

Inquiry into family, domestic and sexual violence



Barnardos
Australia

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Barnardos Australia (Barnardos) thanks the House of Representatives Standing Committee on Social Policy and Legal Affairs for the opportunity to provide a submission to its Inquiry into family, domestic and sexual violence.

Background: Barnardos knowledge of this area

Barnardos is a not for profit children's social care organisation, providing family support and out-of-home care (OOHC) to approximately 15,000 children and their families in the Australian Capital Territory (ACT) and New South Wales (NSW) each year. In our family support work, we aim to reach vulnerable children at risk of separation from their families, and homelessness is a strong feature of this work. For close to 100 years, we have been working together with children, young people and families to break the cycle of disadvantage, creating safe, nurturing and stable homes, connected to family and community.

Barnardos' suite of Safety & Prevention programs includes tailored support for children and their families who are impacted by family, domestic and sexual violence. **Appendix A** provides a summary of our domestic and family violence safety and prevention work with children, young people and families.

Our approach is child-centred, multifaceted and evidence-based. Where domestic and family violence is present, we utilise the Safe & Together Model, an internationally recognised suite of tools and interventions designed to help practitioners working with vulnerable children become domestic violence informed. Three key principles guide the support we provide to children, young people and families experiencing domestic and family violence by:

- keeping the child central
- partnering with the non-offending parent, and
- working with the whole family, including men who use violence.

In our experience, it is the impact of intergenerational and recurring experiences of trauma coupled with the effects of entrenched social and economic disadvantage, which is the reason families need our services. Specifically, domestic and family violence is a crucial reason for referral for families entering our services. In 2019-20 about 19% or one in five of our referrals for children, young people and families to Barnardos Children Family Centres was for support directly related to domestic and family violence.¹

We note the very high level of vulnerability of the children and families who use our safety and prevention services. For example:

- In metropolitan Sydney, 28% of our referrals for families to homelessness programs are due to domestic violence.²

¹ MyStory Referral Analysis Report for NSW (Barnardos Agency) and ACT Together Safety and Prevention programs, 2019-2020.

² MyStory Referral Analysis Report.

- In rural NSW, domestic and family violence continues to be the number one referral reason to Barnardos homelessness services, mostly for women with children.³
- In Penrith, 90% of referrals of families to our intensive family preservation program (for families who have children at risk of significant harm and are at risk of placement in out-of-home-care) have domestic and family violence identified as one of the main reasons for referral.⁴

The way that health, housing, access to services, including legal services, and women's economic independence impact on the ability of women to escape domestic violence (*Terms of Reference d*)

The case studies in **Appendix B** demonstrate five overarching themes from our practice experience:

- The need for removing multiple barriers to create an effective safety net around families (see Case B.1 "Justine", p. 8)
- How social isolation forms a barrier to services and support (see Case B.2 "Jessica" p. 10)
- How perpetrators interfere with service access and support (see Case B.3 "Sophie" p. 11)
- The intersection between domestic violence and mental health and substance use (see Case B.4 "Melissa" p. 12)
- Lack of access to services and support for women attempting to escape domestic violence in rural and remote areas (see Case B.5 "Michelle", p. 14)

In Barnardos experience, women's ability to seek support and advice from health, housing and legal services while remaining in a domestically violent household are highly constrained. Women who are experiencing violent physical, emotional and sexual abuse feel disempowered to seek support or to find out what support is available. Even where they are able to find information about services, women and families often find they may not fit into the specific criteria for service provision.

For example, Barnardos Auburn Children Family Centre intensive family preservation program worked with a mother, her husband and three teenage boys aged between 9-16 years of age. There was significant domestic abuse occurring in the household with the father physically abusing both the 16 year-old son and mother. We note that:

- The mother was unable to seek housing support in refuge accommodation due to her sons being too old and male, as advised by housing services.
- The mother was led to believe by the father, that should she leave she would not get custody of the children as he was the father and would not be able to access financial support and would be left homeless. The mother felt disempowered and was left without any choice but to remain in the household.
- The 16 year currently we deliver this service without external funding -old son, disclosed suicidal ideations to Barnardos workers due to the violence. The young person was referred

³ MyStory Referral Analysis Report.

⁴ MyStory Referral Analysis Report.

to adolescent mental health services, who advised they were unable to assist due to the perpetrator still living in the household.

