

Consultation paper

Development of a Queensland domestic and family violence perpetrator strategy

August 2023

**Warning**

This paper discusses domestic and family violence and may be distressing to some readers.

**Where to seek help**

If you, or someone you know is in immediate danger, please contact police on Triple Zero (000). If you are in Queensland and the matter is not urgent you can contact Policelink on 131 444 or visit the Queensland Police Service website [www.police.qld.gov.au/domestic-violence](http://www.police.qld.gov.au/domestic-violence)

If you or someone you know needs help, then the following services are available to assist.

* DVConnect is a 24 hour Crisis Support line for anyone impacted by domestic or family violence. They can be contacted on 1800 811 811 or you can visit [www.dvconnect.org](http://www.dvconnect.org)
* Mensline (DVConnect) is a free and confidential helpline that assists men to change their abusive behaviours or to access safety from abuse, and can be contacted on 1800 600 636 between 9am and midnight, 7 days a week. You can also visit [www.dvconnect.org/mensline/](http://www.dvconnect.org/mensline/)
* Lifeline is a 24-hour telephone counselling and referral service. They can be contacted on 13 11 14 or you can visit [www.lifeline.org.au](http://www.lifeline.org.au)
* Kids Helpline is a 24-hour free counselling service for young people aged between 5 and 25. They can be contacted on 1800 55 1800 or you can visit [www.kidshelpline.com.au](http://www.kidshelpline.com.au)
* Suicide Call Back Service offers free professional counselling services and can be contacted on 1300 659 467 or you can visit [www.suicidecallbackservice.org.au](http://www.suicidecallbackservice.org.au)
* Beyondblue is a mental health service and can be contacted on 1300 22 4636 or you can visit [www.beyondblue.org.au](http://www.beyondblue.org.au)

**Disclaimer**

The material presented in this consultation paper and the discussion of possible actions or options do not represent Queensland Government or departmental policy. They are presented for the purposes of guiding discussion and consultation only.

**Message from the Attorney General**

The Queensland Government is committed to preventing and responding to all forms of domestic, family and sexual violence in our communities. The impact of domestic and family violence has far-reaching social, emotional, and economic impacts for victim-survivors, particularly women, children, and young people.

The Queensland Government is continuing to address the causes of domestic and family violence with a 35 per cent increase in funding allocated for perpetrator programs in 2023-24. Additional funding of $3 million per year will help mainstream perpetrator intervention services meet increased demand and better support victim-survivors. This brings the total financial support for perpetrator programs in 2023-24 to $15.3 million.

A Queensland Domestic and Family Violence Perpetrator Strategy (Strategy) is being developed to further strengthen and guide a whole-of-Government approach to responding to persons using violence as part of our commitment to end domestic and family violence in Queensland. It is intended to bring together the progress we have made so far and support our continuing vision for a Queensland free from domestic and family violence.

The Strategy is intended to respond to findings from the Queensland Death Review and Advisory Board (DFVDRAB) 2019-20 Annual Report, which outlined several recommendations regarding service system issues in responses to victim-survivors and persons using domestic and family violence and their children. It will also reflect what we heard from the Women’s Safety and Justice Taskforce (Taskforce), building on their extensive consultation with key stakeholders across Queensland, including victim-survivors, the judiciary, police, service providers, the legal profession, policy makers, academics, and service providers.

The Taskforce recognised the importance of interventions to change the behaviour of persons using violence as part of an integrated response to help keep victim-survivors of domestic and family violence safe. The Queensland Government response to the Taskforce’s report, *Hear Her Voice – Report One: Addressing coercive control and domestic and family violence in Queensland*, is providing the foundation for a long-term framework to guide our work in strengthening responses to all people who use violence.

We know that government plays an important role in preventing and responding to persons using violence – the Strategy will help us identify where our efforts should be focused. But we also acknowledge that government acting alone cannot achieve an end to domestic and family violence. We need to work together across government, business, and communities, as well as in schools, universities, TAFEs and workplaces.

Through this consultation process, we want to continue to build on what we have heard so far. To make sure we get this right, this consultation process will help the Government understand the community’s views on how we can strengthen our current responses to preventing and responding to persons using violence and support a conversation about the priorities and actions to get us there. Most importantly, it will help us better understand how we can work together to achieve this.

**Hon Yvette D’Ath MP**

Attorney-General and Minister for Justice,

Minister for the Prevention of Domestic and Family Violence,

Leader of the House

**Contents**

[Introduction 5](#_Toc141705691)

[What is the purpose of this consultation paper? 5](#_Toc141705692)

[Have your say 5](#_Toc141705693)

[How your information will be used 6](#_Toc141705694)

[Background 6](#_Toc141705695)

[Terminology 7](#_Toc141705696)

[Issues for consideration in developing a perpetrator strategy in Queensland – are we on the right track? 7](#_Toc141705697)

[Primary prevention 8](#_Toc141705698)

[Preventing violence before it occurs 8](#_Toc141705699)

[Early Intervention 9](#_Toc141705700)

[Responding early to persons using violence 9](#_Toc141705701)

[Supporting young people who use violence 10](#_Toc141705702)

[Response 11](#_Toc141705703)

[Strengthening perpetrator interventions 12](#_Toc141705704)

[Current state of perpetrator interventions in Australia 12](#_Toc141705705)

[Expanding perpetrator interventions across a continuum of need and risk 12](#_Toc141705706)

[Aboriginal and Torres Strait Islander led responses to family violence 13](#_Toc141705707)

[Systemic reform 14](#_Toc141705708)

[Holding persons using violence accountable requires a system wide approach 15](#_Toc141705709)

[Building an effective system of accountability 16](#_Toc141705710)

[Improvements to data collection, monitoring and evaluation are required to inform future reform 17](#_Toc141705711)

[References 19](#_Toc141705712)

[Appendix 1 - Observations from the DFVDRAB Annual Report 2019-20 21](#_Toc141705713)

[Appendix 2 - Observations from the Women’s Safety and Justice Taskforce 22](#_Toc141705714)

# Introduction

The Queensland Government is committed to strengthening its responses to preventing and responding to domestic and family violence. We know that we cannot end domestic and family violence without a clear and sustained focus on supporting persons using violence to challenge and change their harmful behaviours. While the responsibility to stop using violence belongs solely to the person using violence, we also know people need support to change their behaviours. We can all play a part in preventing violence before it starts, and when violence does occur, we can all play a part in challenging and supporting persons using violence to get the help they need to change.

