

Broadening the Focus

Queensland's strategy
to strengthen responses
to people who use domestic
and family violence

2024 to 2028



Queensland
Government

Warning

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

Support for domestic and family violence is available

If you, or someone you know is in immediate danger, please contact the 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

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

- DVConnect is a free 24-hour crisis support line for anyone impacted by domestic and family violence. They can be contacted on 1800 811 811 or www.dvconnect.org.
- 1800 Respect is a 24-hour free information and counselling service for people impacted by domestic, family or sexual violence. They can be contacted on 1800 737 732, 7 days a week or www.1800respect.org.au (telephone and online crisis support).
- 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
- MensLine Australia is a free telephone and online counselling service offering support for Australian men. They can be contacted on 1300 789 978 or you can visit www.mensline.org.au

- Lifeline is a 24-hour telephone crisis support service. They can be contacted on 13 11 14 or you can visit www.lifeline.org.au
- 13YARN is a 24-hour national crisis support line that offers a confidential one-on-one yarning opportunity with a Lifeline-trained Aboriginal & Torres Strait Islander Crisis Supporter for Aboriginal and Torres Strait Islander peoples. They can be contacted on 13 92 76 or you can visit www.13yarn.org.au
- QLife is a free peer support and referral service for LGBTIQ+ people via telephone and webchat. They can be contacted on 1800 184 527 between 3pm and 12am, 7 days a week or you can visit www qlife.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
- Elder Abuse Helpline is a free service that can provide referrals and assist anyone who experiences, witnesses or suspects that an older person is being abused. They are available 9am to 5pm, Monday to Friday at 1300 651 192.
- 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
- Beyondblue is a 24-hour free mental health service and can be contacted on 1300 224 636 or you can visit www.beyondblue.org.au



Need help in your language?
Call 1800 512 451 and ask for an interpreter.

Acknowledgement of Country

The Queensland Government respectfully acknowledges the Aboriginal and Torres Strait Islander peoples in the state of Queensland and acknowledges the cultural and spiritual connection that Aboriginal and Torres Strait Islander peoples have with the land and sea.

We respectfully acknowledge Aboriginal peoples and Torres Strait Islander peoples as two unique and diverse peoples, with their own rich and distinct cultures, resilience, and strengths. We specifically acknowledge the unique history and cultural heritage of Aboriginal and Torres Strait Islander peoples as the First Peoples of Australia. We pay our respects to Elders past, present and emerging.

We are dedicated to the inclusion of cultural knowledge and values as critical factors in the development, implementation and evaluation of strategies and actions to support Aboriginal peoples and Torres Strait Islander peoples. We acknowledge and thank the Aboriginal and Torres Strait Islander peoples who contributed to the development of this Strategy.

Image disclaimer

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Table of contents

Message from the Premier and Attorney-General	2
Queensland’s Strategy at a glance	4
About this Strategy	6
Priority Area 1	11
Priority Area 2	12
Priority Area 3	13
Priority Area 4	15
Implementing this Strategy	17
Towards a shared understanding	19
An effective system of accountability	27
Appendix 1 – Strategic context	29
Appendix 2 – How this Strategy was developed	31
Appendix 3 – Terminology	33
Appendix 4 – Working with diverse cohorts	36
Endnotes	39

Message from the Premier and Attorney-General



**The Honourable
Steven Miles MP**
Premier of Queensland

Queenslanders continue to demand action to see the scourge of domestic and family violence addressed nationally. This national focus is welcome and *Broadening the Focus: Queensland's strategy to strengthen responses to people who use domestic and family violence 2024-2028* (this Strategy) demonstrates the Queensland Government is not only listening, but actively leading reform. Our commitment to ending domestic and family violence in Queensland and continuous advocacy for national responses is unwavering.

Backing this commitment, the Queensland Government has invested more than \$1.9 billion on reforms and initiatives tackling domestic, family and sexual violence and to improve women's safety since 2015. After a decade of reforms, informed by our learnings and a focused effort on supporting victim-survivors, we are now broadening our focus and intensifying our efforts towards people who are using domestic and family violence. We will take action to change attitudes and behaviours towards domestic and family violence, enhance integrated service responses, and strengthen system responses to keep victim-survivors safe.

We believe every Queenslander has the right to feel safe and to be safe, at all stages of their lives and across all settings including in their home, community, school, and workplace. To do this, persons using violence need to be more visible in the justice and domestic and family violence service systems if they are to be held responsible for their actions and supported to stop their use of violence.

This Strategy is dedicated solely to strengthening whole-of-systems and community responses to people who use domestic and family violence. It builds on Queensland's significant progress made so far and supports our ongoing efforts for a Queensland free from domestic and family violence.

In focusing on the people who are using domestic and family violence, this Strategy works to actively address perpetrating behaviours and widen our system of accountability. While the safety of victim-survivors is our priority, they will remain at risk unless we support the people who are perpetrating violence to seek help and change their harmful behaviours.

We cannot ignore the overwhelming evidence that men are predominantly the perpetrators of domestic and family violence, and this is mainly against women and children. Research underscores this reality and counters sometimes well-meaning community assertions. However, we must focus our attention on opportunities to change attitudes and behaviours.

Furthermore, many believe that if they are not directly contributing to the problem, they are part of the solution. This belief fails to acknowledge that the continuing silence from men and boys when faced with harmful attitudes and behaviours further perpetuates gender inequality and men's continued use of domestic and family violence.



**The Honourable
Yvette D'Ath MP**
Attorney-General and
Minister for Justice
and Minister for the
Prevention of Domestic and
Family Violence

By not challenging these attitudes and speaking up when they are apparent among friends, family and colleagues, Queensland will continue to fail to protect victim-survivors and the cycle of violence will continue for future generations to come.

All men play a pivotal role in confronting violence and holding their communities accountable. This demands courage and fortitude. We know Queensland men can rise to this challenge throughout our communities. It is up to all Queenslanders – including those who work in government, large and small businesses, community organisations, as well as schools, universities, TAFEs and beyond – to call out the behaviours and attitudes that trivialise, excuse or perpetuate domestic and family violence.

Without further action to strengthen responses to perpetrators, domestic and family violence will continue to manifest, impacting our broader systems and draining Queensland's economic and social wellbeing. Our reform goals are deliberately ambitious, with this Strategy setting the foundations for our future work in response to people using domestic and family violence. We must unite to prevent domestic and family violence and create a safer future for all.

We are grateful to the many people who contributed to the development of this Strategy. We are mindful, however, that its release is only another step in a long journey, one that we all need to undertake together.

Domestic and family violence is preventable, and together, one deliberate step at a time, we can end it.

Queensland's Strategy at a glance

Our vision



All persons using domestic and family violence in Queensland are held responsible for their harmful behaviours and supported to stop using violence.

Our objective



To guide a whole-of-systems and community response that brings persons using, or at risk of using, violence into greater focus in Queensland and provides them with increased opportunities to change their behaviours.

What we want to achieve



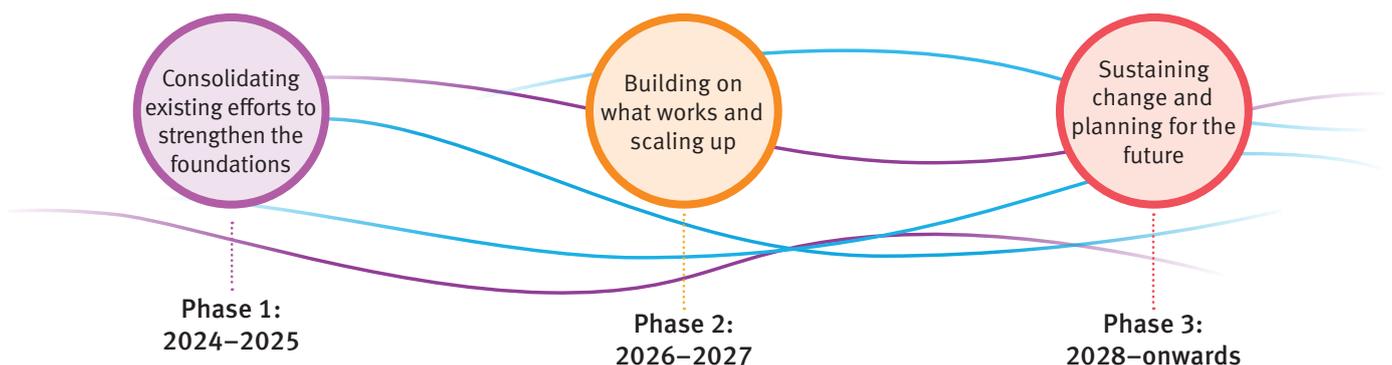
- All Queenslanders effectively **recognise, reject** and **respond** to attitudes and behaviours that lead to the use of domestic and family violence.
- **Children and young people** using, or at risk of using, violence are identified early and provided with effective interventions.
- Government and non-government services are equipped to **identify, respond** and **refer** persons using violence to appropriate support.
- There is a **responsive** and **effective** system of accountability around persons using, or at risk of using, violence.

Priority areas



- **Priority 1:** Increasing community understanding of why people use violence and how we can prevent domestic and family violence from occurring.
- **Priority 2:** Enhancing support for children and young people using, or at risk of using, domestic and family violence.
- **Priority 3:** Strengthening risk assessment, referral pathways and interventions for persons using, or at risk of using, domestic and family violence.
- **Priority 4:** Enhancing Queensland's system of accountability to effectively respond to persons using, or at risk of using, domestic and family violence.

Implementation





Guiding principles

- Victim-survivor safety.
- Accountability.
- Aboriginal and Torres Strait Islander Perspectives.
- Intersectionality and diversity.
- Gender equality.
- Community consultation and engagement.
- Evidence-based.



Snapshot of actions

- Increasing our focus on primary prevention and early interventions.
- Developing violence-centric risk assessment tools and approaches.
- Collaborating with alcohol and other drug, mental health and domestic and family violence networks.
- Establishing a state-wide network of intervention programs.
- Supporting the capacity and capability of the domestic and family violence workforce in working with persons using violence



Feedback

- 70 responses to our Consultation Paper in 2023
- 11 workshops help with specialist domestic and family violence service providers and academics to draft this Strategy
- Queenslanders want:
 - Focused prevention and early intervention responses
 - Tailored and accessible interventions
 - Clear referral pathways
 - Strengthened system of accountability around persons using violence

Kickstarting our reforms, we have invested:

\$25.6 million

from 2022–23 to intervention reforms for persons using violence.

\$14.8 million

from 2024–25 for intervention programs in Queensland correctional centres.

20% uplift in recurrent funding

from 2024–25 to services delivering intervention programs for persons using violence.

\$22.9 million

from 2022–23 to support the development, trial and evaluation of a co-response model.

\$16 million

from 2023–24 to support the delivery of *Queensland’s Plan for the Primary Prevention of Violence Against Women 2024–2028*.

\$34 million

from 2023–24 to support the delivery of the *Domestic and family violence training and change management framework*.

About this Strategy

Over the past 10 years, the Queensland Government has made significant progress in implementing domestic and family violence (DFV) reforms in Queensland. However, ending DFV cannot be achieved without a clear and sustained focus on strengthening engagement with, and support for, persons using violence to challenge and change their harmful behaviours.

The aim of this Strategy is to help bring persons using violence into view and under scrutiny of a more robust systemic and community response. While its purpose is to respond to the need for a broadened focus on all persons using violence regardless of risk and need, this Strategy primarily focuses on responses to men using DFV.

The Queensland Government, in consultation with Queenslanders, has developed a strategy that draws on what is already known about interventions with persons using violence and the contribution these already make. It also looks to identify additional opportunities which can be seized in a more considered and proactive way.

