Acknowledgements

We would like to acknowledge the women and men who shared their experience with us. We were moved by their generosity and openness. As we learned about their lives, we were humbled and in awe of their self reflection, resilience in navigating the challenges in their lives and hope for a brighter future for them and their children.

The success of this project also relied on the kindness and dedication of service providers who helped broker our engagements with the women and men and provided their premises for interviews. Their deep understanding of the communities they serve was an important factor in building our understanding of the context and lives of the people we interviewed.
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Section 1

Our context
Key statistics

• Australian women are most likely to experience violence at the hands of a current or former male partner. (1)
• One in three Australian women has experienced physical, sexual or emotional abuse by a partner, since the age of 15. (2)
• One in four Australian women has experienced physical or sexual abuse by a partner, since the age of 15. (3)

Cost to government

• The cost of violence against women—of which the vast majority is domestic and family violence—is high and increasing in Australia and currently stands at $21.7 billion a year; (4)
• Victims bear the primary burden of this cost; (4)
• Governments (national and state and territory) bear the second biggest cost burden, estimated at $7.8 billion a year—comprising health, administration and social welfare costs. (4)
• State and territory governments bear 10 per cent of the total cost (around $2.2 billion). (4)
• The health costs—including cost of immediate and longer-term physical and psychological treatment—associated with violence against women are estimated at $617.2 million, annually. (4)

Sources:
Disease burden

- Domestic and family violence contributes to a range of negative health outcomes for women, including poor mental health, problems during pregnancy and birth, alcohol and illicit drug use, suicide, injuries and homicide. (6)

- As shown in the table, below, intimate partner violence:
  - contributes an estimated 5.1 percent to the disease burden in Australian women aged 18-44; (6)
  - contributes more to the burden than any other risk factor in women aged 18-44 years—more than well known risk factors like alcohol use (4.1%), tobacco use (2.3%) or use of illicit drugs (1.8%); (6)

In all women over 18, intimate partner violence ranked as the seventh largest risk factor contributing to the burden of disease (2.2% of the total burden). (6)

“When it happens to you it is a different story, you lose your mind with stress and trauma and nobody trusts you.”

Sources:
Involvement of health services

- A range of health services interact with people experiencing domestic and family violence, among them hospitals, general practitioners, maternal and child health services, mental health and drug and alcohol services, pharmacists and ambulance officers. (7)

- Victims/survivors of domestic and family violence use emergency departments up to a third more than those who have not been a victim. (8)

- Nearly 6,500 women and girls were hospitalised due to assault in Australia in 2013-14. Domestic and family violence was the leading cause of these assaults—nearly 60% of hospitalised assaults against women and girls were perpetrated by a spouse or domestic partner. (9)

“He accompanied me to every doctors appointment, he would not leave me alone, he would not let me talk. I tried to make eye contact with the doctor to let her know I was not ok, She didn’t notice me.”

Sources:
The FVO pathway

The most dominant pathway for people experiencing domestic violence is a Family Violence Order (FVO). This pathway leads to safety for many, but for some this path becomes a cycle of violence and trauma that transfers to the next generation.

The opportunity for change is in early intervention, working with the whole family and breaking the cycle of intergenerational violence.
A system focused on crisis

The current domestic and family violence system in the ACT is focused on crisis services. For the groups we spoke to there are service gaps in prevention, early intervention and recovery.

A robust system would focus equal effort on preventing violence from occurring, intervening early, responding to crisis and post-crisis therapeutic support to help people recover.

Number of services operating in this space:

- High
- Medium
- Low
Section 2

Designing the Family Safety Hub
Project context

Why a Family Safety Hub?

Several reports that came out in 2016 made findings about the critical importance of services working together to provide effective responses to domestic and family violence in the ACT.

In recognition of the need for a focal point in the ACT service system for domestic and family violence response, the ACT Government committed to establish a Family Safety Hub. It was intended that the Hub would facilitate the integration of services, across government and the community sector, responding to domestic and family violence.

In August 2016, the Office of the Coordinator-General for Family Safety engaged ThinkPlace to facilitate the co-design. The co-design began with a major stakeholder workshop; this workshop revealed community sector concerns about the potential role and impact of a Family Safety Hub.

The current Coordinator-General commenced in October 2016 and led intensive stakeholder engagement to re-establish momentum to support the Government’s commitment to co-design a Family Safety Hub. Working with community and government stakeholders, the Coordinator-General developed a set of principles to guide the co-design process.
Our co-design approach

Co-design principles

The co-design process would:

1. be directly informed by the experiences of people affected by domestic and family violence and the frontline staff working to support them;

2. give priority to groups of people who are most vulnerable to domestic and family violence and those who are hardest to reach with existing services;

3. focus on improving the early intervention, pre crisis and non-justice responses to domestic and family violence;

4. explore how existing services and government investment can be better integrated to meet the needs of people affected by domestic and family violence; and

5. recognise that those affected by domestic and family violence will seek help through services they trust, and those trusted services need to be central to an integrated response.

The experience we are sought to understand

This project sought to listen to and co-design with groups who were at high risk and least likely to access services. The key groups were:

- Aboriginal and Torres Strait Islander women and families
- CALD women and families
- LGBTIQ community
- Women with a disability
- Young men with lived experience of violence in their families

The premise behind this approach was that if we understood barriers for these groups, our response would make services more accessible, responsive and effective for all groups.
Our research

We started the co-design approach by speaking with frontline service providers working with the five groups who are most at risk and least likely to access services. We started with frontline service providers to ensure that we understood the underlying risk factors for each group before engaging with people with the lived experience of violence.

<table>
<thead>
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<th>Interviewed 50 people from the following agencies</th>
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<td>Companion House</td>
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<td>Menslink</td>
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<td>YWCA</td>
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<tr>
<td>Women’s Centre for health matters</td>
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<tr>
<td>West Belconnen Child &amp; Family Centre</td>
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The questions we asked include:

- When and why does this group seek help? What prevents them from seeking help?
- How does this group describe violence? What is the support they are asking for?
- What works for this group? What are the barriers you experience providing the support they need?
- What would increase safety for this group?
- What are your ideas for a safety hub? How can it strengthen existing services? How can it strengthen safety for this group?

We then interviewed twenty people with lived experience of domestic and family violence, including victims and perpetrators.

Focus question:

“How might we increase safety for you, your family, your community?”
The journey so far

**AUGUST 2016**
Family Safety Hub workshop

**DEFINING**
Co-design workshop to scope the problem.

**ENGAGING**
One-on-one conversations with specialist and mainstream service providers.

**MARCH 2017**
Co-design workshop to plan the research. During this workshop, we decided to focus on people who were most at risk and least able to access services.

**Who was involved:**
- DVPC
- Northside Community Centre
- Woden Community Service
- NDIS Expert Panel
- Capital Health Network
- Women’s Legal Centre
- Canberra Rape Crisis
- ATODA
- Doris Women’s Refuge
- ADACAS
- Onelink
- ACT Policing
- DVCS
- Everyman
- Beryl
- CSD
- Health
- JACS
- Education
- Victim Support ACT
- Legal Aid
- COTA
- YWCA
- VIC Gov

**Who was involved:**
- The Domestic Violence Prevention Council
- Legal Aid
- Education Directorate
- Justice and Community Safety
- The Office of the Coordinator General
- Community Services Directorate
- ACT Policing
- ACT Health
- DVPC
- Beryl Refuge
- Relationships Australia
- DVCS
- Child and Family Centre
- Canberra Rape Crisis Centre
- Women’s Legal Centre
- Victim Support ACT
EXPLORE

APRIL-MAY 2017
Explorative interviews and focus groups with 50 CEOs and frontline service providers.

Who was involved:
Woden Community Services
Beryl
Toora
DVCS
CYPs
Victim Support ACT
Aids Action Council
A Gender Agenda
Women’s legal Centre
One Link

MAY 2017
Insights workshop to make sense of what we had heard.

Who was involved:
Legal Aid
Everyman
CRCC
Companion House
Menslink
YWCA
Women’s Centre for health matters
West Belconnen Child & Family Centre

SHARE

MAY-JUNE 2017
Presentations about the insights of the Insights Report to share emerging role of the Hub.

Who was involved:
Woden Community services
Victim Support ACT
Relationships Australia
Everyman
Legal Aid
DVCS
West Belconnen Child and family centre
Toora
YWCA
**JULY-AUGUST 2017**

**EXPLORE**
Explorative interviews and focus groups with women who had experienced domestic and family violence and men who had used violence.

**JULY-AUGUST 2017**

**INNOVATE**
Weekly co-design workshops to develop the role of the Hub.

**SHARE**
Walkthroughs of updated Insights Report to share emerging role for the Hub.

**SEPTEMBER 2017**

**DEVELOP**

**OCT 2017-JAN 2018**
Stakeholder engagement within Government and the community sector to support roll-out of the Hub.

---

**Who was involved:**

- Women’s Centre for Health Matters
- Domestic Violence Prevention Council
- Beryl Women Inc.
- DVCS
- Everyman Australia
- Legal Aid ACT
- Victim Support ACT
- Relationships Australia
- Doris Women’s Refuge Inc.
- Woden community Service
- ACT Human Rights Commission
- Menslink
- Housing ACT
- Northside Community Service
- Canberra Rape Crisis Centre
- ACT Policing Family Violence Unit
- Community Services Directorate
- A Gender Agenda
- Toora Women Inc.
Section 3

Frontline services: findings
Our research findings

Through our explorative interviews and focus groups with frontline service providers, we sought to understand the needs, drivers and barriers for key groups. The following pages provide an overview of what we heard relevant to each of the below groups.

