

Care DIGNITY Charespect Change HOPE

Submission to the House Standing Committee on Social Policy and Legal Affairs on Inquiry into family, domestic and sexual violence

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About Anglicare Australia

Anglicare Australia is a network of independent local, state, national and international organisations that are linked to the Anglican Church and are joined by values of service, innovation, leadership and the Christian faith that every individual has intrinsic value. With a combined expenditure of \$1.82 billion, and a workforce of 20,500 staff and 9,000 volunteers, the Anglicare Australia Network contributes to more than 50 service areas in the Australian community. Our services are delivered to 450,000 people each year, reaching over 1.33 million Australians in total. Our services are delivered in partnership with people, the communities in which they live, and other like-minded organisations in those areas.

As part of its mission, Anglicare Australia "partners with people, families and communities to build resilience, inclusion and justice." Our first strategic goal charges us with reaching this by influencing "social and economic policy across Australia with a strong prophetic voice; informed by research and the practical experience of the Network."

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Introduction

Anglicare Australia appreciates the opportunity to make a submission to the Inquiry into family, domestic and sexual violence. It is based on the insight and expertise of Anglicare Australia's member organisations and addresses the interest and experience of the people with whom they work.

The Anglicare Australia Network offers specific domestic violence support services across the country. These include women's refuges, counselling services to women and children who have experienced abuse, and men's behavioural change programs. However, nearly all members work with people who are survivors or perpetrators of domestic violence whilst presenting to frontline services for other matters. For example, Anglicare Sydney's Counselling, Family Relationship Centres and Youth Services clients had family and domestic violence incidence rates of between 50 percent and 75 percent.

We have structured our submission to align with the terms of reference, and hope our Network's experiences and expertise will help inform future efforts under the next National Plan to Reduce Violence against Women and Children.

We would like to thank Anglicare Sydney, Anglicare Central Queensland, Samaritans Foundation and Anglicare WA for their contributions to this submission.

a) Immediate and long-term measures to prevent violence against women and their children, and improve gender equality

The Fourth Action Plan 2019-2022 under the National Plan to Reduce Violence against Women and Children 2010-2022 states that gender equality is the key to ending violence against women and their children. It states that in the long term, violence against women and their children is expected to decrease as:

- 1. women have greater independence and decision-making power
- 2. traditional gender roles are less rigidly enforced, and
- 3. more people have the skills and desire to create positive, equal and respectful relationships.

Anglicare Australia supports a public health approach to tackling family, domestic and sexual violence, through both whole-of-population and targeted interventions to address these three components. We explore these points in our submission.

Our Network members have seen first-hand how structural inequalities drive gender inequality and violence. These problems and the steps to address them must be articulated in the next National Plan. Importantly, gender equality is not just about improving the lives of women. As Premier Daniel Andrews states in Victoria's first gender equality strategy, "We can see that men are suffering from gender inequality too: from poor mental health, and increased rates of risky and violent behaviour, to fewer opportunities for taking on caring roles and flexible work arrangements." In these ways and many others, gender equality is about improving the lives of men, children, and society as a whole.

Improving incomes and economic independence for women

Anglicare Australia has long advocated for decent incomes as a fundamental building block for improving people's lives. This is particularly important for women, who continue to face barriers to economic security. This is a major factor for those needing to leave relationships where they experience violence. Improving the incomes and economic independence of women is crucial to reducing – and preventing – violence.

Our Network is a major provider of services that are overwhelmingly female-dominated in terms of employees. These roles are undervalued in the salaries assigned to them through the award system. The issue of the valuing and remuneration of care work is therefore of particular concern to our members.

The average remuneration in female-dominated organisations is lower than in male-dominated organisations, and men earn more even in female-dominated organisations with a greater than \$15,000 difference in base salary. As a result, Australian women are still more likely to retire with inadequate superannuation coverage compared to men, and to experience poverty.

