

THE CODE OF PRACTICE FOR WOMEN'S REFUGES IN WESTERN AUSTRALIA

Developed by Simi Chugani, Policy Officer

Women's Council for Domestic and Family Violence Services WA (Inc.)

Preface

The Women's Council for Domestic and Family Violence (WA) (the Council) is the peak non-government body in Western Australia committed to improving the lives of women and children in society and ensuring they live free from family and domestic violence. The Council provides a voice on domestic and family violence issues to help facilitate and promote policy, legislative and programmatic responses relevant to women and children who have experienced family and domestic violence.

The Council has five core functions: promoting the protection of women and children through representing their needs to policy and decision makers; representation and advocacy on a range of national committees and advisory bodies; community education; research and training on emerging issues and trends related to family and domestic violence; and information and referrals to sections of the community that would provide appropriate help to women and children.

Through discussions and consultations between the Council and various stakeholders, the Council identified a need for greater consistency, transparency and accountability across family and domestic violence specialist services in Western Australia.

The Code of Practice has developed in the changing environment of significant systemic reform of the family violence system in Western Australia. The Code of Practice aims to unify the Refuge Sector in terms of establishing the minimum service standards with respect to improving the safety and wellbeing of women and children escaping family and domestic violence. Consistency, transparency and accountability are the main outcomes envisioned for this Code of Practice.

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Definitions

At Risk of Harm: At risk of harm means there is evidence of a risk to the adult victim and children's safety and well-being.

Best Interests of the Child: The need to protect children from physical and psychological harm, abuse, neglect or family violence that has been directed at them or that they have seen or heard.

Case Management: Case management is a process to plan, seek, advocate for and monitor services that a woman or child will receive whilst they are in the refuge.

Case Plan: Case plans provide the structure for ongoing intervention and a guide to what needs to occur to address the woman and the child's protection and care.

Child Advocate: A Child Advocate is a child-specific Refuge staff member who actively advocates for the rights of the child, works with the mother to strengthen the mother-child bond, case manages, safety plans and works therapeutically with their young clients via different methods.

Childcare: Childcare involves elements of child-minding but also encompasses elements of running educational activities and encouraging social interactions between children.

Common Risk Assessment and Risk Management Framework: The Common Risk Assessment and Risk Management Framework (CRARMF) is a standardised response to identifying, assessing and responding to family and domestic violence.

Crisis Accommodation: Crisis accommodation refers to a specialist service for women and children who are homeless or at risk of homelessness or after experiencing family and domestic violence.

Parenting Order: A Parenting Order is a set of orders made by a court about parenting arrangements for a child. A court can make a parenting order based on an agreement between the parties (consent orders) or after a court hearing or trial. When a parenting order is made, each person affected by the order must follow it.

Emergency System Service Response: The Emergency System Service Response is the provision of specific emergency accommodation to women and children identified as high risk of serious harm.

Family and Domestic Violence: Family and Domestic Violence is the intentional and systematic use of violence and abuse to create fear and control the victim's behaviour. Multiple forms of abuse characterise the experience resulting in physical and sexual and/or psychological damage, forced isolation, economic deprivation, or behaviour which causes the victim to live in fear. The term domestic violence usually refers to abuse against an intimate partner, while family violence is a broader expression encompassing family and domestic violence and the abuse of children and other family members.

At High Risk of Serious Harm: At high risk of serious harm means there is evidence of a serious risk to the adult victim and the children's safety and wellbeing and urgent action is necessary to prevent or lessen the risk.

Integrated Response: Integrated Response is a response that offers clear benefits for service delivery to victims including improving the experience of victims involved in multiple proceedings across different service frameworks.

Lead Agency: Lead Agencies are those agencies who have been specifically funded to provide a 24/7 Crisis response to women and children requiring immediate assistance as a

result of family and domestic violence who may otherwise not receive a response. The Lead Agency plays a key role in guiding an integrated and responsive service system model. The three lead agencies are: The Patricia Giles Centre; Mary Smith House; and the Lucy Saw Centre.

Men's Behaviour Change Program: Men's Behaviour Change Programs (MBCP) are programs that seek to address the use of violence, threats, abuse, controlling behaviours and attitudes, jealousy and other controlling techniques used by perpetrators of family and domestic violence.

Misconduct Restraining Order: A Misconduct Restraining Order is an order made by the Court to restrain a person (known as the respondent or when an order is made, the person bound) from either breaching the peace, causing fear, damaging property or intimidating another person (known as the person seeking to be protected)

Notification: A notification to the Department of Child Protection and Family Support is where a concern is raised about the abuse of a child.

Outreach: Outreach is an early intervention program that aims to engage and provide support to both victims and perpetrators of family and domestic violence with the main goals being to enhance the safety of victims and children, to hold perpetrators accountable and to work towards changes in violent behaviours.

Perpetrator: A perpetrator is someone who commits an act of family and domestic violence against their intimate partner, child or a member of their family.

Police Order: A Police Order is a restraining order that can be made by a member of the Western Australia Police and can last up to 72 hours.

Protective Bail Conditions: Protective bail conditions are special bail conditions that may be imposed to ensure that nothing is done to endanger the safety, welfare or property of any person, or to ensure there is no interference with witnesses.