Aboriginal and Torres Strait Islander women and families  
CALD women and families  
LGBTIQ community  
Women with a disability  
Young men with lived experience of violence in their families
“If people are burnt, if their trust is violated they will not ask for help again. This is very true for Aboriginal and Torres Strait Islander clients, if they have the courage to reach out, they will not go back if the experience is poor. It is important to have an experienced trusted worker at the front door.”

“We have to trust the system. If they let our clients down (the kids are removed) we lose our reputation and the community will not trust us again.”

“Some choose not to use Indigenous services so that their own communities don’t find out, they go mainstream for confidentiality.”

“Working with the male perpetrator is crucial for maintaining safety. Many don’t want to leave the relationship, they just want the violence to stop.”

“Young women are more likely to leave then go back.”

“Sometimes when women are placed in a hotel, they are not told they need to seek a crisis payment from Centrelink. Crisis support is not available a week after the incident. They can be in a hotel for three weeks with no payment, they come into care with no food, no money, no clothes, no I.D.”

“Child Protection Services removes children because of an incident. Once children are removed the woman experiencing trauma has to go through a lot to get them back.”

“Services don’t appreciate that depressed, frustrated traumatised people don’t act as model clients they just feel judged.”
The translator made such a difference, one call with an anonymous interpreter allowed her a safe space to tell her story and the extent of the violence she had experienced.

Most women when faced with a system that will liberate them will follow that path. When I saw my neighbour could be free I thought why can’t I be free too?

Women are isolated, they don’t know who to call, they don’t know what will happen if they call. There is a lack of understanding about the consequence of calling and what happens. Do the police have to be involved? Will Child Protection Services be involved?

If people do leave, it is the start of another very tough journey. Women who finally make the decision to leave often need intensive support to reintegrate into the community and relearn how to do everything themselves. Often they have been stopped from accessing English lessons, they don’t know how to catch a bus, handle money, pay rent etc. They need intensive support post separation.

Working with the male perpetrator is crucial for maintaining safety of the woman and family.

CYPS remove children because of an incident. It is bad for the women and for the children. It is better for the mother and children to move together.
**Lesbian, gay, bisexual, transgender, intersex and queer community**

**What violence looks like for this cohort:**
- Controlling their medication during their transition, stopping them from taking the drugs that are so closely aligned with their identity.
- Threatening to “out” the person to their family and their community.
- Family violence is often experienced from siblings, parents and family members when the person comes out as LGBTQ.
- Because of the high level of violence, discrimination and harassment the community experiences daily, for many this violence is normalised and they do not recognise it in their own relationships.
- For many, their community is the primary source of support for both them and their partner, so are reluctant to report DV as this can result in further isolation and damaging connections to their community. If they have broader supports there are less barriers to change.
- The public face of domestic violence is not relatable to the LGBTQ community, so they don’t see their own situation as domestic violence.
- The language doesn’t fit with the LGBTQ community.

**Needs and drivers:**
- Removal of fear and discrimination
- A safe place
- Standards of cultural competence, a checklist for agencies to know if they are inclusive.
- Organisations who are publicly inclusive - from their mission statements to their sign in and application forms. Who openly advertise that diverse people are welcome in their service. They don’t make them identify with gender etc.
- Greater awareness in the community about what family violence is

**Barriers:**
- Family violence and domestic violence is a gendered system. It doesn’t allow for those who are gender fluid or identify differently.
- There is no accommodation for this group. Refuges will not take a transgender client.
- Our society and legal system don’t acknowledge them as equal. Legal custody of the children can be factors that stop people from leaving violent situations especially if they aren’t the birth parent.
- Past criminalisation and continuing stigma around LGBTQ has led to many not feeling safe in reporting to police with views that the police are homophobic and transphobic.

*“Relationships for those with a trans experience are highly valued even when they are risky because they may only experience very few relationships. This may be the only relationship they have ever had.”*

*“Nearly everyone has experienced some sort of violence, discrimination and exclusion. It is hard to open the conversation, violence is not recognised, it is expected, it is normalised.”*

*“People don’t want to sell out the community, we are fighting for equality, we do not want to associate the community with violence.”*

*“The gay community has spent so long proving that their love is valid, they are afraid to ruin it by admitting domestic violence occurs.”*

*“Transgender clients are the trickiest to support and the highest risk. They are a high risk group for both homicide and suicide. The type and level of violence they experience is strongly linked to their transgender identity. Some people who use violence against these people are predators.”*

*“A trans-woman rang up seeking assistance to flee domestic violence, but the refuge system does not accept her because she was born male and they are concerned about the other residents, we were concerned that there was no guarantee of her safety in a refuge community by fellow residents. The only option for those with a trans experience is emergency accommodation in hotels.”*
Women with a disability

What violence looks like for this cohort:

- The person who is responsible for their day to day care, medication and access to the outside world is frequently the one that is abusing them.
- The current NDIS system is set up to place the power of the persons care and support in the hands of the care team. When the person who controls access to supports and the outside world is also the abuser then they face a very real problem and it is very difficult to find a window of opportunity to ask for help.
- Services are not designed for people with a physical disability, no wheelchair access, services with no means of emergency contact beside the phone are not accessible to those who are deaf or can't communicate verbally.
- Disability is a broad term that also includes mental health. Often victims of domestic violence are left incredibly traumatised and develop mental health issues. The condition creates a further barrier to them seeking help with the perpetrator claiming they are 'crazy', and their behaviour causes support services to distance themselves or not believe them.

Needs and drivers:

- Multiple ways to access services both physically and digitally.
- Information makes a difference, knowledge is power. Often they do not know what is available to them such as NDIS and other supports.
- Their confidence increases when they know it could be possible for them to be independent.
- People to advocate for them and speak up and support them around domestic violence.
- To know it would be possible to leave and what are the alternative care options.

Barriers:

- Isolation is a significant barrier. The key services that can reach out to these incredibly isolated people are not forwarding on the information or referrals to services that can help. There are no referrals coming from disability services or doctors
- The complexity of needing support for living is a barrier. The carer is often the perpetrator and people can not imagine the possibility of being able to survive without them. It makes a difference once people know there are options for their care.
- Not being believed or taken seriously

“Women with a disability seek information to be able to prepare, it can take them a long time to leave.”

“Women with a disability was experiencing abuse and was deaf so could not contact services by phone. She opened up to her workplace by writing a note asking for help and the workplace called DVCS on her behalf. DVCS came to her workplace. Once we had a signing translator we could finally understand the extent of the abuse. We have put systems in place for her through a text and email system for when she was feeling unsafe or needed assistance.”

“Women with a disability was confined to her wheelchair. They were living in an apartment building on the 2nd floor. Her partner would take away her phone and remove her wheelchair each morning and take it with him so that he knew she couldn’t leave the house.”

“There is a fear for some who have a physical disability that they can’t get around without their carer, they depend on them for their daily care and don’t know who would help them if they weren’t there.”

“She was experiencing abuse and was deaf so could not contact services by phone. She opened up to her workplace by writing a note asking for help and the workplace called DVCS on her behalf. DVCS came to her workplace. Once we had a signing translator we could finally understand the extent of the abuse. We have put systems in place for her through a text and email system for when she was feeling unsafe or needed assistance.”

“Women with a disability seeks information to be able to prepare, it can take them a long time to leave.”

“She wanted to know it would be possible to leave and what that would look like.”

“They are fearful of losing custody of children to the violent partner because of the disability.”

“For some people their best friend is their pet, they are concerned about what will happen to their pet. Few shelters allow animals.”
Young men with lived experience of violence in their families

What violence looks like for this cohort:

- For many perpetrators, violent behaviours are learnt. They have either been exposed to it or are victims themselves.
- There is a lack of a network to support victims at risk of becoming perpetrators. There is a cultural attitude of never being empathetic towards perpetrators. As a society, we have a zero tolerance zero empathy attitude towards perpetrators.
- The real story is a lot more complicated. There is a need to understand the progressive dehumanisation of these boys and men.
- Early warning signs of children at risk of becoming violent are ignored or go unnoticed. There is a need to look for early signs for children at risk or who use violence.
- There are some men where violence is completely normalised. They take no ownership of their behaviour. “it is her fault, she called the police.”

Needs and drivers:

- Social education campaigns are helpful. They reduce stigma and create awareness about how to intervene and help those at risk of violence. “Education campaigns help when we have words for understanding the world. They have a framework for how to see things in their world."
- We need safe ways for men to ask for help when they know they will not be labelled as perpetrators. “The service did not make you feel evil when you asked for help”.
- Help men recognise and manage the emotions and behaviours that lead to anger and violence.

Barriers:

- The stigma of asking for help.
- Limited services working with the male perpetrators or men at risk of becoming violent.

“There is no boundary between victim, perpetrator and witness in the world of these boys. At 8am you are a victim, at 3pm you are a perpetrator at 6pm you are a witness.”

“It takes a lot of courage to ask for help as a perpetrator. We have to take the call in an open non judgemental way.”

“Men call because it is anonymous there is a lot of shame and guilt. Sometimes men call 4-5 times before they are ready to talk.”

“They call about something different, they test and build confidence before they tell you what they really want to talk about.”

“We need to be working more with the men, if you don’t have a perpetrator you don’t have a victim.”

“There is a lack of a network of support for victims at risk of becoming violent. There is a cultural attitude of zero empathy towards perpetrators. As a society we have a zero tolerance zero empathy attitude towards perpetrators.”

“The real story is complex, we need to understand more about the progressive dehumanisation of these boys and men.”

“Early warning signs of children at risk of becoming violent are ignored or go unnoticed. There is a need to look for early signs for children at risk or who use violence.”

“Young men can’t articulate why they are angry. They can’t self soothe.”

“Anger is addictive.”

“There is a lack of counselling for men. No one is working with them to help change their behaviours.”
Section 4

Lived experience: findings
The following pages share the experiences of seeking safety from power and control relationships by different people.