- The mother was referred to a women's domestic violence counselling service however the service was at capacity and unable to provide support. In addition, the mother was unable to leave her home at times making it difficult for referrals to be made to support services.
- The experience of this family highlights the importance of service providers being flexible in service delivery and the importance of empowering women with the correct information regarding services available, entitlements and rights.

The views and experiences of frontline services, advocacy groups and others throughout this unprecedented time (Terms of Reference j)

Barnardos notes that working with families who are experiencing family and domestic violence has many challenges. The recent COVID pandemic has added further complexities to what is already a challenging domain for frontline services who are trying to bring about change.

During the height of the COVID pandemic many family support services in NSW completely ceased home visiting and face to face contact, further isolating women and children who are experiencing domestic violence. We note that the impact of the COVID pandemic on service delivery has included:

- Domestic violence services only operating telephone service provision. This has prevented women accessing drop-in services and face-to-face supports.
- Counselling services delivered by telehealth - we are aware of women cancelling counselling with the perpetrator being in the home during scheduled calls.
- Telephone services rely on victims being able to access a phone – we know for many victims this is something that a perpetrator often restricts.
- Anecdotally in our frontline services we have seen an increase in physical violence towards children during COVID-19.

To maintain essential services to vulnerable children, young people and families, to help maintain the visibility of children who have been traumatised by family and domestic violence, and offer support to their parents/carers who were otherwise increasingly isolated, Barnardos Children Family Centres were able to continue to deliver all funded client services via service delivery adaptations which included:

- Essential service delivery via face-to-face contact including continued home visiting with social distancing (e.g. meeting on the verandah or in the garden).
- Family time via digital platforms to build strong relationships for families working towards restoration.
- Essential packs for families including food hampers and children's activities where families were struggling to visit local shops and as another means to maintain connections with families.

- Support for education to maintain children's connections with their school community, particularly in rural and remote areas where technology is often unreliable or non-existent.
- Online evidence-based parenting groups.
- IT and digital support, including access to additional data and in some cases devices to ensure that safety planning with families could be undertaken where there were identified risks of abuse.

For example, the Barnardos Family Services team on the South Coast has always been in a unique position of assisting women and children who are experiencing family and domestic violence, as the program is not specifically identified as a domestic violence service. Perpetrators rarely view workers as a threat to dismantling their power and the coercive control that they have established over their partner. Perpetrators will often allow their partners to access the service, allowing the program to engage meaningfully with survivors, to effect real change and build safety for themselves and their children.

During the pandemic, Barnardos Substance Use in Pregnancy and Parenting Service (SUPPS) workers have continued to think creatively and adapt existing service delivery models to ensure families-maintained engagement and connection to services and reduces increasing isolation. Front-line workers observed perpetrators to use the pandemic to further isolate women from family, social networks, service supports and their local community. SUPPS workers continued face to face contact throughout the pandemic and at the height of the lockdown, adapted visits to ensure social distancing was maintained by meeting with families outside or speaking to families through their front window. With the easing of restrictions, SUPPS workers are continuing to visit families in their homes with COVID safe practices in place.

From a SUPPS program perspective, the demand for family support through referral pathways increased during the COVID pandemic. SUPPS holds a waitlist of complex and high-risk referrals. We know that during pregnancy, violence often increases and that this can be an indicator of risk of mortality as a result of violence for women and children. It is therefore imperative that women and children continue to engage during this pandemic. As a service, cross-agency communication has been imperative to maintaining engagement and safety for families. During the height of this pandemic, women and children are often isolated with the perpetrator twenty-four hours a day, increasing the risk of violence, reducing disclosure opportunities, therefore communication to assess risk is extremely challenging. During any engagement, whether face to face or via phone, frontline workers are mindful that perpetrators would have more opportunity to be listening and monitoring their partners phones and conversations. Front line workers continue to liaise with agencies such as Health, Police and the NSW Department of Communities and Justice to ensure women and children remain visible and supported during the height of the pandemic.

In addition, the SUPPS program has adapted the Learn to Live Again Women's Domestic Violence program (L2LA), from a face to face to group program to a virtual online group model. L2LA has run in the Illawarra and South Coast region since 2016. The five-week virtual group program is aimed to provide women with support to maintain their emotional well-being, as well as community connection during the current pandemic. By doing so, the group aimed to reduce isolation and provide women with tools to reduce stressors which may

be impacting on their parenting. This group ran twice throughout the height of the COVID pandemic, with two separate groups of five women connected on a group phone call once a week for five weeks. In addition to the virtual group each week and following each session, each woman received a pre and post group phone call. The program was extremely successful in achieving its desired aims with 100 per cent attendance rates.

