



BUILDING FROM STRENGTH

10-Year Industry Plan for Family
Violence Prevention and Response



ABORIGINAL ACKNOWLEDGEMENT

The Victorian Government proudly acknowledges Victorian Aboriginal people as the first peoples and Traditional Owners and custodians of the land and water on which we rely. We acknowledge and respect that Aboriginal communities are steeped in traditions and customs built on an incredibly disciplined social and cultural order. This social and cultural order has sustained up to 50,000 years of existence. We acknowledge the ongoing leadership role of the Aboriginal community in addressing, and preventing family violence and join with our First Peoples to eliminate family violence from all communities.

SUPPORT SERVICES

If you have experienced family violence or sexual assault and require immediate or ongoing assistance, **contact 1800 RESPECT (1800 737 732)** to talk to a counsellor from the National Sexual Assault and Domestic Violence hotline. 1800 RESPECT can also provide support to workers.

For confidential support and information, contact Safe Steps' 24/7 family violence response line on **1800 015 188**. If you are concerned for your safety or that of someone else, please contact the police in your state or territory or call **000** for emergency assistance.



ACHIEVING OUR VISION WILL MEAN...

INDIVIDUALS

AS A VICTIM SURVIVOR

- I am understood as a whole person and there is recognition that I might need support from more than just one specialist service. Workers I interact with are able to see the big picture and help me navigate systems seamlessly so that nothing is forgotten.
- I can access services where workers have the knowledge and experience to help me, and where my needs and the particular needs of my family and community are understood. My culture is understood, and my cultural safety is respected.
- I can trust workers and am confident that they will listen and be empathic.
- I feel confident because everyone is working together on my behalf to keep me and my children safe and support our recovery. I am consulted before action is taken, and my engagement with workers helps me to take back control of my life.
- I am part of a broader community that rejects violence and takes action to reduce the gender inequality at the heart of the issue.



AS A CHILD EXPERIENCING FAMILY VIOLENCE, THIS ALSO MEANS

- I am understood as a victim survivor in my own right, and workers understand my own specific needs as distinct from the needs of my family. I can access services where workers have the right knowledge and skills to help me.
- I feel confident that my voice is heard and acted upon by workers, and that everyone is working together on my behalf to keep me safe.

AS A PERSON WHO CHOOSES TO USE VIOLENCE

- I am consistently delivered the message that my use of family violence is unacceptable and there will be consequences that will be enforced.
- I can access services where workers have the knowledge and skills to support me to stop my violence and abuse and change my behaviour.
- My internal motivation to change my attitudes and behaviours and move towards nonviolence is encouraged.
- I am kept within view of the system, and there are pathways in the system for me to take responsibility for my choice to use violence.

WORKERS

AS A WORKER WITH A ROLE IN PREVENTING OR RESPONDING TO FAMILY VIOLENCE IN SOCIAL SERVICES, HEALTH, JUSTICE AND EDUCATION

- I understand the causes, reinforcing factors and consequences of family violence, and have been supported to build the skills necessary to do my job in relation to family violence and its prevention.
- I understand how my role can support family violence prevention, early identification and response, and I am equipped to identify, assess and manage family violence risk within my role, linked to a network of other services.
- I understand the difference between awareness raising activities and evidence based approaches to prevention of family violence and violence against women and understand that gender is a social determinant to population health outcomes.
- I am trained for my role in an integrated system that works to form a web of accountability around people who choose to use violence, within a range of interventions.
- I am trained in responding to the diverse and intersectional needs of each of the people I am supporting, and I know where to go to access specialist advice.
- I have opportunities to continually learn, which increases my confidence and professional skills.



AS A WORKER IN THE SPECIALIST FAMILY VIOLENCE AND PRIMARY PREVENTION SECTORS, THIS ALSO MEANS

- Every action I take is motivated by women and children's safety and recovery. There are formal advocacy mechanisms that I am equipped to utilise.
- I have highly developed technical skills to deal with the complexity and diversity of work I undertake. These are recognised and utilised, and I am remunerated in accordance with my skills, training and experience.
- The work continues to be challenging and rewarding and I am supported to prioritise my health and wellbeing and to be safe in my work. I am treated with dignity and respect.

SECTORS

ACROSS THE SPECIALIST FAMILY VIOLENCE AND PRIMARY PREVENTION SECTORS

- We are able to attract, recruit and retain skilled workers, where they are needed.
- Our workforce reflects the diversity of the communities we work with, because our organisations are accessible, culturally safe places to work. This means we can deliver programs, services and prevention initiatives that are tailored, specialised and culturally safe and appropriate for individuals and communities.
- Working with those who experience or use family violence and working to prevent violence is a career of choice. The available career pathways and security of employment reflect the complexity and importance of preventing and responding to family violence across sectors and settings.
- We are more flexible and adaptable to meet client needs, as a result of new funding models, a focus on outcomes and data-driven approaches and prevention efforts are planned and lead to increased evidence of what works.
- We play a key leadership role in whole of community efforts to prevent family violence and violence against women.
- We have a culture of collaboration, innovation and learning which extends across organisations and sectors.
- Best practice strategies and tools to support workers are routinely used across the sectors. This is a recognised and accepted part of how the sectors operate.
- We are recognised internationally for our professionalism and expertise.

VISION

In the future, workforces spanning specialist family violence services, primary prevention, community services, health, justice and education work together to respond to the complexity and harms of family violence, and to prevent it from occurring, creating a system that is flexible and dynamic and can respond to evolving economic and social trends.

By 2027, significant reforms are implemented to place victim survivors, including children, workers and the community, at the centre of workforce and sector development. These shifts have been a deliberate, planned effort as part of major family violence and social service reforms.

Everything the system does is informed by safety and accountability in the context of family violence. The system has tilted towards people who choose to use violence.

Addressing the drivers of family violence and working at the population level has also been strengthened through the development of a skilled prevention workforce.

The workforce of the future is equipped to prevent and respond to all forms of family violence and the individuals that experience or use it. At the core is a valued, skilled, diverse, safe, empowered and supported specialist family violence and primary prevention workforce.

Workers across the family violence, prevention, children's services, broader community services, health, justice and education sectors are family violence and gender literate and equipped for their particular role in preventing, identifying and responding to family violence, working with victim survivors including their children to maximise their safety and recovery, and engaging people who choose to use violence towards being accountable.

The system is accountable and works collaboratively towards shared outcomes, including supporting long-term recovery. Its continuous development is built on robust data and evaluation and harnessing technology.





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FOREWORD

There is nothing more important than addressing family violence.

We need to keep victims safe.

We need to hold perpetrators to account.

And we need to keep confronting the reasons for this violence; to stop it before it occurs.

Strengthening the workforces that prevent and respond to family violence is critical.

This Industry Plan sets out our long-term vision for the workforces that intersect with family violence. It outlines our priority actions to put the needs of victim survivors, including children, at the centre of our response.

That begins with a connected service system. We need more workers trained to recognise the signs, assess risk, and help people access specialist support.

Police, teachers, doctors and lawyers all have contact with people experiencing or at risk of family violence, as well as perpetrators. They must be equipped with the knowledge and skills to take action.

Family violence is preventable. By growing Victoria's skilled primary prevention workforce, we can address the underlying drivers of family violence. This is crucial to our goal of stopping violence before it starts.

We also recognise that this kind of work can take its toll. It's why this Plan ensures the health and wellbeing of workers is a priority.

The expertise of the specialist family violence and primary prevention sectors has been fundamental to developing our way forward. We are grateful to the members of the Industry Taskforce and to leaders across social services, health, justice and education who collaborated on this Plan.

We are particularly grateful to the victim survivors who shared their experiences – who told us of the difference that committed, skilled, knowledgeable workers can make.

This 10-year Plan delivers on the recommendation made by the Royal Commission into Family Violence for an Industry Plan. And while change of this scale takes time, our commitment to supporting and developing the workforce is enduring.

The Hon Gavin Jennings MLC
Special Minister of State



LANGUAGE IN THIS PLAN

At its core, family violence is a **deeply gendered issue** rooted in structural inequalities and an imbalance of power between women and men. This recognition underpins our vision and the gendered language used throughout this document. At the centre of all instances of family violence are individual and structural power imbalances. To address these, we need to create a society founded on equality and inclusion.

We refer to people, including children and young people, who have experienced family violence as **victim survivors**. We were guided in this by members of the Victim Survivors' Advisory Council. We recognise that not every person who has experienced or is experiencing family violence identifies with this term. Family violence is only one part of a victim survivor's life and does not define who they are. Our use of the term acknowledges the strength and resilience shown by victim survivors who have experienced or currently live with family violence.

The word **family** has many different meanings. Our use of the word is all-encompassing and acknowledges the variety of relationships and structures that can make up a family unit and the range of ways family violence can be experienced, including through family-like or carer relationships.

Throughout this document, the term **Aboriginal** is used to refer to both Aboriginal and Torres Strait Islander peoples. Use of the terms 'Koori', 'Koorie' and 'Indigenous' are retained in the names of programs and initiatives and, unless noted otherwise, are inclusive of both Aboriginal and Torres Strait Islander peoples.

Awareness of **diversity** within the Victorian population is increasing as people express multiple forms of identity and belonging. Diverse groups frequently contend with intersectional risks when experiencing family violence. **Intersectionality** describes how characteristics such as gender, ethnicity, ability, sexual orientation, gender identity, religion or age, can interact on multiple levels to create overlapping forms of discrimination and power imbalances which can compound the risk of experiencing family violence and/or increase barriers to accessing services. An awareness of intersectionality encourages the active use of inclusive and responsive policies and practices that dignify the differences between individuals. The language of **diverse individuals, groups and communities** is used throughout this Plan to reflect the breadth of experience and diversity across the Victorian community.

We use the term **perpetrator** to describe people who choose to use family violence.

Violence against women, as defined by the United Nations Declaration on the Elimination of Violence against Women (1993), is any act of gender-based violence that causes or could cause physical, sexual or psychological harm or suffering to women, including threats of harm or coercion, in public or in private life. This definition encompasses all forms of violence that women experience (including physical, sexual, emotional, cultural/spiritual, financial, and others) that are gender-based.

Primary prevention aims to prevent violence from ever happening in the first place. Primary prevention works by identifying the deep underlying causes of violence—the social norms, structures and practices that influence individual attitudes and behaviours—and action across the whole population to change these, not just the behaviour of perpetrators. Primary prevention is distinct from early intervention and crisis response activities (also known as secondary and tertiary response) that aim to stop violence from escalating or recurring. Effective primary prevention supports and complements early intervention and crisis response efforts by reducing pressure on these parts of the system.





CHAPTER 1 CONTEXT

THE FAMILY VIOLENCE REFORM AGENDA

The case for change in how we prevent and respond to family violence and violence against women has been well established. Family violence in Victoria has been estimated to have cost \$5.3 billion in 2015-16 alone¹, in addition to the immeasurable emotional, psychological and physical harm it causes.

Victoria's Royal Commission into Family Violence was tasked with finding solutions to prevent family violence, better support victim survivors, and hold perpetrators to account. It was a once-in-a-generation opportunity to examine Victoria's family violence system from the ground up, and the Victorian Government will implement all 227 recommendations.

The Royal Commission's report was only the beginning of Victoria's family violence reform. The Victorian Government responded quickly to the Royal Commission report by allocating \$572 million to family violence in the 2016-17 State Budget, to respond to the most urgent recommendations.

Enduring change is a long term endeavour, and requires sustained commitment, leadership and momentum. The Victorian Government demonstrated this by releasing **Ending Family Violence: Victoria's Plan for Change** in November 2016. Ending Family Violence sets an ambitious vision of a future where Victorians are safe, thriving and living free from family violence.

Ending Family Violence was followed by the **Rolling Action Plan 2017-2020** in May 2017, accompanied by an unprecedented \$1.9



¹ KPMG (2017). The cost of family violence in Victoria, Australia Retrieved from https://www.vic.gov.au/system/user_files/Documents/fv/Cost%20of%20family%20violence%20in%20Victoria.pdf

billion commitment in the 2017-18 State Budget, which supports the Victorian Government's commitment to implement all of the Royal Commission's recommendations, and provides for real, enduring change in how we prevent and respond to family violence.

The Victorian Government has also released two key strategies to prevent family violence and violence against women from happening in the first place, by addressing the underlying drivers of such violence.

Safe and Strong: Victoria's Gender Equality Strategy sets out a framework for building the attitudinal and behavioural change required to reduce violence against women and delivering gender equality. Safe and Strong draws on global evidence of what works in gender equality, and sets out the founding reforms and a new standard for action by the Victorian Government.

Free from Violence: Victoria's strategy to prevent family violence and all forms of violence against women was released in 2017 to guide our efforts to stop family violence and violence against women before it starts. Free from Violence builds on the work of the family violence and primary prevention sectors and has benefited from the leadership of victim survivors, VicHealth, women's health services, Aboriginal communities and services, local government, primary prevention advocates and organisations, and academics. Achieving a Victoria free from violence will require

multiple strategies to address the complex social conditions that drive violence in the first place, delivered in everyday settings and across the spectrum of people's lives, with a momentum that counteracts the size and scale of the problem.

BUILDING FROM STRENGTH: 10-YEAR INDUSTRY PLAN FOR FAMILY VIOLENCE PREVENTION AND RESPONSE

Recommendation 207 of the Royal Commission called for the development of a 10-year industry plan for family violence prevention and response, as a 'central plank in the program of change'² with a focus on workforce transition and enhancement.

The Royal Commission was "*struck by the commitment, knowledge and expertise of hundreds of practitioners in a range of different roles who assist people affected by family violence – police, specialist family violence workers and integrated family service case workers and outreach workers, crisis workers, lawyers, magistrates, court-based support workers, primary prevention practitioners and policy experts. Despite working under enormous pressure, and facing unprecedented demand, these practitioners demonstrated their dedication to those they supported, and to ending family violence*".³

RECOMMENDATION 207

The Victorian Government develop or commission the development of a 10-year industry plan for family violence prevention and response in Victoria, to be delivered by 31 December 2017, with commensurate funding for workforce transition and enhancement to begin from that date. The plan should cover:

- the workforce requirements of all government and non-government agencies and services that have or will have responsibility for preventing or responding to family violence – among them specialist family violence services, perpetrator interventions, police, legal and justice services, and universal and secondary service systems
- remuneration, capability and qualifications, workforce diversity, professional development needs, career development and workforce health.

² State of Victoria, Royal Commission into Family Violence: Report and recommendations, Vol VI, Parl Paper No 132 (2014–16), Pg 200.

³ Ibid, 171.

Careful, considered workforce planning is essential to achieve the outcomes articulated in the Victorian Government's family violence prevention and response strategies. Ending Family Violence noted that '*A strong, highly skilled and well-funded specialist family violence sector will be at the core of our vision and transformation, working closely with other child and family, justice, universal and specialist services*.'⁴

Similarly, Free from Violence highlighted the need for '*skilled people and organisations in order to both meet the existing demand for prevention activity, and expand the reach of current primary prevention activities*.'⁵

The Royal Commission identified the lack of detailed knowledge and systematic collection of workforce data about family violence in Victoria. In response, Victoria's first census of workforces that intersect with family violence was conducted in 2017. More than 11,000 workers across a broad range of workforces responded to the survey and the information they provided informs this Plan.

PARTNERS IN CO-DESIGN OF THIS PLAN

The development of this Plan has been a joint endeavour. It is based on the advice and insights of those who work to prevent and respond to family violence. Their collective wisdom provides a clear roadmap to achieving our vision.

In 2016 an Industry Taskforce was established to guide the Plan's development. Members include expert stakeholders from across family violence and sexual assault services, primary prevention organisations, community services, justice, health and education sectors, as well as representatives from peak bodies, professional associations, and unions. The Industry Taskforce established a number of sub-groups to progress specific areas of consideration for the Plan, and has been instrumental in developing the Plan's short and long term actions.

Other important insights were provided by:

- the Victim Survivors' Advisory Council
- the Family Violence Steering Committee
- the Ministerial Taskforce for the Prevention of Family Violence and other forms of Violence Against Women
- the Indigenous Family Violence Partnership Forum
- the Aboriginal Family Violence Co-Design Forum
- the Diverse Communities and Intersectionality Working Group
- the LGBTI Family Violence Working Group
- the Expert Advisory Committee on Perpetrator Interventions
- Family Violence Regional Integration Coordinators / Principal Strategic Advisors
- the specialist family violence practitioners who participated in a co-design sprint facilitated by Peer Academy
- the TAFE Leaders' Network Forum
- the Department of Education and Training – Victorian Vice-Chancellors' Roundtable.

⁴ Victorian Government (2017). Ending Family Violence: Victoria's Plan for Change. Pg 17. Victorian Government. Retrieved from [https://www.vic.gov.au/system/user_files/Documents/fv/160803.10%2010%20Year%20Plan%20Booklet%20\(Online\).pdf](https://www.vic.gov.au/system/user_files/Documents/fv/160803.10%2010%20Year%20Plan%20Booklet%20(Online).pdf).

⁵ Victorian Government (2017). Free From Violence. Pg 41. Victorian Government. Retrieved from https://www.vic.gov.au/system/user_files/Documents/fv/Free%20from%20violence%20-%20Victoria%27s%20prevention%20strategy.pdf.

SCOPE OF THE INDUSTRY PLAN

A FOCUS ON BOTH PREVENTION AND RESPONSE

The scope of this Plan spans the continuum from prevention to response.

Workers across the community services, education and training, health, and justice sectors come into contact with victim survivors, including children, and with perpetrators of family violence. Many victim survivors seek help from courts and police to address immediate safety needs, while others work closely with specialist family violence services at points of crisis and beyond.

Workforces need to be equipped to recognise the signs of family violence, to assess risk, and support people to access specialist support, albeit with different roles and responsibilities within the system.

Having a system of services in place to respond to family violence and violence against women is matched by the need to prevent the violence from occurring.

Effective primary prevention addresses the deep underlying causes of violence—the social norms, structures and practices that influence individual attitudes and behaviours—and requires a workforce capable and ready to work across the whole population to change these. Primary prevention supports and complements early intervention and crisis response efforts by reducing pressure on these other parts of the system over time.

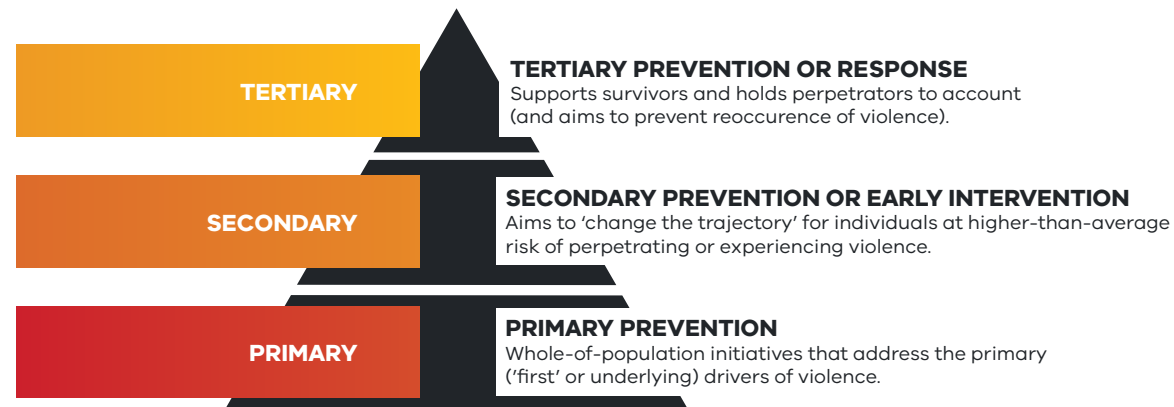


FIGURE 1: Primary prevention involves whole-of-population initiatives. (Our Watch, 2015).

ADDRESSING ALL FORMS OF FAMILY VIOLENCE

Family violence can take many forms. While both men and women can be perpetrators or victim survivors, overwhelmingly the majority of victim survivors are women and children, and the majority of perpetrators are men. The most common and pervasive instances of family violence occur in intimate (current or former) partner relationships, perpetrated by men against women.