Protective Behaviours: Protective Behaviours is a program that aims to promote resilience in children, young people, and adults using empowerment strategies, clear communication and an awareness of 'safe' behaviours. Its aim is to reduce violence in communities and prevent child abuse.

Refuge: A Refuge is a not-for-profit organisation that provides safe and secure crisis accommodation for women and children who have experienced family and domestic violence.

Refuge Worker: A Refuge Worker is a person working within a Refuge who provides advocacy and support to women and children who have experienced family and domestic violence.

Response Based Theory: Response Based Theory works on the notion that whenever people are treated badly they resist and alongside each history of violence and oppression there runs a parallel history of prudent, created and determined resistance.

Restraining Order: A Restraining Order is a temporary court issued order to prohibit an individual from carrying out a particular action, especially approaching or contacting a particular person or class of people.

Risk Assessment: A Risk Assessment is the process of identifying the risks posed to a woman and her child(ren) from a perpetrator, assessing those risks and working together to develop strategies that will mitigate those risks.

Safety Planning: Safety Planning involves the identification of risks and developing adequate plans to ensure that a woman and child have steps they can enact to increase their security or plans on what to do should an emergency arise.

Violence Restraining Order: A Violence Restraining Order (VRO) is a court order issued to a perpetrator that is designed to stop threats, property damage, violence, intimidating behaviour and emotional abuse in the future.

Working With Children Check: A Working With Children Check is a compulsory screening check for people who work or volunteer with children and young people in the community.

Abbreviations

CA: Child Advocate

CCU: Crisis Care Unit

CoP: Code of Practice

CRARMF: Common Risk Assessment and Risk Management Framework

DCPFS: Department for Child Protection and Family Support

LA: Lead Agency

MBCP: Men's Behaviour Change Program

MRO: Misconduct Restraining Order

PO: Police Order

RO: Restraining Order

RSSMER: Refuge System Service Model Emergency Response

TIS: Translating and Interpreting Service

VRO: Violence Restraining Order

WAPOL: Western Australia Police

WCDFVS: Women's Council for Domestic and Family Violence Services

WRG: Women's Refuge Group

Foreword

It is indeed timely that the Women's Refuge Movement in Western Australia embrace the development and implementation of a Code of Practice that aims to provide minimum practice standards to guide good practice when working with and responding to women and children experiencing family and domestic violence. We aim to challenge violence supportive attitudes and victim blaming responses that victims often experience as part of this process as it is critical to their immediate safety and recovery from living with a violent partner.

This year, the Women's Council for Domestic and Family Violence Services (WA) launched their next three year plan, 'Speaking up for a Safer Future' Strategic Directions for 2016-19, demonstrating a clear commitment to working towards ensuring all women and children live free of family and domestic violence.

In 2017, the Women's Council for Domestic and Family Violence Services (WA) will celebrate 40 years (1977-2017), a very significant milestone. In doing so, we pay tribute to the efforts of nine Refuges (Ave Maria, Byanda / Nunyara, Stirling, Mary Smith, Emmaus, Orana, Nardine, Warrawee and Lucy Saw), who in 1977, decided to coordinate their efforts and formed the Women's Refuge Group (WRG) of WA. It was established to provide a coordinated and unified voice for Women's Refuge Services in Western Australia and to advocate on behalf of women and children who were escaping violence in the home.

In 2004, the WRG, changed its name to the Women's Council for Domestic and Family Violence Services (WA) to reflect the breadth of programs other than short term crisis accommodation and support that Refuges were providing. It also expanded during this time to include other women's family and domestic violence services and initiatives being developed in WA such as domestic violence outreach, women's legal and children's counselling services.

Since 2012 WCDFVS, in partnership with the Department for Child Protection and Family Support, have facilitated a series of workshops and consultations to identify areas where the metropolitan Refuge Service System could strengthen good practice and overall collaboration amongst services. It was through this process that the development of a Code of Practice was supported by Women's Refuge Services to guide and support good practice.

As of 1 October 2015, a new Refuge Service System Model Emergency Response is in place to better assist women and their children who may be in imminent danger or high risk of significant harm from a violent partner or ex-partner. Three lead agencies (Pat Giles Centre, Mary Smith and the Lucy Saw Centre) will facilitate safe accommodation and support. They will work with Refuges in their region, the Police and/or the Crisis Care Unit to ensure risks of further acts of violence are minimized. An annual review of the Code will allow ongoing evaluation of women's experiences of the service system and what would help make their experience more supportive.

Sincere thanks to our Policy Officer, Simi Chugani, who has worked diligently to develop this Code of Practice over the last 12 months. This vital piece of work assists greatly in highlighting the Women's Refuge Service System as a viable, credible and professional network of preferred service providers now and into the future.

