

Evaluation of National Plan to Reduce Violence Against Women and their Children (2010-2022)

Consultation Summary Report Volume 1: Main Report

Department of Social Services

December 2021



Glossary

Terminology	Definition			
4AP	Fourth Action Plan under the National Plan to Reduce Violence against Women and their Children 2010-2022			
ABS	Australian Bureau of Statistics			
AIHW	Australian Institute of Health and Welfare			
ANROWS	Australia's National Research Organisation for Women's Safety			
CALD	Culturally and linguistically diverse			
COAG	Council of Australian Governments			
COVID-19	Coronavirus			
The Department	Department of Social Services (Australian Government)			
DSS	Department of Social Services (Australian Government)			
FDSV	Family, domestic and sexual violence			
ImpEG	National Plan Implementation Executive Group			
LGBTIQ+	Lesbian, gay, bisexual, transgender, intersex, and queer			
The National Council	National Council to Reduce Violence against Women and their Children			
The National Plan	The National Plan to Reduce Violence against Women and their Children 2010-2022			
NCAS	National Survey on Community Attitudes towards Violence against Women			
NIP	National Implementation Plan (for the Fourth Action Plan)			
PMR	(DRAFT) Performance monitoring and reporting framework (for the Fourth Action Plan)			
PSS	Personal Safety Survey			

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Executive summary

Summary of findings



The implementation of the National Plan has helped bring family, domestic and sexual violence (FDSV) into the spotlight nationally, uniting the Commonwealth, state and territory governments.

The National Plan has contributed to introducing consistent language and understanding of FDSV, while laying the strategic platform to support the cross-government response to FDSV. Flagship initiatives were viewed positively in helping to raise community awareness and translate research into practice. This was associated with greater community literacy and understanding that violence against women and their children is unacceptable.

Key findings from the consultations included:

- The National Plan demonstrates the collective commitment to address FDSV, with the Commonwealth taking leadership in its development and implementation.
- The National Plan plays a significant role in laying the political and strategic platform to support a range of responses to FDSV across the country.
- Stakeholders identified that violence against women had not decreased, which was attributed to increased awareness, improved reporting, and greater confidence in services increasing disclosures.
- Stakeholders called for significant sustained funding for services to be able to meet the growing demand of victim survivors, their children, and perpetrators of FDSV, associated with the increase in community awareness of FDSV.
- For diverse groups who experience FDSV, for example Aboriginal and Torres Strait Islander women and children, women from culturally and linguistically diverse backgrounds, women with disability, LGBTIQ+ communities, while progress has been reported across the life of the National Plan, it was considered that more needs to be done to address the specific needs of these groups.
- The service response must place greater emphasis on perpetrators, while continuing to support the safety needs of women and their children. To achieve this, justice responses require further enhancement including training for police and courts staff.
- Addressing the gendered drivers of violence and supporting primary prevention were identified as key strategies for reducing rates of violence.

The National Plan to Reduce Violence against Women and their Children 2010 – 2022 (the National Plan) was developed in partnership between the Commonwealth and all states and territories to provide a national unifying strategy to address women's safety. The National Plan established the objective that "Australian women and their children live free from violence in safe communities." Under the National Plan, a series of three-year Action Plans were implemented to drive the activities towards a sustained reduction in violence against women and their children. The fourth and final action plan was implemented in 2019.

The Department of Social Services (the Department) engaged KPMG to conduct an evaluation of the National Plan and the Fourth Action Plan to assess their impact and effectiveness in meeting their objectives. As part of this evaluation process, KPMG has undertaken consultation with a wide range of stakeholders, including frontline workers, government officials, data custodians, flagship initiative leaders and non-government organisation service providers.

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Purpose of the Consultation Summary Report

This Consultation Summary Report has been prepared to assist the Department, and other key stakeholders, with early insights into critical stakeholder consultation activities that form part of the preliminary stages of the evaluation. These findings can be used to inform the development of the new National Plan to end violence against women and children.

The focus of the Consultation Summary Report is the key stakeholder engagement activities that have taken place:



Frontline worker survey



Stakeholder interviews and focus groups

These activities will provide a voice to the sector with respect to the implementation and effectiveness of the National Plan. This report contains interim findings from individual stakeholder consultation activities and does not contain the final findings of the evaluation being conducted by KPMG, which will be featured in a Final Evaluation Report in May 2022.

Due the complex policy landscape that exists at the national and state level, it is not possible to attribute changes reported in stakeholder activities directly to the National Plan. Where change has been identified, it has not been possible to untangle the discrete impact of the National Plan from the ongoing efforts of all initiatives that were in operation at the same time, including the range of state-led initiatives.

Frontline worker survey findings

An online survey was developed and distributed to a series of frontline service providers in each state and territory. The survey was live for approximately one month, from 16 April 2021 to 21 May 2021. Overall, 690 individuals completed the online survey, representing a completion rate of 79.0% of those who started the survey. A response rates was not able to be calculated as the size of the workforce is not known and the number of individuals who received the survey link is unknown. Despite sample limitations, there was representation across the state and territories.

- More than three-quarters of respondents reported having heard of the National Plan prior to completing the survey (78.7%), with almost one-half of respondents indicating the National Plan influences the work they do to a moderate or great extent.
- Nearly two-thirds of respondents reported substantial increases in the number of FDSV initiatives since the National Plan was implemented in 2010. However, respondents reported that these initiatives did not necessarily meet the needs of or improve the safety of women and their children.
- Almost three-quarters of respondents believed that there had not been any decrease at all in violence against women and their children in the community since 2010 (74.1%).
- The majority of survey respondents (65.3%) believed the FDSV service system is progressing in the right direction to make women and their families safer. It was however noted that progress was too slow, and victim survivors remained at risk while the system catches up.
- There was significant concern that the FDSV service system was not meeting the needs of diverse groups at risk of experiencing violence with specific reference made to Aboriginal and Torres Strait Islander women and their children, culturally and linguistically diverse (CALD) women, including migrants and refugees, lesbian, gay, bisexual, transgender, intersex and queer (LGBTIQ+) people, women with disability, children and young people, and those living in rural and remote areas.
- Whilst there have been recent promising innovations in the police and courts systems, the overall justice response to FDSV was noted as being a concern for victim survivors. A lack of training and understanding of the nuances of FDSV, in particular non-physical forms of violence, along with ongoing victim-blaming attitudes were seen as key issues.

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• Stakeholders reported that the FDSV sector is under pressure, with workers at risk of burnout and suffering from vicarious trauma. Many stakeholders from specialist FDSV services, while acknowledging the importance of staff training, reported they are not resourced or funded to ensure learning and development does not compromise frontline service delivery.

Stakeholder consultation findings

Broader stakeholder engagement took place from July to September 2021. Interviews occurred with government representatives from each state and territory, as well as representatives from Commonwealth central agencies, major data custodians and flagship initiatives. In addition, focus groups were conducted with non-government organisations and peak bodies in each state and territory. A total of 124 individuals participated in these consultations. Qualitative analysis of the data from the stakeholder engagements identified a series of major themes:

Theme 1: Integrated policy responses and intersectionality

- Overall, the National Plan establishes the collective and enduring commitment to address FDSV. Led by the Commonwealth, the National Plan has laid the strategic foundation through successive government and leadership changes. Stakeholders called for greater clarity in the roles and responsibilities of the Commonwealth and the states and territories in driving the delivery of the National Plan.
- The National Plan's overarching objective is to ensure the safety of all women, however priorities and initiatives have a predominant focus on intimate partner violence. Stakeholders questioned the inclusiveness of the National Plan in relation to LGBTIQ+ communities, as well as children as victims of violence in their own right.

Theme 2: Diverse population groups

• There are a number of diverse population groups that are at risk of experiencing violence. It was widely noted that the traditional service response for victim survivors of FDSV is not culturally appropriate for Aboriginal and Torres Strait Islander women and children or other groups disproportionately affected by violence, such as women with disability. There was a prevailing view among stakeholders that responses for these groups should not be add-ons or modifications to existing programs, and there was a need for co-design and community-led solutions.

Theme 3: Governance and funding

- Collaboration has improved between services, jurisdictions and sectors since the National Plan
 was implemented, but organisations still operate in siloes at times, and further improvements to
 information sharing would benefit victim survivors to reduce revictimisation associated with
 having to re-tell their story. Information sharing would need to be handled in line with privacy
 requirements and sensitivity to ensure safety and avoid unintended consequences for victim
 survivors.
- Stakeholders identified funding as a critical issue for the sector, with short-term time-limited funding impacting the ability of providers to address the increased demand. This also hinders service planning and recruitment and retention of skilled workers.

Theme 4: Community attitudes and rates of violence

• Since the introduction of the National Plan there has been a noticeable shift in community attitudes towards violence against women, but no commensurate reduction in rates of violence. Stakeholders recognise that shifts in rates of violence against women and their children will not be realised until there are sustained investments and approaches that prioritise early intervention and primary prevention, but not at the expense of the crisis response. Stakeholders also acknowledged that rates of violence were unlikely to reduce in the short-term as a shift in community attitudes and awareness supports victim survivors to recognise their experiences of violence and report.

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Fourth Action Plan consultation findings

Stakeholders consulted in interviews and focus groups identified progress across each of the five priorities outlined in the Fourth Action Plan. A heightened focus on primary prevention was noted, as was commitment to community-led and codesigned initiatives for Aboriginal and Torres Strait Islander communities. Increased awareness of the experiences and needs of diverse groups and awareness of sexual violence and harassment more broadly were noted. Improvements in support and service system responses were also identified. Whilst limitations in each priority area were identified, stakeholders acknowledged that the Fourth Action Plan had continued to progress the national response to reducing violence against women and their children.

Next steps

Challenges lay ahead as the Commonwealth prepares to introduce a new National Plan to end violence against women and children. Findings from the analysis of consultation activities suggest some considerations for the development of the new National Plan include:

- The need to eliminate barriers, including legislation and policy that unintentionally works against victim survivors
- Long-term funding commitments to promote community trust and sustainable delivery models to improve outcomes for victim survivors and enhance the evidence-base on what works in responding to FDSV
- Greater consideration of responses for diverse population groups to ensure equitable access to services that are co-designed and culturally appropriate
- Increased attention on the role of perpetrators and justice responses to drive sustained reductions in rates of violence, and
- Continued focus on the underlying drivers of violence, including gender inequality, and continued support for primary prevention initiatives, to stop violence before it starts.



1 Introduction

1.1 Objective and structure of this report

This Consultation Summary Report has been developed to provide the Department of Social Services with initial insights and findings from two key stakeholder data collection activities that form part of the evaluation to help inform the development of the new National Plan. These findings are preliminary and further analysis and data collection activities are required to formulate a full and cohesive understanding of the effectiveness and impact of the National Plan.

The Consultation Summary Report will focus on what evaluators have heard from the range of stakeholder consultation activities. This includes:

- Frontline worker survey
- Interviews with government agencies
- Interviews with flagship initiatives and data custodians
- Focus groups with peak bodies and non-government organisations.

This report features the voices of those who participated in these consultations.

The findings from these activities will be further analysed and considered in conjunction with the other data collection methods to provide insight into the effectiveness and outcomes of the National Plan and Fourth Action Plan. The Final Evaluation Report will be released in May 2022.

Findings from the stakeholder activities must be interpreted with the recognition that, due to the complex policy landscape in place nationally, with each state and territory concurrently driving reform at the local level through respective strategies and plans, it is not possible to attribute changes that may have occurred since 2010 directly to the National Plan. Stakeholders may have particularly been challenged to separate the impact of initiatives under the National Plan from state-led initiatives. While we will observe and analyse changes over the period of the National Plan, causal links will not be able to be made. As such, where change is identified, it has not been possible to identify the discrete contribution of the National Plan.