“The focus is on the things that can be seen, but it’s the things you can’t see that sabotage me—the non-physical scars, the effects on my mental health, the judgement from others, and the fear that the perpetrator is out there somewhere roaming free.”

(Victim Survivor)
VOICES OF HOPE

For Aboriginal communities, contributing factors also include the history of colonisation, dispossession of land and culture and the wrongful removal of children from their parents. Family violence is not part of Aboriginal culture, but intergenerational grief and trauma has resulted in the over-representation of Aboriginal people as victim survivors.

Family violence can occur within extended families, kinship networks, intergenerational relationships, and through family-like or carer relationships. Intimate partners, family members and non-family carers can perpetrate violence against people with a disability. Young people can use violence or be victims of violence within their family or own intimate partner relationships. Lesbian, gay, bisexual, trans and gender diverse and intersex (LGBTI) people may experience violence in their relationships or from family members. Elder abuse can be perpetrated by adult children of the victim or non-family carers. Women and girls from diverse cultural, linguistic and faith backgrounds experience distinct forms of family violence including migration-related and dowry-related abuse and forced marriage.

Children and young people are also victims of family violence. The resulting trauma can be cumulative and affects their emotional and psychological wellbeing, their learning and development, and their future health and wellbeing.

RECOGNISING ABORIGINAL SELF-DETERMINATION

The Victorian Government is committed to Aboriginal self-determination and supporting an enduring approach to prevent and respond to family violence impacting Aboriginal people that is led by Aboriginal communities and services. Responses to family violence must recognise and be premised on the principle of self-determination, the sovereignty of Aboriginal people and respect for Aboriginal culture. The family violence workforce and service system should recognise and embrace the inherent strength and diversity of Aboriginal people, families and communities across Victoria, and support family, community and cultural connections.

Responses to family violence must also recognise the profound impact of colonisation and the violent dispossession of land, culture and children on Aboriginal people, and the accumulation of trauma across generations. Systemic and structural discrimination continues to displace traditional Aboriginal roles and results in the disproportionate victimisation of Aboriginal peoples, particularly women, in family violence contexts. It has also resulted in an over-representation of Aboriginal peoples in the child protection system and the justice system.

This Plan articulates workforce and industry requirements that will ensure that Aboriginal history and culture is respected and that the specific needs and rights of Aboriginal people, including intersectional needs, are understood and met by the family violence workforce and system of the future.

“It’s so important to know that people get me and where I’ve come from because there are differences in what I value that have shaped me and how I want to feel. I felt accepted, understood, and was treated with respect and dignity. I was able to forge my own path in a way that was suitable for my circumstances.”

(Vision Story)
VOICES OF HOPE

ACCESSIBLE AND INCLUSIVE: AN INTERSECTIONAL APPROACH

This Plan acknowledges the circumstances of Aboriginal people and diverse individuals, cohorts, and communities whose experiences of violence are compounded by the multiple forms of discrimination and disadvantage they face.⁶

Taking an intersectional approach means looking beyond a person's individual identities and focusing on the points of intersection created. These intersections alter the way family violence is experienced by individuals, and in many instances increase risk and barriers to disclosure and service access.

Intersectional risk can be shaped by a range of factors, including structural and individual racism, discrimination, misunderstanding and ignorance (including trauma from migration or pre-migration experiences); institutional or interpersonal prejudice, including faith-based prejudice; homophobia, biphobia, transphobia and intersex phobia; distrust or fear of mainstream services, police and child protection; ineligibility for, or invisibility to, specialist or mainstream services; social isolation or exclusion; economic disadvantage; educational disengagement; prolonged experiences of discrimination and disempowerment; childhood trauma and trauma associated with past experiences of family violence or sexual assault.⁷

Intersectional barriers can be experienced by both women and men, with a disproportionate impact on women.

⁶ Victorian Government (2017). Diversity and Intersectionality Framework. Pg 1-2. Victorian Government. Retrieved from https://www.vic.gov.au/system/user_files/Documents/fv/Diversity%20and%20Intersectionality%20Framework%20-%20Final%20at%2028%20April%202017.PDF.

⁷ Ibid, 1-2.

It includes people who are:

- from varying socio-economic, culturally and linguistically diverse backgrounds, geographic locations and faith communities and of all ages, including children, young people and older people
- living with a disability or living with mental illness
- diverse in their sex and/or sexuality or in their gender expression and identities
- working in the sex industry
- in prison, exiting prison or in contact with forensic institutions.

Perpetrators of violence can exploit marginalisation and disadvantage to perpetuate their abuse, and discrimination and a lack of service capacity to respond appropriately can exacerbate risk and inhibit access to support and safety.

A focus on active inclusion and responsiveness is key to removing obstacles to meet the needs of each individual.

CONNECTIONS WITH OTHER REFORMS

The actions in this Plan are set against a backdrop of system reforms underway in social and community services, justice, health and education. Workforce is a key factor in realising the success of each one. The reforms include:

- *Roadmap for Reform: Strong Families, Safe Children*
- The Community Services Industry Plan
- Aboriginal Family Violence 10-Year Plan: *Strong Culture, Strong Peoples, Strong Families: Towards a safer future for Indigenous families and communities*
- Transition to the National Disability Insurance Scheme
- Victoria's 10-Year Mental Health Plan
- Ice Action Plan
- Housing Affordability strategy

- Access to Justice review and Innovative Justice reforms
- *Health 2040*
- Education State Early Childhood Reform Plan
- *Victoria Police Violence Against Women and Children Strategy*.

There are a number of common challenges and opportunities across these reforms.

As systems shift towards more tailored and person-centred responses, workforces will need to adapt and be more skilled in collaborative and interdisciplinary practice, supported by workplace and sector leadership. Services will need to be more responsive to diverse communities. Further, the move towards increased accountability for outcomes will require the development of new skills and competencies that have not

necessarily been connected to workforce practice in the past.

The need to grow workforces is apparent across a number of sectors. While the specialist family violence and primary prevention sectors are the focus of this Plan, the challenges of workforce supply are shared across the range of reforms—often drawing from the same pool of workers.

There is a growing recognition of the importance of place. While this manifests mainly in service design and delivery, there are implications for workforce supply to ensure that local solutions can actually be delivered.

We will work across government and with relevant sectors to ensure our approaches to these common challenges are consistent and coordinated.

COMMUNITY SERVICES INDUSTRY PLAN

Developed by the Human Services and Health Partnership Implementation Committee (HSHPIC), co-chaired by the Victorian Council of Social Service and the Department of Health and Human Services, the Community Services Industry Plan will identify a sector-led vision for the community services industry in Victoria and the strategic actions required to support industry development from 2018.

The Community Services Industry Plan will set the direction for the community services industry to thrive through the reforms and environmental changes taking place, including a focus on the following priority areas:

- funding to support flexible, person-centred service delivery
- new information sharing provisions and digital technologies
- strengthening outcomes and embedding evidence-based approaches
- good governance, leadership and support for organisational and industry readiness
- emphasising client-centred and place-based systems and services
- best practice regulatory frameworks.

The Community Services Industry Plan will progress development activity across a number of sectors, including the specialist family violence and primary prevention sectors, acknowledging that many of these issues are common across the broader community services industry.

ROADMAP FOR REFORM: STRONG FAMILIES, SAFE CHILDREN

The Roadmap for Reform presents a vision for Victoria as a state with strong families and children who are safe, healthy and well. It will deliver a child and families services system focused on prevention and early intervention, connecting vulnerable families to integrated services, and providing trauma-informed care to children who are no longer able to live with their parents. Achieving this vision will require increased capability and capacity in the workforces engaged with children and families.

The Roadmap for Reform workforce strategy will support a more unified child and family services system to provide earlier, better support to vulnerable children and families, and when needed, deliver more intensive supports to families, and therapeutic care services for children who can't live at home. It will support child and family services to be better equipped in their response to family violence.

Through a whole-of-system workforce strategy, workers will be supported to make better use of evidence-informed practices, work with other services, and collect, interpret and use outcomes data to support better decisions.

A common practice approach will be a key feature of the new system. This will see workers more focussed on building family capability wherever they work along the continuum of support, underpinned by a stronger focus on child safety, wellbeing and development. Building the capacity of the Aboriginal workforce and communities to play a bigger role in supporting Aboriginal children and families will be a key element of the strategy.

ABORIGINAL 10-YEAR FAMILY VIOLENCE PLAN

The Aboriginal 10-Year Family Violence Plan scheduled for release in May 2018, will build on the 2008–2018 plan, Strong Culture, Strong Peoples, Strong Families: Towards a safer future for Indigenous families and communities. In accordance with Aboriginal self-determination, the Indigenous Family Violence Partnership Forum will be the authorising body for the development, design and implementation of the 10-Year Plan. Consultation on the development of the 2018 plan took place in 2017, with engagement and consultation through the Indigenous Family Violence Partnership Forum and the Aboriginal Partnership Forum Working Group.





CHAPTER 2 ACHIEVING OUR VISION

This Plan aims to sustainably shift the way we prevent and respond to family violence and violence against women. At the core is the creation of a system where the specialist family violence and primary prevention sectors work together with the community services, health, justice and education and training sectors, to respond to the complexity and harms of family violence and violence against women, and to prevent it from occurring in the first place.

To build this connected system, we need to ensure the specialist family violence and primary prevention sectors are strong and supported. We also need to ensure that workers in the broader sectors understand their own role and how it contributes to a collective effort. And that these workers are supported to build and maintain the skills and knowledge they need.

Workforces must be supported by organisations and sectors which understand the importance of working in a connected and collaborative way and are committed to the change required to support this approach. While specialist knowledge and expertise are at the core, the specialist sectors are not alone in this.

OUR APPROACH

We are in the early stages of a huge reform program. Reform of this scale takes time, and it's important that we take the time to implement carefully, in a way that makes sense and maximises success. We know where we need to get to over the life of this Plan, but we also know that things will change dramatically by 2027.

This Plan outlines a number of immediate actions, which lay the groundwork for sustained and enduring change. A series of three-year Rolling Action Plans will follow, building on what works, incorporating emerging evidence and responding to the changing family violence, primary prevention and broader systems. Our first Rolling Action Plan will be released in May 2018.



WHAT WE'VE HEARD...

The priority actions outlined in this Plan are based on extensive co-design and engagement. The Victorian Government has listened to specialist family violence and primary prevention agencies; Aboriginal communities and services; other service providers across the health, community services, justice, and education sectors; peak bodies; professional associations; unions; and education and training providers. We've surveyed workers across these sectors in Victoria's first census of workforces that intersect with family violence. We've spoken to organisational leaders and frontline workers. Importantly, we've heard from victim survivors, who told us how the workforce is fundamental to a person's experience of the system, their confidence in reporting family violence, and their safety and recovery.

For the reforms to work, we need to be more effective in empowering and supporting victim survivors, including children and young people, and holding perpetrators to account. This needs to be driven by actions that not only strengthen individual worker and organisational capacity and capability, but fundamentally change the way the system works.

... about a system that works together

- People often do not know where to go for help and feel they are bounced around the service system
- Children and families are not always getting the right care at the right time—many services are overwhelmed and family violence is a major driver of child vulnerability

"I regularly question whether I've made the right decision to leave, especially when the system gives me hurdles to jump through."

(Victim Survivor)
VOICES OF HOPE

- Efforts across the system to hold perpetrators to account and keep them in view are insufficient, leaving victim survivors with the burden of managing risk
- **An effective response to family violence will depend on a cohesive and coordinated approach across diverse disciplines. Currently, system cohesion relies on goodwill and personal relationships between workers.** System-level changes are required to ensure cross-sectoral practice is systemic and enduring
- Victim survivors and perpetrators interact with a diverse range of service systems, each with their own drivers, frameworks and legislation, including police, courts, corrections, family services, housing, mental health, drug and alcohol, child protection, sexual assault and specialist family violence services. Strengthened integration between these systems will consolidate shared effort and resources
- People who work with victim survivors and perpetrators of family violence collect and use a wide variety of information, and effective and appropriate sharing of that information is crucial to keeping victim survivors safe and holding perpetrators to account. Barriers in Victoria have meant information is not shared as effectively as it could be, which can lead to catastrophic consequences
- Existing risk assessment processes have been limited in addressing the diversity of people's experience of family violence and risks to children's wellbeing, and have been constrained by a lack of information about risks posed by perpetrators
- While many people find their involvement with the court system a source of empowerment and a crucial intervention towards a safer future, many others have negative experiences. The court process can be intimidating, confusing and unsafe. Court users may have inadequate access to support services and face long delays and inappropriate outcomes
- **Effective primary prevention needs to be implemented across a range of settings, including sectors that have**

been traditionally less engaged in this work, such as the private sector and the media

- We need to consider stronger links between specialist primary prevention and response sectors, to support mutually reinforcing action to stop family violence and violence against women.

... about prevention and response capability

- **There is currently no consistent or agreed articulation of the skills and knowledge required for effective whole-of-population primary prevention or family violence response**
- Many workforces that intersect with family violence—particularly in mainstream and universal services—have not been trained in family violence prevention or response. Some of these workforces do not see this training as important to their role
- There is a strong correlation between having training on family violence or primary prevention and feeling confident to identify and respond to those experiencing family violence
- Workforces who have not traditionally had a role in preventing or responding to family violence will require support to take up new roles, particularly given they are less likely to hold prior knowledge and skills related to family violence. **Quality and specialist-informed training of new workforces will be essential, but training alone will not be enough to support effective practice**
- Lack of time and cost of training are the biggest barriers to accessing professional development across all tiers. Training needs to be delivered in flexible and tailored ways
- **It is essential that all workforces that intersect with family violence understand the unique barriers Aboriginal people face resulting from the historic and ongoing impacts of dispossession, disempowerment and discrimination**
- Workers need to have the skills and knowledge to provide effective services to all people who experience

family violence, regardless of their background, age, identity or membership of a particular community

- It is important to understand that prevention of family violence and violence against women requires a distinct and specialised skill set. Right now, there are no consistent qualifications or pathways into the primary prevention sector, and training is ad hoc and of variable quality
- Given the scale of workforce development and sector capacity building required to meet the ambition of the reform agenda, the rollout of initiatives needs to be sequenced and coordinated to ensure quality and consistency of outcomes. Workforce development needs to be enduring and systemic, not once-off
- It is important that training in identifying and responding to family violence is delivered by trainers with specialist family violence knowledge and experience. Equally, training in primary prevention must be delivered by trainers with specialist knowledge about primary prevention focused on the gendered drivers and reinforcing factors underpinning family violence. Currently, there is a shortage of these trainers, particularly given the scale of the training associated with the redeveloped Family Violence Risk Assessment and Risk Management Framework and a significant increase in primary prevention activity.

"You're prepared with the right knowledge and wisdom to help me. You're trained in how to respond to family violence and you understand the particular needs of me and my community. You're willing to acknowledge what you don't know and ask for advice."

(Victim Survivor)
VOICES OF HOPE

... about workforce supply

- Issues of low remuneration in the specialist family violence and primary prevention sectors are linked to difficulties attracting suitably qualified staff, poor staff retention and high turnover.⁸ There is inconsistency between the salaries of specialist family violence workers and comparable roles in other community services, and in employment arrangements within the specialist family violence sector
- Challenges in attracting and retaining suitably qualified and experienced staff are greater in rural and regional areas
- Limited career development opportunities for specialist family violence workers is one of the key reasons for the “major problems” employers experience attracting and retaining staff.⁹ Professional development in the sector is “piecemeal and fragmented”.¹⁰ The Royal Commission found that the specialist family violence sector does not have a consistent approach to workforce training, professional development and career progression because this activity is not sufficiently resourced in existing funding models¹¹
- **A diverse specialist family violence workforce is required to reflect the rich diversity of the Victorian community and provide services and spaces that are culturally safe, appropriate, respectful and accessible for all service users. This is also true for the specialist primary prevention sector**
- Prevention of family violence and violence against women is a growing field, and there is a critical shortage of the expertise required. The Victorian Government’s commitment to primary prevention is unprecedented, and with that comes unprecedented demand for skilled practitioners
- **Workforce supply is a common challenge across the community services sector. The scale and pace of change exacerbates these challenges for the specialist family violence and primary prevention sectors.**

... about health and wellbeing

- Family violence practitioners typically face understaffing and high workloads, difficulty accessing services and resources for clients, increasingly complex client need, lack of time and limited access to supervision. This work is by its nature stressful, emotional and fatiguing. **Without appropriate supervisory structures and support, there are high rates of vicarious trauma and ‘burn out’ amongst family violence workers**
- Vicarious trauma is recognised as a widespread issue among specialist family violence services, the courts and police, and the high rates of employee ‘burn out’ as a result can have a significant impact on service delivery
- Aboriginal workers can also experience lateral violence or feel culturally unsafe as a result of their work
- **Vicarious trauma related to family violence can also be an issue for universal services, particularly in sectors where support for staff, including supervision and debriefing, are not part of organisational culture**
- There is a lack of opportunity for specialist family violence workers to use peer networks for support, learning and practice development. In addition, there are few resources

“I am so tired and stressed after this work and I often go home and [it] my vicarious trauma spills into my own home.”

(Family Violence Worker)
CENSUS OF WORKFORCES

⁸ State of Victoria, Royal Commission into Family Violence: Report and recommendations, Vol VI, Parl Paper No 132 (2014–16), Pg 174.

⁹ Ibid, 176.

¹⁰ Ibid, 177.

¹¹ Ibid, 177.

and limited infrastructure available to support and build peer networks and support initiatives. Opportunities can be particularly limited for workers who experience isolation due to a range of factors including geography, cultural background and organisational structure (e.g. being the only specialist family violence worker in an organisation)

- Not all Employee Assistance Program (EAP) providers are equipped with the skills to respond to the particular needs of workers vicariously exposed to family violence. This problem will be exacerbated as non-specialist workers are upskilled to identify and respond to family violence, increasing their risk of vicarious exposure to family violence. Further, not all workers have access to an EAP provider
- Primary prevention practitioners may experience backlash in their public and private lives, as they work to challenge the status quo, particularly in relation to gendered norms and rigid gender stereotypes. As primary prevention work involves sustained effort over time in order to effect change in behaviours, norms and practices, people can experience ‘burn out’ and become disheartened about their work.

OUR IMMEDIATE ACTIONS



Our Immediate Actions	
Action to build a system that works together	<p>Establish 17 Support and Safety Hubs for women, children and young people experiencing family violence as well as families needing support with the care, wellbeing, and development of children and young people.</p> <p>Implement new information sharing legislation to enable more effective sharing of information for the purposes of risk assessment and management.</p> <p>Redevelop the Family Violence Risk Assessment and Risk Management Framework to support a consistent approach across the system so that victim survivors are kept safe through comprehensive assessment processes.</p> <p>Expand Specialist Family Violence Courts so that all family violence matters are heard in the specialist court; perpetrators are held accountable and interventions occur to prevent future violence; and there is better integration with broader family violence services.</p> <p>Improve and invest in family violence response services, including greater availability of flexible support packages, redeveloping refuges and new therapeutic responses for adult and child victim survivors.</p> <p>Build a web of accountability around perpetrators to ensure the system can effectively keep perpetrators in view.</p> <p>Establish a Centre for Workforce Excellence to lead initiatives to strengthen prevention and response capabilities across the social services, health, justice and education sectors, and to support interdisciplinary learning and inter-sectoral practice.</p> <p>Establish a dedicated Prevention Agency to lead the prevention of family violence and violence against women in Victoria.</p>

Our Immediate Actions

Action on prevention and response capability across the system

Release the Responding to Family Violence Capability Framework and the Preventing Family Violence and Violence Against Women Capability Framework, that articulate the knowledge and skills required for the range of workforces that intersect with family violence.

Build workforce and organisational capability in prevention and response across the range of workforces that intersect with family violence by:

- mapping all family violence and prevention related training already underway
- providing grants to translate capability frameworks to sector- and community-specific contexts
- investing in developing and delivering training to meet immediate upskilling needs
- developing new accredited family violence and primary prevention units of competency
- rolling out new diversity and intersectionality training.

