



LEGISLATIVE ASSEMBLY FOR THE AUSTRALIAN CAPITAL TERRITORY

**STANDING COMMITTEE ON JUSTICE
AND COMMUNITY SAFETY**

(Reference: [Inquiry into domestic and family violence—policy approaches and responses](#))

Members:

MS E LEE (Chair)
MS B CODY (Deputy Chair)
MS N LAWDER
MR C STEEL

PROOF TRANSCRIPT OF EVIDENCE

CANBERRA

THURSDAY, 3 MAY 2018

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Secretary to the committee:
Mr A Snedden (Ph: 620 50199)

By authority of the Legislative Assembly for the Australian Capital Territory

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WITNESSES

BELL, MS CODIE , Restorative ANU	274
CLARKE-LINDFIELD, MS SUSAN , Executive Director, Toora Women Inc	241
CRIMMINS, MS FRANCES , Executive Director, YWCA Canberra	241
HELYAR, MS SUSAN , Director, ACT Council of Social Service Inc	265
JARRON, DR CHRISTINA , Executive Manager, Research and Policy, White Ribbon Australia	256
MOLONEY, MS ELIZA , Policy Officer, ACT Council of Social Service Inc	265
PERKOV, MS LAURA , Restorative ANU	274
SURYA, MS ANAHITA , Restorative ANU	274
WILLIAMS, MS MARCIA , Chief Executive Officer, Women’s Centre for Health Matters	241
WILSON, MS MIRJANA , Chief Executive Officer, Domestic Violence Crisis Service	241

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Amended 20 May 2013

The committee met at 10.14 am.

WILSON, MS MIRJANA, Chief Executive Officer, Domestic Violence Crisis Service

CRIMMINS, MS FRANCES, Executive Director, YWCA Canberra

WILLIAMS, MS MARCIA, Chief Executive Officer, Women's Centre for Health Matters

CLARKE-LINDFIELD, MS SUSAN, Executive Director, Toora Women Inc

THE CHAIR: Good morning, everyone, and welcome. I declare open this public hearing of the Standing Committee on Justice and Community Safety's inquiry into domestic and family violence—policy approaches and responses.

Today the committee will be hearing from the ACT Women's Services Network, White Ribbon Australia, the ACT Council of Social Service and Restorative ANU. On behalf of the committee, I would like to thank all witnesses for taking the time to be here today. We will now move to the first witnesses appearing today, representing the ACT Women's Services Network: Marcia Williams, CEO, Women's Centre for Health Matters; Frances Crimmins, WYCA Canberra. We do not have Ms Martin from Beryl Women, do we?

Ms Wilson: No, she might not make it.

THE CHAIR: I also welcome Susan Clarke-Lindfield from Toora, and Mirjana Wilson from the Domestic Violence Crisis Service. On behalf of the committee again, thank you for coming to appear. Can I remind witnesses of the protections and obligations afforded by parliamentary privilege and draw your attention to the pink coloured privilege statement before you on the table. Can you please confirm for the record that you understand the privilege implications of the statement?

Ms Wilson: Yes.

THE CHAIR: Can I also remind witnesses that the proceedings are being recorded by Hansard for transcription purposes and are being webstreamed live and broadcast live. Would anyone like to make an opening statement?

Ms Crimmins: Yes, I will make the opening statement. It is important to note that we are members of the ACT Women's Services Network. We could not all be here today, but the four of us are here representing our network. Our statement is on the inquiry into domestic and family violence. First of all, I would like to start by saying that we acknowledge and celebrate the first Australians on whose traditional land we meet, and pay our respect to elders past and present.

I thank the standing committee for the opportunity to make a statement on behalf of the ACT Women's Services Network. The ACT Women's Services Network is a network of women's services and organisations that exists to provide support to women in the local Canberra community. As organisations, we work to make the views of ACT women experiencing or at risk of experiencing domestic violence known. We want to ensure that the specific needs and views of women and children experiencing domestic violence inform the committee's work.

All women's services in the ACT have reported increasing demand over the past few years. Unfortunately, funding levels have failed to keep pace with demand. The current funding levels of women's services in the ACT have been adversely impacted by previous commonwealth government funding decisions and the resulting drop in funding to the homeless services sector and a shortfall in ACT government funding of community legal services.

Funding constraints have resulted in a shift away from specialist women's services. This is of serious concern to us, as women and children escaping domestic violence require specialist skills and knowledge that are not generally found in facilities designed to respond to generalised forms of poverty and homelessness and may be fearful of accessing accommodation where there are also men.

While the prevalence of violence against women remains high and continues to rise each year, the ACT government must increase their investment and prioritise the availability of local support systems so that the safety of women and children is protected and perpetrators are held to account.

The Women's Services Network welcomes investment in domestic and family violence responses in the ACT through the ACT government's safer families package, but additional support is required. The network recommends increasing funding to the front-line services who have expertise in delivering trauma-informed support and the funding of initiatives such as the family safety hub to meet demand.

There also continue to be gaps in data about the prevalence and impacts of domestic and family violence, particularly at a local ACT level. Until this data can be disaggregated by categories such as locality, disability status and gender, understanding of the issue will remain limited and impede effective service delivery and policy making.

Addressing complex support needs: because of violence, women and their children can experience long-lasting trauma, but there is still limited investment in long-term crisis support for women who have engaged with the legal or justice system and not entered a refuge or a homeless service. There is crucial need for ongoing support to ensure that women's and children's initial improvement in safety and wellbeing is sustained over time; yet funding for women's refuges does not include funding to support women and children beyond an immediate crisis response. Historically, there has been a service response system based on women leaving their home, but this needs to be adapted to ensure that there are a variety of options that meet the complexity of both living with and leaving domestic violence.

In addition, not all women who experience violence come from a family situation, and it is important that the new safety hub adequately responds to those outside a family arrangement.

On primary prevention, a recurring theme in sector consultations is the need for investment in challenging and changing cultures and attitudes towards violence against women through education in schools and community and workplace discussions. Effective primary prevention requires a coherent approach to primary

prevention across all ACT schools, with minimum standards as part of the school curriculum. This approach would bring the ACT into line with most other Australian states and territories.

Given the result from the Australian Human Rights Commission's report on sexual violence on campus, specific strategies to support ACT young women are essential, including youth-friendly services and support, on-campus prevention campaigns and minimum standards of consent education.

On housing and homelessness, because the availability of appropriate housing and accommodation is an important consideration in many women's decisions about whether to leave a home where there is domestic violence, housing access is critical. However, there continues to be a lack of access to housing that is affordable, timely, suits the specific needs of women and provides security of tenure for women and their children. As a result, the long-term outcomes for women's housing, employment, health, parenting capacity and financial independence are poor, meaning a high proportion of women either return to the violent relationship or end up in secondary homelessness.

In conclusion, the ACT Women's Services Network views this inquiry as an important opportunity to highlight existing gaps in funding, data, service delivery and policy and, as always, we will work to ensure the voices of marginalised women inform the committee's findings.

THE CHAIR: Thank you very much for your opening statement. We will go to some questions. I might start. On page 5 of your submission, right at the end, you talk about there not being enough focus in the current work being done to improve early intervention, pre-crisis and non-justice responses. I am just wondering whether perhaps you could expand on that and, if you had a wish list, what would that look like? Where would that focus go?

Ms Williams: I guess for us, at the point where we wrote this, we had just seen the early bits of the family safety hub, and all of us have been working very closely with that. I am going to talk from the perspective of the Women's Centre for Health Matters, but I know that others would agree.

Often the bits that go missing are the pre-crisis, and the example would be that we know that domestic violence often affects women as they fall pregnant or in those early years when they have got children. We have just finished an extraordinary meeting that focused on the needs of children and young people, and I think that raises those issues about how do you intervene early in those situations, how do you work in that area before those sorts of relationship develop.

Rather than the focus of all the funding going towards the crisis end, we need to invest in some of those early interventions. That is just one—and I am sure you would have others—but there are lots of opportunities to work in spaces of the health system, when you are picking it up early, in particular in schools. I think, as Frances talked about, we are seeing a lot of young women in schools at the moment entering into really unsafe relationships because they do not understand what is a normal relationship or what is a good relationship. And some of that investment in that has

got to be made earlier; otherwise we are just going to be putting money into that back end as everybody is in a relationship and trying to get out of it and already affected and traumatised.

Ms Wilson: I think families present in a whole range of ways in our community, be it to a health service or through education, and I think there are often red flags that something is not travelling so well in those family units. It could be at that antenatal appointment that a woman has. It could be with a GP. It could be in a whole range of different areas. It could be the way the kids might be struggling at school.

But rather than waiting for the crisis system to pick it up, as Marcia said, by the time many of these families enter our services, it has been going on for a really long time. I think the latest statistic is anywhere between 25 and 30 incidents of physical violence, let alone the coercive and controlling behaviours that might have been going on alongside that.

I think there is a primary prevention thing, which is that cultural change stuff that needs to happen in schools around respectful relationships, but then there also need to be strategies developed on how do we pick up those families early that touch those systems. And some of those systems could be the child protection system, that initial report that comes in that does not necessarily say, “Alarm, alarm, red flag! There is DV going on here. Something is not quite right.” There could be other issues of neglect that might present—children not attending school or a significant drop in how families are engaging with their communities.

I think some of that early intervention stuff does lie with the health and education systems rather than our system and our sector, if that makes sense. I think the struggle for our sector, and correct me if I am wrong, has been engaging with those systems and those sectors. I think that there is some work to be done there. But I do have some faith in the family safety hub work, looking at cross-sectoral work that can be done to pick up some of those families and individuals earlier.

Ms Williams: And we already know that some of those things work. I was just thinking about schools at the moment. The teachers have a big job, and there is lots going on in there. But we have some schools where ACT Health funds nurses going in—and they are in there often enough just as someone that the kids go and talk to—and they often pick up domestic violence really early in the piece. But we have not got them in all the schools, and we have not got that standard approach that would mean that we could pick up a lot of those things a lot earlier.

THE CHAIR: We certainly know that one of the things that Jo Wood, the coordinator-general, has been talking about is that fragmented approach at the moment, which I know is one of her key goals to work on. There has been some evidence that we have had in previous public hearings about the lack of information sharing that has created a bit of a barrier. From your services’ perspective, would it help if we had a bit more of a consistent approach to information sharing amongst different agencies and that type of thing?

