



INSIGHTS

CENTRE FOR WOMEN'S SAFETY AND WELLBEING

Acknowledgement of Country

The Centre for Women's Safety and Wellbeing acknowledges we are located on stolen Whadjuk Noongar land. We support the <u>Uluru Statement from the Heart</u> and call for reparations to be made as part of our reconciliation journey. We honour Aboriginal people for their continued resistance and resilience, and we pay deep respect to elders of all generations who continue to protect and promote culture and country.

Recognition of victims and survivors

The Centre for Women's Safety and Wellbeing recognises the strength and resilience of adults, children, and young people who have experienced domestic, family, and sexual violence and acknowledge that it is essential that responses to domestic, family, and sexual violence are informed by their expert knowledge and advocacy.

We pay respects to those who did not survive and acknowledge friends and family members who have lost loved ones to the preventable and far-reaching issue.

Artist: Rosie Paine

Rosie Paine is a proud Yilka/Wongutha/Noongar/Yamatji woman from





Foreword

The Centre for Women's Safety and Wellbeing (CWSW) is committed to our work being informed by women with lived experience. CWSW prioritises engagement with women with lived experience to contribute to the prevention and responses to family, domestic and sexual violence. We recognise that victim-survivors hold valuable knowledge and expertise about domestic, family, and sexual violence.

The month of May marks Domestic and Family Violence Prevention Month, an annual initiative to raise community awareness of domestic and family violence. An important way to raise awareness is to listen to victim survivors' own voice, lived experiences, knowledge, and expertise. Thus, we begin this edition with the voices of women with lived experience of domestic and family violence.

Through their generous and courageous sharing, we get a glimpse of the many forms of violence and abuse they endured, what they needed to do just to survive, and the toll the abuse took not only on their lives but also on the lives of their children.

We hope these first-hand accounts will help women who are being abused to realise they are not alone, and that with the right supports and tools, they can make a new start, and live a life free from violence and abuse.

We also hope that through their experiences, those who work in the domestic, family, and sexual violence sector can use what they have shared to further their knowledge and understanding, inform their practice and strengthen their responses to the women and children they work with, victim-survivors of domestic, family, and sexual violence.

Please note

There are descriptions of violence, events, or behaviours in this section which some may find confronting and may cause distress.

If reading these survivor reflections raises concerns for you, we encourage you to take care of yourself and reach out to the many support services available to you including our CWSW Support and Services Directory. You can also contact helplines such as 1800RESPECT and Lifeline (13 11 14) which provide 24-hour support. If you are in immediate danger call 000.



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REFLECTIONS FROM A SURVIVOR – THE SHADOWS THAT LINGER

I was invited to tell you my story; give you some insights as to what my life was like living with a perpetrator of domestic violence; and so, I have written the following. But please know that this is not just my story, it is also the story of one in four women in our society who also live or have lived under the shadow of abuse and domestic violence.

When people talk about domestic violence, they use words like abuse, victim, perpetrator and lived experience... From the perspective of someone who has survived domestic violence, I know what these words mean to me. I would ask you to consider what they mean to you?

Society sanitises what is raw, brutal, and vicious... and perhaps there's a reason for this... Perhaps it's easier for us to hide behind these clinical words so we can go about our business. The sad fact is, that violence against women, domestic violence is our business. Why? because it's happening to our mothers, our sisters, our daughters, our women... So why do we allow this to continue? Why aren't we doing something about this?

If I may, let me de-sanitise these words for you... let me paint you some pictures...

They call it abuse – it starts with him putting her down, calling her names and humiliating her. He makes light of the abuse by saying he was only joking, and that she has no sense of humour; or he says the abuse never happened, that she imagined it; or he blames her for his toxic

behaviours, saying that she caused it, that it was her fault.

He begins to control what she does, who she sees and talks to, what she reads, what she wears and where she goes. He begins to isolate her from her family and friends. He treats her like a servant, makes all the decisions, defines her role in their relationship and acts like the king of the castle. He takes control of the finances, makes her ask for money and then makes her justify every cent she spends.

He uses coercion and threats to hurt her, so she lives in a constant state of fear. He smashes things, comes at her with clenched fists. He threatens to harm her family or kill their pets if she says anything to anyone. He punches her, beats her, kicks her, and chokes her. He hurts her during sex, makes her do things she doesn't want to do and rapes her. He violates her in every way possible and says he will kill her and the children if she leaves. He does whatever he wants to her, whenever he wants. This is what abuse really means.

They call her a victim – Can you even begin to imagine what it must be like to wake each day with a feeling of dread, knowing the terrors the day will bring... and yet, still have to get up, get dressed, look after the children, go to work, and try to live a semblance of a normal life. Can you imagine having your body, mind and heart broken, and yet, still show up and do what ever it takes to live and survive every moment of every day? This is the life of a woman living with violence... This is not the life of a victim; this is the life of a survivor!

They call him a perpetrator – Is he a criminal, a low-life, someone you see on tv running from the law, someone completely separate from your world...

The reality is that the perpetrator could be your brother, your father, your neighbour, your colleague, or your friend.

To the world, a perpetrator appears normal, charming, one of the boys, a good mate. But believe me when I say he is two faced. One he shows to the world and a completely different one behind closed doors. For when no one is watching, he is cruel and vicious, with little or no empathy or regard for the pain and terror he inflicts on her. He takes no responsibility for his behaviours or actions... everything is always her fault. This is how a perpetrator behaves.

And what is 'lived-experience? Lived experience is that stomach-churning feeling of constant dread and absolute

powerlessness. It's living on eggshells, not knowing in what form or when the next attack will be. Lived experience is not knowing whether she will be ignored or insulted, talked to, or thrown across the room. Lived experience is not knowing as he comes towards her whether he will caress her or choke her, whether he will kiss her or try to kill her. This is a little of what lived experience looks like.

But the worst of it all is that she is totally alone because that is the way he has set her up. When they first meet, he targets her, woos her, love-bombs her, showers her with attention and tells her she is the woman of his dreams... and this grooming happens slowly over time, and he does it so well, she believes him.

He presents to her family and friends as this wonderful loving, kind, generous man, and he charms them to his side, and they believe him.

Then like the constant drip of a tap, the abuse in all its forms, starts and grows with each day. He has isolated her completely so she has no-one to turn to. No one else has seen his dark side, so no-one will believe her, she has nowhere to go. She is trapped.