While each story is unique there are common patterns of experience and common barriers to safety.
“Shortly after arriving in Australia my boss introduced me to a man.”

**Who am I?**

I am an independent, professional woman and mother who came to Australia to advance my career.

**What do I want to achieve?**

I want my children to be safe.
I want to be safe.
I want to re-establish my independence.

**What does success look like to me?**

I have the support and skills to stand on my own two feet again. To help me recover and rebuild.

---

**Before coming to Australia I was very independent:**

“I came to Australia with my eldest child for a job opportunity. I came on a 457 working visa.”

“I was alone for many years before meeting him. I owned a house in my country and had a good job.”

**He was wonderful but things quickly changed:**

“I met him and he was wonderful. We married four months later, and then two months after that I was pregnant.”

“When we started living together he changed, he started screaming at me, yelling at my child. Telling me to leave and get out and go back to my home country with my child.”

---

**Early warning signs**

---

**I don’t think this is ok**

**He wanted my money:**

“I kept giving him money, money, money.”

“Soon after arriving my boss couldn’t pay the wages they previously agreed to. I had to start cleaning and was working 12 hours a day. He kept wanting more money. I was pregnant and working 12 hours, seven days a week.”

**When the baby arrived things got worse:**

“When I had the baby he said he would take my baby away. He was friends with a big law firm, he said I would have to leave with my eldest child and leave my baby, I could never leave my baby.”

“When I had the baby he wouldn’t go and buy food, it was the first time in my life that I went to bed hungry.”

“I was so hungry I couldn’t make breastmilk for my baby. The baby would cry and cry because it was hungry, a friend bought formula for the baby.”

**Everything was so expensive. We would fight over money:**

“457 visa meant that I couldn’t enrol my daughter in the public system, so it was very expensive. I had to pay medical bills privately, I couldn’t afford to go to the doctor when I go sick.”

“The fights were always over money.”

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**Isolation**

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**Opportunity: Immigration**

Immigration understands the risks of violence and provides people with information. Increasing self agency to recognise risk.

**Opportunity: Immigration, schools, health providers**

Understanding the risks of violence supports discrete access to information.

**Opportunity: Child and maternal health**

A trusted person can hear people’s needs and provide support.

---

**The information in these lived experiences are not to be copied or used for other purposes**
Opportunity: The legal system

Victims understand the process and their rights. Services recognise when they are being used by perpetrators to perpetuate abuse.

I called the Police:

“I called the police and told them what had happened, they told me that it was not family violence it was just an argument. They gave me the number for counselling.”

I stayed:

“I stayed and booked into a counselling session a month later. When we got to counselling he did all the talking, he said it was all my fault. There was no interpreter. I tried to fix our marriage, to be the best woman to him.”

I tried again:

“I got an appointment with a lawyer who told me to leave the house. I got offered a house on the other side of town but it was too far away from my child’s school. I couldn’t drive I had to turn it down.”

I finally got out:

“I connected with DVCS, they got a woman who spoke my language to speak with me and help me. Seven days later I left. I spent two weeks in a hotel and then went to a women’s refuge.”

“I left my home at 11am by 3pm I had a text message telling me I had to attend family court.”

Trying to navigate the legal system:

“My English was very bad, I was scared. I got legal aid but I didn’t have enough guidance. There was no interpreter. No one told me what my rights were, this is not my country, I did not understand.”

“He got three nights with the baby each week. The baby was still breastfeeding. I asked the lawyer what agreement I could have, what my rights were. No one told me.”

Beginning to rebuild my life:

“I only knew my rights when I received a case worker, but it was too late. The courts had decided.”

“The women’s refuge changed my life, they helped get an exception and enrol my eldest in high school.”

“Women’s Legal Centre recommended a lawyer who helped me get permanent residency.”

Going back to court:

“12 months later I went back to court. They only saw me 1 hour before the hearing. Again there was no interpreter, I kept asking the lawyer but they didn’t help me. When they wrote the family report there was no interpreter I could only answer yes or no to his story.”

I don’t know what happens next:

“I don’t know if the legal process is over.”

Opportunity: Online

A trusted person can hear people’s needs and provide a warm hand over to trusted support.

Opportunity: Police

A trusted person can hear people’s needs and provide support.

Opportunity: The legal system

Victims understand the process and their rights. There is increased accountability for the long term safety of the victim and the child.

The information in these lived experiences are not to be copied or used for other purposes.
He was charming and flattering, I was naïve:
“I decided to come to Australia to study. I met my new husband, he was charming and flattering, I had never been with a man, never been told I was beautiful. He said he needed money, I believed him and I gave him all my money.”
“He was in court for domestic violence with his ex-partner, he told me lots of stories, I was very naïve.”

He controlled my body:
“He would not let me use birth control, very soon I was pregnant and things got worse. In my culture when you are in a relationship with someone that is a commitment and you do everything to make it work, he was very good at speaking and he convinced me.”

The doctor and midwife knew there was something wrong
“He accompanied me to every doctor’s appointment, he would not leave me alone, he would not let me talk. I tried to make eye contact with the doctor to let her know I was not ok. She didn’t notice me.”

Seeking help
When he stepped out of the room for a minute, the midwife asked me: Are you ok? I said no I am not, he is beating me every day….she didn’t do anything to help.”

Early warning signs
He had very little respect for women:
“He has a very complicated diet he only eats organic vegan food and he expected me to cook two three course meals for him every day. This is not how I was brought up, I was brought up to be independent, we do not cook like this in our country. I have a good education, I have a degree, I want to work.”

I don’t think this is ok
“I left six little times and two big times…”

Who am I?
I am an independent, professional woman and mother who came to Australia to advance my career.

What do I want to achieve?
I want my children to be safe.
I want to be safe.
I want to re-establish my independence.

What does success look like to me?
I have the support and skills to stand on my own two feet again. To help me recover and rebuild.

I think this is ok
Opportunity: University
Immigration understands the risks of violence and provides people with information. Increasing self agency to recognise risk.

Opportunity: Antenatal care
A clear response that can recalibrate peoples norms and help them recognise early warning signs of violence.

Opportunity: Child and maternal health
A trusted person can hear people’s needs and provide support.
**Isolation**

I became incredibly isolated:

“When he was out I called the police to say he will kill me. They said is it today, has he bashed you today? I said no not today, they said they cannot do anything if the physical abuse is not tonight. I was so angry… I said are you going to wait until he kills me.”

He prevented my child and I from seeking medical attention:

“I was locked in the house and bashed everyday, no one knows I was there.”

“I could see there was something wrong with my child, he would not let us go to the doctor, I called out for help on Facebook I got lots of advice including to call DVCS.”

“When I did finally get medical help for my child she was diagnosed with a serious health problem.”

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**Why I can’t leave**

I would leave and then come back again due to fear:

“DVCS always took my call, I did not know how I could leave and not lose the children.”

“I left six little times and two big times. I kept going back because I was afraid I would be deported and separated from my children. I didn’t know about immigration.”

He would intimidate me:

“He put a lot of fear into me. He called care and protection and told them I was crazy and couldn’t take care of the children. He told me they were going to take the children away. They came and visited, they did not ask for my story. I was very afraid.”

“I stopped trusting services, no one asked me if I was ok. Only trust the Australian man.”

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**I have left but I am not free**

I don’t know what is true, I don’t know my rights:

“My concern is not that I will be deported its that he will prevent me from taking the children with me. He would tell me the courts will favour him, no one would believe me.”

“I am on a bridging visa, I need to work but I can’t get money for child care and I can’t earn enough to pay for child care. I want to work, it is disappointing, there is no help to get child care.”

“We are waiting for appropriate housing. My child starts school next year, I don’t want to get her settled into school then have to move her because we get a house far from here.”

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**Recovery**

More than a year after I left I am still rebuilding my life:

“It’s 14 months since I left. The first 3-4 months were very bad. It helped a lot to get out and do activities with the children. The refuge helped take us to the food bank and with money for the bus. The big thing is driving, I don’t know how to drive.”

“Women from DV need to learn how to become independent, they have been too controlled. I couldn’t drive, I couldn’t talk to people.”

“I was independent and confident, this has turned me into a very different and afraid person.”

My child is recovering too:

“My daughter had lots of health and behaviour problems, she is settling now her behaviour and her health is improving.”

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**Opportunity: Police**

A trusted person can hear people’s needs and provide support.

**Opportunity: Immigration, CYPS**

Services recognise when they are being used by perpetrators to perpetuate abuse

**Opportunity**

Flexible solutions prioritises the needs of the child.

**Opportunity**

Recovery support recognises that people have lost everything including their identity they need to rebuild their lives starting with basic living skills and it takes time.
“My parents value women’s education and independence — I want the same for my daughter.”

Who am I?
I’m a professional with a masters qualification from my home country. My family invested a lot in the education of the girls so that we could be independent.

What do I want to achieve?
I want to live a meaningful life and make a meaningful contribution to society. I want to be free.

What does success look like to me?
Safety and freedom for myself and for my child.

We came to Australia together, we were happy:
“I came to Australia with my partner and my child, he was good when we arrived, no problems.”

He changed and I became isolated and trapped:
“I don’t have a permanent visa, it is a sponsor visa and he is my sponsor. He will not sign the permanent visa for me. It will give me independence to work, he will not give me that. He doesn’t give me a visa, he will not let me work.”

He started to control my life:
“I started at CIT, I got my licence. He gets angry when I leave the house without him. He hits me.... That is not a life. I have a degree, I am a professional woman. I have been brought up to be independent. He can not tolerate my independence. I didn’t know what to do. I don’t know Australian law, I don’t know anyone here.”