Strengthen the specialist family violence workforce through the implementation of minimum entry requirements, while also recognising the significant value of professional experience by:

- developing guidelines on equivalency and assessment frameworks
- investing in transition support for the specialist family violence sector.

Strengthen the primary prevention sector by:

- developing and delivering new training in primary prevention
- embedding prevention specialists in key services to build capacity.

Increase capability and capacity of the training sector to achieve high-quality and flexible workforce development activities at a scale to match the ambition of the reforms by:

- scoping training sector capacity needs
- developing and delivering new specialist training and assessment courses, and establishing communities of practice for family violence and primary prevention trainers.

Our Immediate Actions

Action to strengthen the specialist workforces

Develop attraction and retention strategies for the specialist family violence and primary prevention workforces, with consideration of tailored approaches for regional and rural communities by:

- undertaking long term workforce planning to forecast the size, skill and location requirements of the specialist family violence and primary prevention workforces
- launching an attraction campaign and strategies for the specialist family violence and primary prevention sectors
- scoping a workforce inclusion strategy.

Support enhanced pathways for graduates and students to ensure they are better prepared for entry into the specialist family violence sector by:

- commencing a student placement pilot program
- developing a transition to practice framework
- embedding workforce development leads in community sector organisations.

Focus on the Aboriginal workforce to leverage the existing strength in Aboriginal services and communities by:

- building the Aboriginal community services workforce
- enhancing Aboriginal workforce health and wellbeing
- embedding workforce planning and development resources in Aboriginal organisations
- launching an Aboriginal future workforce grants program
- strengthening the cultural safety of specialist family violence services.

Undertake research on remuneration, pathways and conditions by:

- mapping capability frameworks against relevant industrial arrangements for specialist family violence and primary prevention workers
- looking at the relationship between employment conditions and the costs of employee turnover.

Action on workforce health and wellbeing

Develop a health and wellbeing framework for the specialist sectors, including undertaking research into best-practice clinical supervision models.

Explore more systematic peer support strategies for specialist family violence and primary prevention practitioners, so that workers feel better connected, more supported and can learn from peers.

Research workplace strategies to support the health and wellbeing of the broader workforces that intersect with family violence including a review of Employee Assistance Programs for family violence capability.





CHAPTER 3 UNDERSTANDING THE WORKFORCE

Current evidence demonstrates the need¹² for a holistic approach to family violence and violence against women that ensures primary prevention, early intervention and response efforts are aligned across the continuum.

Primary prevention activity can reinforce response activity and vice versa, each increasing the effectiveness of the other. For example, the provision of services to victim survivors, and an effective justice response, convey the social unacceptability of such violence and so have a whole-of-population preventative impact. Similarly, prevention activity can raise awareness of laws against violence and the services that are available to victim survivors, encouraging them to report incidences, and helping break the 'culture of silence' that can otherwise hamper an effective response.¹³

*Change the Story, a shared framework for the primary prevention of violence against women and their children in Australia*¹⁴ noted that primary prevention complements and impacts upon work undertaken in the response sector. As primary prevention initiatives roll out across diverse settings at a population level, they can and should lead to increased numbers of victim survivors being able to identify, name and seek support for violence in their own lives, and so can increase levels of reporting to family violence specialist and support services.

The specialist family violence and primary prevention sectors are distinct in nature; each has a different focus and set of expertise. This chapter outlines the history and current state of these specialist sectors, and explains the four-tier classification applied to the workforces that intersect with family violence response and prevention.

WORKFORCE TIERS THAT INTERSECT WITH FAMILY VIOLENCE AND PRIMARY PREVENTION

When it comes to accessing services, distinctions between 'specialist' and 'universal' services are irrelevant to victim survivors. While different workforces have different roles in responding to family violence, they need to be equipped to recognise the signs, assess risk and support people to access specialist support.

¹² Fergus, L. (2012). Expert Group Meeting Prevention of violence against women and girls background paper. UN Women, Bangkok, Thailand: p 7-8. Retrieved from http://www.csrddar.org/sites/default/files/150_e.pdf.

¹³ Ibid, 7-8.

¹⁴ Our Watch, Australia's National Research Organisation for Women's Safety (ANROWS) and VicHealth (2015). *Change the story: A shared framework for the primary prevention of violence against women and their children in Australia*. Our Watch, Melbourne, Australia. Retrieved at www.ourwatch.org.au/change-the-story

To distinguish between different roles, this Plan uses the four-tier classification originally developed by the Domestic Violence Resource Centre Victoria. The Royal Commission noted that these tiers provide 'a good starting point for thinking about the competencies each part of the system needs to possess'.¹⁵

TIER 1: SPECIALIST FAMILY VIOLENCE, SEXUAL ASSAULT AND PRIMARY PREVENTION PRACTITIONERS

These specialists spend 90 per cent or more of their time working with victim survivors or perpetrators, or engaged in primary prevention activities. Tier 1 practitioners and teams may form part of larger organisations that provide a range of services, or they may be employed in stand-alone services. What they have in common as practitioners is that their sole or major focus is on family violence (and/or sexual assault), or on primary prevention.

TIER 2: WORKERS IN CORE SUPPORT OR INTERVENTION AGENCIES

Responding to family violence is not the primary focus of these workforces, but they spend a significant proportion of their time responding to victim survivors or perpetrators of violence. This includes Victoria Police, courts, legal agencies and court services, Corrections Victoria and Child Protection, and other agencies including Child FIRST and Integrated Family Services who work with many families who may be experiencing or are at risk of family violence.

TIER 3: WORKERS IN MAINSTREAM SERVICES AND NON-FAMILY VIOLENCE SPECIFIC AGENCIES

While their core work is not family violence, they work in sectors that respond to the impacts of family violence (e.g. housing, alcohol and other drugs, mental health), or in an area where early signs of people experiencing or perpetrating family violence can be noted. This includes the health-care system (GPs, community health, hospitals), therapeutic services (psychiatrists, psychologists, social workers, counsellors, family therapists) and agencies that support financial security, such as Centrelink.

TIER 4: WORKERS IN UNIVERSAL SERVICES AND ORGANISATIONS

Because they interact with children and families in their day-to-day roles (in organisations like schools, childcare centres and faith-based institutions), these workers are likely to have regular and extended contact with victim survivors or perpetrators of violence.

Across the system there are specialist family violence (Tier 1) practitioners embedded within Tier 2 and 3 settings, including child protection, courts and police. Similarly, specialist primary prevention workers (Tier 1) will work in settings across all four tiers.

¹⁵ State of Victoria, Royal Commission into Family Violence: Report and recommendations, Vol VI, Parl Paper No 132 (2014–16), Pg 172.

THE SPECIALIST FAMILY VIOLENCE SECTOR

HISTORY

Women's groups, organisations, and services have been supporting women and children subjected to violence for more than four decades and were the first advocates of the need to respond to violence in the home. Women's services and advocates have been persistent in raising the profile of family violence and violence against women in order to put the issue on the public and political agenda.

Throughout the 1980s, women's refuges and services worked to support women and their children and advocate for a system that provided safety and accountability. However, family violence received little attention from the community and the justice system. Police typically regarded family violence as a private matter, or ignored or minimised the violence. As a response to women's efforts to push family violence onto the agenda, legislative reform came about through the *Crimes (Family Violence) Act 1987* which expanded options to seek protection using intervention orders.

The 2000s witnessed the most significant reform to responses to family violence across government, social services and the justice system. Many family violence and sexual assault policy and legislative changes were introduced by successive Victorian governments, including Victoria's first peak body for family violence services, Domestic Violence Victoria, the formation of the State-wide Steering Committee to Reduce Family Violence, and development of the Family Violence Risk Assessment and Risk Management Framework (commonly known as the Common Risk Assessment Framework, or CRAF).

A number of policies and initiatives were also established between the Victorian Government and Victorian Aboriginal communities, beginning with the Indigenous Family Violence Strategy in 2003. *Strong Culture, Strong Peoples, Strong Families: Towards a safer future for Indigenous families and communities (2008-2018)* was released in 2008, and outlined a long-term commitment to this work.

Several key reforms brought justice agencies into the sector, including the Family Violence Court Division in the Magistrates' Court, Victoria Police's Code of Practice for the Investigation of Family Violence, and the *Family Violence Protection Act 2008*.

CURRENT STATE

Today, the specialist family violence system consists of a range of services, reflecting the complexity of family violence and victim survivors' needs, including victim survivors from diverse communities. It includes state-wide information, support and referrals, refuge and crisis accommodation, family violence support services, family violence counselling, Aboriginal family violence services, adolescent family violence services, men's services and high risk responses, such as Risk Assessment and Management Panels. The specialist system also includes organisations focused on advocacy and capability building.



THE PRIMARY PREVENTION SECTOR

HISTORY

Primary prevention of violence against women has its roots in early intervention and advocacy, much of it led by the family violence sector. This work included advocacy for legislative reform in the areas of family violence and sexual assault, and men's behaviour change programs. Large-scale research commissioned by the Commonwealth Government—including the National Community Attitudes Towards Violence Against Women Survey (1995) and the Women's Safety Survey (1996)—demonstrated the serious extent of violence against women and violence-supportive attitudes in Australia.

VicHealth's 2007 framework, **Preventing violence before it occurs: A framework and background paper to guide the primary prevention of violence against women** made a significant contribution to the evidence base and to policy and practice initiatives to prevent violence against women. The framework articulated the drivers underlying violence against women and helped to coordinate efforts across and between a range of sectors.

A number of sectors including family violence and sexual assault agencies, women's health services, health promotion organisations, community health services, and more recently, local government have led primary prevention work and contributed to an evidence base. Initiatives have included delivery of respectful relationships education within schools, working with the media to improve understanding and reporting, promoting equal relationships between parents through maternal and child health services, building the capacity of community faith leaders to prevent violence against women and establishing a network of primary prevention workers.

Aboriginal communities in Victoria have led significant work in the development of strategies and actions to prevent family violence through strong whole-of-community initiatives that focus on reconciliation and reunification, and bring together women, men, children and Elders to collectively stop violence. This work has included the Indigenous family violence primary prevention framework, released in 2012,

which had the goals of preventing family violence experienced by Aboriginal people; promoting equal and respectful relationships and upholding and sustaining culturally respectful communities and organisations.

In June 2013 Our Watch, the national foundation to prevent violence against women and their children, was established by the Commonwealth and Victorian Governments to drive nation-wide change in the culture, behaviours and attitudes that underpin and create violence against women. Five more State and Territory Governments have subsequently joined the organisation.

The term 'prevention of family violence and violence against women' recognises:

- the legacy and ongoing efforts of the women's sector and organisations in seeking to prevent violence against women, of which family violence and sexual assault are the most common and pervasive forms
- the international and Australian evidence base on the primary prevention of violence against women that provides a solid foundation on which to further develop a skilled and expert primary prevention workforce
- the current evidence base illustrating the benefits across the whole population in addressing the drivers of violence against women, acknowledging that further work is required to understand the interplay of these and additional drivers across all communities. The development of an evidence base to inform future work to address the drivers of all manifestations of family violence will be a critical focus.

CURRENT STATE

Primary prevention has become a distinct area of focus to address violence against women. *Change the Story* noted that successful primary prevention requires a specialist workforce of prevention policy makers and practitioners. They work to build the skills and capacities of people in diverse sectors and settings—from sports clubs, to schools, workplaces, local governments, health services and the media—to embed prevention of family violence and gender equality efforts into their existing work and into the core business of their organisations.¹⁶

The primary prevention sector spans various workforces and is made up of specialist primary prevention practitioners and individuals who contribute to primary prevention as part of their broader role.

Prevention of violence against women (PVAW) practitioners specialise in designing, implementing and monitoring prevention of family violence and violence against women initiatives and policy within and across settings. PVAW practitioners may work in dedicated primary prevention or gender equity agencies or organisations but, for the most part, work within a range of settings including local government, community health, and women's health organisations.

Prevention of violence against women (PVAW) contributors have core duties and responsibilities that do not focus on prevention of family violence and violence against women, but they play a role in primary prevention initiatives and policies within diverse sectors across a range of workforces.

¹⁶ Our Watch, Australia's National Research Organisation for Women's Safety (ANROWS) and VicHealth (2015). *Change the story: A shared framework for the primary prevention of violence against women and their children in Australia*. Our Watch, Melbourne, Australia. Retrieved at www.ourwatch.org.au/change-the-story.



CHAPTER 4 ACTION TO BUILD A SYSTEM THAT WORKS TOGETHER

We know that for victim survivors to be better supported, for perpetrators to be held to account, and to prevent family violence occurring at all, we need a more connected system. A system in which people and processes work together in a truly collaborative way to prevent and respond to family violence, but still retain the specialisation required to deliver high quality services.

This Plan will be implemented against a backdrop of broader reforms that will foster better connections and cohesion between the systems and structures responsible for preventing and responding to family violence. Our transformative reforms of the family violence system will require new ways of working, new skills and knowledge, and new areas of expertise — most notably guided by the Royal Commission and the *Roadmap for Reform*.

The Royal Commission noted the importance of a cohesive and coordinated approach across diverse disciplines, such as community service and justice agencies, and that “strengthened partnerships between those working on the prevention of family violence and those working in other areas of social policy—such as alcohol and drug misuse, mental health and child protection—will consolidate shared effort and resources”.¹⁷

Ending Family Violence sets an expectation of cohesion and coordination across the system through the establishment of Support and Safety Hubs, information sharing legislation, the re-development of the Family Violence Risk Assessment and Management Framework, increased specialist family violence service response capacity, and measures to enhance perpetrator accountability. It also called for the establishment of the Centre for Workforce Excellence and a dedicated Prevention Agency, to ensure that workforces have the skills and capabilities to work within the system as it reforms, and into the future, in a coordinated and multi-disciplinary manner. This chapter outlines these initiatives.

“The system must take in the fullness of people’s reality and draw out the best in them. This is about how the system needs to be for people, not how people need to be for the system.”

(Victim Survivor)
VOICES OF HOPE

¹⁷ State of Victoria, Royal Commission into Family Violence: Report and recommendations, Vol VI, Parl Paper No 132 (2014–16), P 56.

ESTABLISHING SUPPORT AND SAFETY HUBS

Support and Safety Hubs will be access points to coordinated services for women, children and young people experiencing family violence, and families who need support with the care, wellbeing and development of children and young people. The Hubs will also engage with and plan interventions for perpetrators of family violence.

The first Hubs will be established in five launch areas. Preferred locations at the time of publication are Geelong in Barwon, Frankston in Bayside Peninsula, Morwell in Inner Gippsland, Mildura in Mallee and Heidelberg in North-East Melbourne. The Hubs will scale up over time, with operations commencing in early 2018. All 17 Hubs are expected to be operational by 2021.

WHAT THE HUBS WILL DO

The Hubs will bring together existing referral points for victim survivors (women, children and young people) and perpetrators of family violence (including police L17 referral points), and children and families in need of support (Child FIRST). They represent a real shift in our approach, and are a critical part of our whole-of-system reform. A foundational piece of this transformation is a dedicated focus on integrated and coordinated practice.

When fully established, the Hubs will provide:

- an initial and accessible contact point
- crisis response, including practical assistance; immediate referrals to specialist services such as legal advice, accommodation, medical treatment and care; and coordination and advocacy with protective services (such as Victoria Police)
- multi-disciplinary risk assessment, giving women, children and families access to the best information and expertise the first time they make contact with the system
- flexible responses tailored to individual needs, to support the choices and goals of women, children, young people and families. This includes:
 - assessing families' full range of needs and linking people to a wider range of other services from the outset
 - funding targeted supports and services for a broad range of needs rather than people being allocated to a pre-determined service mix
 - helping to connect and coordinate access to services and supports for people – so people don't bounce from one service to another or fall through the cracks.

The Hubs will not replace specialist services providing casework, support and accommodation, however, some workers from these and other services may choose to co-locate or meet with clients at the Hubs. This may include specialist women's family violence services, family services, perpetrator/men's services, legal services, drug and alcohol services, mental health services, or sexual assault services. Men's behaviour change programs are not expected to operate in Hubs and physical and operational measures will be taken to support victim safety. The Hubs will not be the only way to access services.

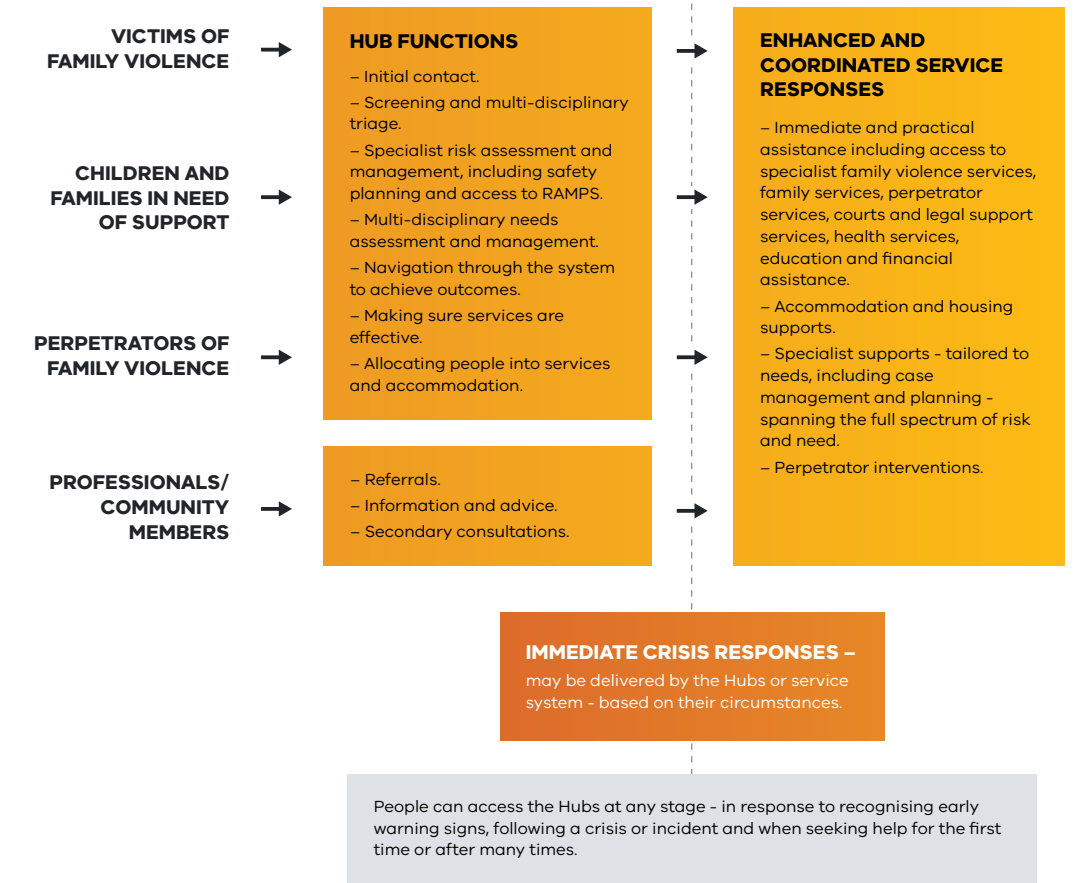


FIGURE 2: What the Hubs will do.

