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Director's Report

Kia ora koutou katoa (Greetings all)

Mere Kirihimete ki a koutou (Merry Christmas to you all)

It's that time of year again in which to take a pause to celebrate and acknowledge all that has happened in 2017. The festive season provides us with an opportunity to reflect on our eventful year past, and prepare ourselves for the months ahead, which are also shaping up to be very busy.

However, before I re-visit past months, I would like to share activities of recent weeks. Most notably, we commemorated our 15th birthday with a special visit from Dr Heather Nancarrow! A balmy November evening saw many of QCDFVR's friends come together to visit our new "home", a gracious heritage-listed building (into which we are becoming quite settled). Amidst all of the challenges of our work, it's a tonic to celebrate what has been achieved by QCDFVR. Thanks to the foundation established by the wonderful women (and men) before us who have worked hard at, and for, QCDFVR, we are now able to continue their great efforts in creating and sharing knowledge.

But back to the beginning... we started 2017 with a significant "knowledge sharing" event: February brought us the 'Not Now, Not Ever' Gendered Violence Research Symposium. This was followed in May by the Queensland Indigenous Family Violence Prevention Forum, held in Cairns for the first time, and our year of gatherings culminated with the 'New Ways of Working' Gendered Violence Practitioner Forum in Brisbane in early November. These were major milestones for all of us at QCDFVR and created opportunities to welcome international visitors.

Professor Hillary Haldane was with us for five months as part of a Fulbright supported visit and continued reminding us of the importance of learning from frontline services about how their experiences are impacted by changing policy and practice demands. The San Diego Strangulation Institute experts Gayle Strack and Dr Bill Smock focused the spotlight on understanding the risk indicators and signs of attempted strangulation. Most recently Professor Lori Sudderth took us on a trip to communities in St Lucia and Costa Rica in the Caribbean and to Aotearoa and described the ingenuity, courage and determination of women to support each other in standing up to



violence in multiple contexts. There are videos and presentations available at www.noviolence. org.au in case you'd like to review materials from any of our events.

In addition, this has been another year of undertaking various research projects ranging from the small (a literature review for the Australia Nurse-Family Partnership Programme or ANFPP) to the large (the ongoing evaluation in three sites of the Queensland integrated service response trial). During the year we also undertook interviews to explore how victims, perpetrators and family and friends access information on domestic and family violence and facilitated consultation in Mackay on the design of an Aboriginal and Torres Strait Islander domestic and family violence service. It is the generosity of our research and consultation participants that helps us to learn about the challenges they face - and thereby to help inform others of ways to improve domestic violence responses. An update on our research activity appears on page three.

The Centre has been acutely aware for some years now about the link between knowledge and education informing domestic and family violence, and sexual violence, responses. In other words the knowledge and experience that research participants share with us go on to underpin the education, training and professional development the Centre has to offer. Much of this activity is undertaken in partnership with CQUniversity where the Centre continues to develop education offerings that seek to fill gaps in existing programs

COVER

Bino Toby (QIFVLS), Professor Lori Sudderth (Quinnipiac University) and Associate Professor Annabel Taylor (QCDFVR, CQUnivesity) at the recent 'New ways of working: Queensland Gendered Violence Pracittioner Forum' in Brisbane. and courses. The most recent of these is the development of a Sexual Violence Unit which we anticipate will form part of the Graduate Diploma in Domestic and Family Violence Practice in 2019. It is important to mention here the wonderful postgraduate scholarships which have been funded by the Queensland Government Department of Communities, Child Safety and Disability Services which will enable 20 people to complete a qualification. You can read more about the scholarships, and QCDFVR's education and training year in review on page four.

We are passionate about our engagement with frontline workers, and part of our sector involvement has been to develop and maintain our links with the hard working networks of practitioners across Queensland in both domestic and family violence, and sexual violence (QDVSN, QSAN, SPEAQ, and EVAWQ). Of note is that in 2017 we joined QSAN (Queensland Sexual Assault Network) for the first time and we have begun to collaborate with this network on a number of activities.

We also work with event-specific groups, inviting representation from across sectors to contribute to the Research Symposium and Gendered Violence Practitioner Forum, and working with Aboriginal and Torres Strait Islander stakeholders in the planning of the 2017 Queensland Indigenous Family Violence Prevention Forum. We thank these various committees that have provided invaluable support and advice for staff across our knowledge creation and sharing activities throughout the year.