A friend told me what to do:
“My friend in New Zealand who has experienced violence helped me to know what to do. She told me to put my documents in a safety box in the bank. She told me when I did not go to the police to go to the doctor and get a doctors certificate, that was such good advice, if I did not have those doctors certificates I would not have a case. The doctor told me to call DVCS.”

My neighbours called the police but the options provided are not possible:
“When he is violent the neighbours call the police and they come but I don’t understand, I don’t know what I can do. I have no money, no work, a young baby. I stay away for three weeks but there is no long term solution. Then I go back, I give him another go, at first it better then the violence starts again.”

“He hits me and holds me until my breathing stops. In my country it is shameful if you call the police, if I call he will go to jail. For my child’s sake I do not want to do that.”

Being a visa holder makes it harder:
“Immigration is hard work, it is a big trap not to have a visa.”

Opportunity: Immigration
Immigration understands the risks of violence and provides people with information. Increasing self agency to recognise risk.

Opportunity: CIT
A clear response that can recalibrate peoples norms and help them recognise early warning signs of violence.

Opportunity: Connected response
Service responses align with solutions that meet people’s needs and the complexity of barriers to leaving.

The information in these lived experiences are not to be copied or used for other purposes.
Opportunity: Banks
Understanding the risks of violence supports discrete access to information.

I have left but I am not free

Even after I leave he still causes trouble:
“I finally leave, I get to the refuge with my papers, my child my things I can start a new life. Then he starts to cause trouble for me. He calls the police and says I stole my car.”

“He calls child protection and tells lies about me, now I have a custody case about my daughter with evidence against me that he has created.”

“It is two years since I left him and he will not stop causing problems.”

I must be so careful so that he doesn’t find me:
“I use the P.O. Box at the refuge, its away from the house, I can’t use the address at the house it is too risky.”

Recovery

I am trying to rebuild my life but he still makes it difficult:
“I am trying to study to have my professional qualifications recognised in Australia. The trouble he causes takes so much time and so much stress I can’t study.”

“What is hard is the isolation, I can not leave the country or go and see my family because he stops my child leaving at the airport. I can not go, the family court prevents me from going. I feel if I could just see my family for a short time it would give me so much strength.”

Recovering is a slow process but with help and support we are seeing improvements:
“The support of this organisation and having a house makes a big difference. It is the chance to start again.”

“Legal Aid and social workers make a difference.”

“My child is starting to talk again, by the time we left she had stopped talking, I had not noticed.”

I began strategising a way to leave:
“I went to the bank and I opened a box to keep all my documents. He went to cut up my documents, when he found they were copies he was furious.”

“First point was a long wait, when I knew there was somewhere to go it gave me the confidence to leave.”

He controls me and makes threats:
“When he is angry with me he takes all of my things, my money, my phone and locks me out in the cold. He keeps my child. His threat is that he can take my child anywhere he likes, no one can stop him. I go back to the house because I have to find a way to leave with my child, my dignity and my things.”

Why I can’t leave

I have left but I am not free

Even after I leave he still causes trouble:
“I finally leave, I get to the refuge with my papers, my child my things I can start a new life. Then he starts to cause trouble for me. He calls the police and says I stole my car.”

“He calls child protection and tells lies about me, now I have a custody case about my daughter with evidence against me that he has created.”

“It is two years since I left him and he will not stop causing problems.”

I must be so careful so that he doesn’t find me:
“I use the P.O. Box at the refuge, its away from the house, I can’t use the address at the house it is too risky.”
“He seemed like a normal person he was a young successful business man, he was educated, funny, had two degrees, was hard working and interesting.”

Who am I?
I am an independent woman. I have a degree and I run my own business.

What do I want to achieve?
I want to reclaim my life and independence.

What does success look like to me?
I want him to be accountable for his behaviour.

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**Early warning signs**

- He would put me down when he felt insecure:
  “He had high levels of insecurity, he would get upset and emotional about my past.”
- I would make excuses for his behaviour:
  “There were a spiral of excuses in my head, he has issues, no one is perfect.”
- I was becoming concerned for my family and friends:
  “I started to feel protective of other people impacted by our relationship – my family, our employees.”
- He isolated me from my friends and family:
  “Jealousy started appearing and getting worse, he stopped me seeing friends and family.”

**I don’t think this is ok**

- He began to control my finances:
  “He started to move all of my property into his name, he controlled me by taking control of everything I owned.”
- The abuse got worse:
  “He kept calling me a whore and told me I was unlikable, that I had no friends and that my parents didn’t love me.”
- Our neighbours called the police:
  “The police were called by our neighbours because he was screaming all night and smashing things, he wouldn’t let me sleep.”
- I lost sense of what was normal:
  “When you start a relationship like that you know where north is. Their version of north is so far off track that it starts to push your north further away.”

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**Why I can’t leave**

- I began planning to leave but I was scared what he would do:
  “I started moving clothes, money and planning to escape. I was so scared of making the ultimate step of actually leaving because I didn’t know what he’d do.”
- Some people made me feel like it was my fault:
  “People’s reaction to my trauma made it feel like it was my problem.”
- I became very anxious and scared:
  “I started to jump and feel very nervous. It was really effecting my mental health.”
- My survival mode kicked in:
  “You move into survival mode, your concept of right and wrong gets confused as you try to survive and try to figure out how to get away from him.”

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**Opportunity**
Understanding the risks of violence supports discrete access to information.

**Opportunity: Police**
A clear response that can recalibrate peoples norms and help them make sense of what is happening to them.

**Opportunity**
A trusted person can hear people’s needs and provide support.

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A friend finally convinced me to go to the police:
“The only reason I went to the police was a friend told me how outrageous his behaviour was. You need someone who sits with you and says ‘this is atrocious, this is a serious unacceptable crime’. You gauge your own feelings on others response and others don’t know how to respond.”

It took a long time to make a statement:
“I went to the police and it took five nights to make a 30 page statement.”

It took even longer to get a DVO:
“It took 9 months to get a DVO because he disputed it.”

He used the legal process to harass me:
“He served me with 7–8 legal letters a day for a month… It was a big game of intimidation. They interrupted me at work to serve me with legal documents — it cost me my job.”

It was difficult financially:
“I received 200 letters in 12 months and I had to get a family lawyer and a business lawyer. I spent $60,000 on legal services to deal with these things.”

“The perpetrator has money you have no hope. He had a team of barristers, I had to have a barrister. He loved it – his plan was to use the court system to bankrupt me.”

The evidence I provided was dismissed because it wasn’t physical violence:
“I wasn’t injured badly enough. Unless I had been in hospital or someone had seen it, there was not enough evidence to convict him.”

“He sent me 140,000 text messages in 18 months – excluding the times I blocked him. He wrote a contract describing what I could and couldn’t do.”

The court experience is humiliating:
“There is a huge sense of shame, this is seen as a personal problem, not a societal issue. There is a huge sense of isolation as you sit in the magistrates court. You are made to feel like you are the problem.”

“In the end I had no money left, the only thing I could get was mutual orders. In the eyes of the law I am just as much a perpetrator as him.”

I am still being stalked:
“Every piece of information is used by him for control, when my car was due for service they texted him and he turned up there.”

“He knew my car and he would follow me, I had to change my patterns. Imagine if I had to follow predictable patterns like dropping a child off at school?”

I am rebuilding my life:
“Where can I send my mail that is safe? How do I update contracts for everything he moved into his name?”

How do I ensure this doesn’t happen to anyone else:
“He has a new girlfriend, we need a way to warn other women…”

Opportunity: Car hire, banks, post office
Innovative responses to stop stalking and harassment.

Opportunity: The legal system
Increased understanding of power and control means services recognise when they are being used by perpetrators to perpetuate abuse.

Opportunity: The legal system
Increased understanding of power and control means services recognise when they are being used by perpetrators to perpetuate abuse.

Opportunity
Simplified user centred processes. Increase service accountability for the safety of the victim and children.
It would have been impossible to leave without help:

“To get a police record you need a doctors certificate. They took us to the doctor. She organised us, she was amazing. She knew what we needed for every appointment, what we needed to do and how we needed to do it. Every case is different.”

There were so many unknowns:

“There is no certainty staying at the refuge. You don’t know how long you can stay. I was really scared, the court case was long and complicated.”

We had to start from scratch:

“We didn’t have any money to eat or any clothes. We got one payment then no more, it is intimidating to ask for money. There is a mentality that people are lazy, people are not lazy it is very hard to find a job.”

“I had three jobs, I worked seven days a week, my child worked too and I paid 50% tax.”

We got a short-term accommodation solution not a response to our trauma

I was put in a hotel alone with no food or clothes, we had no money, there was no attempt to support me in our crisis, I was left alone with no one to talk to.

The housing did not feel safe:

“When I moved out, housing put us in apartments where there were drug dealers and violent people. Me with my young child, soon I was robbed there when I was on the way to a driving lesson. They took everything at knife point. We never slept, there were wild parties. My poor child was so scared, this did not feel safe?”

I will never be the same:

“I am a very strong and very well educated woman, there was a time in this when I was so vulnerable I was shattered. The experience took all my confidence away. I was very skilled and I took a very low paying jobs because I could no longer handle the stress.”

You need people who you know and trust:

“It makes a difference to be able to talk to someone who knows you on the phone even for five minutes.”

“When it happens to you it is a different story, you loose your mind with stress and trauma and nobody trusts you.”

“When you have made a wrong decision and everything has fallen apart you need a person with good judgement to listen and to help you make good decisions.”

Opportunity

Service responses align with solutions that meet people's needs and the complexity of barriers to leaving.

Opportunity

Recovery support understands that people leave with nothing and the response meets basic needs, recognises trauma and reinstates human dignity.

Opportunity

Recovery support recognises the impacts of violence on children and their needs.