An audit of previous parliamentary reviews focused on domestic and family violence (*Terms of Reference k*)

Barnardos has observed that the present inquiry is one of many wide-ranging public inquiries and parliamentary reviews that have been conducted into domestic and family violence in Australia. We recognise that the impact of experiencing domestic violence events on children, young people and their families and the ongoing social and economic cost of domestic violence is already well understood, yet despite that knowledge, we are yet to meet the scale of that problem.

For this inquiry to be different and translate this knowledge into recommendations that will assist the most vulnerable and that will be sufficiently resourced, followed up and acted upon, we believe a fresh approach is required. This approach would acknowledge how children currently experience domestic and family violence before and after separation, seek to understand the services and support children value, and focus national attention on the resources and solutions required to meet their needs.

For that reason we welcome in particular the present inquiry taking submissions from frontline services like Barnardos that work with and advocate for children, young people and their families who are impacted by family and domestic violence and those with lived experience of domestic abuse.

To contribute empirical knowledge to that approach, Barnardos is conducting a small qualitative study focusing on the perspectives of children and of who have experienced domestic and family violence. In-depth interviewing and creative art activities will be used to collect data about support of children experiencing domestic and family violence. Interpretative phenomenological analysis will be used to analyse the interview data. It is hoped that findings from this (pilot) study will inform the scoping and development of a wider project which will encompass all of Barnardos domestic and family violence-related support services.

As part of the same project, Barnardos is also undertaking a national online quantitative survey exploring the views of adults on the long-term impact of the experience of domestic violence in their childhood. We anticipate preliminary findings from the qualitative study and national online survey will be available early next year and can share these insights with the Committee at that time if that would help inform their report.

We would welcome the opportunity to discuss any aspect of our submission. Please feel free to contact Dr Robert Urquhart, Head of Knowledge, Outcomes and Research on (02) 9218 2392 or rurquhart@barnardos.org.au.

Appendix A – Barnardos domestic and family violence safety and prevention work with children, young people and families

Auburn Children’s Family Centre (Sydney NSW)

Barnardos Auburn Children’s Family Centre provides a range of specialist family, domestic and sexual violence programs culturally and linguistically diverse communities living within its area including the Child and Adolescent Sexual Assault Counselling Program (a unique service in Western Sydney), and the Domestic Violence Support program.

Penrith Children’s Family Centre (Sydney NSW)

Barnardos Penrith Children’s Family Centre delivers two programs where for 90% of families, domestic and family violence is identified as one of the primary reasons of referral.

The Intensive Family Preservation Program is an intensive family-based service aimed at either family preservation or family restoration. Case management is for 6 to 9 months of service provision. The program is based on Homebuilders, with the primary aim family preservation or restoration to keep children at home. The client group targeted is families where high-risk child protection concerns are present, who are living in the Nepean Blue Mountains area.

The Family Supported Accommodation Program is a supported accommodation program for parents with children who are homeless and provides support for their parenting and sustaining long term accommodation. We currently deliver this service without external funding.

South Coast Children’s Family Centre (Illawarra NSW)

Barnardos South Coast Children’s Family Centre safety and prevention services support families with children in relation to domestic and family violence as needed. In the Illawarra region, the South Coast Centre delivers unique perinatal family support case management service in partnership with the Illawarra Shoalhaven Local Health District Maternity and Drug and Alcohol services, and the NSW Department of Communities and Justice. This collaborative service (the Substance Use in Pregnancy and Parenting Service or SUPPS) is targeted to pregnant women who are drug and alcohol dependent and provides a sustained home visiting case management service for up to three years.

The Centre is also committed to delivering quality family support services to the Aboriginal community. These services are staffed by Aboriginal people.

Western NSW

All Barnardos Western NSW Safety and Prevention programs take referrals where domestic and family violence is a referral reason. Barnardos provides a broad range of prevention, early intervention and intensive child, family and youth support services across Western NSW from Orange in the Central West as far west as Cobar. A high proportion of the severely socially disadvantaged populations assisted by Barnardos are Aboriginal families.