In fact, sometimes we pinch ourselves in relation to how much we have achieved in 2017 and I want to thank everyone at QCDFVR for "going the extra mile" across all aspects of our work. With staff in Mackay, Rockhampton, Brisbane and Perth, some of whom are casual and part-time, we strive to maintain our connections with the sector more broadly and ensure the integrity of our research and education products. One of the ways we facilitate this engagement is through our "24/7" presence via our website and social media platforms, and I note we have quite a number of international visitors to www.noviolence.org.au.

So, thank you to:

- Petrina for maintaining our website, social media, resource material and bringing our events to life,
- Patrice for patiently ensuring our research and education contracts are in order,
- Margaret and Janine for helping us be where

we need to be (and have paid our bills!),

- Lauren for supporting the coordination of education
- Silke, Marika and Andrew for being our leaders in higher education- and researchers,
- Liane and Nicola for their teaching and research endeavours from the Brisbane Campus,
- Heather for her research leadership and all round support,
- · Colleen for coordinating our education work,
- Judy for being an outstanding educator,
- Jamie for helping us with our education and research endeavours, and
- Rhiannon for her project work.

And all of the other wonderful people who have helped us and continue to work with us in a casual capacity: where would we be without you?

Through each and every one of you, we are able to create relationships with government and community stakeholders that provide for a rich and rewarding experience in guiding the Centre. Our team is part of a committed network of individuals who want to make a difference for victims/survivors of gender-based violence and who strive for partnership, participation and purpose in working towards non-violence. I wish you all a peaceful Christmas and all good things in the New Year.

With best wishes to you all for the coming festive season.

Annabel Taylor



Above: Professor Pierre Viljoen (Deputy Vice Chancellor Engagement, Campuses and Mackay-Whitsunday Region - CQUniversity), Dr Heather Nancarrow (CEO - ANROWS), Mr Philip Kemp (Yuibera Descendant for Mackay Region) and Associate Professor Annabel Taylor (Director QCDFVR, CQUniversity) at the QCDFVR 15th birthday celebrations in Mackay.

Research Update

Each edition of the Re@der during 2017 has included an update about empirical research studies undertaken by QCDFVR. In this year's final edition, this segment will focus on key findings from three publications released this quarter, which are the result of QCDFVR studies, commissioned by Australia's National Research Organisation for Women's Safety (ANROWS). These publications are:

- Domestic and family violence protection orders in Australia: an investigation of information-sharing and enforcement with a focus on interstate orders: Final report
- Domestic and family violence protection orders in Australia: An investigation of information sharing and enforcement: Key findings and future directions
- Links between alcohol consumption and domestic and sexual violence against women: Key findings and future directions

A national investigation of information-sharing and enforcement.

The first two documents relate to the research undertaken by QCDFVR and represent the full report of the study and a research to policy paper respectively. Regular Re@der readers may recall that the research had three distinct components:

- a review of the literature to establish the current state of knowledge about enforcement of domestic violence protection orders within and across Australian jurisdictional borders, and to inform the other components of the study;
- 2. an online survey of 836 professionals (police, magistrates, lawyers, and victim advocates) across Australia who work with victims and perpetrators regarding domestic violence protection orders and their enforcement; and
- 3. semi-structured interviews with 20 victims and 20 service providers in four jurisdictions (New South Wales, Queensland, Northern Territory, and Victoria).

Overview of Research findings

The research found that issues that may compromise victim safety do not occur in legislation per se, but rather in the implementation and enforcement of the legislation. It also found that inconsistencies and competing interests at the intersections of domestic and family violence, child protection, and family law continue to impact on the safety and wellbeing of women who have experienced domestic and family violence. These issues remain an impediment to effective implementation and enforcement of domestic violence protection orders.

In relation to women who cross borders, the National Domestic Violence Order Scheme, should make a significant difference, but this should be monitored with the experience for women and children being the 'litmus test' as to whether implementation has occurred in the manner intended. There is still some way to go with nationally consistent legislation, information-sharing protocols, shared data access between agencies and consistency in police policy to all work together in practice.