THE HUBS WORKFORCE AND BUILDING INTEGRATED PRACTICE

The core Hubs workforce will include:

- **Hub Centre Manager:** responsible for establishing an integrated Hub team, supporting integrated practice and delivery of Hub functions, local and system partnerships, keeping a line-of-sight on systemic issues that require resolution including complaints management, critical incidents, and Hub performance
- **Hub practitioners:** deliver Hub functions including assessing and responding to the vulnerability, risk and needs of women and children, families, and perpetrators. Hub practitioners will have a core understanding of family violence risk assessment, child safety, wellbeing and vulnerability assessment and perpetrator dangerousness, as well as a comprehensive understanding of their specialisation
- **Integrated practice leader:** promotes and supports integrated practice and embeds practice according to the integrated practice framework and requirements for the Hub team
- **Advanced family violence practitioner:** provides specialist support, guides practice in the Hub and provides secondary consultation for the Hub team where integrated intake, screening and assessment identifies high risk and complex circumstances requiring advanced specialist advice
- **Aboriginal practice leader:** works within the Hub team to embed and promote culturally safe practices and support for Aboriginal and Torres Strait Islander children, women, families and men seeking support through the Hub in partnership with local Aboriginal services and organisations and in alignment with our commitment to self-determination

- **Community-based child protection workers:** provide expert advice regarding the safety and wellbeing of children, and access to information about current or previous assessments and interventions by Child Protection
- **Service system navigator:** establishes and maintains service system interfaces across the local service network, provides advice and support to Hub practitioners on hard to access or navigate service systems, trouble shoots and brokers service outcomes, identifies service gaps and opportunities to fix these at the local and policy level, and works with governance structures to effect change. Service system navigators will not work directly with women, children or men.

Family Safety Victoria will employ the Hub Centre Manager and a small number of locally-based support staff. These staff will not be involved in direct service delivery. Their role is to facilitate operations, partnerships and connection to government and the broader service system.

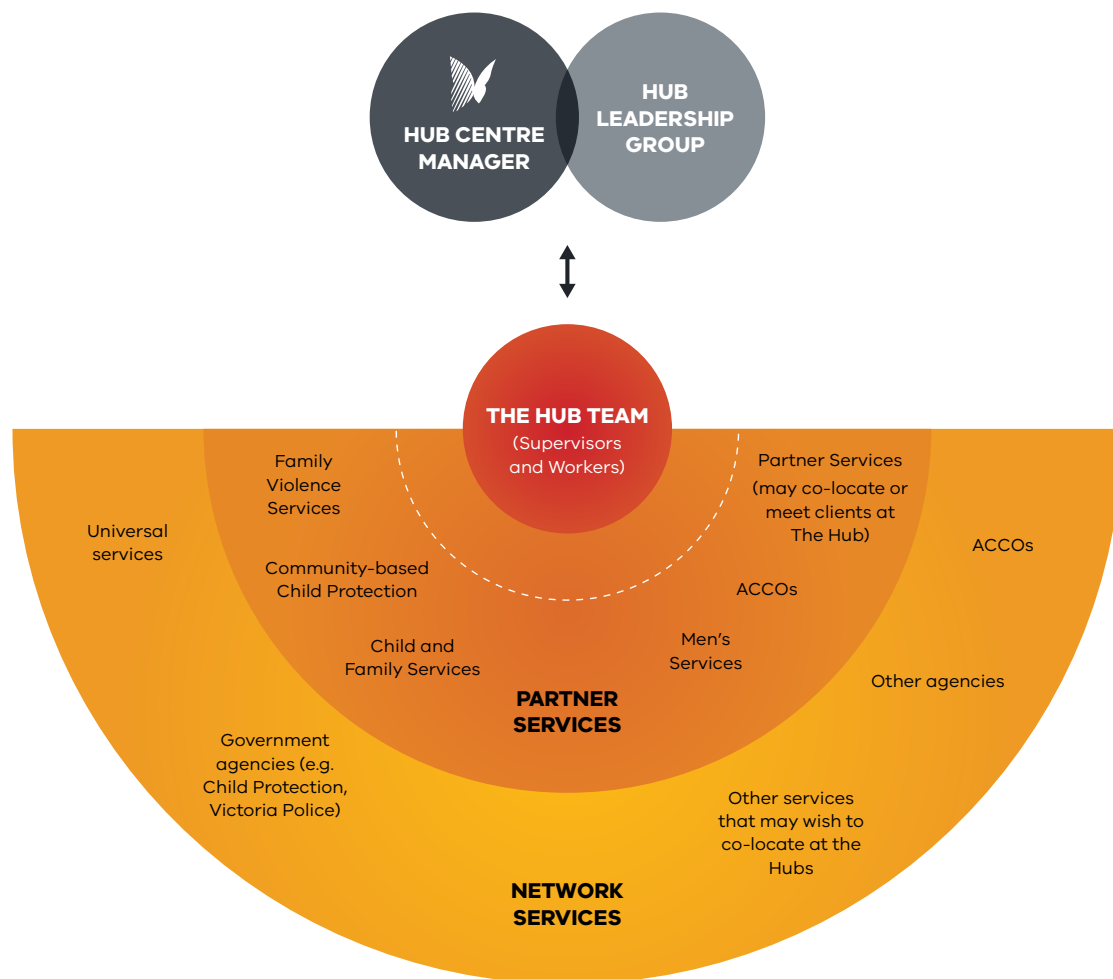


FIGURE 3: The role of the Hubs in the broader system.

INTEGRATED PRACTICE FRAMEWORK

The Integrated Practice Framework aims to establish consistent, strong, integrated practice across the Hub launch sites, focusing on the coordinated delivery of the Hub functions.

The Integrated Practice Framework ensures that practitioners in the Hub teams know what they are required to do, and the intended outcome of their practice.

Integrated practice will be supported by broader system reforms, new tools and systems, which will be tested and refined in partnership with Hub teams and local service networks and communities.

The interim Integrated Practice Framework will be the initial guidance for Hub teams at launch sites from late 2017, and will support delivery of foundational services and functions from early 2018. It will be refined and further developed for state-wide implementation. As Hubs are established and scaled up, practice and implementation lessons from the launch sites will inform the development of the final Integrated Practice Framework.

ESTABLISHING A MULTIDISCIPLINARY TEAM TO DELIVER AN INTEGRATED SERVICE RESPONSE

The establishment of the Support and Safety Hubs brings together different workforces and practices to form a single Hub team. These teams will provide an integrated and coordinated response to women and children experiencing family violence, and families that need support with the wellbeing and development of their children. The Hubs will also engage with and plan interventions for perpetrators.

The Hubs will be delivered through a partnership between government and the community sector, with practitioners from community service agencies working as an integrated team.

The Hubs will bring together the experience and strong expertise of services that work with women, children and men. Leveraging this expertise, the Hubs practitioners will work together to effectively support women, children and families.

Over time, the implementation of the Hubs service model will positively impact on the development of a workforce able to respond to individuals' and families' safety and other needs, across family violence and child vulnerability.

Hubs will assist to build the service system capacity to:

- undertake multi-disciplinary assessment for children and adolescents
- take a whole-of-family approach to assessment and intervention that is both culturally sensitive and gender informed
- re-shape the intervention system to better respond to the safety, wellbeing and protection needs of women, children, young people, perpetrators and families.

INDUCTION, PRACTICE SUPPORT AND PROFESSIONAL DEVELOPMENT

The practitioners who form the multi-disciplinary team within each Hub will be supported through induction, training, practice support and professional development.

Practitioners from across agencies will be trained in the Integrated Practice Framework and its tools and processes. This training ensures that workers have an established understanding of the transformational shift in practice required to deliver integrated services for Victorians accessing the Hubs.

While some practitioners joining the Hub team are multi-disciplinary, many will require additional professional development to ensure that they have capability to respond to children, women, families and perpetrators of family violence. This capability will be established over time through formal learning and on-the-job training facilitated by co-location, peer support, reflective practice, and supervision.

For the first five launch sites, training and support will commence before the Hubs are established. The Hub Leadership Groups in each launch site will be directly involved in the development and implementation of induction, workforce training and development for the Hubs.

INTRODUCING NEW FAMILY VIOLENCE INFORMATION SHARING LEGISLATION

In response to the Royal Commission's findings, a family violence information sharing scheme was created by the *Family Violence Protection Amendment (Information Sharing) Act 2017*. The Act will create an information sharing scheme that authorises a select group of organisations (known as information sharing entities or ISEs) to share information for the purposes of risk assessment and risk management.

Any information relevant to assessing or managing the risk of family violence can be shared—either voluntarily or in response to a request—provided that:

- consent thresholds have been met where consent is required
- sharing the information would not contravene another law
- the information is not excluded information.

Information sharing entities will also be permitted to share information about a perpetrator with a victim survivor, or if the victim survivor is a child, information can also be shared with their non-offending parent, to enable them to manage their safety.

To safeguard privacy, the Act provides penalties for unauthorised information sharing and for complaints to be made to the Office of the Victorian Information Commissioner and the Health Complaints Commissioner for any interference with privacy. However, to ensure that workers will have the confidence to share information that is relevant to assessing and managing family violence risk, those workers who share information in good faith and with reasonable care will be protected from any legal or disciplinary consequences for sharing the information.

The flow chart on the following page illustrates how the information sharing scheme will operate.



FIGURE 4: How the new family violence information sharing legislation will work.

Ministerial Guidelines will assist information sharing entities to understand their legal obligations and to ensure that information is shared in a way that appropriately balances the safety and agency of victim survivors with individuals' rights to privacy. Core training modules and guidance such as visual aids, structured conversation guides, and decision trees will support practitioners to use the scheme and navigate the guidelines.

Regulations will prescribe the entities that are permitted to share information under the scheme and their record-keeping obligations. Implementation will be phased, with the scheme commencing in early 2018 with a core group of specialised organisations (selected on assessed criticality and family violence risk literacy—generally Tier 1 and 2 workforces who spend more time working with victim survivors and perpetrators). Other entities will be brought into the scheme in line with the rollout of the redeveloped Family Violence Risk Assessment and Risk Management Framework (described in the next section). This will ensure information sharing entities receive the appropriate training to participate effectively and minimise the risk of inappropriate information sharing.

The proposed list of information sharing entities in early 2018 includes:

- State funded specialist women’s family violence services (including refuge staff)
- State funded specialist men’s family violence services (including Men’s Behaviour Change Programs)
- State funded sexual assault services
- nominated Child Protection representatives
- Child FIRST
- Victims Support Agency (including contracted Victim Assistance Program providers and Victims of Crime Helpline staff)
- nominated Victoria Police including sworn officers and VPS staff (excluding PSOs and reservists)
- persons or bodies working in Support and Safety Hubs (once established)
- Risk Assessment and Management Panels
- nominated Corrections Victoria staff
- nominated Magistrates’ Court staff
- nominated Children’s Court staff.

The final Ministerial Guidelines, regulations and supporting material will be released in early 2018.

Independent evaluators will gather baseline data, evaluate the rollout of the scheme on an ongoing basis and complete a review of the scheme within two years of commencement. The review will employ a number of research methods, including surveys, focus groups and face-to-face interviews with information sharing entities.

Additional organisations will be prescribed as the redeveloped Family Violence Risk Assessment and Risk Management Framework rolls out. These entities may include housing and homelessness workers, out-of-home care workers, maternal and child health nurses, and other workforces across all tiers.

REDEVELOPING THE FAMILY VIOLENCE RISK ASSESSMENT AND RISK MANAGEMENT FRAMEWORK

Understanding, identifying and managing risk is fundamental to our response to family violence. The Royal Commission recommended that the Victorian Government review and implement a revised Family Violence Risk Assessment and Risk Management Framework (the Framework), that sets minimum standards, roles and responsibilities for screening, risk assessment, risk management, information sharing and referral throughout Victorian agencies.¹⁸ This work will support the information sharing legislation by ensuring that workforces across all tiers are equipped to understand family violence risk, and to identify information relevant to share.

The Royal Commission recommended that the revised Framework should consider incorporating a rating and/or weighting of risk factors to identify the risk of family violence; evidence-based risk indicators that are specific to children and comprehensive practice guidance. The Framework should also reflect the needs of the diverse range of family violence victim survivors and perpetrators.

The Framework will address the opportunities, gaps and issues identified by the Royal Commission. The redevelopment of the Framework will also address recommendations made in the Coronial Inquest into the Death of Luke Geoffrey Batty and the Monash University review of the Framework in 2016. The 2017-18 State Budget committed funding to support implementation of the redeveloped Framework, including a comprehensive training package, change management initiatives and the development of online risk assessment tools. This will ensure that workers across the tiers understand their roles and responsibilities in assessing and managing risk, and are well trained and supported to do so.

The Framework is closely linked to the Family Violence Capability Frameworks developed as part of this Plan, which articulate the capabilities and skills required to identify, assess and manage risk. The Capability Frameworks are based on the current family violence risk assessment framework. It is intended that the capabilities related to risk within the redeveloped Framework will be incorporated into the Capability Frameworks.

Sector readiness consultation sessions took place in September and October 2017 to inform an assessment of the readiness of different service sectors and workforces to align policies, procedures, practice guidelines and tools to the Framework. Frontline practitioners and management staff were engaged in the consultation sessions and feedback was gathered about current risk assessment and management practices, processes and referral pathways and approaches to workforce training.

Place-based regional consultation sessions brought together a range of services that work together within a geographical area to explore how formal and informal relationships in smaller communities impact on the assessment and management of family violence risk. Consistent themes included:

- many workers feel comfortable identifying family violence, but require assistance in responding to family violence once it is identified
- further collaboration between services is required for effective risk assessment and information sharing
- initial training in using the revised Framework is needed, but will not be enough on its own. Ongoing training opportunities that support embedding the Framework within organisations more broadly need to be considered
- there needs to be a cultural shift within a number of sectors to support a stronger focus on coordinated management of family violence risk, in all its forms

¹⁸ State of Victoria, Royal Commission into Family Violence: Report and recommendations, Summary and recommendations, Parl Paper No 132 (2014–16), P46.

- both information sharing and the Framework redevelopment need to be rolled out together so people are adequately trained in family violence dynamics and risks prior to sharing information
- the Framework needs to be embedded into the everyday practice of practitioners. This will rely on strong and committed leadership
- many workers lack knowledge and confidence to engage with perpetrators of family violence
- in an environment of far-reaching social services reform, change fatigue is an issue for many sectors, which will require supported transition processes.

To better support consistent understanding of specific risks, needs, impacts and management approaches, operational practice resources will also be developed for practitioners working with:

- children, understanding that children experience risks, needs, impacts and harm arising from individual experiences of family violence that affect and are affected by their development and growth
- diverse and vulnerable communities, recognising that diverse community groups may experience many different and distinct forms of family violence (beyond intimate partner violence), as well as co-occurring barriers in accessing services and age and vulnerability factors
- perpetrators, in order to integrate improved perpetrator interventions with a system-wide framework for risk assessment (including tools) and management to create what has been called a 'web of accountability' around men who use family violence. This will ensure that each mechanism supports and reinforces the others to consistently hold perpetrators to account for their behaviour.

When organisations and funded agencies have undertaken implementation and alignment activities they will be prescribed, from July 2018, through regulations and funding arrangements respectively.

Embedding the Framework into legislation aims to strengthen its authorising environment. It is intended to be enabling in nature and provide for greater consistency of family violence risk identification, assessment and management.

Prescribed organisations will undertake training on the redeveloped Framework, and be supported to align their practice through an implementation program. The Framework will not replace different sectors' core practice in risk or needs assessment, or any other operational requirements. The requirement to align will include building the Framework into organisations' policies, procedures, practice guidance and tools, and supporting workers to participate in training as appropriate. Organisations and key sectors will be grouped into phases to receive training and change management support. This training will come together

The redeveloped Framework will deliver a suite of risk assessment tools or indicators that will support workers to understand the level and nature of family violence risk. Tools to be developed include:

- a weighted risk assessment tool, to provide an assessment of the likelihood that family violence will continue or escalate given the circumstances of each particular case
- children's risk indicators reflecting unique risks and impacts of family violence on children
- indicators for diverse and vulnerable communities
- perpetrator dangerousness risk assessment tools or indicators to support workers to better understand the level and nature of risks posed by perpetrators.

The redeveloped Framework will provide operational practice guidance for organisations across the family violence, child and family services, health, community services, justice and education sectors to ensure all workers have the skills to undertake risk assessment and management at the level appropriate to their agency and role. To support this, operational practice guides will set minimum standards and roles and responsibilities for screening, risk assessment, risk management, information sharing and referral, across all levels and presentations of risk.

with information sharing training and will be tailored to different workforces. We will look at flexible modes of delivery to ensure it is accessible to everyone who needs to be trained, regardless of where in Victoria they live. Training will be supplemented by new tools and practice guidance.

Recommendation 3 of the Royal Commission called for the development of a sustained workforce development and training strategy in the new Framework as part of the Industry Plan. This will be released as part of the Rolling Action Plan.

This is complex and far-reaching work, touching all tiers of the workforce. It is important we take the time to understand the impacts of this reform, workforce by workforce, and design a workforce development strategy that takes account of these impacts and ensures workforces have greater levels of support and access to training. The workforce strategy will help to

ensure that risk assessment practices are aligned across agencies and services and promote increased collaboration, sharing of information and understanding of family violence throughout the services sectors. The workforce strategy will also ensure that workers receive greater access to professional support services.

We are currently working with sectors to assess the likely scale of the workforce development required to ensure that workers across all sectors are skilled in identifying, assessing and managing family violence risk.

An implementation and training strategy for the redeveloped Framework that is responsive to the particular needs of workforces and sectors will be developed in early 2018.

We are developing tools and guidance for testing in Support and Safety Hubs from early 2018.



EXPANDING SPECIALIST FAMILY VIOLENCE COURTS

The Royal Commission noted that, for many victims and perpetrators of family violence, 'courts are central to their experience of the family violence system. For individuals and organisations supporting victim survivors and perpetrators, the court may be their principal place of work. While many people find their involvement with the court system a source of empowerment and a crucial intervention towards a safer future, many others have negative experiences. The court process can be intimidating, confusing and unsafe. Court users may have inadequate access to support services and face long delays and inappropriate outcomes'.¹⁹ For these reasons, the Royal Commission recommended the expansion of specialist family violence courts.

The Specialist Family Violence Court has three core components: an integrated service delivery model; a specialised and multi-disciplinary team; and safe and accessible court facilities.

The Specialist Family Violence Court service model features are:

- all family violence matters are heard here
- related matters are heard together where possible
- capping on the number of cases heard in the Specialist Court each day
- resources are triaged based on risk assessment and need
- perpetrators are held accountable and interventions made to prevent future violence
- integration with a wider set of family violence services.

THE SPECIALIST FAMILY VIOLENCE TEAM

The functions fulfilled by the team at each Specialist Family Violence Court range from the exercise of judicial powers through to list management and coordination of resources, the provision of legal advice, risk management, and service referrals. The key in designing the team for Specialist Court is to ensure that all functions are performed to meet the needs of victim survivors and hold perpetrators to account.

Training is the essential enabler for specialisation with the core Specialist Family Violence Court team having additional specialised training appropriate to their role. Consistent family violence training will ensure that victim survivors and affected family members are treated sensitively and respondents engaged with in a consistently non-collusive manner. The team at each Specialist Family Violence Court includes:

- **Family Violence Magistrate:** has specialist skills and experience in family violence, and takes a therapeutic approach to handling the matters that come before them. Is capable of leading an integrated team to deliver legal outcomes, meet victim survivor needs, and hold perpetrators to account
- **Family Violence Registrar and Family Violence Coordinator:** two roles which handle a range of registry-related tasks, with the Registrar taking the lead on overall list and operational management while the Coordinator plays a more focused role in organising the running of each list day, connecting court staff, services and their room requirements.

- **Applicant Practitioners:** provide support at court premises to applicants, by guiding them through their court experience, and by assessing their immediate safety needs, developing safety plans and referring to appropriate programs (including Support and Safety Hubs as they begin operating in the particular court's area)
- **Respondent Practitioners:** provide support at the court premises to respondents. This may involve guiding respondents through their court experience, but will also typically involve conducting assessments and making appropriate referrals to a range of support services (including Support and Safety Hubs as they begin operating in the particular court's area)
- **Police prosecutor / lawyer / court liaison officer:** these representatives from Victoria Police play an active role in court as police prosecutors for criminal matters, and in connecting police resources to the court as court liaison officer
- **Duty lawyer:** provides legal advice for the applicant and respondent. Victorian Legal Aid will typically represent the respondent (including any criminal proceedings) while Community Legal Centres represent the applicant. The roles require knowledge across the multiple jurisdictions involved in family violence matters
- **support from broader team:** Co-located family violence services are an important addition to the core Specialist Family Violence Court team. They do not replace the court-focused role of an applicant practitioner but provide an entry point for longer term support where it is required. Specialist Family Violence Courts and Support and Safety Hubs will work together as both are rolled out, to offer complementary services and link common clients seamlessly.