Ms Crimmins: Yes. I was actually going to touch on early learning education and that we need to include those people in trauma-informed education because, unlike

school, if you are bringing up young children, you have a lot more contact with the primary care giver. If staff are better educated and supported and know the networks where they can connect those people to support services, often an early learning educator is somebody who is quickly able to establish trust and rapport with that care giver. More funding should be provided for them to notice trauma in children—and it has been very well documented, the signs of trauma, particularly in babies who are not witness to violence.

I would like to make that recommendation, that support to that sector is a really crucial spot in engaging both with care givers and the children, particularly if the recommendation is that all children in the ACT from age 3 are able to access early learning. Then that could be mainstreamed and everybody would have access to that, regardless of where you come from and your cultural background.

Ms Clarke-Lindfield: I would also recommend that any training that is provided is recurring. A one-off training workshop has got minimal success, I think. It needs to be recurring. There need to be built-in supports so that when, say, teachers pick up on something that is not quite right, and they just suspect, they have got someone that is more knowledgeable that they can go to and feel comfortable with. Like I said, it is about more than just providing training workshops that are one-off.

Ms Williams: Your question about information sharing, I think, is a crucial one. I do not think it is just information sharing; I think it is looking at the data and what it shows us. At the moment we have so many mini silos that we cannot see what happens to families; we cannot see the early indicators, because that information is not shared. I know we have been involved in a lot of conversations about if you could see that information early and share it across, you could see where people were touching the system and wrap around a lot better than we do now.

At the moment the crisis system gets them at the end, but in all those early stages where things have been happening you cannot see what has been happening. I am sure if we could do that better we could actually improve our responses, because we could see the patterns, where people are going, what is happening to them and what is not working. So it is not just the information sharing. I know Victoria has done a lot of work in that area. It is one of those contentious issues about sharing personal information, but I think the data on where people are actually going to as well is equally important, particularly when they are accessing the service system.

MS CODY: I completely hear everything you have to say. I think you, Ms Crimmins, raised a point—maybe it was you, Ms Williams—about people not necessarily understanding what a healthy relationship is. I know from experience that often you do not realise you are in a bad situation until you realise you are in a bad situation, and that is usually quite a way in. Are there things that any of your organisations are doing? Are there things happening to help young women in particular understand what healthy relationships look like, should look like and can look like?

Ms Williams: At the moment we are about to do exactly that, yes, because of what we are hearing from a lot of service providers that are not the DV service providers, but the health providers and others that work with them. We are looking at working on something that is actually about that wider view. There is so much information that

kids get access to these days that we would never have had access to. It sort of seems to show the normal person—the Kardashians or—

THE CHAIR: I do not know if you would call that normal.

Ms Williams: No, exactly, we do not, but that is what many of those young women and men see and what they try and compare themselves to. I think we have all seen an increase in the issues around porn online and what that is doing to young people.

Ms Crimmins: And what is normalised.

Ms Williams: And what is normalised about that.

THE CHAIR: And people accessing it younger and younger.

Ms Williams: Yes. We have done quite a bit of work. I know there is other work that goes on, but I think it is something that really needs to come to the fore because it seems to be getting worse. When we talk to people like the police, it is getting younger and younger. They are not in long-term domestic violence relationships, but they are in relationships that are not good ones and that are harmful, yes.

Ms Crimmins: I would like to draw to the committee's attention the research of Our Watch, particularly around what constitutes respectful relationships. Our Watch research strategies to eliminate gender-based violence have found that it is gender inequality and unequal gender norms that are the key determinants of violence against women. They have some best practice that could be adopted, but they are also recommending that it needs to be broadened to a whole-of-community response as well. So we are talking about workplace, sport, whole-of-community education.

They have five key recommendations to start embedding and enabling young people to understand what a respectful relationship is. The curriculum must address drivers of gender-based violence, have a long-term vision approach to funding, take a whole-school approach, establish mechanisms for collaboration and a coordinated effort, ensure integrated evaluation and continual improvement, provide resources and support to teachers, and use an age-appropriate interactive and participatory curriculum.

An independent evaluation was conducted under the national action plan No 2, when there was funding for respectful relationships, from 2008 to 2013. It did find that young participants were able to apply their learnings to their life and make positive changes in their relationships. That was evaluated by Queensland university.

Ms Williams: But it does require that local commitment to do that.

Ms Crimmins: Absolutely.

Ms Williams: I think that is where it often falls down: that it is not delivered equally, that it is adjusted as it goes, and it is not local sometimes. It has to have that local context as well.

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Ms Clarke-Lindfield: At Toora we have something called the building respectful families program. We have it in partnership with EveryMan Australia. It is often, but not always, after the violence has happened, but the families want to stay together.

It is intensive. It is an intensive 12-week program. We work with the women; they work with the men. There is intensive case management support around respectful relationships. There are four training modules in that. That has proven to be quite successful. A lot of families want to stay together, particularly Indigenous families, and they want to get their kids back. The problem with it is that it is resource intensive, but it works. And it is unfunded.

Ms Williams: That brings up another area too. When we are talking schools, that also includes universities, obviously. We see international students that are often victims of domestic violence. We have seen several deaths over the last few years. It is the issue of thinking about each of those contexts and where people are in them, and what are the useful things to make sure that they understand in Australia and what the expectations are around relationships.

Someone talked about the workplace. Yes, universities are workplaces, as are other educational institutions. So often they do not see those responses as needed. It is often organisations like the Canberra Rape Crisis Centre that pick up the responses when they have gone wrong. But there really is a need to hold some of those institutions more to account about themselves as needing to be involved as well, and to fund some of those.

MS CODY: We saw the report come out recently about the universities. It was—

THE CHAIR: Eye opening.

MS CODY: Well, I think it was—

Ms Crimmins: Seventy-six per cent of women at ANU reported being sexually harassed and 68 per cent at the University of Canberra.

MS CODY: Yes.

Ms Crimmins: Those statistics are not acceptable.

MS CODY: No.

THE CHAIR: They are horrifying.

Ms Williams: I guess the other bit is that at least ANU recognised they had a problem and said it, but some of the others have not admitted that at all.

MS CODY: No.

Ms Crimmins: Again, a strong recommendation that I think we would make is that there needs to be adopted a shared responsibility approach to work with ACT-based universities—it cannot be done alone—to end the endemic sexual assault and

harassment on campus. Again, it does come back to ensuring a consistent approach to primary prevention, particularly with all new students, and to provide that mandatory respectful relationship that is essential, including consent in a relationship. It must also be relevant to the diverse student bodies, because we see that international students in particular are incredibly vulnerable.

MS CODY: I could talk about this forever. We have heard from all of you individually over the course of these hearings. I thank you for again taking the time to come and talk to us today. I think it is invaluable. One of the things I hear a lot about in the community, and we have heard it in the hearings, is that domestic and personal violence is not necessarily physical abuse. It is often controlling behaviours, financially and in other forms.

It leads on from what I was getting at with helping young women to understand what a healthy relationship is. In a lot of instances I think women may not realise that the behaviour that they are engulfed in is dangerous and that that can lead to much more intense and violent behaviour. As members of the public, as everyday citizens, do you have any ideas about how we can help women that we may notice in those situations? Are there things that members of the public can do to understand that more easily?

Ms Wilson: It is such a challenging thing because, as you alluded to before, often people do not even realise that what they are living with is not okay. It is not until the escalation of those really extreme coercive controlling behaviours, and the physical violence becomes more frequent and escalates over a period of time, that people go, "I am unsafe and I need to live my life differently or do something differently."

I think all we can do as a community is keep talking about it. One of the difficult issues about this that we have is that it becomes an issue we focus on for a period of time. Many of us have been working in it long enough know that it is the issue; it has got the attention of governments; it has got the attention of communities; we are all into it; programs get funded, many of which have great success. Then we get to the end of those funding cycles. We perhaps have made some inroads with some families, some sectors or some of the community. Then some other social issue overtakes that. The pendulum swings, funding gets taken away and it is no longer the issue.

This really needs a kind of a consistent, committed response from all of us, forever, to say that this is really important. To me, it is the same as seatbelt campaigns and SunSmart campaigns. It is of that magnitude. It is something in relation to which we do not go, "We will do this now. We will fund this program and we will fix it, and all be will good," because actually it will not be.

It is about how we change the conversation for this not to be something that happens to those people over there. It is just something that we do. We get in the car and we all put a seatbelt on. We go outside and we all put sunscreen on. So my dream would be that this issue becomes something like that, that we do not have to trip over ourselves around what we say to that woman that might sort of allude to the fact that she is kind of not feeling particularly right, but she does not know herself what it is.

I think it is really about it not being a special issue that kind of happens over there. Actually, all of us are touched by this in some way. The uncertainty of fundings,

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programs and all of those things, that kind of has to go as well, because we do these great things. We do these programs. We go, “Yes!” And then that goes. Then we lose a workforce, we lose speciality and we lose all of those things. Then we have a death in the community and, oh no, we are back to the pendulum swinging again. Now it is suddenly an issue again.

I would like to see that end. I do not know what the rest of you think about that. Mirjana and I have spent the last year and a half working with businesses and industry, and it still surprises us how many people say, “But it does not happen to us.”

They all employ women. They all have families and kids. To me, it always feels like it is the usual suspects talking about this and saying, “Oh, it is just those women’s services that always raise it.” I know that when we had the first extraordinary meeting of the council, one of the things we said was that it is really important that others start speaking out about this and making it normal, making it a normal conversation that we have. We still have not quite got there. Obviously, we have the safer families response. But we are not having others having the conversations about what is normal and what is not and that it is not something that should be accepted.

I guess the other issue arises very much when we talk to GPs. Their understanding is based on a tool that is really very basic. So how do you actually communicate to those people that see them? We talked about lawyers, we talked about GPs—all of those people. I do not think there is enough of a focus on how we make sure that people understand this issue. People should be talking about it, as you said, as they do about sunscreens.

Ms Williams: The GPs are a great one. So many of our clients present to a GP and walk away with antidepressants and anti-anxiety meds. Has anyone actually asked them what might be leading to that anxiety or that depression? We have not normalised the conversation.

Ms Crimmins: The other thing we need to recognise is that we are trying to change entrenched social and cultural norms in Australia. We need to look at that really long and hard. That means that it has to be a long-term public education process just like putting on a seatbelt. This is so critical. We need to recognise that. It really is like Australia’s dirty little secret. We have not spoken about it. It stems from gender inequality. Unless we are addressing all of those driving factors of gender inequality we will not see any shift at the tertiary end.

Ms Wilson: Because ultimately, we do not want to exist—

Ms Crimmins: Yes.

Ms Wilson: as crisis services. We do not want to exist.