Angela Hartwig, CEO

About the Code of Practice

In 2009, a Coronial Inquest was held into the death of Andrea Louise Pickett. In response to the failings of the emergency response at the time, a number of recommendations were made to ensure the safety of victims of domestic and family violence. One of the recommendations made by the Coroner related to the provision of immediate secure accommodation:

"... The Department for Child Protection review the accommodation available to victims of domestic and family violence to ensure that in the case of women with children who are the subject of threats of extreme violence secure accommodation can be provided for those women and for their young children. In cases where it is likely that without such accommodation being provided, the women or children may be murdered, procedures should be in place to ensure that there can be immediate provision of a place of safety."¹

As a result of this Inquest, the Department for Child Protection and Family Support (CPFS) has been working in collaboration with the Women's Council for Family and Domestic Violence Services (WA) (the Council) to review the domestic violence sector including the development of a more integrated and responsive service system in the Perth Metropolitan Area.

An outcome of these collaborations resulted in the development of the New Refuge System Service Model. Within this model, an Emergency System Service Response for women and children who are identified as being at **high risk of serious harm** has been developed. This Emergency Response provides immediate secure accommodation to women and children escaping domestic and family violence who are identified as being at **high risk of serious harm**. The Emergency System Service Response was borne out of the Sector Scoping Review that was carried out in 2012².

The Emergency System Response includes three corridors that will be led by three specialist 24/7 emergency response services. These will be the key referral points for the Crisis Care Unit. This Emergency System Response will be engaged when there are no vacancies available and there is a need to immediately house a woman and her child. High Risk referrals can still be accepted into refuges where there are vacancies without the use of the emergency response.

Additionally, previous forums held all supported the recommendation to develop a "Code of Practice" that would outline the policy and operational guidelines that are necessary to ensure good practice within and between Refuge Services within the metropolitan region for the new Refuge System Service Model (RSSM). This Code is designed to provide minimum service standards on the Emergency System Service Response and General Refuge Services.

The Code of Practice is developed in contemplation of establishing better grounds for communication, collaboration and transparencies across all the agencies. The essential facet of an integrated system is interlinked codes of practice that articulate and promote a shared understanding of the gendered nature and dynamics of family and domestic violence. An integrated response in the context of this document is understood to be a partnership response that may involve formalised agreements regarding processes, roles, responsibilities and cross unit accountability. It is envisioned that this practice will adopt a

¹ Inquest into the death of Andrea Louise PICKETT, 11-19 June 2012, pg 47.

² Newbigin, J. (2012) *Scoping the Domestic and Family Violence Sector in Western Australia*, The Women's Council for Domestic and Family Violence Services (WA), Perth.

consistent approach to women and children who experience family and domestic violence is undertaken.

Who does the Code of Practice apply to?

The Code shall apply to all Women's Refuges that provide crisis, medium and transitional accommodation solely for women and children escaping domestic and family violence within the State of Western Australia. This includes Outreach workers providing a service to a woman and her child in their own home where the Outreach worker is attached to a Women's Refuge.

What support will there be for Women's Refuges?

Support will be provided to Women's Refuges throughout the implementation of these standards by the provision of resources, training and guidance. This will include, but is not limited to:

- Briefings for agencies, managers, workers who provide services about the standards and their implementation;
- Access to training for agencies on the Emergency Service System Response;
- Agency support from the Women's Council for Domestic and Family Violence Services WA (Inc) (the Council) where required;
- Complaints may be directed to the Council where an issue arises that cannot be resolved within the parties.

Where do I find out more?

The Council will be monitoring the implementation of the Code and the Minimum Standards for Women's Refuges and is available for clarification.

A note on language

While both men and women can be victims and perpetrators of family and domestic violence, it is important to acknowledge that the rate of family and domestic violence perpetrated against women is significantly higher than it is against men. Use of language throughout this document will be reflected accordingly and terms may be used interchangeably.

Statement of Intention and Commitment

This is a statement of intent – between the Women's Council for Domestic and Family Violence (WA) Inc. and Western Australian Refuges, supported by the Department for Child Protection and Family Support – to work together in enhancing the safety of women and children in Western Australia who are experiencing family and domestic violence.

We are committed to ensuring that women and children escaping violence are supported by a specialist family violence service that understands the dynamics of family and domestic violence and are able to provide services best suited to those needs.

We are committed to ensuring a consistent, transparent and accountable practice is adopted throughout the range of services available to women and children escaping domestic and family violence.

We are committed to working towards a framework of effective integration and collaboration with other community service providers and agencies that are engaged in providing responses to women and their children experiencing family and domestic violence.

Accordingly, we commit:

- To provide timely access to crisis accommodation and family and domestic violence services to women and children escaping family and domestic violence;
- To developing a framework of effective integration and collaboration with relevant agencies within the Family and Domestic Violence Service Model;
- To ensuring women and children escaping domestic and family violence are adequately supported by providing safe environments and relevant services;
- To ensure that the cultural needs of Aboriginal and Torres Strait Islanders are acknowledged and met appropriately;
- To working collectively to systematically address the social determinants that impact on women and children escaping family and domestic violence;
- To ensure consistent, transparent and accountable practices are adopted throughout the Refuge Service System Model and women and children at imminent risk of danger are supported through the work of the three Lead Agencies in partnership with other Refuges in the metropolitan region and outlying areas; and
- To achieving improved access to, and outcomes from Family and Domestic Violence Service Systems

About Family and Domestic Violence

Family and Domestic Violence occurs in all countries across all cultures; evidence suggests that worldwide almost one third of women who have ever been in a relationship report having physical and/or sexual violence perpetrated by their intimate partner (World Health Organisation, 2013). It is a “global public health problem of epidemic proportions” (World Health Organisation, 2013, p. 3).