Opportunity

Recovery support recognises that people have lost their support network they require trusted, familiar and consistent support.

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Families wanting to increase safety and stay together

Families who want to stay together have a different pattern of violence, if they have been living with violence for a long time they do not recognise the patterns and triggers or know how to change. They may stay together for the children and not recognise the impact of violence on the children. They want help but they do not feel safe to ask for help, there is a lot of shame and they are afraid of the children being removed. They are seeking someone to work with them to improve safety.

We only spoke to a couple of men who have used physical violence. Men who use power and control typically do not recognise their behaviour as violence or take accountability for it. From listening to men and women there were some common drivers for change.
I am afraid of the consequences of reaching out for help:
“How do we disclose stuff without the fear of the kids being taken?”
“If I do disclose, I don’t want the police and CYPS turning up questioning everything I do and making it worse.”
“I want to ask someone to help me be a good parent but that is not something you can say aloud. If I ask for help they will say I am an unfit mum.”

Shame and humiliation made us hide the violence we are living with:
“I was a prisoner in my home for 16 years because I did not know how to get help. I didn’t tell anyone because I was so humiliated. I made myself alone because I was so scared.”
“We have lived with violence for over 10 years, I do not even tell my friends, there is such shame and fear of people knowing.”

We feel we will be judged not understood:
“We have been trying to get help for years but you have to be really careful. If families want help to fix things to make their families safer help them don’t take the children away.”

Who am I?
We are a family who have been living with violence for a long time, we want the violence to stop.

What do I want to achieve?
The violence to stop for the children to have a mother and a father, we don’t necessarily need to live in the same house.

What does success look like to me?
Our children have a family, a community and a future.

I need short term respite not a long term separation:
“I am traumatised and exhausted I love my kids and I need some help to keep them safe I do not want you to take them away, we all just need a break.”

We needed practical tools to increase safety in our home:
“We want to understand our behaviour, we want tools to know how to act with each other. How we act when I am angry, how we act when the kids are angry, how we trigger each other, how to communicate better to make the violence stop.”

I need a safe person to help me know what is real:
“I have spent a really long time not feeling safe, I was paranoid, I was imagining stuff, I really struggled to find what was real.”

Opportunity
A trusted person can hear people’s needs and provide support.

Opportunity
Understanding the risks of violence supports discrete access to information And responsive pathways.

Opportunity
The need for a clear response that can recalibrate peoples norms and inform their decisions.

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We need amazing support for the kids

The kids miss out:

"It’s a sad repercussion that we raise our kids on trauma."

"They do not have access to activities that make them feel normal."

"There needs to be activities for kids, fun normal stuff, if there is a peer mentor there they have someone to talk to. They might get a chance to talk about stuff."

There needs to be support for kids who act up because of what there experiencing at home:

"My son gets his privileges removed at school, he knows his behaviour is wrong, he wants to fix things but he doesn’t get a chance."

"I want someone to work with my dad so I can tell him how angry I am."

I need real help

I need to know I can trust people before I ask for help:

"She gave me a whole list of 15 people to ring, but, she didn’t ring any of them. I did not know if I could trust any of these services with our story."

I feel patronised when people say I know how you feel:

"If you have not lived with this nightmare, you do not know how I feel, do not judge me."

We need to know we will be listened to and have some choice about how to manage the violence we live with:

"I have left a controlling relationship and now I am being controlled by services. I want to make decisions that effect my life and the life of my children and I want someone to help me do this."

Not enough happens in jail

Perpetrators are not in jail long enough to engage with meaningful programs that can help them. Programs work with the men but not with the whole family:

"Jail is the time we can feel safe. There needs to be family counselling in jail, both sides, get both parties on board, train them not to trigger each other help to prepare for things to be better in the future."

Opportunity

Trusted service providers create a pathway of trust by making warm referrals.

Opportunity

Priority is placed on behaviour change and accountability not punishment that does not increase long term safety.

Opportunity

Increased service accountability and options to support men and families when men come out of prison.

My family help to keep me strong

When my husband gets out of jail next week there is an expectation that I will support him, I cannot do that:

"There needs to be somewhere for the man to live when he gets out of jail where he is supported. He says he needs us, he has been working hard to get of drugs and alcohol now he says he needs his family to keep me strong, to stay away from bad influences."

"He is the kids dad, I am proud of him and I need him to stay off drugs but I can not be the one who supports him and he can not live here."

ACT Government  Family Safety Hub Design  Insights Report

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“Seeing what I had made me hungry, I had a top chick and amazing kids. I would go to any lengths to change.”

Who am I?
I am a loving father and partner.

What do I want to achieve?
I want to be there for my children. I want my violent behaviour to stop.

What does success look like to me?
I can control my anger and violence. My family is no longer afraid of me. I can be the loving and supportive father and partner I want to be.

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I lost everything:

“I lost my job, lost my house, attempted suicide and ended up in a high security ward.”

I realised I needed to change:

“When I was in hospital a friend I respected walked in. He gave me a phone number for help.”

“I knew I needed help for alcohol and for anger.”

“What pushed me to do all of this was that she took the kids, I am actually grateful that she has done that. I wouldn’t be the man that I am today if she hadn’t made that choice. I needed to change not only for them but for me.”

Rehab was challenging:

“Going to rehab took nine months.”

“I had my bags packed ready to leave 20–30 times. But I stayed.”

I stuck with it and came through the other side:

“But through going there, through my case worker I got put on to this worker and did a 10 week prevent violence course and it’s the first time that I was hungry. I was open minded and it was the first time I opened up with 17 other different blokes and told them where I was and wanted to be.”

“Seeing what I had made me hungry. I had a top chick and amazing kids. I would go to any lengths to change. I went to church and I approached services and went and studied pain based behaviours and your body.”

I was a new person, and my family was proud of me:

“People who see me today cannot believe the person that I am today.”

“It scared me and shocked me when people started to say positive things to me. I was never used to anyone saying they were proud of me.”

Recovering takes time and I am still working on myself:

“I was scared of going home, I was afraid I would relapse.”

“I continue to meet with my worker once a week for a one on one session. This helps me to talk through what I am dealing with. I am keeping up with my AA meetings. I am still in touch with people from rehab.”

“I have learnt to express my feelings, I do it in a calm and respectful way.”

I have learnt to control my anger:

“I have put my gloves down and I am never going to pick them up again. I have tools now, I recognise my own behaviour, I know the signs that tell me when to walk away. I learnt the time out method so I can go for a walk and calm down so I can go and take a breath.”

I reclaimed my life:

“Now I have a full time job, people who respect me. I thought I had lost my family due to my violence and anger. Now we are together and my kids no longer fear me, they don’t have to tip toe around me.”

Partner – “I feel safer now. The way he talks, He dosn’t mek me feel threatened, He is happier with him self.”

Opportunity: Mental health care

Perpetrators must be willing to seek help and change their behaviour.

Opportunity: Rehab

Behaviour awareness and change takes time. Men supporting men. Continuity of support.

Opportunity: Rehab

Increased service accountability and options to support men and families when men go home.

Opportunity

The whole family understands violence better and has tools to increase safety in the home.

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"We have been together for 20 years. He always had anger problems and bottled things up."

Who am I?
We are family who want the violence to stop and to stay together.

What do I want to achieve?
We want help and strategies to increase safety in our family.

What does success look like to me?
We have increased safety in our family. We can control our anger and have healthy relationships.

Early warning signs

All I knew was anger and violence:
Father – “I have always had anger issues and always bottled it up. I have punched bosses out and gotten the sack”.

Soon after we were married, the violence escalated:
Mother – “I was in shock, it was our honeymoon and he punched a hole in the wall. It was the first time I had ever seen him angry and it was because I told him to pick things up from the floor. Then every few months he would have an outburst and smash furniture and break things.”

I don’t think this is ok

I should have seen the warning signs but for me violence was normalised:
Mother – “The anger only appeared after we were married but compared to the previous violence, I didn’t think much of it. It was so much better than with my ex. My ex did horrible things to me physically, sexually, but now he threw things.”

There were times I was so scared I wanted to leave but I stayed because of the children:
Mother - “There were times where he has hurt me from pushing, throwing things on me but he never hurt the kids. I banned smacking in the house because I was scared he would lose control. I was always worried about leaving the kids with him.”

Seeking help

The police came and he was let off with a warning:
Mother – “Police came numerous times, one time they took the kids and interviewed them. He was going to be charged but co-operated with them so they gave him a warning.”

Services made me feel like I was at fault and I was not being a good mother:
Mother – “Child protection became involved. I was breastfeeding and he pegged a lettuce at me and hit the baby. He told the counsellor and child protection came. Instead of addressing his behaviour, they gave me such a hard time. The man said, he is really tired and you are clearly not looking after him. It really upset me, it was 13 years ago.”

Opportunity

People living with violence long term do not recognise it. Increase understanding of healthy relationships.

Opportunity

The need for a clear response that can recalibrate people’s norms and inform their decisions.

Opportunity

Trauma informed support increases the agency of victims to make decisions about their own safety and increases the accountability of perpetrators.

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The violence became a cycle, it was difficult finding help to break it:

Father – “This is such a cycle, the adrenaline, the guilt, you want to die. We tried so many things, first it was Christian counselling, anger management, but this is the best - Everyman. This addresses the nuts and bolts of it. They challenge me, it’s not pretty and nice stuff and reminds me of what I’ve done. I should be in jail. This reminds me of what could be”.

We really needed opportunities to work together:

Father – “We went to Relationships Australia it was ok but they separated us so it didn’t work. The Christian counselling was so bad.”

Violence became normalised for our children:

Mother – “My boys treat me quiet badly. The worker got the boys together and spoke to them about their behaviour, he helped them realise what they were doing.”

