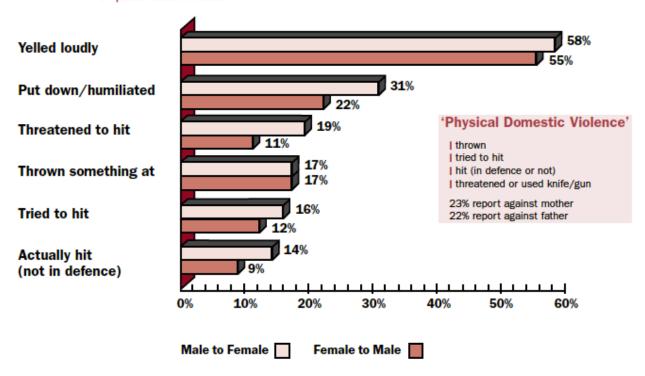
Table 4.23: Young people's awareness of parental violence — female to male parent

Perpetrated against father/stepfather by female partner

		_	-	
	NO	NOT SURE	ONCE/TWICE	MORE OFTEN
	%	%	%	%
Yelled loudly at him	28	12	30	25
Put him down/humiliated him	54	19	12	10
Not let him see his family or friends	81	8	3	3
Not let him have any money for his own use	83	7	2	2
Thrown something at him	69	9	11	6
Threatened to hit him	76	9	6	5
Tried to hit him	74	9	7	5
Hit him because he was hitting her	79	8	4	4
Actually hit him (even though he didn't hit her)	79	7	5	4
Threatened him with a knife or gun	86	5	2	2
Used a knife or fired a gun	88	4	1	2



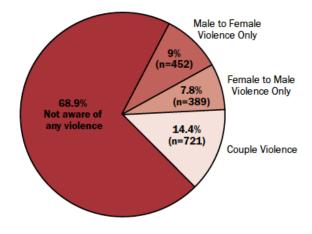
Figure 4.11: Young people's awareness of parental violence - percentage of total sample aware of past occurrences



58% of young people aged 12 to 20 years have witnessed a male parent "yelling loudly at" a female parent and 55% have witnessed a female parent "yelling loudly at" a male parent. 23% of young people aged 12 to 20 years have witnessed physical domestic violence by a male parent against a female parent and 22% have witnessed physical domestic violence by a female parent against a male parent.

While the rates of female-to-male violence witnessed by young people are slightly less than the rates of male-to-female violence, they are quite significant indeed. At the serious end of the spectrum there is some gender difference (9% vs 4% for unilateral hitting more often than once/twice; 4% vs 2% for threatening with a knife or gun more than once/twice), but there is no overwhelming preponderance of male to female violence.

Figure 4.12: Young people's experiences of physical domestic violence



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Much more common and damaging than either male-to-female or female-to-male unilateral violence is mutual (or reciprocal) couple violence. When looking at the effects of young people witnessing domestic violence, the survey was unequivocal: "the most severe disruption on all available indicators occurred in households where couple violence was reported" (page 131).

- Considering physical violence only, nearly a third (31.2%) of young people had witnessed one of the following: a male carer being violent towards his female partner; a female carer being violent to her male partner; or both carers being violent
- 14.4% of young people reported that this violence was perpetrated both by the male against the female and the
 female against the male. 9.0% reported that violence was perpetrated against their mother by her male partner but
 that she was not violent towards him. 7.8% reported that violence was perpetrated against their father by his female
 partner but that he was not violent towards her.
- The most severe disruptions on all indicators occurred in those households where both male to female and female to male violence was reported (i.e. two-way couple violence).
- Where young people had, or were experiencing parental domestic violence, a third of them had not told anyone about it. This rate was higher amongst boys than girls and higher amongst the 12 and 13 year olds than the mid or older teens.

Domestic violence against children

While the witnessing of parental domestic violence can be damaging to children, family and domestic violence frequently involves parents or step-parents being directly violent to their children or step-children.

The 2015 *Children's Rights Report*⁹ by the National Children's Commissioner found that children comprised the second most frequent group of victims of family and domestic homicides after intimate partner homicides (quoting data from the Australian Institute of Criminology's *National Homicide Monitoring Program (NHMP)* for the 10 years from 2002-2012). Over half (52%) of all family violence child murders were perpetrated by women.

In the most recent biennial reporting period of the NHMP (2014-16), mothers killed 20 children, while fathers killed 13 children (4 children were also killed by mothers' new male partners).

In 1997, the Australian Institute of Health and Welfare ¹⁰ made a decision not to publish any more data indicating the gender of child abuse perpetrators. No such data has been published since. The action was taken just one year after the figures were first published in 1996 (968 men and 1138 women). A more recent FOI request to all states and territories to obtain more data (only the WA Government complied) found that mothers once again made up the vast majority of reported child abusers in WA in 2007-08 ¹¹.

⁹ Australian Human Rights Commission, Children's Rights Report 2015, Australian Human Rights Commission: Canberra, pp104-5. https://www.humanrights.gov.au/our-work/childrens-rights/publications/childrens-rights-report-2015

¹⁰ Broadbent, A, and Bentley, B (1997), Child abuse and neglect Australia 1995–96, Australian Institute of Health and Welfare: Canberra. http://www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=6442455160

¹¹ Ward, K, Department for Child Protection Western Australia, Relationship to Child of Persons Believed Responsible for Substantiated Maltreatment 2007-08. http://www.oneinthree.com.au/storage/pdfs/WA_Child_Protection_Statistics.pdf

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RECOMMENDATION 2

The above data provide ample evidence that women are a significant family violence risk to children, and therefore any immediate and long term measures to prevent violence against women and children must include violence by women against children.

Reducing women's use of violence will reduce women's rates of injury from violence

A woman's perpetration of intimate partner violence is the strongest predictor of her being a victim. While this may sound like 'victim-blaming', it is simply stating the research evidence finding that women who perpetrate violence suffer greater injuries than those who do not. If a woman hits her partner who then hits her back and injures her, both persons are responsible for their own use of violence. Simply put, perpetrating violence is a risk factor for women's injury.

As American researcher Professor Linda Kelly puts it:

"Put in blunt utilitarian terms, female violence must be addressed in order to protect women as a man provoked by a violent female has the potential to inflict greater injury" 12.

She cites eminent family violence researcher, Professor Murray A. Straus:

"The danger to women is shown by studies that find that minor violence by wives increases the probability of severe assaults by husbands. Sometimes this is immediate and severe retaliation. Regardless of whether that occurs, however, a more indirect and probably more important effect may be that so-called 'morally correct' slapping [by women] acts out and reinforces the traditional tolerance of assault in marriage.

"The moral justification of assault implicit when a woman slaps or throws something at a partner for doing something outrageous reinforces his moral justification for slapping her when she is doing something outrageous, or when she is obstinate, nasty, or 'not listening to reason' as he sees it.

"To the extent that this is correct, one of the many steps needed in primary prevention of assaults on wives is for women to forsake even [so-called] 'harmless' physical attacks on male partners and children. Women must insist on nonviolence from their sisters, just as they rightfully insist on it from men."

A large metaanalysis by Sandra M. Stith and colleagues found that a woman's perpetration of violence was the strongest predictor of her being a victim of partner violence:

"Victims who hit their partners are at greater risk of further victimisation. In fact, Shields and Hanneke found that severe violence was more likely when a wife has been physically aggressive with her partner. Furthermore, Feld and Straus found that when a wife had severely assaulted her husband but he had not physically assaulted her, there was a one in seven chance that he would severely abuse her in the course of the next year. Clinical services to victims of abuse, whether male or female, have focused on empowering the victim but have not always addressed methods for helping victims to manage their own anger. Results from this metaanalysis highlight the need for clinicians to address this issue with victims." ¹¹³

¹² Kelly, L. (2002). Disabusing the definition of domestic abuse: How women batter men and the role of the feminist state. Florida State University Law Review, 30, 791.

¹³ Stith, S.M., Smith, D.B., Penn, C.E., Ward, D.B. & Tritt, D. (2003). *Intimate partner physical abuse perpetration and victimization risk factors: A meta-analytic review*. Aggression and Violent Behavior 10 (2004) 65–98.

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Another rationale for reducing women's use of violence is offered by the Australian *Young People and Domestic Violence* study. The survey found that "Witnessing parental domestic violence was the strongest predictor of subsequent perpetration by young people. The best predictor of perpetration was witnessing certain types of female to male violence". In other words, to break the cycle of violence, women's violence must be addressed.

In order to reduce women's perpetration of intimate partner violence:

- Clinicians working with female victims (and male victims for that matter) need to address the victims' own use of violence and abuse in all its forms, and refer them to anger management or other services where appropriate
- Domestic violence and respectful relationship public education campaigns must be run in order to give female-male
 violence the same stigma and condemnation as male-female violence currently enjoys. The Young People and
 Domestic Violence study found that while males hitting females was seen by virtually all young people surveyed to be
 unacceptable, it appeared to be quite acceptable for a girl to hit a boy.

RECOMMENDATION 3

We urge the Committee to consider measures aimed at reducing women's use of violence, as a practical measure aimed at reducing levels of violence against women.

Gender inequality is not a risk factor for partner violence

In March, 2010, the Senior Editor of the peer-reviewed journal *Partner Abuse* recruited family violence scholars from the United States, Canada and the UK to conduct an extensive and thorough review of the empirical literature, in 17 broad topic areas.

Researchers were asked to conduct a formal search for published, peer-reviewed studies through standard, widely-used search programs, and then catalogue and summarise all known research studies relevant to each major topic and its subtopics. In the interest of thoroughness and transparency, the researchers agreed to summarise all quantitative studies published in peer-reviewed journals after 1990, as well as any major studies published prior to that time, and to clearly specify exclusion criteria. Included studies were organised in extended tables, each table containing summaries of studies relevant to its particular sub-topic.

In this unprecedented undertaking – the *Partner Abuse State of Knowledge Project (PASK)* – a total of 42 scholars and 70 research assistants at 20 universities and research institutions spent two years or more researching their topics and writing the results. Approximately 12,000 studies were considered and more than 1,700 were summarised and organised into tables. The 17 manuscripts, which provide a review of findings on each of the topics, for a total of 2,657 pages, appear in 5 consecutive special issues of *Partner Abuse* published between April, 2012 and April, 2013. All conclusions are based strictly on the data collected.

One section of the *PASK* project involved a systematic review of risk factors for intimate partner violence in the USA. It found the following ¹⁴:

- Certain demographic risk factors are predictive of intimate partner violence (IPV): younger age, low income/ unemployment, and minority group membership
- There are low to moderate correlations between childhood-of-origin exposure to abuse and IPV

¹⁴ Capaldi, DM, Knoble, NB, Shortt, JW and Kim, HK, <u>A Systematic Review of Risk Factors for Intimate Partner Violence</u>, Partner Abuse, Volume 3, Number 2, April 2012, pp. 231-280(50).