Over the next five years, the government will build on existing efforts to strengthen its approach to persons using violence. This will be done through the development and implementation of initiatives that cover a continuum of prevention, early intervention, responses to persons using violence and systemic reform.

Queensland's approach to strengthening systemic and community responses to persons using violence will occur through three key phases:

- **Phase one (2024 – 2025):**
Consolidating existing efforts to strengthen the foundations.
- **Phase two (2026 – 2027):**
Building on what works and scaling up.
- **Phase three (2028 – onwards):**
Sustaining change and planning for the future.

This Strategy, and its implementation, will set the foundations and guide ongoing reform and investment in responses to persons using violence. By taking steps to prevent DFV from occurring and prioritising action that responds early and swiftly, we will contribute to a Queensland that upholds the values of equality and respect, resulting in a safer, more inclusive and prosperous Queensland for all.

Upholding human rights

To experience gender inequality, discrimination and DFV is to be denied your human rights. Queensland's *Human Rights Act 2019* recognises:

- The inherent dignity and worth of all human beings.
- The equal and inalienable human rights of all human beings.
- Although human rights belong to all individuals, human rights have a special importance for the Aboriginal peoples and Torres Strait Islander peoples of Queensland, as Australia's First Peoples, with their distinctive and diverse spiritual, material and economic relationship with the lands, territories, waters, coastal seas and other resources with which they have a connection under Aboriginal tradition and Ailan Kastom. Of particular significance to Aboriginal peoples and Torres Strait Islander peoples of Queensland is the right to self-determination.

Preventing and swiftly responding to all people who use DFV is about upholding human rights.

Our commitment

This Strategy is a commitment under the *Fourth Action Plan of the Domestic and Family Violence Prevention Strategy 2022–23 to 2025–26* which includes delivering initiatives that actively address perpetrating behaviours and increase accountability.

It responds to the findings from the *Queensland Domestic and Family Violence Death Review and Advisory Board 2019–20 Annual Report*, which outlined several recommendations regarding service system issues in responses to victim-survivors, persons using violence and children.

For information relating to this Strategy's development and its strategic context, refer to **Appendix 1** and **2**.

Language used in this Strategy

DFV is a gendered issue, and the use of gendered language in this Strategy is deliberate

The evidence shows men are significantly more likely to be persons using violence¹, regardless of their sexuality or family structure.² It also suggests women who use violence are more likely to do so in self-defence, in resistance or in response to current or past trauma.³ In acknowledgement of this, this Strategy has been designed to consider responses to all persons using violence, including men, women, gender diverse people and young people. However, it primarily addresses men who use DFV.

This Strategy also recognises that gender does not exist wholly in binary categories and binary language may not always reflect the experiences of all people in the Queensland community. This Strategy acknowledges gender diversity and the experiences of DFV within Queensland's diverse communities.

The explanations in the Strategy and definitions are not legislative definitions, and any reference to legal terms or legislation aims to build knowledge and awareness only.

Some common terms used throughout the Strategy include:

Person or persons using domestic and family violence

Terms such as 'perpetrator', 'offender' and 'primary aggressor' have often been used in the past to describe persons using violence. However, this Strategy acknowledges the increasing preference to move away from using these terms as they create barriers for service engagement, have unintended consequences for those who are misidentified as the person using violence, and for children and young people who use violence.

In recognition of this contemporary shift in language, the terms 'persons using violence' and 'people who use violence' are used throughout this Strategy to describe people who use DFV. The revised terms recognise a person's ability to undergo personal development, be accountable for their actions, and stop their harmful behaviours. Persons using violence is also the preferred term for children and adolescents who use violence and is more culturally appropriate for some groups, including Aboriginal and Torres Strait Islander peoples.⁴

While this Strategy seeks to build consistent language, there are some contexts where variation will apply. The word 'person'

may replace references to a specific cohort. For example, 'men's behaviour change program', 'men using violence', 'women using violence' or 'young person using violence'.

Interventions

Interventions for persons using violence form part of a broad and overlapping system of services and service providers that respond to DFV. While many service providers come into contact with people who use DFV, a subset of these providers have a specialised role in stopping DFV once it has occurred and holding persons using violence accountable. The term 'responses' is used to refer to the services aimed at stopping the use and/or escalation of DFV.

Domestic and family violence

While there is no single, universally agreed definition, this Strategy acknowledges all forms of DFV. This Strategy reflects a contemporary understanding of DFV as behaviour, or a pattern of behaviours, in an intimate or family relationship that is physically, sexually, emotionally, psychologically, or economically abusive, threatening, coercive or aimed at controlling or dominating a person through fear. This behaviour can take many forms including financial control, technology abuse, isolation from family and friends, spiritual or cultural abuse, threats of self-harm or harm to loved ones or pets, monitoring of whereabouts and other forms of stalking. Acts of DFV are rarely isolated incidents but occur within a context of coercive control.

Accountability

The term accountability relates to the ongoing systemic, institutional and community responses created to help persons using violence to take responsibility to end their violent, controlling and coercive behaviours. Genuine accountability also requires the operationalisation of what accountability means for the person using violence, based on the victim-survivors' need to see change.⁵ Therefore, responses to, and interventions for, persons using violence should be collaborative and coordinated as part of a system-wide approach that collectively and systematically creates opportunities for accountability. The system includes mainstream services, agencies, and organisations outside of formal justice and legal responses.

For the full list of terminology and definitions, refer to **Appendix 3**.

How this Strategy supports the National Agreement on Closing the Gap

This Strategy will support achieving Target 13 under Closing the Gap, which aims to reduce the rate of all forms of family violence and abuse against Aboriginal and Torres Strait Islander women and children by 50% by 2031, as progress towards zero. The overarching goal being Aboriginal and Torres Strait Islander families and households are safe.

This Strategy acknowledges that Aboriginal and Torres Strait Islander cultures, while distinct from one another, are founded on a strong social and cultural order that has sustained up to 65,000 years of existence in Australia. However, the impact of colonisation has resulted in ongoing intergenerational trauma and deeply rooted structural inequalities and systemic discrimination that continue to impact Aboriginal and Torres Strait Islander communities today.

Importantly, this Strategy recognises that violence against Aboriginal and Torres Strait Islander women and girls, who are disproportionately affected by DFV, is perpetrated by both non-Indigenous men and Aboriginal and Torres Strait Islander men. This trauma is compounded by experiences of racism and marginalisation and the ongoing impacts of colonialism.⁶

It recognises that responses to, and interventions for, Aboriginal and Torres Strait Islander peoples using violence must be founded in self-determination, empowerment, an increased sense of agency, and cultural resources. Through its implementation, the Strategy seeks to support Aboriginal Community Controlled Organisations and Indigenous led organisations to take a holistic, whole-of-family healing approach to working with Aboriginal and Torres Strait Islander peoples impacted by DFV. This includes working with the person using violence who, in many cases, will have ongoing contact with their partner, children, family networks and the community. It also seeks to ensure the Queensland Government and non-government organisations are supported to deliver culturally safe and responsive responses and interventions that meet the needs of Aboriginal and Torres Strait Islander peoples.

This Strategy acknowledges that actions to address persons using violence should create better emotional, spiritual and cultural wellbeing for men, their families and the community. It will do this by ensuring Aboriginal and Torres Strait Islander men are supported to lead healing work with men and boys, empowering them to regain their dignity, determination, health and wellbeing, and engagement as positive community role models.

Statement of commitment to reframe the relationship between Aboriginal and Torres Strait Islander peoples and the Queensland Government

Aboriginal and Torres Strait Islander peoples and the Queensland Government are building a reframed relationship that acknowledges, embraces and celebrates the humanity of Indigenous Australians.

We are proud that Aboriginal and Torres Strait Islander peoples have continuing rights and responsibilities as the first peoples of Queensland, including traditional ownership and connection to land and waters.

We will move forward together with mutual respect, recognition, and a willingness to speak the truth about our shared history.

As we work together towards a reframed relationship, we will be guided by these principles:

- Recognition of Aboriginal and Torres Strait Islander peoples as the First Peoples of Queensland.
- Self-determination.
- Respect for Aboriginal and Torres Strait Islander cultures.
- Locally led decision-making.
- Shared commitment, shared responsibility, and shared accountability.
- Empowerment.
- Free, prior, and informed consent.
- A strengths-based approach to working with Aboriginal and Torres Strait Islander peoples to support thriving communities.

For more information visit www.dsdsatsip.qld.gov.au/tracks.

Our guiding principles

The following principles will guide government agencies, non government services and the community in the effort to deliver an inclusive, safe, trauma-informed, responsive, and accountable system around persons using violence.

Victim-survivor safety

The safety of victim-survivors, including children, will be at the core of all responses to persons using violence.

Accountability

All responses to, and interventions for, persons using violence will contribute to increasing accountability at the individual, community and systemic and institutional levels.

Aboriginal and Torres Strait Islander perspectives

The culture, community, voices, experiences, and needs of Aboriginal and Torres Strait Islander peoples will be considered and prioritised when supporting system and service responses to persons using violence.

Intersectionality and diversity

The diverse characteristics, trauma and intersecting needs of all persons using violence will be considered and captured in the development and delivery of interventions for persons using violence.

Gender equality

Gender equality will guide and underpin all responses to, and interventions for, persons using violence.

Community consultation and engagement

The voices of victim-survivors, communities and persons using violence will contribute to the design and delivery of responses aimed at persons using violence.

Evidence-based

All responses to, and interventions developed for, persons using violence are informed by credible evidence that considers continuous improvements.

Our vision, objective and outcomes



Our vision

All persons using domestic and family violence in Queensland are held responsible for their harmful behaviours and supported to stop using violence.



Our objective

To guide a whole-of-systems and community response that brings persons using, or at risk of using, violence into greater focus in Queensland and provides them with increased opportunities to change their behaviours.

Queensland's response to people who use DFV



Broadening the Focus will be underpinned by a robust evaluation framework and clear performance indicators to assess our progress and implementation of this Strategy

Priority Area 1

Priority

Increasing community understanding of why people use violence and how we can prevent domestic and family violence from occurring

Goal

All Queenslanders effectively **recognise, reject** and **respond** to attitudes and behaviours that lead to the use of domestic and family violence

For Queenslanders to identify when someone is using DFV and effectively respond to this behaviour, further community education is needed to understand the drivers of DFV and what it looks like. By fostering a deeper understanding of the attitudes and behaviours that lead to the perpetration of DFV, opportunities can be created to intervene effectively at critical moments in people's lives. This understanding can then reduce the likelihood of a person's use of DFV and reduce harm to victim-survivors.

Through the implementation of this Strategy, the Government will support Queenslanders to recognise and respond to attitudes and behaviours that normalise, excuse, minimise or justify DFV. Lasting change will be created through a holistic approach, grounded in community support and accountability.

By calling on friends, families, and community groups, a network of support can be established that holds persons using violence responsible and encourages them to seek help, while providing safety and empowerment for victim-survivors to also seek help.⁷

Our core strategies are to...

- Equip the community to identify those using, or at risk of using, violence and appropriately intervene to stop violence from occurring.
- Engage men and boys in primary prevention efforts to stop DFV before it begins.
- Equip community leaders with resources to build awareness and capability to identify and reject harmful behaviours that can lead to violence and abusive attitudes.

