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Royal Commission into Domestic, Family and Sexual Violence

[REDACTED]
Adelaide, SA, 5001

To Whom it May Concern,

I have lived in South Australia since 2001. Prior to that, I lived in the Northern Territory for more than 20 years, living in Darwin, Humpty Doo, Tennant Creek and Alice Springs.

I have worked as a [REDACTED] for more than 15 years, in general [REDACTED] and specialist services including domestic violence and youth diversion.

While in South Australia, I have worked with participants of the National Disability Insurance Scheme (NDIS) and I am currently working with people on bail. My work supports people to find suitable accommodation so that they can move from custody back to the community. Currently I only work with men. The program I work with has a number of exclusions for participation, such as – alleged offences must be being dealt with in the Magistrates court (not District or Supreme court), no gang affiliation, no sexual offending, no offending against children.

The majority of people I work with are being held for domestic violence offending such as – aggravated assault, stalking, breaching intervention orders, damaging property. When I speak with participants of the program, initially there is little insight into their behaviour and no understanding that what they have allegedly done is domestic and family violence.

The causes of domestic and family violence are complex and can be inter-generational. Poverty, lack of education, lack of employment, substance abuse, mental health concerns, discrimination, sexism, disconnection from community, prior experience being abused or witnessing abuse (where abusive behaviour is learned from one generation to the next, people may grow up believing that violence is a way of addressing conflict). Domestic and family violence can also be presented as “Traditional” values where there is a belief that men have a right to control women, that men should be dominant in relationships.

The people I work with would not make any connection between their relationships, the behaviours in those relationships and the factors I have indicated. Stories I hear more commonly indicate:

- “It was just an argument that got out of hand, that’s all”
- “I hadn’t been taking my medication. I’ve been using meth and gunja to keep me going, everything just spiralled after that, I wasn’t thinking straight”
- “My girlfriend and me were just drinking a bit. Then we had argument. She hit me, I hit her back. We both got locked up”

Less frequently I meet with men with more education, more stable employment. Men in this situation appear more likely to engage in coercive control and stalking behaviours. This can take the form of repeated phone calls, text messages, using social media or even bank transfer information (the ability to send a message with bank transfers to people’s accounts) and using devices such as Apple Airtags to keep track of people’s movements.

While working with a number of men, one of them would repeatedly call his current partner and demand she bring him various items. He already had 3 intervention orders against former partners. He knew

his current partner would have to take public transport to reach him where he was and, when she arrived, he refused to see her as he “didn’t care about her anymore”. The next day, this behaviour escalated to this man ringing his partner and threatening to “cut her ears off” because she wouldn’t listen to him. This was reported to police for further investigation because I knew his past history and his propensity for violence. This man’s background of poverty, substance abuse, sexism, disconnection from community and prior experience being the victim/witness of domestic violence informed how he treats women. It does not absolve him of responsibility for his actions, but does provide some insight into how he got to this point.

Early intervention measures requiring information sharing across non-government agencies could pose challenges. My workplace provides support for victims of domestic and family violence, which includes access to counselling services, paid time off work and assistance with relocating to different parts of the agency or moving accommodation if required. There is no doubt a record kept somewhere of who needed support and what support was accessed, but, I don’t believe this information would be passed to a Government Agency. Information sharing would only work if a lead agency (SAPOL?) made a request to the workplace for information relating to family and domestic violence. My own experience would suggest that SAPOL would have High Risk Domestic Violence Victim group (Family Safety Framework where a person or family is discussed amongst multiple agencies) to coordinate services to victims and a High Risk Offender Management team that may incorporate domestic and family violence offenders.

My experience working with victims, perpetrators, children and families experiencing domestic and family violence comes from Central Australia and working with people in South Australia since January 2023. I have had experience working with agencies within the Family Safety Framework of Tennant Creek and Alice Springs. In conjunction with that group, the following initiatives were implemented:

- A victim support and advocacy service
- A Men’s Behaviour Change Program
- A prevention program focused on school-age children and young people
- Community Engagement

The Victim Support and Advocacy service encompassed 2 roles, one to support victims and the other to assess and refer men to the behavioural change program. These roles worked closely with the Department of Child protection. A key take-away from the work done in Central Australia was the lack of communication and planning for victims of domestic and family violence where the perpetrator had been incarcerated for a period of time and was due for release. This could lead to intervention orders having lapsed due to the perpetrators time in custody and an increased risk of harm to victims and families when someone unexpectedly returns to a partners address.