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- Protective factors against dating violence include: positive, involved parenting during adolescence, encouragement of nonviolent behaviour, and supportive peers
- Negative peer involvement is predictive of teen dating violence
- Conduct disorder/anti-social personality are risk factors for IPV
- There is a weak association between depression and IPV, and it is strongest for female perpetration
- There is a weak association overall between alcohol and IPV, but a stronger association for drug use
- Alcohol use is more strongly associated with female-perpetrated than male-perpetrated IPV
- Married couples are at lower risk than dating couples, while separated women are the most vulnerable
- · Low relationship satisfaction and high conflict are predictive of IPV, especially high conflict
- With few exceptions, the risk factors for IPV are the same for men and women (exceptions being the higher risk for women's perpetration of IPV associated with internalising problems and alcohol use).

Another section of the project examined partner abuse in ethnic minority and gay, lesbian, bisexual, and transgender populations of the USA¹⁵. If found that:

- Risk factors for ethnic minority partner violence include: substance abuse, low socio-economic status, and violence exposure and victimisation in childhood
- Risk factors for LGBTQI groups include discrimination and internalised homophobia.

A third section of the PASK analysis looked at partner abuse in Asia, Africa, the Middle East, Latin America and Europe¹⁶. It found that:

- The most common risk factors for partner violence worldwide have also been found to be significant risk factors in the USA and other English-speaking industrialised nations
- Most often cited are the risk factors related to low household income and victim/perpetrator unemployment (n=36). An almost equally high number of studies (n=35) reported the victim's low education level. Alcohol and substance abuse by the perpetrator was a risk factor in 26 studies. Family of origin abuse, whether directly experienced or witnessed, was cited in 18 studies. Victim's younger age was also a major risk factor, mentioned in 17 studies, and perpetrator's low education level was mentioned in 16 studies.

This comprehensive review of the literature demonstrates the risk factors that contribute to the prevalence of domestic violence. Gender stereotypes and gender inequality are not present.

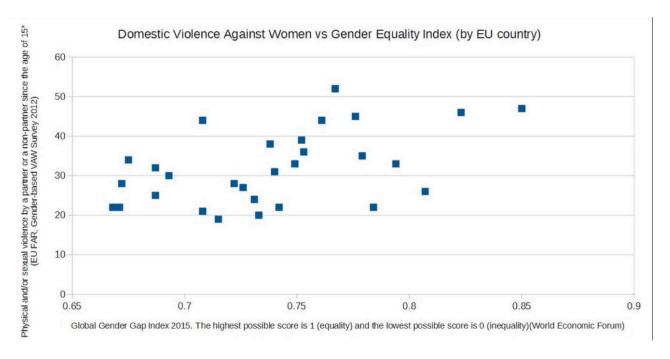
The following graph¹⁷ demonstrates that violence against women and gender equality in Europe aren't correlated, let alone causally related. Some countries with high levels of gender equality have high levels of violence against women, while some countries with low levels of gender equality have low levels of violence against women.

¹⁵ West, CM, *Partner Abuse in Ethnic Minority and Gay, Lesbian, Bisexual, and Transgender Populations*, Partner Abuse, Volume 3, Number 3, July 2012, pp. 336-357(22).

¹⁶ Esquivel-Santoveña, EE, Lambert, TL., Hamel, J, *Partner Abuse Worldwide*, Partner Abuse, Volume 4, Number 1, January 2013, pp. 6-75(70).

¹⁷ Nevala, S. (2011). <u>FRA survey on gender-based violence against women</u>. Vienna: European Union Agency of Fundamental Rights. World Economic Forum (2015). <u>The Global Gender Gap Index 2015</u>. Geneva: World Economic Forum.





RECOMMENDATION 4

The evidence for gender inequality being a contributor to the prevalence of domestic violence appears to be weak and highly contested. Rather than examining measures to improve gender equality (which may of course be laudable in and of themselves), we believe this Inquiry would best use taxpayer resources by instead addressing the proven risk factors for domestic violence and exploring solutions that have been proven to make a real reduction in prevalence rates.

THE LEVEL AND IMPACT OF COORDINATION, ACCOUNTABILITY FOR, AND ACCESS TO SERVICES AND POLICY RESPONSES ACROSS THE COMMONWEALTH, STATE AND TERRITORY GOVERNMENTS, LOCAL GOVERNMENTS, NON GOVERNMENT AND COMMUNITY ORGANISATIONS, AND BUSINESS.

Male victims lack services

While it is undeniable that some female victims lack access to the range of services required to adequately meet their needs, male victims are still denied access to the vast majority of family violence services in Australia. Despite males making up approximately one third of victims of family violence overall in the Australian community, there are far fewer support services available to male victims and their children compared to female victims.

Thankfully, family violence legislation across Australia is gender-neutral. However only men are discriminated against in policy and service provision.

Health services screen women, but not men, for family violence.

Service providers adopt the Family Violence Multi-Agency Risk Assessment and Management Framework (MARAM Framework), stating that heterosexual males – and only heterosexual males - who present as victims of intimate partner violence are likely to actually be perpetrators.

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The Judicial College of Victoria's Family Violence Bench Book provides similar advice to members of the judiciary.

Safe rooms at courthouses in Queensland are open to female victims and female perpetrators of family violence, while no such support is offered to male victims.

This is an appalling, unjust state of affairs that denies basic human rights to half of Australia's citizens on the basis of their gender.

For those who argue this discrimination is appropriate because the majority of victims of family violence are women, our response would be that we do not discriminate in this way on any other issue.

We don't deny services to suicidal women because more men kill themselves, or deny workplace health and safety programs to women because more men die in the workplace.

We have the capacity to support all victims of family violence, whether male or female, young or old, gay or straight, rich or poor, whatever their religion or cultural background, and wherever they live.

Barriers to male victims disclosing their experience of abuse

Male victims of family violence and abuse – like women – often face many barriers to disclosing their abuse. However, male victims face a set of unique barriers which make them much less likely to report being a victim of family violence.

Men are 2 to 3 times more likely than women to have never told anybody about experiencing partner violence ¹⁸. 54.1% of males who have experienced current partner violence have never told anybody about it, along with 20.9% of males who have experienced previous partner violence.

Men are also around 50% more likely than women to have never sought advice or support about experiencing partner violence ¹⁹. 68.1% of males who have experienced current partner violence have never sought advice or support, along with 59.2% of males who have experienced previous partner violence.

Many barriers to male victims disclosing their abuse are created or amplified by the lack of public acknowledgement that males can also be victims of family violence, the lack of appropriate services for male victims and their children, and the lack of appropriate help available for male victims from existing services. Such barriers include not knowing where to seek help, not knowing how to seek help, feeling there is nowhere to escape to, feeling they won't be believed or understood, feeling that their experiences would be minimised or they would be blamed for the violence and/or abuse, feeling that services would be unable to offer them appropriate help, fear that they would be falsely arrested because of their gender (and their children left unprotected from the perpetrator).

¹⁸Australian Bureau of Statistics (2013), Personal Safety Survey, Australia, 2012, cat no 4906.0, ABS, Canberra. Table 23 EXPERIENCE OF PARTNER VIOLENCE SINCE THE AGE OF 15, Whether ever told anyone about partner violence. 54.1% of males and 25.6% of females have never told anyone about violence by their current partner since the age of 15. 20.9% of males and 6.7% of females have never told anyone about violence by their previous partner since the age of 15.

¹⁹ Australian Bureau of Statistics (2017). Personal Safety Survey, Australia, 2016 (Cat. No. 4906.0). Canberra: Australian Bureau of Statistics. Table 17.1 EXPERIENCE OF CURRENT PARTNER VIOLENCE SINCE AGE 15, By sex of respondent, Estimate. 102,400 males in 2016 did not seek advice or support after incident of violence by a current partner, while 150,300 males had experienced violence by a current partner since the age of 15. 126,900 females in 2016 did not seek advice or support after incident of violence by a current partner, while 275,000 females had experienced violence by a current partner since the age of 15. Table 18.1 EXPERIENCE OF PREVIOUS PARTNER VIOLENCE SINCE AGE 15, By sex of respondent, Estimate. 235,300 males in 2016 did not seek advice or support after incident of violence by a previous partner, while 397,300 males had experienced violence by a previous partner since the age of 15. 506,800 females in 2016 did not seek advice or support after incident of violence by a previous partner since the age of 15.

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Many male victims face barriers to disclosing their abuse because of the challenges such disclosure brings to their sense of manhood. Such barriers include shame, embarrassment, social stigma, shame at feeling unable to protect themselves and/ or feeling less independent, fear of being laughed at or ridiculed, fear of being called 'weak' or 'wimpy,' disbelief, denial, and making excuses for their partner's violence and abuse.

It may be reasonable to ask the question, "have male victims who don't seek advice or support done so because the violence they experienced was so minor/trivial?" There doesn't appear to be evidence to support this theory. The only Australian study we are aware of to have explored this question is the large-scale South Australian *Interpersonal Violence* and Abuse Survey²⁰ which found that "females (22.0%) were more likely to report the [domestic violence] incident(s) to the police than males (7.5%)" Respondents who did not leave their partner as the result of the violence were asked their reasons for staying in the abusive relationship. 28 per cent of males and 20.8 per cent of females answered "violence not serious enough" – slightly higher for males but not significantly so. Respondents who had left or stayed apart because of the violence and abuse were asked their reasons for leaving. 50 per cent of males and 64.1 per cent of females answered "continuation of violence/abuse" – once again slightly higher for females but not significantly so.

Internationally, "The 2004 [Canadian] General Social Survey (GSS) on victimisation found that fewer than 3 in 10 (28%) victims of spousal violence reported the abuse to the police (36% of female victims and 17% of male victims)"²¹. The 2008-09 Scottish Crime and Justice Survey: Partner Abuse found that... "Around one in five (21%) who experienced partner abuse in the last 12 months said the police did come to know about the most recent / only incident. Again, this figure was significantly higher among women (35% compared with eight per cent of men)". ²² Watson & Parsons' *Domestic Abuse of Women and Men in Ireland: Report on the National Study of Domestic Abuse* ²³ (a large-scale community survey) found that "women are more likely than men to report [severe abuse] to the Gardaí [Irish Police]. Over a quarter of women reported their experience to the Gardaí compared to about one man in 20" (a statistically significant difference).

There is also evidence that male and female victims of family violence in Australia are likely to suffer similar injuries, providing evidence that men might indeed see attacks on them as serious or threatening. The NSW Bureau of Crime Statistics and Research²⁴ found that between 1997 and 2004, 28.9 per cent (almost one in three) victims of domestic assault in NSW were male. Men and women suffered similar percentages of injuries and similar injury types as shown in the following tables.

²⁰ Dal Grande et al. (1999). Interpersonal Violence and Abuse Survey. Adelaide: South Australian Department of Human Services.

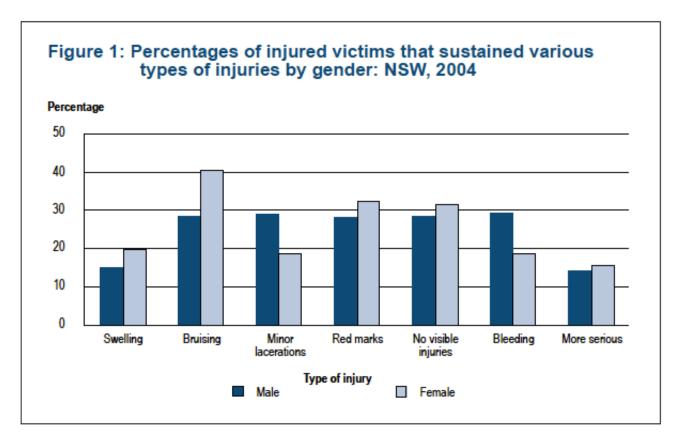
²¹ Statistics Canada (2009). Family Violence in Canada: A Statistical Profile. Ottowa: Minister of Industry.