And so, she dons her masks to make it through each day, because this is the only life she has, a life of pain and shame. She dons the mask of the 'loved' woman, of the woman who has it all... the perfect

home, the perfect life, the perfect husband with her the perfect wife. And while she continues to maintain this fragile façade for the world, she is also doing everything behind closed doors to stave off the violence, knowing that nothing she does can stop it. She must be constantly on alert and hypervigilant to his mood swings. She must learn to anticipate and adjust her behaviours and responses, according to his behaviours, his moods, his attitudes and his beliefs. She struggles with anxiety, depression, and imposter-syndrome... worried that the world will discover what a failure and a fraud she is. This is her life. This is her lived experience.

And you say why doesn't she just leave?

Every ounce of her strength is taken up just surviving, and after all this, if she does leave, she knows he will come after them and kill them.

So, in this physically, emotionally, and psychologically battered state she must start from scratch, often with no money, no home and children who are totally dependent on her.

She has to learn how to budget, pay bills and be the breadwinner. She has to fill out forms, stand in queues, take a number, ask for hand-outs, just to survive.

The fragility of her psyche is further tested by systems and attitudes that look

down on her because she left, she broke up the family and for that she is judged. She becomes a single mother, a secondclass citizen, struggling to make ends meet.

The freedom that she longed for terrifies her because she doesn't know how to cope, she doesn't have the tools or the supports to help her cope... This new world that she has escaped to, is yet another dangerous and scary place.

And you ask why she goes back to her abuser.

But even if she does manage to persevere and set up a life for herself and her children, life is still a struggle... just a different kind of struggle. She does her best to create a safe place, for having lived in a world that has been extremely dangerous for her, being safe becomes her critical need. A place where she can drop the masks, where she doesn't have to pretend to be ok, where she can be broken without making anyone else feel uncomfortable, a place of no judgement.

But even in her safe place, the legacy of her 'lived-experience' follows her like a dark shadow, it never goes away...

Because as she learned to live with the abuse, she now has to learn to live with the effects of what the abuse has done to her body and her mind. She has to learn to live with her trauma, her PTSD and the flashbacks that can be triggered by the most innocuous situations. She has to

learn to live with her insomnia, knowing that if she does sleep, the nightmares, the cold sweats and the night terrors will come. She has to learn to live with the pain of broken bones that were never tended to, and the muscle memory of the physical abuse that never seems to fade. She has to learn to live with her emotional, mental and physical exhaustion. She has to learn to live with the heart break of watching her children deal with their own trauma, their anxieties, their pain, knowing that in some way she is also responsible.

And she keeps mostly to herself because even though she desperately wants real connections, her experiences have shown her that people are dangerous... men, are dangerous, for it's the men in her life that caused her trauma... and it's the women in her life who knew and chose to look the other way, or did not believe her, or judged her... and so she doesn't allow anyone to get too close for its safer for her to be alone.

She learns and accepts that because of the shadows that linger, there will never be a happily ever after for her, and she is ok with that, for despite all the odds, she survived!

I would ask you then, if there is a woman in your life who has suffered at the hands of a man, is this the life you would want for her? Wouldn't you want to show her a better world? Where could you start?

I would invite you to consider the following. She doesn't need your pity or your judgement, because that is actually disrespectful to her. What she needs is for you to believe her. She needs your empathy and acknowledgement of the courage and strength it took for her to get to this point.

She doesn't need you to fix her, she needs you to see the beauty and the strength in her brokenness, and she needs you to support her and believe in her.

She doesn't need you to tell her how she should live or how she should feel. She needs you to accept her as she is, stand by her and support the choices she makes.

She is doing her best. Suspicion, mistrust and wariness are what kept her alive. Please don't judge or condemn her for not trusting you, or for being wary, or suspicious of your kindness. This will take time. She needs you to understand this.

She also needs you to be her voice. Stand up for her and for women like her. Be the voice for our women who have been broken, who have literally been beaten into submission. Give our women the respect, dignity, support, and compassion they deserve. Give our women the opportunity and the tools to be free and to feel safe again. Help our women to regain their self-worth and sense of belonging.

And more than that, consider what you can do to effect change in a world where our women have to live under these horrific conditions.

Consider this. Violence cannot occur in a relationship where there is mutual respect and an equal power balance. So as a society do we need to consider the power balance between our men and women? Do we need to consider why our men treat our women with such disrespect? By not making it our business, by not challenging these behaviours, by our inaction, are we enabling our men and our boys to act like bullies who abuse those who are vulnerable.

How have we been complicit in allowing this to happen?

I would invite you to look at yourself and your relationships... Look within and see where there is an imbalance of power in your relationships. Consider where you might unwittingly have been a perpetrator. Reflect on your attitudes and behaviours towards women. Where have you been disrespectful? Where have you imposed your will or your beliefs on a woman? Where have you stood by and watched a woman being disrespected?

They say that all it takes for bad things to happen is for good people to do nothing. You are here, you need to be the good people who do something. Make it your business every single day to call out bad

behaviour. If you see inappropriate behaviours towards women, don't just stand by and do nothing. say something, Do something. Say no to violence against women.

Thank you for taking the time to read my reflections.

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REFLECTIONS FROM A SURVIVOR

I've long supported the statement that the personal is political; believing that women's individual experiences of domestic, family and sexual violence are inextricably connected with the greater social and historical context. But we must never lose sight of the fact that the political is profoundly personal. Domestic and family violence is terrifying, deeply shocking, deeply hurtful, deeply disappointing to those who experience it.

In 2021, for the first time I spoke at an International Women's Day event about my childhood experiences of domestic and sexual violence and how they shaped me as a professional. I stopped there. I didn't talk about my adult experience. It seemed too much to load onto the audience. This is not uncommon. Many women I've spoken to who've experienced violence hold back. It's a considerateness, a carefulness. So, bear that in mind when you are listening to victim-survivors - as shocking as it is, you are probably only hearing the half of it.

I believe my childhood experiences of violence are inextricably tied to my adult experience of domestic violence. I grew up feeling very unsafe in the world and was always safety planning without even knowing what that was. I thought I needed protection from men and ironically, I sought that protection from a man. I've heard someone refer to this as a

protection racket: it is by far men who are the abusers yet there is a social narrative that says men are our protectors and men being protective was and often still is highly valued.