Ms Clarke-Lindfield: I agree with the others around the funding uncertainty. Thanks to the media, domestic violence has become a topic of interest to the community, but that comes and goes and comes and goes. In my organisation once a year we give staff a stress survey. It comes back that working with these very, very complex victims of domestic violence and hearing their stories does not stress them out that much. The

job insecurity from working in this sector does.

I think that in June 2019 our funding contracts finish. The chances are that it will go out to tender. If you lose a specialist women's service or a specialist domestic violence service, you do not get that talent back. Generalist services just do not have it. When it is gone, it is gone. We have seen that in New South Wales. What we need is long-term contracts that provide security for the sector.

Ms Crimmins: I would like to note also that at the Commission on the Status of Women this year, the Australian Women's Alliance Against Violence presented some research conducted in Victoria. It was titled "Domestic Violence Workers as Human Rights Defenders." I am sure that everybody here supports the front-line. The amount of violence that is directed at those people working in the sector needs to be addressed to keep them safe.

Their findings from this survey showed that they are under increasing pressure. They are called family destroyers. They have had threats of violence against their own family members and their own children. They are targeted in their communities, particularly if they are known in their communities, for the work they do. So it is really important that we record that important work and that we are human rights defenders.

THE CHAIR: Thank you very much.

Ms Williams: Picking up on that, if Robyn from Beryl Women's Inc were here she would probably say that every year in the lead-up to the 16 days, refuges and women's services get invites to go and speak to the big end of town, to their staff. It is once a year. It is always about that one-off, about coming in and doing it. It is a big investment for small services. You leave and you are not sure whether they have ever done anything. There is not any taking that on as something that they should also be contributing to in terms of awareness raising outside their own areas. Yes, so for me, just like Mirjana said, my goal would be to see them starting to come out and actually educate others about it too, rather than seeing it as being just something we do once a year.

MS LAWDER: In your opening statement, Ms Crimmins, you mentioned investment in effective primary prevention, for example, in schools. Are you able to run over your understanding of where we are up to on that primary prevention with education in schools? What do you think a good system would look like?

Ms Crimmins: Again, I refer to Our Watch, which has done a lot of research in this area. They have developed the best standards for primary prevention, education in schools. All states and territories are required, under the third national action plan, to have this embedded in their curriculum and to report back on what they are doing in that area.

At this moment in time, the ACT and the Northern Territory are the only two jurisdictions that have not reported what they are doing specifically on respectful relationships. In curriculums in the ACT school system, it is under social and emotional wellbeing. We would call and recommend that they adopt the same

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approach that the other states and territories have taken to implement this. It needs to be as per Our Watch recommendations, embedded in the curriculum. We have been advised that it is being dealt with outside—by means other than the curriculum.

MS LAWDER: In your understanding—obviously it is a question for government—is there a particular reason why the ACT and the Northern Territory have not reported? Were they last to come on board, so perhaps have not had a full period? Do you know?

Ms Crimmins: I am not sure why the two jurisdictions have not funded what is a transparent respectful relationships curriculum. Again, we have committed to delivering social and emotional learning. Research has found that these programs do not deal with issues such as consent, which is an issue by the time you get to university and you see the rates of sexual assault. They do not deal with gendered power dynamics and the drivers of gender inequality. That is why the recommendation is that it must deal with those key issues, not just under holistic social and wellbeing.

MS LAWDER: I think dealing with early education you mentioned—

Ms Crimmins: The recommendation is that it commence from kindergarten and go all the way through to year 12. Our recommendation is that that needs to be in every school as part of the normal curriculum across the life of a child, up to young adulthood.

MS LAWDER: We all still hear anecdotal examples of gendered approaches, whether it is what musical instruments you take up, or sport or activities that kids do, despite perhaps best intentions.

Ms Crimmins: Yes, looking at our own institutions still sending boys and girls down those gendered pathways, why do we still have gendered sports uniforms in our public schools? There are those type of things. That is why the Our Watch recommends a whole-school approach. We need to look at this holistically to make sure that it is a whole-school approach in terms of everybody being educated, from the principal to the person on administration.

We need to have a way to support high schools in managing sexual harassment. How do we support those young people who might find that their images have been shared? We know that ACT schools have been involved in that. We need to start early to make sure that people understand what consent is—particularly now, as young people's relationships are being conducted through social media. These are some of the issues that have been raised.

MS LAWDER: There was a report a year or more ago about the percentage of young people who felt like a bit of a slap to a girlfriend—

Ms Crimmins: Yes, one in four young men said that slapping your girlfriend is normal. In fact, one in eight women also thought that was normal.

MS LAWDER: Yes. Amazing, isn't it?

Ms Crimmins: We are not doing anything to change these entrenched cultural norms. All of the research—and international research—says that we need to start with gender inequality.

MR STEEL: I just want to follow on from a discussion that we were having around how to engage other sectors like health and education in responding to family violence. I wonder whether it is sort of a similar campaign to the “child protection is everyone’s business” message. I want to drill down, other than the campaign side of things, on the specific initiatives. Training was mentioned in relation to early childhood educators—for example, trauma informed responses to children. What other things do you think are important in terms of engaging those other sectors and getting them to respond? I wondered whether you could respond specifically in relation to the role of the family safety hub as a place where they might be able to refer people, and how that model might work.

Ms Williams: I was just going to say something about the family safety hub. I think my colleague has been involved in it too. We have been talking to them about the training and reiterating that it is really important that the training they are delivering is not something that is a one-off for government workers but is somebody that can be used by anybody.

That is probably the way to go so that we are all receiving the same information. I know that Jo has been very keen to look at that and to make sure it is available in the workplace, online, those sorts of things. That is one way. Rather than having a GP get AMA training that might be very basic, versus teachers who might have a different focus, I think that a really important element is that we are all receiving that same information in relation to the issue.

Ms Cody said we used to think of domestic violence as being only physical. So much has changed over the past few years and finally we are getting people to understand that. But I am not sure. We work on an advisory council with GPs. For them to commit to doing training, they have to take time out from their business. They get points for things, but what they are trying to keep up with in terms of medical becomes really difficult. I think those are really hard issues. What tools do we need to provide those sorts of workers to help them get up to speed in terms of understanding changes in that environment?

Ms Wilson: They still have got to want to do that. Because, unlike the child protection system, there is mandatory reporting. I know that Western Australia and the Northern Territory have mandatory DFV reporting. I am not in any way advocating that that is the way that we go. But I think that is where it then ends up being based on the goodwill and the interest and the champions of those areas to drive certain things.

But then, what role does government have, not so much with the private practitioners and things like that? Certainly that is where they are starting. The role of the family safety hub will be to suggest that government agencies or government workers at least must participate in some form of training. That is a starting point.

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Because to mandate in this whole area is really difficult. I would like to think that in public schools, when it comes to the curriculum, we could mandate that those certain things happen. My background was in education. I was one of those teachers that would sit there and go, “Oh, God, we’ve got to do this now. What do I stop doing in my 9 to 3 day to fit this bit in?” That is always going to be the challenge: the GP that goes, “Well, how do I determine the priority to attend to?”

As you were saying, it goes back to it being everybody’s business. It really is an issue that affects and touches all of us. As Frances has said, we have such entrenched cultural views on how we see this issue. But we have to all do that side by side. We have to do the primary prevention work and the early intervention work. We have to keep providing those crisis responses in well-funded and resourced organisations. Then we need to make sure that we have maintenance, stability and support to people long-term.

But we need to see all of those areas and do them all side by side for a really long period of time. It is difficult. We have spent 30 years convincing police that they need to keep hanging out with us. Sometimes that works really well. The biggest seller has been that it might stop you turning up at that house five times that week if you get us in the door, and we can work alongside you. It is about the buy-in, aside from mandating. I think in some areas we have not quite worked out what that buy-in might be.

Ms Williams: Back to the discussion about maternity and parents, there are some fantastic programs in the ACT, such as baby makes 3. That is the sort of stuff that should be built in. It is not about a campaign but about the common messages that people are hearing. It is about learning what is normal and what is not. It is where you can go and get support as well.

Ms Crimmins: Universal parenting programs. Why do we make assumptions that people are going to be great parents naturally? At the moment we provide those only for people already in the statutory system.

Ms Wilson: Or those that want to engage in that. But there is a whole group of people that do not know what they do not know and what they might need. It is about normalising those messages in our community.

MR STEEL: I was just going to make the comment that while some of the children subject to mandatory reporting may be subject to family violence, there would be a large number where a mandatory report is not required but there might be questions about whether family violence is going on.

Ms Williams: Or the thresholds.

MR STEEL: Yes.

Ms Williams: I think one of the key issues has been about this. You can report, but if they are not in that threshold then they will not get that response. You asked before what we are doing with those kids that are not at the threshold that enable child protection to do something about it. We are just sending them back into the same

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situation. So what is it you have got to get in place?

Ms Wilson: We have learned some things working closely with child protection. We do a lot of reporting. We are not a mandated reporter but, aside from education and police, we are the third largest reporter in the territory.

MR STEEL: Right.

Ms Wilson: Consistently working alongside that system has shown that if we report and engage with that system and say, “Look, it does not require a statutory response here, but there are some other supports this family could use,” they work really hard at referring out to organisations such as ours. But then our organisations have to be able to deal with that referring out. This then goes back to the funding and the resourcing loop and all of that stuff. So it is there. I do not think we can get away with it cheaply. That is the bottom line.

Ms Crimmins: And, traditionally, we would take from one bucket to help fund another. We need all three areas funded, and no taking from one. You actually need additional resources.

MR STEEL: And children are not considered to be clients of the services.

Ms Crimmins: Yes. In the funding models, yes.

Ms Clarke-Lindfield: That is what we have been advocating for. Certainly you would have heard over and over again during these meetings of the need to focus on the kids that have experienced domestic violence and to work with them around their trauma, have them as clients in their own right, and not only help them but also help break the cycle of violence. Help them address the trauma.

Ms Williams: That is within the crisis system, but there is also outside. If you are a parent that has a child that has been affected, where can you take your kids? If you are not eligible for a crisis service, what do you do? It is not part of the mental health plans. You know, we have headspace, which is full, with long waits. We regularly hear from women saying, “What am I supposed to do with them? They are experiencing trauma, but there is nowhere to take them.” That should be a mainstream approach: supporting those kids to get better and to live normal lives. They should not have to have gone through a crisis system to do so.

Ms Clarke-Lindfield: There are those kids that are not in our services but in care. We can make assumptions about kids in child protection and in care. What are the chances that they have experienced violence in their young lives? What is being done to help support them and address that trauma?

THE CHAIR: Thank you. The time is up, although we could talk about this forever.