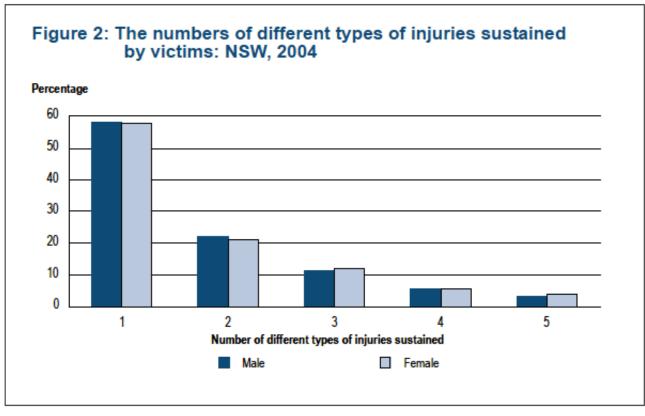
²²Macleod, P., Kinver, A., Page, L., Iliasov, A. & Williams, R. (2009). <u>2008-09 Scottish Crime and Justice Survey: Partner Abuse</u>. Edinburgh: The Scottish Government.

²³ Watson, D., & Parsons, S. (2005). <u>Domestic Abuse of Women and Men in Ireland: Report on the National Study of Domestic Abuse</u>. Dublin: National Crime Council.

²⁴ People, J. (2005). *Trends and Patterns in Domestic Violence Assaults*, Crime and Justice Bulletin, No 89, NSW Bureau of Crime Statistics and Research, October.









Lack of support services for male victims and their children

What support services are available in Australia for male victims and their children? Some generic (i.e. not male-specific or male-friendly) support is certainly available but such services are often unaware of the unique issues faced by male victims of family violence and are therefore unable to offer effective and appropriate help. Some generic – and even specialist male – services do not believe male victims, minimise their experiences or even blame them for the abuse. Another issue is that while individual workers within generic services might be aware of the issues facing male victims, they often face workplace cultures and systems that aren't supportive.

The Australian *Intimate Partner Abuse of Men* study found that service providers "rated themselves and their agencies as only moderately effective in (1) overcoming the barriers to men disclosing and (2) harnessing the factors that facilitate disclosure... there is a lot of work needed in terms of training and service design if agencies are to be effective in assisting men to disclose abuse."²⁵

Government-funded services are often suspicious of 'male perpetrators claiming to be victims'. The Victoria State Government's *Family Violence MARAM Framework*²⁶ advises service providers that,

"The research and evidence demonstrate that relatively few men in heterosexual relationships are solely experiencing family violence (including intimate partner violence). Men are much more likely than a female partner to use a number of repeated, patterned forms of violence to dominate and control over time. This pattern is a common and known problem in heterosexual intimate partner violence but can also be present in any other form of family violence. A perpetrator/predominant aggressor can present as a victim survivor... The extent to which perpetrators in these situations believe that they are partly or solely the victim survivor, versus the extent to which they know they are not a person experiencing family violence, can vary."

The Judicial College of Victoria's Family Violence Bench Book²⁷ similarly advises members of the judiciary that,

"The research evidence and experience of family violence professionals unambiguously demonstrates that relatively few men in heterosexual relationships are solely victims of intimate partner violence. The majority of women who use some form of violence towards their partner have been subjected to (worse) violence by that man before, or on the same occasion. Often, men who are genuinely victims of family violence experience the violence from a same sex partner, carer or a male relative. Men who are the principle users of family violence often try to present as a victim or the victim of violence. Sometimes they succeed in convincing themselves, police and others."

Not only do these policies fail to support male victims of family violence (and fail to challenge female perpetrators who claim to be victims), but they increase the danger for male victims and their children by recommending service providers advise violent female partners that their male victims have sought support for their partner's violent and abusive behaviour.

RECOMMENDATION 5

Discrimination against men in policy and service provision must be stopped to bring it in line with gender neutral family violence legislation across Australia. Either both men and women who present as victims should be taken at face value, with their stories believed verbatim, or both men and women should have their stories questioned in order to determine whether they are actually victims, victim/perpetrators, or perpetrators of family violence.

²⁵ Tilbrook, E, Allan, A, and Dear, G (2010). Intimate Partner Abuse of Men. East Perth: Men's Advisory Network, May 26, 2010.

²⁶ Victorian Government (2020). <u>Family Violence Multi Agency Risk Assessment and Management Framework</u>. Melbourne: Victorian Government, Family Safety Victoria, p301.

²⁷ Judicial College of Victoria (2014). Family Violence Bench Book. Melbourne: Judicial College of Victoria. http://www.judicialcollege.vic.edu.au/eManuals/FVBBWeb/index.htm#34578.htm



What is required to meet the needs of male victims?

The groundbreaking 2010 *Intimate Partner Abuse of Men* ²⁸ report surveyed almost 200 service providers from around Australia and came up with 4 key recommendations, which we fully endorse:

RECOMMENDATION 6

That government funded public awareness campaigns be conducted to raise awareness of intimate partner violence against men. Such campaigns need to be very carefully designed so as to complement campaigns about family violence against women and children and not to damage the effectiveness of those campaigns.

RECOMMENDATION 7

Consideration should be given to providing publicly-funded services specifically for male victims of intimate partner abuse.

RECOMMENDATION 8

Consideration should be given to how services for male victims of intimate partner abuse can be integrated with services for female victims and general services for victims of family violence in all its forms. It is likely that some types of service can be effectively integrated while others will need to be gender-specific.

RECOMMENDATION 9

Workers in the broader health and welfare fields should be provided with training to assist them to respond effectively to male victims of intimate partner abuse. In particular, these workers need training in how to dismantle the barriers (identified in our research) to men disclosing their abuse and strengthening the factors that facilitate men's disclosure of their abuse.

The kinds of services that could be considered in order to better support male victims include counselling and support services, gender-sensitive services (specifically for men), accommodation services, helplines and crisis response, community education and prevention programmes, specialist family violence services for diverse sections of the male population (e.g. gay men, aboriginal men); financial support; court services and legal advice (such as "safe rooms" at courthouses); improved policing responses; support groups; perpetrator programs for women; and health service screening tools. For example, there are dedicated telephone support lines for male victims of family violence in the UK, Ireland, USA & Canada, but none in Australia. We are not arguing that an equal number of services would need to be provided to male and female victims of family violence, but that at least a modicum of support be provided to male victims where none currently exists.

For male victims to truly receive equitable support, they would need to be included in the National Plan to Reduce Violence against Women and their Children 2010 – 2022 and associated systemic reforms. Tertiary education courses (social work; other health and human services) could also consider the inclusion of specific training about meeting the needs of male victims of family violence and their children.

²⁸ 20 Tilbrook, E., Allan, A., & Dear, G. (2010). Intimate partner abuse of men. East Perth: Men's Advisory Network.



ALL FORMS OF VIOLENCE AGAINST WOMEN, INCLUDING, BUT NOT LIMITED TO, COERCIVE CONTROL & TECHNOLOGY-FACILITATED ABUSE.

'Coercive control' vs 'couple violence'

The Committee will likely hear evidence that while "situational couple violence" (not motivated by a desire to control the life of the other person) is perpetrated almost equally by men and women, "coercive control" (a pattern of behaviour which seeks to take away the victim's liberty or freedom, to strip away their sense of self) is predominantly or almost exclusively perpetrated by men.

Recent research from the UK challenges this assertion. In 2014 Elizabeth Bates from the University of Cumbria, along with Nicola Graham-Kevan and John Archer from the University of Central Lancashire published their study titled *Testing* predictions from the male control theory of men's partner violence²⁹:

The aim of this study was to test predictions from the male control theory of Intimate Partner Violence (IPV) and Johnson's (1995) typology. A student sample (N = 1104) reported on their use of physical aggression and controlling behaviour, to partners and to same-sex non-intimates. Contrary to the male control theory, women were found to be more physically aggressive to their partners than men were, and the reverse pattern was found for aggression to same-sex non-intimates. Furthermore, there were no substantial sex differences in controlling behaviour, which significantly predicted physical aggression in both sexes. IPV was found to be associated with physical aggression to same-sex non-intimates, thereby demonstrating a link with aggression outside the family. Using Johnson's (1995) typology, women were more likely than men to be classed as "intimate terrorists", which was counter to earlier findings. Overall, these results do not support the male control theory of IPV. Instead, they fit the view that IPV does not have a special aetiology, and is better studied within the context of other forms of aggression.

In light of this evidence, we would encourage the Committee to consider that perpetrators who might be seeking to extend their coercive controlling behaviour by declaring themselves as victims, may be either male or female.

It is critically important that the Committee also understand that while 'coercive control' is undeniably the most serious form of family violence, 'couple violence' is by no means minor or trivial. Even feminist scholar Michael Johnson, one of the best known scholars of typologies of violence, acknowledges that women's violence is a serious social issue which must be addressed³⁰:

- "women both initiate violence and participate in mutual violence and that, particularly in teenage and young adult samples, women perpetrate violence against their partners more frequently than do the men"
- "repeat, severe violence against a non-violent intimate is symmetrical by gender"
- "I and others have always noted that situational couple violence
 - (a) is far and away the most common form of intimate partner violence,
 - (b) is perpetrated about equally by men and women, and
 - (c) can be extremely consequential."

²⁹ Bates, E. A., Graham-Kevan, N. and Archer, J. (2014), <u>Testing predictions from the male control theory of men's partner violence</u>. Aggr. Behav., 40: 42–55. doi:10.1002/ab.21499.

³⁰ Johnson, M. (2011). <u>Gender and Types of Intimate Partner Violence: A Response to an Anti-Feminist Literature Review</u>. Aggression and Violent Behavior, Volume 16, Issue 4, July/August 2011. pp 289 - 296.



THE ADEQUACY OF THE QUALITATIVE AND QUANTITATIVE EVIDENCE BASE AROUND THE PREVALENCE OF DOMESTIC AND FAMILY VIOLENCE AND HOW TO OVERCOME LIMITATIONS IN THE COLLECTION OF NATIONALLY CONSISTENT AND TIMELY QUALITATIVE AND QUANTITATIVE DATA INCLUDING, BUT NOT LIMITED TO, COURT, POLICE, HOSPITALISATION AND HOUSING.

The Australian Bureau of Statistics Personal Safety Survey

The ABS Personal Safety Survey is the largest community survey on family, domestic and sexual violence in Australia, capturing violence that does not make it to the attention of other data reporting methods such as crime and health statistics. The Personal Safety Survey started off as the Women's Safety Survey (1996)³¹. Information was collected from approximately 6,300 women aged 18 and over about their safety at home and in the community. No men were surveyed. The next survey was the first Personal Safety Survey in 2005³², with a total survey sample of 11,800 females and 4,500 males. The 2012 Personal Safety Survey³³ sampled 13,307 females and 3,743 males. In 2016³⁴, the survey interviewed 15,589 females and 5,653 males.