We can now identify violence and work together to increase safety:

Mother – “My kids see me as cranky because their father is so unreliable that I get cranky and voice it to him, he goes off and my sons blame me. My kids name it, they say he does it deliberately. So now we are working on it, we have stopped yelling in the house”.

Things only started to change when we both could identify and understand our violence:

Mother – “Change didn't happen until they started to work with me, we look at his behaviours and my behaviours too.”

We have strategies which help us increase safety:

Mother – “I have led the change in the house and things are definitely improved”.

I can identify when I need space and time to calm down. I have a support network to help me:

Father – “There are times when I need to come and vent. It’s hard trying to accept who you are. There was one time when I was depressed. It was bad time and the worker suggested I should stay in a hotel away from my wife so I didn’t hurt her. He made sure I was ok. That we were all OK. It always felt like I was the one doing the work, but now she has taken it on. She is an amazing woman. The worker has helped us to communicate and feel safe.”

Seeking help

Opportunity

Families who want to stay together but want the violence to stop struggle to find support and services that work with the whole family.

Opportunity

When violence becomes normalised for children and they are more likely to become perpetrators themselves.

Opportunity

Identifying and understanding triggers of violent behaviour can help to increase safety in the home.

Opportunity

The whole family requires support and strategies to increase safety in the home.

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Section 5

Insights
Summary of key insights

Through our research, we have learnt that:

- Do we hear what people are saying?
  People are offered generic pathways that do not meet their needs or aspirations.

- A gendered system excludes some people and communities.

- People are afraid to access services and want a non-legal response for safety.

- Communities are seeking culturally competent and trauma informed services that work with the whole family.

- There is not enough focus on the children and the impact of the significant trauma they experience.

- The approach to men is not sufficiently focused on accountability and change.

- A lot of people and communities who experience violence do not recognise it as violence.

- Power and control is not recognised as violence by victims, perpetrators or the system.

- Trust is critical for vulnerable people seeking help. Transactional referral based systems are a barrier.

- Some victims are incredibly isolated.

- Complex and fragmented services make it hard for people to navigate the system to achieve safety.

- I have left but I am still not free. Harassment continues long after women leave and the system is often complicit.
Do we hear what people are saying?

People are not seeking help, because the available supports do not speak to their reality. People are given generic pathways towards safety that are not aligned with their personal needs or situation. This inflexibility of options creates a barrier for vulnerable groups to access services. The design of the existing service system is driving an ultimatum: family and community or personal safety.

“Services offer the response they know how to offer and one binary path is applied to everyone.”

“When women say they want to stay in the relationship and they want to take care of the men, do we hear them or is the risk too great for us to tolerate?”

“There are not many options for the family to stay together. It involves a risk that is hard for us to tolerate.”

“Violence looks different in different contexts and risk looks different too. While the legal approach works for many for others it increases risk.”

“Families feel the significance of loss of community, culture and identity through the removal of children, the incarceration of their men and separation from their community. This leads to them seeking short term responses to acute episodes of violence rather than the long term separation of the family.”

“We find that because people don’t understand the experiences of trans people, when they speak about what violence means to them it is minimised and the risk to the person isn’t acknowledged.”

“Don’t take our men just stop the violence.”

“When women want to escape they are faced with long wait lists for housing. We talk about resilience and endurance but the waiting time is too long.”

“Our assessment of risk is based on a set of values that are not shared by Aboriginal and Torres Strait Islander, CALD or LGBTIQ communities, so when we assess risk we under value the things that matter most to these communities.”

“We need to meet people where they are at and when they need it. There is not a line between pre crisis, early intervention and post crisis support, it is not linear.”

“We need to meet people where they are at and when they need it. There is not a line between pre crisis, early intervention and post crisis support, it is not linear.”

“Families get into cycles, the man is violent when he drinks, the police come. When he is not drinking he is taken back in. It works. It would be interesting to hear what the police think of these cycles.”

Design questions:

- How do we listen and hear what the victim is asking for and why?
“Family violence, domestic violence: this is a Western concept, constructed by white Westerners, and not recognised by some cultures. Ask them what safety is to them.”
“Some communities don’t want the justice response, they don’t want the man to leave, they just want the violence to stop.”
"When he stepped out of the room for a minute the midwife asked me, ‘are you okay?’ I said, ‘no, I am not, he is beating me everyday’… She didn’t do anything to help ”
“People’s reactions to my trauma made me feel like it was my problem.”
A gendered system excludes some people and communities

A gendered response is effective for many, but isolates others and prevents people from seeking support that is relevant and safe for them. This gendered model is important in responding to the violence and abuse of women and prevalence of domestic and family violence in women’s lives, however, it also isolates LGBTIQ people and some women with older male children.

“Their issues (gay males) are considered less important or less urgent than those in heterosexual relationships because they are not considered to be based in a relationship of power imbalance, or because they are both male the violence is mutual.”

“A trans woman called up for help to flee her violent relationship. We had nothing for her, the refuges won’t take her because it’s considered too dangerous for the other residents and for her, there was no options but a hotel.”

“It is difficult when people want to stop domestic violence and want to stay in the relationship. We define a successful outcome by the path we know and give up when what people want seems not possible or too risky for us.”

“It is very difficult to find crisis accommodation for women with sons 17 years and over. She can only get refuge accommodation as a single women.”

“Women want the person using violence to get help, they do not want to leave and they are afraid of fallout with family and community”

“Where do non binary people go, where do they seek help?”

Design questions:

- How do we create a system that is inclusive of LGBTIQ communities and others experiencing violence?
Transgender clients are the trickiest to support and are at the highest risk. They are a high risk group for homicide and suicide...Refuges will not take transgender people, we have to put them in a hotel”

“The type and level of violence they experience is strongly linked to their transgender identity. Some people who use violence against these people are predators. These clients flee from interstate.”
“There is an unspoken fear that if we start to tell the mainstream community that actually sometimes our relationships are toxic and horrible and abusive, then they will use it against us to say: ‘see it’s all unnatural and a sin anyway’.”
“I want to be asked pronoun I use to identify myself.”
People are afraid to access services and want a non legal response to safety

People are afraid of the consequences of seeking help, they need anonymous ways to get information about options and pathways to safety. For many, especially those who have experienced trauma, interacting with the legal system is terrifying and police involvement is a real fear.

“Consequences are a huge barrier to reporting”... “Victims and perpetrators are so fearful of accessing services.”

“I felt like I got out of a controlling relationship to be watched by the system.”

“The whole life experience of people experiencing DV creates lack of trust.”

“Women will stay silent because of the perceived consequences for their man. Further loss of identity, humiliation and disempowerment, bashings and deaths in custody.”

“Women and grandmothers will stay silent because of fear of Child Protection Services taking their children away.”

“LGBTIQ people will stay silent because they feel they will be judged and not understood.”

“People from Aboriginal and Torres Strait Islander, CALD and LGBTIQ communities will stay silent because of fear of community backlash and fear of being isolated from their community.”

For perpetrators there is a fear to speak out or ask for help. “There is a lack of a network to support victims at risk of becoming perpetrators- we have a cultural attitude of zero empathy towards perpetrators”. This creates a tremendous fear of being labelled as a perpetrator which is a significant barrier to accessing services.

For refugees there is fear of removal of children. “We have kept our children safe from war and migration only to have them removed by care and protection without any comprehensive understanding of our situation.”

“People are afraid of seeking help. They need anonymous ways to get information, there is a lot of shame and guilt and they are afraid of consequences.”

People are afraid to access services and want a non legal response to safety

Design questions:

- How do we have a holistic focus in the best interest of safety for women, children and men?
Some communities don’t want the justice response, don’t want the man to leave, they just want the violence to stop.”
“Once she reported to the police about what her husband was doing to her, her community shunned her. The community started to watch and follow her and became part of the abuse.”
“You don’t meet anyone else in your situation. Where is the support network? Where is the opportunity to meet other women going through this? What helps people to find their way through this?”
“I would like to hear from women with the confidence to speak; to say you can make it through, the depression and the anxiety, the feeling of hopelessness to get past that and feel human again.”
Communities are seeking culturally and trauma informed services that work with the whole family

Aboriginal and Torres Strait Island and culturally and linguistically diverse (CALD) populations speak of the complexity of family and domestic violence. They speak of the impact of intergenerational trauma on their men and children, and recognise the violence as a symptom of trauma. The established domestic violence responses are based around victim and perpetrator with an expectation that partners separate and services are offered separately OR children will be removed. This works against engagement, disclosure and help sought by female victims who want to keep families together and end violence. Especially for groups who have a strong cultural drive to keep their family together and ensure the man is safe and supported. The way services are currently designed is you go to one service for help as the victim, one service for support for the perpetrator and children are left to fall through the gap. There are limited services, funding or flexibility allowed in these programs to work with the family as a whole.

“Women don’t want to leave and we get better outcomes when we work with children. Services are not designed that way or funded to work that way.”

“There is nothing for youth right when their identity and understanding of relationships are forming… youth workers are not prepared to deal with family violence.”

“Children lose their family, their pets, their friends and their school.”

“We don’t have the services to work with those children.”

“We are not teaching children and community what a respectful relationship is.”

“Waitlists and program lengths dictate when people are able to access support and for how long regardless of their own journey and trauma experience, this is not trauma informed.”

“We don’t look at early intervention. We look at early signs for children at risk, we do not look for the early warning signs of children at risk of becoming violent.”

“The broken child becomes the perpetrator…the story behind the violence is often complicated and we need to understand the progressive dehumanisation of these boys and men.”

“We see children growing up in environments where violence and control is a way of life. They do not learn any other way. They never see a disagreement being resolved in anything other than escalating violence.”