Ms Clarke-Lindfield: Forever.

THE CHAIR: Yes, for a long time. When available, a proof transcript will be forwarded to witnesses to provide an opportunity to check the transcript and suggest

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any corrections. I do not think witnesses undertook to provide any further information today. On behalf of the committee, I thank you for taking the time to appear today and thank you for your ongoing work in this sector.

Hearing suspended from 11.03 to 11.29 am.

JARRON, DR CHRISTINA, Executive Manager, Research and Policy, White Ribbon Australia

THE CHAIR: The committee will now resume. We will move to the next witness, from White Ribbon Australia, Dr Christina Jarron. On behalf of the committee, thank you for appearing today and for your written submission to the inquiry. I remind you about the protections and obligations afforded by parliamentary privilege and draw your attention to the pink coloured privilege statement before you on the table. Can you please confirm for the record that you understand the privilege implications of the statement?

Dr Jarron: Yes, I understand.

THE CHAIR: Can I also remind you that the proceedings are being recorded by Hansard for transcription purposes and are being webstreamed and broadcast live. Before we proceed with questions, do you have an opening statement?

Dr Jarron: Thank you very much for the opportunity to come and speak with you about the submission that we have made to your very important inquiry. As our submission notes, White Ribbon Australia focuses on the prevention of men's violence against women, including domestic and family violence, and we further refine this to focus on the engagement of men in the prevention of men's violence against women.

Our organisational purpose, if you read our official documentation, is engaging men to make women's safety a man's issue too. We are dedicated to ensuring that men have the knowledge, tools and strategies that they need to be able to be advocates for changing social norms, attitudes and behaviours that are at the root of men's violence against women.

As the discussion paper for this inquiry notes, women have been leading this work for decades and men do occupy a contested space within it. Many men, in our experience, do not realise that they have a role to play. Others do not how to get involved. That is where White Ribbon comes in, and that is why it was formed, in Canada back in 1992.

Fundamentally, what we want is that all men understand the role that they can play in the prevention of men's violence against women, and we believe that this will contribute to a decrease in men's violence against women and contribute to making communities safer.

Our submission outlines the variety of work that we do and the multiple settings in which this work takes place. We operate in schools, workplaces, in other educational settings, through grassroots community events such as football games. There are a range of different areas in which we pop up. All of the activities are really aimed at highlighting what people can do and the positive role that men can play in preventing men's violence against women. Women will always be a fundamental part of this work, absolutely, and working alongside men through the programs and campaigns that we offer to prevent men's violence against women.

On the engaging men angle, I read through the submissions and there is a reference to it a few times. For example, it is referenced directly in recommendation 3 in the Toora Women's submission. Generally speaking, there has not been much of a focus on this area and not a lot of government support for these initiatives in terms of funding. As the briefing pack notes—and I have an updated briefing pack for you that updates some of the figures from our submission to you—we receive less than 10 per cent of our funding from the government.

I have got a whole lot of updates around our activities in the ACT for you and updates to the information in the briefing pack, which you received as an addendum, I believe, to our submission.

THE CHAIR: Yes. If you would like to submit those, it would be great for us to receive.

Dr Jarron: Yes, absolutely. Just to give you a sense of what we are doing in the ACT and the reach of our programs here too, when looking for the information I found that we have 27 White Ribbon workplaces operating in the ACT, not necessarily with their headquarters here but operating here, and through that we have reached over 132,000 employees, which includes 72,000 men. That just gives you a sense of the potential for workplace initiatives, which was also something raised in multiple submissions to the inquiry. I can go into that as you like.

In reading through the submissions, it is clear that there are really big service demands in the ACT. Secure housing is a key need identified in multiple submissions, as is counselling, as identified by the Women's Health Service. Many submissions also raised the need for prevention work as well, and we would strongly advocate for that but never at the expense of funding for secondary and tertiary initiatives, which are absolutely vital in keeping women safe and which also perform an important prevention function.

The last point I want to raise before going to your questions is the outcomes aspect of this inquiry. Many of the submissions pointed out that it is really difficult to measure outcomes. It can be very difficult to measure outcomes in this area, although it is really vitally important, and I am very pleased to see this inquiry taking such a strong approach to this particular question and on developing evidence-based policy.

Certainly at White Ribbon this is a key consideration. It is something that is still under development. It is a challenge; there is no doubt about it. We are not a massive organisation. There is a whole process that an organisation has to go through to get to the point of measuring outcomes, which has taken us a few years.

But we are now at the point where we have a social impact measurement framework for a number of our programs and we are starting to collect data to inform those programs. We are continuing independent evaluations of our programs in schools and workplaces. Our schools program is up to its third independent evaluation, which is currently underway, and the workplace accreditation program will undergo a second evaluation shortly. Any way that we can contribute to the general discussion around outcomes is something that we are very keen to do. Internally we want to contribute to something bigger.

MS CODY: You were talking about workplaces. Can you just expand on what that means? It is not a term I have necessarily heard before around White Ribbon. I have heard of their ambassadorship program. I have heard about a lot of the other projects that you have got in the submission. But the workplace and the accreditation process is not something that I am fully across. Can you expand on that a little?

Dr Jarron: Yes, absolutely.

MS CODY: What it does, what it means?

Dr Jarron: We have been running the workplace accreditation program since 2012, and it is a world-first prevention initiative in terms of recognising and accrediting workplaces that are really active in the prevention of men's violence against women. To achieve accreditation, a workplace has to meet 15 standards across three criteria. I can send you a list of those if you would like.

MS CODY: That would be amazing. Yes, please.

Dr Jarron: I will make a note of that. Of the three standards, standard 1 is leadership and commitment, standard 2 is the prevention of violence against women, and standard 3 is responses to violence against women. There are multiple dimensions to each of those including, for example, the response to perpetrators, the response to disclosure of violence, that kind of thing—really making sure that the workplace is a safe environment for women but also supportive of women that might be experiencing violence. It has a response to men who may be using violence as well. Did you want me to hand over the updated copies now?

THE CHAIR: Yes. We have got the October 2017 one.

Dr Jarron: Yes. Things change quickly. I should mention that the standards and criteria are assessed by an independent assessor, someone that is not a part of White Ribbon, to determine whether or not an organisation has met all the standards and criteria. We now have 167 White Ribbon workplaces across Australia and, as I mentioned before, 27 of these operate in the ACT, though this does include organisations that have offices in multiple states and territories. Through this program we have reached over 600,000 people, including over 330,000 men. In terms of targeting men, this is a really effective program.

Also, as part of the accreditation process, participating organisations have to have staff complete a baseline and follow-up survey to achieve accreditation. They have to achieve a response rate of at least 30 per cent. Through that, we have amassed an enormous amount of data—over 160,000 survey responses, which KPMG went through, cleaned up and developed a tool for us to be able to begin analysing that data.

We have had a look at the high-level trends. The independent evaluation that will soon be underway will be interrogating that further, using that as a real data source for its findings. I can give you some of the higher level findings of that, if you like.

THE CHAIR: Please.

Dr Jarron: I have got about three different ways of giving you information here. Some of the key findings include that there was an overall improvement in the understanding of men's violence against women. Respondents were better able to identify different types of abuse, for example. A good example of this was financial abuse, being more able to identify that as a form of men's violence against women at the conclusion of the program than at the beginning.

There were some really interesting findings in there. Men were more inclined than women to believe that women were treated with dignity and respect in the workplace. This is a very interesting one that we look forward to unpacking a little more. I think it speaks to different experiences that men and women have.

Really importantly for us was that respondents felt more confident in taking an active bystander role inside the workplace. Something that a lot of our work focuses on is the bystander—men as perpetrators, yes, but also men as bystanders is a really important feature of our work. We will have more detail around the workplace accreditation program and the survey results when the next independent evaluation comes out, although that will be a little while down the track.

MS CODY: Just a very, very quick follow up: are you able to provide us, if it is okay, with the names of the 27 organisations in the ACT, not right this second, but if that is—

THE CHAIR: Yes, if it is publicly available.

MS CODY: If it is publicly available.

Dr Jarron: Yes.

MS CODY: I do not want you to breach any issues but, yes, it would be interesting.

Dr Jarron: Yes, absolutely. I believe it is publicly available, but I will double-check and send it through.

MR STEEL: Just to follow up on that, are you aware of any ACT government organisations that have been accredited?

Dr Jarron: I am not sure if they have achieved accreditation. My understanding is that we can share the information once they have achieved it, but until they have achieved it I will just hold off for now and let you know.

THE CHAIR: Thank you. I have a quick follow-up. You talked about working with men as bystanders. Can you expand on that a bit more?

Dr Jarron: In terms of the work that we are doing?

THE CHAIR: Yes; what that looks like.

Dr Jarron: White Ribbon does not work with perpetrators as such. Some of the men

that we work with may have perpetrated violence at some point in the past and we might not know about it, but our focus really is on the majority of men that might not use violence against women but have a role to play in its prevention as people that might become aware of violence.

We had a campaign, back in 2010, I believe, the “Hey mate” campaign. You sometimes see footage of it coming up from time to time on the news and that kind of thing. It was giving men ideas on what they can say in situations where they might see physical violence, for example, or someone might be telling a sexist joke at the pub, how you can respond to that.

We really started with the “Hey mate” campaign. Now it is embedded across pretty much everything that we do. We have an e-learning program, which has been completed by over 3,000 people, which includes advice around what to do in various scenarios, things that you can say if somebody says to you, “Why doesn’t she just leave?” That is about not so much witnessing violence but responding to those social attitudes around men’s violence against women. That is one example. Through the ambassador program we do the same, through workshops and training. It is really embedded across multiple aspects of our work.

THE CHAIR: Thank you.

MS LAWDER: In your submission you talk a bit about the breaking the silence schools program. I think you said you had 10 that had completed and another seven in the ACT this year. Is that a mixture of public and private schools, or is it all private schools? How does that apply?

Dr Jarron: I do not have the details of the breakdown of schools, but I can get that for you. What I can tell you now is that there are 16 White Ribbon schools in the ACT. Since the submission was made, a number of them have completed the program. I am happy to go and get that information from the schools team for you.

MS LAWDER: That would be good.

Dr Jarron: Generally speaking, across Australia it is a mix: a mix of primary and secondary and all different school types as well.

MS LAWDER: I can see you have some good results, with 100 per cent agreeing that it is a valuable professional learning tool et cetera. In the ACT specifically, it seems a reasonably low number. Is it something you are keen to roll out in more schools? Is it a capacity issue where you can only do a few per year?