Since 1996 the male sample size for the survey has ranged between 0% (1996) and 28% (2005), resulting in a dataset for males which has a much higher Relative Standard Error (RSE) than the comparative dataset for females. For example, the figures on persons who experienced violence by a current partner in the last 12 months for women have an RSE of 13.4, while those for men have an RSE of 25.5 ("should be used with caution").

The Senate Finance and Public Administration References Committee's 2015 report³⁵ into domestic violence in Australia acknowledged the need for better data on male victims of family violence, especially in the ABS Personal Safety Survey:

1.11 The committee acknowledges that further work is required to address domestic and family violence against men and the data on its prevalence, noting that only 22 per cent of the respondents in the Public Safety Survey undertaken by the ABS were male.

RECOMMENDATION 10

We strongly urge the Committee to consider recommending equal sample sizes of males and females for the the next ABS Personal Safety Survey so that robust data is available on the experiences of all Australians.

³¹ Australian Bureau of Statistics (1996). Women's Safety Australia, 1996 (Cat. No. 4128.0). Canberra: Australian Bureau of Statistics.

³² Australian Bureau of Statistics (2006). <u>Personal Safety, Australia, 2005 (Reissue)</u> (Cat. No. 4906.0). Canberra: Australian Bureau of Statistics.

³³ Australian Bureau of Statistics (2012). Personal Safety, Australia, 2012 (Cat. No. 4906.0). Canberra: Australian Bureau of Statistics.

³⁴ Australian Bureau of Statistics (2017). Personal Safety, Australia, 2016 (Cat. No. 4906.0). Canberra: Australian Bureau of Statistics.

³⁵ Finance and Public Administration References Committee (2015). Domestic violence in Australia. Canberra: Commonwealth of Australia.

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Health service screening tools

Health services across Australia have in place domestic violence screening tools (see Appendix A) that are used on all women aged 16 and over to screen for domestic violence. No men are screened for domestic violence.

One of our colleagues works as an Occupational Therapist at a NSW Local Area Health Service. She attended a compulsory training session for all NSW Health workers covering the use of the NSW Health domestic violence screening tool. The following is a direct transcription from the presentation:

Presenter: "Well, you will encounter gender issues, obviously, throughout the whole of society. But around domestic violence, because, well as you know, because over 90 per cent, something like 98 or 97 per cent of perpetrators are male in our society, NSW Health decided to focus their Domestic Violence Policy on women, because we only have so much time and resources."

Firstly, it should be noted here that a NSW Government employee is giving staff misinformation about the gender breakdown of domestic violence. There is absolutely no evidence showing that "something like 98 or 97 per cent of perpetrators are male." The most conservative recent estimates³⁶ (from police reports, which do not cover the vast majority of male victims who never report their assaults³⁷) show that 75 per cent of domestic violence related assault offenders in NSW between April 2015 to March 2020 were male, while 32 per cent (around one in three) victims were male.

Secondly, this rationale is never presented when talking about services for any other sub-population. For example, LGBTQI or Aboriginal and Torres Strait victims of family violence aren't ignored because they make up a small minority of victims. To the contrary: there are specialist services available for these sub-groups precisely because they are in the minority and need services tailored to their specific needs and circumstances. The same is true of male victims of family violence. It doesn't matter whether males make up 5 per cent, 15 per cent, 35 per cent or 50 per cent of victims of family violence, the fact is that there are few services currently available to assist them. This flies in the the face of our international human rights and equal opportunity obligations.

When my partner and I were expecting our second child, we went to the intake with our midwife at a NSW Health hospital and my partner was given the domestic violence screening tool. I was ushered out of the room and my partner was asked various questions about whether she was experiencing domestic violence. She asked the midwife, "Do you feel awkward asking these questions of the women that come in here?" The midwife answered, "Well, actually, more often than not the women tell me that they are the ones who are hitting their male partner, but that is not reported on the form as part of the screening tool. So we really feel that a lot is being missed."

There is research evidence in support of our midwife's anecdotal evidence. Halford et al conducted Australian research in 2011 on intimate partner violence in couples seeking relationship education for the transition to parenthood³⁸ and found that in 19% of couples both partners perpetrated IPV, in 12% only the woman had perpetrated IPV, and in 3% only the man had perpetrated IPV.

³⁶ NSW Bureau of Crime Statistics and Research, Domestic violence statistics for NSW (reference <u>DomesticViolenceStatistics20Q1</u>).

³⁷ Dal Grande, E., Woollacott, T., Taylor, A., Starr, G., Anastassiadis, K., Ben-Tovim, D., et al. (2001). Interpersonal violence and abuse survey. September 1999. Adelaide: Epidemiology Branch, Dept. of Human Services. Also Statistics Canada (2009, October). Family violence in Canada: A statistical profile 2009. Ottawa: Statistics Canada, Canadian Centre for Justice Statistics, Ministry of Industry. Also MacLeod, P., Kinver, A., Page, L., & Iliasov, A. (2009, December). 2008-09 Scottish crime and justice survey: Partner abuse. Edinburgh: The Scottish Government.

³⁸ Halford, W. K., Petch, J., Creedy, D. K., & Gamble, J. (2011). Intimate partner violence in couples seeking relationship education for the transition to parenthood. Journal of Couple & Relationship Therapy, 10(2), 152-168.

One in Three Campaign



Internationally, Charles and Perreira (2007) ³⁹ reported in a study of 2,310 socially disadvantaged US mothers and fathers participating in the Fragile Families study, that 8.2% of women and 1.2% of men perpetrated some form of IPV during pregnancy. However, this study used only a single item to assess IPV and consequently likely underestimates the rate of IPV. Kan and Feinberg (2010)⁴⁰ assessed IPV using the comprehensive Conflict Tactics Scales–Revised in a sample of 168 expectant couples predominantly recruited through antenatal classes, and reported 30% of women and 18% of men had perpetrated an act of IPV in the past year.

RECOMMENDATION 11

We urge the Committee to consider expanding the domestic violence screening tool to include males as well as females so that a more accurate picture of domestic violence can be captured for all Australians.

Using public funds to survey women only

Decades ago, when family, domestic and sexual violence was presumed to be something that affected women only (or that the vast majority of those affected were women), single-sex research by government bodies could be excused on the basis of cost-saving. The ABS Women's Safety Survey 1996 was one of many such surveys carried out in the 1990s.

However, now that it is widely acknowledged that males make up a significant minority of victims of family, domestic and sexual violence, research tends to survey both women and men so that an accurate picture can be painted of how the entire Australian community is affected – such as the ABS Personal Safety Survey.

We were astonished, therefore, to discover that in 2020, the Australian Institute of Criminology⁴¹ spent significant public funds on a survey about women's experience of family and domestic violence during the COVID-19 pandemic. Some 15,000 women took part in the online survey. No men were asked about their experiences. This is despite NSW data⁴² showing that referrals through the government's Safer Pathways program for female domestic and family violence victims in March 2020 increased by 11 per cent from the same period last year, while for males there was an increase of almost 9 per cent.

RECOMMENDATION 12

We urge the committee to consider recommending that organisations using public funds to capture data on family, domestic and sexual violence survey a proportionate number of women and men.

³⁹ Charles, P., & Perreira, K. M. (2007). Intimate partner violence during pregnancy and 1-year post-partum. Journal of Family Violence, 22(7), 609-619.

⁴⁰ Kan, M. L., & Feinberg, M. E. (2010). Measurement and correlates of intimate partner violence among expectant first-time parents. Violence and Victims, 25 32-44.

⁴¹ Boxall, H., Morgan, A. & Brown, R. (2020). <u>The prevalence of domestic violence among women during the COVID-19 pandemic</u>. Canberra: The Australian Institute of Criminology.

⁴² Cormack, L (2020). <u>Domestic violence victims seeking help rises 10 per cent after COVID-19 lockdown</u>. Pyrmont: The Sydney Morning Herald.



THE EFFICACY OF PERPETRATOR INTERVENTION PROGRAMS AND SUPPORT SERVICES FOR MEN TO HELP THEM CHANGE THEIR BEHAVIOUR.

Perpetrator programs that work

Most existing perpetrator programs based (loosely) on the Duluth Model of male patriarchal power and control don't acknowledge the lived experience of many male perpetrators or any female perpetrators, and are therefore largely ineffective at preventing future violence. There is even evidence that some Men's Behaviour Change Programs lead to increases in hostility and sexist attitudes and the escalation of violence for some men who take part⁴³. The Duluth Model also fails victims because its definition of family violence as 'male and patriarchal' provides no assistance to enable female victims to recognise potentially violent men in the future. Clear evidence of success for Duluth-based perpetrator programs is limited.

We would recommend the trialling of evidence-based perpetrator programs for both sexes based on other models. The work of Mo Yee Lee, Adriana Uken and John Sebold⁴⁴ in the United States is giving excellent results. They offer a solution-focused treatment program for family violence offenders. Building on a strengths perspective, their solution-focused approach holds a person accountable for solutions instead of focusing on problems. Their outcome study was a 1-group pre- and post-test design with a 6-month follow-up to evaluate the effectiveness of a solution-focused group treatment program for 90 family violence offenders who were ordered by the court to receive treatment. Findings of the outcome study indicated a recidivism rate of just 16.7 per cent of program participants as based on official records over a 6-year period. There was a significant improvement in participants' relational skills in intimate relationships as evaluated by their spouses or partners and a significant increase in their self-esteem based on self-reports.

Our concerns about the use of perpetrator programs based on the Duluth Model are as follows:

- 1. The Duluth Model is about blaming and shaming men, more than giving them the insights and support to help them stop their abusive behavior. It preaches that men who batter don't have a personal problem, but are simply reflecting "a culture that teaches men to dominate." Because blaming is one of the major strategies used by offenders to intimidate victims and to justify their abusive acts, using confrontation and assigning blame in treatment may rerepresent a similar and unhelpful dynamic in abusive relationships.
- 2. It's based on ideology, not science. The model was developed, not by a team of psychologists and research scientists, but in consultation with "a small group of activists in the battered women's movement," and "more than 200 battered women in Duluth." The model rejects treatment through insight models, family systems theory or cognitive-behavioural models in favour of what supporters call a "sociopolitical model": a "radical feminist reeducation camp," where battery is equated with masculinity.
- 3. It ignores drugs and alcohol, Borderline Personality Disorder and other serious psychological problems.
- 4. It says there is only one cause for domestic violence, and only one solution. This approach rejects joint therapy in all cases, even when the woman feels safe and wants to keep the marriage together. It treats women as if they are unable to make their own choices.

⁴³ Richards, J., MacLachlan, A., Scott, W., & Gregory, R. (2002). <u>Final Report: 'Identification of characteristics and patterns of male domestic partner abusers</u>,' pp 32 & 35.

⁴⁴ Lee, M., Uken, A., & Sebold, J. (2004). Accountability for Change: Solution-Focused Treatment with Domestic Violence Offenders. Families in Society: The Journal of Contemporary Social Services, 85(4), 463-476. Also Lee, M. Y., Uken, A., & Sebold, J. (2007). Role of Self-Determined Goals in Predicting Recidivism in Domestic Violence Offenders. Research on Social Work Practice, 17(1), 30.