The Men’s Behaviour Change Program was run by Tangentyere council (Marr’ka Mbarintja – talking straight to make change) and aimed to improve safety, wellbeing, human rights and dignity of women, children and others affected by men’s use of violence. The program consisted of 16 weekly 2 hour group sessions held in the community and in custodial settings to develop men’s understanding of family violence and awareness of the effects of their use of violence to work towards respectful relationships, emotional regulation and taking responsibility. It should be noted that this program had a limited capacity (approximately a dozen participants per week), but had strong ties to support organisations in the community and developed strategies to enhance the safety of women and children through a contacting partners and ex-partners about their safety.

The prevention program for school children and young people was developed in conjunction with existing programs. The LoveBites/Growing respect Program (through the National Association for Prevention of Child abuse and Neglect (NAPCAN)) was to incorporate localised, culturally appropriate, community based approaches to educating young people.

Community engagement was an integral part of the project. The purpose of engagement was to ensure that services and responses were relevant to the community and that community members were involved in measures to prevent violence. I have found that working with communities to address issues, whether it is youth crime, drug use or violence, leads to better outcomes.

From my experience, the barriers to reporting family and domestic violence remains shame and a lack of understanding that what people are experiencing is domestic violence. When it comes to physical violence, threats, damage to property – that is easily identified. When it is coercive control, stalking, emotional abuse, financial abuse, neglect and exploitation – people may not recognise what they are and potentially not be willing to admit to themselves that someone they love is doing this to them.

When it comes to crisis response, people need to respond with empathy, with understanding and in a manner that maintains dignity and grace. From my experience, people in crisis are never presenting their best self. There is no need to ask, “Why didn’t you call sooner”, “why didn’t you just leave” or any number of other questions (or comments like, “you know what he’s like, it was only a matter of time...”) that make people feel stupid and that they shouldn’t have called for help.

In my experience, health services are aware of their responsibilities as mandatory reporters of domestic violence. As well as reporting to police, I have found that health services take steps to refer people to appropriate services for further support, whether that is counselling, financial services, housing or legal advice.

I have found that the best practice for police response to domestic violence incidents is to take affirmative action. The safety of victims and children must be assured. The elements towards best practice in this space should be:

- Knowledge of what is currently occurring, who is involved, any children present, any identified witnesses
- Background information including, prior incidents of domestic violence between the parties, current and past intervention orders
- Any additional information that police officers may need to keep themselves safe whilst intervening in a highly volatile situation.

When this information is known and police officers formulate an unplanned response to a planned response enroute to the incident, this information helps direct an outcome. After the incident has been resolved, a specialist domestic and family violence unit should review the incident and response to make sure it is appropriate in the circumstances and provide training and guidance to officers to improve practices. A good example of this that still sits with me is an incident from Central Australia where a woman had been drinking with her partner, there was an argument and he set her hair on fire. The woman was taken to hospital, the man was arrested, charged with offences and an intervention order put in place. When I reviewed the incident, the intervention order was only a “non-violence” order and still allowed contact between the man and the woman. A review of the incident indicated that was not appropriate as the man and woman had been in a relationship for more than 15 years, with police attending incidents between them regularly over that period with the woman as the victim. Using the information that I gathered, the intervention order was upgraded to a non-contact order, which was put in place to protect the woman. When I met the woman on release from hospital, she was not angry that her partner had set her on fire, but she was upset that I had put in place a non-contact intervention order because she still loved him. Domestic and family violence can lead people to make decisions that do not help them, do not keep them safe. When critical incidents happen and police intervention is required, listening to all parties is required (what happened, what they want to happen from here). When a decision needs to be made it must ensure the safety of everyone, especially victims of domestic violence who may be influenced by conflicting emotions about what has happened.

My work now leads me to confront what happens to men as perpetrators of family and domestic violence. The nature of the offences committed means that they cannot return home because they were living with the victim, or living too close to where the victim lives. The men are remanded in custody, rendered homeless until they can find alternative accommodation. If they had jobs, it may well render them unemployed as they can no longer meet employment commitments. Frequently friends and family support has been cut off as whatever has happened this time is the last straw in a history of negative behaviours. I feel we (as a community) are doing what we can to support victims and children, but there is no pathway for men to redeem

themselves. Men must take responsibility for what they have done, repair the harm they have caused, but, making them a social pariah does not help break the cycle for everyone involved.

I believe that a key component of addressing family and domestic violence is the Men's behavioural change program and the prevention program for school children and young people. Community engagement to provide information to service providers about what services are available to people to assist them with employment, addiction, mental health concerns and respectful relationships would also be of great benefit. Providing a pathway for the next generation to learn respectful relationships, perpetrators to address behaviours of concern whilst also being able to hold people accountable for their actions through the legal system whilst providing support to victims, families and children is the way forward. Perhaps consideration of the path set out in Central Australia may provide some guidance for a similar initiative in South Australia.

For your consideration,

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