Dr Jarron: Funding is obviously a key issue. We do not receive government funding for this program. It is funded through donations from our corporate partners and from the community. That means that we have to be very mindful of the geographic footprint of the project. The expressions of interest for participation are open now, and we are planning on offering the program in the ACT, so any ACT schools are welcome to express interest in participation and will be part of the program.

MS LAWDER: It is aimed at principals and teachers, is it, not at the students?

Dr Jarron: That is right.

MS LAWDER: You are hoping it is a trickle-down kind of effect?

Dr Jarron: Yes. It is different. It is a professional development initiative. We work with principals and teachers, the leadership in the school, to look at ways that respectful relationships education can really infiltrate everything that might happen in a school. It is not a pastoral care session on respectful relationships, but you might have a chance to learn about this as a young person through your English class or at a school assembly. There are lots of initiatives. Schools do a range of different initiatives through this program, including activities around 25 November. There are lots of different ways that schools express it. That is one of the really good things about it.

In my opinion, one of the strengths of White Ribbon generally is that the way that it rolls out in a community or in a school is the way that suits that setting. Different schools are in different stages of culture change. A school that is maybe not so advanced in terms of its understanding of gender equality can frame the aims of respectful relationship in a different way that will help pave the way for them to get to that point. It manifests in different ways in different schools, but, yes, we do target the teachers and principals rather than the students themselves.

MS LAWDER: You say they are recognised White Ribbon schools. Is it for a period of time?

Dr Jarron: No.

MS LAWDER: Because teachers and principals can change.

Dr Jarron: Yes, that is right. Some schools have done it more than once; when they have had staff changes, they have sent new staff through the program. But that is also something that we look at. We are looking at ways to express the impact that a teacher who has done the program at this school can have at their next school. That is one of the strengths of the professional development approach.

MS LAWDER: So it is face-to-face delivery.

Dr Jarron: A combination. There are workshops where teachers and principals will get together, and this is really very productive, because they feel very supported. They might be the only teacher in their school that thinks this is an issue. Coming to one of our workshops means that they develop that network, but there is also a lot of online activity. There is a forum; there is an e-learning program. Teachers can share examples of what their school has done online. It is a combination.

MS LAWDER: Thanks.

MR STEEL: In relation to the ambassador program, how many ambassadors do you have here in the ACT?

Dr Jarron: We have 106 ambassadors in the ACT, which is almost 10 per cent of our total number of ambassadors.

MR STEEL: How do they engage with the community?

Dr Jarron: That is a good question. We just yesterday closed our first annual ambassador survey. One of the questions in there asks about the various activities they have been undertaking in their community. I can share those results with you once we have analysed that data. But, generally speaking, there are any number of ways.

The real emphasis in the ambassador program is that not everyone is a high-profile celebrity. The majority of ambassadors are not. It is about what you can do as a man who owns the newsagent or as a principal in your school. It is really focusing on their spheres of influence. Men give expression to this in many different ways. The most recent event in Canberra was actually focused around a hairdresser, Franco of Canberra.

THE CHAIR: I was there.

Dr Jarron: There you go. This was something that our Canberra committee was heavily involved in. The Canberra committee is made up of men. Hairdressers are very likely to receive disclosures of domestic and family violence, so this was about how they support women.

MS CODY: Yes, we are.

Dr Jarron: There you go.

MS CODY: I am a hairdresser.

Dr Jarron: So you would know. So it is how we support them to respond to those disclosures, which they might absolutely be unprepared for. You would know a lot more about this than me. There was an event around that. But then there are other events—for example, the walk that you have around the lake for White Ribbon Day, and all different things. I am happy to give you greater insight into what is happening here once we have had a look at that survey.

THE CHAIR: From all reports, the Franco of Canberra fundraiser went very well.

Dr Jarron: Yes; that is what I heard too.

THE CHAIR: It was a good atmosphere. They were all in good spirits. Thank you for that.

Dr Jarron: I am glad to hear it. Interestingly, when I was putting together the information for today, I learned that the White Ribbon Canberra committee is one of our longest active White Ribbon committees.

MS CODY: We have a member of the Legislative Assembly that has been an ambassador probably since about 2004 or 2005, I think, Minister Gentleman.

Dr Jarron: That was when it started. It has changed a lot since then. The initial emphasis on volume is a thing of the past now. We are looking at building the quality of ambassadors in terms of really making sure that they are active agents of social change. That has meant that the numbers have dropped dramatically. We are now at just over 1,070. We just closed this week an invitation to become an ambassador, so the numbers will increase a bit on that. But there is now an e-learning component and ongoing engagement with White Ribbon requirements that we have around that. It is becoming a lot more structured and different from what it was in the past.

MS CODY: I was at the presentation of the last ambassador that joined here from the ACT. He was one of our firefighters.

Dr Jarron: Great.

THE CHAIR: On page 3 of your submission, and you also refer to it in your briefing pack, you mention the social impact measurement framework. I know that it is still in the adolescent stage and you are expecting results mid this year.

Dr Jarron: Yes.

THE CHAIR: But I am just wondering whether you can give us a bit more insight into that. For example, you have added one of the examples saying that the survey data indicates that White Ribbon supporters have significantly higher support for gender equality than the general population. I am just wondering whether there are any other insights at this stage that you would like to share with the committee.

Dr Jarron: Yes, absolutely. The information in there is brief because most people are not really interested in this kind of thing, unfortunately. It is something that I am very passionate about. I have been working on this in White Ribbon since 2014, when I first joined. We now have an impact measurement framework we use, the results-based accountability model. This is really looking at a few headline measures of how we understand the success of our programs. Each of the programs has a program logic, and many of our activities that are not programs have program logics as well, just so that we understand what it is we are trying to achieve and then can identify the indicators that we need to be measuring to work out whether or not we are being successful.

The ambassador program is the furthest along the process. The survey that I mentioned is one of the tools we are using to collect data against the impact measurement framework. The changes that we are looking for there are around increases in knowledge, discussions with other men around masculinities and gender supportive attitudes. The example given in there is something that we have really tried to do: to link the questions that we are asking and the data that we are collecting to national datasets. That one links to the national community attitude survey, and that is a really strong reference point for us. There are issues with comparing our dataset to the national community attitude survey. We are working with groups of people who are probably already part of the way there: they are interested in the issue, so they are likely to have different attitudes to someone that you ask off the street.

But in terms of what we can achieve with the resources that we have got, this is the approach that we have taken. We certainly have that finding. Also, once we have the analysis of the ambassadors, we will have a lot of insight into awareness of the prevalence of men's violence against women and also different types of abuse. We have changed the way we are asking the questions so that we can reflect those results back to what is happening at the national level.

The ambassador program is definitely the furthest along. That is our pilot, in a sense. Our advocates program will be the next one we start to use that framework against. This is something that the whole organisation will eventually be involved in. Is that enough information?

THE CHAIR: Yes. I understand that it is still in its adolescent stages, but I look forward to the results when they are released.

Dr Jarron: Me too. It has taken a while to get here. When I started at White Ribbon, it was my job, alongside grant applications, so you can imagine what the priority was there, given that we are a not-for-profit. But over the years it has really started to take shape. Something that I think is really important is the cultural change that an organisation requires to get to this point. In terms of what you are hoping to achieve with outcomes, that will be a big issue. I do not know how much you have considered it, but I would really draw attention to that.

As well as working for White Ribbon, I have been involved with Social Impact Measurement Network Australia for many years now, and this is the constant barrier that organisations are facing in implementing outcomes frameworks. Whether that comes from staff, service staff, or whether that comes from the CEO, it is a massive issue.

I noted that in many of the submissions they talk about the need for longitudinal data. This is absolutely vital as well, but it is just a massive undertaking for most not-for-profits. It is something that we are interested in for breaking the silence in particular. The evaluators are going to look into the feasibility of us doing this, but we will wait and see what they say. My gut feel is that it will be very difficult to do without strong research collaborations.

THE CHAIR: Thank you. I will now draw this session to a close. When available, a proof transcript will be forwarded to you to provide an opportunity to check the transcript and suggest any corrections. I think there were a few times when you undertook to provide some more information.

Dr Jarron: Yes.

THE CHAIR: Thank you for the updated briefing pack, but there were some others, I think. If that is the case, even though we do not set specific deadlines for them, it would be appreciated if you can get that to us within two weeks. On behalf of the committee, I would like to thank you for appearing today on behalf of White Ribbon Australia.

Dr Jarron: Thank you very much, and all the best with the inquiry.

HELYAR, MS SUSAN, Director, ACT Council of Social Service Inc
MOLONEY, MS ELIZA, Policy Officer, ACT Council of Social Service Inc

THE CHAIR: On behalf of the committee, thank you for appearing today and for your written submission. I remind witnesses of the protections and obligations afforded by parliamentary privilege and draw your attention to the pink privilege statement before you on the table. I ask you to confirm for the record that you understand the privilege implications of the statement?

Ms Helyar: Yes.

THE CHAIR: I also remind witnesses that the proceedings are being recorded by Hansard for transcription purposes and are being webstreamed and broadcast live. Before we proceed to questions from the committee, would you like to make an opening statement?

Ms Helyar: I will make an opening statement, and I acknowledge that I am making this statement on Ngunnawal land and pay respect to the elders past and present. I thank the committee for the opportunity to provide some more information and to answer any questions about our submission. As the peak body for community organisations and people experiencing disadvantage in the ACT, we have been keenly engaged in the government's policy approaches and responses to domestic and family violence. In 2013 and 2014 we advocated against cuts to homelessness services that were disadvantaged services that supported women and children leaving violence, and we argued for the retention of resources to support trauma recovery for children and young people exposed to violence, as well as their mothers. We worked with the Women's Services Network on the gaps in the ACT women's plan and we have seen a lot of progress both in terms of the women's plan and in responses to domestic violence.

I want to draw your attention to some of the things we raised back then which are relevant to the committee's considerations now. When we talked about the cuts to homelessness services that were based on setting up a standard fee per place in a homelessness service, we said that would reduce capacity and services that are gender specific, including sexual assault and domestic violence services. We were concerned that reductions in these services would impact on police and other emergency responders, such as ambulance, hospital and mental health crisis services, and that it would also reduce support to attend court and parenting access visits. I think we have seen some of that pan out.

We also know that support for people who have experienced family violence was at risk because of the funding cuts. For example, an allocation of just one family support worker per funding agreement compromises the capacity of services to allocate resources to family support. The current funding assumptions had an arrangement whereby caring for 100 young children and young people in the service was not taken into account compared to caring for 10, so that was a problem. We found that the domestic violence and sexual assault counselling advocacy community, education and crisis intervention services who do not provide services for people who are homeless are locked out of the considerations. And we made comment in our submission about

the need to split funding arrangements between domestic violence and homelessness services. Now they are all considered together, and we think that has some risks. We think that will divert resources from prevention, early intervention and recovery services.