The report is structured to provide a clear understanding and background to the evaluation, and to outline the methodology of featured data collection activities and the major findings. The structure is:

- Introduction to the National Plan
- Part A: National Plan consultation activities
 - Frontline worker survey
 - Stakeholder consultation findings National Plan
 - Summary of findings from interim consultation activities
- Part B: Fourth Action Plan consultation activities
 - Evaluation of the Fourth Action Plan
 - Stakeholder consultation findings Fourth Action Plan

This report is supplemented by a second volume which provides all the appendices and supporting material for the Consultation Summary Report.

This report is limited in scope and should not be considered a representation of the overall evaluation findings. Data collection and analysis is ongoing and will be synthesised against the evaluation domains and specific evaluation questions in performing the process and outcomes evaluations.

1.2 The National Plan

In May 2008, the National Council to Reduce Violence against Women and their Children (the National Council) was established to develop an evidence-based plan for reducing violence against women and their children. The National Council report *Time for Action: The National Council's Plan for Australia to Reduce Violence against Women and their Children 2009–2021* recommended that all Australian governments agree to a long-term plan to reduce violence, with the Commonwealth Government taking a leadership role. In response to this recommendation, the Australian Government developed the *National Plan to Reduce Violence against Women and their Children 2010–2022* (the National Plan).

The National Plan was developed in partnership with all states and territories and entailed engagement with over 2,000 community stakeholders, consideration of 370 public submissions and six expert roundtable forums. It was intended as a national unifying strategy, signifying the collective commitment of governments to implement significant and sustainable changes to address the problem of violence against women and their children. In recognising the need for a whole of community response, governments committed to working in partnership with business, researchers and the community sector to develop and execute the National Plan and report on its progress. The National Plan was released by the Council of Australian Governments (COAG) in February 2011, and the Department of Social Services (the Department or DSS) is the lead agency responsible for administering the National Plan.

1.2.1 Vision and outcomes

The National Plan sets the intended objective that "Australian women and their children live free from violence in safe communities". To achieve this vision, governments must be successful in making "a significant and sustained reduction in violence against women and their children over the period of the National Plan".

The high level indicators of change were agreed as follows:

01	Reduced prevalence of domestic violence and sexual assault
02	Increased proportion of women who feel safe in their communities
03	Reduced deaths related to domestic violence and sexual assault
04	Reduced proportion of children exposed to their mother's or carer's experience of domestic violence.



In addition to the target of achieving a reduction in violence against women and their children, the National Plan also identified six key outcomes for all governments to deliver over the 12-year term of the National Plan:

01	Communities are safe and free from violence
02	Relationships are respectful
03	Aboriginal and Torres Strait Islander communities are strengthened
04	Services meet the needs of women and their children experiencing violence
05	Justice responses are effective
06	Perpetrators stop their violence and are held to account

1.3 Action plans

Underpinning the National Plan is a series of Action Plans which have been developed every three years and set the priorities for work under the National Plan. Each plan articulates the key actions for working towards a real and sustained reduction in violence against women and their children.

First Action Plan (2010 – 2013)

Building A Strong Foundation

Focused on building a strong foundation for change by putting in place national-level infrastructure to inform future policy and service delivery and to engage the community in reducing violence against women and their children.

Second Action Plan (2010 – 2013)

Moving Ahead

Jurisdictions committed to the national prevention campaign, Stop it at the Start, the development of a primary prevention framework to share understanding of preventing violence, an expanded research agenda and National Outcome Standards for Perpetrator Interventions.

Third Action Plan (2016-2019)

Promising Results

Strengthened the evidence base and national data collections, providing the basis for the trials of new and innovative approaches in early intervention, and crisis responses.

Fourth Action Plan (2019-2022)

Turning the Corner

The Fourth Action Plan is currently underway and was expected to see the "delivery of tangible results in terms of reduced prevalence of domestic violence and sexual assault, reduced proportions of children witnessing violence and an increased proportion of women who feel safe in their communities"¹.

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¹ Australian Government (2014), *National Plan to Reduce Violence against Women and their Children 2010-2022*, Canberra: Australian Government, available at <u>https://www.dss.gov.au/women/programs-services/reducing-violence/the-national-plan-to-reduce-violence-against-women-and-their-children-2010-2022.</u>

1.4 The Australian service landscape

The National Plan is underpinned by a complex governing architecture, accounting for a multilayered service delivery system. The Commonwealth Government has overarching responsibility for the ongoing administration and delivery of the National Plan through the Department. Funding responsibility for FDSV services is primarily the responsibility of states and territories, although the Commonwealth, local governments, and non-government organisations also contribute a level of funding. Numerous agencies including social services agencies, housing agencies, criminal justice agencies, and mainstream health and education services are all involved in responding to FDSV. The overall architecture of the National Plan is shown in Figure 1.

	Significant and s	sustained change		
Reduced prevalence of domestic violence and sexual assault			Reduced proportion of children exposed to mother's or carer's experience of domestic violence	
National	Plan to Reduce Violence	against Women and their	Children	
	nships are communities are strengthened	Services meet needs of women and their children		
	Action	Plans		
1 st Action Plan: 2010-13 Building a strong foundation	2 nd Action Plan: 2013-16 <i>Moving ahead</i>	3 rd Action Plan: 2016-19 Promising results	4 th Action Plan: 2019-21 <i>Turning the Corner</i>	
 Building Primary Prevention Capacity Enhancing Service Delivery Strengthening Justice Responses Building the Evidence Base 	 Driving whole of community action to prevent violence Understanding diverse experiences of violence Supporting innovative services and integrated systems Improving perpetrator interventions Continuing to build the evidence base 	 Prevention and early intervention Aboriginal and Torres Strait Islander Women and their Children Greater support and choice Sexual Violence Responding to Children living with violence Keeping perpetrators accountable 	 Primary prevention is key Support Aboriginal and Torres Strait Islander women and their children Respect, listen and respond to the diverse lived experience and knowledge Respond to sexual violence & harassment Improve support and service system responses 	
			National Implementation Plan	
Improve the evidence base	Strengthen the workforce	Integrate systems and share information	Track Performance	
Governar	ce structures, Collaboration, Links with o	civil society, Alignment of Actions Plans	to targets	
Flagship activities				
Our Watch	Australia's National Research Organisation for Women's Safety (ANROWS)	1800Respect	DV-alert	

Figure 1: Architecture of the National Plan

Source: KPMG

States and territories are pivotal to the delivery of family, domestic, and sexual violence support services. They are responsible for the provision of specialist services such as counselling and family support programs, perpetrator intervention services and homelessness services. They are also accountable for criminal justice responses (via agencies such as Police and Corrective Services) to FDSV. Further, states and territories oversight mainstream agency responses through managing FDSV responses provided by agencies such as Health and Education.

Most jurisdictions have developed their own policies and strategic frameworks which align to the broad outcomes and objectives of the National Plan. Some initiatives funded under the National Plan formulate part of jurisdictional policies or frameworks. An overview of key policies and frameworks is provided below.

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New South Wales

Domestic and Family Violence Blueprint for Reform 2016-2021: Safer lives for women, men and children (the Blueprint) – developed in response to increasing public attention and policy reform to respond to domestic and family violence. The Blueprint has six priority areas of action across prevention, early intervention, support for victims and perpetrators and systemic improvements. While it broadly aligns with the National Plan, the Blueprint incorporates existing state policies including specific portfolio responses in the justice and health sectors.

NSW Sexual Assault Strategy 2018**-2021** – a comprehensive framework aimed at improving prevention and response to sexual assault.



Victoria

Victoria's Royal Commission into Family Violence (2016) made 227 recommendations to re-orient and improve Victoria's family violence system, from significant systemic reforms (such as the rollout of Support and Safety Hubs and the redevelopment of the Common Risk Assessment Framework) to sector-specific initiatives aimed at enhancing the capacity of each of the health, justice and community services systems to respond to and support individuals and families at risk of experiencing family violence.

The *Free from Violence* strategy is Victoria's plan to break the cycle of family violence and violence against women.



Queensland

Domestic and Family Violence Prevention Strategy 2016-2026 – this strategy was informed by a report of the Special Taskforce on Domestic and Family Violence; Not Now, Not Ever: Putting an end to domestic and family violence in Queensland. It targets prevention, early intervention, crisis response and recovery. The Strategy seeks to support a whole-of-community response to domestic and family violence and create lasting cultural change

Prevent. Support. Believe. Queensland's Framework to address Sexual Violence – The framework sets out the government's vision for a Queensland where everyone lives free of the fear, threat or experience of sexual violence. To support implementation of the framework, a whole-of-government action plan to address sexual violence was released in October 2021.



Western Australia

Path to Safety: Western Australia's Strategy to Reduce Family and

Domestic Violence 2020 – 2030 – sets out a clear whole-of-government and community plan for reducing and responding to this issue over the next decade. The strategy is supported by three action plans, and has four focus areas of Aboriginal Family Safety, Act Now, Primary Prevention and System Reform. The whole of government approach outlined in the strategy supports Western Australia's vision: A Western Australia where all people live free from family and domestic violence.

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South Australia

Committed to Safety: A Framework for addressing domestic, family and sexual violence – has three key focus areas of primary prevention, service and support and justice with a range of short, medium and long-term actions spanning four years. Also has a strong focus on providing coordinated and targeted support to specific population groups such as young people, Aboriginal women and communities, women with disabilities, culturally and linguistically diverse women, older women, and people living in regional and remote communities.



Tasmania

Safe Homes, Families, Communities – Tasmania's action plan for family and sexual violence 2019-2022 – this action plan is the next stage of the Tasmanian Government's long-term commitment to the community and builds on efforts to prevent and respond to FDSV delivered through Safe at Home and other services funded by the Tasmanian Government. The action plan includes three priority areas of primary prevention and early intervention, response and recovery and strengthening the service system.



Australian Capital Territory

The ACT Women's Plan 2016-26 highlights the principle that all women and girls have the right to be safe and live without fear. The implementation of the Second Action Plan 2020-22 *Equity* seeks to improve outcomes for women and girls, and improve gender equity across the ACT. This supports the Safer Families Reforms delivered through the ACT Government's Office of the Coordinator-General for Family Safety. This reform package demonstrates the ACT's long-term commitment to whole of government and community initiatives to prevent and respond to domestic and family violence. The Sexual Assault Prevention and Response Program, begun in 2021, brings additional focus to the issue of sexual violence. The program will develop inclusive, evidence-based and effective recommendations for responding to and preventing sexual violence.



Northern Territory

Domestic, Family & Sexual Violence Reduction Framework 2018–2028 aligns with the National Plan and builds on the Northern Territory Government's previous strategy Safety is Everyone's Right. The Framework includes Action Plan 1, focusing on the first phase of implementation.

The **Northern Territory Sexual Violence Prevention and Response Framework** is a priority under Action Plan 1, focusing on a whole of government, whole of community approach to preventing and responding to sexual violence.

The Commonwealth and States and Territories share funding responsibility across numerous areas including specialist homelessness and family and domestic violence services.

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1.5 Overview of the National Plan Evaluation

The National Plan includes a commitment to conducting an evaluation over the 12-year lifespan, as well as three-year evaluations throughout to evaluate each Action Plan. As the National Plan (and Fourth Action Plan) are due to end in June 2022, the Department engaged KPMG to conduct an evaluation to assess the implementation of the National Plan, its impact and its effectiveness in meeting its objectives. This includes an evaluation of the Fourth Action Plan. This evaluation is also intended to inform future policy, including the development of the next National Plan to end violence against women and their children.

