

Domestic and Family Violence Blueprint

Hunter New England Local Health District – Collated Responses

The following responses have been collated from responses from Hunter New England Local Health District staff to form a whole of HNELHD response.

Thinking about prevention - What kinds of messages and/or communication channels will be most effective in encouraging positive attitudes and behaviours in relation to DFV?

Common themes:

- Messages need to come from men and also be for men/perpetrators
- Prevention strategies - Healthy relationship education for kids/adolescents in school
- Use of TV and Radio ads and posters/billboards – also social media to target younger people
- Use of sports stars (sometimes seen as positive sometimes as negative)

Best answers

“Explaining simply what DFV is, as some people do not equate verbal/ emotional as DFV”

“Prevention strategies such as teaching young girls and young men what a normal healthy relationship actually is and what kind of behaviour exhibited towards them is unacceptable. Maybe this can be implemented in our schools. Unfortunately a lot of young children witness their parents being violent/abusive toward one another and to the child this becomes "normal" and therefore they don't know what a healthy relationship is and become vulnerable to domestic violence themselves.”

Can you think of any DFV messages you have heard? Were they effective? Why/why not?

Common themes:

- White Ribbon Day seen as effective
- Using real stories of survival thought to be effective
- Advertisement about children mirroring behaviours seen as effective
- Question of which demographic is being reached – not effective when you aren't reaching the right demographic

Best answers

“I don't believe the advertisements are very effective- 1 punch etc. My view is that systemic change will only happen through a variety of messages- programs to children in public and high schools, white ribbon events throughout the year, general discussion in work places and businesses (not tolerating violence) etc.”

“Hitting home' on ABC. Powerfully reported.”

Thinking about early intervention - What should be done to best recognise and support those at risk of experiencing or perpetrating DFV?

Common themes:

- Empowering friends and family of victims to say something/step in
- Addressing the shame factor that stops women from reporting. It's not the victims fault.
- Promotion of the free phone lines
- Education on the early signs of DV
- Education that DV is more than physical violence – also verbal, emotional, financial etc.
- More funding for accommodation and other local services
- Again education for young adults and kids in schools

Best answers

“Domestic violence laws need to be re-evaluated. Presently the penalties for committing these offences are inadequate.”

“Age appropriate screening from childhood.”

“Screening and enhanced empathy by Police. Health needs to see this as Core business. Have monthly reports on screening not just snapshots and funding or incentives attached to screening in much the same way as we do for other KPI's”

“I believe that programs need to be delivered particularly targeting primary school aged children. I also believe that counselling/therapeutic programs should be run by a male and female facilitator targeting boys and men. Again my strong view is that much of the resources have gone into supporting women and children which is important but little is being done to address men's behaviour, this the gap in service provision.”

What could be done to respond to those who deny or do not recognise that they are at risk?

Common themes:

- Keep discussion and support options open – recognise and acknowledge that they may not be ready at that time. Provide contact details to come back when they are ready.
- Education on all forms of DV not just physical violence

Best answers

“Again therapeutic work with such individuals is slow but my experience has been that one must work with people where they are at. e.g. if the woman is stating she wants to stay with the perpetrator, then I do my best to engage the man and usually when that doesn't work, I find that

insight starts to grow in the woman regarding her situation. In the end forced intervention in my opinion can make matters more dangerous.”

“Ongoing education. Direct questioning about situations that put them at risk. We need to be upfront about DFV rather than treating it as a taboo issue that only happens to other people. Whilst there remains a stigma people will deny being at risk.”

What would you do if you suspected someone you know – a friend, family member, colleague etc – was at risk of experiencing or perpetrating DFV?

Common themes:

- Talk, listen, be discreet, make them aware of their options and where to go for more help
- Offer other support that might be needed – financial, accommodation, accompanying to police.
- Refer them to the professional services available

Best answers

“I speak directly to the individual. Which is in some ways easier for me as a counsellor, but in the end I talk about some of the women/men I work with in general terms, particular behaviours that are concerning and encourage them to consider their own situation. It's interesting as a lot of people are not aware of the different forms of power and control- isolation, minimisation etc.”

Thinking about supporting the safety and recovery of victims - What should be done to make it easier for people in crisis to identify, access and understand the service system?