Links between alcohol consumption and domestic and sexual violence against women: Key findings and future directions

The publication presents an overview of relevant peer-reviewed primary research, grey literature, other literature reviews, and meta-analytic studies. The review suggests that there is little evidence that alcohol use is a primary cause of violence against women. However, the paper does identify that there are clear associations, and in some cases, strong correlations between alcohol use and violence against women, including, for instance, in the severity of the violence.

Overview of Research findings

The evidence points to a relationship between alcohol and violence against women existing in three discrete ways:

- Alcohol use is linked with the perpetration of violence against women;
- Alcohol use is linked with women's victimisation by violence; and
- Alcohol is used as a coping strategy by women who have experienced violence.

The key messages for policy and practice include:

- The application of brief motivational interviewing techniques to relevant populations may assist in reducing alcohol-related intimate partner violence and sexual assault.
- Communication and collaboration between alcohol and intimate partner violence and sexual assault response agencies at both the service delivery and peak policy levels are supported.
- Training for alcohol and intimate partner violence service providers should include information about both sectors' approaches to intervention and pathways for referral. Opportunities for joint training should be explored and encouraged.
- Policies which enhance workforce capacity to effectively respond to the relationship between alcohol use and intimate partner violence and sexual assault should be encouraged and supported.
- Education and training for workers in the area of disordered alcohol use treatment should include information about the dynamics and impacts of violence against women, and those working in the violence against women sector should have education and training on the relationship between alcohol and violence.

Education and Training Update

by Colleen Gunning, Education Coordinator

During 2017 QCDFVR has continued, through its partnership with CQUniversity, to provide vocational and postgraduate education to students from diverse sectors, in locations around Queensland. As the year draws to a close, it's timely to reflect on "the year that was" in the education domain of QCDFVR's work.

The education team "hit the ground running" in delivering an open community session in Mackay in February, and since then community stakeholders in Bowen and Moranbah have been able to undertake the nationally recognised accredited unit: 'Recognise and respond appropriately to domestic and family violence'. As well, specific work groups in South East Queensland and further afield in the state have completed this vocational training.

The team has also responded to requests to deliver two other accredited units to work and community groups:- 'Provide support to children affected by domestic and family violence' and 'Provide domestic and family violence support in Aboriginal and Torres Strait Islander communities'. As always, in keeping with our commitment to the development and delivery of quality training, feedback has been positive. Moreover, it is important to note that facilitating this training would not be possible with out the involvement of experts from the sector, and we thank Ms Bino Toby, Ms Deb Field and Ms Jamie Anderson for their invaluable contributions in 2017.

Meanwhile, two key professional development (non-accredited) offerings have been produced and delivered in 2017. Congratulations to Dr Andrew Frost and Mr Mark Walters for designing the one-day "Why doesn't she leave? Why doesn't he stop being violent?" workshop. This package was well received by staff of Churches of Christ Care, and according to one workshop participant "(Andrew and Mark were) both AWESOME! I loved your creative approach to messaging."

Thank you to staff of the Department of Communities, Child Safety and Disability Services for the opportunity to provide training around the use of the Common Risk Assessment and Safety Framework. We acknowledge the work of Ms Betty Taylor in developing the prototype training which was presented in Cherbourg, Mount Isa and Logan, sites of the initial Integrated Service Response trial. Further Common Risk Assessment and Safety Framework training has been delivered in Brisbane and Ipswich, with other training sessions on the horizon for Cairns and Brisbane. A special thanks to Mr Mark Walters, Dr Brian Sullivan and Ms Judy Pidcock for sharing the "training load" with Betty, and to all who have participated across Queensland.

While on the topic of professional development, we thank the Brisbane South Primary Health Network (PHN) for the opportunity in 2018 to deliver the

Recognise, Respond, Refer training program to general practice staff (including after-hours staff) in the PHN catchment area. This is an exciting initiative and we are honoured to be working with the Brisbane South PHN team on this integrated health response.

In the area of postgraduate education, 2017 brought us Dr Marika Guggisberg to join Dr Silke Meyer and Dr Andrew Frost in the Higher Education team, and Dr Liane McDermott contributed to teaching in Term Two. By the end of 2017, 10 postgraduate units had been offered across the two terms, and it's anticipated there could be at least one new additional unit available next year. Indeed, 2018 is shaping up to be another busy year, with the introduction of the postgraduate Department of Communities, Child Safety and Disability Services Scholarship program. It's not too late to apply for these scholarships, and Re@ders readers are encouraged to consider this great study option.