I have to say that my ex-partner had quite a traumatic childhood. His parents were alcoholics, gamblers and never stayed in one place for long. Before meeting his father, his mother had two of her three children from a previous relationship removed from her care. By the time he was fifteen my ex-partner was living on the street and then ended up in a youth home. A lot worse happened to him, but his is not my story to tell. But naturally I felt a lot of compassion for him.

My ex-partner was very protective. In the year before we had the first of our two children, he would actually come searching for me if I was even five minutes late coming home from work, from a walk, from meeting a friend, from visiting my mum and so on. He wouldn't call. He would just come looking for me. He would be very, very upset when he found me. 'Where have you been. I thought something had happened to you' he would say as he took whatever I happened to be carrying off me. 'Why are you carrying these heavy bags? Why didn't you just call me and I'd have come to pick you up'. He became like this in every aspect of my life.

Everything was unsafe in his eyes: wearing my top button undone, wearing a

skirt above my knee or with a little split would attract perverts; seeing an old male friend was no good because all men have ulterior motives; being out and about on my own was unsafe because I can't see very well. To be out and about in the world, to not be home exactly on time, to wear a dress that sits on my knee; to spend time with a male childhood friend was to be careless with his love. was to care little about all of the worry and stress that I was causing him. He would punish me if I didn't help him protect me. He would be furious if he came home and the lawn had been cut: 'I told you not to let him come around and cut the lawn when I'm not home. I don't trust that guy.'

He often wouldn't speak to me for days when I'd done the 'wrong' thing, if he thought I'd put my safety at risk. He would be morose, exhausted, defeated. 'How am I supposed to look after you. You're making this so hard,' He would say. Given his childhood, I empathised. Of course, he saw danger everywhere; of course, he was desperately worried about losing me. It is probably worth mentioning here that I have very little vision and so didn't drive. After a year of being together he was driving me and picking me up from everywhere.

And so this was the pattern of our lives when our first child was born and then a year later our second. When my second child was four months old, I had to have quite a serious eye operation and my eye

was bandaged up the first week after I left hospital. It was my right eye, which is my so-called good eye. At that time, I had a little bit of vision in my left eye so when I got home from hospital I just wanted to get on with my routine with the children. It was difficult, but I knew my home well and felt I could see enough. Afterall, I wasn't sick. I just couldn't see much. Well, this was all too much for my ex-partner and he was very angry that I wouldn't lay down and rest. He insisted that I rest, which was really very difficult as I could hear him being quick to temper with the little ones. When I kept insisting on getting up and coming out to be with the children, he would get really angry. It was the usual 'I'm trying to look after you...'.

One afternoon in that first week home from the hospital I had an outpatient's appointment that it was very important I attend as if my eye wasn't recovering as it should I could potentially lose all of what was left of my vision. Well, my expartner's behaviour became so aggressive that I refused to get in the car with him and go to the hospital. I also suspected that he'd started using illicit drugs again. He needed drugs he said to manage his bipolar.

When I kept refusing to get into the car and go to the hospital, he became very violent, punching his fist into the wall like it was a punching bag and then into the door. His fist was bleeding "You've got to go to the hospital' he yelled 'why are you being like this!' He punched another hole

into the door before ripping it off its hinges. I grabbed the children and ran into the bedroom. He came charging in and yanked both children from my arms and said he was taking them.

I was horrified, scared, crying. The children were screaming. I pulled on him and he was all just wild anger and I grabbed the phone on the dresser and I pressed 000. He snatched it out of my hand, threw it on the ground and stomped on it. Then the children and I seemed flung on the bed and then his hands were around by neck and I was about to black out when he pulled back.

The call must have gone through because the police turned up pretty quickly. What I saw when I came out of that bedroom was my 15-month-old standing on tippytoes and peering out the window and a police officer saying something like 'hey little buddy'.

I knew then in every single bit of my being that I'd lost everything; that my expartner would never be the dad that my little boys needed; that it was not possible to stay married to this man. It wasn't the first time that he had harmed us or filled us with a dreadful fear. What I didn't know then was that I would stay for much longer than I wanted to, that I would leave and then return because his mental health would deteriorate, and his drug use would spiral out of control.

He would appear on my doorstep – desperate, in agony, desolate, homeless, with nothing to lose. He felt dangerous.

The young officer that took me aside and spoke to me while the other officer spoke to my ex-partner was very kind and warm. My eyes were sore and swollen from crying and I felt so dirty and dark and ashamed. 'You must leave him,' he said quietly, seriously, appearing very saddened by it all. 'He will never change,' He said, 'Don't believe him when he says he will.'

When I opened the door to the police, the plumber had also arrived to fix the hot water system. He'd known me before I'd met my ex-partner and we'd had lots of nice chats when he was around on a job. I knew by the look on his face he could see what had happened. His voice broke when he asked if there was anything he could do to help.

It gets worse before it gets better. There were the threats to kill himself and his self-harming, threats to kill me and to burn down my parents' house while they were sleeping should I tell them. Him driving off with a hose in the boot of the car. Him standing on a high bridge threatening to jump off. Him with a knife to his wrists.

I know that drugs were not the cause of my husband's violence, but they did make him a lot scarier. The violence became more frequent and more severe. I kept quiet, I didn't say anything about anything. I tried to seem happy. I spent all my time with the kids. I stayed at home. I didn't go to playgroup. I didn't go anywhere. He didn't have to tell me not to. I didn't really want anyone to see me. I didn't really want to see anyone.

One time we were in the car when I insisted that he stop to let me and the kids get out so bad was his driving and so vile was his verbal abuse. He came to a fierce halt and tried to push me out the car, which meant he would drive off with the kids, so I fought to stay in the car. He then skidded off with me half in and half out the car.

Shortly after, the police pulled us over. Apparently, a woman in a shop called them. These police officers were altogether different than the ones who came to the house. When the police suggested a 72 hour police order my expartner was very calm and said it wasn't appropriate because I couldn't see very well and couldn't drive. I depended on him, he said. I stood there out on the side of the road, cars whizzing past, in shock and trembling uncontrollably.