In Australia, evidence suggests that four out of ten women and five out of ten men have experienced at least one incident of violence since the age of 15 (ANROWS, 2015): a man was most likely to experience violence in a place of entertainment, where women were most likely to experience violence in her home.

One in four women in Australia have experienced at least one incident of violence by an intimate partner who they may or may not have been, living with (ANROWS, 2015, p. 3).

Family and Domestic Violence

The United Nations defines violence against women as ‘any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion, or arbitrary deprivation of liberty, whether occurring in public or private life.’ (United Nations, 1993).

In Australia, the most pervasive form of violence experienced by women is violence perpetrated by an intimate partner or family member (The National Plan, 2009).

Domestic violence may include physical, sexual, financial, emotional or psychological abuse.

Prevalence of domestic violence relates to the estimation of the number of people who have experienced domestic, family or sexual violence in the relevant population with a specified time period; incidence refers to the number of reported incidents that have occurred with a specified time (Australian Bureau of Statistics, 2013).

What Is Family and Domestic Violence?

Family and Domestic violence is when someone intentionally uses violence, threats, force or intimidation to control or manipulate a family member, partner or former partner. It is characterised by an imbalance of power whereby the perpetrator uses abusive behaviours and tactics to obtain power and control over the victim, causing fear. The violence is intentional and systematic, and often increases in frequency and severity the longer the relationship goes on. (Carrington & Phillips, 2003) (Tully, Faulkner, Cutler, & Slatter, 2008). Violence and abuse is deliberate behaviour in which one person chooses to dominate, harm or control another. In this context it is accurate to speak of a victim and a perpetrator (Wade, 2004)

Common to all definitions of domestic and family violence is that it is an intentional act to harm. Such definitions are at odds with perpetrator responses to their own violence as ‘blind rage’ and as having spontaneous, uncontrolled outbursts of violence towards others. Violence is calculated and in the case of domestic and family violence, is often patterned.

When considering the intentional nature of violence, it is also very important to understand that violence is always unilateral. That is, there is always a perpetrator and there is always a victim. To say that couples are in an ‘abusive relationship’ implies that they are mutually violent towards each other and that there is no one individual to blame for the abuse – this is incorrect. It is more accurate to state that “she was in a relationship where her partner abused her and her children”.

Family Violence

Many Aboriginal and Torres Strait Islander people and Culturally and Linguistically Diverse communities prefer the term 'family violence', which includes all forms of violence within intimate and family relationships. Use of the term family violence and not domestic violence demonstrates how violence in the extended family network between grandparents, uncles, cousins etc. affects both the family and individuals, and is much broader than the mainstream perspective. 'Family violence' also highlights the fragmentation of the holistic relationship between spiritual, cultural and environmental dimensions of Aboriginal and Torres Strait Islander life that has taken place since colonisation (Hovane & Cox, 2011)

Aboriginal Understandings of Family Violence

Conceptualisations of family and domestic violence in Aboriginal and Torres Strait Islander families and communities are different to prevailing dominant western theories of family and domestic violence. It has a different background, different dynamics, it looks different, and it is different. It needs its own theoretical discourse and its own evaluations (Hovane, 2015, p. 13)

Aboriginal and Torres Strait Islander researchers have been critical of feminist theories of violence for not considering enough the position of the non-white, non-Western female (Chung, 2013). The mainstream understanding of family and domestic violence, which focuses on individuals and power and control in intimate relationships, is a narrower concept than the concept of family violence for Aboriginal and Torres Strait Islander people, which is embedded in inter-relational family structures and a social context of colonisation, loss of culture and poverty (Taylor, Cheers, Weetra, & Gentle, 2004)

Aboriginal scholar Kylie Cripps (2008, as cited in Chung, 2014) argues that there is no single causative factor for family violence, but there are numerous factors explaining the higher levels of family violence in Aboriginal families across two broad categories:

1. Factors commonly experienced by Indigenous people and their communities:
 - colonisation
 - policies and practices
 - dispossession and cultural dislocation
 - dislocation of families through removal.
2. Factors contributing to high levels of distress which can occur separately or in combination:
 - marginalisation as a minority
 - direct and indirect racism
 - unemployment
 - welfare dependency
 - past history of abuse
 - poverty
 - destructive coping behaviours
 - addictions
 - health and mental health issues
 - low self-esteem and a sense of powerlessness.

These factors demonstrate how complex issues can impact on families and communities and how they compound the effects of violence. It also highlights why single agencies or approaches will not be successful in redressing this complex social problem (Chung, 2014).

2012 Personal Safety Survey

In 2012, the Australian Bureau of Statistics carried out a Personal Safety Survey, providing the most up to date figures of domestic violence (Australian Bureau of Statistics, 2012). The following findings estimated:

- Women were more likely than men to have experienced physical assault by a male in their home;
- Women were more likely than men to experience violence from a partner
- Women were more likely than men to have experienced emotional abuse since the age of 15
- Women were more likely to have experienced an episode of stalking during their lifetime.