That is why the Queensland Government is developing a new strategy that brings persons using domestic and family violence into greater focus. Aligned with the *Domestic and Family Violence Prevention Strategy 2016-2026*, the Strategy is proposed to include four areas of focus: prevention, early intervention, response and systemic reform. Each focus area is expected to include specific approaches that will guide the Queensland Government’s future actions to deliver on the Strategy.

The Strategy will acknowledge all forms of domestic and family violence including physical or sexual abuse, emotional or psychological abuse, economic abuse, systems abuse, threatening behaviour and coercive control. It will be designed to include responses to all persons using violence, including men, women, and young people. However, we know and recognise that domestic and family violence is a gendered issue, and that the majority of persons using violence are men.

To inform the Strategy, the Queensland Government is inviting feedback from all Queenslanders. We recognise that the challenges to strengthening our system and developing a community wide approach to preventing and responding to persons using violence, are well documented, researched and advocated for. This includes the key findings of the DFVDRAB 2019-20 Annual Report and the Taskforce reports. This consultation process is focused on ensuring that the new Strategy captures our long-term reform priorities appropriately and that associated government-led responses best deliver change for Queensland.

## What is the purpose of this consultation paper?

This consultation paper supports our current examination of how best to respond to persons using violence. It is framed around the four areas of focus: prevention; early intervention; response; and systemic reform. It outlines the growing evidence relating to persons using violence and how best to respond to their behaviours, while keeping victim-survivors safe.

The paper has been developed to support discussion and reflection on the findings of the Taskforce and DFVDRAB reports and how we can effectively strengthen our current approach to responding to persons using violence. The Taskforce was clear in its findings that more needs to be done to improve system responses, including prevention and early intervention, so that persons using violence are held accountable for their actions, while being supported to change their abusive behaviours.

Your feedback will assist us to develop a Strategy that will guide a long-term, whole of government and community approach to working with persons using violence.

# Have your say

We want to hear your views. If you have used violence against a partner or family member, we would like to know what helped you, what made things more difficult for you to seek support to change your behaviours and what you think needs to change to make it easier to get the help you need. If someone close to you who has used violence, we would like to know what helped them or made it harder for them to ask for support to change their behaviours.

If you, or someone close to you, has lived experience of domestic and family violence, we would like to know what you think needs to change for us to better respond to persons using violence.

If you are employed to support people who use violence against a partner or family member – including supporting them to navigate the civil and criminal justice system – or if you are an expert or researcher, we would like you to tell us what you think works well and why, what you see as barriers or issues and what you think needs to change.

To guide you in responding to the topics presented in this paper, we have asked a series of questions throughout. You may wish to respond to all these questions, or only those that you are interested in. You may wish to also raise additional relevant matters.

Submissions in response to this consultation paper can be made until **22 September 2023.**

Individuals and organisations can make a submission by:

**By email** at: [ConsultationOWVP@justice.qld.gov.au](mailto:ConsultationOWVP@justice.qld.gov.au)

or

**By mail** at:

Women’s Safety and Violence Prevention

Department of Justice and Attorney-General

GPO Box 149

BRISBANE QLD 4001

If you have any questions, please email us at [ConsultationOWVP@justice.qld.gov.au](mailto:ConsultationOWVP@justice.qld.gov.au)

For more information, please visit [www.justice.qld.gov.au/DFVPerpetratorStrategyConsultation](http://www.justice.qld.gov.au/DFVPerpetratorStrategyConsultation)

# How your information will be used

Any personal information you include in your submission will be collected by the Department of Justice and Attorney‐General (the Department) for the purpose of obtaining comment on the content outlined in this paper. Submissions may be referred to in public documents in a way that does not identify individuals. Your submission may also be released to other government agencies as part of the consultation process.

Submissions may be subject to disclosure under the *Right to Information Act 2009*, and access to submissions will be determined in accordance with that Act.

# Background

In its 2019-2020 Annual Report, DFVDRAB made several recommendations regarding service system issues in response to victim-survivors of domestic and family violence and persons using violence.

Specifically, recommendation 9 of the Report recommended the Queensland Government develop a standalone, system-wide strategy for responding to all perpetrators of domestic and family violence, regardless of their level of risk, with a focus on early detection, intervention, accountability, and prevention.

In response, the Queensland Government committed the Department of Justice and Attorney-General, in close collaboration with Queensland Police Service and Queensland Corrective Services and with support from other relevant agencies, develop a strategic, long-term framework to guide the Queensland Government’s work in strengthening responses to all perpetrators of domestic and family violence. This will align with the *Domestic and Family Violence Prevention Strategy 2016-26* and its action plans.

Your feedback in response to this consultation paper will inform the development of the Strategy.

# Terminology

Terminology used to discuss domestic and family violence is continually evolving. Acknowledging this, it is proposed that the terminology throughout the Strategy should build knowledge and awareness and not serve as legal definitions. The definitions to be adopted in the Strategy should reflect what we have learned so far and acknowledge that learning will continue over the life of the Strategy.

One example of this is the use of the phrase ‘**persons using violence**’, which is more frequently used in place of the term ‘**perpetrator’** to refer to a person who uses a variety of harmful behaviours to hurt, intimidate and/or control another person whom they have an intimate, family or informal care relationship with.