I had just that week before lost all the remaining sight in my left eye. I went along with his story because I still didn't know what to do, didn't know who to speak to without compromising the safety of my kids and family. The female officer said to me as she departed that I

shouldn't let the kids witness that kind of arguing.

What took my breath away, what completely and utterly stunned me was how calm my ex-partner quickly became when the police arrived. That his violence towards me and the children was a choice couldn't have been clearer.

By this time, we had no money. I was struggling to pay the rent on time while my ex-partner supported his drug addiction. By this time, I felt dead inside but did my best to create some joy for the kids. I wasn't living. I was just surviving.

It was around then that I called the police – not the emergency line just the general line. I didn't give my name. I said I just wanted some information about domestic violence. I was put through to a female officer. I asked if the WA Police could guarantee my safety and the safety of my children and family should I leave my abusive partner. The officer was actually very kind and sympathetic but said that there was the FVRO and services and supports but no one could guarantee our safety.

I felt paralysed with fear, exhausted from all the hyper-vigilance, the endless nights lying awake not knowing what to do, not knowing when he may choose to go all the way and actually kill me. Because it was a choice and it felt like a choice.

The next time the police came to the house it was late at night. I hadn't called them. When I answered the door, they shun a bright torch into the house and asked to speak to my ex-partner. They spoke to him outside. They never spoke to me at all. After about 15 minutes they drove away.

I learned later from my ex-partner that he'd put in a suicide call. He said he was feeling suicidal because of what he was putting me and the kids through. That the police left without speaking to me actually hurt. Didn't they care about me and the children?

When my youngest started kindy I did try a few domestic violence counselling services, but to be quite honest I didn't feel comfortable or safe to tell them everything. They just seemed too inexperienced. I wasn't confident that they would handle it with the skill and care that I believed was required. My children's lives are very precious and I felt that their lives – and mine – were at stake.

Now, I'm going to jump to when my neighbour saw my mum at the deli and cried and said 'you've got to go and help your daughter there's something wrong. She won't answer the door to me. I hear things. I think he's mistreating her. At night, I hear her crying quietly out the back'

Well, I was horrified that my mum found out. I didn't want to put her in any danger.

I learned much later that my mum went down to talk to one of the DV advocates about my circumstances. 'She's too scared to leave in case he hurts her and the children or me' my mum said. 'What should I do?' she asked the advocate. 'The police can't guarantee her safety. I was thinking of getting someone to beat him up, threaten him and take his car. What do you think?' she asked the advocate.

I eventually made an appointment with a domestic violence counsellor. Now, it is no exaggeration to say that this counsellor changed my life. She knew domestic violence like the heart surgeon knows the heart. I felt safe. I felt like she was a highly skilled professional who would work safely, carefully, with the complexity and the high risk that was now my life. The wonderful counsellor then booked me in with this extraordinary Legal Aid Lawyer.

The Legal Aid Lawyer was an exceptional professional, too. Like the counsellor, he knew his stuff inside out. When he said I was in the higher risk group I believed him, and I wept. I knew I had to plan a way out.

Sitting here writing this I'm struck by how very difficult it is to describe the terror that grips your body and doesn't let go – but also the emotional carnage. There is the rattling of the knife drawer, the silencing through strangulation, the day-to-day repression of mine and the

children's individual freedom of thought and action.

After that first time that the police came to the house, it was years until I would call them again. On the night that I did make the call, the night that I finally left my ex-partner, was after he locked me out of the house and said that he was going to end it all. Being locked out of my house with the children locked inside with him was torture. The Oxford Dictionary defines torture as: the action or practice of inflicting severe pain or suffering on someone as a punishment or in order to force them to do or say something. The fear that he might end it all for all of us was always there now because he knew that he had lost me, that there was no way of undoing the things he had done.

I didn't choose to leave that night. My stress and fear was so extreme and severe that I wasn't functioning. It was with a numbness of mind, a mind devoid of the ability to assess risk and make a safety plan that I walked out into the unknown.

The escape route wasn't a forward trajectory. I felt like sometimes I was running from point A to point B, stopping for a while to gather myself and to check our safety, to gather some more supplies and then running to point C only to then realise that it's not safe and then quickly running back to point B. And so, this is how it went

I strongly believe that victim-survivors need what I call supplies – that is, practical supports and stepping-stones to fortify them and get them prepared. It was the practical things that really helped me. I got a secret little job doing some research. I hadn't worked for several years, but someone took a chance on me. I could do this research anytime anywhere. I saved some money.

These practical supports slowly brought me back into the world. They lifted me up, so I could see a light at the end of the tunnel. It was with resources, practical help and outstanding specialist domestic violence support services and a two-year FVRO that I finally made my way out. But risk management and safety planning by victim survivors ticks away unseen for years afterwards. Some survivors say that it never ends. This is the ultimate denial of a woman's human right to say 'no'; to make the choice to no longer be in a relationship with someone.

The things that terrified me the most about leaving:

- That our safety rested on my expartner choosing not to kill us or harm us
- The possibility that the Family Law
 Court would allow my ex-partner to
 have unsupervised access to the
 children and provide him with the
 opportunity to continue to harm them
 or kill them.

I want to end by saying that we must value and support specialist domestic violence workers. We must provide them with the ongoing professional development and supervision to be the best professionals that they need to be to support women and children experiencing domestic and family violence. A sustainable, skilled and knowledgeable workforce is of critical importance to women's and children's safety and recovery. We must also remember all of those other practical supports and stepping-stones that make a difference. Housing and job security are an essential part of a long-term safety plan.

And so, what of the perpetrator? I say stop it before it starts, I say stop it at the start, I say go in hard early because once it's at crisis point it's risk management, hyper vigilance and harm reduction all the way. Currently, too much of this risk management is borne by women and children. I believe that we need high quality supports for perpetrators of

domestic and family violence. I also believe that they require practical and accessible supports around housing and employment and where applicable, their mental health and alcohol and other drug use. Perpetrators who are 'off the radar' and disengaged can be the most dangerous.

But we can't start building in more supports for men while continuing to leave women and children desperately trying to survive and rebuild without the supports they need – advocacy and counselling support, housing support, legal support, financial support, employment opportunities and critically, a supportive justice system.

Not only must we continue to pivot to the perpetrator – keeping him more visible and accountable, we must ALL be accountable to women and children's experiences of domestic and family violence.