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- 5. There's no real evidence it works.
- 6. It ignores female perpetrators and male victims of domestic violence, both straight and gay

The alternative programs that we have suggested have the following features:

- 1. Well-designed programs have a firm and explicit theoretical basis which is supported by empirical research
- 2. Programs are based on accurate assessment of the 'risk', 'needs' and 'responsivity' of offenders
- 3. There is strategic targeting of such risk and need factors through program features
- 4. Programs are delivered to consistently high standards, using treatment responsivity
- 5. There is inclusion of skills-oriented, cognitive-behavioural approaches in the program, and most importantly...
- 6. Only programs which are well-matched to, or modified to meet the needs of the offender and demonstrate treatment or program efficacy have integrity.

[The above six points are criteria for perpetrator programs taken from UK researcher Nicola Graham-Kevan's article *Domestic violence: Research and implications for batterer programmes in Europe*⁴⁵].

We would add the following list of criteria to assess alternative perpetrator programs:

- 1. They should be open to both male and female perpetrators (either combined in the same program or in separate streams for men and women)
- 2. They should be offered initially as alternatives to prison (thereby allowing the perpetrator to continue to work and support their family while on probation), with incarceration to follow if the perpetrator reoffends.
- 3. As with child and elder abuse, programs should operate at multiple levels, addressing those contextual and personal factors that research consistently identifies as being implicated, e.g. drug and alcohol abuse, mental health issues and inadequate conflict management and affect regulation skills.
- 4. They should offer couples counselling and family therapy where there exists the expressed wish to maintain a relationship.
- 5. Rather than blaming and shaming, they should focus on and emphasise solutions, competencies, and strengths in offenders, but never equate this with a minimisation of the destructiveness of their violent behaviours.
- 6. The effectiveness of a solution-focused treatment program is contingent on the support of the legal system that provides a strong sanction against violent behaviours.

The indigenous *Ending Family Violence Program* in Woorabinda QLD for male and female perpetrators is an excellent example of the kind of program that we would like to see run (obviously modified as appropriate for non-indigenous perpetrators). Appendix B of this submission gives further details of the program.

RECOMMENDATION 13

We urge the Committee to consider recommending that male perpetrator programs based (loosely) on the Duluth Model of patriarchal power and control be abandoned in favour of evidence-based perpetrator programs for both sexes based on other models as outlined above.

⁴⁵ Graham-Kevan, N (2007). Domestic Violence: Research and Implications for Batterer Programmes in Europe. European Journal of Criminal Policy Research (2007) 13:213–225.



THE EXPERIENCES OF ALL WOMEN, INCLUDING ABORIGINAL AND TORRES STRAIT ISLANDER WOMEN, RURAL WOMEN, CULTURALLY AND LINGUISTICALLY DIVERSE WOMEN, LGBTQI WOMEN, WOMEN WITH A DISABILITY, AND WOMEN ON TEMPORARY VISAS.

Shared experiences of women and men within population sub-groups

It is crucial that the unique experiences of diverse population sub-groups such as Aboriginal and Torres Strait Islanders, rural populations, culturally and linguistically diverse communities, LGBTQI individuals, persons with disabilities, and those on temporary visas, be studied and recognised so that services and support can be tailored to their individual needs. However, the experiences of male victims of family, domestic and sexual violence from each of these sub-populations must also be studied. In some cases, such as for disabled people and people from rural areas, women and men from these populations may be likely to share similar experiences. In other cases, such as people from some culturally and linguistically diverse communities, cultural factors may impact women and men in different ways.

RECOMMENDATION 14

We recommend that when tailoring services and support for diverse population sub-groups, the experiences of both female and male victims be taken into account.

THE IMPACT OF NATURAL DISASTERS AND OTHER SIGNIFICANT EVENTS SUCH AS COVID-19, INCLUDING HEALTH REQUIREMENTS SUCH AS STAYING AT HOME, ON THE PREVALENCE OF DOMESTIC VIOLENCE AND PROVISION OF SUPPORT SERVICES.

The impacts of the COVID-19 pandemic affect male victims too

As previously mentioned, data⁴⁶ from NSW show that referrals through the government's Safer Pathways program for female domestic and family violence victims in March 2020 increased by 11 per cent from the same period last year, while for males there was an increase of almost 9 per cent. There is no reason to assume that the impacts of health requirements such as staying at home (such as being 'trapped' with an abusive partner with fewer opportunities to seek help) would affect female and male victims differently. If there is an increase in domestic violence because of changes brought about by the COVID-19 pandemic, both females and males will be affected and will need additional support as a result.

RECOMMENDATION 15

We urge the Committee to ensure that any extra funding and support made available to assist victims of family and domestic violence during the COVID-19 pandemic are made available to all Australians.

⁴⁶ Cormack, L (2020). <u>Domestic violence victims seeking help rises 10 per cent after COVID-19 lockdown</u>. Pyrmont: The Sydney Morning Herald.



AN AUDIT OF PREVIOUS PARLIAMENTARY REVIEWS FOCUSSED ON DOMESTIC AND FAMILY VIOLENCE.

NSW Government Legislative Council's Standing Committee on Social Issues "Domestic violence trends and issues in NSW" (August 2012)

The NSW Government Legislative Council's Standing Committee on Social Issues' report⁴⁷ on domestic violence trends and issues in NSW was the first ever to acknowledge the existence, needs, barriers to reporting and barriers to accessing support faced by male victims of family violence.

The findings of the report include:

- "There was a broad recognition among inquiry participants that women offenders and male victims do exist" (p.218). "Of [reported] victims of domestic assault in 2010, 69.2% were female, while 30.8% were male." (p.28)
- "Male victims have been much less visible and able to access supports than should be the case" (p.xxiv)
- "The experience of [males]... is equally as bad as that of other victims" (p.xxxii)
- Recognising "the gap in services for male victims and [encouraging] the government to examine how services can most appropriately be provided to male victims of domestic violence" (p.xxxii)
- Identifying males as "in need of special consideration with regard to domestic violence," along with Aboriginal people, older people, people with disability, and several other population groups (p.89).

One in Three were especially pleased the Committee recommended that the entire system for preventing and responding to family violence needed to take account of, and be effective for, all victims and perpetrators: not just women and children victims and male perpetrators as had been the case up until 2012.

The Committee also advised the Government that legislation and policy should be written in gender neutral terms – something we had been advocating for some time. They also strongly recommended that male victims and female perpetrators be addressed in the Government's forthcoming Domestic and Family Violence Framework.

Since the report was published, there have been some minor improvements in support for male victims of family violence in NSW.

- In 2013 the *Start Safely* rental assistance program ⁴⁸, which provides rent support to people who do not have a stable and secure place to live due to domestic or family violence, was opened up to male victims.
- In September 2014, male victims were included from the commencement of the *Safer Pathway* program⁴⁹ (consisting of a Domestic Violence Safety Assessment Tool to better and consistently identify the level of domestic violence threat to victims, a Central Referral Point to electronically manage and monitor referrals, and assistance from Victims Services to provide male victims with support)

⁴⁷ New South Wales. Parliament. Legislative Council. Standing Committee on Social Issues (August 2012). <u>Domestic violence trends and issues in NSW</u>. Sydney: NSW Parliament.

⁴⁸ https://www.facs.nsw.gov.au/housing/policies/private-rental-assistance-subsidy-policy

⁴⁹ https://www.women.nsw.gov.au/programs/safer-pathway

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• In November 2016, the NSW Government committed \$13 million over four years for Victims Services to pilot new responses for male victims of domestic and family violence. Unfortunately the Men's Referral Service (MRS) was initially appointed to run the pilot service to connect male victims of family violence with local support services set up in 48 locations throughout the state. The MRS, an arm of *No To Violence (NTV)*, was originally established to work with male *perpetrators* of family violence, and had no track record of working with male *victims*. NTV is on the public record⁵⁰ as stating "the need to be cautious in automatically assuming that a man assessed by police or another referring agent as a victim of domestic violence truly is the victim". A male victim seeking support who is told he needs to take responsibility for his 'violent and controlling behaviour' is probably not going to have a lot of confidence in ringing that service and asking for help. And if he does call and is assumed responsible for the violence, he may not reach out for help again. After taking around 120,000 calls in 12 months from men whom the police had determined to be victims, the MRS decided to stop providing the service. As of January 2018, five new Local Support Services had been contracted to provide services to male victims of domestic and family violence in NSW: Relationships Australia NSW, Relationships Australia Canberra, The Family Centre, Interrelate and Catholic Care Sydney. These services have never been publicly advertised, so it is unlikely male victims are aware they exist. They cannot be accessed directly - male victims can only be referred to them by the police.

At the date of writing this submission, the NSW government still provides no direct telephone support line, counselling or support services to male victims equivalent to its *Domestic Violence Line*. ⁵¹ This is a 24 hour NSW statewide telephone crisis counselling and referral service for women, including trans women. Counsellors on the Domestic Violence Line can help women talk to the police and get legal help; get hospital care and family support services; obtain an Apprehended Violence Order (AVO); develop a safety plan for them and their children; and find transport and emergency accommodation for them and their children.

Men are instead referred to three national telephone support lines - MensLine Australia, 1800RESPECT and the Men's Referral Service. The first two lines are bound by the MARAM Framework which assumes male victims who call are actually perpetrators, and the third is a support line for male perpetrators, not victims. There are no safe rooms providing safety, court advocacy services or legal advice at any NSW courthouses. There are no domestic violence screening programs for men run by NSW Health. There are no shelters for men and their children. No community education and prevention programmes about male victims have been run.

I visited my GP recently and saw this poster on the wall:



⁵⁰ Vlais, R. (2014). No To Violence response to the One in Three organisation's comments about male victims. Burnley: No To Violence.

⁵¹ https://www.facs.nsw.gov.au/domestic-violence/helpline

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The poster appears to support all victims of domestic violence. The website⁵² listed on the poster also appears to support all victims of domestic violence. However the website⁵³ for the NSW Domestic Violence Line whose telephone number is printed on the poster, makes it clear that the line is only available to *women* experiencing domestic and family violence. Male victims are instead referred to the two national telephone support lines (Mensline and 1800 RESPECT) that subscribe to the MARAM Framework that presumes men who call claiming to be victims are actually perpetrators.

The NSW Government's approach to domestic violence support during the COVID-19 pandemic appears to be as follows:

SPEAK OUT

If you are a woman, we will listen to you, believe you, and help you.

If you are a man, we will refer you elsewhere where they will listen to you, question you, possibly believe you, possibly decide you are a perpetrator, and probably not help you as there are few services available to refer you to.

Senate Finance and Public Administration References Committee "Domestic Violence in Australia" (August 2015)

In August 2015, the Senate Finance and Public Administration References Committee handed down their report⁵⁴ into domestic violence in Australia. It made a number of positive findings and recommendations with regard to male victims of family violence. The most important was:

<u>Recommendation 15</u>. The committee recommends that the Commonwealth Government recognise the need to provide appropriate services to male victims of domestic and family violence.

Victorian Royal Commission Into Family Violence (March 2016)

The Royal Commission Into Family Violence made two major recommendations regarding male victims.