Department of Communities, Child Safety and Disability Services 2018 Scholarship IS THIS YOU?

To be eligible to receive the Department of Communities, Child Safety and Disability Services 2018 Scholarship, an applicant must:

- Be commencing study in one of the following CQUniversity courses in Term 1 2018:
 - Graduate Certificate in Domestic and Family Violence Practice, and/or
 - Graduate Certificate in Facilitating Men's Behaviour Change,
 - Graduate Diploma in Domestic and Family Violence Practice (as a first year student).
- Be a resident of, and studying in Queensland;
- Be an Australian Citizen, Permanent Resident, or holder of a Humanitarian Visa;
- Be enrolled at CQUniversity at Census Date of Term 1 2018;
- Be studying a part time study load of 12 credits points or less;
- Be studying via distance education;
- Not be an employee of the Queensland Government;
- Not be receiving another Donor Funded Scholarship.

If you are eligible to apply for this scholarship, you can learn more about the full terms and conditions **here:**

https://www.cqu.edu.au/courses/scholarships/ offerings/department-of-communities,-childsafety-and-disability-services-scholarship

Hearing the Silence of Too Many Women with Physical Disability Living with Abuse/Violence

By Marika Guggisberg

It is estimated that approximately 20% of the Australian female population have some form of disability, making up about 2.5 million girls and women. These women experience not only discrimination and prejudice, but also interpersonal violence at a disproportionate level (Frohmader & Ricci, 2016). Female disability was historically viewed as a burden on society, which resulted in women being isolated (e.g. institutionalised) and inhibited in their participation in contemporary society. During the past decades, disability has become integrated in feminist considerations.

Women with physical disability have been found to be twice as likely to experience intimate partner violence (IPV) when compared to women with no disability (Breiding & Armour, 2015). Stating it differently, female intimate partners with disabilities have been found to have a 40% (VicHealth, 2017) greater risk of IPV than women without disability. They are 3 times more likely to be forced into sexual activity by being physically hurt, held down or threatened with violence, and twice as likely to be exposed to physical violence including being kicked, punched and beaten (Ballan & Burke Freyer, 2012). Furthermore, women with disabilities have been found to be around twice as likely to experience physical injury as a consequence of IPV.

While risk factors for IPV have been found to be similar to those of women with no disability, there are unique types of disability-related risk that may explain this particular vulnerability to IPV. These factors include physical, emotional and financial dependence as well as 'perceived vulnerability by perpetrators' (Breiding & Armour, 2015, p. 455). Some men may exploit this vulnerability and deliberately target women with physical disabilities for an intimate relationship because they tend to be more easily dominated and manipulated into dependency. Other men seem unable to cope with their changing role of becoming a carer. Male partners have been found to experience resentment over their wives' physical disability, which is often related to them justifying their use of IPV. In this regard, Ballan and Burke Freyer (2012) stated: Abusive intimate partners exploit the challenges presented by disability, knowing that this will seriously limit a woman's ability to take action (p. 1085).

Women with physical disabilities are dependent on their partner for assistance with daily needs. This makes them vulnerable to disability-related abuse/violence. Male abusive partners have been found to withhold or sabotage necessary equipment such as wheelchairs, but also to withdraw assistance with necessities such as getting out of bed, dressing and personal hygiene (Lund, 2011). The disabled woman who is dependent on assistance may feel that she has no choice other than to accept the abuse together with the assistance.

Acceptance of abuse/violence

Women with physical disabilities have been found to perceive themselves as unattractive and sexually inadequate. Negative self-perception coupled with a desire to have an intimate relationship may lead to acceptance of the abuse/ violence. Nosek and colleagues (2006) analysed experiences of 415 physically disabled women aged between 18 and 64 years with different ethnic backgrounds. Findings suggested that factors including social isolation, lack of mobility and depression were directly related to their IPV experiences. The study found that the women were likely to accept the violence due to barriers of escaping and accessing help. The researchers acknowledged that the experience of physical disability in the context of IPV is inherently complex. They indicated that women may fear retaliation by the very person they are dependent upon for daily functioning.