WHO PERPETRATES DOMESTIC, FAMILY, AND SEXUAL VIOLENCE, AND WHY - Professor Michael Flood

Professor Michael Flood is a researcher at the Queensland University of Technology, focusing on how to prevent and reduce domestic and sexual violence and engage men in building gender justice.



In Australia, one in six women and one in 17 men have experienced partner violence, and one in five women and one in 20 men have experienced sexual violence. On average, ten women a day are hospitalised for assault injuries perpetrated by a partner. Given these figures, then in turn, large numbers of people are the perpetrators of this violence.

Yet remarkably little is known about who is perpetrating this violence. Most of what we know about domestic, family, and sexual violence is focused on the victims. Most attention in the community and by

governments has focused on victims and victimisation.

Yes, responses to domestic and sexual violence must start by providing safety, support, and justice for victim-survivors. But we must also work to reduce and prevent the perpetration of violence.

The State of Knowledge Report on Violence Perpetration, released recently by the Queensland University of Technology, provides a focused examination of violence perpetration. It explores what we know so far about who uses domestic and sexual violence, how, and why, in order to enhance national efforts to end domestic, family and sexual violence.

Most perpetrators of domestic violence, and nearly all perpetrators of sexual violence, are male, according to crime victimisation data. Studies that ask people if they have ever used any of a series of violent acts against an intimate or dating partner find that substantial proportions of men and women and young people have ever done so.

Anywhere from one in ten to one in three people has used physical aggression against an intimate partner. Many studies find that similar proportions of men and women have ever perpetrated at least aggressive act against a partner.

If studies ask though about the frequency and severity of domestic violence, its impacts (injury and fear), the use of coercive control, and the history of and contexts for the use of violence, they find gender contrasts. They find that males' perpetration of domestic and dating violence is more severe, injurious,

controlling, and harmful than females'. Likewise, studies find that far more men than women report pressuring or coercing others into sex.

Domestic, family, and sexual violence have their roots in factors at multiple levels of society, including at the individual, relationship, and community levels. People may use violence because they have learnt that behaving in abusive ways is normal or acceptable; they believe that such behaviour is expected in their social circles and settings; or they have become invested in domination and control over their intimate partners or others.

Some people's use of violence is shaped by their own exposure to violence as children, impacting their emotional and social development and attitudes. Some people have grown up in communities and contexts that normalise their use of coercion and abuse as part of sexuality or relationships. Some people's use of violence is enabled by wider gender inequalities and other social inequalities.

There is considerable diversity among perpetrators and in perpetration. For example, among the people who assault their intimate partners, some are 'specialists' who assault only their partners, while others are 'generalists' involved in various forms of violent and criminal behaviour. In some couples there is occasional, minor violence, that tends not to escalate or cause injury and fear. In other couples, one partner uses violence in combination with other controlling tactics to dominate and coerce their partner, with devastating and sometimes lethal effects.

There is also diversity in what drives people's use of violence. The research finds that risk factors for violence differ between men and women, for more and less severe forms of violence, and between heterosexual and LGB people.

Preventing the use of violence

Emerging knowledge on people's use of violence has powerful implications for efforts at violence prevention.

Most sexual violence perpetration starts young, in boys' and young men's teenage years, and then persists. So we must address sexual coercion and its risk factors early in young people's lives. Young people of all genders need respectful relationships education and comprehensive sexuality education in every school. School curricula should be complemented by interventions aimed at those at risk of or already exposed to or using violence.

Prevention efforts must tackle the drivers of domestic and sexual violence associated with sexist forms of masculinity, including sets of beliefs that excuse and condone violence and sexist cultures among mates, in sport, in workplaces, and elsewhere.

The vast majority of the people who use domestic and sexual violence never come to the attention of police or legal systems, so it would be foolish to pin our hopes for violence prevention just on better laws and policing.

Cultural change is necessary to shift the widespread norms that encourage young men to pressure others into sex or that

make everyday forms of non-physical abuse and control seem acceptable in relationships. Systemic change is necessary to shift the entrenched forms of community disadvantage that breed cycles of violence.

A problem above all of perpetration

The problems of domestic, family, and sexual violence, fundamentally, are problems of perpetration. Every act of violence involves a perpetrator and a victim, and it is time to increase our attention to perpetrators and perpetration. Perpetration, ultimately, is the problem we must solve if we are to end domestic, family, and sexual violence.

It is time to reframe the problems of domestic, family, and sexual violence such that the individuals perpetrating violence are both more visible and more accountable. It is time to know much more about the extent and character of people's use of violence and about the social conditions that make this more or less likely. And it is time to use this knowledge to guide efforts to prevent and reduce violence.

Note: The full report titled 'Who uses domestic, family, and sexual violence, how, and why? The State of Knowledge Report on Violence Prevention can be found here.

BEING SAFE AT HOME IS A RIGHT NOT JUST SOMETHING TO DREAM ABOUT – Dr Alison Evans

Alison Evans is the Chief Executive Officer of the Centre for Women's Safety and Wellbeing in Western Australia.

This article is an opinion piece that featured in the April edition of 'Parity', which focused on Safe at Home programs.



'I didn't feel safe in my home when I was a kid', Mary-Anne told me. 'Well at least not when my dad was home. I feigned sickness so I didn't have to go to school and could spend the whole day at home with mum. The daytime, when my dad was at work, was a safe and cosy time. We didn't have much money, so it was a very basic home, but time alone with mum was like a slice of heaven. It was peaceful and calm, kind,' Mary-Anne explained.

'My mum had a collection of *Family Ties* DVDs. I watched them again and again. I

wanted what they had – safety, security, dependability, morality, light-heartedness. I didn't feel safe as a girl out and about in the suburb where I lived either.'

Mary-Anne said: 'Surviving dad was all consuming for my mum who didn't have a lot of choices as she'd never worked and didn't have any family and friends around. My brother and sister and I were surviving too. There was no help, advice or support provided to us and we wouldn't have thought to go looking for it.'