The term ‘**person/s using violence**’ is used throughout this paper in recognition of a person’s ability to undergo personal development, be accountable for their actions, and transform their behaviours. It also acknowledges that many persons using violence, particularly women, children and young people using violence, have been victims of violence themselves. Persons using violence may be less likely to engage with support services and attempt to change if they feel that once labelled as ‘**a perpetrator**’ they will always be known as a perpetrator.

The use of the word perpetrator is retained when discussing the intervention system, including programs and responses.

**Consultation questions**

1. In the development of the strategy, do you support the use of the term ‘persons using violence’ when referring to individual people? Why or why not?

# Issues for consideration in developing a perpetrator strategy in Queensland – are we on the right track?

A preliminary analysis of the key issues, data and research relating to perpetrator interventions currently available indicates that some progress has been made in responding to persons using violence, however, as highlighted in the DFVDRAB and Taskforce findings, there are gaps which need to be addressed. Broad focus areas highlighted for further consideration to strengthen responses to people using violence in Queensland include:

* Improving primary prevention activities to address the factors that lead people to use of violence
* Increasing early intervention initiatives to proactively address early signs of violence
* Building the capacity of perpetrator interventions and service responses to be expanded across a continuum of need and risk and take an intersectional and trauma informed approach
* Expanding the perpetrator intervention system beyond the justice system response to include other social and health service systems
* Building a specialist workforce that has the capacity and capability to effectively respond to persons using violence
* Improving data collection, monitoring and evaluation

Using our learnings so far, we have identified a potential vision, purpose, and guiding principles of the Strategy for stakeholder consideration:

**Vison** - Persons using violence are held to account, engaged, and connected to support, for a Queensland free from domestic and family violence

**Purpose** - To prevent domestic and family violence and support victim-survivor safety, by guiding a whole-of-Government response that brings persons using domestic and family violence into focus in Queensland

**Guiding principles** –

* Preventing domestic and family violence begins with addressing the cultural norms, structures and practices that condone and enable violence to occur
* The safety of victim-survivors and children is at the forefront of all perpetrator interventions
* Aboriginal and Torres Strait Islander peoples and communities are supported to work in a holistic and culturally safe and sensitive way to address domestic and family violence
* Aboriginal and Torres Strait Islander peoples are enabled to design and deliver strategies and responses aimed at reducing violence in their communities
* In order to support meaningful behaviour change, perpetrator interventions are accessible, integrated, trauma-informed and culturally responsive and respond to the diverse needs of persons using violence
* Perpetrator interventions and responses are informed by evidence, data, ongoing evaluation and supported by resources
* The system is responsible for holding people who use violence accountable for their actions and keeping them in view

**Consultation questions**

1. Are these the right focus areas for the strategy? Are there other key areas that should be considered?
2. Does the vision, purpose and guiding principles provide the right foundation for the Strategy?

**Important note**: The Taskforce considered Queensland’s existing response to people using domestic and family violence in *Hear Her Voice Report One – Addressing coercive control and domestic and family violence*. Key observations from the Taskforce, and the DFVDRAB Annual Report, are summarised in **Appendix 1 and 2.**

# Primary prevention

**Consultation questions**

1. Do you agree with our approach to using the term ‘person using violence’?

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**Primary prevention** means stopping violence against women from occurring in the first place by addressing underlying drivers. This requires changing the social conditions that give rise to this violence; reforming the institutions and systems that excuse, justify, or even promote such violence; and shifting the power imbalances and social norms, structures and practices that drive and normalise it.

## Preventing violence before it occurs

Domestic and family violence is a symptom of inequality and discrimination based on gender, race and other power imbalances. It is rooted in historically unequal power relations that view women and girls as subordinate to men and boys (Australian Government, 2022). The current research demonstrates that men’s violence against women, including domestic and family violence, is more prevalent, more often used repeatedly and more likely to lead to serious injury, disability, or death. In instances where women use violent behaviour, research suggest that it is frequently motivated by fear and is used in self-defense to protect themselves against violence from their male partners (Flood, Brown, Dembele, & Mills, 2022).

*Change the Story* and *Change the Picture*, developed by Our Watch, points to key factors that most consistently drive violence against women and explain its gendered patterns.

These include:

1. Condoning of violence against women
2. Men’s control of decision-making and limits to women’s independence in public and private life
3. Rigid gender stereotyping and dominant forms of masculinity
4. Male peer relations and cultures of masculinity that emphasise aggression, dominance, and control
5. The ongoing impacts of colonisation for both Aboriginal and Torres Strait Islander people, families and communities, as well as for non-Indigenous people and society

Men have a critical role to play in ending gender-based violence. It is important that men challenge sexism and attitudes that support violence, and be active bystanders in situations where women are experiencing sexual harassment or discrimination on the basis of their gender. There are opportunities for more men to model and highlight positive forms of masculinity, including in online and digital environments (Flood, Brown, Dembele, & Mills, 2022).

Understanding why people use violence and abuse, and how we can help them change their behaviour, is an important part of addressing domestic and family violence, including coercive control.

There is agreement in the national and international research that violence against women arises in the social context of gender inequality, and that this violence has distinct gendered drivers (Our Watch, 2023).

Domestic and family violence impacts people across all ages and sociodemographic groups, but disproportionately affects women and children. Notably, domestic and family violence does not exclusively occur in heterosexual cisgender relationships, but also impacts people of diverse sexual orientation, gender identity or intersex people (LGBTIQ+).

Due to increased inequality and discrimination, women who are young, who live in regional and rural areas, who are Aboriginal and/or Torres Strait Islander, who have a disability and/or are from culturally and linguistically diverse (CALD) backgrounds are disproportionately more likely to experience violence (State of Queensland, 2016). Children are recognised as victim-survivors of domestic and family violence in their own right.

Because the drivers of violence are entrenched at every level of society, prevention activities are required to also be implemented at every level of society.

**Consultation questions**

1. How can the Strategy support the community, including men and boys, to be more proactive in addressing the drivers of domestic and family violence?