IMPROVING AND INVESTING IN SPECIALIST FAMILY VIOLENCE RESPONSE

We have significantly increased funding for the specialist family violence sector to respond to critical demand pressures, provide case management and therapeutic responses for women and children, and improved specialist responses to people from diverse communities. We are also supporting victim survivors over the longer term, beyond the immediate crisis response, so they have security, independence and stability in all aspects of their lives.

Key initiatives funded include:

- boosts to improve access to specialist family violence case management and flexible support packages
- establishing and evaluating 26 innovative pilots delivering therapeutic responses to victims of family violence, including models to support children
- re-developing family violence refuges, providing a more individualised and flexible approach responsive to the diverse needs of families, children and young people
- State-wide 24/7 Crisis Service responses, including face-to-face after hours specialist support in recognition that the majority of family violence incidents occur outside of business hours
- expansion of safe at home responses
- establishing two new Aboriginal refuges

This increase in funding presents workforce challenges for the specialist family violence sector. These issues are explored in more detail throughout the Plan.

¹⁹ State of Victoria, Royal Commission into Family Violence: Report and recommendations, Vol III, Parl Paper No 132 (2014–16), Pg 117.

BUILDING A WEB OF ACCOUNTABILITY AROUND PERPETRATORS

The Royal Commission emphasised that government and non-government departments and agencies have a collective responsibility to keep perpetrators within view. This includes specialist family violence services, and the broader system.

The Commission was clear that this should involve more than the ‘joining up’ of services—the development of an integrated approach towards risk assessment, risk management, intake, referral, case management and specialist interventions.

The Centre for Innovative Justice was commissioned by the Victorian Government to conduct preliminary work to identify, ‘map’ and describe various service sub-systems through which perpetrators are currently, or can in the future, be engaged. This report, **Pathways towards accountability: mapping the journeys of perpetrators of family violence**, supports the implementation of Royal Commission Recommendation 85. The research:

- strengthens our understanding of the vital day-to-day roles of specialist perpetrator services through to universal services when interacting with perpetrators, including how services interact with and perceive the responsibilities of one another
- identifies leading practice by agencies
- identifies gaps and opportunities for greater collaboration
- emphasises the importance of all agencies who interact with perpetrators sharing a collective sense of responsibility.

“My work with perpetrators of family violence means that they can take responsibility for their behaviour so that women and children can be safe.”

(Family Violence Worker)
CENSUS OF WORKFORCES

The Centre for Innovative Justice is currently undertaking research on the interconnections between services performing the roles and responsibilities for perpetrator interventions to determine how coordination currently occurs and how it needs to occur in order to reduce the prevalence of family violence. Some emerging themes include:

- perpetrator interventions at any point might represent early interventions in some situations—for example, when the intervention is made with someone who has recently become violent or is at very high risk of doing so—while others will occur with perpetrators who have been violent for many years
- collective responsibility for perpetrator accountability requires mainstream services to work alongside perpetrator intervention services and other specialist services, rather than ‘signing off’ their involvement with the perpetrator after an initial referral is made
- services may need to provide information at the point of referral, stay involved after referral has occurred, collaborate with providers in case reviews, and collaborate in risk assessments and the development of safety and accountability plans.

This work has involved extensive sector consultation. The Centre for Innovative Justice has heard that many non-specialist perpetrator services and agencies are not confident that they have the skills to engage perpetrators, or that they have the remit to do so. The census of workforces found that across all workforce tiers there is a high desire for training in working with perpetrators.

The Expert Advisory Committee on Perpetrator Interventions (the Committee) was established to provide advice to government on effective interventions for perpetrators of family violence. The Committee has already noted that new interventions may require new practitioners with additional skills and knowledge. Once its recommendations have been received, we will work to review the workforce implications, and to build the right workforce supply and capability.

ESTABLISHING THE CENTRE FOR WORKFORCE EXCELLENCE

Ending Family Violence: Victoria’s Plan for Change commits that ‘a new Centre for Workforce Excellence will recognise and embed family violence specialist expertise; support the family violence workforce to grow and over time create the world’s pre-eminent social services workforce’. The Family Violence Rolling Action Plan (2017-2020) describes how the Centre will play a key role in determining the best means of delivering comprehensive workforce development and interdisciplinary learning about family violence across sectors, by leading initiatives designed to boost the capabilities of specialist family violence, primary prevention and other social services workforces; supporting interdisciplinary learning about family violence across the social services, health, education and justice workforces; researching and identifying core skills and capabilities across workforces, promoting best practice and contributing to the development of formal workforce training.

The Centre for Workforce Excellence was established as part of Family Safety Victoria in July 2017. The Centre will operate as a coordinating campus model—working in close partnership with sectors that intersect with family violence, the education and training sector, across Family Safety Victoria and government agencies responsible for broader systems. It will drive implementation of the Industry Plan and will have the following functions:

- **data analytics:** manage and analyse workforce data, identifying systemic workforce issues and capability gaps in relation to family violence prevention and response across a broad range of sectors. This includes a periodic census of workforces that intersect with family violence
- **workforce planning:** provide advice on workforce planning and supply matters for the specialist family violence and primary prevention sectors

- **research and innovation:** foster research partnerships with universities and organisations with specialist experience, and commission research on current and emerging workforce needs, including best practice training delivery, workforce health and wellbeing, and innovative models of integrated practice
- **training and evaluation:** provide a coordinating role in the sequencing and rollout of workforce development initiatives for primary prevention and family violence response. Work with training providers to promote consistency across sectors, and commission and work with training providers to develop courses, training resources, and evaluate programs
- **workforce policy and practice leadership:** leverage from the data analytics and research functions to promote policy and practice relating to family violence and primary prevention—including evaluation and updating capability frameworks of prevention and response, and supporting initiatives to strengthen cross-sectoral practice.

VICTORIA'S FIRST CENSUS OF WORKFORCES THAT INTERSECT WITH FAMILY VIOLENCE

Victoria's first census of workforces that intersect with family violence was conducted in 2017 and informs this Plan.

The census comprised two parts—an employee survey and an employer data request for selected workforces. Areas in scope included role, demographics, remuneration, qualifications and experience, career pathways, supervision, and health and wellbeing.

The census reached a broad range of workforces that intersect with family violence prevention and response. The employee survey was open for six weeks (10 April to 19 May 2017) and received 11,265 responses.

Data from the census has been used in this Plan to provide insights into the experiences and challenges of the workforce, and informs our priority actions. The Rolling Action Plan will build on these findings, so that our implementation pathway is grounded in evidence from those whose work intersects with family violence.

A report containing key findings from the census can be found at www.vic.gov.au/familyviolence and is for use by peak bodies and organisations to inform their own workforce planning. This report includes sector profiles that show the shared and unique experiences of particular workforces.

ESTABLISHING THE PREVENTION AGENCY

Free from Violence highlighted the need to build enduring systems and structures to support long term, self-sustaining primary prevention, and to ensure that these activities are coordinated and monitored. As recommended by the Royal Commission, Victoria's new Prevention Agency will lead the prevention of family violence and violence against women. It will provide a strengthened focus on prevention and will coordinate development of partnerships between the public and private sectors.

The Prevention Agency will:

- coordinate and oversee activities under *Free from Violence*
- monitor and provide advice on the achievement of prevention outcomes
- commission research and innovative programs into prevention methods and activities, including identifying those that have been successful in other countries
- work with Australia's national primary prevention organisation, Our Watch, and other organisations working in the field of prevention to challenge the drivers of violence: attitudes and behaviours at the individual level, and those that lie in our social systems and structures.





CHAPTER 5 ACTION ON PREVENTION AND RESPONSE CAPABILITY ACROSS THE SYSTEM

Preventing and responding to family violence is everyone's business. Workforces, organisations and sectors across all four tiers have an important part to play. Building workforce capability across all tiers of the workforce is fundamental to successful reform. It will ensure that the indicators of violence are recognised earlier, and that victim survivors, including children and young people, are supported appropriately. It will help systems work together to consistently hold perpetrators accountable. It is how we will collectively work to prevent family violence from occurring in the first place. This is why it is an immediate priority for this Plan.

The Royal Commission found that people in these workforces don't necessarily have the skills and knowledge they need to play their part, and there is no consistent approach to developing capability.

The 2017 census of workforces that found that respondents with informal or formal training in family violence prevention or response are largely concentrated in Tiers 1 and 2, which are the workforces which most closely intersect with family violence.

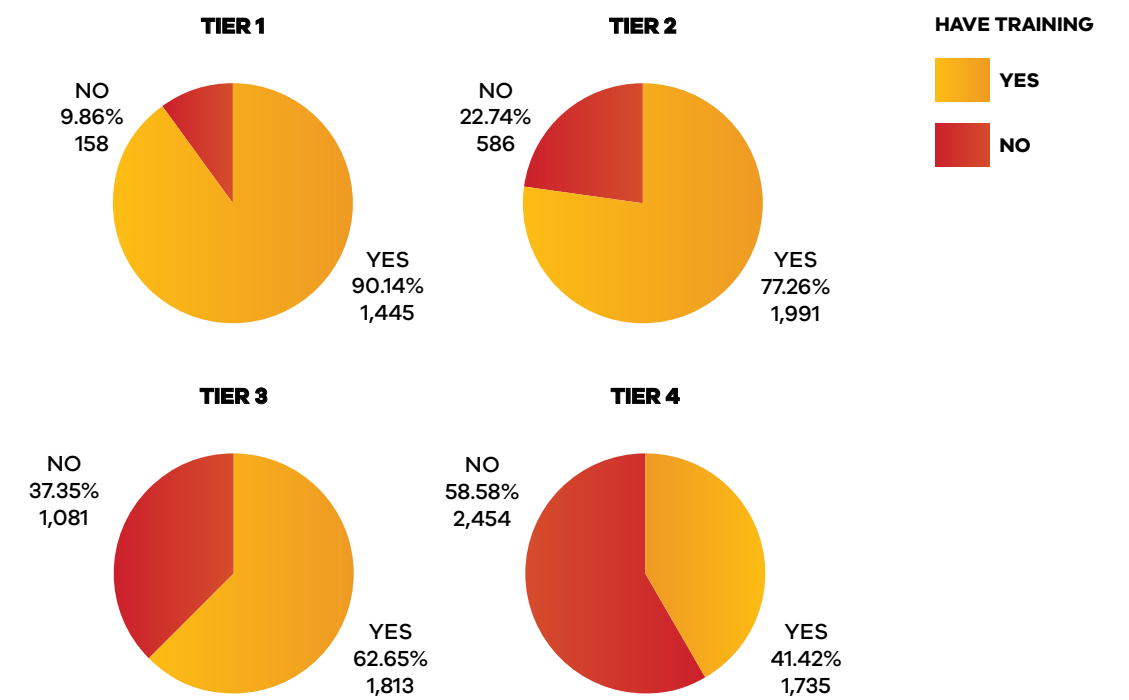


FIGURE 5: Proportion of census respondents with informal or formal training on family violence or primary prevention. Source: KPMG analysis of employee survey data.

Workers in the mainstream and universal workforces of Tiers 3 and 4 are less likely to consider that they require training in family violence or primary prevention to perform their role.

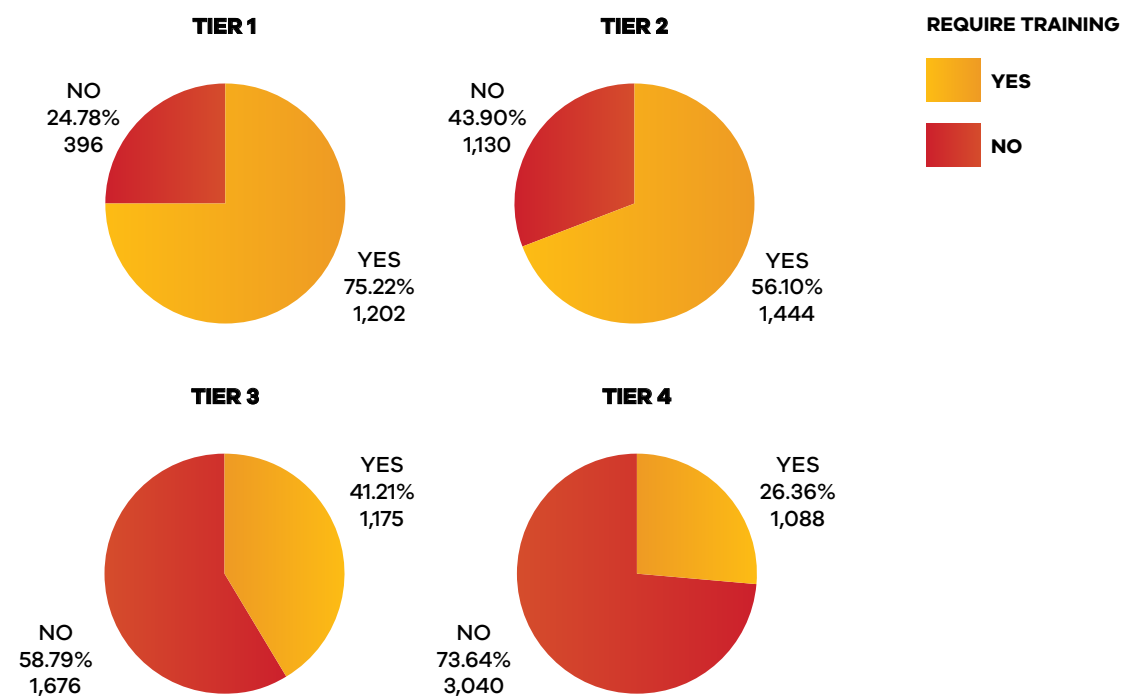


FIGURE 6: Proportion of census respondents who consider that they require family violence or primary prevention training to perform their role. Source: KPMG analysis of employee survey data.

The actions in this chapter aim to ensure that all workforces that intersect with family violence understand their role and have the skills and knowledge they need to effectively undertake it. We want to build on the important work already underway in particular sectors to bring a coordinated and considered approach to building capability. An approach that doesn't just rely on more training, but embeds change at an organisational and sector-wide level and influences the capabilities that people have when they enter the workforce, across all sectors.

CAPABILITY FRAMEWORKS FOR PREVENTION AND RESPONSE

To build capability across workforces we first need a clear articulation of the skills and knowledge required. To achieve this, we have developed Victoria's first capability frameworks for primary prevention and response.

These comprehensive, future-focused frameworks were developed in partnership with sector experts, and in close consultation with the relevant workforces, and are intended as a roadmap for organisational workforce development and training.

The frameworks are designed to guide the development and growth of the specialist family violence and primary prevention workforces and build skills across the other tiers. The development of workforces with the capacity to undertake expanded and coordinated activity across the prevention and response continuum is a key focus of government and multidisciplinary practitioners across the state.

The capability frameworks encompass all tiers of the workforce. They aim to clearly articulate the knowledge and skills needed to engage in primary prevention of family violence, to respond

to victim survivors including children and young people, and to respond to perpetrators of family violence. The family violence response framework is structured around the four workforce tiers, while the prevention framework is structured around PVAW practitioners and PVAW contributors.

These frameworks are the first iteration of living documents. The Centre for Workforce Excellence and the Prevention Agency will work together to ensure research progresses on understanding broader forms of family violence to enable new foundational evidence-based knowledge capabilities to be added to both the response and prevention frameworks.

Consistent with the current evidence base, the frameworks predominantly identify capabilities associated with preventing and responding to intimate partner violence and violence against women. It is acknowledged that if workforces have these capabilities it is likely that they will be equipped to prevent and respond to all forms of family violence as the core knowledge and skills required are similar. As the existing evidence base expands beyond intimate partner violence, there will be opportunities to revise and update the frameworks in line with new evidence.

The two capability frameworks can be downloaded at www.vic.gov.au/familyviolence

USING THE CAPABILITY FRAMEWORKS

The frameworks are intended for use by a wide range of audiences, including government, education and training providers, sector leaders and management and human resources in organisations. The frameworks will be used for a range of purposes such as shaping formal and informal learning and development, role design, promoting cross-sectoral practice, communication in multidisciplinary work, and supporting recruitment.

Each framework will guide and support future workforce development by:

Primary Prevention	Response
<ul style="list-style-type: none"> clearly articulating the knowledge and skills needed to plan, implement and evaluate prevention of family violence and violence against women initiatives promoting better communication and team work in multidisciplinary projects by providing a common language and shared understanding of key concepts and practices used in prevention of family violence and violence against women supporting a better understanding of primary prevention activity supporting identification of opportunities for movement across roles and organisations focusing on primary prevention activity 	<ul style="list-style-type: none"> clearly articulating the knowledge and skills needed to respond to victim survivors of family violence (adults, children and young people) clearly articulating the knowledge and skills needed to intervene with perpetrators of family violence across sectors supporting a better understanding of family violence across sectors promoting better communication and team work in multidisciplinary responses and projects by providing a common language and shared understanding of key concepts and practices supporting identification of opportunities for movement across roles and organisations focusing on response activity

For the specialist primary prevention and family violence sectors the frameworks will:

- contribute to greater recognition and validation of the knowledge and skills of professionals who prevent and respond to family violence and violence against women in a specialist capacity
- support the development of job descriptions
- provide a tool for use in career planning and determining professional development and training needs
- articulate potential career pathways
- make performance appraisal processes more relevant and transparent
- shape training and professional development programs and qualifications to make them relevant for the work carried out in the field.

Intersection with industry-specific codes and practice guidelines

The level of detail in a capability framework is different to that in a practice framework. A practice framework is designed to articulate the depth and nuance required in any given context.

The capability frameworks are not intended to replace industry-specific codes or standards. Rather, the frameworks are designed to add value and encourage a collaborative approach. It is anticipated that specific capabilities outlined in the frameworks will either be embedded within industry-specific codes and standards or will be used alongside them. How the frameworks are used will be determined in partnership with specific sectors, industries, and organisations as part of implementation planning led by the Centre for Workforce Excellence.

RESPONDING TO FAMILY VIOLENCE CAPABILITY FRAMEWORK

The framework covers all four workforce tiers.

The framework sets out:

- foundational knowledge required for all tiers
- five capabilities required to ensure effective responses to those subjected to or perpetrating family violence:
 1. Engaging effectively with those accessing services
 2. Identifying and assessing family violence risk
 3. Managing risk and prioritising safety
 4. Providing effective services
 5. Advocating for legislative, policy and practice reform

These capabilities are described for each workforce tier, with an in-depth focus on the capabilities required for the specialist family violence workforce.

Family violence and sexual assault

The Royal Commission recommended reviewing and strengthening the connections between the specialist family violence and sexual assault sectors, in addition to considering whether the services should be better integrated. The Royal Commission recognised that this would be a long term undertaking.

Sexual assault commonly occurs within the context of family violence and is underpinned by the same drivers of violence against women and often requires a service response by the same organisations or systems. Although not referred to separately, sexual assault in the context of, and as a form of, family violence is included in the scope of this framework.

While therapeutic work is the main focus of specialist sexual assault service provision, its co-occurrence with family violence signals the importance of consistent responses and capabilities across the family violence and sexual assault service systems. Future refinements to the framework will consider the further inclusion capabilities to respond to sexual assault.

A focus on children and young people exposed to family violence

The capability framework recognises that children who are subjected to family violence are victims in their own right. The impacts of family violence on children may include increased risk of other vulnerabilities and harms, including bullying, mental health issues, abuse in their own intimate relationships, risk taking behaviours, homelessness and disengagement with education. Responses to family violence need to consider how family violence has impacted on the child or young person's development, health (physical, emotional and psychological), education and connection to their culture, and what is needed for the child or young person's recovery, including therapeutic responses. As such, a focus on the children (0 – 18 years) of victim survivors is included in the capability framework.

PREVENTING FAMILY VIOLENCE AND VIOLENCE AGAINST WOMEN CAPABILITY FRAMEWORK

The framework covers prevention practitioners and prevention contributors.