'Having a home that was my safe haven was a deep yearning,' Mary-Anne explained. 'But I relied on a guy to get it because that's all I knew, and I rushed into it because I wanted it so badly. I looked to my partner to provide me with personal safety. I couldn't see another way to get it.' Mary-Anne took a deep breathe, 'But that all too familiar fear that you can smell and taste and almost touch it is so thick in the air crept back into my life. It's a fear that depletes you, exhausts you, but you can't sleep; that constantly pushes tears to the back of your eyes so your head aches and you can hardly swallow your food, talk to anyone, bring joy to your kids' lives. So here I am again looking for safety for myself but this time with my kids and on Newstart payments.'

The risk of becoming homeless, and the reality for many of being homeless, is one of the most common reasons victimsurvivors return to a perpetrator of domestic and family violence. Victimsurvivors cannot be properly supported, and safe in the longer term, without access to safe, affordable and secure housing. Safe and stable housing is critical to promote safety, wellbeing and

re-engagement and connection to family, friends, community, employment and education.

For children, the lack of safe, secure, and affordable housing can compound the negative consequences of having lived in a home with a perpetrator of domestic and family violence.

Despite policy reforms that prioritise victim-survivors remaining in their homes, many women and children are still forced to leave because they can't afford rent or mortgage repayments on a single income.

Victim-survivors who manage to get into a refuge often remain in a refuge far longer than is necessary or is desired due to the lack of available housing or because they cannot afford housing anywhere else and domestic and family violence services refuse to exit them into homelessness

While a Safe at Home response or access to private rental is an option for some, the reality is that the high cost of housing in the private market compared to income support payments and the single incomes of many victim-survivors makes housing in the private market financially unsustainable for many.

Governments have adopted strategies, policies and programs designed to hold perpetrators accountable and support and protect victim-survivors. These have been accompanied by investment and reform to promote the provision of more integrated services for families affected by violence. However, attention to the housing needs of women and children escaping perpetrators of domestic and family violence is seriously lacking with untold

consequences for survivors. There are limited interventions designed to address systemic barriers across the housing market. Existing domestic and family violence support programs – as important and necessary as they are – cannot compensate for the absence of safe and affordable housing pathways for women and children experiencing domestic and family violence.

People choosing to use violence are solely responsible for their violence and controlling behaviours – which should mean that their partners and children are not made homeless, or displaced from families, friends, and schools. The person responsible for the violence should be the one who must leave the home that they are sharing with the victim-survivor. This is the premise of various Safe at Home schemes in Australia.

This policy approach seeks to keep domestic and family violence victimsurvivors in their home with the perpetrator removed. It contrasts with the previous response to domestic and family violence which involves women and children leaving the home in search of safety. However, barriers exist and need to be overcome to ensure the safety of victim-survivors who remain in their home.

Several factors guide whether a victimsurvivor feels comfortable remaining in their home. Legislation, legal and judicial practices, practical and emotional support services, affordability issues, and integrated domestic and family violence programs can all influence women's decisions to remain in their home following the removal of a violent partner, as can their confidence in their ability to do so safely, and their actual safety.

Strengthening each of these aspects may expand the number of victim-survivors who are able to remain in their own home without the experience of violence and the fear of violence.

Women and children need to be able to afford to remain in the family home. Preventing homelessness through the subsidisation of these families may be cost effective as well as equitable. Women and children need to feel safe as well as be safe. They may need support to feel emotionally confident enough to remain in the home. They may also need practical and legal support to increase their physical safety.

Perpetrators need to have somewhere to live or they will be more likely to try to return to the family home. There also needs to be a consistent approach by the police and judicial services towards the perpetrator's exclusion from the home.

Furthermore, adequate funding is needed so referrals do not have to be put on hold and to ensure effective brokerage. Culturally appropriate services are required for Aboriginal and Torres Strait Islanders and those from culturally and linguistically diverse communities. This means supporting flexible and holistic case-management and suitable staff recruitment.

A safe home – with accompanying supports and stepping sones – is key to victim-survivors having the opportunity to recover from the impact of having lived with a perpetrator of domestic and family violence. The first pillar of recovery is

housing. With stable housing victimsurvivors can turn their mind to rebuilding their own and their children's lives and reconnecting with their community and families.

Providing victim-survivors with a genuine long-term housing option enables them to permanently leave a violent partner.

Mary-Ann and other victim-survivors have a right to be safe at home. Living free from fear shouldn't be as inaccessible as an island in the sun and only something to dream about.

WOMEN WHO ARE HOMELESS AND PREGNANT – Professor Lisa Wood

A presentation by Professor Lisa Wood, Institute for Health Research, University of Notre Dame



Imagine not knowing what will happen to your newborn baby because you have nowhere to live.

Imagine having a baby and trying to find somewhere safe to sleep at night – every night.

Imagine living with the fear of child removal because you have nowhere to live.

This was the focus of a presentation given by Professor Lisa Wood at a City Rotary Breakfast Meeting on March 1, 2023.

Professor Wood highlighted that the first 1,000 days from conception until the end of the second year of life was critical to developing the foundations of a person's future health, growth, and neurodevelopment, and that both positive and negative experiences during these critical first 1,000 days of life have a significant influence on a child's future.

One of the key points of the presentation was that pregnancy should be a joyful time of life for women however, for those women who are homeless whilst pregnant, this is not the case. Sadly, these women face multiple stressors that can adversely impact both mother and child. These may include:

- anxiety of giving birth with no safe place to live
- barriers to GP and antenatal care access
- high risk pregnancy
- issues with foetal development
- difficulty in addressing other pregnancy risk factors while homeless
- low birthweight of the infant
- child developmental outcomes
- issues with child/parent bonding if the infant is removed and placed in out-of-home care
- no continuity of breastfeeding if infant is removed and placed in out-of-home care

- grief and trauma if infant is removed and placed in out-ofhome care
- inter-generational impact if infant is removed and placed in out-ofhome care.

Professor Wood emphasised that currently, it is difficult to document a true picture of the seriousness of this issue because homelessness and pregnancy is not well documented in our data systems. This could be because:

- pregnant women are reluctant to disclose homelessness for fear of child removal, judgement, and shame
- pregnancy and homelessness are not overtly on health or homelessness policy radar in WA
- pregnancy and homelessness are not (yet!) defined as a priority group for service funding
- this is not a new issue (normalized among homeless population)
- it is confronting to think about as subconsciously, we 'don't want to go there.'