Common themes:

- Provide a simplified flow chart
- Better advertising for the help that is available
- Have one centralised referral service

Best answers

“Have one body/organisation to go to who will co-ordinate all aspects of DV.”

“Services such as refuges/crisis counselling, helpline, yellow cards from the police are crucial. My belief is that if there was more community wide education about violence- power and control then more people would be aware of the danger and there would be less stigma in reporting it.

I also believe that the police in particular play a fundamental role in whether victims will report or access further support services.”

What should be done to ensure those affected by DFV are supported to recover from immediate trauma and long-term effects?

Common themes:

- Ongoing support services
- Ongoing counselling
- Emphasis that it is never the victims fault

Best answers

“Ensure that the client understand that there WILL Be long term effects and therefore counselling is strongly recommended. As often victims think they will be ok once out of the crisis situation and do not recognise that they may require ongoing support.”

“My belief is that long term counselling is required. My role as a Child Protection Counsellor in NSW is one service (among many others) that provides long term therapy to women, men and children. I believe that victims need a safe place to live and they need stability, before they can start to address the trauma. Programs like 'Staying Home Leaving Violence' assist with that, then engaging in therapy both individually and at times in groups can be helpful.”

Thinking about perpetrator accountability - What should be done to hold perpetrators accountable for their actions and help them change their behaviour?

Common themes:

- Counselling, education and rehab programs
- Use the legal system, ADVOs and convictions
- Stronger/harsher penalties
- Change conversation from why women stay to why men perpetrate
- Hold people in the public eye accountable if they are found guilty of offences

Best answers

“In my personal experience jail did nothing, AVOs are a waste of time and counselling for the perpetrators does not work. They have to want to make the change not be forced into the situation where they are told to change”

“Increase community awareness, not accept it as a 'private' matter. DV has been an acceptable thing in the community for a long time. Male superiority - female is to blame.

This perception is changing with more media and news coverage but it will take time.

Males who are inadequate will dominate a female to make themselves feel better. Bravado will support them.”

“Education, get them to then pass this on to younger men.”

“We should be asking why do perpetrators engage in this unlawful behaviour and why are they not stopping instead of continually asking why do the victims stay.”

Have you ever accessed DV services?

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If you answered yes to the previous question –What was the nature of the service?

- Emergency accommodation
- Police
- Centrelink – crisis payment
- Solicitors
- DV helpline
- Social Worker

Was the service useful and did it provide you with the assistance you needed? If not, why not?

- Majority said yes useful
- No accommodation available – frequent issue

What did you find easy/helpful about accessing and using this service?

On behalf of clients “It was easy to ring the DV Helpline and speak with someone relatively quickly - however, their ability to actually assist was very limited.”

What did you find challenging about accessing and using this service?

- Facing perpetrator at court
- Finding courage to call
- Needing to ring around

What would have helped you access these services more effectively/what would have made them more useful?

- Central call centre
- Dedicated DV police worker with training

- “More public discussion about issue would have meant I felt less isolated.”

Questions for Service Providers

Have you ever referred someone to an additional service because you suspected they were at risk of experiencing or perpetrating DFV?

Yes – 13 no – 13

If yes, how did you find/access this service?

- Internally through health, talking to colleagues
- **Family referral service**
- Online
- Reference to absence of pathfinders
- DV line only mentioned once
- “I know many of the services in my local community as it is a small rural community. I know most service providers by name and what their services do.”

What did you find easy about this process?

- Nature of the person approach
- There are lots of services available but its difficult to get in sometimes
- One phonecall

What did you find challenging about this process?

- Issues around rural and remote towns – services in another location to the families
- Long wait lists
- Phone service doesn’t always answer because of staff pressures and don’t always return calls

What features of the current DFV service system do you think work well, and why?

Best answers

“Staying Home Leaving Violence program works well in my experience because women and children are supported to remain in the comfort of their own homes.

- Child Protection Counselling Service- works well in that I work closely with DOCS to support

children but also schools and other service providers to address the needs of all involved from victims to perpetrators.