The framework sets out:

- foundational knowledge across practitioners and contributors
- four capabilities required to deliver primary prevention of violence against women initiatives:
 1. Designing logical, sequenced and sustainable prevention of violence against women initiatives, based on research, theory, and evidence
 2. Implementation and monitoring of prevention of violence against women initiatives
 3. Documenting and disseminating process, impact and outcomes
 4. Leadership, advocacy and policy reform.

Capabilities are described for all workforces, with an in depth focus on the capabilities required for prevention practitioners.

BUILDING CAPABILITY ACROSS WORKFORCES

Preventing and responding to family violence can only be done effectively if the workforces across all four tiers:

- are well equipped to act to prevent family violence
- can identify the signs that someone is experiencing or using family violence
- know what to do with that information, within the bounds of their role.

The family violence capability frameworks will be key to guiding this work, along with the redeveloped Family Violence Risk Assessment and Risk Management Framework.

Creating ongoing, systemic opportunities for building and maintaining workforce capability will take time and careful consideration. In the meantime, there's an urgent need to make sure that victim survivors don't fall through the cracks, and that perpetrators are identified, held accountable and given opportunities to change their behaviour at the earliest possible point.

For this reason, this Plan has a focus on, and investment in, building capability across all of the workforces that intersect with family violence.

WORK UNDERWAY TO BUILD CAPABILITY

The Royal Commission called for an immediate increase in prevention and response capability and made a number of recommendations relating to workforce development and training. We have invested in these as a priority and the following table describes the work that is now underway across a range of sectors.

WORK UNDERWAY	FOCUS
Family violence case management review	Strengthening the specialist family violence case management response to include flexibility for agencies to respond to crisis and deliver brief interventions; support high risk victims and those with complex needs; attend to the needs of children, and deliver appropriate services to those from diverse backgrounds and with diverse needs. This review is anticipated to conclude in August 2018.
Minimum standards for men's behaviour change programs	Reviewing and updating the minimum standards for men's behaviour change in line with national and international best practice with a focus on program length, strengthening the partner contact function, alignment with the new information sharing legislation and facilitator qualifications.
Training for child protection practitioners	A new family violence practice framework and professional development to build capability in risk assessment, planning and trauma-informed practice. Training will commence in 2018.

WORK UNDERWAY	FOCUS
Centre of Learning in Victoria Police	Delivering family violence training for new recruits and career long family violence training to police officers, providing an increased awareness of the multifaceted nature and drivers of family violence, and improved capability to deal with the complexity and volume of family violence cases. Specialist training will commence in March 2018 and the Centre of Learning will be fully operational by 2019.
Family Violence Principal Practitioners in the Department of Health and Human Services, Department of Justice and Regulation, and the Department of Education and Training	Advising on family violence practice and strengthening knowledge and leadership in key departments and within the services they fund, operate and regulate.
Family Violence Advisor positions in major alcohol and other drug and mental health services across Victoria	Working to ensure that victim survivors have access to service providers with an increased knowledge, understanding and capacity to respond to them appropriately. Building the capacity of these services to work effectively with those perpetrating family violence.
A learning agenda for medical practitioners	Supporting medical practitioners, including general practitioners, psychiatrists and psychologists, to develop the skills and knowledge to identify and respond to family violence. This will link with the Mental Health Workforce Strategy and consider the role of mental health clinicians when working with perpetrators of family violence.
Strengthening Hospital Responses to Family Violence	Building the capacity and capability of health services to deliver a whole-of-hospital response to family violence. Led by the Royal Women's Hospital and Bendigo Health, more than 3000 hospital staff have already received training. Other health services are receiving guidance on how to adapt the model for their own local contexts.
Respectful Relationships	Assisting schools and early childhood services to build cultures that model and promote positive gender attitudes and behaviours. A whole-school approach supports principals, teachers, students and school communities to embody a culture of respect and gender equality in all aspects of school life.

A COORDINATED APPROACH TO WORKFORCE DEVELOPMENT

In line with the key functions articulated in Chapter 4 of this Plan, the Centre for Workforce Excellence will ensure the capability build across workforces is rolled out in a sequenced and coordinated manner and aligns with the prevention and response capability frameworks. A crucial element of this work is ensuring that specialist practice experience is deeply embedded in training and workforce development.

We acknowledge that upskilling such a broad range of workers across a range of sectors is not an easy task. Some workforces are harder to reach and currently may not see themselves as having a role in relation to family violence. And while there are shared challenges across sectors in relation to training, there are also unique sectoral characteristics that require tailored approaches. We also recognise the impost of traditional forms of training on workers and organisations.

Data from the census of workforces illustrates the importance of this training, with results suggesting survey respondents' confidence in identifying and responding to family violence is influenced by training in family violence. The majority of survey respondents who stated they were not confident in identifying family violence had not completed training while those who had completed training overwhelmingly said they were somewhat confident or confident to identify those experiencing family violence. This picture was mirrored when asked whether they were confident in responding to family violence.

We also know that there are a range of topics that workers from across the four tiers said they would like further training in. Most prominent among these were working with perpetrators, working with children exposed to family violence, and working with LGBTI communities and diverse communities.

Employees also identified a number of barriers to training, with lack of time and the cost of study consistently named as the most significant barriers across the tiers. Other barriers identified included lack of access to training, lack of suitable options, and lack of employer support.

The proportion of respondents who said they were confident in managing the needs of children at risk of or experiencing family violence decreases from Tiers 1 through Tier 4, with the lowest levels of confidence concentrated in the Tier 4 universal services.

The census of workforces has also provided us with a deeper understanding of the barriers to responding to family violence, and illustrates some variation to the perceived barriers across the tiers, including that:

- Tier 2 respondents identified their main barrier as a lack of referral options, followed by cultural and language barriers, a lack of training, and lack of knowledge of referral options
- Tier 3 and Tier 4 respondents identified a lack of training as the main barrier, followed by a lack of knowledge about referral options.²⁰

We are undertaking several immediate actions to lay the foundations for a large-scale capability build in family violence prevention and response across all tiers of the workforce.

"My biggest frustration is working with other community organisations or community members who don't think there is an issue with family violence or who are hesitant to accept the impact of family violence in the community. There is not enough community awareness of what family violence is and how it impacts on individuals, families, pets and community."

(Family Violence Worker)
CENSUS OF WORKFORCES

²⁰ KPMG analysis of employee survey data.

Our immediate actions

- mapping the training and professional development activity already underway across government and all four tiers of the workforce, as the first step in developing a more coordinated approach
- funding the development and delivery of training to meet immediate upskilling needs. This may include training across workforces (for example, in working with perpetrators) or training that targets specific workforces with a role to play in the delivery of family violence reforms, such as lawyers, sheriffs, youth justice workers, maternal and child health nurses, or early childhood educators
- providing grants for priority sectors to use and embed the capability frameworks in their own sector-specific and community-specific contexts. This recognises that worker training alone will not be the solution to building capability across the system, and allows for flexible approaches to practice development and change. We will ensure that outcomes from these projects will be disseminated widely
- mapping the capability frameworks to existing national training package units of competency, to ensure that the training system has products which reflect the skills and knowledge we need. Where we need to, we will seek changes to national training package units of competency or packaging rules for courses, or develop new courses or modules, for both primary prevention and response
- working with the tertiary education sector and specialist family violence organisations to design and deliver ongoing training in prevention and response, aligned to the capability frameworks, along with relevant skills in relation to children, trauma-informed practice and intersectionality
- exploring ways to ensure that the funded training market can support delivery of training to upskill workforces in line with the capabilities frameworks
- working with professional bodies, universities and TAFEs to ensure that workers with a unique opportunity for primary prevention, earlier identification, risk assessment and referral begin their careers with capability in preventing and responding to family violence, and are supported to maintain and update their skills and knowledge. This includes teachers, maternal and child health nurses and general practitioners, and those who work with people who are more likely to be experiencing or perpetrating family violence, such as child protection practitioners, police and court staff. This will seed a shift to a more sustainable, enduring approach to workforce capability building.

BUILDING THE CAPACITY OF SPECIALIST PREVENTION AND RESPONSE SERVICES TO RESPOND TO INTERSECTIONAL NEED

Every individual's experience of family violence is different. The system must recognise that individuals can experience unique manifestations of family violence, and may face a range of barriers in seeking the support they need. It's crucial that responses to intersectional need are improved across the system, and that intersectional need is taken into account in the design

of prevention initiatives. This will ensure that all Victorians can access supportive, appropriate services that reduce the impact of family violence on people from diverse backgrounds and with diverse needs. An approach based on understanding and working with an individual's unique needs will ensure that everyone can access appropriate support, including: Aboriginal people, diverse cultural, linguistic and faith communities; people with a disability; people experiencing mental health issues; older people; LGBTI people; women in or exiting prison or forensic institutions; people who work in the sex industry; people living in regional, remote and rural communities; and young people.

The capability frameworks set an expectation that responding to diversity and intersectionality should be a core skill of everyone working in the system.

The following table describes the work that is now underway to build the capacity of the specialist family violence sector to respond to intersectional need:

WORK UNDERWAY	FOCUS
Rainbow Tick Accreditation and HOW2 Training	Building the capacity of specialist family violence services to respond to LGBTI communities – services across the 17 Department of Health and Human Services regions will be supported to achieve full Rainbow Tick accreditation and all other specialist family violence service providers will be supported to undertake 'HOW2 Program' training getting them 'Rainbow Tick' ready
Training on responding to intersectional need	Building workforce capacity and partnerships to equip specialist family violence service providers and providers of universal services to recognise and provide appropriate services to older Victorians, people from culturally and linguistically diverse communities and people with disabilities who experience family violence

Our immediate actions

- developing and rolling out diversity and intersectionality training, to build the capacity of specialist and mainstream workforces to better understand, recognise and respond to the needs of all victim survivors
- investing in interpreters and translators specialising in family violence, to help overcome some of the practical barriers for victim survivors seeking support and ensure that family violence translators and interpreters have access to debriefing and support, to help them remain in the field.

OUR APPROACH TO CAPABILITY IN THE FAMILY VIOLENCE SECTOR

The Royal Commission found there are no mandatory qualifications for employees who provide specialist family violence services to victim survivors. Instead, it is typical for advertised positions to require a "relevant tertiary or vocational qualification". The Royal Commission determined that a requirement for appropriate tertiary qualification to practice would potentially enhance the professional standing of family violence practitioners, reflect the

range and complexity of their work, and lead to improved remuneration. The Royal Commission therefore recommended that the Industry Plan include a staged process for the introduction of mandatory qualifications for specialist family violence practitioners, so that by 31 December 2020 all funded services must require family violence practitioners to hold a social work or equivalent degree.

"Family violence practice is a distinct discipline, not an add on, and should be respected as such."

(Family Violence Worker)
CENSUS OF WORKFORCES

In relation to allowing for "equivalent" qualifications, the Royal Commission recognised that:

- services may wish to have a range of practice skills within their teams
- there is great value in bringing people from different backgrounds and disciplines into organisations
- employers will want to maintain flexibility in the skill base they deploy.

At a time of crisis, a high-quality specialist response—based on a profound understanding of the impacts of family violence—is crucial. Specialist family violence workers need to understand the dynamic and escalating levels of family violence risk and have deep expertise in safety planning. The work is complex and difficult and the personal toll on workers can be high. The incredible level of skill and commitment of specialist family violence workers needs to be recognised and valued.

The introduction of a minimum standard of entry—whether via mandatory minimum qualifications or minimum capabilities—is complex. While professionalisation of the specialist family violence sector is likely to have benefits for those working in it as well as those seeking support from it, access to tertiary education is not uniformly available to everyone. Aboriginal workers, workers from culturally diverse backgrounds, women with caring responsibilities and those in rural and regional areas are likely to face increased barriers to obtaining a degree qualification. Further, a focus on formal tertiary education should not discount the value of professional experience and practice wisdom. Without careful consideration, the introduction of mandatory minimum qualifications could create barriers to entry into the sector, or could alienate workers already in the sector.

We cannot afford to lose wisdom and experience from the sector. In an environment of rapid growth, it is essential that emerging practitioners can learn from experienced professionals. It's also essential that the unique cultural knowledge of Aboriginal workers is recognised and valued. This specific knowledge and experience must exist in the specialist family violence sector.

We have consistently heard that we need to take the time to think about implementation properly, and to guard against unintended

consequences of minimum qualifications, including exacerbating the significant workforce supply issues experienced by the specialist family violence sector. The Royal Commission's recommended timeframe will not allow for this, so we will continue to work with the sector to determine a more appropriate transition period. We'll use this time to work through the complexity in the recommendation. Some of the questions we will look to answer in our Rolling Action Plan include how broadly we define 'equivalence', how the capability frameworks can guide this work, how we maximise consistency across social services, and how we stage transition to minimise the impact on the sectors.

GUIDING PRINCIPLES ADOPTED

A Qualifications sub-group of the Industry Taskforce was established to consider the implementation of this recommendation. The sub-group developed a set of principles to guide implementation. The guiding principles are:

- the workforce should have consistent baseline knowledge, skills and competencies. Those who access services should receive a consistent quality standard of service wherever they are
- the family violence capability framework will be central to any transition plan for the staged introduction of minimum qualifications
- the workforce should be recognised for the high level of skill and knowledge required to perform specialist family violence work. This includes formally recognising the value of workers who are experts by experience, who do not necessarily have a degree but have significant and complex professional experience in the sector
- any introduction of minimum qualifications will need to take into account cohorts of workers that will need particular support, including Aboriginal workers, workers with a disability, CALD workers, workers in rural and regional communities, low income workers and people with lived experience

- the specialist family violence sector should become an ‘industry of choice’ for graduates, with an increasingly professionalised workforce attracting better pay and conditions
- opportunities should be harnessed to create tailored and flexible modes of learning, delivery and credentialing, particularly to ensure an inclusive approach to education
- the recommendation should be implemented in a way that is consistent with the Victorian Government’s commitment to self-determination for Aboriginal people.

are employed in family violence services and men’s behaviour change programs hold a Bachelor degree or higher, with the most common fields of study being social work, psychology and counselling.²¹ The census showed that over 85% of survey respondents in family violence services and Men’s Behaviour Change programs have undertaken informal or formal family violence-related training.²²

There is a need to recognise the skills and knowledge of existing workers, particularly those with extensive practice and cultural experience. We also know there is a need to upskill some workers to ensure the principle of consistent standards of service is met across the specialist sector.

WHAT DOES THIS MEAN FOR THE FUTURE WORKFORCE?

The Rolling Action Plan will articulate the transition date from which the minimum standard will commence. For those entering the sector after this date, the minimum standard will apply.

As a priority, we are working closely with the Australian Association of Social Workers to strengthen social work degrees so that a family violence subject is a required component of the core curriculum in all social work undergraduate degrees and to develop model core curriculum and guidance for providers, which aligns to the Family Violence Capability Framework. This will strengthen the family violence capabilities of future social workers entering the sector.

However, we have learned from the census that pathways into the specialist family violence sector are varied. When asked what their activity was prior to employment at their current organisation, close to a quarter of Tier 1 survey respondents stated they were working in a ‘related sector’ and a further 29 per cent stated they were working in an ‘unrelated’ sector.²³

Therefore we will also examine options to create alternative pathways into the sector that meet the minimum standard.

²¹ KPMG analysis of employee data

²² Ibid

²³ Ibid

We will continue to draw on the valuable expertise of the Qualifications sub-group, as we work to develop a fair and effective approach to the introduction of a minimum standard for entry to the specialist family violence sector.

WHO WILL THE MINIMUM STANDARD APPLY TO?

The minimum standard will eventually apply to all workers employed to provide services directly to victim survivors or perpetrators of family violence in a specialist family violence capacity, within a funded service. This includes workers in specialist family violence services and family violence workers embedded in broader services.

It does not include primary prevention practitioners or those in specialist family violence roles in institutions such as courts or police.

WHAT DOES THIS MEAN FOR THE EXISTING WORKFORCE?

The existing workforce will be exempt from the minimum standard.

This is consistent with the intent of the Royal Commission, which suggested a grandfathering clause that would require only new practitioners employed from a certain date to have the required qualification as an option for implementation.

The existing specialist family violence workforce is highly qualified. More than 70% of respondents to the census who

VALUING CULTURAL AND LIVED EXPERIENCE

We have heard that some members of our community, including Aboriginal people, people from culturally and linguistically diverse communities and people with disability continue to face significant barriers in accessing tertiary education, and that care needs to be taken so the sector can deliver services in a culturally safe, appropriate and sensitive way. We recognise that these voices may be under-represented in our census results.

We’ve also heard that there are particular family violence positions in the system where language skills, cultural knowledge or lived experience (for example, of disability or refugee or migrant experience) are the most important attributes. It is crucial that the Royal Commission’s recommendation on minimum qualifications does not become a barrier to recruiting appropriately to these positions, particularly given that victim survivors from those communities already face additional barriers to accessing supports. This is also consistent with need for a more diverse specialist workforce, as highlighted in Chapter 6.

As we develop our transition strategy, we will continue to work with the Aboriginal Family Violence Co-design Forum and the Diverse Communities and Intersectionality Working Group to develop specific strategies to support those workers through transition and beyond. This work will build on the advice that we have received already, and include consideration of how we ensure that lived experience and cultural knowledge are recognised in a formal and culturally safe, encouraging and affirming way throughout the transition period and into the future.

Our immediate actions

- continuing to work with the Qualifications sub-group to determine an appropriate timeframe for transition and guidelines on equivalency, guided by the Responding to Family Violence Capability Framework
- exploring options to create alternative pathways into the sector that meet the minimum standard, including recognition-of-prior-learning and other competency-based assessment frameworks to recognise on-the-job learning and experience, and the development of a standardised education and training package that is aligned to the Responding to Family Violence Capability Framework, which allows for flexible entry
- investing in transition support and upskilling for organisations and individuals
- working with the Aboriginal Family Violence Co-design Forum and the Diverse Communities and Intersectionality Working Group to develop specific strategies to support workers from diverse communities to enter the sector, including culturally-safe, respectful and strength-based assessments of capabilities, flexible modes of education such as localised and workplace delivery models and shadowing of experienced workers as an effective means of on-the-job learning.

“I feel more comfortable talking to people I share a cultural connection with, who are from my community. They understand my situation and what’s important to me.”

(Victim Survivor)
VOICES OF HOPE

OUR APPROACH TO CAPABILITY IN THE PRIMARY PREVENTION SECTOR

Primary prevention practitioners currently come from a wide range of academic backgrounds including health promotion, public health, gender studies, education, community development, youth work and public policy. The implementation of *Free from Violence* will require workers with the skills and knowledge to implement primary prevention activity across a range of settings, including schools, workplaces, communities and the media, as well as at the local, regional and state-wide levels.

The Royal Commission found there are limited workforce training programs available and a lack of accredited education and training for primary prevention practitioners. An appropriate strategy for ensuring consistent baseline knowledge and capabilities underpinning these diverse skill sets and practice settings is critical. Consideration of mandatory minimum qualifications for the primary prevention workforce will be considered as a longer term priority of the Industry Plan.

We have already invested in building the capability of the workforce in women's health services in the prevention of violence against women, and to strengthen the broader prevention of violence against women sector.

We have continued to invest in the successful Gender and Disability Program, to ensure disability service workers can embed primary prevention into their work and understand how the intersect between gender and

"The current 'demand' for initiatives to prevent violence against women – from sporting clubs, schools, workplaces, local governments and other sectors – greatly exceeds 'supply' of an adequately skilled workforce that is capable of designing, delivering and monitoring effective and safe interventions."

ROYAL COMMISSION

disability results in women with disability being more likely to experience violence.

Growing the capacity of the primary prevention sector will also be an immediate priority of the Industry Plan with the following initiatives.

Our immediate actions

- investing in new specialist primary prevention training to enhance prevention knowledge and skills for new and existing prevention practitioners and contributors, across all levels of practice. This training will be the foundation for the development of a long term training approach for specialist primary prevention practitioners
- piloting a model of embedding primary prevention expertise to work with the LGBTI, seniors and Aboriginal sectors to build primary prevention capacity and capability.