Violence against Women

Intimate partner, family violence and sexualised violence have a significant impact on the health and well-being of women both in the immediate and longer term, continuing even after the relationship has ended. The psychological effects of family violence can have serious consequences that can rival physical effects. The World Health Organisation has stated that exposure to violence leads to poorer physical health overall compared with women who have not experienced violence as it increases the risk of women developing a range of health problems.

Many women who experience family violence lose their jobs due to a range of reasons; the perpetrator will often harass and stalk the victim at their place of employment. Women may also have to be hospitalised due to injuries and/or flee their homes. Women may also have to move numerous times to avoid their violent partner or ex-partner. Women often lose friends and family as a result of the violence, the perpetrator takes deliberate steps to isolate the victim as they anticipate the victim will seek help from friends and/or family. Often victims are made to believe the violence is their fault and may be embarrassed to speak about the abuse inflicted on them.

Many women face uncertainty financially once they leave their abusive partner as they often do not have access to money, and others forgo financial security during divorce proceedings to avoid further abuse.

Children and Young People

Violence and the threat of violence at home create fear and can destroy any sense of trust and feeling safe. Violence in the home also has a severe impact on children who are exposed to it. Children and young people who live with domestic violence can respond to the violence by acting out with aggressive behaviour, experience anxiety and show emotional stress.

For optimal development, children and young people need to grow up in a safe and nurturing environment. Where there are issues of family violence at home, the child will not feel safe or secure as they exhibit signs of fear of what might happen to them or the people they love. Children exposed to the violence inflicted on their mothers often display, behavioural, somatic or emotional problems similar to those experienced by physically abused children.

Children may be caught in the middle of an assault by accident or because the abuser intends it. Infants can be severely injured if they are being held by their mothers at the time of attack. They may also be caught in the crossfire where objects or weapons are thrown. Older children are frequently assaulted when they step in to protect their mother from abuse.

Family and Domestic Violence Disrupts the Parent-Child Bond

It is important to note that the parent-child relationship can be deeply affected when a mother must cope with the physical and mental health aspects of being abused by the other parent (Wolfe, Jaffe, Wilson, & Zak, 1985). Parents, who are constantly fearful, may not be emotionally available to their children where necessary (Augustyn, Parker, Groves, & Zuckerman, 1995).

Research indicates that the risk of domestic violence is higher for women during pregnancy and following a birth (Taft, 2002) and women with children are three times more likely to be the subject of domestic violence when compared to childless women (Humphries, 2007).

Attachment theory is derived from psychoanalysis and is embedded in the field of mental health, with the basic understanding that an infant is more likely to achieve a secure attachment relationship where the mother provides a secure base and safe haven (Buchanan, 2008). For women who are subjected to domestic and family violence, the attachment relationship is undermined, usually since inception (Radford & Hester, 2006).

Practitioners working in the field of domestic and family violence need to be aware of a form of domestic violence that specifically impacts on the mother child relationship. 'Maternal Alienation' is when a perpetrator of domestic violence purposely and systematically alienates children from their mothers (Bancroft & Silverman, 2001).

Integrated Response

It is important that an integrated response is undertaken by those working with the family and domestic violence sector. Integrated responses offer clear benefits for service delivery to victims including improving the experience of victims involved in multiple proceedings across different service frameworks (Australian Law Reform Commission, 2010).

Interagency collaboration is an essential feature of an integrated process (See *Interagency Collaboration*).

There are three main arguments for improved integration (Fine, Pancharatnam, & Thomson, 2005):

- Improved access for women and children;
- Increased efficiency;
- Achieving more use out of resources;
- Enhanced effectiveness resulting in enhanced outcomes for women and children.

It is important that all services working within the Family and Domestic Violence Sector undertake an integrated response to domestic and family violence to ensure that the safety of women and children are always placed as a paramount concern.

Common Definition

Definition

The *Family Law Act 1975* (Cth) defines family violence as violent, threatening or other behaviour by a person that coerces or controls a member of the person's family, or causes the family member to be fearful³.

The Strategic Plan for Family and Domestic Violence 2009 – 2013 defines family and domestic violence as:

“...the intentional and systematic use of violence and abuse to create fear and control the victim's behaviour. Multiple forms of abuse characterise the experience resulting in physical and sexual and/or psychological damage, forced social isolation, economic deprivation, or behaviour which causes the victim to live in fear. The term domestic violence usually refers to abuse against an intimate partner, while family violence is a broader expression encompassing family and domestic violence and the abuse of children, and other family members.”⁴

For the purposes of this document, the Strategic Plan's definition of family and domestic violence will be used.

³ Section 4AB.

⁴ Department for Child Protection and Family Services, *The Western Australian Strategic Plan for Family and Domestic Violence 2009 – 2013*, 2012b, p2.

THE MINIMUM STANDARDS

SECTION 1

1. THE SAFETY OF WOMEN AND CHILDREN WILL BE GIVEN THE HIGHEST PRIORITY

Emergency Service System Response

1.1 Women's Refuges will provide crisis accommodation to a woman and her child(ren) who have been identified as high risk of serious harm.

The Emergency Service System Response is the provision of specific emergency accommodation to women and children identified as high risk of serious harm where there are **no** vacancies across the metropolitan region.