Despite having higher educational attainment than men, women are also more likely to be working part-time, below their capacity, and in precarious employment. This is partly because women need to seek part-time and flexible forms of work to help them balance work with unpaid caring responsibilities. There are gendered expectations for women, including being the primary carer of children which affects employment opportunities in a variety of ways. Women are also much more likely to provide other unpaid caring support, such as supporting a person with a disability or old age. Each of these factors exacerbates poverty and insecurity for women, which puts them at greater risk of violence.

A new report into the NDIS illustrates well the economic insecurity of female-dominated industries^{vi}. The research found that workers are facing unprecedented levels of work intensification, insecure work, low pay, unpaid hours of work and uncertainty about the timing and number of shifts each week. When many workers say they intend to leave the industry in five years and only one in five workers expects to have enough superannuation when they retire, it is essential that we look at the service systems we design with a gender equality lens.

We must improve the economic security of women and address the undervaluing of feminised work. This is critical to realising the National Plan's goals for greater independence and control; and less rigid gender roles. This means making it easier for men to take on caring responsibilities at home, and encouraging them to work in the care industry. We must also develop systems and processes that invite and expect men to step into parenting and caring roles, such as parental leave for fathers and flexible work arrangements. Our Network members emphasise that funded men's services, such as men's playgroups, positive parenting programs, and specific perpetrator programs would help shift the gender imbalance around paid and unpaid care work.

A safety net that supports women

The current pandemic has reminded us all how prone our employment conditions are to forces outside of our control, and women and young people are the cohorts most affected by this downturn. Even before the pandemic, women were more likely to live in poverty than men, vii making them more vulnerable to violence.

For this reason, a critical component of the National Plan to Reduce Violence against Women and their Children 2010-2022 has been access to social security income and the broader strategy to support women to permanently leave violent relationships, rebuild their lives, and move on. VIII However, with welfare payments that have been considerably below the poverty line, our Network members have found that people are trapped in harmful situations that they cannot lift themselves out of. For women experiencing other forms of marginalisation, the situation is further compounded. The next National Plan must call for a safety net that gives survivors a fair chance at a new life.

Home-based service delivery

As a major provider of children and family services, our Network has found that the connection between child and family disadvantage and violence is critical. Disadvantage such as poverty, lack of educational opportunities, and insecure housing causes stress to families that can exacerbate family dysfunction and violence. Parenting in the early years is also known to be a time of great stress for all families, making it critical to provide parenting support and early learning to improve family functioning. A focus on positive *voluntary* early intervention is paramount from our Network's experience, since agencies have little authority to do anything before situations reach a critical point.

Our Network sees a systemic need to engage with harder to reach families. This means improving outreach for early learning experiences, building cultural safety, strengthening inclusion and parenting skills, and eliminating financial barriers. While some programs exist – such as the Brotherhood of St Laurence's Refugee Child Outreach and HIPPY programs – they are few and far between. There is a clear need to invest in measures that increase the participation of vulnerable groups in early learning as an effective and public health strategy. For example, this could include outreach through pre and post-natal services to reach both mothers and fathers, readiness programs, and inclusive practices.

As the families who can benefit most are less likely to engage with formal early learning, home-based options are the most effective for the prevention of harm to children. They offer a window into the home environment, which can provide the trigger for families to be linked to other services if there is a risk of violence. Home-based options also offer a cost-effective and nimble approach that does not rely on physical infrastructure.

Existing preventative home-visiting programs exist but are only available to a small number of families in select locations. The next National Plan offers an opportunity to embed these approaches to ensure they are available nation-wide for families and communities that would most benefit.

Work by the Parenting Research Centre highlights the gap between expert and public understandings of effective parenting. Parenting skills are learned and learnable—they can be practised and improved, which is contrary to a common belief that parenting is innate and therefore cannot be influenced. We echo the Centre's call for better support for parents^x as a critical foundational step to reduce rates of violence.

b) Best practice and lessons learnt from international experience, ranging from prevention to early intervention and response, that could be considered in an Australian context.