**Important note**: In response to recommendation 9 of *Hear Her Voice – Report One*, the Queensland Government has committed to developing and implementing a comprehensive and integrated plan for the primary prevention of violence against women in Queensland. A separate consultation process will be undertaken to support this project.

# Early Intervention

**Early intervention**, also known as ‘**secondary prevention**’, refers to interventions that occur when the risk of violence is already present. It aims to change the trajectory for individuals who use violence or who are at risk of using violence.

## Responding early to persons using violence

Early intervention aims to identify and provide assistance to individuals and families experiencing domestic and family violence with the goal of intervening at early signs of violence to prevent escalation, recurrence, and reduce long-term harm (Australian Government, 2022). Early intervention methods are designed to work in more targeted ways where there are early signs of violence by specific people, communities or in particular contexts, as well as working with persons using violence to assist them to change their behaviour. This includes supporting and working with children and young people to overcome the immediate and long-term psychological, emotional and physical impact of domestic and family violence in order to reduce the risk of intergenerational transfer of abusive behaviours and values in adulthood (Cameron, 2016).

Through an increase in understanding and focus on domestic, family and sexual violence, we are learning that it is possible to reduce the risk of people developing violent and abusive behaviours (Flood, Brown, Dembele, & Mills, 2022). While research tells us there is no single cause or factor that leads to domestic and family violence, we know that there are a number of risks factors that increase the likelihood of a person perpetrating violence (Morgan & Chadwick, 2009). Opportunities for effective early intervention at pivotal transition points in a person’s life when domestic and family violence is more likely to emerge or escalate include, but is not limited to: during pregnancy and postpartum; at the birth of a first child; at times of particular stress in a relationship, including during and after relationship breakdown and at times of financial stress; and during natural disasters (Commonwealth of Australia, 2021).

Some other known risk factors include:

* **Individual level** 
  + Low self-esteem and depression
  + Emotional dependence and insecurity
  + Anger and hostility, with a lack of nonviolent social problem-solving skills
  + Belief in strict gender roles, with a desire for power and control
  + Heavy alcohol and substance misuse and abuse
  + History of domestic, family and sexual violence in childhood
  + Attitudes accepting or justifying violence and aggression
* **Community level**
  + Communities with high rates of poverty and limited educational and economic opportunities
  + Lack of support networks and professional services
  + Limited awareness of available support services, including culturally appropriate support services
* **Societal level**
  + Traditional gender norms and gender inequality
  + Cultural norms that support toxic ideals of masculinity

**Source** – (State of Victoria, 2021); (Commonwealth of Australia, 2021); (Flood, Brown, Dembele, & Mills, 2022)

Conversely, more research is needed to better understand protective factors that may help to prevent and limit the use of violence to inform early interventions and work with perpetrators to desist using violence (Flood, Brown, Dembele, & Mills, 2022).

### Supporting young people who use violence

*“Childhood exposure to domestic, family, and sexual violence is a significant risk factor for later perpetration of violence”*  (Flood, Brown, Dembele, & Mills, 2022)

Children and young people can be both directly and indirectly affected by domestic and family violence. Which is why it is important they are recognised as victim-survivors in their own right, and not extensions of their parents, or ‘secondary victim-survivors’ of family violence.

Current research demonstrates that the impacts of domestic, family, and sexual violence can have long-term consequences for children and young people’s friendships and relationships, as well as their participation in social and public life. In particular, children and young people from refugee/migrant communities, who are Aboriginal and/or Torres Strait Islander, living with disability, and/or who are LGBTIQ+ may face additional and intersecting risks and barriers impacting their safety and ability to access support (State of Victoria, 2021).

*“Domestic and family violence affects children and young people’s physical and mental wellbeing, development and schooling, and is the leading cause of children’s homelessness in Australia”* (Campo, 2015)

The research also tells us that many adults using domestic and family violence were themselves victim-survivors of violence as children, highlighting the importance of providing support and trauma recovery for children affected by domestic, family, and sexual violence as a way of preventing and responding early to violence (Flood, Brown, Dembele, & Mills, 2022).

As a result, there is now an increasing recognition across Australia and internationally of the significant harms and impacts of adolescent family violence. Adolescent family violence refers to the use of family violence (including physical, emotional, psychological, verbal, financial and/or sexual abuse) by a young person against their parent, carer, sibling or other family member within the home (Royal Commission into Family Violence, 2016).

While research in this area has developed in recent years, there remain significant gaps in the current understanding of this form of family violence (Fitz-Gibbon, Meyer, Boxall, Maher, & Roberts, 2022). A research report released by Australia’s National Research Organisation for Women’s Safety (ANROWS) in 2022, highlighted the need for young people using adolescent family violence to be seen, and responded to, as victim-survivors of domestic and family violence themselves, in order to reduce the risk of Intergenerational violence, minimise the impacts of adolescent family violence on affected family members, and ensure that domestic and family related trauma experienced by young people is addressed (Fitz-Gibbon, Meyer, Boxall, Maher, & Roberts, 2022).

The report, through consultation with young people who self-reported using violence in the home, identified a number of supports needed to address their use violence. These included:

* a safe space or place for them to go
* someone to talk to
* professional support
* education for parents and carers on abusive behaviours and their impact and the intergenerational cycle of violence
* a supportive school environment, including teachers who respond appropriately and consistently to disclosures of using violence

**Source** – (Fitz-Gibbon, Meyer, Boxall, Maher, & Roberts, 2022)

Adolescent family violence occurs in a specific context and requires interventions that treat it differently from adult-perpetrated domestic and family violence. Given young people’s need for care and protection, services responding to adolescent family violence require a specialist approach.

**Consultation questions**

1. How should the Strategy support early intervention with people using violence to reduce recurrence, escalation and long-term harm caused by domestic and family violence?
2. Where should we be focusing our attention to support people using or at risk of using violence to get help early?
3. How should the Strategy support early and effective responses to young people using, or at risk of using, violence?