Implementing phase 1

- Implementing *Queensland's Plan for the Primary Prevention of Violence Against Women 2024–2028* which provides the Queensland Government's framework for strengthening primary prevention of violence initiatives in Queensland, and will work to address the underlying causes and drivers of violence and changing the social conditions that give rise to the use of violence.
- Implementing the *Coercive control communication framework 2024–27* to guide the Queensland Government's delivery of culturally safe and trauma-informed communications to build a shared understanding of coercive control, better support victim-survivors and hold people using violence to account.
- Under the *Domestic and Family Violence Prevention Engagement and Communication Strategy 2016–2026*, continuing to raise awareness and understanding about the nature and impacts of DFV and abuse, including coercive control and changes to legislation.
- Working with the *Domestic and Family Violence Prevention Council* to generate greater community and corporate momentum in recognising that DFV is everyone's concern and ending it is everyone's responsibility. This includes engaging men and boys in prevention efforts.
- Continuing to implement the *Putting Queensland Kids First* strategy, which directs effort towards early years investment and its role in preventing future demand on acute services, including the DFV service system.

Priority Area 2

Priority

Enhancing support for children and young people using, or at risk of using, domestic and family violence

Goal

Children and young people using, or at risk of using, violence are identified early and provided with effective support and interventions

DFV is an enduring issue for many children and young people in Queensland. It is important they are recognised as victim-survivors in their own right, and not extensions of their parents, or 'secondary victim-survivors.' While many children and young people who are experiencing or have experienced DFV in the home do not go on to use DFV themselves, it is widely acknowledged that there are some who do.

Long-term harm for children and young people will be mitigated by addressing the impacts of their exposure to violence and intervening appropriately to address existing trauma and stop the use of DFV from continuing into their adult relationships.⁸

Therefore, by identifying and supporting children, young people and their families at the earliest signs of violence in the home, Queensland can prevent the escalation and recurrence of harmful behaviours and attitudes. For parents or caregivers who interact with the DFV service system, opportunities for early intervention for children and young people can be identified. This includes interactions with youth justice, child safety services, parental court appearances, police DFV reports, parental use of mental health services and hospitalisations for mental ill-health and/or problematic alcohol and other drug use and when working with adult victim-survivors or the person using violence.⁹

While supports for children and young people do currently exist, a key focus of this Strategy includes building the capacity of the existing DFV service system to improve this support, as well as the capacity of the broader human services system to appropriately respond to all children and young people using violence.

Our core strategies are to...

- Increase the capacity of mainstream and specialist DFV service providers to effectively identify and support families and children and young people who have experienced DFV.
- Strengthen tools and resources for services to assess risk and need for young people using DFV.
- Deliver community-led, culturally appropriate support services to children and young people using, or who are at risk of using, DFV to address trauma and prevent future harmful behaviours and attitudes.

Implementing phase 1

- Developing a dedicated risk assessment approach and tool for young people using violence.
- Collaborating with alcohol and other drug, mental health and DFV networks to improve service responses to support the safety and wellbeing of victim-survivors and their children, including building the capability of services across Queensland Health and the non-government sector.
- Continuing to deliver DFV intervention programs to young people in the youth justice system who are using DFV.
- Continuing to explore and develop intervention responses and programs for young people who use DFV.



Priority Area 3

Priority

Strengthening risk assessment, referral pathways and interventions for persons using, or at risk of using, domestic and family violence

Goal

Government and non-government services are equipped to **identify, respond** and **refer** persons using violence to appropriate support

Risk assessment and referrals are often the first steps in a process of working with a person using violence. It is necessary to have ongoing approaches for risk management that actively engage the person using violence to support behaviour change, while prioritising victim-survivor safety. Evidence-based risk assessment tools should inform the type of program or intervention most appropriate to the person using violence based on their level of risk of reoffending, individual needs and learning capability.¹⁰ A victim-survivor's assessment of their own risk should strongly contribute to the risk assessment of a person using violence.

Current interventions for persons using violence in Queensland include:

- Intervention programs, which may include group-based men's behaviour change programs, individual counselling, case management, and support for victim-survivors.
- Civil and criminal justice system responses, including protection orders and sanctions for breaching the conditions of an order.
- Interventions from agencies that a person might have contact with, such as corrective services, child protection and alcohol and other drugs services.
- Bystander interventions from peers and community.

This Strategy will strengthen the DFV service system to deliver effective interventions that are tailored to all persons using violence, across all levels of risk and need. This includes exploring opportunities to consider protective factors that may assist in holding a person using violence accountable when seeking out help and engaging with services.

To achieve this, interventions must be accessible, evidence-based, integrated, trauma-informed and culturally responsive. Interventions must be adapted to the lived experiences of individuals and address co-occurring issues such as mental ill-health, problematic substance use, and housing instability.¹¹ To manage persons using violence assessed as high risk and high need, enhanced responses with increased levels of engagement and consequences for non-compliance are needed, as part of an integrated response.

Our core strategies are to...

- Strengthen tools and resources for services to assess risk and need for all persons using violence.
- Improve information recording and sharing across government and non-government services on persons using violence.
- Increase the availability and resourcing of evidence-based interventions to adequately respond across a continuum of risk and need, including adequate time to embed behaviour change.
- Partner with diverse communities to design, deliver and evaluate appropriate interventions and supports for persons using violence.
- Improve referral pathways into interventions for persons using violence.

Implementing phase 1

- Establishing a state-wide network of intervention programs for persons using violence across a continuum of risk and need.
- Delivering domestic and family violence intervention programs to people using violence in select Queensland correctional centres.
- Developing a dedicated risk assessment approach and tools for adults using violence.
- Undertaking a co-designed approach to developing and trialling programs for persons using violence specifically tailored to meet the needs of Aboriginal and Torres Strait Islander peoples.
- Supporting culturally safe interventions for Aboriginal and Torres Strait Islander peoples using violence, informed by community-focused research and frameworks such as the Healing Foundation's *Towards an Aboriginal and Torres Strait Islander Violence Prevention Framework for men and boys*.
- Establishing a new court-based domestic violence diversion scheme for persons using violence.
- Developing, trialling and evaluating a co-responder model involving a mobile co-response to calls for service between Queensland Police Service and government funded specialist DFV services, in a number of locations.
- Developing a whole-of-government framework to strengthen and integrate service responses to victim-survivors and persons using violence who present with multiple, complex, intersecting needs, in consultation with key stakeholders, including people with lived experience.
- Continuing to deliver training to build the capability of the Queensland Health workforce to respond to domestic and family violence, including through the provision of information about risk factors for persons using violence, and advice about appropriate clinical responses to victim-survivors and their children.
- Continuing to implement the *Community Safety Plan for Queensland* which includes a specific focus on responses to DFV and supporting the sector.



Priority Area 4

Priority

Enhancing Queensland's system of accountability to effectively respond to persons using, or at risk of using, domestic and family violence

Goal

There is a **responsive** and **effective** system of accountability around persons using, or at risk of using, violence

An effective system of accountability requires ongoing systemic, institutional and community responses to help persons using violence take responsibility to end their violent, controlling, and coercive behaviours. A system of accountability is strengthened when government agencies, government funded services and community organisations understand how they fit into the broader integrated system.¹²

In Queensland, the integrated DFV service system includes Government, funded non-government services and community organisations who may interact with victim-survivors and persons using violence. These services are responsible for identifying risk and effectively responding to DFV and can refer persons using violence to the appropriate support. Importantly, this includes ensuring workforces are supported to recognise and respond to a person using violence's attempts to employ systems abuse and collusion to further control the victim-survivor.

To assist in keeping persons using violence in view of the system, each service should be underpinned by appropriate engagement with persons using violence and effective use of information sharing guidelines. This will enhance monitoring of the person using violence, including where they move between jurisdictions or relationships.

In addition to this, effective recruitment, retention and upskilling of staff across the DFV service system is critical to supporting an effective system of accountability.

An appropriately qualified and experienced DFV workforce is needed to deliver enhanced and effective interventions for persons using violence.¹³

An important opportunity to expand the DFV service system is the need for training to be provided on therapeutic interventions centred on long-term health, healing, and recovery for both persons using violence and victim-survivors. This includes trauma specific services and alternatives to criminal justice responses, such as restorative justice.

The reporting and monitoring of this Strategy's implementation and evaluation of intervention programs will provide insight into whether responses to persons using violence are resulting in sustained behaviour change and in upholding an effective system of accountability.

Our core strategies are to...

- Strengthen Queensland's policy and legislative frameworks to support government and non-government services to effectively respond to persons using violence.
- Continue to develop, sustain, and support a specialist workforce of practitioners who work with persons using, or at risk of using, violence.
- Enhance information sharing across government and non-government funded services to keep persons using violence in view and hold them accountable.
- Enhance data collection processes to keep persons using violence in view and victim-survivors safe through risk informed practice.
- Continue to evaluate and enhance interventions for persons using, or at risk of using, DFV to improve long-term outcomes.
- Strengthen the evidence base to inform the development of best practice responses to persons using, or at risk of using, DFV.

Implementing phase 1

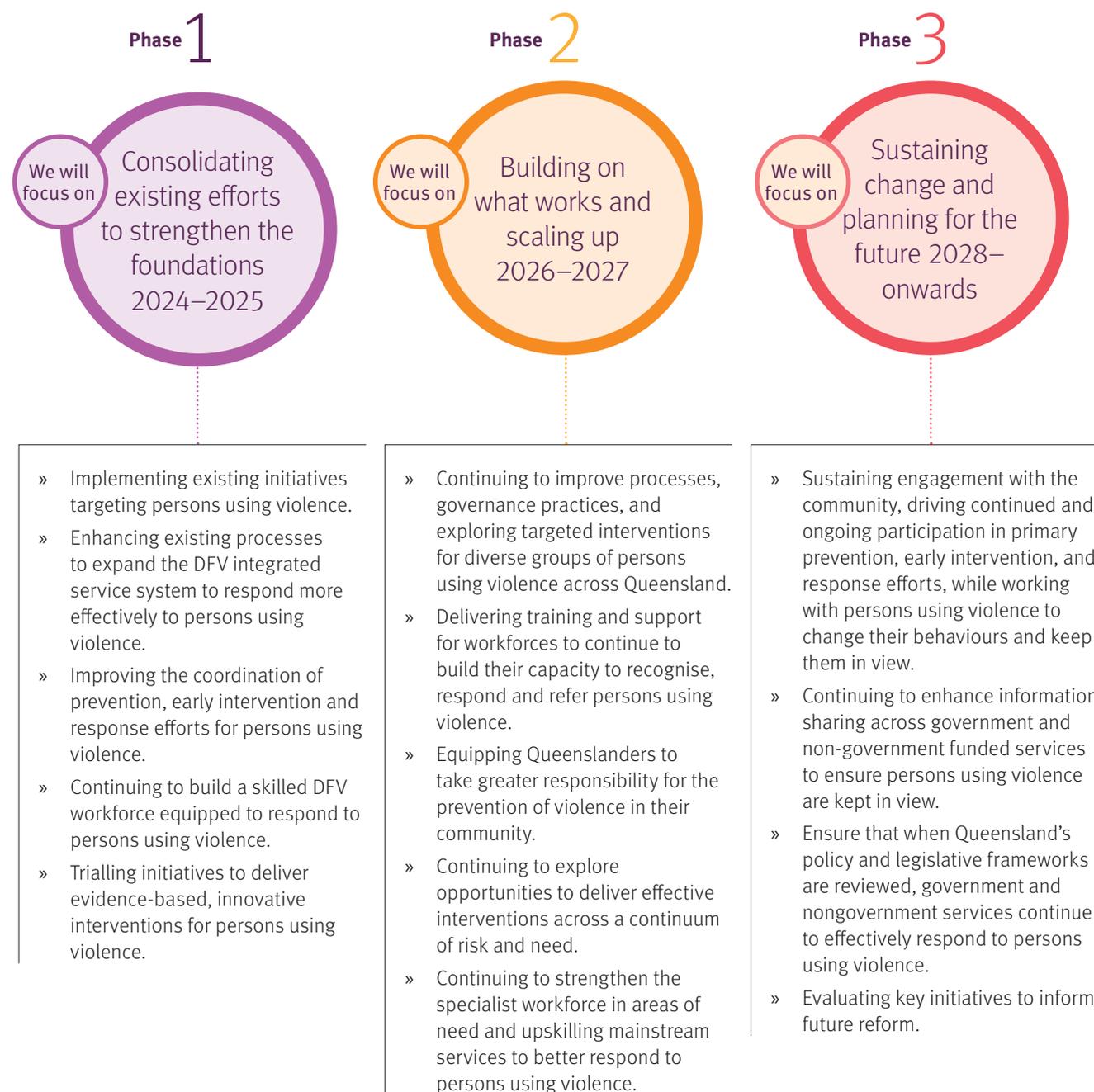
- Developing a whole-of-government domestic, family and sexual violence service system strategic investment plan encompassing services and supports delivered and funded by Queensland Government agencies that prioritises establishing and adequately funding a state-wide network of intervention programs for persons using violence.
- Supporting WorkUP Queensland to contribute to the development and implementation of a Queensland Government Workforce Capability Strategy to attract, recruit, and retain a skilled workforce to deliver domestic, family and sexual violence services.
- Developing a domestic, family and sexual violence service system data quality strategy that establishes the standard approach to uplift and maintain the quality of data and data collection standards, particularly as it relates to priority groups impacted by violence.
- Developing and implementing a service sector data governance framework to ensure data is appropriately stored, managed and reported.
- Implementing the *Domestic and Family Violence Training and Change Management Framework*, including through the establishment of a statewide Domestic and Family Violence Training Support and Coordination Service that will strengthen the capability of service providers across the broader DFV and justice service systems to identify and respond appropriately to the needs of victim-survivors as well as persons using violence.