The Anglicare Australia Network supports about ten percent of all children in out-of-home care in Australia, and we are a strong advocate for early interventions for children who have been caught in the cycle of family and domestic violence. Children who have been exposed to such abuse are prone to becoming victims of violence later in life, and some may go on to display controlling and abusive behaviours. It is essential to address these issues as early as possible through a whole-of-family, trauma-informed therapeutic approach. Several of our member organisations run programs that work with families to keep perpetrators accountable and women and children safe, such as Safe and Together and Caring Dads programs delivered by our Network. Programs that strengthen family functioning including the skills and desire to create positive, equal and respectful relationships, recognise that the best way to make a child safe is to make the family environment safe.

Safe Care is an evidence-based program delivered by our Network, including the Samaritans Foundation under their <u>Brighter Futures</u> program. It sees trained family educators visit homes to boost parent skills in interacting with their children, caring for their health and safety. It addresses violence in the home and attempts to keep families together by stopping violence and teaching new behaviours, and providing trauma-informed counselling.

In 2019 Anglicare Victoria started delivering an evidence-based program, Functional Family Therapy through Child Welfare. This is a model with more than 40 years of evidence in reducing youth justice reoffending. With additional state funding received the intervention program will run until June 2021. The intervention will help families struggling with family violence, histories of abuse and neglect, and other parenting issues. It will provide practical help for families, to help them change their behaviour and deal differently with stressful situations.

Anglicare Victoria has also recently launched a new community-based perpetrator intervention program, A Better Way, for fathers in the Bayside Peninsula Region in partnership with Victorian Aboriginal Child Care Agency (VACCA). A Better Way holds the intent that for fathers who are or have been using violence, there is a better way for them to be in their children's lives. Anglicare Victoria and VACCA will specifically trial the Safe and Together model as the foundation for a flexible community-based perpetrator intervention program which can respond to fathers using violence against their family. Based on internationally recognised best practice in family violence, A Better Way will represent a new perpetrator accountability methodology which is trauma-informed and adopts cultural healing approaches to working with fathers who use violence.

Based on these experiences, our Network members are calling for more evidence-based programs as part of a comprehensive approach to combat family, domestic, and sexual violence. Expanding these programs will be critical to achieving goals set under the next National Plan.

Anglicare Australia notes that despite the importance of evidence-based programs, funding and support for thorough evaluation is particularly missing for perpetrator programs. There is also the added challenge of recruiting and retaining staff with the research experience needed to run a proper evaluation. Further, as each program could run its own evaluation it poses a challenge to get a good national picture to feed the evidence base. This lack of coordination and common framework for evaluating what works need to be addressed under the next National Plan.

c) 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.

Improved capability of mainstream and early identifier agencies

Investment is needed to increase the capability of mainstream and early identifier agencies to support women and children experiencing violence, including to identify perpetrators. These agencies include housing, Centrelink, child-protection and community-based services.

Several Anglicare Australia members providing out-of-home care services report that domestic violence is a common reason for children entering the care system, with incidence rates varying across different cohorts and locations. For example, Anglicare Central Queensland in Rockhampton has noted higher intake within the region which impacts on the current pressured child protection system and placement options. It has been identified that the reasons many children and families are coming into the system are as a result of domestic and family violence.

There is no national data available on the reasons children are placed in out-of-home care – which is a problem in and of itself. However studies indicate that children enter care from increasingly complex family situations. We know that child abuse and neglect are the primarily reasons given, whilst parental substance abuse is also frequently reported, followed by domestic violence and mental illness.xi

John Lynch's research^{xii} has shown that 56 percent of all children known to child protection in South Australia were also known to Housing SA, and that 40 percent of children who become known to child protection were known first to Housing SA. This trend would likely be replicated across all early identifier agencies, such as hospitals, GPs, childcare, Centrelink, and community centres. There is a need to upskill these front-line services with the capability to identify and respond to family and domestic violence, and form relationships that support and enable families to seek help earlier. This requires investment. For example, the average Housing SA Tenancy Officer's caseload is 1:500. As a Community Housing Provider, the caseload of an AnglicareSA tenancy officer is approximately 1:180.