Design questions:
- How might we work with those children growing up with violence?
- How can we manage risk and offer options to keep family units together?
“I feel sad for women when there are no mechanisms to reunite with their men or reconnect with community when they have been stigmatised. I wish I knew how to fill that gap.”
I spoke to Companion House, they have helped with everything the big things and the small things. Now I have left the relationship, it is all the small things that are hard with no English and no friends. When I left I could not drive, I have very little English. I could not do the little things like knowing how to top up the kids my-way card or report plumbing problems with the house. What has made a difference is learning to drive and learning some English.”
“It is really important not to set a time limit for support. They tried to kick us out and I said, ‘No, I can’t go, I can’t function, I am too traumatised’.”
“Women from DV need to learn how to become independent, they have been too controlled. I couldn’t drive, I couldn’t talk to people.”
There is not enough focus on the children and the impact of the significant trauma they experience.

Families living with violence stay together for the children, many do not understand the long term impacts of violence on their children. Victims with children are afraid to seek help because they are fearful their children will be removed. In a binary response to domestic violence children of the victim and perpetrator fall through the gaps. There is not enough understanding of the significant trauma they experience and the long term and intergenerational impacts it can have. Children have a right to thrive not just survive.

"My daughter had lots of behaviour problems, she is settling now her behaviour and her health is improving."

"I could see there was something wrong with my daughter, he would not let us go to the doctor. I called out for help on Facebook and I got lots of advice including to call DVCS."

"My problem started when I was a young kid, I grew up in a boy’s home when i was a kid, I felt unwanted, I learnt to bottle shit up, I am an alcoholic. I used to get drunk, thought it would get better, it got worse and worse. I spoke in anger and violence."

"The best thing is how the children have settled into school and activities, the schools have been very understanding and supportive. Two of the children are blossoming, they feel safe away from danger and are fitting into school. I know when we do get a house there is a big chance we will be moved to the other side of Canberra and I will have to move the children to different schools. It is hard to settle when we don’t know what happens next."

"All I want is for my children to be successful, it is hard to create a chance from them. I want to fell confident to raise my children."

"My eldest child was in their room alone all day, he would ignore her. We couldn’t watch TV, couldn’t listen to music because he would get mad."

Design questions:

- How can we better understand and meet the needs of children?
- How might we work with those children growing up with violence?
“My daughter starts school next year, I don’t want to get her settled into school then have to move her because we get a house far from here.”
“When I had the baby he wouldn’t go and buy food, it was the first time in my life that I went to bed hungry. I was so hungry I couldn’t make breastmilk for my baby. The baby would cry and cry because it was hungry, a friend bought formula for the baby.”
“My daughter talks so much now! By the time we left she had stopped talking, I had not noticed.”
“My problem started when I was a young kid, I grew up in a boy’s home when I was a kid. I felt unwanted, I learnt to bottle shit up, I am an alcoholic. I used to get drunk, thought it would get better, it got worse and worse. I spoke in anger and violence.”
“My boys treat me quite badly. The worker got the boys together and spoke to them about their behaviour, he helped them realise what they were doing.”
The approach to men is not sufficiently focused on accountability and change

There is a lack of support available for men who use violence to change their behaviour. It’s important to understand different people and cultures want different responses to domestic and family violence, including options for men to change their behaviour and keep their families together.

“Men need an option to help them before it reaches boiling point, they need a circuit breaker.”

“These people have very little way to understand what is going on inside them. They do not grow up in families who talk about feelings and they have no idea how to have these conversations.”

“We need a chill-out space to give the men time to calm down, not a long term program taking them away from the family.”

“Don’t take our men just stop the violence.”

“It takes a lot of courage to ask for help if you are a perpetrator, we need a safe way for men to ask for help, and we need to answer the call without judgement.”

“If you don’t have a perpetrator you don’t have a victim. It is important to support and work with the perpetrator.”

“We have a problem with violence and almost all of the perpetrators have a history of violence against them as a way of life.”

Design questions:

☐ How do we create safe ways for men who use violence to get support to change their behaviour?
“There is a lack of a network to support victims at risk of becoming perpetrators – we have a cultural attitude of zero empathy towards perpetrators.”
“In the end I had no money left, the only thing I could get was mutual order. In the eyes of the law I am just as much a perpetrator as him.”
“As you sit in the magistrates court you [the victim] are made to feel like you are the problem. There is a huge sense of isolation, there is a huge sense of shame. This is seen as a personal problem, not a societal issue.”
A lot of people and communities who experience violence do not recognise it as violence

Culturally and linguistically diverse families and communities are not familiar with Australian law about domestic violence. In some communities and families power and control is normalised and abusive relationships may not be recognised. The impact is an ongoing cycle that impacts both the man and the woman.

“Traditional power imbalance is exacerbated by migration when men are not able to work, they lose their identity and position in the community leading to them taking more control in the home. Further humiliating, stigmatising and disempowering the man does not help this situation.”

“Mainstream services need to understand what violence looks like in our communities, for our trans people, stopping medication for gender transition is a form of violence.”

“Design questions:

- How do we increase awareness of what violence is, that it is not only physical but coercion and control?”

“A lot of people who experience violence don’t know what violence looks like… the women don’t know the men don’t know and workers impose their own view of violence.”

“We need to respect and understand cultural differences and create an awareness about the law and domestic violence in Australia. Education within the community is required to identify what is violence.”

“She had been trapped in the home for 7 years, not allowed to study English or leave the home without him. One conversation with a woman at a takeaway store helped her to escape.”

“For trans people, they have experienced prejudice and abuse from the community their whole lives and they struggle to recognise violence in their own relationships.”

“For trans people - they are already experiencing prejudice and abuse from the community daily. They are isolated and ostracised and experience violence everyday in all of these forms. So that you can understand why many don’t realise that they are in a violent relationship. This has become their norm.”

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“She was experiencing violence in her own country and when she came to Australia she saw for the first time that there were other ways to live.”
“Most people, when faced with a system that can liberate women from violence, will choose that path, but only if they understand it.”
“The only reason I went to the police was because a friend called out to me how outrageous his behaviour was. You need someone who sits with you and says this is atrocious, this is a serious unacceptable crime. You gauge your own feelings on other’s response and others don’t know how to respond.”
“When you start a relationship like that you know where north is. Their version of north is so far off track that it starts to push your north further away.”
Power and control is not recognised as violence by victims, perpetrators or the system

Victims, perpetrators and the system do not recognise power and control as violence. Power and control contributes to victim’s isolation and lack of confidence to act. People’s confidence to ask for help increases once they recognise they are experiencing domestic violence. In power and control relationships victims frequently feel that they are at fault and when they finally seek help they are not always understood or supported by people and services.

Design questions:
- How do we increase the understanding and awareness of power and control and its impacts?
- How do we support victims of power and control to rebuild their independence?
“He is a narcissist, now I understand he needs to control me. When I was in it I couldn’t understand.”
He started to move all my property into his name, he controlled me by taking control of everything I owned.”
“He would not let me use birth control, very soon I was pregnant and things got worse. In my culture when you partner with someone that is a commitment and you do everything to make it work. He was very good at speaking and he convinced me.”
“I called the police and told them what had happened, they told me that it was not family violence, it was just an argument. They gave me the number for counselling.”
Trust is critical for vulnerable people seeking help
Transaction referral based systems are a barrier

The first point of contact is critical.
Often these victims are in a trauma response of flight or fight. They need an understanding approach to help them absorb the information and move forward.

“People rarely engage with services for DV, instead they test the waters and attempt to talk about other issues until trust is established and when that occurs they are able to open up and discuss the situation.”

“There is conflict between people’s desire to engage through trusted relationships, and transactional referral driven services. Victims and families don’t always know what help is available and families don’t have the full picture either. Transactional systems re: housing allocations and limited resources of small providers works against building a relationship between providers. Providers can’t give clients a joined up response because they don’t know where or how to bring it all together and don’t have capacity.”

The timeframes we are able to support don’t work.
People experiencing DV are in the middle of complex trauma, it takes time for them to understand the situation and they are afraid of the consequences of seeking help. Building trust takes a long time.

“Services have a time scale that doesn’t match people’s experience, compounding consequences take a long time to resolve and we can’t work with families as they need it.”

Design questions:

- How might we build service integration around trusted services?
“The abuse was only identified after all these years, because a social worker from Centrelink pulled her aside during an appointment, she was able to speak out and they helped her immediately.

A number of key services were engaged and they enacted a plan to get her from the home, they helped her gain emergency childcare, pack up her belongings and find accommodation. He soon revoked her spousal visa in an attempt to send her back to her country and services had to step in to stop the process and advocate for her.

The ex husband then used the legal system to continue to try and disrupt her life, calling police, making missing person reports and requesting safety visits to her house at 12am in the morning. Police attended the property despite the DVO and the family law court orders. They woke her and her child up and asked her numerous questions about how she can afford the house and the car and other things... He used the police as another tool to harass her”
“Someone to answer the phone and talk. A five minute conversation makes a big difference.”
“The doctor and midwife knew what was happening to me but they didn’t do anything.”
A place to go for help is good but you need an introduction. You need people who will trust and help you. People will be scared to come to a ‘hub’.”
Some victims are incredibly isolated

Victims are incredibly isolated, their barriers to being able to reach out for help include: language barriers, disability barriers, mental illness, social anxiety. Some people face the issue of not being believed or not being able to communicate effectively when they do reach out for help. These people have a very narrow window of opportunity to ask for help.

Design questions:

- How do we create opportunity for people to ask for help when they are in isolating and controlling relationships?
- How do we provide support that makes leaving sustainable?
- How do we improve channels to increase access to information?

"If I can not hear, I cannot use the phone."
-Deaf client

"Because women have been in such controlled relationships they have no financial understanding and they don’t know how to use a phone."