The evaluation of the National Plan will be conducted at two levels: an evaluation of the core purpose of the National Plan, and synthesis of previous evaluations of initiatives that have been implemented over the course of the National Plan. The assessment of progress against the National Plan will be guided by three evaluation domains, which include assessment against the six National Outcomes of the National Plan (see Volume 2: Appendix A for details).

KPMG will engage a mixed-methods approach comprised of three core components:

- Implementation (process) evaluation
- Outcomes evaluation
- Future directions

The data collection methods for the evaluation include:

- Quantitative assessment of outcomes
- Desktop research
- Prior research and evaluation
- Social media analysis
- Stakeholder survey
- Stakeholder engagement

More detail on the data collection methods is available in Volume 2: Appendix C.



Part A: National Plan consultation activities

2 Frontline worker survey

Summary of findings



The frontline worker survey was completed by 690 frontline workers from across the FDSV sector workforce in Australia. The survey collected quantitative data and allowed for written input on two key questions. The quantitative survey findings are grouped into overarching themes based on the structure of the survey:

- Knowledge of the National Plan
- Effectiveness of initiatives implemented since 2010 (when the National Plan commenced)
- Collaboration
- System progress and sector development

Questions relating to system progress and sector development allowed for text input, with qualitative findings grouped into common themes that emerged through thematic analysis of the written responses.

Findings

- More than three-quarters of respondents reported awareness of the National Plan (78.7%) and nearly half indicated that it influenced the work they do to a moderate or great extent (48.6%)
- Nearly two-thirds of respondents reported a moderate or great increase in initiatives relating to FDSV since the commencement of the National Plan (63.0%), but responses were divided as to whether these initiatives had improved safety or met the needs of women and their children
- Respondents noted a slight or moderate improvement in the level of collaboration between services since 2010 (35.4% and 32.6%)
- Half of respondents agreed that the level of training and capacity building offered to the workforce is appropriate (50.7%)
- Nearly three-quarters of respondents believed there had been no decrease in violence against women and their children since 2010 (74.1%).

Whilst over half of respondents recognised that the FDSV system is progressing in the right direction to make victims and their families safer (57.5%), opportunities for improvement were identified. This included:

- The need for improved community awareness, information sharing, collaboration between services and the availability of trauma-informed training across the sector.
- FDSV services reported experiencing high levels of demand and continue to have a large focus on crisis response.
- Despite positive initiatives for people from communities that are disproportionately impacted by violence, more work needs to be done in co-designing and delivering trauma informed and culturally appropriate services.
- Greater capacity needs to be developed in police and courts to improve the justice response to hold perpetrators to account.
- The reported high demand on services makes it hard for some to prioritise training and development, which has is contributing to worker burnout and vicarious trauma within the workforce.

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2.1.1 Introduction

As part of the evaluation, a national online survey was developed as a mechanism to engage with frontline workers in all Australian jurisdictions to understand the impact of the National Plan 'on the ground'. This workforce provides a range of supports and services for victims and perpetrators, including primary prevention, early intervention, and crisis support. Engagement through an online survey was considered the most appropriate method of engagement to be able to reach the widest audience possible, minimising the burden of completion.

The survey was developed in consultation with DSS, and was distributed to a range of government, non-government and community stakeholders involved in responding to violence against women and their children. The survey was also distributed through the networks of state and territory contacts and the National Indigenous Australians Agency.

The survey was designed to:

- Gain a more in-depth understanding of stakeholders' views on the effectiveness of the initiatives implemented under the National Plan and their impact on outcomes over time
- Determine how well the relationships between government and the non-government sector are working on delivering on the National Plan
- Identify the extent of collaboration across different sectors, and
- Identify opportunities to improve service responses and focus areas for future plans and policies.

Prior to distribution, the survey was tested with identified stakeholders from several jurisdictions. This allowed KPMG to:

- Identify any issues with the survey and information package, such as confusing terms or phrases, questions which are too difficult to answer or issues in relation to the survey length (for example, too long and involved)
- Verify that respondents are interpreting questions in the same way, and
- Ensure the user-friendliness of the web-based tool which will enable organisations to complete the survey via a range of mechanisms including via mobile phone.

The survey consisted of 24 questions, including 22 closed ended items and two qualitative items (see Volume 2: Appendix F).

In April 2021, the survey was distributed via a link in emails to approximately 180 government, nongovernment and community stakeholders from each state and territory as well as service providers that operate at a national level (Table 1). Recipients were also encouraged to share and promote the survey link with their networks. The survey was live for approximately one month, from 16 April 2021 to 21 May 2021.

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Jurisdiction	Count
National	27
New South Wales	19
Victoria	16
Queensland	23
Western Australia	16
South Australia	17
Tasmania	17
Northern Territory	31
Australian Capital Territory	13
Total	179

Table 1: Organisations survey links distributed by jurisdiction

Source: KPMG, Stakeholder Survey 2021

Overall, 873 individuals commenced the online survey, with 690 usable completed responses, representing a completion rate of 79.0%. However, the size of the workforce is not known, so the response rate cannot be determined. It is not known if there was any systematic bias in the profile of respondents and if this had the potential to impact on survey responses related to equity and access.

Respondent sampling was not undertaken as part of the survey distribution. Accordingly, it is not possible to translate the findings from the survey to the broader sector workforce. Caution must be exercised not to generalise the results from this survey beyond the cohort of survey participants.

One respondent indicated that they did not provide consent to participate in the survey. One hundred and eighty-two participants provided incomplete survey responses and were subsequently excluded from analysis.²

2.1.2 Who completed the survey?

A total of 690 frontline workers from across Australia completed the survey. The geographic breakdown is outlined in Figure 2. The most responses were received from stakeholders in New South Wales and Queensland. The comparatively low number of responses from Victoria was reportedly due to 'consultation fatigue' as service providers were subjected to a variety of consultation activities around this time for national and state-based initiatives.³

² Incomplete surveys featured two or more incomplete questions. One quarter (24.7%) of incomplete survey responses did not have any items completed after consenting to participate in the survey.

³ Analysis of incomplete survey responses revealed a similar geographical distribution. State or territory was reported for 123 of 183 incomplete responses (67.2%). Incomplete survey rates were reported for: Australian Capital Territory (n=5, 4.1%), New South Wales (n=47, 38.2%), Northern Territory (n=11, 8.9%), Queensland (n=12, 9.8%), South Australia (n=5, 4.1%), Tasmania (n=19, 15.4%), Victoria (n=11, 8.9%), and Western Australia (n=13, 10.6%).



Figure 2: Survey responses by geographical breakdown (n=690)

Source: KPMG, Stakeholder Survey 2021

Approximately two-thirds (68.3%) of respondents reported working exclusively with victim survivors of FDSV. A small proportion reported providing services for perpetrators (4.5%), with nearly onequarter reporting they work with both victims and perpetrators (23.0%). Twenty-nine respondents (4.2%) indicated that they did not provide direct services for victims nor perpetrators.

Figure 3: Who survey respondents provide services for (n=690)



Source: KPMG, Stakeholder Survey, 2021

A range of workers across different areas of service responded to the survey, as outlined in Table 2.

One-half (50.0%) of survey participants reported working in the FDSV or related sector for over six years. Approximately one-quarter of respondents indicated working in the sector for three to six years (23.8%) and zero to three years (25.8%).

Table 2: Survey respondents service areas (n=690)

Service area	Count	Per cent
Case management	311	45.1%
Counselling services	225	32.6%
Legal (incl court support and assistance)	140	20.3%
Community programs (awareness, attitudes, behaviours)	134	19.4%
Housing (incl refuges)	125	18.1%
Perpetrator intervention	75	10.9%
Child protection	72	10.4%
Health services	66	9.6%
Aboriginal and Torres Strait Islander services	64	9.3%
Specialist services - CALD	27	3.9%
Policing and community safety	19	2.8%
Specialist services – LGBTIQ+	12	1.7%
Specialist services - Disability	10	1.4%
Other	89	12.9%

Source: KPMG, Stakeholder survey, 2021

2.1.3 Knowledge of the National Plan

More than three-quarters of respondents reported having heard of the National Plan prior to completing the survey (78.7%). Conversely, over one-fifth of respondents who work in the FDSV sector had no awareness or knowledge of the National Plan (21.2%).

Of the 543 respondents who reported awareness of the National Plan, nearly half (48.6%) indicated the National Plan influenced the work they do to a moderate (31.5%) or great extent (17.1%). One quarter (25.4%) reported the National Plan influenced their work to a slight extent. One in seven respondents (13.3%) reported their work was not at all influenced by the National Plan, and a similar proportion were unable to comment (12.3%).

With respect to knowledge and awareness of flagship initiatives under the National Plan, almost all respondents indicated awareness of 1800RESPECT (94.3%). As shown in Table 3, similar proportions of respondents were aware of the other flagship initiatives: DV-Alert, Our Watch and ANROWS.

Table 3: Awareness of flagship initiatives (n=690)

	Count	Per cent
DV-Alert	399	57.8%
Our Watch	364	52.8%
1800RESPECT	621	94.3%
ANROWS	409	59.3%

Source: KPMG, Stakeholder Survey, 2021

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2.1.4 Effectiveness of initiatives implemented since 2010 (when the National Plan commenced)

Respondents reported increases in the number of initiatives relating to FDSV since the National Plan was implemented in 2010. Nearly two-thirds (63.0%) reported an increase to a moderate or great extent. However, respondents reported that these initiatives did not necessarily meet the needs or improve the safety of women and their children. As shown in Figure 4, 18.3% felt the initiatives had not improved safety at all, with an additional 47.5% believing safety had improved to a slight extent. One in eight respondents reported that initiatives did not meet the needs of women and their children in addressing violence at all, with an additional 59.4% reporting needs being met to a slight extent.



Figure 4: Number and impact of initiatives implemented since 2010

Source: KPMG, Stakeholder Survey, 2021

The vast majority of respondents believed that there had not been any decrease at all in violence against women and their children in the community since 2010 (74.1%). Only one-in-twenty (5.2%) respondents believed there was a moderate or great decrease in violence in this time. Respondents reported slight improvements over the life of the National Plan in terms of community understanding of consent (48.4%) and ability to recognise FDSV (61.9%). Respondents believed that victims are slightly (53.8%) or moderately (35.8%) confident and willing to access services in response to FDSV.



Figure 5: Respondent's perception of violence, community understandings and victim confidence

2.1.5 Collaboration

There were high levels of reported collaboration by frontline worker respondents. Approximately half (49.4%) of respondents reported collaborating to a great extent with other organisations, Government departments, local councils, or services within the FDSV or related sectors. The level of collaboration was reported to have improved since the National Plan commenced to a slight extent (35.4%) or moderate extent (32.6%).

Collaboration between services in responding to particular vulnerable groups (for example, Aboriginal and Torres Strait Islander women and children, women from culturally and linguistically diverse backgrounds, women with a disability, women from LGBTIQ+ communities) had reportedly improved over time. However, about one in seven participants indicated there had been no improvements at all in responding to these groups.

Most respondents agreed that they could connect with the appropriate Government Department or organisation to seek assistance regarding practice, policies, or initiatives to support women and children to a slight extent (37.1%) or moderate extent (36.5%). A small proportion (7.8%) indicated they could not at all connect with the relevant Government Department in this manner.