The Domestic Violence Response Program based in Mudgee provides after hours telephone support for women with or without children who have left domestic or family violence that covers all Western NSW LGAs.

Appendix B - Case Studies

All names have been changed and pseudonyms used.

The way that health, housing, access to services, including legal services, and women's economic independence impact on the ability of women to escape domestic violence

B.1 Multiple service barriers that impede creating a safety net around the family

Justine - Mother with 7 children aged under 12

Barnardos Penrith Children's Family Centre Intensive Family Preservation Program

Justine, a 39 year-old mother and Garry, a 49-year old father, and their seven children - Zoe (aged 12), Chris (aged 11), Taylor (aged 9 years), Bianca (aged 8), Ben (aged 8), Sarah (aged 5) and Michael (aged 4) - were referred to Barnardos Penrith Children's Family Centre Intensive Family Preservation Program (IFP) program for 9 months intensive casework service provision.

The family was referred after the NSW Department of Communities and Justice (DCJ) received a ROSH report whereby Sarah and Michael had sustained injuries in an incident in the home where Garry had physically assaulted and sexually assaulted Justine in front of the children. Sarah and Michael had been injured when a bookcase fell on them during this incident. Sarah had attended school the next day after the incident with bruising to her head, chest, legs and arms – no medical treatment was sought for the children or Justine. Sarah disclosed to her teacher the incident and DCJ interviewed Sarah.

DCJ moved all of the children and Justine from the family home and relocated the family 30 minutes away in temporary accommodation. Justine denied any previous violence in the home, despite disclosures from the children detailing multiple incidents over a sustained period of time.

DCJ worked to gain housing for Garry outside the family home; to allow for Justine and the children to move home to ensure they could remain connected to their school (which had been very supportive of the family). Upon returning home, Justine and the children were faced with a home which:

- Had been trashed by Garry – clothing and furniture broken or missing
- Messages left by Garry on every wall – targeting Justine and Sarah for “*talking*”
- New sensor lights installed to the front and back of the property - IFP workers later discovered that these lights were in fact surveillance cameras that Garry was using to monitor Justine.

IFP engaged with the family for a period of 9 months service provision. The IFP workers noted that:

- All of the children had trauma or post-traumatic stress disorder (PTSD) symptoms including aggressive behaviour; zoning out; trouble concentrating and sleeping; and difficulties in emotional regulation.
- A lack of emotional connection between Justine and the children.

Throughout IFP work concerns were raised in regard to stalking behaviour by Garry. For example, Garry moved into a townhouse opposite the family home with a friend, despite having his own housing; Justine reported Garry's friends dropping into the family home frequently to check on her and the children; multiple break and enters to the family home with items taken and later placed back into the family home.

Whilst Justine denied having contact with Garry, caseworkers had observed Justine to frequently meet with Garry at locations outside the family home. Justine refused to engage with any domestic violence services, including counselling or groupwork service provision.

Justine informed caseworkers that she had met Garry when she was 16 years old, within 6 months of meeting Garry, Justine was pregnant with their first child Joshua (who was removed by DCJ shortly after birth due to concerns around parental drug abuse). The family were transient until the birth of Taylor and had resided in multiple locations around NSW. Justine informed workers that Garry had wanted to avoid DCJ involvement and as such the family had moved a lot.

Justine informed IFP workers that Garry had introduced her to heroin at age 16, that he would inject her, and this was something that occurred throughout their relationship. She disclosed that at age 21, she had commenced methadone treatment – however after the birth of Michael, Garry introduced ice use into their relationship – often injecting Justine with ice and threatening to harm the children if she did not allow him to do so.

IFP referred the family to the Staying Home Leaving Violence program to support provision of safety upgrades to the family home. The proposed upgrades included installing security lights, locks to the doors and windows and new security doors to the front and back of the property. While this was approved for service provision by Staying Home Leaving Violence IFP encountered difficulties in obtaining approval from DCJ for these security upgrades to the home, as the proposed doors and locks were viewed as a fire hazard.

Justine refused to apply for an Apprehended Violence Order (AVO) to protect herself or the children, informing workers that Garry would harm her if she did so. IFP workers sighted numerous messages from Garry where he had threatened to take the children from Justine if she did report any concerns to the local police. These threats implied that Garry would harm the children.