# Response

**Response**, also commonly referred to as ‘**tertiary intervention**’, which refers to interventions used to address existing violence. Response interventions are designed to support victim-survivors and hold persons using violence to account, with the aim of preventing or reducing the reoccurrence of violence.

## Strengthening perpetrator interventions

### Current state of perpetrator interventions in Australia

Currently, perpetrator interventions are responses that directly engage with a person due to their violent and abusive behaviour, or their risk of using violence and abuse. This includes our court systems and police service, who make decisions or orders that directly relate to a person’s interaction with the people they have used violence against. It also includes programs and services targeted at working with persons using violence to support them to address their violent behaviours and attitudes, for example group behaviour change programs (also referred to as perpetrator intervention programs) or individual counselling.

Current perpetrator intervention include:

* behaviour change programs, which include group-based programs, that may also include individual case management of persons using violence, and support for partners and children
* justice system responses (civil and criminal), including protection orders and sanctions for breaching the conditions of the order/s
* interventions from agencies that a person might have contact with, such as mental health, child protection and alcohol and other drugs services
* informal interventions from peers and community

There are several different pathways into perpetrator interventions. A common pathway is through the police following a domestic and/or family violence incident. It is common at this stage for the person using violence to be referred to a behaviour change program, while also becoming engaged with the civil or criminal justice system. While all pathways can lead to direct referrals into a behaviour change program, engagement is not always mandatory, and when it is, there may be access barriers such as lengthy wait times or the person is assessed as ineligible for the program (State of Victoria, 2023).

A person using violence may also seek help in an effort to address their use of violence, however, according to the recent monitoring report published by the Office of Family Violence Reform in Victoria, this behaviour is rare among persons using violence. The report does however acknowledge that there is an important opportunity for the range of services a person might connect with to encourage engagement with interventions (State of Victoria, 2023).

### Expanding perpetrator interventions across a continuum of need and risk

The Taskforce emphasised the importance of targeting the right interventions at the right time according to the relevant issues in each case, such as cultural sensitivities or mental health and substance abuse concerns. It also noted the importance of building in regular and consistent assessment of a person’s level of risk and readiness to change (Women's Safety and Justice Taskforce, 2022).

It is necessary for perpetrator interventions to be accessible, integrated, trauma-informed, culturally responsive and respond to the diverse needs of persons using violence in order to support meaningful behaviour change. The growing body of research highlights two key areas of focus when looking to expand and build the capacity of perpetrator interventions to take an intersectional approach when responding to and supporting persons using violence.

“*… if the basic needs (notably, accommodation) of participants in MBCPs* [men’s behaviour change programs] *are not being met, their capacity to engage meaningfully in the program is significantly curtailed.”* (Commonwealth of Australia, 2021)

The first being the importance of perpetrator interventions, including behaviour change programs, being adapted to the lived experiences of people from a wide range of backgrounds. For example, behaviour change programs must be developed to respond to the specific needs and issues of people in rural and remote locations, Aboriginal and Torres Strait Islander peoples, culturally and linguistically diverse people, people with disability, and people from LGBTIQ+ communities. Perpetrator interventions also must be able to respond to diverse forms of perpetration, such as sibling sexual assault and violence involving members of the extended family, as well as domestic violence. Each of these forms of diversity has unique aspects that require a unique response (ANROWS, 2020).

The second is a need for investment in perpetrator interventions that can address co-occurring issues which may contribute to the frequency or severity of domestic and family violence in a more comprehensive way, including interventions that address mental health, substance misuse, housing issues and employment (Bell & Coates, 2022). Recent literature demonstrates that short-term perpetrator interventions may not be effective and should be replaced or strengthened with programs that include wraparound and holistic supports (Bell & Coates, 2022). Consideration should be given to the introduction of routine screening of domestic and family violence perpetration in mainstream drug and alcohol and mental health services, with funding for workforce development to address practitioner reluctance to jeopardise the therapeutic relationship by screening for domestic and family violence (Meyer, Helps, & Fitz-Gibbon, 2023).

*“Perpetrator programs need to work as part of an integrated system so that her voice and her safety [the victim-survivor] is at the heart of any intervention”* (Women's Safety and Justice Taskforce, 2022)

### Aboriginal and Torres Strait Islander led responses to family violence

*“We cannot support change for men without restoring the harmony in their relationship with women, children and the broader community”* (Healing Foundation, et al., 2017)

Current literature acknowledges and emphasises the need to understand the disproportionate levels of family violence in Aboriginal and Torres Strait Islander communities in the context of historical and continued colonial and systemic violence. An effective strategy to prevent and reduce the perpetration of domestic and family violence by Aboriginal and Torres Strait Islander peoples must embed cultural knowledge and perspectives, recognising how the cumulative impact of dispossession, child removal, family breakdown, substance misuse and exposure to violence has given rise to a cycle of intergenerational trauma (Our Watch, 2018). It must consider how this has impacted on the prevalence of alcohol and substance misuse, mental health issues, poverty and overcrowded housing (Healing Foundation, et al., 2017).

*“While communities should collectively be engaged to identify their healing needs and aspirations, the many strong Aboriginal and Torres Islander men must be supported to lead healing work with men and boys. As Aboriginal and Torres Strait Islander women in some communities live with significant levels of violence, they cannot continue to be burdened with responsibility for improving safety for themselves and their children.”* (Healing Foundation, et al., 2017)

To date, strategies to reduce disproportionate levels of violence in Aboriginal and Torres Strait Islander communities have predominately relied on a foundation being set by western approaches to perpetrator interventions. In its 2017 report, the Healing Foundation, highlighted the importance of any strategy to prevent and reduce family violence in Aboriginal and Torres Strait Islander communities being positioned within broader community strategies that support individual, family and community healing. It emphasised that any program that seeks to reduce and prevent family violence as an outcome should be developed through a community driven process that respects and supports local cultural governance. The community driven process should capture community objectives and indicators of success and identify ways to measure outcomes (Healing Foundation, et al., 2017).