Barriers to seeking help

Numerous obstacles of accessing help have been noted in the literature. These include beliefs that the abuser will punish the woman for reaching out. While fear of retribution is not unique to women with disabilities (see for example Pratt-Eriksson, Dahlborg-Lyckhage, & Bergborn, 2017) and should always be taken seriously, women with physical disabilities seem to be more hesitant to reach out due to their dependence on the abuser. Other barriers include isolation and difficulties accessing support services due to the nature of the disability (Frohmader, Ricci, 2016), and perceived revictimisation by support services due to unmet disability-related needs (Lund, 2011). It is fair to argue that women in such dependent situations may feel powerless and develop interconnected symptoms of depression given their impaired physical functioning, social

isolation and dependence on the abusive intimate partner. Women with physical disabilities may experience a heightened sense of entrapment due to their dependence for essential care.

Prevention

A number of preventative measures have been mentioned in the literature. These include suggestions for systematic screening (Nosek et al., 2006), particularly because women may not recognise their experiences as abuse/violence (Frohmader & Ricci, 2016). Asking women about abuse/violence must not remain a taboo. Breiding and Armour (2015) stated that only 15% of women were asked about life-time IPV victimisation, which indicates a need for greater recognition by professionals that women with disability require specific attention and should routinely be asked about abuse/violence experiences. Once women are identified, they should receive specialist DFV services, which have been found to increase their likelihood to leave an abusive relationship.

However, professionals working in the disability and DV sector have been identified as lacking essential knowledge and skills (Frohmader & Ricci, 2016; Lund, 2011). Consequently, specific professional development training is required for frontline workers. This may include addressing the 'disconnect between IPV service providers and disability service providers' (Lund, 2011, p. 175) developing partnerships and training opportunities utilising each sector's unique knowledge and understanding.

Ballan and Burke Freyer (2012) compellingly argued for the introduction of self-defence classes specifically for women with disabilities as a preventative measure. They stated: 'Feeling strong and in control of one's body is a necessary aspect of empowerment, which in turn is often the first stage in the long process of escaping an abusive situation' (p. 1101).

Safety-promotion strategies to protect one-self from abuse may include specifically targeted selfdefence training. Women with physical disabilities may learn how to resist verbally (even physically) and through this training experience increased empowerment. Capacity of self-protection, I argue, is not dependent on the nature of the disability. A woman may come up with creative ideas how to develop self-determination and reduce her dependency on the abuser. This includes knowledge and understanding of the fact that she can use resistance against the physical and sexual abuse. Self-protection skills may even include physical forms of self-defence including using the wheelchair and or crutches (Ballan & Burke Freyer, 2012). Discussing individual safety planning that integrates the woman's unique situation and takes the specific form of physical disability into account could not only reduce the violence but foster self-confidence that may lead to increased readiness to reach out. It will be important to consider the woman's dependence on the abuser for daily living needs and openly discuss how the abuser is exploiting aspects of the woman's disability and exerting his power and control. Self-defence training programs for women with intellectual disabilities already exist (see Guggisberg, Henricksen, & Holt, 2017).

Future directions

Further research is greatly needed to understand the experiences of women with physical disability and uncover their unmet needs. This may include examination of the nature and frequency of DFV service provision to women with physical disabilities. Furthermore. research should investigate what kind of disability-related IPV is experienced by women with physical disability. Narrative analyses may be particularly suitable to capture the women's lifespan trajectories. Male partners' explanations of their situation as a carer would provide valuable insight into their struggles to cope with the distress associated with care and ways they justify the use of abuse towards them. Finally, innovative intervention and prevention programs should be developed and evaluated. which are tailored specifically to women with physical disabilities who are subjected to IPV.

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Engaging and working with people who use violence - learnings from community initiatives

By Dr Sue Carswell

This article highlights some of the main findings from the study, Key elements of proactive service intervention with people who use violence: learnings form family violence services in the Canterbury Police District (Carswell, Frost, o-Hinerangi, Betts 2017). The study was conducted with two community organisations based in Christchurch, New Zealand, that developed initiatives with perpetrators of domestic and family violence. The Christchurch Police Safety Order (PSO) Service operated by Stopping Violence Services (SVS), and ReachOut Men's Service operated by Aviva. These organisations and their partner agencies recognised working with perpetrators to change their attitudes and behaviour was crucial to preventing future violence.