Implementing this Strategy

Taking a phased approach

This Strategy will be implemented over three phases to strengthen responses to persons using violence across Queensland. It will be updated as implementation progresses through the phases.



Continued stakeholder engagement

Each and every one of us has a responsibility to explore our own personal attitudes, beliefs and behaviours – and take action to be part of the solution.

The Queensland Government is committed to partnering with the community services sector, academia, the private industry and the broader community to address DFV and increase safety and wellbeing in Queensland. By defining and understanding roles and responsibilities, we can enhance collaboration across governments and communities, to target efforts to achieve the greatest impact and accomplish the vision for this Strategy.

The Australian Government plays an important role in shaping the national direction and funding initiatives to support priorities identified under the *National Plan to Reduce Violence Against Women and Children 2022–2032*. Other areas of federal responsibility can have a direct or indirect impact on the DFV sector in Queensland, including community legal services, welfare and income support services, immigration services and family law services.

While the Queensland Government is leading the implementation of this strategy, it does not and cannot work alone. In implementing this Strategy, we will continue to engage with stakeholders including the following:

- People with lived, and living, experience.
- DFV Peak Body and specialist services.
- DFV Prevention Council.
- Women's Safety and Justice Reform Implementation Reference Group.
- LGBTIQ+ Roundtable.
- Multicultural Queensland Advisory Council.
- Aboriginal and Torres Strait Islander DFV Prevention Group.
- Aboriginal Community-Controlled organisations.
- Community organisations, businesses and philanthropic organisations.

Monitoring and evaluation

To ensure the Government's approach is effective and contemporary, implementation progress will be reported on through the annual Highlights Cards for the *DFV Prevention Strategy 2016–2026*. The Government will use insights and learnings to continue to shape the reform agenda.

The Queensland Government has developed the *Domestic, family and sexual violence system monitoring and evaluation framework* (monitoring and evaluation framework) which outlines a strategic and transparent approach to assessing the Queensland Government's progress towards its objectives and outcomes in relation to domestic, family and sexual violence, and identifying the impacts of the broader reform agenda. It also enables learnings to be shared and enhances monitoring and evaluation capability across organisations.

To effectively monitor the implementation of this Strategy, the Government will develop measurable outcomes that align with the monitoring and evaluation framework. Additionally, planned evaluations of interventions, initiatives and programs will offer insights into the effectiveness of Queensland's responses to persons using violence.

Towards a shared understanding

What we know about persons using violence

DFV is highly prevalent in Queensland and Australia, across multiple service systems, and affects women, children and young people disproportionately more than men.

Aboriginal and Torres Strait Islander peoples, people with disability, people from culturally and linguistically diverse backgrounds, people who identify as LGBTIQ+, older people and children and young people are also disproportionately affected by DFV.

Who is perpetrating domestic and family violence in Queensland and across Australia?



Young people who experienced child abuse or witnessed violence in the home are 9.2 times more likely to use adolescent family violence than those who have not experienced any child abuse.¹⁴



Around 4 in 5 intimate partner homicides are perpetrated by a male against a current or former female partner.¹⁸



Between 2017–2023, males made up 68% of alleged offenders in DFV related deaths in Queensland.²⁰



4 in 5 people using DFV are male.¹⁵



5 in 6 DFV offenders recorded by police are male.¹⁶

In 2022–23, there were 79 DFV related deaths in Queensland.

Of these,

58%

of male intimate partner homicide offenders had a known history of DFV.¹⁹

75–95%

of all victim-survivors report a male being the person using violence.¹⁷

The demand on Queensland systems and responses



In 2022–23, over half of reported assaults were DFV related.²¹



Queensland Police Services (QPS)

In 2023, more than **171,000** DFV occurrences were reported to QPS.²²

The number of DFV occurrences reported to the QPS increased by

47.8%

between 2015–16 and 2021–22.²³

QPS estimates that about

40%

of all its recorded incidences relate to DFV.²⁴



Queensland Courts

In 2022–23, **58,314** Domestic Violence Orders were made.²⁵

In 2022–23, **61%** of DFV offenders in Queensland had a principal offence of breach of violence and non-violence orders.²⁶

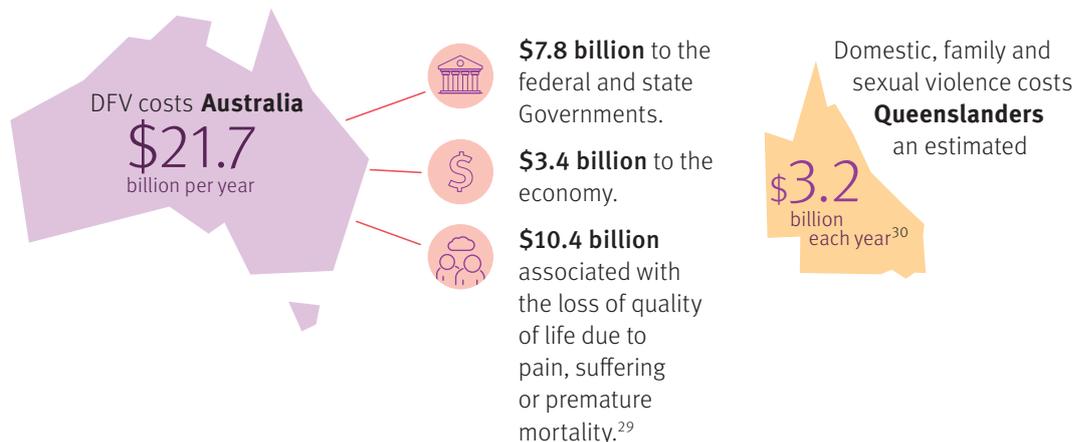


Queensland Corrective Services

In March 2024, **41%** of prisoners held in custody were subject to an imprisonment or remand warrant with DFV offences.²⁷

In March 2024, **54%** of prisoners in custody were a respondent to a current Domestic Violence Order.²⁸

The estimated cost of domestic, family and sexual violence in Queensland and across Australia



Drivers of domestic and family violence

“In undertaking behaviour change work with men who use violence, it is essential that the gendered drivers of violence be explored in the context of men’s own experiences, including their experiences of trauma.”³¹

While the context in which a person uses violence is unique for every person, the evidence points to drivers arising from the gendered dynamics, gender inequalities and the influences of harmful forms of masculinities present in society.³²

There are four gendered drivers of DFV which most consistently predict violence at a population level and explain its gendered patterns. These are termed ‘gendered drivers’ as together they create an environment in which women and men are not considered equal, and DFV is more likely to occur, be tolerated and condoned. The gendered drivers are:

- Condoning of violence against women.
- Men’s control of decision-making and limits to women’s independence in public and private life.
- Rigid gender stereotyping and dominant forms of masculinity.
- Male peer relationships and cultures of masculinity that emphasise aggression, dominance and control.³³

These drivers, in combination with the following reinforcing factors, can create an environment that supports DFV to occur:

- Condoning of violence in general through the normalisation of violence.
- Political or social movements to re-establish a perceived ‘natural’ or ‘traditional’ gender order.³⁴
- Experience of, and exposure to, violence or maltreatment as a child.
- Stress factors and environmental conditions that lessen prosocial behaviours of empathy, respect and care.
- Backlash and resistance to prevention and gender equality reform efforts.³⁵

In addition to the above, any factor which limits a person’s access to resources, independence, or social and economic power, or reduces their perceived worth or status, can increase the probability of violence occurring. While the drivers of men’s violence against women are well understood, less is known about what drives violence experienced in same-sex relationships and relationships where a person is transgender or gender diverse.

For more information on the drivers of violence and Queensland’s primary prevention reform, visit www.qld.gov.au/primarypreventionplan.

Risk factors for men using violence

While research highlights there is no single cause or factor that leads to DFV, it does indicate that there are several risk factors that increase the likelihood of a person using violence.³⁶ Through an increased understanding of DFV, it is possible to reduce the risk of men developing violent and abusive behaviours.³⁷

However, the context in which DFV occurs varies and there are many factors that can combine to create risk resulting in experiences of violence that are unique to each person. There are also many factors and intersecting forms of disadvantage or discrimination that can increase the likelihood of a person using violence. Similarly, the presence of one or many risk factors does not automatically mean a person will use violence.

Perpetration is driven by risk factors at the individual, relationship, community and societal levels. For men using violence, research shows that common risk factors include:

- Witnessing or experiencing childhood violence.
- Violence-supportive and hostile masculine attitudes.
- Sexist and violence-supportive peers.
- Situational variables such as separation, pregnancy and firearm availability.
- Violence-supportive settings and contexts.
- The features of societies, communities, and neighbourhoods, particularly patriarchal structures and norms.³⁸

Certain situations can increase the risk of DFV escalating in a very short timeframe. The risk may relate to court matters, particularly family court proceedings, release from prison, relocation, or other matters outside the control of the victim-survivor which may imminently impact their level of risk. There are also factors that contribute to the escalation of serious violence and/or the likelihood of lethal violence. These include stalking, non-lethal strangulation, threats to kill the victim-survivor, access to weapons, suicide ideation, intimate partner sexual violence perpetrated against the victim-survivor, and recent separation.³⁹

Strengthening responses to all persons using violence

Reducing misidentification of persons using violence

The first step in strengthening responses is ensuring the integrated service system is accurately identifying both the person using violence and the person most in need of protection. The impacts of being misidentified are far-reaching and have devastating impacts. For victim-survivors misidentification as the person using violence may not be able

to access critical support services, criminalisation resulting in a criminal record or potentially traumatising interactions with the justice system and impact future help-seeking behaviour due to a lack of trust in the police and legal system. Most alarmingly, misidentification means that the person using violence is not being held to account for their use of violence and may continue to inflict DFV on the victim-survivor and others, uninhibited.