Source: KPMG, Stakeholder Survey, 2021

Table 4: Collaboration between services

	Not at all	Slight extent	Moderate extent	Great extent	Unable to comment
To what extent do you work with other organisations, Government Departments, Local Councils, or services within the domestic, family and sexual violence or related sectors?	1.3%	13.3%	34.1%	49.4%	1.4%
To what extent has collaboration between Government Departments, Local Councils, organisations or other support mechanisms improved since the National Plan commenced in 2010?	6.2%	35.4%	32.6%	7.1%	17.7%
To what extent has collaboration between services improved in responding to Aboriginal and Torres Strait Islander women since the National Plan commenced in 2010?	15.1%	39.1%	17.5%	2.6%	24.8%
To what extent has collaboration between services improved in responding to culturally and linguistically diverse (CALD) women since the National Plan commenced in 2010?	11.6%	42.9%	18.1%	2.3%	24.3%
To what extent has collaboration between services improved in responding to women with disability since the National Plan commenced in 2010?	15.4%	39.7%	12.6%	1.7%	29.3%
To what extent has collaboration between services improved in responding to people who identify as lesbian, gay, bisexual, transgender, intersex, or queer since the National Plan commenced in 2010?	15.1%	39.6%	15.2%	3.6%	25.5%
To what extent do you feel that you can connect with the appropriate Government Department or organisation to seek assistance regarding practice, policies or initiatives to support women and children?	7.8%	37.1%	36.6%	13.5%	4.5%

Source: KPMG, Stakeholder Survey, 2021

2.1.6 System progress and sector development

FDSV Service System

Most respondents agreed that the FDSV system is progressing in the right direction to make victims and their families safer with 57.5% indicating they somewhat agree and 7.8% strongly agree. A small proportion strongly disagreed (4.3%) that progress was being made in the right direction.

The written responses from respondents provided insight into the positive progress of the FDSV system, as well as common challenges. These responses were subject to a thematic analysis, which revealed the key themes that are outlined below.

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Community awareness and rates of violence

Respondents identified that there was greater community awareness of FDSV and the forms that it can take beyond physical violence. This increase in awareness was attributed by respondents to increased media coverage, education, the national strategic leadership provided by the National Plan and to the research, initiatives, and campaigns produced by ANROWS, Our Watch and 1800RESPECT. Increased community awareness of FDSV was believed to be assisting mainstream workforces to better support victim survivors, and to be encouraging victim survivors to report and seek assistance.



"Community awareness is increasing, issues about consent and abuse of power are being highlighted and people are being called out for their behaviour. There is still a long way to go before abusers actually face consequences, but people are feeling more validated coming forward."

- Respondent from a health service for victim survivors

Despite this progress in awareness of FDSV, respondents emphasised that women and children are still at significant risk whilst FDSV remains a deep-seated societal issue. Respondents noted that too much emphasis is still placed on women to keep themselves and their children safe, without appropriate discussion of perpetrator accountability. A number of respondents noted that they did not believe that sexual assault and violence had been appropriately reflected in the National Plan.

Services meet the needs of victim survivors

Respondents noted that the FDSV service system is improving but that this is happening too slowly to meet demand. Identified improvements included the introduction of a broader range of supports for victim survivors, the development of new initiatives, increased collaboration and information-sharing across organisations, increased support for perpetrator intervention and primary prevention programs, and support for victim survivors to remain in the family home.

Respondents emphasised concern about funding for FDSV services, highlighting that services are experiencing increased demand without an associated increase in funding. Respondents indicated that the National Plan is not adequately resourced at a service level, with additional concerns expressed that services were being de-funded at a national level. Respondents emphasised that the high demand on services and challenges with funding means that the service system is predominately reactive rather than proactive to FDSV. They noted that the focus on short-term crisis responses meant that other necessary services, including primary prevention, perpetrator intervention, support for victims to stay in relationships, and long-term support for victims such as counselling, are not currently available at an appropriate level. Many respondents also identified that limited housing availability, for both crisis accommodation and affordable long-term housing, restricts the options for women to safely leave violent relationships, particularly those with dependent children or animals.



"The focus is still primarily on reactive measures when more is needed to address the gendered nature of violence, the cultural attitudes that condone violence and provide proactive and preventative support for families and individuals."

- Respondent from a case management and counselling service for victim survivors

Diverse groups at risk of experiencing violence

The ability of the FDSV service system to meet the needs of diverse groups at risk of experiencing violence was a strong focus for respondents. Positive progress was noted through the various community-led and holistic service models across the country. However, there was concern that the FDSV service system was not meeting the needs of groups disproportionately impacted by violence, with specific reference made to Aboriginal and Torres Strait Islander women and their children, CALD women, including migrants and refugees, LGBTIQ+ people, women with disability, children and

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young people, and those living in rural and remote areas. There is concern that the FDSV service system lacks resources and flexibility in service delivery to provide culturally appropriate or inclusive support for victim survivors, with initiatives under the National Plan seen as tailored for mainstream society.

Respondents highlighted the need for Aboriginal and Torres Strait Islander women and children to have access to culturally safe services that are co-designed and Aboriginal community controlled. Respondents identified that there is a lack of FDSV resources available for Aboriginal and Torres Strait Islander people. However, respondents also noted that Aboriginal and Torres Strait Islander victim survivors who disclose their experiences of violence may experience community backlash and may be hesitant to access services. It was noted that a mainstream approach to FDSV may not be appropriate for Aboriginal and Torres Strait Islander victim survivors, as they may not want to leave their families or community. Accessing mainstream justice responses may also put Aboriginal and Torres Strait Islander women are more likely to be misidentified as the perpetrators for retaliating against perpetrators. Respondents suggested that services to support Aboriginal and Torres Strait Islander male perpetrators to work through historical trauma while being held accountable for their behaviours, as well as services that support families who want to stay together while working through FDSV issues could be made more readily accessible.



"Nothing has improved for Aboriginal people until Aboriginal Controlled Organisation [sic] are recognised and trusted as the organisations to work with their own communities."

 Respondent from an Aboriginal and Torres Strait Islander service providing legal, child protection, and case management support and community programs for victim survivors

It was noted that there are limited specialist services available for other diverse groups at risk of experiencing violence. Respondents identified that existing services may not meet the needs of CALD women, including migrants and refugees, who may have similar or higher needs than Australian residents but are not as eligible for support. These women may also have specific needs if they are able to access a service, such as access to information in a different language, bicultural legal support, or halal food in temporary accommodation. Specialist services were identified as limited for LGBTIQ+ victim survivors and women with disability. Respondents expressed the view that rural and regional communities are underfunded to meet the rising need for their services, with limited housing options, extended waiting periods, and victim survivors needing to travel to access services. This was believed to reduce the ability of victim survivors in these communities to exit FDSV situations.

Justice responses

The experience of navigating the police and justice system for victim survivors of FDSV was a key theme in the responses. It was noted that positive legislative changes have been made, such as progress towards the criminalisation of coercive control in some jurisdictions, but that these would take time to translate into a cultural shift. New initiatives were reflected on positively, including police attending interdisciplinary team meetings, magistrates attending specialist FDSV training (for example, Safe and Together), women appearing in court via video link in some jurisdictions, the colocation of FDSV support services at police stations, and The Lighthouse Project in the Family Court. However, respondents expressed concerns about the responses of police and the justice system and the impact of this on the safety and wellbeing of victim survivors. It was noted that the police, justice system, Family Court and Child Safety services can engage in victim-blaming narratives that position victim survivors as responsible for FDSV and remove focus from perpetrators.

Police responses to FDSV were described as inconsistent, with police officers having inadequate training to respond appropriately. It was noted that police officers may not identify FDSV at incidents, particularly in cases of coercive control, and may mis-identify the victim as the perpetrator when responding. Police responses were described as slow, with concern that breaches of protection orders were not responded to with urgency commensurate to the risk. This reported inconsistency coupled with victim-blaming responses from police was seen as impacting victim survivors' willingness to report FDSV.

Respondents identified that navigating the court system is challenging for victim survivors as it is slow and can be traumatising as it requires victim survivors to re-live their abuse and face the perpetrator. Respondents noted that victim survivors who have left FDSV relationships can also be experiencing financial distress and be unable to afford appropriate legal representation. Respondents also stated that convictions are very challenging to reach, and believed that sentencing for perpetrators is too lenient.



"Courts and legal processes both in relation to the prosecution of family violence and the issuing of protective orders lag behind the aims of the national plan."

- Respondent from a counselling service for victim survivors

Respondents who commented on the Family Court almost universally expressed concern that the system actively increases the risk faced by women and their children. Respondents stated that the Family Court system can be weaponised by perpetrators against their victims by attempting to gain power through custody of children. Shared custody arrangements can also mean that victim survivors are forced to continue engaging with their abuser. The child protection system was criticised for appearing to prioritise parental rights over the rights of children to have safety and distance from caregivers who have perpetrated FDSV. One respondent explained that:

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"Family Law has also placed 90% of my clients at greater harm post-separation, as they continue to have to be in contact with the perpetrator as they have biological children together. I have also seen horrific parenting orders come out of Family Law that seem to have zero understanding of the intersection of D&FV and Family Law, and that those experiences do not operate in siloes. My clients often disclose feeling trapped, stuck, and wondering 'when is it [D&FV] ever going to end' because of the ongoing contact they are required to have due to Family Law's assumption that perpetrators deserve contact. D&FV should be GREATLY considered when included with Family Law matters, however I have never seen an order that seems to reflect any considerations for safety for the children and the [mum], despite significant evidence that points to the dangers of contact with the perpetrator."

- Respondent from a counselling service for victim survivors

Coordination and governance

Respondents also discussed the coordination and governance from government in the FDSV system. Respondents identified that constructive legislative and policy change had occurred in a number of areas but acknowledged that it would take time for this to translate into meaningful or measurable impact for the FDSV service system. ANROWS, Our Watch and 1800RESPECT were all identified as contributing to increased national awareness of FDSV.

Respondents generally felt that a systematic and coordinated national response to FDSV was not currently in place. Respondents were concerned that federal policy initiatives and funding are not aligning with the needs of service providers. Identified funding challenges included that federal funding was often short term, invested into new initiatives rather than existing services, or was funding in the wrong areas. Respondents were also concerned that federal funding was being withdrawn from important areas such as advocacy.

There were differing opinions among respondents as to whether service providers are delivering integrated services. Some responses noted that they had observed improved collaboration occurring between local and state-wide services. Others identified that there is a marked lack of coordination between government services such as Housing and Centrelink, which means that navigating the broader system is challenging for victim survivors of FDSV. Case workers noted that this lack of broader integration means that they spend a lot of their time advocating for victim survivors and following up with other services, government departments, and police rather than delivering tailored FDSV services. Respondents noted that information sharing is still a challenge between service providers, which can make it difficult for victim survivors to navigate the service system and may place them at greater risk if their support needs are not met.

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Workforce: Training and development

Approximately one-half (50.7%) of respondents identified that the level of training and capacity building currently offered to the workforce operating in the FDSV or related fields is appropriate. About one-in-eight (11.7%) respondents strongly disagreed that the level of training and capacity building is appropriate.

Prioritising training and development

Respondents who identified that training was available described feeling supported by the organisations that they worked for to pursue training opportunities. It was noted that some organisations are required to have an appropriately trained workforce as part of their funding agreements. Some respondents reported having to undergo mandatory training for their role, whilst others raised it as a concern that this was not the case. Respondents stressed that training should not just be a 'tick box' exercise but should be ongoing throughout employment.