I would like to share some of the key learnings from this study related to engaging with perpetrators and supporting their attitude and behaviour change. The findings resonate with other studies and add to the growing body of knowledge in this area. While not reported on in this article, the study also examined how the work of clinicians and practitioners engaging with clients and their families is supported by their service and the wider service context. Good practice elements were identified in the areas of service development and management, workforce capability and capacity, cultural competencies, risk assessment and management and interagency coordination and collaboration.

Throughout the study it was reiterated by stakeholders that there must always be a balance between strengths-based approaches used with perpetrators of violence and ensuring they take responsibility for their actions. It is essential to ensure the voices of those who have been abused are heard and kept as a central focus when working with perpetrators.

Both the Christchurch PSO Service and ReachOut Men's Service were part of local interagency forums that assess and manage risk in family violence cases. The trigger for both initiatives were family violence reports to the police. SVS provide a parallel service to refuges and work with perpetrators. While predominantly male, they also have specialist teams working with women and young people who perpetrate violence. Aviva, who provide the ReachOut Men's Service, are a specialist family violence agency providing services to individuals and families using a holistic approach to support all members of the family.

Research method

The Christchurch PSO Service (Carswell, o-Hinerangi and Gray 2014) and the ReachOut Men's Service (Campbell 2014) were evaluated after the first year of operation. A follow-up study was commissioned by Canterbury Police to identify common elements of good practice with perpetrators. A mixed methods approach collected data from interviews and focus groups with 58 key stakeholders comprising of operational staff and managers from SVS and Aviva and interagency partners. Quantitative analysis of service outputs and outcomes was conducted. A brief review of the literature on working with perpetrators identified how the case study services aligned with evidence on good practice. The following excerpts and summaries from the study highlight findings on engagement and facilitating behaviour change.

1 While the service context has changed since this study was conducted with a new interagency initiative (Integrated Safety Response - ISR) and developments in the local PSO model the learnings about engaging and working with perpetrators are still highly relevant.

2 Police Safety Orders (PSO) are used throughout New Zealand and issued by Police at family violence events to persons at risk of committing family violence ('bound person' who is identified as the 'primary aggressor') where there is insufficient evidence to make an arrest; however an officer has reasonable grounds to believe that temporary separation is necessary to ensure the safety of 'persons at risk' in the household. A PSO aims to deescalate a violent situation as the person bound by the order must leave the household and cannot contact the persons at risk or the children who reside with them. The effect of the PSO can last up to five days.

Engaging with people who use violence

Timeliness of proactive contact

A strong finding from the evaluations of both case study services was the timing of the contact shortly after a family violence episode was likely to increase engagement, as at that stage people were more open to receiving support to make changes. Feedback from clients supported this view, as did the high level of receptiveness among clients who were able to be contacted at that stage.

Dr Sue Carswell, Senior Research Officer, has over 20 years research and evaluation experience working for government agencies, community organisations, and universities nationally and internationally. Sue's main areas of focus are examining how good outcomes can be achieved for vulnerable families and individuals, particularly for those with multiple complex issues such as domestic and family violence, child abuse

and neglect, addictions, mental health and poverty. She has an indepth understanding of the dynamics of different forms of domestic and family violence and the processes and initiatives used to prevent further harm. She is a specialist in the area of service development and delivery to provide information on i m p l e m e n t a t i o n, effectiveness, and to inform good practice



Motivational approach used by service staff

Both services used a strengths-based supportive approach to engage clients as quickly as possible during the initial call. The high level of receptivity in both services shows the skill of staff in connecting with people, enabling them to deliver brief intervention. The approach used, the authenticity of staff and qualities such as sincerity, caring, being non-judgemental, and informative style were all important. The use of motivational techniques to encourage people to think about change, 'plant the seed', and offer further service support to help them make those changes were also important.

For example staff would say they were 'checking-in' to see if potential clients had any questions about the legal processes or wanted any help or support. This opened the way to discuss how the person was feeling about the situation, if they required information or clarification about anything, and strategies for keeping their families safe (safety planning).