This poses immense challenges for Tenancy Officers to engage in a relational way and undertake additional duties beyond their core role. A cultural shift and an investment in capacity and skill building is needed to move beyond this.

Further, although free training in responding to violence is available to community organisations, it is a real challenge – particularly for those with limited funding – to cover the costs associated with this training (e.g. cost of staff filling in for workers receiving the training, travel).

There are overseas models as well as examples in Australia that show what can be achieved with sound investment. The Duluth Model from Minnesota, USA requires a real community response where the judicial system, police, community services, and schools meet on a regular basis to ensure everyone is working towards common goals. Network members emphasise that we have made some shifts to a more coordinated response here in Australia, for example, in New South Wales and Queensland. However, we need more efforts to link the judiciary with support services to stop women from falling between gaps and inconsistent systems.

The NSW Safety Action Meeting is one such initiative under the state's "Safer Pathways" approach. These are regular meetings of local invited service providers coordinated by a central referral point, with the aim of preventing or reducing threats to the safety of domestic violence victims and their children. This is done through targeted information sharing. Members share information to develop tailored, time-specific Safety Action Plans for victims at serious threat and their children. In theory, perpetrator services should also be included, but Anglicare Sydney perpetrator programs are sometimes excluded as victim services have traditionally been the primary focus for interventions. Although Safety Action Meetings are promising and important initiatives, they centre around only a few victims who are deemed to be at the highest level of risk at that point in time. These should be complemented by a broader community responses.

Placed-based service delivery

Anglicare Australia is a strong advocate for place-based service delivery, person-centred care, and community development principles in system design and implementation. Our Network members can validate the important role of place-based approaches in building informal networks and social capital in communities. Place-based approaches break down the fear and stigma by engaging families and children in their own environment, and creating a soft entry touchpoint to introduce services, programs, and activities and build the first stages of worker and individual engagement. This can lead to the same families engaging with other programs such as financial counselling and emergency assistance, housing, drug and alcohol, domestic violence and parenting. This is a particularly important approach for maximising the access to family and domestic violence services for women in small communities.

The case studies below show how place-based services work collaboratively and complementary to each other across the continuum of support needs. This reduces duplication, avoids the need to retell stories. and supports positive outcomes.

Case study 1

Mary* was married to Bob* for several years. They had eight children together, aged between 2 and 15. Bob's behaviour towards Mary became violent, and four years ago Mary and Bob separated. Since then, Mary's husband has continued to 'stalk her' and show up at her house. Mary has moved to a new house seven times in the last four years.

Mary came to Anglicare Sydney in late in 2019, after her husband had broken into her house and kept her and the children there for two days against their will. He was extremely verbally abusive and threatening. Mary told her case worker she was also receiving support from West Connect Domestic Violence Services and Safe Home Leaving Violence (SHLV).

With Mary's consent, her caseworker liaised with Mary's support services to assist Mary and her children find rental property, and support Mary's financial and housing situation. The DVS was able to negotiate a reduction in the break lease fee from Mary's previous property, and SHLV paid for all the house locks to be changed in the new property. Anglicare Sydney's financial counsellor assisted Mary to develop a fortnightly payment plan to pay the remainder of the lease fee.

Recently, Mary's husband followed her car and assaulted her at a traffic light. Mary expressed a desire to move interstate now that she has cleared her financial debts. DVS continue to work with Mary and her family, along with other services to assist Mary and her children move interstate, where she hopes she can rebuild her life.

Case study 2

This joint case work example between Anglicare Sydney's financial counselling service and a family support service shows that having coordinated input from skilled practitioners provides an effective service delivery approach for women and children.