There are many circumstances where the victim-survivor may be misidentified as the person using violence. It is primarily seen in a legal context, where victim-survivors are misidentified on domestic violence orders or criminal charges, such as assault or property damage.

Misidentification can occur in all types of relationships, within both intimate partner relationships and all family structures. However, the research identifies that Aboriginal and Torres Strait Islander women, women from culturally and linguistically diverse backgrounds, women with disabilities, criminalised women and LGBTIQ+ people are at greater risk of being misidentified as a person using violence.⁴⁰

In addition to this, it is important to improve frontline services' understanding of victim-survivors use of resistive violence, which is sometimes used in self-defence or to prevent what is seen as a future inevitable attack. It can often lead to misidentification as the person using violence when frontline services fail to consider the use of resistive violence within a wider pattern of DFV. For Aboriginal and Torres Strait Islander women, resistive violence may be more likely to result in criminal charges, contributing to the increasing over-representation of Aboriginal and Torres Strait Islander women in the criminal justice system.⁴¹

Frontline services play a key role in reducing misidentification, particularly at the stage where services are determining who is most in need of protection. To ensure the person most in need of protection is correctly identified, the following is required:

- Identifying patterns of coercive control instead of focusing on single incidents of visible or physical violence, including viewing the use of resistive violence in the context of the underlying pattern of control within the relationship.
- Improved understanding of DFV and victim-survivor responses to trauma.
- Improved understanding of cultural and historical barriers that exist for some marginalised people, which impact their ability to engage with the criminal justice system.
- Understanding that victim-survivors do not always present as an 'ideal victim,' particularly where alcohol and other drug use and mental ill-health are present, and recognising where stigma and biases may arise.

- Improved understanding of societal and community biases of Aboriginal and Torres Strait Islander peoples, people from culturally and linguistically diverse backgrounds, people with disability, people who identify as LGBTIQ+, elderly and young people.⁴²

To reduce the misidentification of persons using violence, a genuine whole-of-system effort is required, particularly across the criminal justice system, the specialist DFV sector, child and family services, and the Child Protection system. This includes responding to DFV in Aboriginal and Torres Strait Islander communities which requires understanding and recognition of ongoing racism and intergenerational trauma that forms part of contemporary life for many communities. All responses to DFV should be guided by clear policy on how to accurately identify the person most in need of protection.

Children and young people

The use of DFV by a young person against their parent, carer, sibling, or other family member within the home is often referred to as 'adolescent family violence'.⁴³ These young people may also go on to perpetrate violence in their intimate partner relationships. Improving responses to children and young people using violence requires consideration of the needs of each individual before these behaviours become entrenched into adulthood. Directing efforts towards children and young people, as well as parents, caregivers, and guardians, is crucial to ending intergenerational DFV.

The behaviours or circumstances of many 'at risk' children and young people may come to the attention of various service providers such as education, health, police, justice, including youth justice, housing and homelessness or child protection. At these points of contact, it is critical to identify children and young people who have been exposed to DFV and to recognise the link between trauma, learned behaviours and their life trajectory.⁴⁴ For parents who interact with the DFV system, opportunities for early intervention for children and young people can be identified via parental court appearances, police DFV reports, parental use of mental health services and hospitalisations for mental ill-health and/or problematic alcohol and other drug use.

As the impacts of DFV have been shown to have long-term consequences for children and young people's friendships and relationships, as well as their participation in the community, it is important to build the capacity of the existing DFV service system to deliver trauma-informed support for children and young people, as well as the capacity of the broader human services system to appropriately respond to all children and young people using violence.

Identifying risk for persons using violence

The research highlights that risk screening and assessments are essential components of responses to DFV. Risk screening is a routine process for identifying whether DFV is occurring and determines future actions, such as referral or interventions. Risk assessment is an evaluation to determine the level of risk and the likelihood and severity of future violence. Both are used to inform decisions around what actions are appropriate when responding to DFV.

The research also reports that the safety and wellbeing of those who experience DFV should be at the forefront of any response or intervention provided to persons using violence.⁴⁵ A victim-survivor's assessment of their own risk should strongly contribute to the risk assessment of a person using violence. Best practice in this area requires appropriate sharing of information across services and sectors to allow for more informed risk assessments and to facilitate collaborative monitoring and case management. This intends to uphold the principle that a person's current and past actions and behaviours bears significant weight in determining their level of risk.⁴⁶ Mapping the pattern of behaviour provides a systematic way of noting, recording, and sharing information about the range of behaviours and tactics and is important in appropriately responding to persons using violence.⁴⁷

Whilst there is a significant proportion of people who use violence that are not in touch with specialist DFV services, many access mainstream services. These services are in a critical position to identify abusive behaviour and act as a referral pathway to police and specialist supports. Mainstream services also continue to have a role in meeting the broader needs of the person which may be impacting on their use of violence such as a lack of appropriate and sustainable housing or appropriate mental health care services.

Risk assessment frameworks

Risk can be understood in different ways. However, with little research on best practice approaches to assessing risk posed by persons using violence, there is an urgent need to establish a consistent approach to defining what constitutes risk, what should be done in response, and how risk should be measured. The existing research reports that some risk assessment approaches aim to assess the probability of a person committing further acts of violence, including the escalation of violence, while others assess the level of risk that a person using violence poses, based on static and dynamic risk factors. Both approaches are used to inform and guide appropriate responses to mitigate the risk of DFV.

Risk assessments that determine the probability of a person committing future acts of violence or reoffending are useful for persons using violence who are engaged with the justice system, including recidivist offenders. One model that follows

this approach is known as the Risk, Needs, Responsivity principles, which have been used in offender programs in both correctional and community settings to tailor interventions to participants.⁴⁸ These approaches to risk assessment are commonly used in correctional settings or to predict an offender's risk of recidivism.

Pattern based approaches are commonly used within the child protection and family systems to understand the risk posed by the person using violence by identifying patterns of behaviour and coercive control and predicting the likelihood of future violence. The mapping, recording and understanding of behaviour patterns are critical to risk management, safety planning, intervention and all elements of DFV casework.⁴⁹

Regardless of the type of risk assessment tool and approach used, integrated approaches are vital to ensuring a more comprehensive understanding of the risk and to allow for holistic responses that meet the individual needs of the person using violence and the victim-survivor. This requires appropriate sharing of information to inform risk assessment, shared risk management and monitoring, and collaborative action to respond to the risk.

A range of mainstream services have an opportunity to screen for and identify persons using violence, including allied health services, mental health services, alcohol and other drug services, child protection, parenting services, youth justice services and justice services. The co-occurrence of DFV with other intersectional and complex factors means that persons using violence may have contact with a range of different services. Each of these points of contact presents with important opportunities to screen for the use of violence and respond appropriately.

The Queensland Common Risk and Safety Framework

The Queensland Government's current approach to identifying, assessing, and responding to DFV risk is set out in the Common Risk and Safety Framework (CRASF). It is a whole of system framework which underpins the way that government and non-government entities identify, assess, and respond to DFV risk. The CRASF guides consistent and integrated responses to meet the holistic needs of individuals, based on static and dynamic risk factors and the pattern of violence over time. It provides a common approach to assessing the risk posed by, or to, an individual and responds appropriately to meet the needs of that person.

The key objective of the CRASF is to enhance the safety of victims and their children and hold persons using violence to account through integrated service responses that prevent the escalation and repetition of DFV. The Framework has been developed for use by government and non-government agencies. It articulates a shared

understanding, language and common approach to recognising, assessing and responding to DFV, including information sharing provisions and foundations for practice. The Framework is intended to provide guidance and a sound platform for the development of integrated responses to DFV across Queensland, while being flexible enough to support local initiatives, place-based strategies and innovation in response to DFV.

Aligned with Priority Area 3 of this Strategy, the Queensland Government has committed to expanding on the suite of risk assessment and safety management tools in the CRASF and is developing risk assessment tools for persons using violence and young people impacted by violence.

For more information about the CRASF visit www.justice.qld.gov.au/about-us/services/women-violence-prevention/violence-prevention/service-providers/integrated-service-responses/dfv-common-risk-safety-framework.

Tailoring interventions to respond to differing levels of risk and need

The existing evidence base highlights that robust risk assessment can help to inform the appropriate intervention and response for persons using violence and the urgency for intervention. In some cases, it may be appropriate to refer a person using violence to a specific program. Consideration should be given to the level of risk posed by the person using violence, their individual needs, and the program delivery that is best suited for them.⁵⁰ It also notes that because people's level of risk and rehabilitation needs change over time, people are likely to move between these services based on their needs at the time. Ensuring that all 'touchpoints' across the service system are equipped to identify and respond to risk will help to ensure that persons using violence cannot 'go under the radar'.

However, many persons using violence are not known to the justice system or specialist DFV services and interactions with mainstream service providers may be their first point of contact with the system. This highlights the importance of interventions being readily available to persons using violence when there is highly intrinsic motivation to change, or during periods of incarceration when external barriers for attendance are removed.

Many high-risk and reoffending persons using violence choose not to engage with appropriate interventions. However, the research highlights that ongoing engagement with interventions and the broader system keeps the person using violence in view.⁵¹ This engagement increases opportunities for the system to continue to assess the level of risk to the safety of victim-survivors. Ensuring processes are in place to better identify persons using violence when they re-present to services or cross jurisdictions may provide an opportunity for

agencies to respond more swiftly. Close collaboration provides vital information on patterns of behaviour by the person using violence, and victim-survivors' own view of the level of risk. Mapping the pattern of behaviour provides a systematic way of noting, recording, and sharing specific and detailed information about the range of behaviours and tactics, which is important in the referral process of high-risk cases.⁵²

Further, in recognising diversity and intersectionality, it is necessary for interventions to be tailored to the needs of all persons using violence, and be accessible, integrated, trauma-informed and culturally responsive to support meaningful behaviour change. This is particularly important for Aboriginal and Torres Strait Islander peoples who advocate for approaches to DFV that are culturally safe and recognise Aboriginal and Torres Strait Islander Law and Culture.⁵³ Interventions for persons using violence must be responsive to the different ways in which DFV is perpetrated.⁵⁴ For a more detailed summary of the intersecting issues experienced by people from diverse backgrounds see **Appendix 4**.

The research emphasises that it is important for interventions to address co-occurring issues that may contribute to the frequency or severity of DFV. This includes interventions that address mental ill-health, problematic alcohol and other drug use, housing issues, gambling issues and employment.⁵⁵ For Aboriginal and Torres Strait Islander peoples, interventions for people using violence should move away from mainstream behaviour change programs towards community-led healing programs that address intergenerational trauma, and other issues that stem from colonisation.⁵⁶ Alternative responses should be considered for all persons using violence that take into account familial and community obligations and connections. Short-term interventions for persons using violence may also be strengthened with programs that include wraparound and holistic support.⁵⁷

Police intervention

The police play a critical role in the response, disruption, investigation and prevention of DFV by:

- Investigating reports of DFV to identify, protect and support the person most in need of protection.
- Holding persons using violence accountable for their behaviour by commencing criminal charges where appropriate.

- Partnering with other agencies to develop strategies to reduce the incidence of persons using violence going on to commit further acts of violence and promote coordinated service delivery.

Police are critical to initiating actions against persons using violence (including arrest, bail opposition, verbal warnings and temporary separation), supporting other legal actions such as protection orders, and undertaking investigations in support of criminal charges and prosecution.

RESPOND

Police and specialist DFV services are the primary responders to DFV. They have a responsibility to listen, inquire, assess and respond appropriately to a report of DFV.