Voluntary participation

Research participants believed the voluntary aspect of the service was important for both initial engagement and for retention of clients in the service. A strong theme in this research and the literature is that people will not change unless they choose to. Engaging people on a voluntary basis means they are to some extent open to the possibility of change and there is not a level of resistance that can be encountered when services are mandated.

Awareness and accessibility of services

The proactive contact of the PSO and ReachOut services increased awareness about where to get support and provided an accessible and free pathway to services. Where outreach services were offered this was also found to increase accessibility.

Supporting attitude and behaviour change Brief intervention

Both services utilised brief intervention to provide information, educate, assess risk, provide safety planning advice, and offer further support. Staff needed to be experienced at the provision of brief intervention and have the knowledge to skilfully deliver a safety plan and assess risk without disengaging the client. They also needed to be adept at handling crisis situations on the spot.

The provision of information is an important element of the brief intervention. It appears some people do not understand the conditions placed on them by justice processes and have questions about PSOs, bail conditions, accessing their children, protection orders, or where they can get help with other issues. Providing information and clarifying the situation was thought to reduce confusion and the potential for conflict.

Staff from both services used motivational interviewing techniques to promote readiness to change and talked about 'planting the seed' that may lead to a person seeking support in the future. This was backed up with an invitation to meet for a face-to-face session and an open offer of free support in the future.

what supports the person currently had and if they were engaged with other services. If issues such as alcohol abuse and mental health were identified, staff could provide information about, and refer to specialist services. This required knowledge of service providers in a range of areas.

Interestingly, feedback from some clients was that the brief intervention acted as a 'refresher' about tools and strategies they had learnt at previous non-violence programmes. It made them aware of strategies that they had forgotten and made some realise that they had started to 'slip' back to old ways of behaving.

Tailoring support

Those who agreed to an initial assessment received a tailored plan to address their risks and needs. The individualised nature of the plan was thought to be key in supporting some people to make changes through meeting their particular needs.

Pathways to other services to meet multiple needs

The approach of both services offered an opportunity for people to access support, not only for addressing their use of violence, but also for addressing the underlying issues that may contribute towards that behaviour such as past trauma. They also provided information and referrals to services to address issues such as addictions, mental health issues, poverty and housing issues.

Concluding reflections

While the services were different, there were common elements such as: the proactive and timely approach of workers shortly after a reported family violence incident to police; the voluntary rather than mandatory nature of the service offered; the provision of brief intervention including safety planning; and a pathway to further support that was free and tailored to individual needs. The case studies highlighted the potential benefits of services for victims and perpetrators working more closely together, whether within an integrated family service such as Aviva, or a parallel model such as the Christchurch PSO service operated by SVS in collaboration with refuges/Aviva. These services provide an important and timely additional source of information about perpetrators which helped to identify risks and manage safety. They also demonstrated the importance of strong collaborative networks with other agencies in order to provide a more informed and coordinated response.

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Queensland Gendered Violence Practitioner Forum at a glance

During the month of November the, QCDFVR team travelled to Brisbane to host our inaugural 'New ways of working: Queensland Gendered Violence Practitioner Forum'. The forum provided an opportunity for international and national keynote speakers to share their knowledge and practice wisdom and for Queensland-based practitioners to share their tools for practice.

We are sincerely grateful for the support of our sponsors, partners and friends and in particular acknowledge the Organising Committee:

- Ms Leona Berrie WWILD
- Ms Gabrielle Borggaard DVAC
- Mr Paul Monsour SPEAQ
- Ms Linda-Ann Northey WAVSS/ EVAWQ

Presentations can be found by visiting the past events page on our **website**. Once on the page, you will need to click on the tab on the left hand side called 'presentations' and then click on the 'title' of the pdf you would like to view.

Photos



Above: Ms Carolyn Markey, Associate Professor Annabel Taylor, Mr Alan Jenkins, Ms Jackie Burke & Professor Lori Sudderth



Above: Mr Paul Monsour & Dr Deborah Walsh



Above: The Queensland Centre for Domestic and Family Violence Research (QCDFVR) acknowledges that workers in Queensland's remote and regional communities, and those located in smaller services, may find accessing training and professional support difficult.