Gail* is in her early thirties with a ten year-old daughter. Gail left her partner after experiencing domestic violence and sought help from a local refuge. The refuge provided Gail and her daughter a temporary place to stay and introduced Gail to Anglicare Sydney's financial counselling service. A financial counsellor worked with Gail to find a suitable rental property and source financial assistance for the rental bond. With Gail's consent, Anglicare Sydney provided a warm referral to a local, specialist counselling service, whilst continuing to support Gail with budgeting strategies, access legal services to resolve an outstanding personal loan, and support her develop future financial plans based on her new set of circumstances.

Gail and her daughter are now getting on with rebuilding their life. She has secure housing, continues to see her counsellor and has been able to maintain employment.

The stories above demonstrate how Anglicare Sydney's financial counselling model supports women and families to adopt the support, advice, and strategies offered through strengths-based casework. They also show how working with locally connected services, such as crisis services, family counselling, and financial assistance, can bring about positive change in people's lives. However, this approach requires a shift in mindset to working truly collaboratively, as well as funding arrangements that build such approach into its outcomes. Anglicare Sydney have emphasised that the outcomes for survivors could be further improved with funding for specific domestic violence financial counsellors, as is the case in Victoria.

Community hubs and integrated service provision further provide connection and refuge for many experiencing isolation and can be key engagement platforms for people who have experienced domestic violence, as illustrated by 'Nadine', a single mother with a three year-old son who participated in Brotherhood of St Laurence's Peep Playgroup at an integrated early years community centre.

Case study 3

Nadine* has separated from her husband following domestic violence and is navigating the process of separation, custody and divorce in the context of protection orders against her expartner. Her son presents with delayed speech and delays in social reciprocity. Nadine has previously worked in the service industry on a part-time basis. Upon her first meeting with a program coordinator, Nadine was unsure if she would be able to cope with a return to work and presented as depressed in affect. She described herself as overwhelmed and stressed and "a hopeless case." Nadine felt that she and her son would be unable to form a "real" family and she was experiencing grief for what she had hoped for her life prior to her husband's abuse and the relationship ending.

Nadine was an active participant in all aspects of the program. She engaged with the Peep curriculum and was eager to learn parenting strategies to support her son. In parent groups, she talked openly about her life and challenges. She described herself as very socially isolated. Staff identified capacities such as her engagement with an online community of single mothers and her engagement with the program as signs of an alternative narrative, where despite her challenges she continued to seek out and exploit opportunities for social engagement.

Nadine was concerned that engaging with services to address her son's developmental delays was leading down a path which was too quick to label and define him. We discussed over the weeks the ways in which, to feel safety and control, Nadine needed to define herself and her own life. Nadine was studying community development online, and expressed the desire to eventually work to support women experiencing domestic violence as she had done. She has since talked about how this, as well as the changes she had made in her life, challenged the idea that hers was "a hopeless case."

Staff referred Nadine to a MyTime supported playgroup for families accessing early intervention services, where a space will be available for them next year. This service can also support Nadine to navigate the NDIS in the upcoming year.

There is scope to adopt place-based community development approaches within local service hubs, to improve the outcomes for women and children experiencing violence and to foster ownership of individuals solving their local issues. We believe that these service hubs should expand on existing family hubs and must form part of the next National Plan.

d) The way that health, housing, access to services, including legal services, and women's economic independence impact on the ability of women to escape domestic violence.

Fifteen Anglicare Australia Network members across all States and Territories provide homelessness or housing services, making it one of the most commonly delivered services in our Network. Our experience points to the lack of access to affordable housing as one of the greatest barriers to women seeking freedom from violence.

This is supported in research, including a recent study undertaken by the National Social Security Rights Network which found that for 60 percent of cases involving domestic violence, individuals also experienced homelessness or a risk of homelessness. The situation was particularly dire for women who did not fulfil residency requirements because, despite wanting to leave, their inability to secure independent income meant they were unable to secure housing and stayed with the violent perpetrator. The Newly Arrived Residents Waiting Period remains an obstacle to some women accessing social security and consequently, escaping family and domestic violence.xiv

Anglicare Australia's annual <u>Rental Affordability Snapshot</u> has consistently showed that our nation's rental market is not meeting the needs of women on the lowest incomes – particularly those relying on our safety net. This year we found that just 1.7 percent of rentals are affordable for single parents on the new Jobseeker payment, which has been doubled for six months in the wake of the COVID-19 pandemic. Without the increase, just 0.1 percent of rentals across Australia would be affordable for single parents seeking work.