Respondents noted that the high demand on frontline FDSV services leads to less capacity to engage in training opportunities even when they are available with frontline services often not funded sufficiently send staff to paid training and to backfill positions. For some organisations that are operating under significant demand, training may also not be a priority compared to providing support to clients. The cost of training was particularly a concern for regional and rural workforces, who may also have to cover travel costs to access training.

Training for mainstream services

Respondents identified that victim survivors of FDSV will also need to access mainstream services for support, and that the mainstream workforce therefore needs to be trained to respond appropriately and be able to collaborate with specialist services. Respondents expressed concern that victimblaming narratives persist outside of FDSV specialist services, that FDSV is often thought to be incident-based rather than a pattern, and that coercive control is not widely recognised. Key workforce areas that were identified by respondents as needing additional training included: housing, child protection, health, mental health, homelessness, social support, and primary and secondary education providers. It was noted that a lack of FDSV training in these workforces can cause victim survivors to face additional barriers to escaping FDSV such as challenges accessing housing or experiencing victim-blaming from child protection. There was also a specific focus among responses about the need to provide training to police and judiciary workforces to address the problems identified in justice responses to FDSV.



"There needs to be more training for people working in environments where they may become aware of family violence but are not specifically in the industry - teachers, nurses, doctors etc. These people are often mandatory reporter[s] but they receive very little training on how to handle a situation which requires a report. The initial response that victims receive when they make a disclosure is so important and can really determine their long term safety."

- Respondent from a legal service for victim survivors and perpetrators

Workforce issues

A number of workforce issues were identified in respondent discussions of training and capacity building in the FDSV workforce. It was identified that the workforce in specialist FDSV services is at high risk of burnout and vicarious trauma due to nature of the work, lack of resourcing, and high demand on services. It was noted that it is challenging to attract and retain skilled workers, particularly in regional areas, which can cause significant cost when an organisation has invested in training prior to losing a skilled worker. There was an identified divide in skills in the specialist FDSV workforce, with some respondents identifying that services often rely on technically 'unskilled' workers as there is no consistent minimum qualification expectation.

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"There is insufficient funding, training and ongoing support to attract the right people to the sector and keep them in the sector without getting burnt out. This is an incredibly difficult sector to work in long term and we need to recognise how hard it is to find qualified and skilled practitioners everyone, particularly in regional and rural locations. There is very little support from State and Federal government in recognizing the consistent workforce issues and challenges in recruitment and retention. It remains a "service provider" problem and this can't be the case if we are to make ongoing change."

 Respondent from a comprehensive support service for victim survivors and perpetrators

Frontline worker survey limitations

Attribution: Due to the complex policy landscape in place nationally, with each state and territory concurrently driving reform at the local level through respective strategies and plans, it is not possible to attribute changes that may have occurred since the implementation of the plan in 2010 directly to the National Plan. While we will observe and analyse changes over the period of the National Plan, causal links will not be able to be made. As such, where change is identified, it has not been possible to untangle the discrete impact of the National Plan from the ongoing efforts of all initiatives that were in operation at the same time, particularly stateled initiatives.

Generalisability: For the frontline worker survey, it was not possible to determine the breadth of distribution of the online survey link, and as such establish a coherent response rate. This means that survey results are not able to be generalised to the broader FDSV frontline worker cohort, rather findings only reflect the views of those who completed the survey.



3 Stakeholder consultations - National Plan

Summary of findings



Stakeholder consultations were conducted using virtual interviews and focus groups to engage with government, corporate, and community sector stakeholders in all Australian jurisdictions. These consultations covered both the National Plan and the Fourth Action Plan, with discussion questions focused on the implementation of foundations for change, gauging the effectiveness of response, and providing interpretation of outcomes. The findings in this section are preliminary and are aligned with four key themes that were identified during thematic analysis of the qualitative data:

- Theme 1: Integrated policy responses and intersectionality
- Theme 2: Diverse population groups
- Theme 3: Governance and funding
- Theme 4: Community attitudes and rates of violence

Key findings from the consultations included:

- The National Plan was seen as providing a coordinated strategic direction for addressing violence against women and their children and facilitating governance and coordination mechanisms between states and territories
- Cross-jurisdictional collaboration could be strengthened through increased information-sharing, consistent definitions of FDSV, and coordinated legislative responses
- Increased integration between the National Plan and other legislative and policy frameworks would be beneficial
- The significant investment in the FDSV sector under the National Plan was positively noted, but the structure of funding arrangements created challenges for service providers
- An increase in understanding and community awareness of violence against women was identified, although persisting problematic attitudes were noted
- Understanding of the concept of intersectionality and its role in providing support for victim survivors has increased in the FDSV service sector
- Understanding of the experiences of diverse population groups disproportionately impacted by violence has increased in the FDSV service sector, but further work is necessary to address the unique drivers of violence and support needs for these groups
- Addressing the gendered drivers of violence and supporting primary prevention were identified as key strategies for reducing rates of violence
- Stakeholders identified that rates of violence had not decreased, but attributed this to increased awareness, improved reporting, and greater confidence in services increasing disclosures

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3.1.1 Introduction

Stakeholder engagement is a vital component of this evaluation and important in understanding the effectiveness and impact of the National Plan on the ground. This activity sought to engage with government, corporate and community sector stakeholders in all Australian jurisdictions through a series of interviews and focus groups. The focus on the engagement was to:

- Report on implementation of foundations for change (including partnerships, governance, and impact on state and territory policy)
- Gauge effectiveness of response
- Provide interpretation of outcomes.

All consultations were facilitated in a virtual environment due to ongoing restrictions associated with the COVID-19 pandemic. Consultations took place between July and September 2021. Interviews were conducted by a skilled and experienced facilitator who was supported by a scribe who documented all discussions. Focus groups (and the interview with the National Indigenous Australians Agency) were co-facilitated by an Indigenous facilitator to ensure that a cultural lens was applied to all discussions.

A total of 124 people participated in these stakeholder engagement activities, with group sizes ranging from one to 18 participants. The list and schedule of stakeholder engagements is outlined in Table 5.

Interviews	Consultation date	Focus groups	Consultation date
Australian Capital Territory	3 August 2021	Australian Capital Territory	19 August 2021
New South Wales	12 August 2021	New South Wales	20 August 2021
Northern Territory	27 July & 11 August 2021	Northern Territory	30 August 2021
Queensland	10 August 2021	Queensland	26 August 2021
South Australia	22 July 2021	South Australia	24 August 2021
Tasmania	11 August 2021	Tasmania	31 August 2021
Victoria	17 September	Victoria	14 September 2021
Western Australia	27 July 2021	Western Australia	24 August 2021
National Indigenous Australians Agency	20 July 2021	National NGOs	9 September 2021
Commonwealth central agencies	29 July & 6 August 2021	All state and territory government agencies	23 August 2021
Flagship initiatives	27 July, 28 July & 18 August		
Data custodians	3 August 2021		

Table 5: Stakeholder interviews and focus groups

Source: KPMG, 2021

Preliminary qualitative analysis of the data from the stakeholder engagements identified a series of themes:

- Theme 1: Integrated policy responses and Intersectionality
- Theme 2: Diverse population groups
- Theme 3: Governance and funding
- Theme 4: Community attitudes and rates of violence

3.1.2 Findings

Theme 1: Integrated policy responses and intersectionality

Integrated policy and legislation

The National Plan seeks to provide legislative, policy and program responses to achieve equitable access to services to meet the needs of a range of diverse population groups through initiatives and priorities. Stakeholders noted however that this is being undertaken in isolation to the full range of Australian legislation, policy, and programs. There is inadequate consideration of the impact of policy and legislation on the experiences of victim survivors.

Stakeholders provided examples where legislation and policy worked against victim survivors and therefore acted as a barrier for victim survivors to come forward to report and seek services. For example, consultations highlighted that migrant women may be reluctant to access services and report episodes of FDSV due to concerns about their migration status and visa issues.

Stakeholders noted that going forward it is increasingly important for the Commonwealth to consider the full breadth of legislation and policies that interact with the National Plan and responses to FDSV more broadly to ensure no inadvertent barriers are being created. There was strong reference to the development of an integrated legislative and policy framework across government.

Intersectionality

There is increasing acknowledgement and recognition that victim survivors need to be supported in a holistic way that understands their diversity. There continues to be a need to understand that victim survivors with a disability may also identify as LGBTIQ+ or have a CALD background. Supports and services need to be able to respond to all aspects of a person's identity in an inclusive and informed way without requiring people to have to access multiple services. This construct of 'intersectionality' is increasingly understood within the FDSV sector with stakeholders identifying the need for the future National Plan to articulate this more clearly through programs and initiatives and sector development.



'Something to think about in the future for intersectionality is to think about measures in a truly intersectional way. A person can be Aboriginal and Torres Strait Islander and identify as LGBTIQ+, they might have a disability, live in a rural area. People are complex in themselves. The National Plan has set us up well to understand that there are diverse experiences and we have done well at addressing those. We need to develop in how we address a person in a holistic way and their diverse factors is in progress – this is where to go next.'

- Government representative

Theme 2: Diverse population groups

FDSV affects people from all segments of society, yet there are some population groups that have different experiences of violence or are disproportionately impacted by violence.⁴ Stakeholders reported an improved understanding of the experiences of these groups, including Aboriginal and Torres Strait Islander women, women from CALD backgrounds, LGBTIQ+ communities, women with disability, and women from regional, rural and remote communities.

⁴ Commonwealth of Australia (Department of Social Services) 2019, *Fourth Action Plan – National Plan to Reduce Violence against Women and their Children 2010-2022.*

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Stakeholders recognised that the National Plan had supported an improved understanding of Aboriginal and Torres Strait Islander women's different experiences of violence. It was noted that more needs to be done to support these women and communities, such as understanding the drivers of violence and having a commitment to collaboration and codesign.

Women and children from diverse population groups may exhibit different help seeking behaviours and have different pathways into the FDSV service system. Many will access mainstream services as specialist services that address their specific needs may not be available in their communities.



'I think it's about 'both and'. It's specialist [services] and it's also about 'where do I feel comfortable to get services?'. At the end of the day, we're still learning but what we do know is that they [diverse groups] want to go to services that reflect them. 'This is my place, this is my mob', and we don't do enough of that. If you want to get people involved in services, they have to see themselves reflected back. I think that we've streamlined our service delivery so much and created so many efficiencies that we've lost sight of this. But representation is tough. You don't want to separate everybody out, but you do want to talk about these intersectional issues.'

- Peak body representative

The National Plan explicitly targets a reduction in violence against women and their children, in recognition of the gendered nature of violence. While the intent is to address all forms of violence, most initiatives and services funded respond almost exclusively to intimate partner violence. There was a view during consultations that the scope could be clarified. The language currently is not inclusive of the experiences of LGBTIQ+ victim survivors with a need for consideration of non-binary people, sistergirls and brotherboys.



'We certainly won't fix the problem of women and children being harmed by not focusing on the men who are committing those offences and / or coercive control. I would really be keen to see the National Plan focus, without diminishing resources for women, but on providing innovation and development around the perpetrator space at early levels.'

- Non-government organisation representative

Theme 3: Governance and funding

Governance

The National Plan provides a coordinated and unified strategic direction for the Commonwealth, states and territories, and represents the national commitment to reduce violence against women and their children. The National Plan establishes an agreed mandate to reduce violence against women and is supported by state and territory plans and programs of work, with service delivery the predominant responsibility of states and territories.



'We do use it [the National Plan] to guide other parts of the government and the policy areas in our own jurisdictions, and I presume others are doing that. I think that's the value of the National Plan in that it allows you to point to it for why you're driving and doing this work.'