The provision of safe and secure accommodation to those women and children identified as high risk should always be paramount.

The Lead Agencies have specific duties under their funding arrangements to ensure that crisis accommodation can be provided to women and children at high risk. As part of this strategy Lead Agencies have allocated 'emergency beds' as one measure to ensure women and children at high risk are able to be accommodated. No other refuge is required to hold 'emergency beds'. However, refuges are required to have arrangements in place with the lead 24/7 Emergency Service System Response to alleviate pressure on the service system and ensure beds are not left vacant.

Lead Agencies

1.2 Lead Agencies will provide a 24/7 crisis response to women and children requiring immediate assistance as a result of Family and Domestic Violence.

The Lead Agencies have a duty, under their funding agreement, to provide a 24/7 Specialist Emergency Response. This response entails developing strategies and responses that are aimed at ensuring priority access for women and their children who are identified as high risk of serious harm.

Part of this response includes providing efficient access to safe crisis accommodation.

The Lead Agency within each corridor will be the key contacts for Crisis Care.

1.3 Lead Agencies will follow up within 48 Hours of a referral of a high risk case where the woman and her child(ren) have been transferred out of the Lead Agency to another refuge under the Emergency Service System Response.

Where a woman and her child have been referred to another refuge within their corridor within 48 hours of receiving the Initial Referral from Crisis Care, the Lead Agency has a duty to follow up on the progress on the woman and her child(ren). This

provides better transparency and accountability across the sector and works towards ensuring that the safety of the woman and her child are always paramount.

1.4 Where a woman and her child(ren) are referred into another Refuge, Lead Agencies will provide the Initial Risk Assessment to the receiving refuge.

By providing the receiving initial risk assessment to the receiving refuge, the risks identified will assist the refuge to maintain a woman and her child(ren)'s safety measures. This also allows for valuable information to be shared and reduce the repetition of the woman telling her story over again.

1.5 Lead Agencies will provide a co-ordination and facilitation role within their respective corridors.

The Lead Agencies have a duty to provide a lead role to move Women's Refuges away from a model of service where individual services provide unconnected, separate responses.

There should be an emphasis on collaborative responses within services that specialise in family and domestic violence services allowing for an interconnected service system to build the capacity of Refuges and provide an integrated Service System Response.

1.6 Lead Agencies will hold regular meetings within their corridors with their respective refuges.

This will allow for a medium of communication that will identify service gaps and best practice methods.

Regular meetings will allow for professional relationships to be built and nurtured.

These meetings should provide an avenue for a willingness to work together to achieve the common goal of keeping women and children safe from family and domestic violence.

1.7 A Risk Assessment will be carried out on the woman and her child(ren)

This risk assessment refers to the assessment that is carried out under the Second Edition of the Common Risk Assessment and Risk Management Framework (CRARMF).

In order to maintain the safety of the woman and the child, a risk assessment will allow Refuges to adequately identify immediate safety concerns and work towards mitigating those risks.

1.8 All safety concerns will be adequately addressed by the refuge to ensure the safety of the women and child(ren), the residents of the refuge and staff members.

Refuges must make their decisions based on the level of risk presented through the use of the CRARMF and the woman's perception of her level of danger.

1.9 Refuges will accept a referral from Crisis Care (under the Emergency Service System Response) where the woman and children have been identified as high risk of serious harm.

Refuges accepting the High Risk Woman through the Emergency System Service Response will receive the Risk Assessment from Crisis Care when the woman and her child are in transit to the refuge.

Transport of the woman and her child(ren) will be arranged by Crisis Care.

A Refuge worker must be present to receive the woman and her child(ren) into the refuge to ascertain whether any immediate concerns need to be addressed.

Refuges

1.10 Where a refuge has a vacancy, the Refuge will accept the high risk referral from a Lead Agency under the Emergency System Service Response.

If a Lead Agency only has emergency beds available, a referral may be made to another refuge service within their corridor. This referral, if made within 48 hours of receiving the referral from Crisis Care, should be monitored by the Lead Agency.

Beds that are for the provision of Emergency cases can only be occupied for a very limited amount of time. Refuges with a vacancy must accept the referral from a lead agency in order to ensure that the next Emergency case can be accommodated.

1.11 In the case of single women at high risk, being referred through the Lead refuges, all Refuges will accommodate the woman if they have capacity and be flexible in their approach.

The priority of all Refuges must always remain with keeping women and children safe from violence. Refuges must accommodate women seeking refuge without children if they have capacity.

Referrals are an integral part of the Refuge service system; Lead Agencies should endeavour to promote best practice within their corridors through the facilitation of appropriate referrals.

Close working relationships with both Refuges in their corridors and Refuges in other corridors will allow for seamless transmission of relevant information. Any service gaps or blockages that arise during the implementation should be documented and addressed.

1.12 Where a referral is received by a Refuge, through the Emergency Service System Response, from another refuge (other than the Lead Agency) within 48 hours, the refuge will inform their respective Lead Agency that the woman and her child are residing at the refuge.

This ensures that a woman and her child(ren) are always afforded the highest level of safety possible. This referral process allows Lead Agencies to monitor whether the process is working adequately and address any service gaps that may arise.