Recommendation 180. The Victorian Government publicise and promote the Victims Support Agency in any information campaign relating to family violence as the primary source of assistance for male victims. The agency should also provide appropriate online resources for male victims [within 12 months].

Recommendation 181. The Victims Support Agency continue to receive all police referrals (L17 forms) relating to male victims, including after the establishment of the Support and Safety Hubs. The agency and all other relevant support services should develop joint arrangements to ensure that male victims of family violence are supported in obtaining the help they need [within two years].

As far as we can determine, neither of these recommendations have been carried out. In February 2017, the Victims Support Agency circulated a Discussion Paper regarding Recommendation 180, to which One in Three lodged a submission, but no appropriate online resources for male victims are available at the time of writing, some three and a half years later. Neither are joint arrangements to ensure that male victims of family violence are supported in obtaining the help they need.

⁵² https://www.speakout.dcj.nsw.gov.au/

⁵³ https://www.facs.nsw.gov.au/domestic-violence/helpline

⁵⁴ Finance and Public Administration References Committee (2015). Domestic violence in Australia. Canberra: Commonwealth of Australia.

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RECOMMENDATION 16

We urge the Committee to follow through with the recommendations for male victims from the previous parliamentary inquires outlined above to ensure they are implemented properly.

CONCLUSION

We have provided a list of recommendations that, if implemented, would go a long way towards providing the support needed by male victims of family violence.

We urge the *Inquiry into family, domestic and sexual violence* to consider the needs of all victims of family violence and abuse equally, no matter their gender, geography, socio-economic status, age, ability, sexual preference, culture, race or religion, when undertaking this important inquiry.

On behalf of all male victims of family violence and abuse, we request that you give serious consideration to this submission.

Thank you once again for the opportunity to provide input into this inquiry.

Greg Andresen Senior Researcher 24th July 2020



APPENDIX A - NSW HEALTH DOMESTIC VIOLENCE SCREENING TOOL

	NSW@HEALTH	FAMILY NAME	l	
	INDVIGHENTI	GIVEN NAMES		☐ MALE ☐ FEMALE
		D.O.B/	1.0.	
15	Site	ADDRESS		
	Mental Health			
١,	SCREENING FOR	LOCATION		
	DOMESTIC VIOLENCE	COMPLETE ALL DETAILS OR	R AFFIX P	ATIENT LABEL HERE
A	For females aged 16 or over, the completion of the Scree Assessment module and summarise findings under 'Alert Assessment' on page 7 and 'Initial Management Plan' on	s/Risks' on page 1, 'Current Functio	ndatory. A oning and	ttach completed module Supports' on page 5, 'R
W	The domestic violence routine screening tool is to with screening protocols and the NSW Health Police folence.			
3	YOU MUST EXPLAIN THIS TO THE WOMEN BEI	NG INTERVIEWED:		
•	In this Health Service we ask all women the same	questions about violence at home."	,	
•	This is because violence in the home is very comm	on and can be serious and we war	nt to impre	ove our response to
•	women experiencing domestic violence." "You don't have to answer the questions if you don't	want to."		
	 "What you say will remain confidential to the Health 	Service except where you give us	information	on that indicates that
Ļ	there are serious safety concerns for you or your ch SCREENING QUESTIONS:	liaren."		
١	1 "Within the last year have you been hit, slapp	ed or burt in other wave by your		
	partner or ex-partner?"	Ca of fluit in other ways by your	Yes	□No
	2 "Are you frightened of your partner or ex-part	ner?"	Yes	□No
1	If the woman answers NO to both questions, give the inf			
١'	"Here is some information that we are giving to all won	nen about domestic violence."		
1	16 the	guardiana continue to		
h	If the woman answers YES to either or both of the above question 3 and 4.	questions continue to		
ŀ			☐ Yes	
ŀ	question 3 and 4.		☐ Yes ☐ Yes	□ No □ No
1	question 3 and 4. · · ·3 ·*Are you safe to go home/Are you safe here a	at home?"	=	=
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APPENDIX B - ENDING FAMILY VIOLENCE PROGRAM, WOORABINDA

CDFVR Indigenous Family Violence Prevention Forum

2 May 2006, Mackay

Ending Family Violence Program, Woorabinda

By Annette Hennessy and Carol Willie

Introduction

This paper deals with a program developed specifically for Indigenous Offenders in the area of Domestic and Family Violence related offending. The program is delivered by the Office of Community Corrections (Rockhampton) in Woorabinda and is supported by the Magistrates Court. The aim of the use of the program is to divert offenders in this category away from violent offending through a culturally appropriate offender intervention program. Many of the offenders attending the program might otherwise be in prison. Many studies recently have highlighted the problems indigenous families face when offenders are imprisoned. The aim of this process is to allow offenders to stay in the community whilst working on rehabilitating themselves with a view to an end to violent offending in the future, resulting in a safe environment for the family.

Ending Family Violence Program – Entry to Program

Offenders appearing in Magistrates Court at Woorabinda for offences related to family violence – breach domestic violence order and assaults – may be placed on probation with conditions to attend and satisfactorily complete Ending Offending and Ending Family Violence programs, both of which are delivered by staff of the Office of Community Corrections.

An offender is considered an appropriate candidate to be placed on Probation if they have not breached community based orders in recent years or have not been given the opportunity of a community based order (whether or not they have previously been sentenced to imprisonment); that they are willing to participate in a probation order (they are required to consent to the order being made under the legislation); that it appears to the Court that the offender will benefit from intervention through the programs coupled with domestic violence counseling or otherwise; and that the circumstances of the offence before the Court, taking into account the offender's history means that an order of Probation is legally appropriate. Offenders at risk of a sentence of imprisonment are also targeted.

Probation orders are usually made for a period of 12 months to enable the offender to complete both the Ending Offending (Alcohol related) and Ending Family Violence Programs. There are quite often other conditions such as domestic violence counseling through Helem Yumba Healing Centre, attendance at ATODs for substance abuse, attendance at Mental Health Unit (all available in Woorabinda) and attendance on the Community Justice Group (for monitoring and assistance from community members involved in the justice system). It is a pre-requisite that offenders complete the Ending Offending program first as the vast majority of this offending is alcohol related or the offender has substance abuse problems and the information given in this program is built on in the Family Violence program. Both courses are run as a block twice a year in Woorabinda.

The Ending Family Violence Program is facilitated at present by Carolyn Willie (Department of Community Corrections) and Pastor Barry Mann. It was initiated by the Department of Corrective Services and developed by Murri people for use in prisons with Murri offenders. The program has been delivered in Woorabinda since late 2003 and Woorabinda first place in the State to run program for females.

Offenders on Probation orders with a condition that the programs be completed may also be joined in the program by offenders on other community based orders who the Office of Community Corrections consider will benefit from the program. Conditions of community

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By Annette Hennessy and Carol Willie

based orders (Probation, Community Service and Intensive Correction Order) provide for referral to programs or services by the supervising Community Corrections Officer.

Both males and females are referred to the program. There has been an increase in "mutual" or "cross" domestic violence orders in recent years, where on application an order is made against each of the parties in a conflict. As a consequence there have been more women who are subject to an order as a respondent and more breach charges against women have been seen in the Courts. All Woorabinda offenders are offered the opportunity by the Court of the intervention through the Ending Family Violence program when it is appropriate, at the earliest stage possible. Anecdotally it has been apparent that generally women are more prepared than men to accept intervention at an early stage in their offending life. Many men coming to court for family and domestic violence offences have the expectation (or desire) that they will receive a fine as penalty and may not be prepared to consider intervention of this nature until they are at risk of a more serious penalty such as imprisonment. Whilst some men have accepted the intervention early on, many men have not. As the offender is required by law to agree to the Probation order being made, the intervention cannot be imposed on them. Consequently, many of the men coming to the programs are entrenched offenders and the task of diverting them from future offending becomes much more difficult.

Duration and setting of the Program

The Ending Offending Program is of 6 weeks duration and is run 2 days per week for 5 hours. Ending Family Violence Program runs for 10 weeks and is run on Mondays and Tuesdays of each week for 5 hours each day. The program is run at Woorabinda Justice Group Office. The maximum number of offenders in the program at any one time is 6-8. Male and female offenders are handled by male and female conveners as is culturally appropriate. The meeting format varies during the delivery of the program including discussions, information giving, videos, group activities, private discussions and 'homework' activities.

Contents of the Program

At the outset of the program delivery, participants introduce themselves by reference to the tribal map and who their people are. Group rules are explained. A video, "Regenerate the Warrior" is shown. The video explores the experiences of a Murri man who explains the traditional role of Murri men as Warriors. The facilitators also incorporate the traditional of Women as Nurturers. The video looks at the role of the warrior, looks at where the warriors have gone and the social impacts on the continuation of that role. The dual roles of the Warrior/Nurturer is expressed in the program as being to provide food, shelter and protection for all members of the family. Traditionally Murri people are not violent people and the social disintegration which has occurred over the last 200 years has changed the fabric of the Murri family and broken down traditional roles.

The program promotes a healing circle approach – Identifying the problem, admitting responsibility for the problem, dealing with it, and planning for the future. It is the participant's responsibility to do this, there are services and people who can assist them but the ultimate responsibility is theirs.

Following an introduction to program, an outline of the feature sections of the program is provided. Those points include: Understanding different types of violence; Understanding the

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impact of violence; Looking at the influence of alcohol; Alcohol and violence in families; Consequences of violence; Empowerment; and Relapse Prevention.

Violence is looked at and discussed in detail, with an exploration of understanding different types of violence. The impact of violence on family, community and offenders is little understood and time is taken to look at those impacts. Often this is the first time that offenders actually consider all of the impacts of their actions on themselves and those around them. A more general examination of the impact of domestic violence, family violence and the cycle of violence in the community is also undertaken. This is an integral section of the program as navigating the hazards of a dysfunctional community in relation to family violence can be very difficult for an offender despite their best intentions efforts to move away from violence. It is not until positive change in the cycle of violence can be effected in the community, starting from individual efforts, that offenders will be living in a situation where violence is not accepted and not tolerated. Definitions of violence are discussed and the broad nature of actions which are included is usually a revelation to offenders (Threats, harassment, intimidation and sexual assault etc).

A Power Exercise (using sets of photo language cards) is conducted early in the program and again later in the program. The exercise involves the display of numerous photos (of landscapes, children, beaches, horses, many different photos) and participants are asked to choose 3 photos that speak to them. They are asked why they choose those photos and to discuss what feelings prompted those choices e.g. loneliness may have prompted the choice of a photo – the facilitator will speak with the participant about the feelings and then talk about the positive aspects of the photograph and the potential that the image can contain, in effect encouraging looking forward in a positive way and not perpetuating the negative feelings that might presently be associated with the participant's life.

A Power and Control Wheel is utilized to look at who in the family or social situation where violence occurs actually has the power and who has the control. The focus is to encourage a realistic acknowledgment of who holds the power in a real sense and encouraging that person to take responsibility for the control of the situation – acknowledging who has control and who is placed to do something about improving the situation.

Equality and Non –Violence is looked at in a similar way and focuses on the equality of all members of the family and respect for those people as well as acknowledging that all members of the family have equal rights and a say in what happens. Myths about Men's Rights are also challenged. Issues discussed include – your wife is your partner not your property, children are individuals and have needs which you need to meet, looking at participant's responsibility for their families.