In the same report, the Knowledge Circle, made up of nationally recognised Aboriginal and Torres Strait Islander violence prevention experts, highlighted that Aboriginal and Torres Strait Islander men do not live independently from women and their community. It emphasised that collective cultures require issues to be addressed in a collective context and so violence prevention work must also be placed within a broader community context.

The growing literature in this area demonstrates the development of holistic programs as the desired approach for Aboriginal and Torres Strait Islander communities because holistic care fulfils the “cultural needs of participants to facilitate healing” (Andrews, et al., 2021). The Taskforce, throughout its extensive consultation to inform its recommendations, heard consistently about the importance of culturally embedded, community-led approaches that address underlying intergenerational trauma and impacts of colonisation (Women's Safety and Justice Taskforce, 2022).

It also heard that historic injustices against Aboriginal and Torres Strait Islander peoples have led to high levels of systemic mistrust, distrust of the police, resentment and anger. These factors all detrimentally impact on both persons using violence and victim-survivor engagement with the criminal justice and support systems (Women's Safety and Justice Taskforce, 2022).

The need for flexible services that address a range of service requirements was also a common theme. This recognises that the experiences of family violence or child and family vulnerability are not linear, and that risk is dynamic, so people accessing support services will connect with or leave them at different points. In its findings, the Taskforce reported that there is a need for more services by and for Aboriginal and Torres Strait Islander peoples that provided culturally safe support, drawing on the strengths of culture to support safety and healing. It also reported that these services need to be led, developed and delivered by the community.

*“The shortage of culturally appropriate programs for Aboriginal and Torres Strait Islander perpetrators was a concern raised by multiple stakeholders”.* (Women's Safety and Justice Taskforce, 2022)

The Taskforce identified an urgent need to increase the cultural capability of the entire service system to provide more cultural safety at every point in the system. It heard from the community about a lack of cultural capability across the service system, interfering with the ability of both mainstream and specialist services to provide appropriate and effective responses to victim-survivors and persons using violence. In regional areas, this was exacerbated by the high turnover of staff, which limited the ability of workers to build the required level of local cultural awareness and connection. This applied to both non-government services and agencies, such as police and health workers, and hampered their ability to develop trust between services and the community.

**Consultation questions**

1. To inform the Strategy it would be helpful to know if you or someone you know sought assistance as a person using violence:
   1. If so, what worked?
   2. What could have been done better?
2. How can the Strategy support interventions that respond to a person’s intersecting needs and take a trauma-informed approach?
3. How can the Strategy improve access to services that can respond to the complex needs of persons using violence throughout Queensland?
4. What approach do you think the Strategy should take to respond to women who use violence?
5. How could the Strategy support engagement with people who are at a high risk of re-offending or who are in custody for offences relating to domestic and family violence?
6. How can the Strategy assist the domestic, family and sexual violence sector to build a specialist workforce that has the capability and capacity to effectively respond to persons using violence?

# Systemic reform

**Systemic reform** focuses on building the capacity of the mainstream and specialist service system to function as effective pathways to support people who use violence to address their abusive behaviours, while keeping them in view and holding them to account for their actions.

## Holding persons using violence accountable requires a system wide approach

Research on persons using violence often comes from data related to the criminal justice system, such as police statistics, criminal court data and prison census data (Flood, Brown, Dembele, & Mills, 2022). However, those who have pleaded guilty or been convicted make up a small proportion of what is believed to be the overall population of persons using violence, lending to the need to have a system wide approach to identifying and responding to persons using violence (Flood, Brown, Dembele, & Mills, 2022).

Currently there are two dominant forms of accountability within the existing framework for responding to domestic and family violence (ANROWS, 2020). The first form being externally imposed accountability, which is where a person using violence may be held to account for their actions through the justice system. Persons using violence may also become involved with the criminal justice system following incidents of domestic and family violence, or breaches of civil protection orders. There is a systemic assumption that when a person using violence is named as a respondent to a court order and referred to a behavior change program, they have been effectively held accountable by the court. It is also assumed that the behaviour change program will subsequently hold that person accountable (ANROWS, 2020). However, a recent report by ANROWS emphasised that this assumption was not always realistic given that behaviour change programs only had a relatively short period in which to address what might be highly entrenched attitudes and behaviour (ANROWS, 2020).

*“*While a substantial proportion of people engage in violent and abusive behaviour, including acts that meet legal definitions of crime, very few encounter the legal system and fewer still receive any kind of formal sanction.*”* (Flood, Brown, Dembele, & Mills, 2022)

The second form of accountability is one that is currently internally developed through behaviour change programs, with the intention that persons using violence develop a sense of responsibility and commit to being accountable to their partner and children. This form of accountability relies on the development of an internal sense of responsibility for their behaviour, in place of external sanctions (ANROWS, 2020).

It is also important to highlight that mechanisms for persons using violence to be held to account for their actions are not consistently embedded elsewhere in wider human services systems. Keeping a person using violence in view to manage risk is an ongoing challenge for governments across Australia. Human services agencies, particularly housing, mental health, alcohol and other drugs, and child protection services, regularly encounter persons using violence, however the use of violence is not always recognised, or it may be treated as secondary (or not at all) in these contexts (ANROWS, 2020).

The Expert Advisory Committee on Perpetrator Interventions, established by the Victorian Government, drew a clear distinction between accountability and bringing or keeping a person using violence ‘in view’ in its final report published in 2018. It noted that bringing a person using violence into view was originally a call for governments and service systems to widen their focus to persons using violence, as well as victim-survivors, in their effort to end domestic and family violence. However, currently, the concept is being used in the context of individual persons using violence, and the challenges associated with making and keeping them known to the system.