Professor Wood shared the limited data available on homelessness and pregnancy. Data collected from Perth hospitals between 2020 – 2022 showed that 7,500 people who presented to hospital at the time of data collection were homeless. Of this group, 248 women were homeless and pregnant and presented to hospital with pregnancy-related concerns.

In the last three years, Homeless Healthcare and Passages (Vinnies) supported 91 pregnant women, among these women:

- 54% were street present/primary homelessness
- 17% were couch surfing
- 8% were in Refuges
- 14% were in an unstable housing situation
- 7% were in an unknown housing situation.

Indigo Junction collected data on service demand and unmet need (June '21 to June '22) which showed that their family accommodation services received more than 4,500 calls for accommodation assistance with over 30% of these coming from women experiencing homelessness while pregnant.

Their women's refuge had 492 requests for accommodation assistance that could not be met because it was full. About a quarter of these requests were from women who were pregnant.

Their youth accommodation service (15-25 years) was only able to assist one in five requests from pregnant young people.

The Nest housing support program (Homelessness Services | Youth Futures WA) cites that on average, only one out of every 20 requests for accommodation are able to be met and that lack of housing is the biggest barrier to The Nest being able to support young mothers who are experiencing or at immediate risk of

homelessness due to unsafe living conditions.

Ending Homelessness in WA (EHIWA) states that there is just nowhere for people to go and that so much of their time is spent trying to find longer term housing. They currently have an extended family of 3 generations living in a tent and a mother, baby, grandmother and siblings all trying to sleep in a small hatchback car.

In short, we are facing a crisis with regards homelessness which we know raises the risk to the mental, emotional, and physical wellbeing of those who are currently impacted. Add to this mix women who are pregnant and homeless, and the multiple stressors they face, and risks to both mother and child increase exponentially. There is clearly not enough accommodation to meet the growing demand

So, what can be done to address this 'crisis' currently being experienced by our homeless and pregnant women?

Professor Wood highlighted some things that are needed:

- rapid 'priority waitlist' housing for pregnant women and homeless mothers with newborns
- antenatal outreach services and follow through support for

- pregnant women who are homeless
- funding for dedicated supported accommodation before and after birth, with onsite support, links to antenatal care and pathways to longer term housing
- culturally secure accommodation options (with support) for Aboriginal women who are pregnant or have newborns
- True Housing First fast permanent housing with wrap around support for pregnant women/mothers
- options for babies and mothers being assessed for state care to stay together after hospital discharge, in a supported living environment
- robust research and data to inform policy and service change and evaluate impact.

"Pregnancy epitomises a tale of two cities in Perth. The 'first 1000 days' for babies born into homelessness is not a level playing field, and there are lifelong consequences for these children, their mothers and our

^{*}All material contained in this article was drawn from the presentation given by Professor Lisa Wood who is recognised nationally and internationally for her leadership in homelessness and public health. Reducing health and social inequalities lies at the heart of all her research.

^{*}Photo by permission.

STORIES FROM THE FIELD – Tanya Elson

Tanya Elson is the General Manager, Family and Domestic Violence at RUAH Community Services.

Thank you to Tanya for talking with us about your work.



Can you share some of the history of Ruah's domestic and family violence services?

In 1959 four Sisters of the Daughters of Charity, who are a Catholic order of nuns, established Perth's first soup kitchen for people experiencing homelessness. By the early 1960s the soup kitchen was serving 50,000 meals each year, and 2,000 beds were provided in a night shelter for women and girls. In the late

1960s the Sisters' formally established a refuge known as Ave Maria House, where for the next 40 years they lived and worked with women and children escaping family and domestic violence. Dedicated volunteers joined the Sisters and funded the soup kitchen and refuge through a network of second-hand clothing and furniture shops. The first paid welfare worker joined what had become known as the De Paul Centre for the Homeless in 1975.

As feminism began to give a voice to women's experience of violence, in the 1960s and 70s, life in Perth's inner city was particularly dangerous for Aboriginal women experiencing homelessness, and a number of women were killed in Northbridge. A collaboration between the Aboriginal Advancement Council, representatives of the Catholic Church and its supporters, and young women volunteers from St Norbert's Night Shelter for Aboriginal people established Anawim refuge, the first service of its kind for Aboriginal women in Western Australia. An abandoned potato chip factory was purchased in 1977, converted into dormitory-style accommodation and later expanded and changed to shared rooms in the 1980s.

In the 1990s the Sisters' established the Daughters of Charity Services WA Ltd., and began handing over their operations to a management team, who introduced mental health supports and set the

organisation on a path of expansion to become what is now known as Ruah.

Anawim became part of Ruah in 2007 and in 2014 it was renamed Kambarang Place, in recognition of the Noongar season of birth and transformation. Ave Maria House is now known as Harmony Refuge. Ruah's family and domestic violence services have grown to include Safe at Home supports, Coordinated Response Services in partnerships with WA Police and the Department of Communities, the Belmont Safeguarding Families program, and specialist family violence lawyers. The 'My Story My Time' program was introduced to support and train women with lived experience of family violence to safely share their stories and be powerful voices for change.

The Sisters were strong, bold women who were driven to help the most vulnerable people in their community by working alongside them. They didn't hesitate to try new things when the old ways weren't making a difference. Today our Ruah mission of open hearts and bold strides, guides everything we do and reflects the legacy of those four women and the many others who have continued it from then until now.

How long have you been working in the area of domestic and family violence?

Five years. I joined Ruah in 2021 after seventeen years with WA Government

agencies. I came to Ruah from working in strategy and policy with the Department of Communities, developing Path to Safety: WA's Strategy to Reduce Family and Domestic Violence 2020-2030 and Stronger Together, WA's Plan for Gender Equality. COVID-19 also happened during that time, and I was fortunate to work with exceptional leaders in the family and domestic violence sector on the pandemic response to support women's and children's safety and perpetrator accountability. I took a huge amount of inspiration from that collaboration — it really drove home all that I knew about the flexible, responsive, person-centred, innovative practice of community sector organisations, and looking back now I suspect that's what led me to want to return.

What led you to working in the area of domestic and family violence?

Graduating from social work my goal was to work in social policy, because I felt it presented the greatest opportunity to support and influence better outcomes for people. I worked in child protection and at the Equal Opportunity Commission and then disability services, eventually managing the Disability Services

Commission's policy and program transition to the NDIS.