INCREASING THE CAPABILITY AND CAPACITY OF THE TRAINING SECTOR

There is a breadth of work planned and underway to build the capability and skills of the specialist family violence and primary prevention workforces, and to improve the family violence literacy of all four tiers of the workforce, across the community services, health, education and justice sectors. Already, we have seen a significant commitment to meeting the resulting demand for training from Victoria's tertiary education sector, funded training system, and community services organisations.

A training effort of this magnitude requires careful consideration of the staging needs for implementation to ensure that the considerable investment of both government and individuals results in comprehensive and long-lasting change to the way victim survivors are supported and perpetrators are held accountable. The dynamics of the training sector will also need to be considered, including the varying capability and characteristics of providers, as well as the challenges of delivering training in regional and rural areas.

Specialist family violence and primary prevention organisations will be integral to ensuring that education and training are strongly informed by contemporary practice. It is critical that the skills and knowledge imparted to individuals and organisations is reflective of the advances that have been made in family violence and primary prevention practice and takes into account the lived experience of victim survivors. The specialist family violence and primary prevention sectors have driven the development and delivery of training and professional development and will continue to be a critical part of the training landscape into the future.

Victoria's TAFEs are strategic partners in the delivery of skills, and will play a key role in the considerable upskilling needs of the range of workforces that intersect with family violence, particularly given the scale of workforce development required across mainstream and universal services. Their

role will be informed by critical partnerships with specialist family violence organisations, embedding practice and contemporary thinking within the upskilling of workforces and ensuring that trainers and assessors have the right skills and experience to deliver high quality training.

Pre-service qualifications will play a critical role in ensuring that future workforces are skilled and prepared to undertake their role in family violence. This will involve working with Victoria's universities to investigate the courses that require the addition of family violence-specific education, and working with TAFEs to become exemplars of broad-scale training delivery in this specialist field. The tertiary education sector will need to expand to accommodate the growing demand for family violence education and training.

Our immediate actions

- scoping family violence prevention and response capacity and capability in the training sector
- developing dedicated family violence and primary prevention trainer professional development, informed by partnerships with key specialist family violence organisations
- establishing knowledge-sharing opportunities and communities of practice for family violence and primary prevention education and training delivery
- working with curriculum developers, teachers, trainers and assessors, and family violence and primary prevention organisations to ensure consistency and quality of training across all modes of delivery in metropolitan, regional and rural Victoria.



CHAPTER 6 ACTION TO STRENGTHEN THE SPECIALIST WORKFORCES

In responding to the Royal Commission, the Victorian Government made an unprecedented investment of \$1.9 billion to prevent and respond to family violence. This investment will change the way we support victim survivors and hold perpetrators to account. It is our first step towards achieving generational change to the values and attitudes that underpin family violence. But the full value of this investment will not be realised without a strong pipeline of dedicated, skilled and diverse workers for the specialist family violence and primary prevention sectors.

Our first Rolling Action Plan will forecast the size, skill and location requirements of the specialist family violence and primary prevention workforces. It will include specific consideration of the workforce that supports male victims of family violence, as well as specialist family violence and primary prevention workers embedded in other settings, such as those in courts. This analysis will support the development of short, medium and long term approaches to building a pipeline of specialist family violence and primary prevention practitioners, and to retaining these workers in the sectors.

ATTRACTION AND RETENTION STRATEGIES

Attraction and retention of workers is a key plank in meeting the long term demand for primary prevention and response workforces in the context of a rapidly expanding social services industry. This is a shared challenge across the community services sector.

The census of workforces showed that workers in Tier 1 are highly motivated by the

work that they do. The top four reasons for working in the sector are shown in Figure 7.

"I feel like I am making a difference."

(Family Violence Worker)
CENSUS OF WORKFORCES

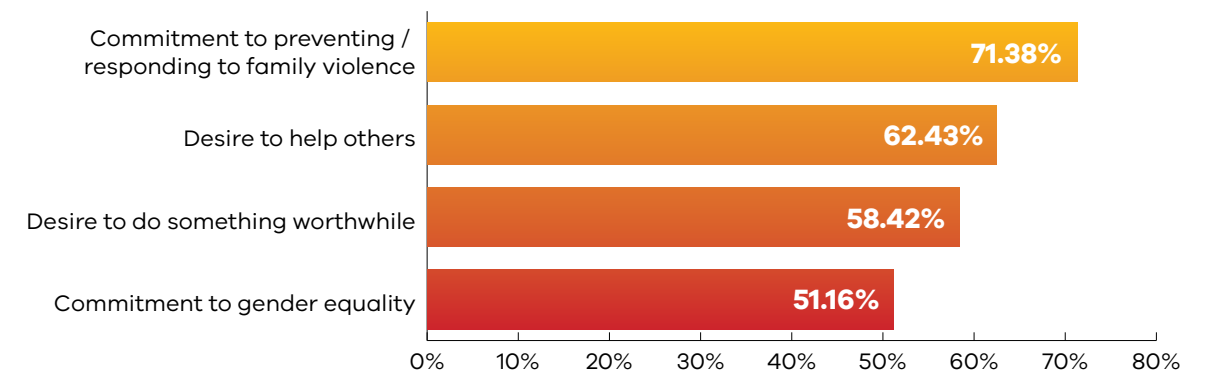


FIGURE 7: Top four reasons given for working in the specialist family violence sectors. Source: KPMG analysis of employee survey data.

We also know there are multiple pathways into the specialist family violence sector. Tier 1 census respondents were asked to indicate what they were doing before they started with their current organisation. One in three were employed in another agency in the sector, around a quarter were working in a related sector, and a similar proportion were either studying or came from a student placement/volunteer position. 29 per cent were working in an unrelated sector (see Figure 8 on the following page).

Attracting workers to the specialist family violence and primary prevention sectors is just one piece of the puzzle. Retaining

committed and skilled workers is also an important aspect of strengthening the specialist workforces. Workforce health and wellbeing issues, and issues related to remuneration and conditions, have significant implications for staff retention and turnover. While attraction and retention are closely linked, they do require specific strategies.

The immediate and short-term actions related to remuneration, conditions and health and wellbeing outlined in this Plan will contribute to staff retention, and lay the foundation for future development of strategies specifically addressing retention.

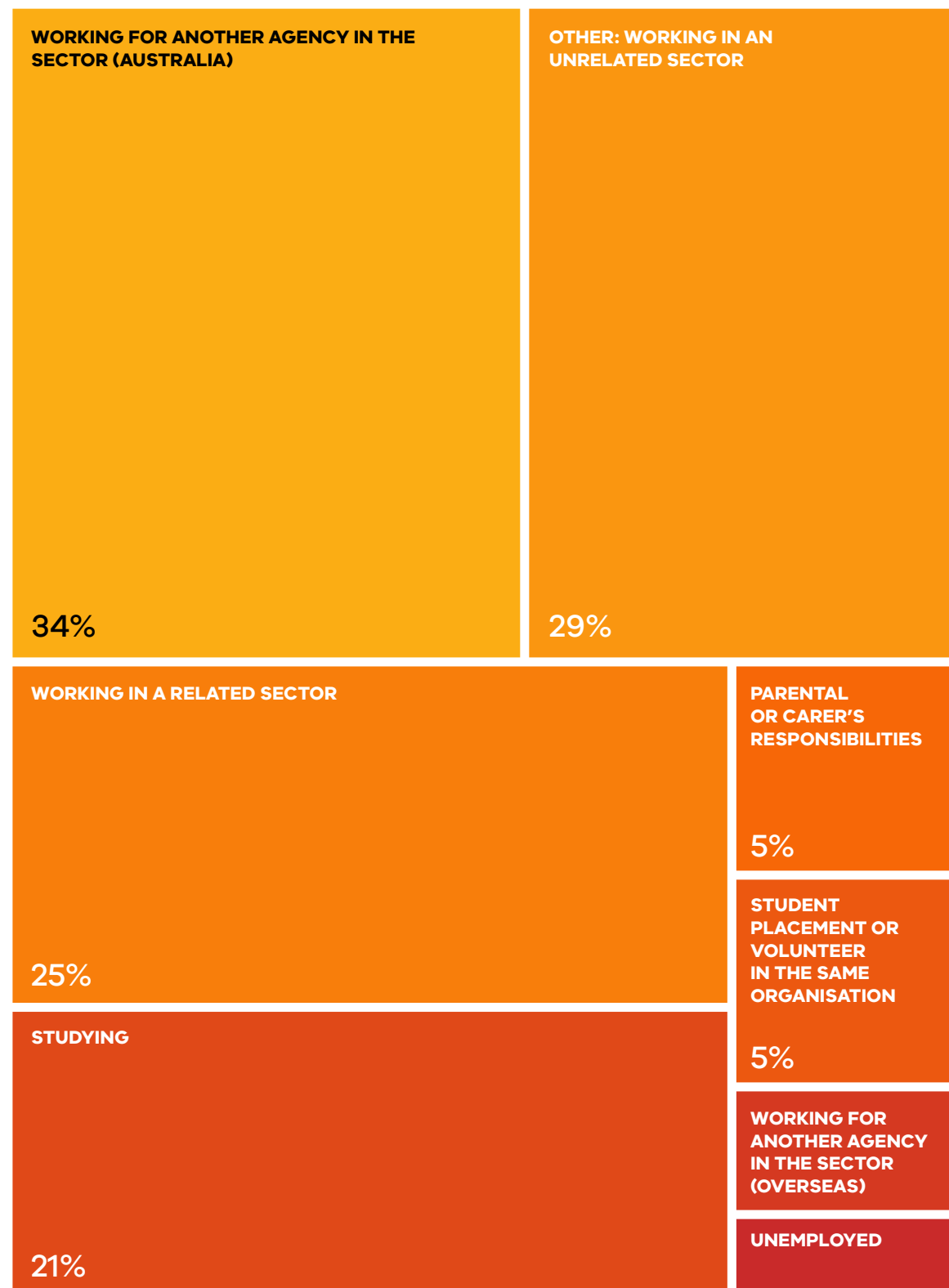


FIGURE 8: Previous work experience prior to commencing in the specialist family violence sectors. Respondents could select more than one response. Source: KPMG analysis of employee survey data.

MORE INCLUSIVE WORKFORCES

We have consistently been told of the challenges in attracting and retaining professionals from diverse communities to the specialist family violence sector and primary prevention workforce.

The Royal Commission explored the experiences and needs of people from diverse backgrounds and communities who experience family violence, and found that victim survivors within these communities face multiple and intersecting barriers to reporting family violence and in finding appropriate help and support. Within the primary prevention content, diversity is particularly important to ensure that prevention programs are relevant and meaningful for diverse communities. The Royal Commission highlighted the importance of primary prevention programs for diverse communities being designed and delivered by members of those communities.

Our vision is that in ten years the family violence response and primary prevention workforces will reflect the diversity of the Victorian community. Organisations and government will have a sophisticated understanding of inclusion strategies that cover the attraction, support and retention of a diverse, intersectional workforce.

EMBEDDING THE VOICES OF VICTIM SURVIVORS

Our response to family violence must be informed by the insights and experiences of victim survivors who have experienced the system. The Royal Commission recognised the importance of victim survivors voices, noting that victim survivors might participate in policy development and system improvement in several contexts. This includes the opportunity to share their stories directly with those who have ongoing responsibility for making decisions, running agencies and delivering services.

Huddle's 2017 Voices of Hope co-design project brought to the fore the voices of victim survivors and what is needed in an effective family violence services system.

To ensure the voices of victim survivors are strong throughout the system, we will work towards creating genuine employment opportunities in specialist family violence and primary prevention organisations. Working closely with the Victim Survivors' Advisory Council, this will be done carefully and thoughtfully.

"Victim survivors can help me navigate the system and advocate for me"

(Victim Survivor)
VOICES OF HOPE

"I can learn from others who've been through family violence because they can relate to my situation. When I hear their stories it helps build solidarity between us and helps me understand that though my situation is unique, it's one of many"

(Victim Survivor)
VOICES OF HOPE

"Others who've been through this help me feel less alone"

(Victim Survivor)
VOICES OF HOPE

Victim survivors working in these fields need a range of professional skills to complement their lived experience. Family violence doesn't discriminate and victim survivors possess a great diversity of skills, knowledge and experience across a range of disciplines, so skills support needs to be provided on a tailored basis, based on an assessment of each individual's needs.

Because of the prevalence of family violence experienced by women, and the feminised nature of the specialist family violence and primary prevention sectors, it is inevitable that women already employed in the sectors have experienced, or are experiencing violence. Indeed, 24% of tier 1 specialists surveyed for the census of workforces stated

their lived experience of family violence as a reason for them undertaking family violence work, ranking as the ninth most common out of fifteen reasons given.²⁴

We respect every victim survivor's right to choose whether to disclose their experience. We recognise that lived experience of violence can be a professional asset in informing practice, regardless of whether it is disclosed or not.

SUPPORTING ENHANCED PATHWAYS INTO THE FAMILY VIOLENCE SECTOR

A significant number of workers in the specialist family violence workforce entered the sector soon after completing university. Responses to the census of workforces showed that close to 25% of Tier 1 employees were studying or undertaking student placement or volunteering activities at their organisation prior to commencing employment.

We need to support family violence services to be able to recruit the workers they need, through supporting organisations to build their capacity for student placements and through transition programs for graduates to support them to be 'work-ready'.

Student placements are an important part of this picture. Student placements contribute to the work-readiness of graduates, providing them with supported opportunities to apply their theoretical knowledge. Done well, student placements also provide opportunities for organisations to engage new staff. Student placements can be resource-intensive for organisations. Recognising this, in consultation with the tertiary education sector, we will develop and implement targeted approaches to support community service agencies to build capacity for student placements.

In an environment of growth, it is important that new workers are supported to quickly upskill when they begin their career. Careful support for transition to work can impact positively on retention, and on the health and wellbeing of the graduate workforce.

CO-DESIGN ACTIVITY: LEVERAGING THE EXPERIENCE OF FAMILY VIOLENCE PRACTITIONERS

Family Safety Victoria, in partnership with Peer Academy, undertook a co-design sprint program in 2017 to rapidly design and prototype ideas for the Industry Plan.

Two 'teams' of specialist family violence practitioners and government representatives were tasked with the question "how might we support new graduates entering the family violence sector"?

The solutions involved graduate programs that provided ready access to resources, peer support, connections with their education institution and a preceptorship model.

The Centre for Workforce Excellence will work with sector partners to explore this idea further.

²⁴ KPMG analysis of employee survey data.

Our immediate actions

- undertaking long-term workforce planning to forecast the size, skill and location requirements for the specialist family violence and primary prevention sectors
- undertaking, in partnership with the sector, a targeted campaign to attract workers to the specialist family violence sector. The campaign will reflect the insights from the census, and build on the staged transition to minimum standards for entry to the sector in our Rolling Action Plan as a way to provide clarity to those considering family violence work as to the training pathway
- working with the Department of Education and Training to leverage existing career promotional channels such as the Victorian Skills Gateway and the Skills and Jobs Centres to promote career opportunities in the specialist family violence sector
- embedding new capability building coordinators in sector organisations to provide dedicated resources to support student placements. These will enable organisations to place students, and will support the use of existing tools and the preparation of partnership agreements between agencies and education providers
- developing a guide to support transition to family violence practice for graduates or those entering the sector, which will address ways for existing workers to embed practice changes based on new learnings
- working closely with members of diverse communities to scope a workforce inclusion strategy, including employment pathways for workers representing diverse intersectional communities, including those with lived experience of family violence; tools and resources for employers to demystify, clarify and simplify inclusion and embedding cultural safety to support organisations in creating diverse and inclusive workforces.

A FOCUS ON THE ABORIGINAL WORKFORCE

Aboriginal people are over-represented in family violence incidents. In 2006–07 there were 19 reported Aboriginal family members affected in family violence incidents for every 1000 of the Aboriginal and Torres Strait Islander population in Victoria, increasing to 43 per 1000 in 2013–14. This compares to an increase from three to six per 1000 for non-Aboriginal Victorians. An Aboriginal person is 7.3 times more likely than a non-Aboriginal person to be an affected family member in a family violence incident.²⁵ The Royal Commission also found that family violence is driving the over-representation of Aboriginal children in child protection.

The Royal Commission cited national studies that indicate that as much as 90% of family violence against Aboriginal and Torres Strait Islander people goes unreported.²⁶ Reasons Aboriginal people may be less likely to report family violence than non-Aboriginal people may include fear about the consequences of disclosure, distrust of government agencies and service providers, historical and cultural factors, and a lack of access to support services. The Royal Commission also heard that the fear of having children taken away is a huge impediment to reporting. For these reasons, many Aboriginal people prefer to access an Aboriginal service, which provides a culturally safe environment.

Of course, not every Aboriginal person will wish to, or be able to, access an Aboriginal organisation. It's important that all organisations, including Support and Safety Hubs, are able to offer a culturally safe service to Aboriginal people.

²⁵ State of Victoria, Royal Commission into Family Violence: Report and recommendations, Vol V, Parl Paper No 132 (2014–16), Pg 11.

²⁶ Ibid 28.

The Royal Commission described cultural safety as meaning that Aboriginal clients, employees and stakeholders are treated with dignity and respect, and that their culture is valued and understood by mainstream organisations. It includes cultural safety for service users, and for Aboriginal employees and in relationships with Aboriginal organisations. This requires the systematic prioritising of cultural values in policy, processes and the way programs are delivered as well as how staff interact with Aboriginal clients. It requires a concerted commitment by organisations in the areas of governance, policy, workforce, service delivery, practice and relationships with community. To do this well, the Commission found that strong relationships need to be forged with Aboriginal providers, and time, effort, and resources need to be dedicated to these relationships.

In many cases, Aboriginal communities and organisations have been working to build these relationships and support cultural safety in mainstream organisations, as well as delivering their own services. To reduce this burden, and increase cultural safety across the family violence system, we are creating Aboriginal cultural safety advisor positions within Aboriginal organisations across the state. These advisors will provide advice to mainstream family violence organisations on taking action to embed cultural safety for Aboriginal Victorians. The rollout of these positions will be community-led.

A new Aboriginal 10-Year Family Violence Plan, to be released in 2018, will include an Aboriginal Industry Strategy. The Aboriginal Industry Strategy will build the capacity and capability of Aboriginal family violence services, organisations and the sector to meet future service demands.

There is an urgent need to build the Aboriginal family violence and broader family services workforce. We have invested in a range of initiatives to ensure that:

- **the workforce is properly recognised and is skilled to prevent family violence.** Aboriginal workers will have access to new pathways to gain recognised qualifications opening opportunities for worker mobility and progression. This will help to meet workforce forecasts estimating an increase in the need for these services and workers. Alongside qualifications, the unique cultural knowledge of Aboriginal workers must be recognised and valued
- **the workforce is supported through a commitment to enhanced wellbeing and safety.** Improved access to appropriate cultural supports and specialised training to reduce the impacts of vicarious trauma and support the wellbeing of Aboriginal workers. This will also improve service outcomes for clients
- **initiatives to respond to family violence are person-centred, culturally relevant, and reflect individual and family choices, need and circumstances.** Supporting Aboriginal service providers to undertake workforce planning and development will help to transition services for Aboriginal Victorians to Aboriginal providers. These services already provide culturally safe services to the Aboriginal community, and organisational preparedness is crucial for meeting the anticipated increase in demand
- **Initiatives to respond to family violence are accessible and available.** Grants and traineeships will help to increase the number of Aboriginal people entering the family services workforce and support the development of career pathways.

Consistent with the Victorian Government's commitment to Aboriginal self-determination, the implementation of these initiatives will be led by community.