- Our Anti-Violence Committee works well in that it encompasses a variety of community members as well as service providers and white ribbon ambassadors. A variety of events are scheduled throughout the year from Footy competitions to balls and marches to raise awareness about violence and target men who are bystanders or perpetrators in particular”

“DV hotline. The staying home leaving violence program. Perpetrators being gaoled. Should be punished asap/ deterred from reoffending. White ribbon program.”

“1) DV Helpline - resource that is available 24/7

2) Domestic Violence Liaison Officers in police stations - education for both victims and police

3) Women's Domestic Violence Court Advocacy Service - supporting women through the stress and worry of going to court.

4) Safe Beds for Pets - assist when women feel that they can't leave because they worry regarding the safety of their pets”

“Media to raise the awareness. Excellent ABC documentary by Sarah Ferguson recently - an intelligent, well respected journalist without the element of emotional and drama.

Not on commercial TV however - is there anything on commercial TV that addresses it?”

What features of the current DFV service system do you think could be improved and, why?

- AVO process
- Rural and regional access issues to services/availability in those areas
- More education/awareness campaigns
- More emergency accommodation
- More funding more resourcing

“- Our women's refuge changed ownership a few years ago and this has been a huge problem as it is no longer open 24 hours and run by an organisation that has little experience with domestic violence.

- There are pretty much no programs for men in my community and certainly no effective, long term therapy options for men and boys who are violent.

- Many support services only do short term work which is not overly effective in family's who are experiencing DFV. Greater funding is needed to ensure holistic, long term services.”

What kind of measures could be taken to support service providers to better identify those at risk, and take early action to help prevent DFV?

- Education/training/availability of resources

“I think the measures are there - it's about linking people to overburdened community services”

“Recognition of the fact that this work sometimes takes a long time to take effect and for clients to feel empowered enough to act to improve their safety. Also clients usually require help in the middle of the night or on weekends when supports like allied health are not open.”

DFV is a whole of community issue, and results will be best achieved with a whole of community response. What could be done to encourage cooperation and coordination between government, business, NGOs and the community to improve responses to DFV?

- Needs to stay on the public agenda
- Access to services
- Mandatory screening in a range of services
- Interagency work

“There is currently a vast difference in the pay that Government and community workers in local NGO's receive. I think cooperation and coordination can only occur when there are more equally paid workers on the ground. Rather than workers having no time to participate in anything other than core business. Bluntly said, I don't believe workers currently have enough time to look after their clients and on top of that participate in events that would enable everyone to work together. That said, it would be ideal if there was more cooperation and coordination between all service providers. However, there are other issues which are only going to be fixed by funding, time and qualified staff.”

“1. Government needs to direct funding to organisations that are already doing the work like Health, that can ensure continuity of service provision.

Funding needs to be ongoing and plentiful

2. Businesses can become involved through adopting White Ribbon education programs- on workplace change, addressing violent/sexist and male privileged behaviours. They can also financially support anti-violence community events through sponsorship and active participation on the day.

3. NGO's run programs also that address DFV, sometimes of a shorter term nature but they can be involved through engaging in Anti-Violence committee's to support community education as well as meet together to discuss shared clients in case review processes to ensure they are supported in a holistic way.

4. Men in the community become White Ribbon Ambassadors and talk to young boys/girls about the importance of being an example. All the community can foster change through addressing patriotism and male dominance in our society by sharing information on social media, other mediums and participating in awareness raising events.”

“NGOs which deal with this issue and the people involved need to be advising the government on their findings as to causes, likely positive responses in caring for people, and ways of dealing with perpetrators. All this effort will be wasted if government continues to educate children in our schools that they can do what they like. Personal responsibility for actions must be reinstated”

Is there anything else you would like to say?

“The effect and success of media campaigns will inevitably be limited as long as women are being turned away from services (accommodation, counselling etc.) that are already at capacity. We need to fund the front line.”

“Domestic violence in rural communities often gets ignored. It is also a lot harder for the victim to leave as the towns are so small. Afterhours access to services needs to be a priority because the old saying "strike while the iron is hot" applies. Weekends and afterhours are the times when crisis hits!”

“In some social cultures *not necessarily ethnic cultures, it is still the norm/ acceptable eg drug and alcohol clients. We need to reach and work on these people and educate them that they deserve better. That it is not acceptable.”