IFP workers engaged the local Police, Women's Domestic Violence Court Advocacy Service (WDVCAS), Department of Education and DCJ in Safety Action Meetings (SAMs) in regards to the family, despite the family not residing in the SAMs pilot location. Police agreed to increase patrols within the vicinity of the family home; however, refused to apply for an AVO due to past instances of Justine not engaging with Police in this process (i.e. not attending court).

At the conclusion of IFP service provision with the family, the security upgrades had still not been completed to the family home, despite IFP advocacy to the Minister.

IFP referred the children for counselling. Service providers refused to provide a service to the children due to "*the perpetrator continuing to have access to the children.*" This was due to Garry continuing to reside across the road from the family home.

At 6 months service provision, IFP workers became concerned that Garry maybe back living in the home, due to the children's partial disclosures and Justine often refusing to allow workers into the family home.

At 8 months service provision, another critical incident occurred within the family home whereby Chris was assaulted by Garry, sustaining multiple injuries. At this point Zoe informed workers that Garry had been residing in the family home for the last 2 months and that mum couldn't "keep him away."

As a result, the children were removed and placed in out of home care.

There were multiple barriers IFP experienced in gaining service provision to create a safety net around the family. These included:

- The criminal justice response
- Staying Home Leaving Violence and DCJ response to security upgrades.
- The inability of counselling services to engage with the family due to services views of perpetrator having access to the children.

B.2 How social isolation forms a barrier to services and support

Jessica - Aboriginal mother with five children who experienced severe physical, emotional, sexual, and financial abuse

Barnardos South Coast Children's Family Centre Safety and Prevention Programs (Illawarra NSW)

Jessica is a thirty-eight-year-old Aboriginal woman who, prior to engagement with Barnardos, was living with her partner who is the father of her five children aged twelve, four, three, eighteen months and two weeks. When Jessica began working with the Barnardos South Coast after the removal of her five children, she disclosed a sixteen-year history of domestic violence perpetrated by her partner. Jessica described ongoing emotional, physical, sexual and financial abuse disclosing several significant incidents in which she was severely physically assaulted. Jessica described an incident in which her partner punched her in the face and then hit her over the head with her daughter's highchair. Jessica stated that during this incident she was rendered unconscious and awoke to find she had missing teeth and had a large laceration to her forehead. Jessica stated that her partner did not allow her to leave home to seek medical attention following this incident.

Jessica described a home environment in which her partner controlled the money as well as when she could come and go from the home. Jessica stated that her partner used ice and one night made her use as well. Jessica stated her partner continued to force her to use by bringing the drugs into the home and making Jessica use. Jessica stated that soon she became addicted to ice and she described the drug as "a way to help me be strong enough to take the beatings." During her engagement with Barnardos, Jessica informed workers that she had considered leaving many times but was unable to do so as her partner slept on a mattress with the children in the lounge room to prevent her ever leaving as he knew she would not leave without the children.

Prior to the removal of Jessica's children, the Department of Communities and Justice (DCJ) became aware that Jessica was not attending her antenatal appointments during her pregnancy with her youngest child. There had also been concerns raised regarding her eldest child's attendance at school. Jessica described her partner as extremely controlling stating that she was unable to leave the house to take her eldest child to school or attend her antenatal appointments. Jessica's children were removed due to concerns regarding

domestic violence, allegations of the children been sexually abused by Jessica's partner, and concerns regarding both Jessica and her partners drug use. The children were placed in care with Barnardos. This was the impetus for Jessica to leave her partner. She fled the home and was assisted by Police to access refuge accommodation and was then transferred to a refuge to be closer to her children and begin the process of working towards getting her children back into her care.

Jessica's case highlighted the ways in which it can be extremely difficult to leave a domestic violence relationship and the way in which a perpetrator can isolate a survivor from social and service supports to maintain control and abuse of both women and children. Jessica was estranged from her family and had no family support or safe people she could go to leave her relationship. Her partner did not allow her to leave the home to access the services she needed to maintain her and her children's basic health and well-being, let alone access the services she needed to be able to leave the abusive relationship. After Jessica left her partner, she received a holistic wrap-around service from the Barnardos South Coast team over several years. Jessica worked with Barnardos over the longer term to get her children back into her care full time. She attended play group with her children and accessed ongoing family support from the Aboriginal Family Worker Project. Additionally, she completed the Learn to Live Again Women's Domestic Violence group twice, completed the Circle of Security Program and her two sons now aged seven and five both engaged with the Home Interaction Program for Parents (HIPPPY) prior to starting school. Jessica was also assisted to access priority housing in the local area and continues to live free from violence with her five children.