This year CQUniversity made funding available to support workers to attend the New ways of working: Queensland Gendered Violence Practitioner Forum. The lucky recipients are pictured here with Associate Professor Annabel Taylor.

For those who weren't able to attend here is what our delegates and QCDFVR friends found most beneficial about the forum:

- 'Searching for the perfect victim and working with father's consent. Having a chance to see a wider perspective on gendered violence by meeting others in the sector and seeing what else is happening in Queensland'
- 'New information about working with interruptions to frontal lobe very interesting. Now change my whole approach to the initial content'
- 'New knowledge, new ideas
- 'Room full of experienced practitioners, wealth of knowledge, relevant topics plus good speakers overall'
- 'The progress of gendered violence in the public/policy/judicial sectors'
- 'The knowledge that was gained through presentations recognising different cultures and ways of working effectively'
- 'Great forum. Thank you so much. We are definitely seeing some shifts that will equate to increased safety for women and children'
- 'I loved the format having a keynote speaker then going into the 20min toolkits has kept the pace up and in changing focus. - kept me alert'

Forthcoming Events

FREE PUBLIC PRESENTATION

The Relationship between Gender and Coercive Control in the Context of Domestic and Family Violence

Presented by Dr Jamilla Rosdahl

Hosted by Queensland Centre for Domestic and Family Violence Research, CQUniversity

Where:	Online
When:	10:00am (QLD), Tuesday 27 February 2018
Register:	Register on this LINK no later than Friday 23 February 2018

For further information please visit www.noviolence.org.au



SAVE THE DATE

Guest Speaker: Professor Mary Koss

Hosted by Queensland Centre for Domestic and Family Violence Research, CQUniversity

Where:Mackay, Brisbane, MelbourneWhen:April 2018

Stay up to date by visiting www.noviolence.org.au

EXPRESSIONS OF INTEREST

Queensland Indigenous Family Violence Prevention Forum

The Queensland Centre for Domestic and Family Violence Research (QCDFVR) seeks expressions of interest from Aboriginal and Torres Strait Islander practitioners in the domestic and family violence field to join QCDFVR in presenting/ facilitating a Yarning Circle at our annual Queensland Indigenous Family Violence Prevention Forum (QIFVP).



Submission Requirements

Yarning Circles will run for an hour and 15 minutes. The Forum theme is – **'Language of Change'.** We invite you to provide a 200 word outline of the aim and contents of your "yarn". As well, we welcome your biography (100 words about you, where you work, your cultural background etc). We will email you when we receive your Yarning Circle outline and biography, and will contact you by **Friday 12th January 2018** to let you know if your Yarning Circle is selected for the Forum.

Terms and Conditions

If your outline is accepted you will need to accept your invitation and register your attendance. The deadline for confirmation is Friday 19th January 2018. Presenters will have their Yarning Circle outline printed in conference material, including the conference blog, book of abstracts, email promotion, website and Forum Handbook. All submissions must be completed electronically and submitted via email to p.frankham@cqu.edu.au. If you are unable to submit via email, please contact QCDFVR on 07 4940 3340. Please note only two complimentary presenter tickets are allocated per Yarning Circle.

Download the application form **HERE**

Contact Us

QCDFVR CQUniversity Mackay PO Box 135 Mackay MC, 4741 P: 07 4940 3320



QCDFVR

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Senior Research Officers

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We encourage readers to contribute to the QCDFVRe@der. If you have any information or articles you wish to publish, please contact QCDFVR Staff.

HAVE YOUR CONTACT DETAILS CHANGED?

We have become aware that some recipients of the QCDFVRe@der have relocated or changed contact details, including email address. To enable us to update our records and ensure that you receive our quarterly publication, please contact us at the listed phone number or email qcdfvronline@cqu.edu.au with your change of details. Please be assured that the Centre does not release your details to any third parties without your permission.

If you would like to be included on, or removed from, the Centre's mailing list, please contact us on **07 4940 3320.**

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Disclaimer: The Queensland Centre for Domestic and Family Violence Research welcomes articles from guest contributors. Publication of the articles will be at the discretion of the Director of the Centre. Views expressed in published guest contributions are not necessarily the views of the Centre, CQUniversity or the Queensland Government. Whilst all reasonable care has been taken in the preparation of this publication, no liability is assumed for any errors or omissions.