- Government representative

The National Plan was instrumental in establishing governance and coordination mechanisms to support the implementation of reforms associated with the National Plan. Governance mechanisms have endured through successive governments and ministerships. However, it was identified that current arrangements don't maximise collaboration between the Commonwealth, states and territories, and other mainstream sectors. There was commentary that the arrangements could be improved with a strengthened focus on sharing of information on what works, key learnings, and continued discussions on data and measurement to build the evidence base. The National Plan Implementation Executive Group (ImpEG) was regarded as a positive mechanism to share information between jurisdictions with respect to reducing duplication and understanding what works.

The National Plan has supported the introduction of consistent language, but as yet, has not brought about consistent definitions of FDSV and legislative response. Some cross-jurisdictional responses have been developed and implemented, such as the National Domestic Violence Order Scheme and cross-border policing in South Australia, Western Australia, and the Northern Territory. Stakeholders reported ongoing issues for victim survivors navigating the complex legislative system, for instance in seeking assistance for technology facilitated abuse. With proposed introduction of coercive control legislation, stakeholders felt that consistency and legislative clarity would support effective implementation of these new laws.



'... what we find is that people are constantly falling between the cracks. Not just between jurisdictions, but between federal and state jurisdictions. Particularly in the legal sense. For example, for technology abuse, they'll go to police and be told it's a 'federal' issue. There are stark differences between different states and territories in terms of what legal services are doing.'

- Peak body representative

Consultations revealed that stakeholders felt there was more that could be done by the Commonwealth in its leadership capacity to establish structures and to leverage its position to influence systemic change. Stakeholders identified a desire for greater coordination at the Commonwealth level across government policy and programs, including better integration and coordination with the Family Court of Australia, Centrelink, and the National Disability Insurance Agency. Additionally, consultations identified a need for closer alignment with other key Commonwealth initiatives and reforms such as the National Agreement on Closing the Gap. There was a clear need for an integrated whole of government framework that considers all areas of legislation and policy that intersect with the FDSV sector.

Funding

Since 2010, the National Plan has been responsible for funding a large volume of activities which have been implemented at the Commonwealth and state level. The significant investment in the FDSV sector through the National Plan was welcomed by stakeholders. Consultations identified an increase in demand on frontline services due to the improvements in community understanding and recognition of violence against women and their children.

Many initiatives however have been implemented as pilots under short-term funding arrangements, which has made it difficult to determine whether these programs and initiatives had delivered intended benefits. Most programs and initiatives had not received dedicated funding to evaluate the effectiveness of the implementation, which impacts the ability to determine if a program should be continued. This approach has not helped to build the evidence-base or promote research-informed practice.



'I want to flag that there's been some really good programs that have been funded under the first National Plan. I think there have been some really good programs that have run short-term and then got de-funded at the end... Sitting in the practice sector it's hard to know who is making those decisions. It's not very transparent. Where it has been resourced, there have been excellent codesign projects funded. The excellent work [NGO] did with 1800RESPECT was a massive leap forward. This was for women with disabilities, with the peak and service delivery.'

- Non-government organisation representative

The reliance on short-term pilot programs was also identified as contributing to distrust, particularly in Aboriginal and Torres Strait Islander communities.



'There are fantastic projects being funded however they are pilot, and short term, and [in] competition with health services. When working with community it takes time to build trust. Communities are not trusting/investing [sic] in pilot programs because they know they will be ripped away again. Need to invest in the stuff that works. Use research to roll things out in a more secure way.'

- Non-government organisation representative

Some stakeholders from non-government organisations and peak bodies noted that service delivery was impacted by short-term funding which reduced the ability to plan strategically and attract, train, and retain skilled staff. It was also noted that short-term and limited funding can cause service providers to feel in competition with each other, which may reduce their willingness and capacity to engage collaboratively across the FDSV sector.

Theme 4: Community attitudes and rates of violence

Across the consultations, stakeholders acknowledged that rates of violence against women and their children have not reduced over the life of the National Plan, despite some positive advancements in community attitudes towards violence. It was recognised that improvements in reporting and victimsurvivors being more willing to disclose their experiences of violence were contributors.

Stakeholders typically identified that there had been an increase in understanding and community awareness towards violence against women and their children over the life of the National Plan. Some stakeholders stated that this increased awareness has also been accompanied by a greater understanding of the types of behaviours that are classified as violence, including coercive control and online abuse, but this was not universal.



'I think we have some indication from social attitudes surveys that there's an increased awareness of domestic and family violence, and that there is a bit of shift that it is not acceptable behaviour and people should be safe in their communities. I think we have a long way to go. I think there's also evidence to suggest that there is a limited understanding of nonphysical forms of violence, that domestic and family violence is a pattern of abuse rather than incident-based, and there is still considerable work to go around changing those community attitudes that we know are drivers of violence against women in general, such as sexist perceptions and views of women's roles in society.'

- Government representative

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It was also acknowledged that progress on community attitudes was slow, with some problematic attitudes persisting. Stakeholders explained that violence against women is often conceptualised as a problem that 'happens to other people', in particular to women in marginalised population groups. This 'othering' of the issue of violence against women results in community members feeling lessened responsibility to challenge the problem.



'I feel that, in general, there seems to be an increasing appetite to actually discuss family and domestic violence. I wish they'd treat it the same they've treated COVID, because it's also a pandemic. I feel like it's not as taboo as it used to be, but there's still a feeling that 'it happens to other people, not me'. It's important that everybody has a responsibility to not stand by, to actually do and say something, which is not easy I know.'

- Non-government organisation representative

Stakeholders did identify that community awareness does differ between diverse population groups. It was suggested that rates of violence experienced by women with disability are still underreported compared to other groups. Stakeholders asserted that Aboriginal and Torres Strait Islander women are overrepresented as victim survivors of FDSV and argued that rates of violence will not decrease until the drivers of violence for this group, including the impacts of intergenerational trauma, are addressed. In some jurisdictions, it was acknowledged that community awareness in culturally and linguistically diverse communities may have been slower to progress than in other cohorts, but that improvements were being seen.

Whilst community attitudes and understanding of violence against women as a whole were seen to have improved, it was identified that there was less progress in understanding sexual violence, harassment, and assault. In particular, it was identified that women themselves may not be able to identify when they have been victims of sexual violence:



'Another perspective on this is what are women's views on violence against themselves, and in particular sexual violence. We are only just uncovering this area. A lot of women in relationships are unsure about what's okay and what isn't. We have a long way to go in understanding attitudes about sexual violence.'

- Non-government organisation representative

An increase in awareness and understanding that violence against women is unacceptable was not shared by all, with examples provided of disparate views on violence against women including the emergence of men's rights activist groups who argue that women's violence against men is underreported, and that rates of men's violence against women are exaggerated. A number of stakeholders across different jurisdictions reported receiving backlash particularly when FDSV awareness campaigns were published. One stakeholder described their experience with backlash to perpetrator intervention programs and men's programs, stating:



'It feels important to state that every time we publicise new services for men, we immediately get trolled or receive vexatious / abusive calls from MRA's [Men's Rights Activists] who seem to think we are out to get them rather than the real fact that we are here to support them. I have personally received death threats. Quite simply we are tackling an age-old power differential and patriarchy has a way of morphing to survive!'

- Peak body representative

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Raising awareness and understanding, while a crucial step, is only the initial stage to reducing violence against women and their children. Stakeholders identified that it would take time for enhanced community awareness to translate into tangible progress to the rates of violence. To achieve sustained behaviour change requires addressing the gendered drivers of violence that may require generational change. Structures which enable ongoing gender inequality and disadvantage need to be addressed, which requires commensurate funding and attention to respond to mental health, drug and alcohol misuse, housing, and other forms of disadvantage.

Primary prevention was also identified as a key strategy to reduce rates of violence by addressing the gendered drivers of violence early. Respectful Relationships education was identified as a useful tool for educating young people in the school context. Investment in primary prevention education would represent a focus on generational change and recognising that the impacts of this would be long-term.



'We need to introduce these concepts in school, such as through Respectful Relationships education having a really key role in prevention in future. We really have to bring a respectful relationships approach early on in schools to unpack this. Children do have less baggage, so they are our key audience that we should really invest heavily in to have results 10 years later.'

- Non-government representative

The prevalence of FDSV has traditionally been underreported for myriad reasons. Due to this historical underreporting, stakeholders were not surprised that there had not been a reduction in rates of violence. Stakeholders felt that an increase in awareness raising, improved reporting and greater confidence in services increased disclosures and contributed to the static reported rates of violence against women. For this reason, it was suggested that a reduction in rates of violence should be viewed as a longer-term measure of success for the National Plan, and consideration should be given to other measures such as whether women feel empowered to report experiences of violence, and whether the system is more equipped to respond.



'I don't know what we expected or anticipated in regard to numbers. When you raise awareness, when we're talking about violence, sexual violence, consent and raising awareness, women do start to think about and talk about what's happening in their relationship and reach out. I think you're going to see about a 15-year significant increase in people reaching out, people calling the police when there's a crisis. We also see it all the time when there are community campaigns, we see the numbers of our lines significantly increase, or during periods of specific sporting events. What's happened is that we're becoming more self-aware of what's okay, what's not okay, and feeling okay to reach out. I don't see that as a negative, I see that as a positive.'

- Non-government organisation representative

3.1.3 Limitations

Attribution: Due to the complex policy landscape in place nationally, with each state and territory concurrently driving reform at the local level through respective strategies and plans, it is not possible to attribute changes that may have occurred since the 2010 directly to the National Plan. While we will observe and analyse changes over the period of the National Plan, causal links will not be able to be made. As such, where change is identified, it has not been possible to untangle the discrete impact of the National Plan from the ongoing efforts of all initiatives that were in operation at the same time.

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Consultation fatigue: The consultations for the evaluation for the National Plan and the Fourth Action Plan occurred amidst a congested stakeholder engagement landscape, at the Commonwealth and state level. For instance, consultations for the new National Plan took place in a similar time frame, as did the National Summit for Women's Safety roundtables. This can have a real impact on stakeholders, particularly those from frontline services who may be drawn away from service delivery to provide their time to the range of consultation activities.

National Plan vs Fourth Action Plan: In an effort to minimise consultation fatigue, it was determined that consultation regarding the effectiveness of the National Plan and the Fourth Action Plan would occur concurrently in combined sessions. While facilitators directed participants specifically to the Fourth Action Plan where that was the subject of inquiry, participants may not have been able to disentangle views towards one or the other. Recency bias may also have favoured discourse in relation to the Fourth Action Plan, or at least activities that occurred at the same time, due to the proximity, knowledge, and familiarity of this period.

Inclusiveness: The list of stakeholders was carefully curated and checked, with government contacts in each jurisdiction given the opportunity to suggest additional or alternative individuals or groups for inclusion, in both the frontline worker survey and the stakeholder focus groups. However, this may have excluded providers that were not well known to government stakeholders.

Victims-survivors and people with lived experiences: From the outset of the evaluation activities, it was determined that consultation with victims-survivors, perpetrators, and people with lived experience of FDSV was out of scope. Instead, the focus of the stakeholder engagement activities was on the impact of policy and program decisions associated with the National Plan and the Fourth Action Plan, and system level understandings and shifts in attitude and behaviour, not the experiences of individuals within the community. Feedback received as part of consultations and more broadly indicated that inclusion of the voices of people with lived experiences in future evaluation and monitoring activities for the new National Plan would be crucial.

Impact of COVID-19: During the stakeholder engagement period, large parts of Australia were subject to lockdown restrictions which had the potential to impact on participation rates due to the need to work from home, while also having to care for young, elderly, and other relatives, including supervising home-schooling.