DISRUPT

Police have a role in engaging with and disrupting the behaviour of high-risk persons using violence. This includes working with partner agencies, participating in High-Risk Teams, and implementing targeted initiatives to address ongoing perpetration of DFV.

INVESTIGATE

Where police form a reasonable suspicion that a person has perpetrated violence, they have a statutory obligation to ensure the matter is investigated.

A thorough and complete investigation is conducted to ensure police are making sound decisions about the actions that need to be taken.

This can include providing advice, making a referral, issuing a Police Protection Notice, applying for a Protection Order, or pursuing criminal charges against the person using violence.

All reports of DFV are appropriately recorded in data record keeping systems to inform both current and future responses.

PREVENT

Police are required to collaborate with other agencies as part of a broader whole of system response to DFV. This is achieved by sharing information across agencies, participating in a range of service support and prevention initiatives (including co-responder and co-location trials), and engaging with agencies locally to trial different prevention approaches.

Figure 3: Adapted from *A Call for Change: Commission of Inquiry into Queensland Police Service responses to DFV – ‘Responsibilities of police in the investigation of DFV’*

Court intervention

Convictions and sentencing delivered by the courts serve to punish persons using violence and hold them to account for their past actions. However, courts and the legal system can also play a role in holding persons using violence accountable for their future actions through imposing civil protection orders which can lead to criminal charges if breached.⁵⁸

REFERRAL

Where suitable, persons using violence should be referred at the earliest opportunity into treatment, intervention programs and men's behaviour change programs with judicial monitoring of engagement and ongoing behaviour.

OVERSIGHT

Specific deterrence of persons using violence behaviour is more likely to be achieved by direct oversight through ongoing judicial monitoring of behaviour as is the practice in drug courts. Risky and or abusive behaviour needs immediate, consistent and firm responses and consequences, including swift and certain prosecution of contraventions to orders.

SENTENCING

A suite of sentencing options is required for effective sentencing of persons using violence. Imposing program completion as a condition to an order would serve as an incentive to program participation.

Figure 4: Adapted from Monash Gender and Family Violence Prevention Centre – *The use of DFV perpetrator interventions in sentencing: A national statement (Australia's National Research Organisation for Women's Safety)*.

Interventions in custody and under community supervision

There is both an opportunity and a need to deliver interventions for persons using violence who interact with corrective services while in custody and under supervision in the community. Addressing DFV offending behaviour during incarceration is an opportunity to reduce DFV recidivism by intervening at a time when external barriers for attendance and engagement with programs are removed.

The availability and intensity of programs for persons in custody and under community supervision must be substantially increased and coupled with strong victim-survivor advocacy support services. A diversity of programs is also required to cater to the different needs of those in custody, noting that demand for programs far exceeds supply.

Interventions delivered in custody require a strong throughcare approach that provides pre- and post-release support to

persons using violence and reinforces behavioural change. These programs need to be responsive to the contributing risk factors and employ robust mechanisms for assessing and monitoring victim-survivor safety.⁵⁹

Programs delivered to offenders in custody and under supervision in the community should be integrated with the broader DFV service system, with appropriate information sharing and cross-agency collaboration. It is recognised that persons in custody or under community supervision may also engage with other government and non-government agencies both prior to entering the correctional system, and after they exit, such as police, child safety, housing, healthcare, counselling and support services. These touchpoints present additional opportunities for integrated service responses to ensure collaborative treatment, consistent accountability and timely responses to elevations in risk.



Individual accountability

A person using violence takes responsibility for their harmful behaviours and takes steps to address them

Community accountability

Community members collectively work with the person using violence, holding them to account and supporting their change.

Systemic and Institutional accountability

Government agencies, courts and intervention programs hold the person using violence to account

Enhancing accountability

Sustained behaviour change is more likely to happen when all levels of government, the broader service system and community are working together to prevent DFV and intervening early when it does. Recognising this, it is important to build and support an effective system of accountability that encompasses a wide range of contact points within government, the broader service system and the community to identify and appropriately respond to persons using violence.

While the DFV system has a key role to play in keeping persons using violence in view, an effective system of accountability should encompass initiatives at the individual, community, systemic and institutional levels.⁶⁰

Individual accountability

Individual accountability means the person using violence takes personal responsibility for their violence and seeks out support to change their behaviours. However, many persons using violence will require a mandate from the criminal justice, civil justice or child protection systems, or family law consequences to induce them to participate in an appropriate intervention to address their harmful behaviours. They may also be forced through their social connections where they may feel compelled to attend an intervention because of an 'ultimatum' by their partner, or the urging of friends or a respected community leader. Few self-referred men commence an intervention on the back of an internal decision to take responsibility for and change their behaviour.⁶¹

While the collective system can and should hold persons using violence responsible for their behaviours through the full range of justice and community responses available, only the person using violence can choose to take steps to change their behaviour and end their use of violence.

Examples of what this might look like includes the person using violence:

- Taking responsibility for their behaviours and not blaming anyone for their use of violence or abuse.
- Not making excuses for harmful behaviour such as saying they were under the influence of alcohol or drugs or blaming other factors such as loss of employment or financial pressures.
- Communicating openly and honestly about their harmful behaviour as part of seeking help to change.
- Respecting and valuing their partner's right to their own feelings, friends, activities, and opinions.

Community accountability

Community led accountability calls on friends, families, community groups, sporting groups, faith-based communities, workplaces, university social groups and any other pre-existing networks to work together to safely call out and address violence within their communities. The research highlights that victim-survivors often want persons using violence to be held accountable without involving the criminal justice system.⁶² Community groups and organisations can be a vehicle for creating opportunities for accountability across the spectrum of response.

By strengthening communities' understanding, awareness, and willingness to respond to DFV as a community issue, communities and individuals are empowered to intervene and call out problematic and harmful behaviour.⁶³ This can be achieved through community, systems and institutions working together to change the environment that supports the normalisation of DFV.

An environment of accountability and reinforcement is created when community norms and messages promote positive behaviour change.⁶⁴ Evidence shows that the number men who attend behaviour change programs and are engaged in justice responses are only a small proportion of men who use violence. Noting this, community-led responses not only build a greater system of accountability, but they also engage a greater number of persons using violence that are not currently being held to account through the justice system.⁶⁵

Systemic and institutional accountability

Systemic and institutional accountability requires the development of a robust and enhanced integrated service system that is designed to keep persons using violence in view, while delivering consistent and ongoing responses and interventions that support behaviour change.⁶⁶

Through this level of accountability, systems and institutions become responsible for ensuring that persons using violence face appropriate justice and legal consequences for their violence, and for delivering effective responses to persons who do not comply with the sanctions placed on them.

To improve systemic and institutional accountability, all parts of the DFV integrated service system require practice guidance for staff when engaging persons using violence. For this to occur, the following components are required:

- Effective identification of DFV perpetration.
- Systematic recording of information about the person using violence.
- Systematic sharing of information about the person using violence.



Achieving our outcomes: An effective system of accountability

In achieving our outcomes and creating an effective system of accountability, the following **examples** provide an overview of what a strengthened response to persons using violence looks like in practice.



Figure 5: Community accountability

Community members who reinforce messaging and calls out harmful behaviours

- » Family members
- » Friends
- » Community networks
- » Workplaces
- » Bystanders
- » Neighbours
- » Media
- » Social and sporting clubs
- » Faith institutions
- » Schools and other education institutions
- » Service organisations
- » Community Elders and leaders
- » Political organisations

This can look like:

- » Media reports focusing on the behaviour of the person using violence, rather than the victim-survivor.
- » Family and friends believing victim-survivors when they tell their experiences of abuse and violence perpetrated against them.
- » Community members calling out abusive and violent behaviour and encouraging persons using violence to seek help.
- » Community groups providing appropriate and informed support themselves where they have the capacity and skills.
- » Community organisations establishing mentoring services and wrap around supports for both persons using violence and victim-survivors.

Figure 6: Systemic and institutional accountability within mainstream services

Workforces with opportunities to recognise, respond and refer persons using violence

- » Housing and Homelessness Services
- » Mental Health services
- » Healthcare, including GPs and hospitals
- » Disability services
- » Multicultural and Settlement services
- » LGBTIQ+ services
- » Gambling and financial counselling
- » Alcohol and Other Drugs services
- » Aboriginal and Torres Strait Islander Services
- » Family Support Services
- » Young people and youth justice services
- » Schools, Universities and TAFEs
- » Businesses and organisations
- » Local councils

This can look like:

Recognise – Building effective screening practices, including:

- » Procedures relating to routine screening practices, including tools and support to keep detailed records.
- » Engaging specialist DFV consultants to support the workforce.

Respond – Building effective risk assessment practices, including:

- » Access to appropriate training for the workforce.
- » Risk assessment tools that are readily available and easy to use.
- » Building professional judgement to engage in conversations with persons using violence.
- » Awareness of information sharing opportunities.

Refer – Building effective referral pathways to specialist supports, including:

- » Understanding the service landscape.
- » Identifying suitable referral options and limitations.
- » Establishing collaborative and integrated responses.
- » Ongoing shared risk management and monitoring.

Figure 7: Systemic and institutional accountability within specialist DFV services.

Workforces providing a specialist response to, core support or interventions for persons using violence

- » Behaviour change programs
- » Men’s and women’s groups
- » Specialist DFV services
- » Aboriginal and Torres Strait Islander DFV services, including Healing Centres
- » Multicultural DFV services
- » Legal Services
- » Corrective Services
- » Courts
- » Court Support Services
- » The Police Service
- » Child protection
- » Youth Detention Centres
- » Family Responsibility Commissions

This can look like:

- » Enhancing integrated service responses to include a focus on persons using violence, while monitoring the safety of victim-survivors.
- » Establishing clear referral pathways for persons using violence to access support services to address intersecting issues, e.g., alcohol and other drugs, mental ill-health, employment and housing.
- » Providing a therapeutic environment that encourages meaningful behaviour change.
- » Training first responders to effectively analyse and record observations relating to the person using violence.
- » Building effective and ongoing risk assessment practices.
- » Providing ongoing training and support to the workforce to:
 - Correctly identify the person most in need of protection.
 - Systematic recording of information about the person using violence.
 - Systematic sharing of person using violence information with appropriate organisations.
 - Actioning the information received through information sharing provisions.

Appendix 1 – Strategic context

This Strategy is informed by, and aligns with, the policy landscape at the state and national level to guide DFV reform. It is an important addition to the Queensland Government’s suite of policies that implement the Government’s commitments to preventing and addressing DFV.

Figure 1: Policy landscape guiding the Queensland Government’s reform agenda.