REMUNERATION, CONDITIONS AND PATHWAYS

The Royal Commission found it difficult to assess current remuneration patterns because information on remuneration and conditions in the family violence sector is not centrally collected. The census of workforces reinforced this—there is no consistency in the conditions under which specialist family violence workers are employed, which leads to significant variance in remuneration and conditions within the sector, and in comparison to other social services sectors.²⁷

The Royal Commission heard evidence that low remuneration is linked to difficulty in attracting suitably qualified staff, poor staff retention, and high turnover.²⁸

The Royal Commission also heard evidence of how inadequate work resourcing leads to increased health and safety risks. In one submission, the Commission was told that resource shortages resulted in employees being “forced to ‘choose’ unsafe work practices...such as driving their own cars, on their own, to out-postings”.²⁹

The Royal Commission found inconsistencies between the salaries of specialist family violence workers and comparable roles in other family services.

The Royal Commission identified limited career development opportunities as a key reason for the “major problems” employers experience attracting and retaining staff. Evidence before the Commission revealed that professional development in the sector is piecemeal and fragmented. The Commission found that the specialist family violence sector “does not have a consistent approach to workforce training, professional development and career progression because this activity is not sufficiently resourced in existing funding models”.³⁰ We have heard that the absence of portability of entitlements (particularly long service leave entitlements) is considered a barrier to mobility for professional staff in the family violence and broader community services sectors. In response to an Economic, Education, Jobs and Skills Committee of Parliament’s *Inquiry into Portability of Long Service Leave Entitlements* (2016), the Government is progressing work to detail the legislative framework and any associated costs to enable a portable long service leave to operate in the Victorian community services sector.

We are also developing an approach to pricing that more accurately reflects the reasonable costs of delivering quality family violence and related services. The approach is informed by extensive research, analysis of relevant funding and performance data, benchmarking against comparable services and functions, and consultations with external stakeholders including service providers and peak bodies. This work is based on purchasing principles endorsed by the Victorian Secretaries’ Board, as recommended by the Royal Commission (Recommendation 224). The intention is that, in the long term, this new approach will drive equity and transparency for service providers and the government by providing more consistent pricing for like functions. This work provides a foundation for:

- a transparent and consistent approach to funding, by developing a framework based on the reasonable costs of service delivery that can be progressively applied across a range of services (including specialist family violence services)
- funding which recognises key aspects of employment in addition to remuneration - there are currently open questions about what components should be included in the “price” of services. These components may include learning and development costs, clinical supervision, and relevant infrastructure costs. The pricing approach is a critical piece of these reforms.

²⁷ State of Victoria, Royal Commission into Family Violence: Report and recommendations, Vol V, Parl Paper No 132 (2014–16), Pg 176.

²⁸ Ibid, 11.

²⁹ Ibid, 180.

³⁰ Ibid, 197.

Addressing these challenges is a long term undertaking; they cannot be resolved quickly. There are, however, some immediate actions we can take to get us on the right path.

Our immediate actions

- mapping the family violence capability frameworks against relevant industrial instruments for specialist family violence and primary prevention workers
- commissioning research on employment models and retention, including quantifying the opportunity cost of high turnover
- including a significant focus on remuneration and conditions for the specialist family violence and primary prevention sectors in the next (2019) census of workforces that intersect with family violence. By making this data available to the sector, organisations can benchmark themselves and undertake their own consideration of employment conditions.





CHAPTER 7

ACTION ON WORKFORCE HEALTH AND WELLBEING

The Royal Commission recognised the stressful, emotional and fatiguing nature of the work performed by specialist family violence workforces. It acknowledged that this stress is often exacerbated by 'difficulties accessing services and resources for their clients, lack of time to respond to the complexities of client needs, and limited access to supervision'.³¹ The issue of vicarious trauma was also highlighted, with the Royal Commission noting that it was a consistent theme throughout the many submissions that they received.

The census of workforces defined supervision as "supervision aimed at developing a practitioner's clinical awareness and skills in recognising and managing personal responses, value clashes and ethical dilemmas."

The primary prevention workforce experiences similar issues to the response workforce, however these workers often do not have the therapeutic training that many response workers have and can be ill-equipped to recognise and address signs of fatigue, trauma and burnout. Clinical supervision is not a regular feature of primary prevention work, though prevention practitioners often come into contact with victim survivors and hear their stories because they are engaging with communities and creating awareness and space to discuss issues of primary prevention, violence against women and family violence. It is therefore imperative that primary prevention practitioners have access to supportive supervisors who are equipped to understand the unique context of their work, and provide support or referral where required.

"While the stories we are exposed to are complex and challenging, I find the welfare organisation I work in supports me as a professional experiencing vicariously the traumas our families live, and emotionally holds me as a professional to continue to do this work."

(Family Violence Worker)
CENSUS OF WORKFORCES

³¹ State of Victoria, Royal Commission into Family Violence: Report and recommendations, Vol VI, Parl Paper No 132 (2014–16), Pg 179.

Workforce health and wellbeing issues have significant implications for staff retention and turnover.

This was illustrated clearly by the results of the census of workforces, which indicated that Tier 1 workers who are considering leaving their current employment nominated 'burnout' as the most common reason for leaving (29%).



FIGURE 9: Reasons to leave current employment. Source: KPMG analysis of employee survey data.

The nature of family violence work also lends itself to a number of other workplace safety issues, with family violence workers being subject to abuse and aggression in the course of their work. These risks can be exacerbated by limited resourcing, leading to employees adopting unsafe work practices such as driving their own cars to out-postings. These issues are particularly chronic in rural and regional settings, where violence outreach workers generally work alone.

A HEALTH AND WELLBEING FRAMEWORK FOR THE SPECIALIST FAMILY VIOLENCE AND PRIMARY PREVENTION SECTORS

We heard through our engagement and consultation that there is little consistency or organisational standards for the health and wellbeing of employees in specialist family violence and primary prevention workforces, with health and wellbeing often seen as an individual responsibility. This has led to varied practice across organisations, which contributes to employee stress and turnover.

The majority of people working in the sectors do so because of their commitment to addressing family violence and are often personally invested in the work they do. This increases the risk of vicarious trauma for specialist family violence and primary prevention workers and therefore the need for organisational support and professional supervision.

The Royal Commission recognised the need for strategies for ongoing management of vicarious trauma and organisational trauma, and the importance of providing counselling, debriefing and other support programs to build resilience and improve emotional wellbeing.

CLINICAL SUPERVISION

Results from the census of workforces revealed that 16% of Tier 1 respondents do not receive any form of clinical supervision. These challenges were also highlighted in the free text comments in the employee survey that formed the basis of the census.

While these results are consistent with past research into supervision for social workers in Australia (which indicated 84% of workers receive supervision), it remains a concern. The census also showed that for those who were receiving supervision, it is generally provided by an employee's line manager and is most often monthly.

"There is no one who is able to provide supervision. I have tried to follow up with people who may be qualified to provide me with supervision who have declined. I have asked for appropriate supervision, I have been told that steps are being taken to find a suitable supervisor. This has been an ongoing issue for years."

(Family Violence Worker)
CENSUS OF WORKFORCES

TIER 1

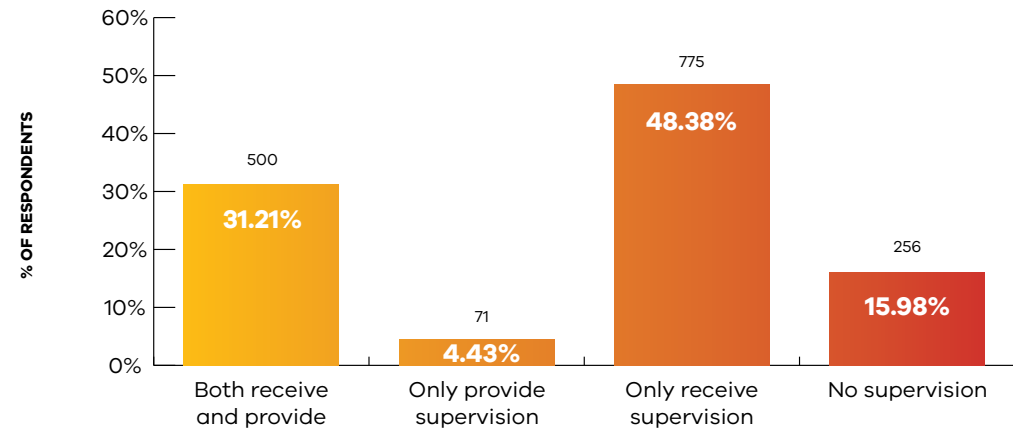


FIGURE 10: Proportion of Tier 1 workers receiving and/or providing clinical supervision. Source: KPMG analysis of employee survey data.

Our immediate actions

- developing a new Health and Wellbeing Framework, in partnership with the sector, with principles to underpin practice that are specific to the needs of specialist family violence and primary prevention workers. In developing the Health and Wellbeing Framework, we will consider:
 - the relevant knowledge, skills and behaviours for managers, employees and organisations in relation to health and wellbeing
 - establishing best practice in workforce health and wellbeing models, and providing advice for organisations on how to achieve these standards
 - mechanisms for organisations to benchmark themselves and monitor progress
 - the framework as a living document, open to regular feedback from organisations, managers and employees to monitor its effectiveness
 - existing frameworks (such as the Victorian Public Service Mental Health and Wellbeing Charter) to ensure consistency and provide clarity for workers regarding obligations under multiple frameworks
 - the means for effective implementation of the framework—including consideration of online resources for organisations, checklists, audit tools, face-to-face training.
- commissioning research into best practice supervision to:
 - establish an agreed definition of clinical supervision or communities of practice, noting the different needs of specialist family violence and primary prevention workers, building on a review of the limitations of current models and a literature review
 - provide advice to organisations on how the model may be successfully implemented having regard to the structures, needs and resources of different workforces
 - outline best practice standards of clinical supervision for workforces.

ESTABLISHING MORE SYSTEMATIC PEER SUPPORT STRATEGIES

Through our consultations, we consistently heard that there is a lack of opportunity for specialist family violence workers to use peer networks for support, learning and practice development. In addition, there are few resources and limited infrastructure available to support and build peer networks and support initiatives.

We heard that these opportunities can be particularly limited for workers who experience isolation due to a range of factors including geography or cultural background. Across the system there are also a number of specialist family violence workers who are working in non-specialist organisations and agencies, including family violence specialists in courts. For these specialists, the impact of the work can be exacerbated by issues of isolation, or the pressure of being the sole advocate for a family violence lens to be applied to the agency's broader work.

The census of workforces revealed that more than 32% of Tier 1 workers feel more mentoring or peer support would increase their confidence in their role.

"I enjoy working with colleagues that are as passionate about family violence work as I am. The ability to discuss ideas, current events, new trends, group processes, sharing ideas and knowledge - that really makes the work worthwhile."

(Family Violence Worker)
CENSUS OF WORKFORCES

CO-DESIGN ACTIVITY: LEVERAGING THE EXPERIENCE OF FAMILY VIOLENCE PRACTITIONERS

Family Safety Victoria, in partnership with Peer Academy, undertook a co-design sprint program in 2017 to rapidly design and prototype ideas for the Industry Plan.

Two 'teams' of specialist family violence practitioners and government representatives were asked "how we might support specialist family violence workers who are geographically isolated"?

The solutions devised included platforms that allowed for real-time peer support but also included aspects of mentorship, links to professional development, and resources to build practice.

Our immediate actions

- We will build on co-design activities to develop more systematic peer support strategies to minimise the occurrence of vicarious trauma. We will also take into account the additional challenges posed by worker isolation, and address isolation experienced by primary prevention workers, and support workers experiencing backlash in their public and private lives.

WORKPLACE STRATEGIES TO SUPPORT THE BROADER WORKFORCES THAT INTERSECT WITH FAMILY VIOLENCE

With more and more workforces taking on a role in preventing, identifying and responding to family violence, it is important that they are properly supported. Workers across the justice, health, community services and education and training sectors may not be working with family violence every day, but this does not mean that their work in this space won't have impacts on their health and wellbeing.

Workers have told us that they need supervision and debriefing from someone who has specialist knowledge of family violence.

The census of workforces identified that across Tiers 1, 2 and 3, close to 40% of respondents indicated that their organisation did not have a vicarious trauma policy or they did not know if their organisation had one.

Further, where policies were in place, respondents were more likely to be ambivalent rather than positive about their effectiveness.

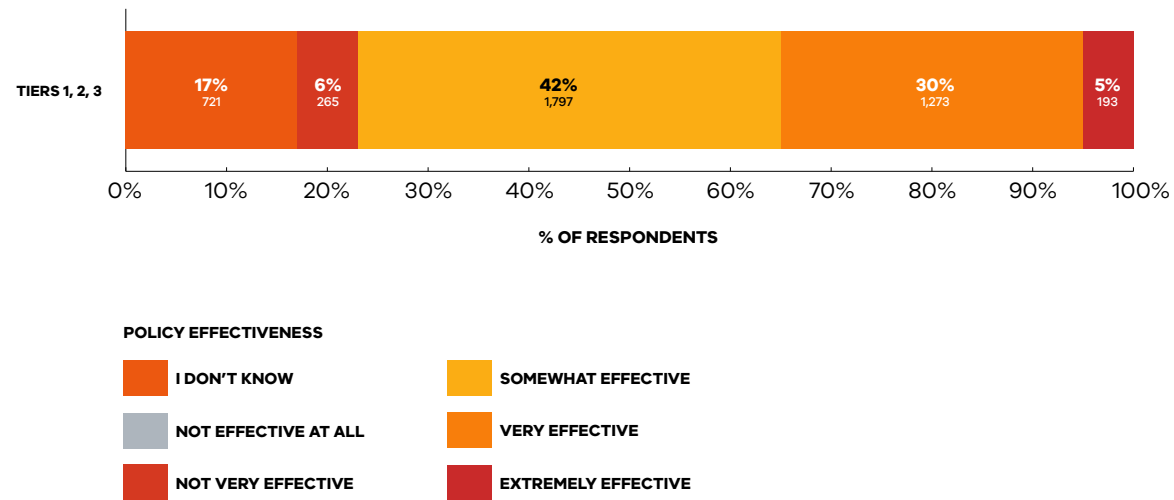


FIGURE 11: Effectiveness of organisation policies and practices relating to vicarious trauma across Tiers 1, 2, and 3. Source: KPMG analysis of employee survey data.

"I think that better support services (such as more supervision and debriefing) for registrars should be implemented. This professional support is given to (for example) applicant support workers, but nothing is provided to the registry staff ... I think there is a risk that staff can suffer vicarious trauma if they are not properly supported, with less experienced staff members particularly at risk"

(Witness Testimony)
Royal Commission

We recognise the breadth of ways that workforces can be supported through their organisations. Over the long term, the Centre for Workforce Excellence will examine innovative models of support.

The most common point of support for these workforces is employer-funded Employee Assistance Programs (EAPs). We have consistently heard that not all EAP providers are equipped with the skills to respond to the particular needs of workers vicariously exposed to family violence. In addition, there is often a stigma associated with the use of EAPs and a possible underutilisation as a result.

Our immediate action

- undertaking research into strategies to support broader workforces intersecting with family violence, including a review of Employee Assistance Programs for family violence capability, and considering strategies such as reflective practice, peer support and communities of practice.





CHAPTER 8 DELIVERING THE 10-YEAR PLAN

The Industry Plan is, in many ways, a living document. Our long term vision is set but we need to be agile and responsive in how we move towards it. Much of this work is new, and requires periods of testing and careful review. The family violence and primary prevention systems are changing rapidly, so it's not possible to predict exactly what this means for workforces over the long term. For this reason, we will periodically review and refresh the Industry Plan's Rolling Action Plans to make sure we are staying on the right track.

As described in Chapter 4, the Centre for Workforce Excellence will drive implementation of the Industry Plan, and steer its further development over time. The Centre for Workforce Excellence will work collaboratively with the specialist sectors to develop the first Rolling Action Plan in May 2018, and future Rolling Action Plans in 2021 and beyond.

These Rolling Action Plans will rely on evidence of what works, and on emerging evidence about workforce development. The Centre for Workforce Excellence will drive a targeted research agenda to build a robust evidence base for the Industry Plan. Key to this work will be close partnerships between the Centre for Workforce Excellence and other key bodies, including the Prevention Agency and Australia's National Research Organisation for Women's Safety. The Centre's first research priorities will be set out in the Rolling Action Plan in May 2018.

The census of workforces that intersect with family violence is a central plank of our evidence base. The first census gives us important baselines. We'll conduct the census every two years to build our understanding of the workforces intersecting with family

violence and the challenges they face, as well as providing a tool for tracking the effectiveness of the Industry Plan. There is also the opportunity for future censuses to include a deeper focus on priority issues, in line with contemporary research priorities, or to explore emerging areas of need. There are lessons from our inaugural census that we'll build into future census design and administration.

The Industry Plan outlines a significant workforce change agenda. Implementing change of this scale won't always be easy, so we are establishing positions in peak bodies to support each sector through the change process over the next two years. We'll work closely with those peak bodies to define the functions of these roles, to make sure that they meet the unique needs of each particular sector.

"The privilege of witnessing people's strength as they rebuild their lives, empowering and educating to hopefully break the cycle for the next generation."

(Family Violence Worker)
CENSUS OF WORKFORCES

ROLLING ACTION PLAN 2018-2021



The first Rolling Action Plan will be the implementation roadmap to achieving the vision of the Industry Plan from 2018–2021.

The Rolling Action Plan will:

- be based on careful analysis of the outcomes of the census of workforces that intersect with family violence
- provide an analysis of the required workforce size, skills and location of the specialist primary prevention and family violence sectors
- build on early learnings from key parts of the reform, including the redeveloped Family Violence Risk Assessment and Risk Management Framework and Support and Safety Hubs
- be informed by the experience of the specialist family violence and primary prevention sectors and related workforces with the reforms to date
- ensure that training is sequenced to minimise the impost on already busy workforces
- align with the next Aboriginal 10-Year Family Violence Plan, to ensure that any targeted Aboriginal workforce and industry initiatives are developed in partnership with the Indigenous Family Violence Partnership Forum
- Align with broader workforce reforms underway, including the Community Services Industry Plan, NDIS roll out and the Roadmap for Reform.

HOLDING OURSELVES TO ACCOUNT

Tracking our progress is key to achieving the change we want to see. *Ending Family Violence* and *Safe and Strong* both set out our commitment to outcomes-driven reform.

The Family Violence Outcomes Framework described in *Ending Family Violence* clearly outlines Victoria’s priorities in preventing and responding to family violence, why these priorities matter and what constitutes success in achieving these outcomes. The Family Violence Outcomes Framework sets out 17 outcomes across four domains:

- family violence and gender inequality are not tolerated
- victim survivors, vulnerable children and families are safe and supported to recover and thrive
- perpetrators are held to account, engaged and connected
- preventing and responding to family violence is systemic and enduring.

The Industry Plan underpins these reforms and, by building capability across the workforces that intersect with family violence, will contribute to all of the outcomes. Specifically, it will address outcome 17: The workforce is properly recognised and effectively responds, understands risk and need and is skilled to prevent family violence.

Safe and Strong sets out an outcomes framework for gender equality, with ten outcomes over four domains:

- Victorians live free from gendered norms, stereotypes, and expectations
- Victorians are empowered, healthy, safe and strong
- As Victorians we value and champion gender equality
- The Victorian Government is a leader on gender equality.

Our work in primary prevention will contribute to the first two domains, with a particular focus on outcome 3–Victorians do not tolerate attitudes and behaviours that support gender inequality– and outcome 5–all Victorians are safe in their homes, communities and workplaces. Our work to address remuneration, conditions and pathways for specialist family violence and primary prevention workers, who are predominantly women, will also contribute to outcome 2–Victorians are rewarded equitably for their contribution in all aspects of society.

Work is underway to further develop the Family Violence Outcomes Framework. Indicators of success will be defined for each of the four domains, with clear measures and targets to track progress. Similarly, *Safe and Strong’s* outcomes framework will be refined while measures are collected, baselines established and further targets identified. This work will be completed by June 2018.

As this work progresses, we’ll be able to measure the impact of the Industry Plan against it. The Rolling Action Plan will contain more detail.





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In this document, 'Aboriginal' refers to both Aboriginal and Torres Strait Islander people. 'Indigenous' or 'Koori/Koorie' is retained when part of the title of a report, program or quotation.



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