4 Summary of findings from interim consultation activities

The findings from the frontline worker survey and sector interviews and focus groups provide insights into how the National Plan and the Fourth Action Plan have been received and the effect they have had within the sector. More than 800 individuals from frontline services, government agencies, data custodian organisations and flagship initiatives were involved in some capacity as part of this broad engagement.

Governance and coordination

The National Plan has helped bring FDSV to the nation's attention, and kept it in the spotlight, despite changes in government and in parliamentary leadership throughout the life of the plan. The National Plan demonstrates the collective commitment to address FDSV, with the Commonwealth taking leadership in its development and implementation. The National Plan has introduced consistent language and understanding regarding FDSV, but further work is called for to establish national definitions to further enhance collective understanding and response.

Stakeholders called for the Commonwealth to address complex whole of government intersections that impact the FDSV system. Linkages with the Family Court system, Centrelink, immigration policies and legislation guiding technology practices were highlighted as areas where there is a need for a whole of government integrated framework to ensure government legislation and policy do not inadvertently act as barriers to the success of the National Plan.

Further, it was perceived that the National Plan largely operated independently of other key reform agendas and strategies. For example, it was considered that there should be greater alignment with the National Agreement on Closing the Gap, and the efforts at the national, state and territory level to protect children from harm.

It was consistently reported that the National Plan plays a significant role in laying the political and strategic platform to support a range of responses to FDSV across the country. There was some confusion however as to the scope of the National Plan, with stakeholders unclear whether initiatives and priorities are intended to address all forms of violence against women and their children, given the predominant funding and focus on intimate partner violence. It was noted that some forms of violence (for example, trafficking, workplace harassment and sexual violence) were largely absent in the National Plan and Action Plans. Stakeholders questioned whether children were considered victims in their own right, or just through their attachment to their mother. Stakeholders reported that the language of the National Plan was not inclusive of the experiences of LGBTIQ+ victim survivors including non-binary people, sistergirls and brotherboys.

The flagship initiatives of the National Plan (that is, ANROWS, Our Watch, 1800RESPECT, DV-Alert) were all recognised as helping to embed awareness and understanding across the community and translating research into practice. Stakeholders noted however that 1800RESPECT, for example, was not considered to provide a culturally safe response for Aboriginal and Torres Strait Islander victim survivors which influences the impact of this initiative in communities with high Indigenous populations.

Funding was identified as a key issue. Stakeholders called for significant sustained funding for services to be able to meet the growing demand of victim survivors, their children, and perpetrators of FDSV, associated with the increase in community awareness of FDSV. Stakeholders also called for greater transparency with respect to decision making on program funding continuation. For example, stakeholders noted that some programs that had shown promise had been de-funded after initial short-term funding had expired, only to be replaced with more short-term pilot programs. As a result, it was reported that communities, in particular Aboriginal and Torres Strait Islander communities,

were somewhat distrustful towards new initiatives as they expected these too would be short-lived before funding ceases. Short-term funding impacted on service delivery by reducing the ability of organisations to attract, train and retain skilled staff. This short-term limited funding arrangement was cited as leading to competition between services rather than supporting collaboration.

The governance arrangements of the National Plan have endured and been strengthened since implementation, however there is scope for greater collaboration through interjurisdictional advisory groups such as the National Plan Implementation Executive Group to meaningfully share insights and findings, including examples of good practice, across jurisdictions.

Findings from the frontline worker survey indicate that there has been a shift in levels of collaboration since the implementation of the National Plan. This was observed in collaborating between organisations, government departments and services, including services that respond to groups disproportionately affected by violence. Collaboration between states and territories had also improved over the life of the National Plan. The ImpEG and other governance structures had reduced duplication and enabled knowledge translation. There was common sentiment that these interjurisdictional relationships could be further nurtured to bring about better outcomes.

Aboriginal and Torres Strait Islander women and their children

The National Plan was credited for highlighting the disproportionate experiences of violence by Aboriginal and Torres Strait Islander women and children. Consultation participants identified several examples of Aboriginal and Torres Strait Islander led community responses to address family violence. However, there were concerns that the FDSV service system was not meeting the needs of Aboriginal and Torres Strait Islander women and children more broadly nor responding to the unique drivers of violence in this cohort. It was identified that Aboriginal and Torres Strait Islander women and children need greater access to culturally safe services that are co-designed and community controlled.

There were concerns that the traditional approach to FDSV may not be appropriate for Aboriginal and Torres Strait Islander people and communities. Responses for victim survivors and perpetrators are not sufficiently trauma informed and may not take into consideration the systemic disadvantage Aboriginal and Torres Strait Islander people have suffered in Australia.

Intersectionality

Overall, the understanding of the needs of diverse groups at disproportionate risk of violence had increased in the FDSV sector over the life of the National Plan. However, the current FDSV service system is not comprehensively meeting the needs of victim survivors and their children from these diverse groups, with concerns that there are not enough specialist services available. Victim survivors from diverse groups reportedly do not see themselves when accessing services, calling for greater diversity in service providers.

Stakeholders across the consultations emphasised that there has been increased recognition of the construct of 'intersectionality' in FDSV services that highlights that supports and services need to be able to respond to all aspects of a victim survivor's identity without requiring them to access multiple specialist services. However, the extent to which this understanding has been translated into practice was questioned, with stakeholders calling for intersectionality to be more clearly articulated in the next National Plan to end violence against women and their children.

Integrated service responses

Stakeholders consulted as part of the evaluation reported progress has been made with respect to system integration, compared with 2010. Frontline worker survey participants indicated that collaboration between services had improved over time, and that frontline workers were able to access relevant practice, policies, and standards from the responsible government department. However, a lack of coordination between government services, including between state and Commonwealth agencies, continued to cause challenges for victim survivors to navigate the broader systems to address their complex needs, such as housing and Centrelink. This causes frontline specialist service providers to spend significant amounts of time advocating for their clients with other services and government departments.

Information sharing remains a challenge, with reports that services continue to operate in siloes, despite authorising legislation enabling information exchange. As a result, victim survivors continue to be retraumatised by having to tell their story multiple times to new providers.

Sector development

There continues to be a need to build capacity within the sector, and adjacent sectors, to identify and respond to FDSV. About one-half of survey respondents felt that the level of training on offer currently within the FDSV sector was adequate. Respondents indicated that there is no nationally consistent overarching training or capacity building approaches within the sector, with a lack of national standards for training and mandatory accreditation.

Providing training presents a challenge to frontline services, as they are often not awarded dedicated funding to support staff training and releasing staff to learning and professional development events takes them away from frontline delivery. Where training is available, it is not always developed from a trauma-informed perspective and may not be based on contemporary relevant evidence.

There are continued calls for improved training for staff in adjacent sectors that respond to FDSV, including the police and courts workforce. Limited training reportedly perpetuates harmful attitudes and victim blaming behaviours and failure to respond proportionately to risks experienced by victim survivors.

Attitude changes are not influencing behaviours

Reported rates of FDSV have not reduced since the implementation of the National Plan. As a key target of the National Plan and successive action plans this may be an undesirable finding but is not necessarily surprising. For decades, violence against women in the home had been considered a 'private matter' and was rarely spoken of in public. The sustained placement of FDSV on the public agenda, through the National Plan and other mechanisms including increased media reporting of high-profile homicides and serious assault cases, coupled with global movements such as #MeToo, have seen increases in disclosures of violence to formal and informal supports.

Stakeholders reported an improvement in community understanding and attitudes towards violence against women, however this may not necessarily extend to recognising non-physical forms of violence. The improvement in community attitudes towards violence against women is a positive step, however there are concerning reports that pro-violent attitudes pervade, particularly among some younger people.

Stakeholders agree that it will take a protracted period of time, even generations, for improved community attitudes to shift to behaviour change in the form of sustained reductions in the perpetration of violence. Stakeholders noted that rates of violence, particularly in cohorts who experience higher rates or diverse forms of violence, will not decrease until the drivers of violence, including intergenerational trauma, are addressed.

Further there are reports that the severity and complexity of violence, including non-lethal strangulation and threats of homicide, are actually increasing, and the service system, in particular mainstream services struggle to identify and respond to emerging forms of violence such as coercive control and technology facilitated abuse.

Services meet the needs of women and their children

The noted increase in services responding to FDSV since the National Plan was implemented has reportedly not necessarily met the needs of all women and their children. Survey respondents agreed that the FDSV system is progressing in the right direction, but it was considered that progress was moving too slowly.

Services are struggling to keep up with the surging demand, which has increased in the wake of successful public campaigns such as 1800RESPECT and the Stop it at the Start and greater willingness of victim survivors to make disclosures. Short-term funding contributes to insecurity within the sector.

Survey respondents believed that most victim survivors are somewhat confident and willing to access services in response to FDSV, but concerns remained that women were continuing to experience long waiting times to access support. This is sometimes exacerbated in regional and remote areas.

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Despite the emergent recognition of the importance of early intervention and primary prevention, the FDSV sector predominantly responds at the tertiary level when a victim survivor is in crisis. Stakeholders cite that sustained changes in rates of violence will not occur until the drivers of violence are addressed through early intervention and primary prevention activities.

There were prevailing views that the service system does not adequately respond to victim survivors and perpetrators from diverse groups, particularly those more at risk of violence. The specialist FDSV sector does not always have the knowledge and understanding of the nuances experienced in groups such as culturally and linguistically diverse communities and women with a disability.

It was regarded that responses for these groups cannot be merely add-ons or modifications of existing programs and services. Stakeholders felt that responses should be developed and codesigned with people with lived experience from these diverse population groups. It was believed that a service that caters for those most at risk, that is those with multiple discrete forms of disadvantage would meet the needs of all victim survivors, and as such could be a model for which all FDSV responses are designed.

Justice responses to FDSV

Advances in legislation were considered a positive first step, but there were concerns at the unintended consequences of any new legislation in relation to coercive control which may impact on women and victim survivors. There were concerns of a missed opportunity that the National Plan, being led at the Commonwealth level, had not addressed the challenges experienced by victim survivors in the Family Court system which reportedly increases the risks for women and their children.

Since 2010, a wide range of initiatives and programs have been introduced to improve justice responses to FDSV. This has included specialist training for magistrates, police attending interdisciplinary meetings, victim survivors attending court via videolink, and the co-location of services. However, there was widespread concern that the response to FDSV by police and the justice system continued to produce poor outcomes for victim survivors. First responder police officers reportedly lacked training to be able to identify and adequately respond to FDSV, in particular non-physical forms of violence such as coercive control. Police responses were reported to be inconsistent, slow, and deprioritised women's safety through victim-blaming attitudes, which taken together, reportedly impact victim survivors' willingness to report episodes of violence to police.

A focus on perpetrators

Prior to the National Plan, it was reported that services that worked with perpetrators were not generally considered as part of the holistic response to FDSV. It was seen as a positive that greater attention is now being paid to the perpetrator, however it was widely considered this was not a significant enough focus under the National Plan. It was reported that any shift in rates of violence will require an increased focus on perpetrators.

Stakeholders felt that justice processes were often slow and not commensurate with the level of risk experienced by victim survivors. As a result, perpetrators were not seen to be held to account for their violence by police and the courts which erodes confidence in the system to protect women and their children.