Risk Assessment and Risk Management

1.13 Refuges will use the common risk assessment tool from the Common Risk Management Framework.

The Framework has been developed for use by all government agencies and community sector services to promote a consistent collaborative and seamless approach to identifying and responding to family and domestic violence (Department for Child Protection and Family Support, 2015, p. 12). The Common Risk Assessment and Risk Management Framework (CRARMF) identifies the high risk factors that may indicate a high risk of the adult or child victim being killed or almost killed.

Working from a common risk assessment tool ensures there is consistency across the sector to ensure that women and children's safety are always the paramount consideration.

SECTION 2

2. WORKING WITH WOMEN

General Refuge Work

2.1 The Department of Child Protection and Family Support's Daily Bed count must be updated a minimum of once per day even if the vacancy rate has not changed.

The bed count is an important tool in supporting women and children accessing crisis accommodation. It is imperative that the bed count is updated daily to ensure that where a woman is identified as high risk, accommodation can be easily accessed.

The bed count is relied on by Crisis Care and other Refuges and informs their practices when making a referral for a woman and her child(ren) when immediate accommodation is needed.

Where a bed becomes available, refuges should be employing the practice of contacting their lead agency to notify them that there is a vacancy should the Lead Agency have a woman and child who are identified as high risk and in need of crisis accommodation.

2.2 Crisis Accommodation (where there is a vacancy) will be provided to women and children who are escaping domestic violence and are identified as at risk or high risk.

Women and children escaping family and domestic violence can gain access to the Family violence Services through a number of informal pathways. Where a woman and her child(ren) are placed into contact with the Refuge, and the refuge has a vacancy, after completing a risk assessment, she must be admitted into the Refuge when she is identified as at risk or high risk of serious harm.

2.3 Where a woman has been self-referred or referred by an agency (other than Crisis Care), and is identified as high risk of serious harm, the initial risk assessment will not exceed 20 minutes.

It is imperative that the first contact with the Refuge by the woman is quick and efficient. This will dictate the type of relationship that she has in future with the refuge. Women must be believed and crisis accommodation should be provided to her within a practicable time frame to ensure that her and her child(ren)'s safety is not compromised.

Exceeding the 20 minute timeframe is a laborious process for both the woman and the worker performing the risk assessment. 20 minutes has been shown to be ample enough time to ascertain how much risk is associated with the woman and her child(ren).

Longer and more in depth risk assessments can always be done once the woman and the child(ren) have entered into the Refuge and are safe from the violence.

2.4 Upon entry into the Refuge, women will be informed of their rights and responsibilities and provided with information detailing what they should expect to contribute to the refuge.

In order to promote accountability and transparency within the Refuges, it is imperative that women are provided with information regarding what is expected of them from the Refuge; where English is not their first language an Interpreter must be used.

This may include a brochure on what bills are payable, how much rent is expected and other additional costs that may be incurred whilst she and her child(ren) stay at the refuge.

It is also important to inform women and children of the rules of the Refuge such as visitation, curfew and any other safety precautions.

Because of the nature of the Refuge, it is important that Refuges remind women and children to be respectful to other families and staff members during their stay.

2.5 Refuges cannot restrict access to their services on the basis of transgender, sexual orientation, mental illness or any intellectual disability.

As part of their non-discriminatory eligibility criteria, Refuges cannot restrict the entrance of a woman and child escaping family and domestic violence on the basis of their transgender status, sexual orientation, mental illness or intellectual disability. This amounts to discrimination under both State and Federal Laws and the Refuge may be charged under both Acts if found to have committed an act of discrimination.

2.6 Refuges cannot restrict access to their service on the basis of a person's ethnic background.

As part of their non-discriminatory eligibility criteria, Refuges cannot restrict the entrance of a woman and child escaping family and domestic violence on the basis of their ethnic background.

2.7 Refuges cannot restrict access to their service on the basis of a person's alcohol or drug dependency issues.

As part of their non-discriminatory eligibility criteria, Refuges cannot restrict the entrance of a woman and child escaping family and domestic violence on the basis of their alcohol or drug dependency issues.

All cases must be assess on a case-by-case basis; where a woman presents as a risk to herself, staff or other residents of the refuge, the Refuge may adopt safety measures to ensure that everyone is kept safe. It is not acceptable for refuges to refuse entry where she has admitted to using alcohol or drugs unless she is an immediate risk to others.

2.8 Refuges will accept women and children escaping family and domestic violence with no source of income.

As part of their non-discriminatory eligibility criteria, Refuges must accommodate women without an income. Where the woman and her child(ren) are on a visa that does not fall under the Family Violence Provisions, Refuge workers must advocate for the woman with the Department of Immigration and Border Protection.

Where a woman does not speak English, the Refuge must use an Interpreter. An Interpreter can be either sourced from Translating and Interpreting Service (TIS National) or ONCALL.

Due to the size of some communities, Refuges should always request that an interpreter from another State is used.

Where a woman on a visa has to notify the Department of Immigration and Border Patrol of the circumstances of family and domestic violence, the Refuge should provide supporting documentation that states that the woman has made a claim of family violence and identify the alleged perpetrator along with any evidence used to form the opinion.