B.3 How perpetrators interfere with service access

Sophie - Mother with four children who had experienced an extensive history of domestic abuse

Barnardos South Coast Children's Family Centre safety and prevention programs (Illawarra NSW)

Sophie is a twenty-seven-year-old woman who was born in the United States of America and moved to Australia with her parents and brother when she was four years old. Sophie has four children aged seven, four, two and ten months. Sophie was initially referred to the Family Referral Service when she was pregnant with her first child and received a six-week intervention during this time. Since this time, she has accessed several services including TFC, STAR-IC, Find-a-Family, SUPPS, Playgroup, Learn to Live Again Women's Domestic Violence group and Circle of Security group program.

During her engagement with Barnardos, Sophie disclosed that she had experienced an extensive history of domestic violence perpetrated by her second child's father which included physical, emotional and financial abuse. Sophie stated that her partner began using ice when she was pregnant with her second child and soon after was jailed for assault against her. Sophie stated that she began using ice during this relationship after her partner continually brought drugs into the home. She stated that she now recognises that she was suffering from post-natal depression and after her partner was jailed the second time for assaulting her, her life spiralled out of control. It was at this point that Sophie's two children were removed by the Department of Communities and Justice (DCJ) due to ongoing

concerns regarding domestic violence and both Sophie and her partner's drug use. Sophie identifies that this was when she began using ice regularly.

Sophie disclosed that after separating from her second child's father she met the father of her third child, who also used drugs. Similarly, to her previous partner, Sophie identified that ice became a way in which her partner continued to maintain control stating her partner supplied her with drugs and controlled the couple's money. Sophie began working with the SUPPS program when she became pregnant with her third child. She found it difficult to engage however, due to domestic violence and was unable to access antenatal care due to her partner's cohesive control. After her partner was jailed Sophie left the relationship which resulted in her becoming homeless. Her baby was assumed into care due to concerns regarding Sophie's ongoing ice use and homelessness.

In 2019, Sophie gave birth to her fourth child who was removed at birth. Sophie's eldest two children remained in a Kinship placement with Barnardos. Her third child had been adopted through the Barnardos. Sophie described her most recent partner, who was her fourth child's father, as extremely violent stating he was physically, emotionally and financially abusive. Sophie stated that her most recent partner used ice and she continued to use ice throughout their relationship. After her partner went to jail Sophie separated from her partner and commenced a twelve-week rehabilitation program to address her ice addiction.

Since her ex-partner's release from prison, Sophie has informed workers that she continues to experience violence. She states that he continues to stalk her and constantly sends her verbally abusive and threatening messages. Sophie states that her ex-partner recently set her mother's front yard on fire when he was attempting to find her. Sophie has a current Apprehended Violence Order (AVO) protecting her which expires in 2021. Sophie is working towards reunification with her youngest baby, who is now ten months. She continues to work with Barnardos as well as DCJ and has completed urinalysis, engaged in a variety of groups including Circle of Security and the Learn to Live Again Women's therapeutic domestic violence group and is due to commence attending Poppy Play group, a play group specifically for mum's who are experiencing mental health issues. Sophie's case highlights the way in which perpetrators can cause and exacerbate a survivor's addiction and mental health issues and in turn, demonstrates the ways in which perpetrators can interfere with a survivor's access to treatment options, impact family functioning and prevent the survivor from accessing other essential services.

B.4 The intersection between domestic violence and mental health and substance use

Melissa - Young pregnant mother with infant who experienced severe physical and verbal abuse and coercive control

Barnardos South Coast Children's Family Centre Substance Use in Pregnancy and Parenting Service (SUPPS) Program (Illawarra NSW)

Melissa is thirty-one-year old woman who currently resides with her partner, Jason, aged forty-eight and their eleven-month-old son. Melissa is currently thirty-six weeks pregnant with the couple's second child. Melissa's partner has two other children from a previous relationship and Melissa has four other children, who are currently in out of home care.