Alcohol can often be a significant factor in the cycle of family violence in communities. The Ending Offending program is a pre-requisite to the Ending Family Violence program at Woorabinda and the issues from that program are reinforced again. Participants are informed of the facts relating to Alcohol-related Offences amongst Indigenous Australians. The Ending Offending Video is played and the effects of Alcohol on the Community are discussed. Reasons for violence are looked at (Alcohol is never an excuse). A video, "In the Gutter – no Way" is viewed which contains interviews with Murri people who have been 'in the gutter' and worked their way back into the community. Further issues looked at include Physical Effects of Alcohol misuse; Alcohol and Violence in Families; and Impact of Violence on Children and Young People.

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Participants are asked to draw a Timeline, plotting when they first started offending (including childhood), when they started drinking or smoking yarndi and what was happening in their life at the time. Quite often it is apparent that a trigger event (death of a significant person, marriage) coincides with the drinking and offending commencing. This enables the participant to see that they are not bad people but there are reasons underlying these difficulties in their lives and perhaps to identify counseling or assistance they need for those underlying issues.

The question - Where do You want to be – is posed to participants and they are encouraged to look back and look forward in order to answer the question. They may come from violent background and have developed a tolerant attitude to violence, for instance. This session looks at where the participant should be (in their view) and asks them to examine other ways they could have changed situations, and ways that they can manage situations in the future to break the cycle in their life. Other sessions include - Thinking about your drinking patterns; What are your feelings (Thinking about your Victim) – victim empathy; Emotional and Physical Effects of Violence; Impact of Violence on your Partner and Family.

A Video of a 'Sunday' Program report on a clan of Aboriginal Elder women from Central Australia which tells the story of their move from the mission settlements back onto their land in Central Australia and the traditional lifestyle they now lead. This story illustrates to participants that such a move could be possible if the community works towards it.

Non Violent Ways of Behaving, the consequences of actions for yourself and those around you are explored. Information is given on Learned Social Behaviour with a focus on good memories from learned social behaviour - what makes you feel loved and needed and how to act in that way towards others. The program provides practical information for discussion by participants to arm them with skills to live their lives without needing to resort to violence as a reaction or coping mechanism. They are encouraged to identify Cues and Warning Signs which lead to or prompt their violent behaviour. Methods to bring the role of protector (Warrior) back to the fore are discussed.

An exercise is conducted using a relationship pyramid. Participants are asked to place themselves on the pyramid indicating where see themselves in the extended family (they should be somewhere in the middle). They then give justifications for where they have placed themselves, look at where they think they should be after a rethink.

Discussions include finding reactions which may be an alternative to violence. Participants are strongly informed that the 'Violence has to Stop' and it has to "begin with you". Stress and Relaxation Strategies are discussed. Alternative Strategies are examined – suggestions include walk away, ban alcohol from house, take the children for game of footy, if you know a big booze up is on, then take the children out hunting, spend traditional time with children and extended family – there is a big emphasis on children and what they feel about what they see.

The Building Blocks of Change are put in place. Participants are encouraged to take Baby steps - if you fall down don't mentally beat yourself up, walk on from there, acknowledge that you are changing a whole lifestyle and the habits of many years and move on in a positive way. Questions to think about are given – look at what changes they want to make and ideas they can use to bring about change themselves – the focus is on self-reliance rather than the welfare approach.

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The program concludes with the participants Clarifying their Values. Preventing a Relapse Back to Violent Behaviour is an important focus and practical methods of self monitoring and self control are reinforced to arm the participants with the skills to move forward in a non-violent way. Participants are encouraged to think about making a Contract with themselves to end violent reactions to situations. A Post program questionnaire is conducted with each participant and the program is brought to a resolution.

Outcomes of the Program

The subject group of offenders is a small group of 25, ordered to the program over a period of $\frac{1}{2}$ years.

<u>Previous Criminal History</u> - Of the 25 offenders, 2 had no previous criminal history, 16 had criminal history with predominantly violent offences and 7 had other criminal history (traffic and minor offences (See Table 1).

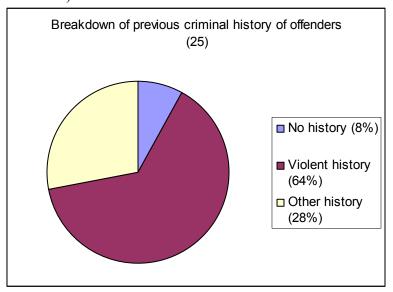


Table 1

Gender Breakdown - 17 of the 25 offenders were male and 8 were female.

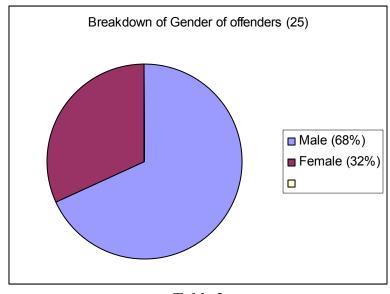


Table 2

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The Male offenders were made up of 3 with minor criminal history and 14 with violent or serious offending (See Table 3). Female offenders consisted of 2 with no criminal history, 4 with minor history and 2 with violent or serious offending (See Table 4).

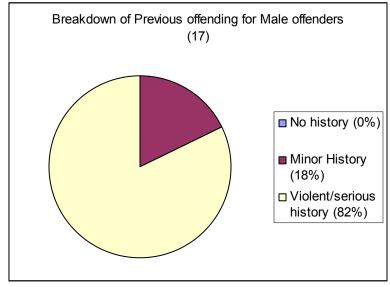


Table 3

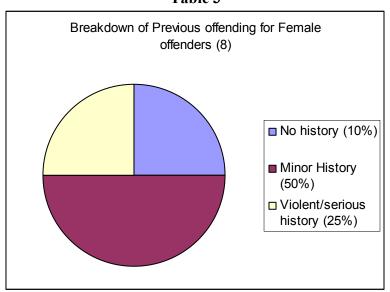


Table 4

Completion Rate - 76% of the offenders completed the Probation Orders (19/25). Offenders were charged with breaching the Orders in 10 cases (8 offenders re-offended during the Probation order – 6 for violent offences - and 2 offenders did not comply with the Order in that they did not attend the program. Of the 10 Orders breached, 6 orders were revoked and the offenders were re-sentenced in relation to the original offences. The other 4 Orders continued. 30% of the offenders committed violent offences during the period of the Probation order.

24% of the offenders ordered to attend the program **completely ceased offending** (6/25). 36% of the offenders ordered to attend the program **ceased violent offending** (9/25).

In total, <u>60% of the offenders (15/25) were diverted from violence</u>. Of the 23 offenders who had previous criminal history, 64% of them did not commit further offences of violence (15/23).

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There was a general reduction in the offending rate of the offenders on the Orders after completion of the programs. 6 of the offenders who completed the programs did not re-offend at all (31%) while 13 of the offenders completing the program had some re-offending (69%).

Table of Re-offending DURING the period of the Probation Order

(D = defendant - Total 13)

Type of Offence	Number of Offenders	Offenders					
No Re-offending	3	D1	D5	D7			
Minor (traffic, simple offences)	6	D2	D3	D8	D9	D10	D11
Violent / Serious offences	4	D4	D6	D12	D13		

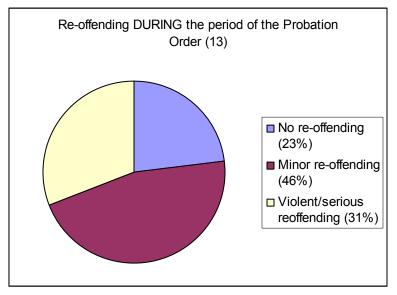


Table 5

Re-offending after completion of program

46% of the offenders completing the program did not re-offend at all.

19% committed further violent offences after the program (compare with 64% of offenders who had previous violent or serious history).

Of the 30% who committed offences of violence during the Probation order, ½ of them committed no further offences of violence.

Of the 4 offenders who committed violent offences during the Order, 1 re-offended violently twice, 1 re-offended after a significant period of time and **2 did not re-offend at all** after they completed the Order (See Table 6).

Of the 6 offenders who committed minor offences during the order, only 1 committed a violent offence after the Order more than a year later. Therefore 5 offenders who committed minor offences during the Order **DID NOT commit a violent offence** after the completion of the Order (See Table 6).

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The majority of re-offending was for non-violent offences (12 of 20 instances). Violent re-offending occurred shortly after the program completion and 12 or more months after the program completion. It would seem overall that the effect of the program wanes as time progresses for some offenders with 5 offenders re-offending after the 9month mark.

Table of Re-offending AFTER the period of the Probation Order

No re- offending	6	D3 D9 D10 D11	D12 D13			
Type of Offence	No.	0-3 months after program	3-6 months after program	6-9 months after program	9-12 months after program	12 +mths after program
Minor	7	D5	D4 D4 D5 D2 D2	D7 D8	D2 D7	D1 D4
Violent/serious	4	D7 D7	D6 D7 D7		D6	D2 D4

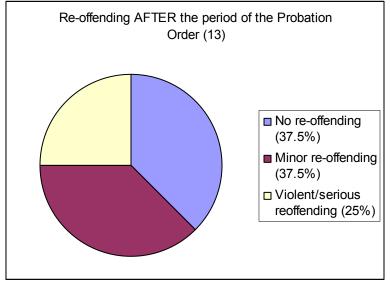


Table 6

NOTE: Some offenders committed both minor and violent offences after the Probation Order.

Re-sentenced Offenders

4 offenders were re-sentenced for the original offence after breaching the Probation order. 2 of them committed further offences of violence (compare that 50% with only 19% of those completing the Order committing further offences of violence indicating a trend towards the reduction of violent offending after the program).

Table of re-offending by offenders who DID NOT complete the program (4)

Type of	No. of	0-3 months	3-6 months	6-9 months	9-12 mths	12 + mths
Offence	Offenders	after breach				
Nil	1 D16					
Minor	3	D15			D17	D14
Violent	2		D15	D17		

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Positive Social Benefits of the Program

Many offenders have become very engaged with the process during the program and facilitators have seen offenders who give deep thought to the issues, discuss topics with their partners and families, ask questions and even present themselves to the facilitators requesting to do the program a second time. Members of the community are gradually becoming more inclined to access and use resources and services on a regular basis to address issues that they have – they know where the help is for them, even though it might be different for everyone. As people become aware of the services and programs being offered in the community, other members of the community have also indicated a desire to participate in the program even though they are not on a Probation Order. The facilitators have made themselves readily available to go to Woorabinda at other times if needed, arrangements are easily made for them to assist offenders to put something in place for them to move forward in a positive.

Case Studies

The following Case Studies are brief outlines of the situations of two offenders, both with similar criminal histories and coming before the Court for the same charge, Breach of Domestic Violence Order.

Offender 1 was aged 41 when he came before the Court. He had a previous conviction for Grievous Bodily Harm (a more serious offence than the subject offence which involved his partner) and had three convictions for assaults and other offences in the previous 10 years. He came before the Court for an assault on his partner (which act breached the domestic violence order) in a situation where they were both drinking and argued. He assaulted her by ripping off clothing and dragging her along the ground, also inflicting blows. He had a good job at the time of appearing in Court and was prepared to participate in the program. He was ordered to serve 12 months on Probation with conditions to attend and satisfactorily complete the Ending Offending and Ending Family Violence Programs. He completed the Probation order without incident, in the manner in which it was required and has not committed any further offences 18 months on from his appearance in Court.