Queensland policy context	
<i>Domestic and Family Violence Prevention Strategy 2016–2026 and Fourth Action Plan 2022–23 to 2025–26</i>	The strategy outlines a vision for a Queensland free from DFV, with supporting outcomes that relate to persons using violence stopping their use of violence and being held to account.
<i>Queensland’s Plan for the Primary Prevention of Violence Against Women 2024–2028</i>	The plan strengthens the Queensland Government’s primary prevention efforts through an evidence-informed approach that targets the gendered drivers and underlying social context to stop violence against women before it starts.
<i>Queensland’s Framework for Action – Reshaping our approach to Aboriginal and Torres Strait Islander domestic and family violence</i>	The framework outlines the Government’s commitment to partner with Aboriginal and Torres Strait Islander communities to determine how real change can be created. This includes the need for strengths-based, locally led, culturally informed and healing approaches, recognising that the nature of DFV experienced by Aboriginal and Torres Strait Islander peoples have different causes.
<i>Domestic and Family Violence Training and Change Management Framework</i>	The training framework guides the alignment of training for organisations and staff working across the DFV and justice service systems toward a consistent, evidence-based, trauma-informed and person-centred response to victim-survivors and persons using violence.
<i>Domestic and family violence common risk and safety framework</i>	The whole-of-system framework guides the delivery of integrated service responses to enhance the safety of victim-survivors and to hold persons using violence to account. It articulates a shared understanding, language, and common approach to recognising, assessing, and responding to DFV, and offers fact sheets on best practice approaches.
<i>Domestic, family and sexual violence system monitoring and evaluation framework</i>	The Monitoring and Evaluation Framework provides guidance on how to identify progress made across the domestic, family and sexual violence system, including improvements to the prevention of domestic, family and sexual violence, and outcomes for victim-survivors and persons using violence.
<i>Domestic and Family Violence Prevention Engagement & Communication Strategy 2016–2026</i>	The strategy outlines several objectives and guiding principles for changing societal attitudes and practices, with a long-term outcome that Queenslanders take a zero-tolerance approach to DFV. This includes understanding the needs and experiences of diverse communities and how messaging can be tailored to reach different people.
<i>Putting Queensland Kids First</i>	The strategy aims to better coordinate efforts to achieve measurable improvements for all children, especially those from disadvantaged or vulnerable backgrounds. This includes supporting parents who are experiencing adversity, including DFV.
<i>Queensland’s Disability Plan 2022–27</i>	The plan is considered to be the primary mechanism to drive implementation of <i>Australia’s Disability Strategy 2021–31</i> in Queensland. To deliver this plan, Queensland departments will deliver on key priorities through their disability service plans, including ensuring policies, processes and programs for people with disability promote gender equality and prevent violence against groups at heightened risk.
<i>Community Safety Plan for Queensland</i>	The plan seeks to make communities safer by supporting victims, delivering frontline support, detaining offenders, intervening when people offend, and preventing crime before it occurs.
<i>A Safer Queensland: Queensland Youth Justice Strategy 2024–2028</i>	The strategy sets out a framework to guide future work to support young people, offering wraparound preventative and intervention services to prevent their involvement in the criminal justice system. The strategy acknowledges that many young people who offend have experienced DFV, abuse or neglect.
<i>Pride in our Communities 2024–2032</i>	The strategy provides a framework to further direct the Queensland Government’s efforts towards embedding inclusion for LGBTIQ+ communities and continuing to strengthen outcomes for LGBTIQ+ Queenslanders.

Influencing reports

Women's Safety and Justice Taskforce Hear Her Voice Report One and the *Queensland Government response*

Report One includes recommendations relating to strengthening responses to persons using violence, including establishing a state-wide network of intervention programs for persons using violence across a continuum of risk and need.

A Call for Change: Commission of Inquiry into Queensland Police Service response to domestic and family violence Report

The report includes recommendations that relate to cultural issues within the Queensland Police Service that influence the investigation of DFV, and how those cultural issues contribute to the overrepresentation of Aboriginal and Torres Strait Islander peoples in the criminal justice system.

National policy context

National Plan to End Violence Against Women and Children 2022–2032

All Australian governments made a long-term commitment to end gender-based violence in one generation. The National Plan identifies prevention and responding to persons using violence as two of four focus areas, with one of the long-term outcomes being *People who choose to use violence are accountable for their actions and stop their violent, coercive and abusive behaviours*.

National Agreement on Closing the Gap

The National Agreement is a shared commitment that aims to enable and empower Aboriginal and Torres Strait Islander peoples to live healthy and prosperous lives. It aims to achieve transformative change in education, employment, health, wellbeing, safety, languages, land and waters for Aboriginal and Torres Strait Islander peoples.

Through the National Agreement, all Australian governments have committed to work together to overcome the inequality experienced by Aboriginal and Torres Strait Islander peoples. This includes aligning responses to DFV with community-led, strengths-based approaches that puts Aboriginal and Torres Strait Islander peoples at the centre.

Safe and Supported: The National Framework for Protecting Australia's Children 2021–2031

Through the National Framework, all Australian governments have committed to working together towards a shared goal to make significant and sustained progress in reducing the rate of child abuse and neglect, and its impact across generations. It includes a national approach to early intervention and targeted support focusing on the known causes and drivers of child abuse and neglect. This includes programs that help parents to address risk factors such as DFV, problematic alcohol and other drug use, mental ill-health or homelessness.

National Strategy to Prevent and Respond to Child Sexual Abuse 2021–2030

The National Strategy is the first of its kind in Australia, and provides a nationally coordinated, strategic framework for preventing and responding to child sexual abuse. It seeks to reduce the risk, extent and impact of child sexual abuse and related harms, while ensuring persons using this violence are held accountable.

Australia's Disability Strategy 2021–2031

All Australian governments made a long-term commitment to continue to improve the lives of people with disability in Australia. The strategy includes several policy priorities that align with this Strategy, including 'people with disability are safe and feel safe from violence, abuse, neglect and exploitation' and 'policies, processes and programs for people with disability promote gender equality and prevent violence against groups at heightened risk, including women and their children'.

Appendix 2 – How this Strategy was developed

This Strategy has been informed by research and consultation with a diverse cross-section of Queensland stakeholders from government, non-government and community-based organisations, academia and the Queensland community. It considers the Women’s Safety and Justice Taskforce findings, which were informed by extensive consultation with key stakeholders across Queensland.

To enable stakeholders and the Queensland community to provide input on the development of this Strategy, a [Consultation Paper](#) was published online. Its purpose was to support discussion and reflection on the current interventions available in responding to persons using violence, and to seek input on how these can be strengthened to better hold people accountable for their actions while supporting them to change their behaviours.

To guide this discussion, the Consultation Paper included 18 targeted questions relating to six key focus areas covering terminology, the vision of the strategy, primary prevention, early intervention, response and systemic reform. To inform the drafting of this Strategy, a further 11 targeted consultation sessions were undertaken with specialist DFV service providers, academics, and peak organisations.

Overall, the consultation undertaken to inform the development of the Strategy included:

Targeted consultations conducted over several months with representatives from government agencies, DFV services and academia.	70 written responses received following the release of the public Consultation Paper.
We heard from victim-survivors and persons using violence. Including representative voices from diverse communities: <ul style="list-style-type: none"> • People with disability. • LGBTIQ+ people. • People from culturally and linguistically diverse backgrounds. • Aboriginal and Torres Strait Islander peoples. • People from regional and remote areas. 	We heard from a diverse range of organisations, including representatives of: <ul style="list-style-type: none"> • Support organisations for persons using violence and victim-survivors. • Organisations providing intervention programs for persons using violence. • Statutory authorities. • Youth support organisations. • Faith-based organisations. • Universities.

What we heard during consultation

This Strategy is framed by the voices and lived experiences of the Queensland community, reflecting that ending domestic and family violence is everybody’s business.

Through consultation, Queenslanders have said the response to persons using violence needs to be **bold and brave**. Consultation participants highlighted that the response to persons using violence needs to be done differently, expanding the focus beyond the immediate impacts of DFV by addressing the root causes of violence and violence-supporting attitudes to create long-term safety and healing for all victim-survivors, including children and young people.

Queenslanders highlighted that they want to see:

- Community driven primary prevention initiatives.
- Messaging and education initiatives that engage men and boys in key settings.
- An emphasis on the role of communities in preventing violence, through providing communities with the knowledge to recognise, label and respond to harmful attitudes.
- Integrated, timely and developmentally appropriate support for children and young people exposed to DFV.
- Strengthened DFV education for young people who do not interact with the schooling system.
- Community awareness campaigns delivered through online platforms to reach younger audiences.
- A wider range of interventions for all persons using violence that also address co-existing issues and are tailored to a person’s needs and ability.
- Programs for Aboriginal and Torres Strait Islander men being Aboriginal and/or Torres Strait Islander-led and grounded in place and culture.
- An improved evidence base for interventions that will work with persons using violence to change their harmful behaviours, informed by longitudinal evaluations of intervention systems.
- Improvements to existing referral pathways to behaviour change programs, including human services, such as allied health services, playing a greater role in identifying and appropriately responding to persons using violence earlier.
- An increase in support and supervision of high risk, repeat offenders.
- Clarification on, and consistent use of, key terminology.

- Clearer understanding of what ‘accountability’ means and looks like.
- Clearer understanding of what is considered an intervention.
- Improved consultation mechanisms for governments to consult broadly with diverse cohorts, including Aboriginal and Torres Strait Islander peoples.
- Improvements to the use of data collection relating to persons using violence.

Queenslanders also reported the enablers that would make it easier for persons using violence to accept responsibility for their behaviour, take positive steps to change and seek out support services. These included:

- Strengthening our focus on addressing the primary drivers for a person’s use of DFV,
- Educating the community on how to appropriately identify and respond to violence when they see it.
- Better supporting children and young people using, or at risk of using, violence to access services to prevent future use of violence and address the impacts of trauma.
- Improving the use of information sharing between government and non-government service providers to keep persons using violence in view of the system, as well as keeping the system in view and accessible to the person using violence.
- Expanding the type and availability of interventions for all persons using violence across the continuum of risk and need, including, developing and using consistent and practical tools to assess a person’s level of risk of using violence or reoffending.
- Developing consistent and robust interventions and support for individuals assessed as high-risk, repeat offenders of violence both in custody and in the community.
- Providing more resources to community-led initiatives that prioritise holistic, wraparound support for persons using violence to address underlying drivers of their harmful behaviours.
- Building a more robust, wide reaching, intervention system that reinforces consistent messaging from the community that using DFV is never acceptable, and that persons using violence need to take responsibility for their behaviour and steps to change.
- Appropriately resourcing and enhancing existing workforce capacity and capability across all frontline services, including the DFV specialist sector, to identify and effectively respond to persons using violence, while taking protective measures to keep victim-survivors safe from future harm.

- Improving government and service provider data collection, monitoring and evaluation of initiatives for persons using violence to inform future practice and reform.

Building on what has been achieved

Queensland has been strengthening interventions for persons using violence while simultaneously supporting growth of available services to victim-survivors. This includes:

- Increasing funding for behavioural change programs and men’s services.
- Funding 23 behavioural change programs delivered by 17 service providers across Queensland.
- Revising the DFV Services Practice Principles, Standards and Guidance which came into effect for all DFV services, including programs for persons using violence, in 2021.
- Developing the Perpetrator Intervention Services Requirements which came into effect in 2022 to ensure consistency and quality of funded programs across the State.
- Providing ongoing funding to WorkUP Queensland, a partnership between the Healing Foundation and Australia’s National Research Organisation for Women’s Safety (ANROWS), established as a capability and capacity building service for the DFV and sexual violence service system.
- Establishing Specialist DFV Courts in Southport, Beenleigh, Mount Isa, Townsville, Palm Island, Brisbane and Cairns.
- Reviewing the DFV Information Sharing Guidelines to increase awareness, understanding and consistent use of the information sharing provisions.
- Passing legislation to amend existing laws to better respond to coercive control and to modernise and strengthen the offence of unlawful stalking.
- Passing legislation to criminalise coercive control through the creation of a standalone offence.

Appendix 3 – Terminology

The definitions adopted in this Strategy reflect current understandings and acknowledge that evidence will continue to be developed over the Strategy's lifetime.

Aboriginal and Torres Strait Islander peoples

Two distinct peoples of Aboriginal or Torres Strait Islander descent who identify as an Aboriginal person, Torres Strait Islander person or both Aboriginal and Torres Strait Islander and are accepted as such by the community in which they live.