Our advice is informed by the many members of ACTCOSS who work with families and women who have experienced violence. These services allow us to directly communicate around the issues across domestic and family violence, from immediate crisis response to finance and housing support and counselling services.

By far the most common and greatest barriers to supporting victims and survivors of domestic and family violence are funding challenges. As noted in our submission, there is a lack of funding for early intervention. There is a lack of funding for assistance beyond the crisis stage, and there is an unclear distinction between specialist homelessness services and domestic and family violence services.

These issues have become well understood in the public debate because of the positive groundwork that has been undertaken in the past few years. Following the devastating year for domestic violence in the ACT in 2015, the women's sector has successfully highlighted the importance of responding differently and more effectively to preventing, intervening and recovering from violence. We have been pleased to see that the government has listened.

The ACT government's safer families package and, in particular, the family safety hub are welcome initiatives. However, we continue to hear from front-line services that there are gaps in funding that leave them unable to meet the demand for assistance. In particular, what is needed now is greater recognition from a funding perspective that money should also be spent on support at times of crisis. For example, the Domestic Violence Crisis Service has been public about the fact that the demand for domestic violence services has not reduced to below 2015 levels. It is unsafe to encourage people to speak up and seek help about domestic violence without adequately funding the services that can respond.

Community expectations about early intervention and prevention services have also increased. Reducing vulnerability for at-risk and disadvantaged population groups in the ACT; raising awareness of pre-physical violence warning signs, such as economic abuse, other controlling and/or coercive behaviours; and instituting compulsory respectful relationships education with minimum standards in every school in the ACT is some of the work that should be prioritised for more resourcing.

As well as funding for early intervention, services are also required for assistance beyond the point of crisis. Front-line services have tremendous experience in delivering trauma informed-support, and ensuring they are resourced and supported to do so is integral to improving the health and wellbeing of people affected by violence. But services must be able to respond outside of just refuges and homelessness services and crisis services. At the moment, people have told ACTCOSS that they are having funding for women survivors, not for their children and dependants who are not recognised as clients within the system but who nevertheless require support.

Finally, domestic and family violence services within a housing and homelessness

model are not adequately meeting the needs of survivors. Front-line workers have described the difficulty of supporting women who may not be ready to leave home but who want temporary respite. After discussion with some women's services, we are urging the government to conduct operational research and policy planning into the costs and benefits of long-term specialist funding for domestic and family violence services outside of the housing and homelessness funding model. This is one of the many issues that can arise due to violence, but it is not necessarily the only thing. There are significant risks for people who feel they have to become homeless before they can access support, which can leave them exposed to violence and compound their trauma. But it also acts as a barrier to people who are homeless who are not exposed to violence feeling like they cannot access those services because they are needed by other people.

We hope the committee will work with the women's services to address the policy gaps identified in this inquiry. We think the ACT has made significant progress since domestic and family violence entered the forefront of the policy agenda in 2015, and it is now time to address the need for greater funding and support beyond crisis, from early intervention to post-crisis recovery.

Ms Moloney: One of the key things we recommended in our submission was the full implementation of the recommendations outlined in the evaluation of the sexual assault reform program. We have those at hand, as well as the June 2013 submission that ACTCOSS made regarding letters of offer to non-government providers of housing and homelessness support services. We hope that will contribute to our recommendation regarding separate funding pools for domestic and family violence services and housing and homelessness services.

MS LAWDER: Ms Helyar, you talked about some people staying in violent relationships and that they do not access homelessness services until they are in crisis. What are their options? We often hear from people that they cannot access support until they are in crisis. What would you recommend that people do in that situation?

Ms Helyar: One of the things that has been recommended as part of the family safety hub consultations is for people to have access to what is called respite, a couple of days out of home. It is not leaving home permanently, not settling into a refuge for the long-term intention of transitioning out of the house, but just to have some time to break the cycle of violence or to respond to the immediate risk factors and to be able to go home after that. That sort of short-term respite intervention has been something that women have said would make a difference for them.

MS LAWDER: But it is not currently available?

Ms Helyar: It is not currently available, and partly it is because there is such high demand for the housing services. It is hard to move out of housing services once you have settled because there is nowhere that you can afford to rent.

MS LAWDER: Which brings us back to my first question—people say that when they want to leave there appears to be nowhere for them to go unless they go to a crisis service, and then often there is no, if you like, exit back to a stable housing environment.

Ms Helyar: That is right.

MS LAWDER: Is it only funding that will fix that?

Ms Helyar: Some of it is funding, but some of it is that we just need to fix this terrible housing market we have got in this city. People may be able to move out and be relatively independent in that transition out of a violent relationship, but not if they cannot afford to find another place to live.

MR STEEL: My question is in relation to your recommendation on respectful relationships in the sorts of programs being delivered in school settings. I was wondering whether you support the whole-of-school approach to delivering respectful relationships.

Ms Helyar: What we support is specialist experts delivering that content. We think that is vital. Certainly, a whole-of-school approach to thinking about building people's knowledge and skills around respectful relationships is essential. It is beyond just going to a seminar and then you are all good to go. It does need a broader whole-of-school engagement, but we do expect that there would be specialists who are expert in doing that work, rather than expecting it to be done as an add-on to existing teaching responsibilities.

MR STEEL: Do you have any visibility about the extent to which respectful relationships programs are being delivered in ACT schools?

Ms Moloney: At the moment we hear that it is quite difficult to get any sort of minimum standard respectful relationships education in the ACT, in part due to school autonomy. The YWCA of Canberra did a sort of audit of respectful relationships education, I believe a few years ago. You might be familiar with it. What they found was that a lot of schools were actually simply offering education that was a very, very watered down version of the sort of things that the women's sector is recommending. It was mostly covering very biological sort of sex education, rather than actually about respectful relationships or societal things. That was very concerning to us, because if it is not happening at school and not at home, it does bring up the possibility that these children just are not receiving the education at all.

On the theme of respectful relationships education, we have also been talking to sources such as SHFPACT, Sexual Health and Family Planning ACT. They have noted that respectful relationships education, although we are recommending that it be implemented with minimum standards in school, should also be offered to people who are not just young people. Respectful sexual relationships affect everybody, of all ages. Education materials and advocacy do need to be resourced at a whole-of-community level.

MR STEEL: Was the audit undertaken by the YWCA pre the royal commission in Victoria?

Ms Moloney: I am not actually 100 per cent sure, sorry.

MR STEEL: I wonder whether things might have changed since then.

Ms Moloney: I am not sure, but from some of our discussions on the future of education program, we hear that it is something that is still difficult to implement fully across schools. To garner broader support for that education we would really like to see the government commit to resourcing experts, as Susan said. We would hate for teachers to have more pressure. That is something that people are concerned about: that teachers will have more pressure and more work to do to deliver that. That is something that we would really like to clarify and that we would hope to have the government's support in clarifying, but that is not a solution.

THE CHAIR: I return to housing. You have talked about the recommendation that there should be some specific separate funding for domestic and family violence on the one hand and housing on the other hand. Susan, you were saying earlier that obviously we need to fix the housing crisis, for want of another word, that we have. Do you have any advice for the committee on some of the different sorts of models that have been floated—for example, Common Ground being one—for affordable housing? Do you have some more advice for the committee that you can share with us about potential other options that may be available that we need to look at?

Ms Helyar: It is probably best if we send in our submissions on housing as content for that. Certainly, what we have talked about primarily is affordable rental, and having affordable rentals that are long-term affordable rentals. We have argued that a substantial investment in community housing is what is needed. We have put the figure at \$100 million as the kind of substantial investment that is needed. We would argue that primarily that should be spent on building the stock of affordable rentals outside of the public housing sector.

THE CHAIR: These would be primarily for women to access that might not necessarily fit the criteria for public housing?

Ms Helyar: Absolutely, and not just women: people overall who do not fit the criteria for public housing. We know most people are on long waiting lists unless they meet the high priority status for public housing. So there will be a lot of people who will never reach the right threshold. Financially they may not either, but they cannot afford private rentals. We think that the most important thing is to invest in the community housing sector that has a track record and a capability of building affordable for-rent housing and making sure that is available long term.

MS CODY: I also wanted to talk about something that you raised in your submission. You note that an inquiry into domestic and family violence is very important, but we also need to note that further work needs to be done on sexual violence within the ACT. I think, Ms Moloney, you raised a moment ago the SHFPACT stuff about respectful sexual relationships. I note you have also talked about the university report. Can either of you expand on that statement a little more?

Ms Helyar: Yes. What has come through to us in all of the conversations has been that sexual violence is part of domestic and family violence, but it has particular needs in terms of response and recovery. Also, the focus on domestic and family violence has potentially put at risk a focus on implementing the recommendations around

reducing sexual assault and responding better to sexual assault that occurs outside of the context of family and domestic violence. I might get Eliza to talk a bit more about that.

Ms Moloney: Yes. As previously mentioned, one of our key recommendations is implementing the recommendations that were made in the evaluation of the sexual assault reform program. SHFPACT was also mentioned and the need for wider whole-of-community sexual education. An example recently that you may have heard of is that the Australian National University have implemented sort of a compulsory kind of consent education, which has been welcomed but also critiqued as a very simple solution that is not fully addressing the issue, because that education is best delivered in person.

There are also some concerns about the idea that that sort of education should be a one-off, that you can pass or fail it, which potentially misses the cohort of people who understand that sexual violence is against the law but who are manipulative abusers and who would be conducting that anyway. That is where that pass/fail sort of consent education really misses the point, why it needs to be delivered in person and why sexual violence needs to be talked about more broadly.

As we mentioned in our report, and Susan mentioned in her opening statement, we have had great success getting domestic and family violence on the table since it really entered the forefront of conversation in 2015. I think this bodes well for the possibility that we could hopefully do the same with sexual violence.

MS CODY: Would you see conversations around forced marriage and slavery also included in those sorts of conversations?

Ms Moloney: That is not something that we have been very engaged with, but we would be happy to talk to women's services about it.

Ms Helyar: I think the issue is that sexual violence is part of all of those arrangements. We probably need to have as deep and broad a conversation about the causes and consequences of sexual violence as we have had on the causes and consequences of domestic and family violence.