Melissa has disclosed a history of trauma in her childhood and states that she recognises that her mother did not act protectively during her upbringing. Melissa cited an example when

she was fifteen her mother allowed her to date a thirty-six-year old man. Melissa describes her previous relationships as extremely violent, stating she was physically assaulted numerous times, held against her will and received serious injuries as a result of these assaults including broken bones. While she initially recognised that there were some forms of violence in her current relationship, Melissa described Jason as 'an angel' when compared to her previous partners. Melissa has very little family and social support and relies on Jason to transport her to and from all appointments. Melissa has no phone and the couple have a cabin on the south coast where they regularly visit. Initially the location was not known by services and during these extended visits Melissa became uncontactable. The couple are known to Police and there is a current AVO protecting Jason from Melissa which was taken out by Police.

Melissa is currently engaged with the SUPPS program and working with the NSW Department of Communities and Justice (DCJ) due to concerns regarding domestic violence perpetrated by Jason towards Melissa and other concerns related to Melissa's mental and physical health and drug and alcohol use. Melissa has been reported to be drinking alcohol and occasionally using ice throughout her second pregnancy however upon referral, Melissa denied any current use. Melissa and Jason have been completing urine analysis and Melissa's results have had no substances detected while Jason's results have shown use of cannabis. Melissa reports that her current pregnancy was unplanned and previously stated that she was unsure 'how she will cope with two babies'. While previous appointments were made for Melissa to terminate her pregnancy, Melissa did not attend these appointments stating that 'Jason believes we can be a happy family'. DCJ are concerned however, that Melissa is currently experiencing domestic violence including gas lighting and verbal and physical abuse.

More recently, Melissa attended hospital after being physically assaulted by Jason. Melissa had visible bruising to her side. Her son had remained with Jason. Police attended the hospital and Melissa stated that Jason had kicked her and dragged her across the floor. Police indicated that they would be arresting Jason for assault. Melissa's mother picked her up following her discharge from hospital. The hospital social worker followed up with the Police, who stated they would not be arresting Jason. Melissa was informed by the police that she could return home to Jason. An AVO was not applied for due to Melissa retracting her statement to Police and due to the complexities of the already existing AVO protecting Jason from Melissa.

Shortly after returning home Melissa became uncontactable. Concerns were raised regarding Melissa and her son's welfare. Several days later Melissa contacted her SUPPS worker via a payphone. She stated that she wanted to explain what had happened and felt bad that she made up stories when giving a statement to Police. Melissa stated that Jason did not know about the statement. She stated that Jason had taken Melissa to their cabin on the south coast to 'get away from everything'. Melissa stated that on the night she attended hospital Jason had brought alcohol into the home and encouraged her to have a few drinks as it was the anniversary of her brother's death. Melissa explained that her brother had hung himself. Melissa stated that she then went to a friend's house and returned home and 'a scuffle' broke out and Jason discovered that Melissa had a bag of ice in her pocket. Melissa stated that the neighbours called the Police and upon arrival Jason informed them that Melissa currently had possession of an illicit substance and gave the drugs to Police. Melissa stated that the Police took her to a friend's home who then took her to hospital as she reported experiencing

physical pain. Melissa explained that she was worried about losing her children as one of the police officers, who was known to her, and attended her home, stated that he would remove her children and give them to Jason.

At present, numerous agencies continue to work with Melissa. While Melissa has been referred to the local mental health team and the local domestic violence housing service both agencies have closed as Melissa has been uncontactable. Melissa continues to engage with DCJ and SUPPS, however, she has now stated that she does not believe that Jason has been violent towards her. Melissa has stated that she feels it is her fault that Jason behaved the way that he did and that she 'made him do it'. She stated that Jason feels 'judged and attacked' as DCJ now view him as 'a women basher'. Melissa stated that the last incident in which she ended up in hospital was a 'wake up call' as Jason stopped her from relapsing and therefore stopped her from losing her family. Melissa has stated that she feels she is sabotaging her relationship with Jason due to the trauma from her childhood and previous violent partners. Melissa is currently on the Safety Action Meeting list which ensures that agencies continue to adopt a coordinated approach in order to continually assess and build safety for Melissa, her son and her unborn.