Behaviour change program

A program that works with people who have used DFV against their current or former partners, other family members and sometimes their children. These programs have been historically targeted at men but may be provided for people of any gender, and involve ongoing assessment, group and individual sessions aimed at facilitating a process of change where a person using violence stops their violent and controlling behaviours, supported by improved pro-social personal and relational functioning, including attitudinal and belief changes. An integral part of these programs is the provision of support, information, referral, safety planning and sometimes counselling and case management for victim-survivors, as well as coordinated and collaborative risk assessment and management in the context of integrated multi-agency responses.

Cultural safety

A process of ensuring that an environment is safe for Aboriginal and Torres Strait Islander peoples and people from culturally and linguistically diverse backgrounds.

Coercive control

A pattern of abusive behaviours over time, which can be physical and/or non-physical, that hurt, humiliate, isolate, frighten, or threaten another person in order to control or dominate them.

Culturally and linguistically diverse

Communities whose members identify as having non-mainstream cultural or linguistic affiliations by virtue of their place of birth, ancestry or ethnic origin, religion, preferred language or language spoken at home.

Domestic and family violence (DFV)

While there is no single, universally agreed definition, this Strategy acknowledges all forms of DFV. This Strategy reflects a contemporary understanding of DFV as behaviour, or a pattern of behaviours, in an intimate or family relationship that is physically, sexually, emotionally, psychologically, or economically abusive, threatening, coercive or aimed at controlling or dominating a person through fear. This behaviour can take many forms including financial control, technology abuse, isolation from family and friends, spiritual or cultural abuse, threats of self-harm or harm to loved ones or pets, monitoring of whereabouts and other forms of stalking. Acts of DFV are rarely isolated incidents but occur within a context of coercive control.

Integrated service system

An integrated DFV service system aims to provide consistent quality responses across all services who may be engaged with people impacted by DFV. An integrated service system incorporates the broader service system, taking in all agencies and even communities that may come into contact with victim-survivors and persons using violence.

Intersectionality

The ways in which different aspects of a person's identity can expose them to overlapping forms of discrimination and marginalisation.

Interventions for persons using violence

Any action, initiative or strategy aimed at promoting the safety of victim-survivors through responses to persons using violence. Interventions include programs conducted by DFV specialists' and practitioners as well as responses by those without such specialisation, such as a health practitioner recognising DFV, responding and referring persons using violence to support.

LGBTIQ+

An evolving acronym used to collectively describe people who are gender diverse and/or identify with non heterosexual sexualities and stands for lesbian, gay, bisexual, transgender, intersex and queer. The plus acknowledges that the acronym does not fully capture the full spectrum of diversity.

Mainstream workforce

All non-specialist DFV services that may have contact with victim-survivors and persons using violence, e.g., health care workers, drug and alcohol support workers, housing officers and emergency services.

Person-centred

A service approach that treats each person respectfully as an individual being.

Person or persons using violence

Person or persons using DFV.

Resistive Violence

Builds upon the established concept of 'self-defence', or the right to physically defend yourself with reasonable force, provided that force is authorised, justified or excused by law. Resistive violence can be used by victim-survivors in response to the abuse they are experiencing to protect themselves or their children, or to pre-empt an abusive episode.

Risk

In the context of DFV, considers how a range of intersecting factors influence a victim-survivor's likelihood of experiencing harm, and a persons' using violence risk of committing further acts of DFV.

Risk assessment

The ongoing process of obtaining information from multiple sources in order to determine the likelihood of a person using, or continuing to use, DFV, the seriousness of the risk to the victim-survivor(s), and the imminence of any risk the persons using violence poses. It includes consideration of changes in circumstances, behaviours and events that might be associated escalation.

Specialist workforce

Specialist DFV roles that require a deeper and more nuanced understanding of risk, escalation of risk and appropriate responses, e.g., intervention programs for persons using violence, DFV outreach services and crisis services for victim-survivors.

Systems abuse

System abuse refers to the manipulation of legal systems and other systems by persons using violence to exert control over, threaten and harass another person, often a partner (current or former).

Trauma-informed practice

An approach that recognises that trauma is common, affects people in multivarious ways, and that people accessing services may be affected by trauma.

Technology abuse

A wide-ranging term that encompasses many subtypes of interpersonal violence and abuse using mobile, online and other digital technologies. These include harassing behaviours, sexual violence and image-based sexual abuse, monitoring and controlling behaviours, and emotional abuse and threats.

Victim-survivor

Includes people who have experienced DFV, sexual violence, or any form of gender-based violence. This term acknowledges the strength and resilience shown by people who have experienced or are currently living with violence. People who have experienced violence have different preferences about how they would like to be identified and may choose to use victim or survivor separately, or another term altogether. Some people prefer to use 'people who experience or are at risk of experiencing violence'. This includes adults, as well as children and young people in their own right as victim-survivors.

Women's Safety and Justice Taskforce

A Taskforce established as an independent, consultative body by the Queensland Government to examine coercive control and the experiences of women across the criminal justice system.

Appendix 4 – Working with diverse cohorts

■ Aboriginal and Torres Strait Islander peoples

- The impact of colonisation and the violent dispossession of land, culture and children has displaced traditional roles and resulted in intergenerational trauma experienced by Aboriginal and Torres Strait Islander peoples, families, and communities. The ongoing effects of individual, institutional, and societal violence and racism over the generations have contributed to the pervasiveness of DFV and the severity of its impact on Aboriginal and Torres Strait Islander peoples today.

When working with Aboriginal and Torres Strait Islander peoples, the development of holistic programs that fulfil the “cultural needs of participants to facilitate healing” is needed.⁶⁷ It is important that interventions are culturally embedded, community-led approaches that address underlying intergenerational trauma and impacts of colonisation.⁶⁸

■ People from culturally and linguistically diverse backgrounds

- People from culturally diverse, faith, or migrant backgrounds can experience culturally contextualised challenges such as rigid gender roles, forced marriage or medical procedures, visa abuse or visa status uncertainties, and language barriers.⁶⁹ These factors, in combination with systemic racism and discrimination faced by people from culturally and linguistically diverse backgrounds, intersect to drive increased levels of violence between people from these groups.⁷⁰

While the research on appropriate interventions for people from culturally and linguistically diverse backgrounds using violence is still emerging, it is understood that interventions should both respect cultural diversity and reject notions of violence as culturally legitimate.⁷¹ Interventions should also include education for people from culturally and linguistically diverse backgrounds that is tailored to their cultural belief systems.⁷²

In combination with practicing cultural sensitivity, research also suggests that interventions should be accompanied by prevention initiatives that celebrate men who have contributed to combatting men’s violence against women and engage community and religious leaders. Interventions should help men cope with changing gender dynamics in families, such as through the provision of parenting programs targeted at men.⁷³

■ People from refugee and asylum-seeking backgrounds

- People from refugee and asylum-seeking backgrounds are likely to have experienced significant trauma such as exposure to political unrest, conflict, environmental degradation, oppressive governments, death of family members, famine, loss of personal property, and detention or time in refugee camps. Refugees will sometimes have been subjected to torture, which may further exacerbate their mental illhealth.⁷⁴

People who arrive in Australia from refugee and asylum-seeking backgrounds not only deal with the impact of past trauma but also face practical challenges of settlement such as learning English, finding accommodation, and securing employment. This cohort must learn to navigate the Australian service system, manage racism, discrimination and adjust to a different social environment. These settlement stressors can increase the frequency and severity with which people perpetrate DFV.

Programs to address violence perpetrated by men from refugee backgrounds need to consider the diversity of family and community structures that exist within refugee communities. It is particularly important for service providers to understand how marriage is conceptualised in the community, the meaning of family in relation to individual identity, the range of family roles and responsibilities that exist, and the expectations that are placed on various family members.⁷⁵

■ People with disability

- Research highlights that in behaviour change programs, or other interventions for persons using violence, regard should be had to the intersecting vulnerabilities a person with disability may face. Such vulnerabilities can include experiences of ableism, discrimination, and lack of access to accessible and tailored resources and services. While these experiences do not excuse the use of violence, it is important to recognise people with disability can be both a person using violence and a victim of ableism at the same time.⁷⁶

It is noted that for people with an intellectual disability or an acquired brain injury, there is less need to change the framework or the context in which DFV should be understood, instead, the mechanisms through which information is delivered must be altered.⁷⁷ This may include adjustments such as the use of easy English materials or a greater focus on specific aspects of course content.⁷⁸ People with an intellectual disability or acquired brain injuries, often struggle to comprehend behaviour change program course content, have limited capacity to engage in a group context, or are screened out of mainstream behaviour change programs altogether.⁷⁹

A recent evaluation of intervention programs for persons using violence with a cognitive impairment highlighted the benefits of service providers engaging a specialist disability practitioner to adapt traditional behaviour change programs and provide individual sessions to suit the needs of program participants with a cognitive impairment. It was reported that slower pace, smaller and closed group sessions were beneficial to participants and resulted in better engagement.⁸⁰

■ LGBTIQ+ people

- Individuals identifying as LGBTIQ+ can experience violence stemming from cisgenderism and heteronormativity, resulting in many forms of prejudice-driven violence and identity-based abuse, often occurring within a family environment. This produces attitudes and stereotypes that devalue the bodies, identities and relationships of LGBTIQ+ people, generating homophobia, biphobia and transphobia that drives and normalises violence. While the prevalence of DFV in LGBTIQ+ relationships is unclear, such violence is likely to be underreported.

Shared experiences of trauma and stress related to being a member of a minority group can make it hard for LGBTIQ+ people to identify abuse within their intimate relationships. This also hinders communities, support services and other service providers from identifying both LGBTIQ+ victim-survivors and persons using violence as people in need of assistance.⁸¹ Identity-based or identity-related tactics of abuse are often central to the way dynamics of power and coercive control manifest in LGBTIQ+ relationships. Identity-based abuse capitalises upon a victim-survivor's fear of exposure ("outing") or their experience(s) of discrimination and internalised homophobia to threaten, undermine or isolate them.

It must also be acknowledged that people who identify as LGBTIQ+ are not a homogeneous group and are not inherently inclusive in their attitudes or behaviours. The differences and potential discrimination between members of LGBTIQ+ communities must be taken into account.

There is therefore a need for services delivering intervention programs to be aware of, and able to manage, transphobia, biphobia and tensions/power differentials between differing sexualities, genders, abilities and ethnicities. Service providers should build their capacity to understand the diversity of LGBTIQ+ experiences and acknowledge discrimination and structural disadvantage within LGBTIQ+ groups, in order to sensitively and confidently navigate mixed group dynamics.⁸²

■ Women who use violence

- Research has demonstrated that the ways women using violence and their motivations for doing so are often not the same as men's use of violence. In the context of family relationships, women who use violence generally do so because they want power, rather than because they have power. They wish to assert their personal autonomy from a partner, rather than exercise personal authority over a partner (coercive control). Women are more commonly known to use psychological, verbal and emotional violence rather than other kinds of violence. Physical violence, when used, is more likely to be minor or moderate, rather than severe.

Women who act in defense of themselves and/or their children, assert their own sense of dignity or are seen to behave in socially unacceptable ways, often face severe societal consequences. They are often judged more harshly on their actions with little attention paid to the context in which they took place.

Most women identified as using violence are themselves victim-survivors of DFV, although many do not describe themselves in this way despite strong evidence that suggests women who use violence have experienced high rates of DFV and childhood abuse or victimisation. It is important to increase community understanding of women's experiences of trauma, abuse and violence, and how these experiences shape women's relationships and conflict-resolution skills. Professionals in a range of sectors report that they regularly encounter women who use violence and believe this is because women are commonly upfront about their behaviour.

A small number of programs have emerged in Australia in the last decade that specifically respond to women identified as using violence. Reports from these programs note that interventions should be tailored to the life experiences of women seeking assistance for their harmful behaviours.⁸³

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