I think that what is important is you cannot subsume one within the other. I suppose that is the point we were trying to make in this statement. It is absolutely vital to have domestic and family violence at the front of people's attention as a significant issue for policy and program reform but not to ignore the need to do the same thing around sexual violence where there is an intersection but it is not a complete overlap.

MS LAWDER: My next question is about funding arrangements for services, especially crisis services, women's services, and perhaps the housing sector as well. Has there been a recent change in the length of the term of funding agreements? Does that address the funding uncertainty that is the experience in the sector—

Ms Helyar: Yes.

MS LAWDER: or is there still room for more improvement?

Ms Helyar: Certainly the agreement of the federal government to return certainty around the commonwealth housing agreement was very welcome. That has made a difference. But I think the issue more broadly is the adequacy of funding and the uncertainty about the priorities to which that funding will be held to account.

I think, more importantly, splitting housing and domestic and family violence is important because we need not to have housing funding to be considered as the pool through which you can respond better to domestic family violence and then you squeeze out the other client groups that need access to housing assistance. I think that is the challenge. The length of funding agreements has improved, and that has been partly as a result of the work at the commonwealth level, but it is not enough to ensure that we have adequacy of resources and the right split of resources going forward.

MS LAWDER: Are you and your member organisations attempting to work with government about that allocation?

Ms Helyar: Yes, certainly. We have spoken about it in our public statements and in work through things like Joint Pathways and the Women’s Services Network.

MS LAWDER: Are you feeling confident?

Ms Helyar: We just continue to work, and suddenly there has been a recognition of the need to think about things more broadly and to acknowledge the unmet demand in both areas that needs a response.

MS LAWDER: In your submission you talk about funding and support gaps. Are there support gaps irrespective of the funding? Are there just some things that people do not want to or are unable to deliver even if they have the funding to deliver?

Ms Helyar: In terms of the capability gap?

MS LAWDER: Yes, or is it just the funding that limits?

Ms Helyar: I think there is a mixture—things like access to legal assistance, particularly for civil law matters, separate from criminal law matters, and access to financial counselling and assistance. Legal assistance for financial counselling is way oversubscribed. But also, would we have the workforce that could respond? That is an issue. Certainly, building both capability and resourcing is important, doing both at the same time.

The other area where there is a real gap is around trauma recovery, particularly for children, young people, and for people who have been exposed to violence, and whether we have got the right workforce for that. An adequate workforce for that is something that the government has looked at. It has funded a more trauma-informed practice in the housing sector, so that is good. Building that capability more broadly will help to respond, but still there needs to be the time.

MS LAWDER: Is there any gap in the disability space—for example, physical accessibility of domestic violence services?

Ms Helyar: Absolutely, yes. Thank you for prompting us on that, because that has absolutely been a critical factor. There has been some work done on that, but certainly Women with Disabilities ACT and the Women's Centre for Health Matters have both spoken about that. They have found ongoing problems with accessibility of facilities, quite separate from whether people are disability competent in their practice. The basic accessibility facilities continue to be a barrier.

Ms Moloney: I would also add that the Women's Centre for Health Matters took part in a great campaign last year for greater understanding and support for abusive domestic and family violence relationships outside of a heterosexual relationship framework for the LGBTI community. There is not a lot of specialised support. That is something that hopefully we can also talk about more.

MR STEEL: In the last public hearings we were talking about the difficulty of engaging with sectors outside of family violence services, such as health, education et cetera—engaging in and responding to family violence within their own practice. You represent a whole range of different community services that directly deal with family violence. There are those that may not deal with it as often but may still come across clients who are affected, who are victims or perpetrators. I wondered how you as a peak body work with your community services in dealing with family violence client referrals and making them aware about what to do when they come across those instances of family violence experiences. Also, how do you see the family safety hub approach supporting services that you represent?

Ms Helyar: I think there is a real need for capacity building of the general workforce. We were part of the research that led to the resourcing of trauma-informed practice in homelessness services because we figured that was an issue in terms of the capability and skill set of people for whom responding to violence is not their primary responsibility. However, they have an enormous number of people they come in contact with who would have a history of violence in their lives. There are issues more broadly across the sector, as you mentioned, around people understanding how we work with perpetrators in a way that promotes responsibility and promotes the safety of the people that they will continue to have contact with.

Our learning and development program is not focused on direct practice skills, but certainly we have supported advocacy for funding to get that kind of direct practice skill capability built, yes. I think the family safety hub could certainly have a role in capacity building and making sure that as people build practice knowledge and people share good practice there is a way of making sure that that is made available more broadly, beyond the direct sector that is involved in responding to violence.

Certainly, we should be building the capability of people to recognise issues and to know what their scope of practice is and how to bring in others when they need to. We have talked about that in the future of education submissions that we have made around making schools places that experts can come in and out of, rather than expecting school-based staff to be able to do everything. Expertise around responding to the needs of students who are exposed to violence would be one of those areas that we think it is valuable for there to be additional expertise coming into the school.

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THE CHAIR: Given the time, I will draw the proceedings to a close. When available, a proof transcript will be forwarded to you both to provide an opportunity to check the transcript and suggest any corrections. I think you undertook to provide some further information on one occasion. I cannot remember now, but if you did—

Ms Helyar: Yes.

THE CHAIR: We do not set a specific time frame, but within two weeks would be good for the committee. Finally, on behalf of the committee I would like to thank you for appearing today. It is much appreciated.

BELL, MS CODIE, Restorative ANU
SURYA, MS ANAHITA, Restorative ANU
PERKOV, MS LAURA, Restorative ANU

THE CHAIR: On behalf of the committee, thank you for making the time to appear today. I note that Restorative ANU does not have a written submission and that your submission will be oral. I remind witnesses of the protections and obligations afforded by parliamentary privilege and draw your attention to the privilege statement before you on the table. Could you please confirm for the record that you understand the privilege implications of the statement?

Ms Bell: Yes, I do understand.

Ms Surya: I do.

Ms Perkov: Yes, I do.

THE CHAIR: I also remind witnesses that the proceedings are being recorded by Hansard for transcription purposes and are being webstreamed and broadcast live. I understand you will make an oral submission as an opening statement before we open for questions to the committee.

Ms Bell: Thank you so much for the opportunity to offer an oral statement. We have been really interested in what the inquiry has been focused on and we are really glad to have the opportunity to speak about what we think and our experiences. To introduce Restorative ANU, we are an informal collection of staff, students, alumni and academics who exist around the ANU.

Many of us became interested in restorative responses and ended up coming together as this group after seeing the way the Australian National University administration treats survivors of sexual violence specifically, sexual assault and harassment. We found that overwhelmingly the administration was dismissive, belittling, obfuscatory and, more than anything, focused on the reputation of the university before it focused on the wellbeing of the students. We found that that was an inadequate response to the violence that was happening. When I talk about responses to violence, that is both support for the victims and also directly addressing the perpetrators of that violence, who are often other ANU community members.

We basically represent the interests of victims of sexual assault, harassment and other interpersonal violence as it occurs at ANU. We are also advocates of a restorative paradigm or a restorative approach to that, and I will get to what that means exactly later. We advise the university by sitting on the respectful relationships student working group, which speaks to the steering committee. We provide advice to the ANU Students' Association, and we work quite closely specifically with the women's department and the women's officer of the students' association. We are connected to restorative practitioners in the ACT and in a variety of service settings through the Canberra Restorative Communities Network. We work with the restorative justice unit that is a part of JACS, and we are also involved with the School of Regulation and Global Governance at ANU, also known as RegNet.

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With regard to the terms of reference of this inquiry, talking about policy responses the ACT could adopt to address our concerns specifically, I am going to speak first to the restorative part of Restorative ANU and then I will speak to the ANU part of Restorative ANU.

Restorative justice—which I am sure some of you are familiar with, since Canberra and the ACT are the leading jurisdiction when it comes to practising this kind of approach, both to criminal justice and to human services—and restorative responses are victim-centred ways of responding to harm after it has occurred. It is often in the context of criminal justice. I am going to read a bit from the restorative justice unit’s description of it, but where they say “offence” I am just going to say “harm” because at least in our context when we are dealing with sexual violence, a lot of those situations do not meet the threshold for a criminal conviction, but that does not mean they are not hurtful:

Restorative justice is a structured process that allows the exchange of information between the people most affected by an offence—the victim, their family and friends and the offender and their family and friends. This process gives people the opportunity to talk about:

- What happened?
- How were people affected?
- What needs to be done to make things better?

It is a process that for victims allows them to gain an understanding of the circumstances of the offence, have a voice in describing the impact of the offence, and identify what they need to make things better. The process gives a person who has offended the opportunity to take responsibility, gain insight into the impact of their actions, and repair the harm to the victim by way of an agreement.

We think that is really relevant in a university context. Overwhelmingly, the women that we speak to—and we get a lot of disclosures and a lot of women come to us for advice because of our public-facing persona—do not want to go to the police. As I said before, a lot of their situations would not meet the threshold for a criminal prosecution, but that does mean they were not hurt.

The questions a restorative process asks are: “What happened, how were you affected, and what do we need to do now?” A police response would ask: “What happened and does it meet the threshold for prosecution?” We find that a university response is: “Why are you talking to me, what do I need to do to make you go away, and what do I need to do to make sure you do not talk to the media about this?” We would really like to flip that response from the university. We would really love it if the university started asking some more restorative questions when something goes wrong.

Basically, what we want are community responses to violence. We believe a restorative paradigm is the best community response because it is victim-centred, it includes bystanders and other community members, and it focuses on community healing and repair. When sexual assault or sexual harassment happens in a university community, it really tears people apart. It ruins friendships. People end up not talking to each other possibly ever again. Restorative practice offers us an opportunity to put

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that community back together, to talk about what happened and to move on.

Informal advocates and the support from RegNet at the ANU and the restorative justice unit has been really vital in getting this off the ground at the university. We know that the ACT is doing a lot of stuff with restorative cities; they are working on restorative approaches to housing, child protection and out of home care, and we would love to see that expanded even further.

As to the restorative justice unit, the kinds of situations that we talk about do not really fit their mandate because you can only go to the unit once a criminal proceeding has started. But they have still very generously provided a lot of time and energy to us as Restorative ANU and through organising the Canberra Restorative Communities Network. We think they are absolutely a super vital response to responding to sexual and intimate partner violence and family and domestic violence in the ACT. So that is the restorative part.

As to the ANU part, I have a few things I would like to say. Speaking as a representative of students, there is a bit of a danger when these kinds of things are framed as family and domestic violence, almost to the exclusion of sexual violence and intimate partner violence. I know the ACT Council of Social Service addressed this. It was a bit disappointing in the submissions, in that I think they were the only ones who mentioned the Human Rights Commission survey into violence at university.