Part B: Fourth Action Plan consultation activities



5 Stakeholder consultation - Fourth Action Plan

Summary of findings



Summary

The stakeholder consultations, which were discussed in Section 4, also included a focus on progress under the Fourth Action Plan. Stakeholders were asked to comment on actions and progress under the 4AP, with consultation questions aligned with the 4AP priority areas. A preliminary analysis of stakeholder comments has informed the findings presented here, which identify progress across each of the five 4AP priorities. Whilst limitations in each priority area were identified, stakeholders acknowledged that the 4AP had continued to progress the national response to reducing violence against women and their children.

Key findings from the stakeholder consultations relating to the 4AP identified that:

- An increased focus on primary prevention was supported by the 4AP, particularly through national primary prevention campaigns and flagship initiatives
- Community-led and codesigned initiatives with Aboriginal and Torres Strait Islander women and children were implemented under the 4AP, with the evidence base and overarching strategy for Aboriginal and Torres Strait Islander people also improving
- Recognition of the unique needs and experiences of diverse groups has increased, although greater translation of awareness into practice is necessary
- Awareness of sexual violence and harassment has grown under the 4AP with increased reporting by victim survivors, although stakeholders were concerned that it remains a secondary focus after family and domestic violence
- The 4AP has increased the focus on integrated system responses and collaboration, although improvement was seen as dependent on funding
- The 4AP has supported increased focus on developing trauma-informed responses for men who use violence

5.1.1 Introduction

A series of stakeholder consultations took place to consider the impact and effectiveness of the Fourth Action Plan. To minimise imposition on stakeholders, consultations for the Fourth Action Plan were consolidated as part of the broader consultations for the National Plan. For more information on the approach taken to consultations, see section 3.1.1.

For more information on the Fourth Action Plan Evaluation, see Volume 2: Appendix D.

5.1.2 Findings

Fourth Action Plan Priority 1: Primary Prevention is key

Stakeholders agreed that the Fourth Action Plan successfully promoted increased focus on primary prevention at a national and jurisdictional level. The national primary prevention campaigns and flagship initiatives were identified as extremely beneficial. Our Watch was consistently highlighted as leading primary prevention initiatives under the Fourth Action Plan. In particular, the third iteration of the Stop it at the Start Campaign that ran in early 2021 was widely referenced. Stakeholders identified that it had high public recall, a useful bystander lens, and a focus on gendered drivers of violence. Our Watch was also funded under the Fourth Action Plan to develop the National Primary Prevention Hub, which supports information-sharing and collaboration between specialist and mainstream sectors. Stakeholders identified that children and young people should be considered a target group for primary prevention initiatives, and that Respectful Relationships education was a key mechanism for connecting with this cohort.

Whilst stakeholders reflected that awareness of the importance of primary prevention had increased under the Fourth Action Plan, it was acknowledged that this work is still developing. Stakeholders identified that successful ongoing primary prevention would require a cross-sector approach and appropriate funding to implement the research and initiatives developed from the national bodies.

Fourth Action Plan Priority 2: Support Aboriginal and Torres Strait Islander women and their children

The Fourth Action Plan had a focus on supporting Aboriginal and Torres Strait Islander women and their children through community-led solutions, building workforce capability to deliver traumainformed and culturally safe supports, developing innovative models for victim and perpetrator support, and addressing the drivers of family violence.

Stakeholder consultations identified a range of community-led and codesigned initiatives that had been successfully implemented under the Fourth Action Plan. In particular, it was noted that the Office of the eSafety Commissioner had engaged in a detailed codesign process with Aboriginal and Torres Strait Islander communities to target technology facilitated abuse. The Stop it at the Start campaign had resources developed with, and specifically for, Aboriginal and Torres Strait Islander peoples. Grants were also commissioned from DSS to develop community-led prevention programs for diverse groups, with some targeted specifically for Aboriginal and Torres Strait Islander peoples. Stakeholders identified that funding was provided under the Fourth Action Plan to deliver specialised family violence services, with a focus on engaging ACCOs. Fourth Action Plan funding also supported Aboriginal Family Legal Services to engage Aboriginal Family Advocates, who could provide intensive case management support.

Funding for initiatives under the Fourth Action Plan was seen as fundamental to organisations ability to recruit additional staff to respond to FDSV in Aboriginal and Torres Strait Islander communities. To ensure sustainability, stakeholders commented on the need for longer-term funding which would enhance community trust and developing a workforce equipped to response in trauma-informed approaches.

Stakeholders reported that the evidence base and overarching strategy were considered to have improved for Aboriginal and Torres Strait Islander communities under the Fourth Action Plan.

Fourth Action Plan Priority 3: Respect, listen and respond to the diverse lived experience and knowledge of women and their children affected by violence

Respecting and responding to the diverse lived experience and knowledge of women and their children affected by violence was a priority area under the Fourth Action Plan. This priority area had a focus on implementing community-led initiatives to address the needs of communities affected by

multiple forms of discrimination, delivering policies and services to address the disproportionate impact of violence, and equipping the service system to respond.

Stakeholders noted increased recognition of the unique experiences and needs of diverse groups, a greater emphasis on the need for community-led solutions that are culturally- and language-based, and on the involvement of men in designing solutions. Whilst it was acknowledged by stakeholders that awareness had increased, there was recognition that this still needed to be translated more broadly into practice that was specifically tailored to these groups.

Initiatives implemented under the 4AP for CALD communities had shown promise, with recognition of the intention to scale up Victorian perpetrator intervention programs for CALD men which embedded culture and language and had a high completion rate.

Stakeholders were cautious that responses for communities affected by multiple forms of discrimination or inequality had traditionally been seen as peripheral additions to existing policy and service delivery rather than being recognised in their own rights. There was also resistance to the term 'complex forms of violence', with stakeholders arguing that culturally specific forms of violence such as dowry abuse would be better understood as cultural manifestations of gender-based violence against women, rather than being seen as fundamentally different.

Fourth Action Plan Priority 4: Respond to sexual violence and harassment

The Fourth Action Plan identified that responding to sexual violence and harassment was a key priority, with a focus on prevention through initiatives, the delivery of trauma-informed and client-centred support to victim survivors, and on strengthening sector capacity to ensure women are safe at work, while studying, and online.

Stakeholders stated that there had been an increased awareness of sexual violence and harassment under the Fourth Action Plan and noted increased reporting from victim survivors since 2019. The recent focus on image-based abuse was identified as a positive improvement that had been accompanied by relevant legislation, systems, and processes. Tangible progress was noted through ANROWS' generation of research and reports focused on sexual violence and harassment, as well as a sexual violence campaign currently under development that was co-funded by the Commonwealth and states with a focus on involving men and boys.

Stakeholders expressed concern that sexual violence and harassment is still a secondary focus behind family and domestic violence, despite being identified as a priority area under the Fourth Action Plan. At the same time, greater public awareness has also been driven by external factors such as the MeToo movement, recent public disclosures of sexual assault, and the Respect at Work report. Stakeholders expressed disappointment with the government's response to the Respect at Work report and called for greater leadership in the response to sexual harassment and violence.

Fourth Action Plan Priority 5: Improve support and service system responses

The Fourth Action Plan provided focus on improving support and service system responses, identifying the need to enable workforces to provide trauma-informed support, encouraging coordinated system responses to victim survivors, delivering trauma-informed perpetrator programs, building the evidence base to inform responses, and improving access to accommodation for victim survivors.

The focus on integrated systems under the Fourth Action Plan was positively noted by stakeholders, recognising enhanced collaboration with mainstream services and system improvements in courts and health to identify and respond to FDSV.

Stakeholders noted an increased focus on developing responses for men who use violence under the Fourth Action Plan. There was general support among stakeholders for trauma-informed responses to perpetrators, but acknowledgement that there is currently limited leadership in this area.

ANROWS was identified as central to progressing the research base to inform responses to FDSV. The ongoing development of the 'What Works' framework was identified by stakeholders as a key support for evidence-based intervention.

Stakeholders asserted that improvement in support and service system responses was dependent on funding availability, with current funding levels perceived to be limiting services' ability to attract, retain, and train skilled staff. It was also noted that service system responses under the Fourth Action Plan would have benefited from greater integration with other national policies and initiatives, such as Closing the Gap.

5.1.3 Limitations

Attribution: Due to the complex policy landscape in place nationally, with each state and territory concurrently driving reform at the local level through respective strategies and plans, it is not possible to attribute changes that may have occurred since the 2010 directly to the National Plan. While we will observe and analyse changes over the period of the National Plan, causal links will not be able to be made. As such, where change is identified, it has not been possible to untangle the discrete impact of the National Plan from the ongoing efforts of all initiatives that were in operation at the same time.

Consultation fatigue: The consultations for the evaluation for the National Plan and the Fourth Action Plan occurred amidst a congested stakeholder engagement landscape, at the Commonwealth and state level. For instance, consultations for the new National Plan took place in a similar time frame, as did the National Summit for Women's Safety roundtables. This can have a real impact on stakeholders, particularly those from frontline services who may be drawn away from service delivery to provide their time to the range of consultation activities.

National Plan vs Fourth Action Plan: In an effort to minimise consultation fatigue, it was determined that the consultations assessing the effectiveness of the National Plan and the Fourth Action Plan would occur concurrently in combined sessions. While facilitators directed participants specifically to the Fourth Action Plan where that was the subject of inquiry, participants may not have been able to disentangle views towards one or the other. Recency bias may also have favoured discourse in relation to the Fourth Action Plan, or at least activities that occurred at the same time, due to the proximity, knowledge, and familiarity of this period.

Inclusiveness: The list of stakeholders was carefully curated and checked, with government contacts in each jurisdiction given the opportunity to suggest additional or alternative individuals or groups for inclusion, in both the frontline worker survey and the stakeholder focus groups. However, this may have excluded providers that were not well known to government stakeholders.

Victims-survivors and people with lived experiences: From the outset of the evaluation activities, it was determined that consultation with victims-survivors, perpetrators, and people with lived experience of FDSV was out of scope. Instead, the focus of the stakeholder engagement activities was on the impact of policy and program decisions associated with the National Plan and the Fourth Action Plan, and system level understandings and shifts in attitude and behaviour, not the experiences of individuals within the community. Feedback received as part of consultations and more broadly indicated that inclusion of the voices of people with lived experiences in future evaluation and monitoring activities for the new National Plan would be crucial.

Impact of COVID-19: During the stakeholder engagement period, large parts of Australia were subject to lockdown restrictions which had the potential to impact on participation rates due to the need to work from home, while also having to care for young, elderly, and other relatives, including supervising home-schooling.

6 Next steps

The evaluations of the National Plan and the Fourth Action Plan are ongoing. These will both be completed in May 2022 ahead of the commencement of the new National Plan. Stakeholder consultations, as described in this Consultation Summary Report are complete, and the evaluation team has shifted attention to further desktop activities. Between now and May 2022, the evaluators will focus on finalising the remaining data collection and reporting activities set out in the Evaluation Plan. Specifically, this will include:

- Quantitative assessment of impact and outcomes under the National Plan, including progress against the national indicators
- Desktop research to describe the context in which the National Plan has been operating in, from a local and global perspective
- Prior research and evaluation to determine findings and key issues from prior research, including evaluations of flagship initiatives
- Social media analysis to assess the impact of community awareness raising activities under the National Plan
- Further analysis of qualitative findings from frontline worker survey and stakeholder consultations.

Analysis from these components will be synthesised to provide consolidated findings with respect to the overall effectiveness of the National Plan. The three core components that will be addressed in the final report are: process evaluation, outcomes evaluation, and future directions.

The findings reported in this Consultation Summary Report will inform the analysis and discussion in the Final Evaluation Report, alongside insights from these other data collection methods.

The Final Evaluation Report of the National Plan will be completed in May 2022.