Offender 2 was aged 24 years when he appeared before the Court. He had numerous previous convictions for assaults and other offences of violence which had previously resulted in terms of imprisonment. He was ordered to serve 12 months on Probation with conditions to attend and satisfactorily complete the Ending Offending and Ending Family Violence Programs. He breached the Probation Order 5 months after being placed on it, for failing to report to undertake the Ending Offending Program and responding poorly to supervision under the Order. The order was breached and he was re-sentenced for the original offence to 2 months imprisonment suspended for 12 months. He committed further offences 5 months on – Breach Domestic Violence Order x 2, Wilful Damage x 2, Breach Bail, Escape from Lawful Custody, and Assault Police – and was sentenced to imprisonment terms to be served.

Whilst both offenders had violent criminal histories, Offender 1 took advantage of the assistance offered to him through the program and has moved away from offending to live his life. Offender 2, on the other hand, did not comply with the requirement to attend at the program and was otherwise unco-operative with the conditions of the Probation Order. He was given a further opportunity through a suspended sentence which required him not to commit an offence during the period of suspension (12 months) but only 5 months on, he committed similar and more serious offences and was sentenced to imprisonment. One might have expected that the

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older man might have been harder to divert from his previous offending but it seems his maturity may have played a part in the decisions he took. Offender 1's employment may have also played a significant role in his turnaround.

Conclusion

Whilst the subject group is a small one and there was no control group, the early indications are that there are some benefits in the program for most offenders. The program provides assistance to the offender and the community as a means to divert offenders from violent offending. Most of the offenders in this group would have been at risk of a term of imprisonment due to their criminal history and/or the seriousness of the offence/s before the Court.

60% of offenders in this group were diverted from violent offending with 24% committing no further offences at all. Given that only 8% of offenders had no previous history at the outset, it could be argued that there was a 16% improvement in that area.

64% of offenders had violent criminal histories but only 40% of offenders committed <u>violent</u> offences after going through this process, a **reduction of 24%**.

The offenders who completed the program were more successful than those who did not in reducing <u>violent recidivism</u> (19% compared to 50% committed further violent offences, a **reduction of 31%**).

It would seem that the program's positive benefits would be improved if there was follow up and support for offenders available 9-12 months after the completion of the program, and perhaps a refresher course to extend the effectiveness of the program.

Considering these objective outcomes and the social benefits for the offenders and consequently their families and community, the early indicators show that the program can assist offenders to reclaim their futures and move from violence and upheaval to calm and safe lives.

ACKNOWLEDGMENTS

Department of Corrections Power Point Presentation on Ending Family Violence Program

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APPENDIX C - MALE VICTIMS OF FAMILY VIOLENCE: KEY STATISTICS



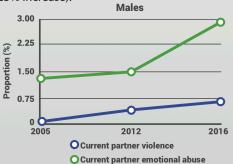
Research from the 2016 ABS Personal Safety Survey and Australian Institute of Criminology shows that both men and women in Australia experience substantial levels of violence.

Males make up a significant proportion of victims of family and sexual violence, yet are excluded from government anti-violence programs.

75 males were killed in domestic homicide incidents between 2012-2014. This equates to one death every 10 days.

EXPERIENCE OF FAMILY VIOLENCE BY GENDER

The proportion of men experiencing current partner violence in the last 12 months between the 2005 and 2016 ABS Personal Safety Surveys rose more than five-fold (a 552% increase), while the proportion of men experiencing emotional abuse from a current partner in the last 12 months more than doubled (a 223% increase).



The majority of men that experienced intimate partner violence experienced it by a female perpetrator (93.6%).

The remainder were in same-sex relationships with male perpetrators*.

DURING THE PERIOD 2012-2014:

More than 1 in 3 victims of domestic homicide were male (35.2%)

More than 1 in 5 victims of intimate partner homicide were male (21.4%)





For more information and research about male victims of family violence, or for media comment visit www.oneinthree.com.au

If you are experiencing family violence, seek support, call MensLine Australia on 1300 78 99 78

Information has been sourced from the ABS and the AIC. Produced by the One in Three Campaign (oneinthree.com.au/infographicrefs)

MALE VICTIMS OF FAMILY VIOLENCE: KEY STATISTICS

EXPERIENCE OF FAMILY VIOLENCE BY GENDER

DURING THE LAST 12 MONTHS*:

Over 1 in 3 persons who experienced violence from an intimate partner were male (35.3%)



Almost 1 in 3 persons who experienced violence from a cohabiting partner were male (32.7%)



Almost 2 in 5 persons who experienced violence from a current partner were male (39.9%)**



Over 1 in 3 persons who experienced violence from a boyfriend/girlfriend or date were male (34.3%)***



Almost 1 in 5 persons who experienced violence from a previous partner were male (18.8%)****



Almost half the persons who experienced violence from a known person were male (45.5%)



^{*} Last 12 month data are better measures of current rates of violence than are lifetime data ("since the age of 15"), as lifetime data include incidents that happened many years ago.

^{**} Estimate has a Relative Standard Error (RSE) of 25.5% and should be used with caution due to the relatively small number of males surveyed by the ABS (34.8% of persons since the age of 15 were male with no RSE warning)
***Estimate has a Relative Standard Error (RSE) of 40.1% and should be used with caution due to the relatively small number of males surveyed by the ABS (20.0% of persons since the age of 15 were male with no RSE warning)
****Estimate has a Relative Standard Error (RSE) of 26.7% and should be used with caution due to the relatively small number of males surveyed by the ABS (22.5% of persons since the age of 15 were male with no RSE warning)



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MALE VICTIMS OF FAM Submission 57 LENCE: KEY STATISTICS

EXPERIENCE OF FAMILY VIOLENCE BY GENDER

DURING THE LAST 12 MONTHS*:

Almost half the persons who experienced emotional abuse by a partner were male (45.8%) (47.7% of persons who experienced it by a current partner and 43.4% by a previous partner)



Almost half of these males experienced anxiety or fear due to the emotional abuse (41.4% of males who experienced current partner abuse and 43.1% of males who experienced previous partner abuse)



13.8% of men that experienced emotional abuse by a current partner had their partner **deprive them of basic needs** such as food, shelter, sleep, or assistive aids, compared to 6.4% of women.

†††††††††††††††††††††††**†** 13.8% **†††††**

8.9% of men that experienced emotional abuse by a current partner had their partner **threaten to take their child/ren away from them**, compared to 4.6% of women.

†††††††††††††††*** ‡‡‡‡‡‡‡**

38.5% of men that experienced emotional abuse by a previous partner had their partner lie to their child/ren with the intent of turning them against them, compared to 25.1% of women.

7.3% of men that experienced emotional abuse by a current partner had their partner **lie to other family members or friends** with the intent of turning them against them, compared to 6.6% of women.

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10.1% of men that experienced current partner emotional abuse had their current partner **keep track of where they were and who they were with**, compared to 9.9% of women.

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* Last 12 month data are better measures of current rates of violence than are lifetime data ("since the age of 15), as lifetime data include incidents that happened many years ago.



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Information has been sourced from the ABS and the AIC. Produced by the One in Three Campaign (oneinthree.com.au/infographicrefs)

FAMILY VIOLENCE: KEY STATI

EXPERIENCE OF FAMILY VIOLENCE BY GENDER

DURING THE LAST 12 MONTHS*:

Over 1 in 3 persons who experienced sexual harassment were male (34.0%). Most males who experienced sexual harrassment were harassed by a female perpetrator (72.2% were harassed by a female while 48.2% were harassed by a male**).



The largest category of increase in sexual harassment between 2012 and 2016 was in males harassed by a female perpetrator, which rose by a massive 67.5%. Females harassed by a male perpetrator rose by 15% during the same period.

MM 15%

Over 1 in 3 persons who experienced stalking were male (35.0%). Most males who experienced stalking were stalked by a male perpetrator (68.9% were stalked by a male while 36.3% were stalked by a female***).



Almost 1 in 3 persons who experienced sexual assault were male (28.4%). Most males who experienced sexual violence were assaulted or threatened by a female perpetrator (82.9%****).



6 per cent of all males experienced violence compared to 4.7% of all females.



^{*} Last 12 month data are better measures of current rates of violence than are lifetime data ("since the age of 15"), as lifetime data include incidents that happened many years ago.

*** Proportions don't add up to 100% because some respondents may have been sexually harassed by both a male and a female perpetrator.

*** Proportions don't add up to 100% because some respondents may have been stalked by both a male and a female perpetrator

*** Estimate has a Relative Standard Error (RSE) of 25.0% and should be used with caution due to the relatively small number of males surveyed by the ABS (55.2% of males experienced sexual violence from a female since the age of 15 with no RSE warning)



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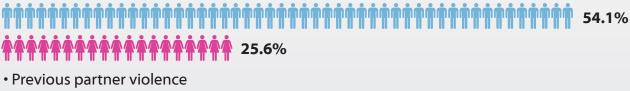
VIOLENCE: KEY STATI

EXPERIENCE OF FAMILY VIOLENCE BY GENDER

MEN WHO HAVE EXPERIENCED PARTNER VIOLENCE ARE:

2 to 3 times more likely than women to have **never told anybody*** about experiencing

Current partner violence







Around 50% more likely than women to have never sought advice or support about experiencing

Current partner violence





Previous partner violence



Almost 20% more likely than women to have not contacted police about experiencing

Current partner violence







Less than half as likely as women to have had a restraining order issued against the perpetrator of

Previous partner violence





* This data is taken from the 2012 ABS PSS, as it was not published in the 2016 ABS PSS.

^{**} Estimate has a Relative Standard Error (RSE) of 25.2% and should be used with caution due to the relatively small number of males surveyed by the ABS



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MALE VICTIMS OF FAMILY VIOLENCE: KEY STATISTICS

EXPERIENCE OF FAMILY VIOLENCE BY GENDER

BEFORE THE AGE OF 15:

2 in 5 persons who experienced physical and/or sexual abuse were male (40.1%)



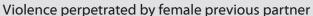
Around 1 in 20 persons (4.5%) witnessed **violence towards their father** by a partner and more than 1 in 10 persons (11.3%) witnessed **violence towards their mother** by a partner.



SINCE THE AGE OF 15*:

While a greater percentage of males experienced violence from an intimate partner or family member of the same sex than did females, the majority of males experienced family violence **perpetrated by a female.**The **perpetrators of family violence** against males by gender, ranked in order of prevalence, were as follows:

Violence since the age of 15. Violence by relationship to and sex of perpetrator, estimate, males (n)





Violence perpetrated by father

Violence perpetrated by female current partner

Violence perpetrated by girlfriend or female date

Violence perpetrated by other relative or in-law (male)

145,600

Violence perpetrated by brother

7777777777777 94,400

Violence perpetrated by mother 76,800

Violence perpetrated by male intimate partner

60,500

Violence perpetrated by other relative or in-law (female)

37,200

* Lifetime data (since the age of 15) is used here because the ABS didn't publish data from the last 12 months.



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