As with the notion of system accountability, there is a critical need to unpack this concept of keeping persons using violence in view and what it means in practice for different services in different settings. The Expert Advisory Committee, in its examination of this, provided relevant questions for consideration, such as, for which services does keeping a person using violence ‘in view’ mean active monitoring? How do they do this, and for how long? What are the risks they must manage in doing so? Most importantly, what should they do once the person using violence is ‘in view’—that is, what are the practical steps they must take to manage the risks they pose and support system accountability?

For sustained accountability, it is important that human services agencies are recognised as an essential part of the broader perpetrator intervention system (Bell & Coates, 2022). With appropriate training and increased information sharing between government and non-government services working together with the justice system and specialist domestic and family violence services, a system can be created to act as a system of accountability, and guide persons using violence towards changing their violent behaviours, their violence-supportive attitudes, and their use of coercive control (Bell & Coates, 2022).

### Building an effective system of accountability

A system of accountability should encompass the range of contact points that the government, broader service system, community and society could be utilising to identify and respond to persons using violence. It is recognised that behaviour change is more likely to happen when the government, the broader service system, community and society are working together to prevent violence happening and intervene early when it does (State of Victoria, 2018). This creates a system of accountability, also commonly referred to as web of accountability, that:

* keeps victim-survivors safe
* identifies persons using violence early
* supports persons using violence to change their behaviour
* holds persons using violence accountable for their use of violence
* keeps persons using violence in view of the system, shifting the responsibility away from the victim

It is acknowledged that establishing an effective system of accountability will take time and requires continuing cultural change across the whole service system (State of Victoria, 2018). Agencies and services across the system need to continue the process of translating the concept of accountability into meaningful and practical guidance for people who work with persons using violence. This includes comprehensive advice on statutory obligations (including information sharing provisions), organisational expectations, and best practice principles for engaging with persons using violence. It also means being clear about the parameters and limitations of staff roles and responsibilities.

Developing a system of accountability does not negate individual accountability. While the system can and should hold persons using violence responsible through the full range of justice and community responses available, only the person using violence can choose to take steps to work on their behaviours and end their use of violence (State of Victoria, 2018). Developing an effective system of accountability should instead be viewed as a critical component to supporting victim-survivor safety, and ultimately, to stop domestic and family violence from occurring.

* + **Systemic and Institutional Accountability -** Government agencies, courts and perpetrator intervention programs hold the person using violence to account
  + **Community Accountability -** Community members surrounding the person using violence hold them to account
  + **Individual Accountability -** A person using violence takes responsibility for their behaviours and takes steps to address those behaviours

**Source** – Langton et al., 2020, ANROWS: Pillars of Accountability

**Figure 1** – Touchpoints that provide opportunities to hold persons using violence accountable (Source – State of Victoria, Family violence reform: Rolling Action Plan 2020-23, Web of Accountability)

* Community touchpoints where messaging can be reinforced:
  + Family members
  + Friends
  + Community networks
  + Workplaces
  + By-standers
  + Neighbours
  + Media
  + Social and sporting clubs
* Workforces with opportunity to identify, respond and refer:
  + Mental Health
  + Health
  + Disability
  + Multicultural
  + LGBTIQ+
  + Gambling and financial counselling
  + Alcohol and Other Drugs
  + Aboriginal and Torres Strait Islander Services (non-DFV)
  + Young people and youth justice services
  + Schools, Universities and TAFE
  + Maternal and child health
  + Aged care
  + Out of home care
* Workforces providing a specialist response, core support or intervention:
  + Perpetrator interventions
  + Specialist DFSV victim services
  + Aboriginal and Torres Strait Islander DFV services
  + Housing and Homelessness
  + Legal Services
  + Corrective Services
  + Courts
  + Police Service
  + Child protection
  + Youth Detention Centres

**Consultation questions**

1. How should the Strategy define perpetrator accountability?
2. What does perpetrator accountability look like across the three mentioned levels of accountability (systemic, community and individual)?
3. Does Figure 1 provide a comprehensive list of touchpoints of accountability or are there others that should be considered in developing the Strategy?

## Improvements to data collection, monitoring and evaluation are required to inform future reform

There is a need to strengthen the evidence base for perpetrator interventions. As noted above, the data available to report on perpetrator interventions are primarily sourced from police and courts. While this data supports our understanding about what happens when violence is detected by police and a person using violence enters the justice system, it only provides part of the picture (AIHW, 2021).

The Australian Institute of Health and Welfare reports that there are important information gaps across the perpetrator interventions system, including:

* **Specialist perpetrator programs** - There is limited data on behaviour change programs, or specialist domestic and family violence services that are responding to a person using violence. Where this data is available, it is collected and reported using different definitions and practices and cannot be used to provide an overview of the sector
* **Characteristics of persons using violence** - There is limited data on characteristics such as age, sex, Indigenous status and country of birth. Detailed data on a person using violence can shed light on how violence is experienced or perpetrated differently across population groups and can be used to show where perpetrators are likely to be misidentified, and who is in most need of protection
* **Data on children and young people** - There is limited data on children and young people who experience and use domestic and family violence. Children and young people should be considered in their own right as they require different types of service responses to meet their needs and manage risk
* **Nationally consistent data** - Where data is being collected, there is limited scope to compare or aggregate data at a national level

**Source** - (AIHW, 2021)

The ways in which persons using violence are held to account has the potential to change the future for both persons using violence and victim-survivors. To ensure the appropriate level of action is being taken, and that this action is effective at intervening with persons using violence, monitoring and evaluation mechanisms are required to report on the outcomes of policies, programs, and initiatives (State of Queensland, 2022-23).

There is a need to advance and broaden the research undertaken in this space, as while there is a need for future research that adopts a comparative design to establish whether an intervention is effective, evaluations should also be designed to improve our understanding of why interventions work, for whom they work, under what conditions they work, and why (Bell & Coates, 2022).