To stop violence against women and children, we need to ensure that women fleeing violence have somewhere to go. That means we need increasing income support rates, and ensuring we have safe, secure and affordable homes available. Investing in social housing and reducing housing waiting lists will greatly help women to escape violence and rebuild their lives.

e) All forms of violence against women, including, but not limited to, coercive control and technology-facilitated abuse.

In their feedback on this submission, Anglicare Central Queensland have emphasised the increased risk to women stemming from the use of technology and apps. At times victims are unaware of methods used to track, monitor, and stalk them by their perpetrators. However, women experiencing domestic violence may also be aware that their partner monitors their location, phone calls, and text messages. This action forms part of the controlling behaviour by the perpetrator that can restrict, limit or prevent the capacity for the victim to seek support over the phone or computer. All strategies and models must recognise that this can prevent women from seeking support

Anglicare Sydney has reported the issue of an increasing dependency on credit or debit cards or a 'cashless' society. This puts women at risk if their partners are monitoring financial statements. Anglicare Sydney have a very recent experience where they had been taking counselling payments over the phone while some women can only safely pay by cash, to avoid risking their involvement with the agency being known. In these instance they provide services for free.

Many services need to be specifically funded to train or recruit specialist staff who can assist women to identify and remove spyware and tracking devices. They need to be able to notify a carrier or the police for immediate action. There should also be considerations of ways women can reach out through services they are likely to be able to access online or in person such as pharmacies, doctors and supermarkets without raising suspicion; as well as thought given to how services are operating (for example, payments, reporting, and referrals) so that they don't further compound problems for victims and survivors.

g) The efficacy of perpetrator intervention programs and support services for men to help them change their behaviour.

The Anglicare Australia Network sees perpetrator programs as an essential part of a comprehensive approach to combat violence. However, these programs are seriously underfunded and there is no scope to undertake proper evaluations of their effectiveness. This is a missed opportunity to truly understand the outcomes from these programs.

There is a long-standing tension between funding support services for women affected by violence and the perpetrators of this violence. Some of our Network's perpetrator programs feel that in Australia we tend to treat behaviour change programs as the "silver bullet. As Program Manager Elena Campbell at the Centre for Innovative Justice at RMIT University points out, "We've lost sight of the fact that these programs were actually set up to be part of an integrated system where a range of organisations" — police, courts, child protection, mental health — "are working together to hold someone to account for their behaviour.xv"

This is slowly changing, particularly in Victoria, where the government has committed to exploring how to better connect programs with other key services and, crucially, the justice system.xvi A Better Way, is one example of such an integrated approach.

It is a serious problem that funding for perpetrator programs doesn't allow for follow-up and working with people over the long-term. Behavioural change – including the skills and desire to create positive, equal and respectful relationships – takes time and many perpetrators present with a complex set of problems. Research suggests that men are more likely to maintain change if they have ongoing support from a range of services. As one participant of Anglicare Victoria's men's group in Lilydale, said: "I worry that if I stop coming to these groups, I'll fall back into the same old habits again, very quickly," he said. "I'm not fixed, not by a long shot."xvii

The Next Plan needs to ensure sufficient program funding and evaluation for perpetrator programs, including follow-up support for long term behavioral change, if it is to be part of the solution to ending violence against women and children.

h) 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.

As a Network providing out-of-home care services, Anglicare Australia is committed to a cultural safety lens and building partnerships with Aboriginal Community Controlled Organisations to improving outcomes for Aboriginal children, young people and families. Aboriginal and Torres Strait Islander children are unacceptably overrepresented in out-of-home care, making up over one third of all children.