“It’s impossible when the person you rely on for interpretation or communication is the abuser, an ultimate form of control.”

“Nothing happens until there is a crisis, unless it becomes known to the system the problem doesn’t exist. Clients are very isolated they have been told what to do for years.”

“People help them to leave but who helps with their recovery? They have spent so long being told what to think, eat, dress and do. The recovery phase is overwhelming and scary without someone there to help them remember how to live.”

“He would take her wheelchair with him when he left for work and bring it back at the end of the day to prevent her from escaping.”

“She had been trapped in the home for 7 years, not allowed to study English or leave the home without him. One conversation with a woman at a takeaway store helped her to escape.”

“Disability policies and services tend to rely on family members taking care of the person and the supports they access, which is disastrous if the carer is also the abuser.”

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“Disability policies and services tend to rely on family members taking care of the person and the supports they access, which is disastrous if the carer is also the abuser.”
“She escaped her husband but he continues to control her through her children. He is turning them against her and they now refuse to speak her language in the home. She can’t even explain what’s happening to them, or communicate with them... She is losing them.”
So many women tell us they sought help from their GP and yet we never receive referrals from GP’s.”

“I cannot recall a single referral from a Disability Service. Who is helping these women?”
When he was out I called the police to say he will kill me. They said is it today? Has he bashed you today? I said no, not today. They said they cannot do anything if the physical abuse is not tonight. I was so angry. I said what if I cannot call you?... Are you going to wait until he kills me before you come? I am locked in the house and bashed everyday, no one knows I am here.”
Fragmented services make it hard for people to achieve safety

Fragmented services make it harder for people to leave and harder to achieve long term safety. People give up because it is too hard. Services are siloed in delivering a response to crisis, they are stretched, they have a lack of capacity to build networks that would allow a more integrated offering for clients. No service is funded to deliver a holistic response. There is no capacity in the system to deliver long term services. Increasingly non-domestic violence specialist services are supporting people experiencing domestic violence. For many people these non-domestic violence specialist services are an important service point.

“No one is coordinating the service response. There is no big picture. By the time we get involved there has been a crisis and the family is separated.”

“She called and asked for help in a whisper. I had to refer her to Onelink. I don’t know if she got the help she needed. She said: ‘I have to go, he is here.’ Did she get the opportunity to make another call? I have no number or way to call her back.”

“If one service provider is working with the women who is working with the men and who is working with the children?”

“Our service was never aimed at domestic violence. Now nearly all of our clients are now accessing our services because it’s a safe entry point for them.”

“We need improved referral information sharing and feedback loops. Because there is a one way referral model, service providers do not have the whole picture of what is happening with people.”

“So many women tell us they sought help from their GP and yet we never receive referrals from GP’s.”

“People disclose to organisations without specialist domestic violence capability. They don’t know what to do with the information or how to help. These organisations need to know they are not putting their clients at risk by reporting. They may wish to explore options and receive advice in confidence first.”

She’s gone from service to service to service to service.

“We need to be able to take the call, point people in the right direction when they need it. To follow up and make sure people are not falling through the gaps.”

Design questions:

- How do we reduce the coordination burden for services?
- How do we coordinate, prioritise and allocate in a way that feels less transactional and promotes or enables collaboration?
- How do we support and connect non-specialist services to understand and manage risk?
- How do we share knowledge and information to increase safety?
Imagine the impact it could make. If every time one of our agencies dealt with a family we just logged it. When we see a family calling for help we can ask who is taking this call? When something goes off the rails we can know who is acting.”
The secret of success? The relationships and knowledge in the system and its strong connections. You have to know the experts to call upon. The do-ers, those who know how to navigate the system.”
“This service is not a DV expert, quickly our world changed and now all we see is DV. We seek help from expert services for advice, but they won’t engage with us. We are alone and trying to quickly understand family violence and best practice.”
“One day he was so angry and he had a gun, I saw he could kill us. I called the migrant resource centre. They called and could only find one room for me and my daughter, we didn’t have a car, we didn’t have any money. I didn’t know the process or what to do.”
“The legal process is too complicated. I have a law degree and it was very hard for me to navigate.”

“There was so much paperwork. When you are in the middle of all of this it is just too hard to do. The responsibility is all on the victim.”
“I struggled with the turnover of workers. Everyone knew a bit of the puzzle about me, but no one knew me. I did not feel supported until I got a consistent worker, it has made a big difference.”
I have left but I am still not free.
Harassment continues long after leaving and the system is complicit in these games.

The abuse continues long after the relationship has ended. Power and control is used to perpetuate the abuse long after the victim has left the relationship. Perpetrators of power and control use the family court system to exert control putting children at risk. The system allows for perpetrators to continue to try to control and coerce the victim through manipulating the system to do the harassment.

“Design questions:
- How do we prevent perpetrators and the system continuing the abuse and harassment?
- How do we help to enable long term sustainable safety?”
“It is two years since I left him and he will not stop causing problems.”
"I don’t have a permanent visa, it is a sponsor visa and he is my sponsor. He will not sign the permanent visa for me. It will give me the independence to work, he will not give me that. He doesn’t give me a visa, he won’t give me money, he will not let me work."
“When the perpetrator has money you have no hope. He had a team of barristers, I had to have a barrister. He loved it — his plan was to use the court system to bankrupt me.”
“He might not follow us but he will employ his friend to follow us.”
Section 6

Emerging role for the Hub
# The critical shifts we are seeking

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<thead>
<tr>
<th>FROM</th>
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<tbody>
<tr>
<td>Power and control is not recognised as violence by victims, perpetrators or the system. The impacts of power and control are not understood.</td>
<td>There is broad understanding of power and control as violence and the implications of this for an effective service response.</td>
</tr>
<tr>
<td>Support is discontinuous. No-one can see the range of service and people cannot navigate the system.</td>
<td>There are clear paths to safety. The system is connected and responsive.</td>
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<tr>
<td>People seek support from all parts of the system including health, the school, childcare, immigration and Centrelink but only some services can help.</td>
<td>The broader service system knows how to respond and connect people to safe help.</td>
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<td>Services offer the response they know how to offer and one binary path is applied to everyone.</td>
<td>The first point of contact listens without judgement and connects people to support to meet their needs</td>
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<td>Service responses are not culturally informed or trauma informed.</td>
<td>Services are Aboriginal ready, and Aboriginal communities define what this means.</td>
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<tr>
<td>People are afraid to access services.</td>
<td>People can access and disclose to services without fear of judgement or a legal response</td>
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The critical shifts we are seeking *continued*

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<td>Children are lost in the response to domestic violence. The long</td>
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<td>term trauma and impacts of domestic violence are not widely</td>
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<td>recognised by parents or by the system.</td>
<td>supported</td>
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<tr>
<td>The approach to men is focused on punishment rather than on</td>
<td>A therapeutic approach to working with perpetrators of</td>
</tr>
<tr>
<td>change and accountability.</td>
<td>violence, provides access to help, without judgement, and</td>
</tr>
<tr>
<td></td>
<td>is focused on change and accountability. Support services</td>
</tr>
<tr>
<td></td>
<td>for men and women work together and are trauma informed</td>
</tr>
<tr>
<td>Victims are responsible for coordinating services and keeping</td>
<td>Services are connected and coordinated across related cases, and the</td>
</tr>
<tr>
<td>records.</td>
<td>system takes accountability for keeping</td>
</tr>
<tr>
<td></td>
<td>victims and children safe</td>
</tr>
<tr>
<td>The system is complicit in perpetuating abuse</td>
<td>The system recognises when perpetrators are using the</td>
</tr>
<tr>
<td></td>
<td>system to continue abuse</td>
</tr>
<tr>
<td>Harassment continues long after people have left the</td>
<td>There are effective responses to stop stalking and</td>
</tr>
<tr>
<td>relationship</td>
<td>harassment</td>
</tr>
<tr>
<td>There is a lack of understanding of the broader impacts of re-</td>
<td>The complexity of recovery is understood and supported</td>
</tr>
<tr>
<td>establishing life after leaving a DV relationship and how long it</td>
<td></td>
</tr>
<tr>
<td>takes to recover</td>
<td></td>
</tr>
</tbody>
</table>
The change experience for people experiencing violence

We understand healthy relationships and can recognise signs of domestic violence so we can seek help earlier and are more able to manage our own safety.

I am less afraid to seek help from services. I trust that service providers will listen, understand and support my needs.

If I ask a trusted person from any service for help and advice they can help me identify risk and connect me to support.

I have the support I need to rebuild my life.

As a child my needs are understood. I am supported to flourish.

Families recovery is supported so violence does not continue into the next generation.
## Emerging role for the Hub

### Increase understanding of service providers and the community

Build understanding across **broad range of service providers and the community**.

**Understanding of**: risks, power and control; use of the system to harass, trauma and recovery.

People at risk (victims or perpetrators) able to **seek help earlier** and manage their own safety.

Mainstream service providers able to **identify violence and respond earlier**.

### Innovative solutions to needs

**System innovation** to deliver new pathways.

**New products and options**, e.g. in housing, financial support, supporting safe disclosure, preventing stalking and harassment and promoting long-term recovery.

Innovation that draws on the **capability of the whole community**.

### Co-design and pilot new pathways to safety with people experiencing violence

**Design new pathways** to safety directly with people affected.

Will enable a person-centred response that **treats domestic violence as the presenting issue rather than homelessness**.

**Pathways that**: enable families together while working to reduce violence, meet the needs of children, respect the culture and values of Aboriginal and Torres Strait Islander people, support people through recovery.

### Reform the broader system by scaling systemising and connecting

**New capability** to respond across the service systems.

Investment in **skills and tools** for consistent, quality practice, that connects services and is culturally competent and trauma-informed.

**Scale up and embed** new pathways and innovative solutions.