While at DSC I met phenomenal women advocates and leaders with lived experience and professional experience who opened my eyes to the appallingly disproportionate rates of violence and abuse experienced by people with disability, and by women with disability in particular. The absence of integrated system responses to the intersection of gender-based violence and disability was deeply troubling and I did not want to turn away from that.

When the role of Director Family and Domestic Violence was advertised with the Department of Communities, I had a lightbulb moment realisation that this was the space in which I wanted to work. I applied for the role and to my enormous surprise and delight was appointed to it. I brought a lot of policy experience to the role, but I was not prepared for the scale of my learning curve in terms of the complexity of this area. I'm immensely grateful to the teams, sector colleagues, communities, and victim survivors whose generous sharing of their deep knowledge and lived and practice expertise informed the work and my own understanding.

How would you describe Ruah's domestic and family violence service model?

The foundation of our work is a strengths-based empowerment approach. We support victim survivors to establish their immediate safety, and then to work with that person to plan what they need to maintain that safety and create the stability that will enable them to move forward into recovery and healing.

What that takes depends on the person's individual needs, and wherever we can, we provide an integrated response. In addition to advocacy and safety planning we can offer crisis accommodation, legal support, financial counselling, therapeutic counselling, psychosocial support, help with housing, and alcohol and other drug services.

Our first principle is always safety, and this is underpinned by an extremely strong clinical governance and quality framework. Ruah's exceptional frontline staff anchor this in a deeply personcentred approach that's guided by our clients as the foremost experts in their own lives and their own safety.

Advocacy is a constant thread through all elements of our work. We are fierce advocates for our clients, and we take very seriously our responsibility to ensure their voices are heard and their needs recognised. A key outcome we work towards with women and children is building and strengthening their own capacity for self-advocacy. And in our advocacy for system change we're seeking to reframe the narrative because we are passionate about ending – not just managing – complex social issues such as family and domestic violence.

How do staff at RUAH walk alongside a victim-survivor from initial contact throughout their journey?

From the outset, how we work alongside someone is guided by safety and by our commitment to providing support if we can. We will not turn people away if we can find a way to assist. Our clients trust us with their support and their personal information, and we take that very seriously. We value that relationship and see it as the enabler of ongoing connection that increases the likelihood that people will continue to reach out to for help if they need it.

We support our clients to be the authors of their own plans to sustain their safety and create the conditions for recovery and healing. Our role is to enable that journey of empowerment through connection and integrated trauma-informed and culturally secure support.

We support others to walk alongside us and each other, safely, as part of their own healing and empowerment journeys. Building on shared understanding and shared strengths is an essential part of how we walk together, and of how we recognise, and value lived experience throughout all that we do.

Does RUAH provide any support for family of victim-survivors?

We are guided by our clients as to what is helpful to them in how we engage with their families. We work with families to plan for safety and recovery, and to support their understanding of how they can assist in this.

We support both women and their children, recognising that children who have experienced family and domestic violence are victim-survivors and require dedicated services that respond directly to their experience.

Has RUAH noticed any trends arising for victim-survivors presenting to their domestic and family violence service?

Like many others we are alarmed by then apparently increasing severity of violence that women and children are reporting.

This is particularly so for sexual violence in intimate partner relationships. Near fatal strangulation is also common.

The legislative changes and increased awareness of NFS will no doubt have increased reporting, but pornography is also having a huge impact by normalising this and other dangerous practices.

Technology enabled abuse is also increasing. It includes image-based abuse, surveillance, movement tracking, harassment and intimidation through messaging and banking platforms, and children being provided with mobile

phones to increase opportunities for monitoring, control, and creating fear.

Of no surprise are the trends we are seeing that are a direct result of the housing shortage. Women and children are staying longer in our refuges because housing options are limited. A greater proportion of our staff support to clients is directed to exploring housing. In the community, we are seeing more women and children becoming homeless.

What are some of the challenges the domestic and family violence sector is currently facing?

Like so many other industries, workforce supply is a huge challenge. Its impact on services is compounded by low wages, by the challenges of meeting the cost of providing training, and by the absence of a common workforce development framework and industry standards.

The complexity of family and domestic violence appears to be increasing and yet our responses continue to be siloed and with insufficient attention to intersectionality and co-occurring issues.

Historical underfunding and inconsistent funding persist and erodes the effectiveness of services. Time spent on fundraising to make up shortfalls takes time away from direct service provision to people in need to support. In addition, insufficient resourcing creates real risks for service quality and coverage.

What are the top three issues, in the area of domestic and family violence, that require urgent attention?

There is no one solution to family and domestic violence. Diverse responses are in place across Western Australia, but are often fragmented and uncoordinated, operating in silos and diminished by the impact of competitive tendering. We are better together - creating more opportunities for collaboration, shared learning and collective action will amplify our actions and increase our impact.

The gaps in our data are massive, as are the barriers to sharing it. We can't hope to sufficiently understand the issue or measure the impact of our responses without eyes on the problem. Our frontline services are in a position to generate profound insights that can inform policy making, commissioning service provision, as well as live information to support webs of accountability around individuals using violence. We need better, joined up data collection and the ability to draw on data to inform our work. Progress reporting is one example of an opportunity to do this much more effectively.

We need to get real about the challenge of ending family and domestic violence. Until we work out what it will take to get buy-in from the individuals, organisations and institutions that hold the most power and influence in our community, we will continue to be constrained in our impact.

Where would you like RUAH's domestic and family and violence services to be three years from now?

My vision is that we will have expanded our focus into early intervention and recovery services that increase the likelihood that we can have real impact towards ending family and domestic violence

This will include a much greater focus on early intervention and recovery, to change the future for children who have experienced family and domestic violence.

I want us to build our impact measurement and our knowledge of what works.

I want our services to be part of collaborative, collective action for increased impact across sectors and the entire community. I want to extend the spectrum of people's lived experience that informs and supports our impact.

We are working towards realising all of this through our Ruah Centre for Women and Children, opening in 2024. In three years' time, I look forward to celebrating that outcome and reviewing all that we have learned!

What gives you hope in the work that you do?

Every day I see strength, resilience, courage, and the capacity to rise in the most extreme adversity and against entrenched, powerful system barriers. It doesn't stop, and it demonstrates our enduring ability to hold hope in our hearts for something better, something good, something worth striving for.

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