The rate of Aboriginal and Torres Strait Islander children in out-of-home care is almost ten times that of non-Indigenous children, and the disproportionate representation continues to grow. At the same time, Aboriginal and Torres Strait Islander children and families are less likely to access to services, such as early childhood education or intensive family services.

Despite concerns about another stolen generation, one of the root causes for removal – the difficulty Indigenous women escaping family violence face in finding safe housing – is far from being addressed.xviii In situations of family violence, many Aboriginal woman face an impossible situation when trying to protect their children. If they stay with the perpetrator, they risk notification for emotional abuse. If they leave but cannot find suitable housing, they risk allegations of neglect.

Developing culturally appropriate responses to domestic violence in Aboriginal families and improving integration between housing and domestic violence and child protection services should reduce rates of Aboriginal women's injury and death, as well as rates of Aboriginal children in out-of-home care.xix

The next National Plan should call for much more effective intervention programs both aimed at reducing poverty and improving housing in Aboriginal communities; parenting and early education programs; and perpetrator intervention programs aimed at keeping families together.

I) Any other related matters

In their input to this submission, Anglicare Central Queensland note that they have become aware through partnering services or shared stories from victims or survivors that the courts process and legal domain is quite complex. Knowledge of these systems can be limited for those who are traumatised, inexperienced or do not work within the court and legal domains. The court process can be retraumatising to victims and survivors – particularly as court proceeding are lengthy, the survivors need to take the stand and to endure cross examination. There have been occasions when the defence have attempted to discredit their standing as a witness, this can be quite traumatising and humiliating for the survivor

To have faith and trust in the system, the first point of entry is important when setting the support scene. This may involve completing a statement with QPS and so it is essential that police are sensitive to the issues and understand the impacts of family, domestic and sexual violence. The questioning techniques throughout the police investigation must ensure a sensitive and trauma informed approach is practiced with the complainant. From various accounts of this process, it can be very confronting as there is a belief by many that they will not be believed and taken seriously. This belief may prevent people from contacting police in the first place. At times, if there is insufficient evidence, the survivor will most likely not wish to progress with a statement, and perpetrators use these tactics to restrict the survivor from contacting the police.

Conclusion

Family and domestic violence is a critical issue facing women and children across Australia. The next National Plan to Reduce Violence against Women and Children represents a crucial opportunity to bring together the efforts of governments across the nation to reduce and prevent family and domestic violence.

Our submission puts forward priorities and initiatives for reducing violence, improving gender equality, and addressing policies that contribute to structural inequalities. We have also advocated for a whole-of family approach to preventing and addressing violence by keeping children and women safe and holding perpetrators to account.

We would welcome the opportunity to further discuss these recommendations with the Committee, to elaborate on the case studies we've provided, or to give evidence at a hearing.

Recommendations

Anglicare Australia recommends that the Next National plan to Reduce Violence against Women and Children includes measures to:

- Improve incomes and economic independence for women by engaging Governments, businesses and communities to improve low pay, casualisation and insecure work arrangements in female dominated industries.
- Ensure a safety net that gives survivors of violence a fair chance of a new life.
- 5 years funding cycles and outcomes measures that encourage community services to follow place-based, person-centered care and community development principles and work collaboratively together.
- Invest in safe, secure and affordable housing, including social housing, to prevent domestic violence and support survivors and their children in their recovery. This is particularly important for Aboriginal women as that will not only prevent violence, but also the high rates of Aboriginal children being removed from their mothers, families and communities.
- Encourage men to take on parenting and caring responsibilities by funding services targeted at men, such as men's playgroups and parenting programs., and implementing better policies such as parental leave for fathers and flexible working arrangements.
- Support targeted whole-of family interventions to ensure safety and wellbeing for children
 and families experiencing violence to improve family functioning and skills. This includes
 program funding and evaluation for perpetrator programs, including follow-up support to
 ensure that men's behavioral change is part of the solution.
- Ensure that all agencies, particularly early identifier agencies such as housing and child protection, work together to identify violence including perpetrator behavior.
- Ensure that the processes and systems and support services are not further compounding domestic violence.

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