Melissa's case demonstrates the way in which perpetrators use gaslighting to emotionally abuse and distort a survivor's reality. Similarly, to Jessica and Sophie's case, Melissa's journey highlights the ways in which perpetrators use survivor's current substance use and/or mental health issues to continue coercive control. In some cases we have seen perpetrators use these issues against survivors in both the family law and children's court domain and then be granted orders which make them the primary caregiver. The intersection between domestic violence and mental health and substance use highlights the complexity of women's experiences. At a Federal level it is imperative that a top-down approach ensures that agencies on the grass roots level including first response teams such as Police, DCJ and hospital workers receive adequate training to ensure that their interventions are domestic violence informed. It is imperative that women are treated with respect and not blamed for perpetrator violence. A system overhaul is required to ensure that women's acts of survival and resistance towards perpetrators violence are framed positively and thus, viewed as acts to keep themselves and their children safe. A coordinated system is needed which works consistently alongside women and children who are experiencing violence and does not further victimise them. This approach would greatly improve the likelihood of women accessing services and maintaining engagement in order to further increase safety for families experiencing family and domestic violence.

B.5 Lack of access to services and support for women attempting to escape domestic violence in rural and remote areas

Michelle – Mother with infant child who experienced severe domestic violence incident in Western NSW

Barnardos Western NSW DV Linker Program & Specialist Homelessness Service (Mudgee, Western NSW)

Michelle was referred to Barnardos Mudgee's Specialist Homelessness Service by the Mudgee Police following a severe domestic violence incident that resulted in Michelle sustaining substantial physical injuries. The noise that resulted from the incident caused concern with neighbours who called the Police to notify them of the disturbance. On arrival

the Police called an ambulance who attend the scene and conveyed Michelle and Rose (19 months of age) to the local hospital for suspected broken ribs and concussion. Police explained to Barnardos staff that the perpetrator had not yet been located and that Michelle and Rose were at great risk while ever he was on the run.

The closest women's refuge is 200km away from Mudgee. Michelle did not want to leave the Mudgee community because she has other children in informal care arrangements with extended family along with the only family support available to her in Mudgee at the time. If Michelle had been forced to leave the area at this point it would have added substantial stress and disconnection to her children and family. Michelle and Rose were approved to access a crisis property where they would remain for the next two months while Police searched for and finally arrested the perpetrator. During this time, Michelle and Rose did not leave the property, which demonstrated a strength in Michelle's parenting and the lengths which she was prepared to go to in order to protect Rose. During this time housing and family support staff did all her shopping and delivered it to her, as there was no online shopping available at this time in a country town, supplied age appropriate activities, toys and books for Rose to encourage a positive parent infant bond as well as assisting to fill in the days. As Michelle's anxieties were high and she required a lot of support she was referred to the DV Linker program, for support and emotional assistance in the evenings and on weekends outside of business hours. Even though Michelle was in a heightened state she engaged well with all services and followed the advice she was given, she was proactive in completing a safety plan that she then adhered to. Michelle also participated in play sessions with staff and Rose where they would role model how to teach Rose new things through play and conversation. Michelle acknowledged that this was important as Rose wasn't interacting with anyone else and knew that her parenting had been impacted by the stress and anxiety she was experiencing at the time.

Following the arrest of the perpetrator two months after the incident Michelle and Rose moved into a Barnardos transitional property. Once Michelle was no longer in hiding staff were able to support her to re-enter the community, while ensure her and her daughters' safety was maintained. Michelle began attending playgroup, completed housing paper work, attending counselling and an application was sent to Victims Services to get her car, which had been damaged to the point it wasn't driveable by the perpetrator during the DV incident, back on the road along with security lights and cameras.

Barnardos staff referred Michelle to the Women's Domestic Violence Court Advocacy Support service in Lithgow who then assisted to supported her through the court process. At the time of the incident there was already an AVO in place and as a result the perpetrator was on several charges for breaching these conditions along with assault charges. The perpetrator was convicted and sentenced to 12 months in gaol and 12 month good behaviour bond.

While Michelle and Rose were in the transitional property Barnardos staff worked closely with her and the local community housing provider to secure her own long-term rental property, this was made more difficult than usual as she wasn't able to live in certain areas due to relations or known contacts of the perpetrator residing in the Mudgee area. Additionally Michelle had a debt from a past private rental that had been damaged by the perpetrator This damage was a result of the perpetrator knowing that as the property was leased in Michelle's

name it would cause her further financial hardship and make it harder for her to secure another rental property.

In total Michelle spent 18 months in the crisis and transitional properties before successfully relocating to Orange. Barnardos Mudgee staff referred her to a family support service in Orange, to ensure that she had continued support. In a recent contact with Michelle she informed staff that both her and Rose are going well, there has been no contact from the perpetrator since moving, Rose is attending preschool and Michelle was participating in a parenting program, Parents Next.