Family and domestic violence and intimate partner and sexual violence are much more similar than they are different. We know that most sexual violence occurs in the context of either an intimate relationship or a relationship, and drawing an artificial distinction between them speaks more about the circumstances of the woman or person who is experiencing it than the nature of the offence.

I know that in New Zealand they see it as a Venn diagram—there is family and domestic violence and there is sexual violence over here, and as they cross over there is family violence that involves sexual violence and there is sexual violence that involves family violence and it is where that diagram sits. I think they probably overlap more than they do not. I know a lot of people I talk to would not describe what they have experienced as domestic violence because they do not live with their boyfriend, but it does not mean that it is acceptable; it does not mean that it is not violence. I think we can sometimes lose that when we frame it as domestic and family violence.

While not all young women in the ACT go to university, we know that for a significant group the university community is where they experience that violence. So we really strongly believe the ACT government has an opportunity to ensure that universities are responding adequately to the violence that is occurring. There are a lot of different examples of this happening elsewhere, not really elsewhere in Australia but in Canada. The Ontario provincial government has legislation that mandates that every tertiary institution has a sexual violence response policy. There are a lot of obligations on those institutions to develop that policy in consultation with students and to train their staff in it. I know that the Tertiary Education Quality and Standards Agency, the regulatory body for tertiary bodies in Australia, has started making

moves towards defining what universities' responsibilities are towards the safety and wellbeing of their students. We as advocates would really appreciate government responses to the violence that is occurring on our campuses.

The ANU's response has looked really good in the papers, but when it comes to stuff that is actually happening on the ground, we have not had much movement at all. The consent matters module has been rolled out and there has been a small change to the discipline rule that now means that sexual assault is considered misconduct—it was not considered misconduct before and now it is—but that is really all that has happened. As advocates, our main power is in bringing media attention to where things go wrong, and we can only last so long against the very powerful, professional communications outfit that the university has. So we think government and policy responses would be really appropriate and useful. That is our statement.

THE CHAIR: Thank you for your oral submission.

MR STEEL: Thank you for coming along and for presenting at our public hearing. You alluded to restorative justice being practised at ANU.

Ms Bell: Yes.

MR STEEL: To what extent is it being practised, and can you give us a sense about how that is working?

Ms Bell: It is not being practised at ANU. We are advocating for its practice, but it has not really—

MS LAWDER: Caught on?

Ms Bell: Not with the right people. We have a really fantastic academic school at the ANU that is world leading in restorative justice. We have academics who go all over the world to help repair places after civil conflicts. But there has not been any movement towards people using it with students at the ANU.

MR STEEL: How do you envisage that sort of model working outside of the justice system?

Ms Bell: It is a good question. Restorative justice looks different everywhere that it is used. Because it is victim-centred, there is that opportunity for it to be sort of organic, dynamic, responding to the needs of victims. There are two paths that it could take. It could be a sort of conference process between a victim of some form of sexual violence and the person who perpetrated it against them. We know that that has worked really well at some universities for sexual harassment cases like hateful stuff posted on Facebook. That has worked really well in some instances. That is the first part.

There is also an opportunity for an institutional response. For many people who experience sexual violence, it is what the university says afterwards that can be just as hurtful as the original incident. We envisage an institutional restorative justice process where the university sits down with people who have been harmed. For example, key

leaders at the university sit down with people who have been harmed, listen to their story and meaningfully respond to it.

MR STEEL: Do you see a role for the university to facilitate that restorative justice process where the victim is engaging with the perpetrator?

Ms Bell: It has been done before. It has been done specifically at Dalhousie University in Canada. Some academics at ANU actually sat on the advisory body that helped set up that process. I think restorative practice is a community response, and the ANU is the community that we live in, so it makes sense for the community to facilitate healing.

MR STEEL: What role do you see for the colleges at the ANU?

Ms Bell: The residential colleges?

MR STEEL: Yes, residential colleges and halls, where I imagine a lot of this violence is occurring, as well as on campus more generally.

Ms Bell: I think it would be so valuable for it to happen in halls and colleges. I am an alumna of a hall myself. I lived in residence for three years. Even in situations where the victim does not sit down with the perpetrator but sits down with perhaps the perpetrator's friends and says, "This is what happened to me; this is how your silence made it worse. Let's talk about it. What can we do differently going forward?" I would say that there is a lot of value in that process, both for the victim and for the people who then have to listen to it.

MS LAWDER: With a facilitator?

Ms Bell: Absolutely. Always with a facilitator—and not just anyone but a restorative practitioner, a restorative practice facilitator. Not all situations are appropriate for restorative practice; that is not what we are suggesting at all. We just think that restorative practice is a better starting point than the sort of paradigm we have at the moment, which is, "Why are you talking to me? Please go away. And, by the way, don't tell the media I said any of this." We think it is a better way to start. Often when a restorative practitioner will start working with a situation, they will interview the person who has been harmed and the person who has been identified as the one harming. They will interview them separately beforehand to ascertain whether they think that this will be appropriate. Often a restorative process needs to involve the person who harmed admitting that they did something wrong. They might not admit to everything, but if they say, "I maybe did something like that, but it is not as bad as what she is saying," the practitioner can work with them to figure out if it is appropriate or not.

MS LAWDER: A recent report into sexual assault at universities resulted in a particularly high incidence from ANU. Why do you think that is?

Ms Bell: Good question. I think it is because there is a high proportion of people living in residence at ANU. That is my impression. I do not think that sexual violence happens more at university than it happens anywhere else. I think maybe there are

more advocates at universities. There are more feminists at universities who will stand up and say, “Actually that is inappropriate and I am going to name it for what it is.” There were a lot of flaws with the methodology of the survey, so I am not really sure if it is meaningful to say how many more assaults happened at one university than another. I think it is probably skewed because there are so many residents.

MS LAWDER: And you said you felt it was probably similar to the rest of the community.

Ms Bell: The wider community, yes.

MS LAWDER: Have you looked at any research to back that up?

Ms Bell: Nothing that I have on me, but ANROWS, Australia’s National Research Organisation for Women’s Safety, do research on the prevalence in the wider community, and I think it is similar. At the same time, it is stuff that is really hard to measure. For example, the AHRC survey just asked people if they had experienced sexual assault. It just said, “Have you been sexually assaulted?” There are a lot of people who have experienced sexual assault but would not necessarily identify it as such. You get much more accurate data when you ask behavioural questions like “Has anyone ever tried to have sex with you while you were sleeping?” or “Has anyone ever tried to have sex with you and kept going on after you said no?” You get much more accurate data that way. They chose not to frame the questions that way for the survey. I am not entirely sure why.

Ms Surya: I would like to add something in terms of the different levels of prevalence and discussing whether the prevalence of violence is different in the university context and the wider community context. I think we need to be framing the conversation around bringing visibility to violence in university campuses. We know that it exists. The question is not necessarily about whether the levels and prevalence of violence are different but about the frameworks through which we are viewing and understanding that violence.

Going back to what Codie was saying earlier, currently a lot of our discussions, especially at the policy level, are framed around family and domestic violence. Because of that language and because of that framework, a lot of violence that is happening in the university context is being silenced. It is about bringing visibility to it and understanding the different dynamics and the different ways in which violence happens in different contexts. We know that the research suggests that women overwhelmingly experience violence in all contexts. It is about looking at those frameworks and at how the way we talk about violence is silencing some forms of violence and giving visibility to other forms, when all forms of violence should be at the same level of visibility.

Ms Perkov: I am the ANU Students’ Association women’s officer. I think I would agree with Codie. A lot of ANU students live in residences and colleges. I think that led to a higher prevalence of assaults and harassment incidents in the survey. The work of the women’s officer in 2015, 2016 and 2017, in the lead-up and into the survey, also meant that a lot more ANU students filled out the survey, and they knew what was happening. I think that was definitely a contributing factor. There was a lot

of visibility about filling out the survey thanks to the women's officer in that year, Linnea Burdon-Smith. I think that was a factor definitely.

Ms Bell: I would like to go to another thing on the on-campus residences. The way that the survey worked was to ask, "Have you been sexually assaulted?" There was no behavioural question; it was just "Have you been sexually assaulted?" Then it asked, "Did it happen on campus or off campus?" There was no guidance around saying, "He raped me after a party after a student production, but it was at a share house in O'Connor. Is that on campus or off campus? I do not know. I think it is off campus." The survey would just finish. It would say, "Thank you very much for your response." There are more residences at university, so it is a bit clearer if it is happening on or off campus if you live on campus. I think that the way that the survey was written lost a lot of that stuff.

MS LAWDER: Is it possible, as you were saying, Ms Perkov, that, a bit like we have talked about the reportage of domestic and family violence in the past few years, at least people coming forward, talking about it and reporting it is a positive step towards achieving some kind of better result in the future, rather than it being tucked away and not talked about?

Ms Bell: Yes. Knowledge is power. Absolutely. And being able to name it for what it is is powerful. It is the first step. Targeting those kinds of responses at young women helps them. If they know that it is happening when they are 20, when it happens again when they are 25 they might have some more tools in their emotional personal toolbox to deal with it again, to say, "Actually, that behaviour is inappropriate."

THE CHAIR: I want to ask one final question, but before I do, just out of an abundance of caution, I want to say that I used to work at the ANU. I have just taken quick advice from the secretariat. We do not think there is any conflict, but I just wanted to put that on the record. I certainly was not in administration and I was not in the restorative place, but I just mention that out of an abundance of caution.

Ms Bell: Yes.

THE CHAIR: The question I have is this. We are an ACT Legislative Assembly committee looking into this. What would you want us to be able to take forward to ACT government to say, "Can you work with ANU or any other tertiary institution on addressing this?" What would be your go-to message for government?

Ms Bell: That is a great question.

THE CHAIR: I have put you on the spot. Sorry.

Ms Bell: No. There are so many things I want you to say. It is really important to address the perpetrators of sexual violence. They sometimes get lost in the conversations that we have. I know that definitely in our experience they get lost, especially before it comes to a criminal justice response. We want the spotlight to be put back onto perpetrators and holding them accountable for their wrongdoing before it gets so bad that the police get called. Part of that is expanding the ACT's restorative city program.

PROOF

THE CHAIR: Thank you for that. I will call proceedings to a close. When available, the proof transcript will be forwarded to you to provide an opportunity to check the transcript and provide any corrections. I do not think you undertook to provide any further information. On behalf of the committee, I thank you for attending and for giving evidence on behalf of Restorative ANU today.

The committee adjourned at 12.59 pm.