**Consultation questions**

1. How can the Strategy contribute to our understanding of who is perpetrating domestic and family violence?
2. How can the Strategy contribute to building the evidence base about what works (and what does not)?

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# Appendix 1 - Observations from the DFVDRAB Annual Report 2019-20

The DFVDRAB, in its recommendation to the Queensland Government, made several observations that are important to consider when developing this Strategy. These include:

**Perpetrator intervention programs –**

* Perpetrator intervention programs are one part of a broader service system response to holding persons using violence accountable for their behaviour and to help reduce the harm to vulnerable victims and their children
* Misidentification of primary perpetrator of violence-Services need to improve their understanding of the patterns of behaviour used by persons using violence to avoid detection and accountability for their violence.
* DFVDRAB continues to observe issues with the way services identify the person most in need of protection.
* Where victims present with a history of complex trauma, substance misuse, mental health issues or criminal offending, they were more likely to be misidentified as the primary perpetrator of violence.
* There is a need across the domestic and family violence system to improve understanding of how, when and why women may use violence.
* Female perpetrated intimate partner homicides are rarely premeditated and generally occur during an episode of domestic and family violence in which the female is the primary victim.

**Contact with Queensland Police Service -**

* Responding police officers require a working understanding of domestic and family violence to be able to detect underlying patterns of violence, beyond the presence of physical injuries, as well as the strategies that victims use to self-protect.

**Contact with Child Safety -**

* Contact with child safety services is significantly over-represented in filicide cases. Of the filicides that occurred between 2011 and 2019 where there was an identifiable history of domestic and family violence, 88% of children and their families had prior contact with child safety services.
* The failure of services to properly identify, assess or respond to the role of the paternal figure (and primary perpetrator) created opportunities for these offenders to manipulate the system to maintain their power and control over the primary victim and the family unit.

**Need to improve information sharing –**

* Screening and identification of domestic and family violence in health settings is a crucial initial step for services to recognise and respond to indicators of risk.
* Despite victims and persons using violence presenting repeatedly to health and mental health services with risk factors strongly correlated with an increased risk of DFV, there appeared to be limited or no recognition of, and response to, these intersecting issues as potential indicators of domestic and family violence.
* Across contact with health services, a lack of domestic and family violence literacy appeared to hinder screening and the application of risk assessment, thereby limiting the ability of health services to provide effective support, interventions or referrals to specialist services.

**Building the capacity of health care professionals -**

* Screening and identification of domestic and family violence in health settings is a crucial initial step for services to recognise and respond to indicators of risk.
* Despite victims and persons using violence presenting repeatedly to health and mental health services with risk factors strongly correlated with an increased risk of DFV, there appeared to be limited or no recognition of, and response to, these intersecting issues as potential indicators of domestic and family violence.
* Across contact with health services, a lack of domestic and family violence literacy appeared to hinder screening and the application of risk assessment, thereby limiting the ability of health services to provide effective support, interventions or referrals to specialist services.

# Appendix 2 - Observations from the Women’s Safety and Justice Taskforce

The Taskforce, in its recommendations to the Queensland Government relating to perpetrator intervention, observed several limitations with the current intervention system that are important to consider when developing this Strategy.

**Current approach to perpetrator intervention is limited -**

* There is currently no comprehensive approach to guiding perpetrator interventions in Queensland. Stakeholders reflected that the current approach is patchy, disjointed, and inconsistent.
* There are workforce challenges across Queensland, especially in regional and remote areas, to recruit suitable professionals to manage perpetrator intervention programs.
* Many existing intervention programs do not align with other services aimed at addressing issues intersecting with domestic and family violence, such as mental health, drug and alcohol addiction, unemployment, poverty, and housing insecurity.
* There are gaps in evaluations on perpetrator intervention programs in understanding both the influence of contextual factors and how outcomes are achieved.
* There is a critical need to focus on future data collection capability in relation to perpetrator interventions.

**Perpetrator intervention programs are inadequate to responding to current demand –**

* + Currently, there is a one-size-fits-all approach to perpetrator programs in Queensland, with few treatment options beyond group-based behavioural-change programs.
  + It can take at least four to six months for a respondent who is the subject of an intervention order to access a program and that for those who want to participate voluntarily there are delays of up to 12 months.
  + There are community programs that are privately funded or provided on a fee-for-service basis that operate outside government funding and contractual requirements, including the HSQF, compliance with practice standards, and government oversight.
  + There is a deficit in programs run in a way that is accessible and effective for First Nations peoples, LGBTIQ+ people, people from CALD background, people with disability and women who use force.
  + Services struggle to attract, recruit, and keep appropriately qualified staff to run programs and interventions, particularly in remote and regional areas. The casualisation of the workforce and difficulties retaining staff present challenges for facilitating behavioural-change programs.
  + Need to expand range of interventions available-We need a perpetrator intervention strategy that incorporates the full range of responses to perpetrators, including primary prevention and the involvement of mainstream services.

**Case management –**

* + Persons using violence with multiple and complex needs require a case-management approach to help them change their behaviour so that their other needs (such as alcohol and other drugs, mental health, housing, or disability support) can be met.
  + Interventions should be available to support persons using violence to address underlying factors, including alcohol and other drugs, mental health and other relevant issues. In instances where perpetrators are not suitable or fail to attend the intervention, case management should be considered as part of any court orders.
  + We need targeted and intensive perpetrator intervention programs for people who are in custody or on a community correction order.

**Need to build the evidence base on what works –**

* The evidence base about what works is still emerging and should be supported to build a better understanding of the efficacy and value for money of interventions.
* There is currently a lack of diversity in the range of perpetrator interventions and programs. As a result, current offerings are insufficient to meet the needs of Queensland’s diverse population.
* Current responses do not effectively target different levels of risk and readiness to change or manage factors contributing to risk, including substance abuse and mental health issues.
* There is substantial scope for developing, piloting, and evaluating innovative interventions that offer a suite of options to respond to the diverse population of persons using violence.