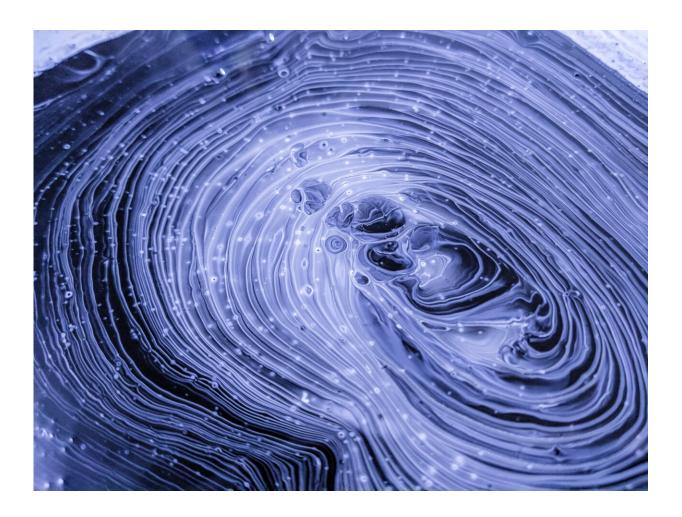


How Australian services can better respond to domestic, family and sexual violence

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New research reports launched today from Australia's National Research



Organisation for Women's Safety (ANROWS) capture the perspectives of people with lived experience and expertise on responses to domestic, family and sexual violence in Australia. The reports have been released as part of the UN's 16 Days of Activism Against Gender-based Violence campaign.

The aim of the research is to recommend service and system improvements to better respond to victims and survivors, including children and young people, and perpetrators of domestic, family and <u>sexual violence</u>.

Lead author of "Voices from the frontline," Dr. Patricia Cullen from the School of Population Health at UNSW Medicine & Health, says its focus is to provide insight into the workforce's perspectives of the effectiveness and appropriateness of existing services and responses. Dr. Cullen analyzed data collected from 95 participants in the qualitative survey.

"Our participants are working on the frontline responding to domestic, family and sexual violence in Australia. For this study, they wrote detailed long-form answers about their experiences, what they see that's working well, what they see that's not working, where the gaps in responses are. Also, they identified responses that are promising, but require more investment to really be effective," she says.

The report demonstrates the depth of their knowledge and expertise and their practice wisdom, but it also reveals a lot of the challenges they're working under—particularly constraints around resourcing and funding, Dr. Cullen says.

"The focus within the system is on crisis interventions and immediate safety, all of which are important, but there's a gap in the response in terms of supporting people over the longer term.



"A lot of the interventions are targeted at situations where safety is an issue or there's risk of immediate physical harm, but there's less resourcing and capability in services to respond over the long term—and to understand what people need over the long term, such as affordable housing and therapeutic responses focused on healing."

Dr. Cullen highlights the report recommendation to break intergenerational cycles of violence and trauma by better supporting children and <u>young people</u>.

"There's a real lack of services and responses that are specific for children and that view children as victims and survivors in their own right.

"Many of the respondents talked about how important it is not only to have whole-of-family approaches, but also to have child-centered responses and services that bring a child focus lens—to consider not only the needs of children, but the rights of children as well," she says.

There are a lot of barriers that victims and survivors face in accessing services and interventions, which are amplified for people who face additional burdens of discrimination or stigma, and for those who live in regional and remote communities, according to Dr. Cullen.

"Many of the interventions we have aren't culturally safe for Aboriginal and Torres Strait Islander people, or for culturally and linguistically diverse communities. And there are a lot of barriers for LGBTQI+ communities and people with disabilities with services not being adequately funded to be inclusive and accessible," she says.

Victims and survivors and people who use violence

The ANROWS research report "I just felt like I was running around in a



circle": Listening to the voices of victims and perpetrators to transform responses to intimate partner violence reveals that women seeking support for intimate partner and sexual violence feel they are "carrying the burden alone."

Most victims and survivors in the study sought help from their friends and family before accessing professional services. The biggest barrier to seeking help from a service for experiences of violence was shame (63.2%), which was compounded by not always being aware about what service could help.

Victims and survivors also felt that the service system was underresourced and over-burdened, and this impacted and inhibited their ability to seek help and their opportunities for recovery and healing.

This research report, led by Professor Kelsey Hegarty from the University of Melbourne, is also Australia's first study that explores the help-seeking journeys of people who use intimate partner and sexual violence.

Participants who used violence identified they needed help to release emotions and regain stability, describing their use of violence as a response to a sense of "losing control." Over a third of people who had used intimate partner and sexual violence said that violence was a normal part of their relationship.

"In studying in-depth the experiences of people using intimate partner and sexual violence, and victims and survivors, what really stood out was that both cohorts had the same service support needs: to feel listened to, and to not feel judged," says Professor Hegarty.

By mapping the help-seeking journeys of victims and survivors, the journeys taken by people who use violence, and the barriers to effective



service provision experienced by service sector workers, the study produces a number of important findings to improve the way we respond to violence.

"When we see that nearly two-thirds of women experiencing violence are seeking help first and foremost from family or friends, it's clear we need to work with the community to empower friends and family to know how to respond, and where to get help, if someone discloses experiences of violence," Professor Hegarty says.

In addition to strengthening informal support networks, the recommendations include building trauma and violence-informed systems that include "care navigators" for pathways to accessible and long-term support and advocacy.

"This is landmark research. It is the first and only Australian study to explore in-depth the help-seeking experiences and support needs of people who use violence," says ANROWS CEO Padma Raman.

"This is an invaluable contribution to the evidence required to stop the cycle of <u>violence</u> by focusing on perpetrator interventions. At the same time, it captures and centers the voices of victims and survivors and provides recommendations on how to support these women into recovery and healing."

More information: Voices from the frontline: Qualitative perspectives of the workforce on transforming responses to domestic, family and sexual violence. <u>www.anrows.org.au/publication/ ... and-sexual-violence/</u>

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