2.9 Refuges must contractually accept boys up to 18 years of age; this is done on a case by case basis.

It is a contractual requirement from the Department for Child Protection and Family Support that Refuges must offer to accompanying male children up to the age of 18.

There may be circumstances where it is inappropriate for a young person to enter a Refuge, especially in communal living settings. This decision must be made on a case by case basis and cannot be a blanket rule across all refuges that access is restricted to boys over a certain age.

2.10 Refuges will always have the women and children's safety and well-being as their main priority.

The safety of women and children is always the priority of the Refuge.

Where a woman or child is acting dangerously within the Refuge, the safety of the other women and children and staff is priority. Women and/or children who are putting others at risk should be given a warning that should the behaviour continue, they will have no other choice but to remove them from the refuge.

Where a woman and/or child is a risk, a referral can be facilitated to another Refuge. There are some cases where a change in circumstance will cease the detrimental behaviour. Where a referral is made, the referring Refuge must make a full and frank disclosure to the receiving Refuge as to why the woman and/or child is being referred.

Where a woman and her child(ren) are transferred because of an increase in her risk level, the receiving Refuge must be made aware of all the particulars of why she is being transferred and the potential risks associated with her and her child(ren). The referring Refuge must provide transport, where required, to the receiving Refuge. A hand over should occur between the referring Refuge and the receiving Refuge to ensure the woman and her child(ren)'s safety is not compromised.

Refuges must not transfer women and children to other Refuges on the basis that they have reached the end of their stay or are 'difficult' to manage.

2.11 Refuges whose priority is women with accompanying children are still funded to provide support/ safe accommodation to single women/ or women without their children if required.

Where a woman is identified as high risk and is in need of crisis accommodation (outside the Emergency System Service Response), she must be afforded immediate accommodation with a refuge with a vacancy.

Refuges cannot restrict access to a woman without children seeking crisis accommodation on the basis that their service only caters to women with children. As the core business of every refuge is to provide crisis accommodation to women experiencing family and domestic violence, restriction of this cohort of women is prohibited.

2.12 Women and children will not be exited out of the Refuge without adequate follow on accommodation.

Where a woman and her child are due to be exited out of the Refuge, the Refuge cannot exit them out of the Refuge without adequate accommodation. Refuges owe a duty of care to their clients to ensure that the woman and children who have been in their Refuge are safe.

Homelessness is not an option for women and children who have escaped family and domestic violence. Exposing a woman to potential homelessness may force her to go back to the perpetrator or risk losing custody of her children.

2.13 Where the service is classified as a 24/7 service, a worker will be contactable 24 hours, 7 days a week in emergency situations.

Where a Refuge is classified as a 24/7 service, a Refuge worker must either be on site and contactable, or be contactable at all hours in cases of emergencies. The service must also be available to do intake of women and children at all times.

Refuges that are classified as 24/7 that do not operate on afterhours or only have an 'on call' staff member that cannot perform intakes, are in breach of their service agreements and may be liable under their funding agreements.

2.14 Refuges will have a high level of security at their premises and emergency services should be easily contactable via Panic Buttons or similar.

Because of the patterned nature of family and domestic violence, the security of women and children must always be placed as paramount. Refuges must ensure that women and children are placed in a secure environment and that emergency services are easily contactable. Panic and/or emergency buttons must be easily accessible by all members of staff and residents of the Refuge.

Emergency procedures and safety plans should be explained to all residents and staff of the Refuge to ensure that should an emergency arise, all concerned are kept safe.

Where a perpetrator finds out the location of the Refuge housing the woman and her child(ren), the woman and child(ren) should be moved immediately, where practicable. The local Police should be notified immediately of the increase in risk to the woman, her child(ren), staff and other residents of the Refuge. Any breaches of protective bail conditions and/or violence restraining orders should be reported immediately to the local Police.

2.15 Where concerns are raised about child abuse, sexual abuse, emotional abuse or neglect, the Department for Child Protection and Family Support will be contacted.

The best interests of the child is always paramount and where there are concerns over the safety of the child, this should be immediately reported to the Department for Child Protection and Family Support. The Refuge should also work together with the family to ensure that any risks are mitigated. The woman should feel supported throughout the process and should be engaged with any relevant support service such as Counselling or Drug and Alcohol service.

Where there are concerns of sexual abuse, although not required by Statute to do so, Refuge workers must report this to the Department for Child Protection and Family Support.

Each Refuge must have internal working policies that speak to the procedure of making a report to the Department for Child Protection and Family Support.

2.16 Risk assessments and risk management should be undertaken and updated regularly.

To ensure that every woman and child is kept safe during their residence at the Refuge, it is imperative that risk assessments, safety plans and risk management is updated regularly.

Risk assessments and risk management inform the practice of how the woman and her child will be supported through the refuge. It is important to form relationships with other external agencies. Where a perpetrator is under the supervision of the Department of Corrective Services, it is important to contact them to ensure that the refuge or the woman is notified if the perpetrator is released.

2.17 Case management and safety planning will be undertaken with every woman entering the refuge.

Case management is an important tool for both the woman, her child(ren) and the refuge to ascertain what are the immediate needs. A good case management technique will involve the implementation of a safety plan, the development of short, medium and long term goals. The case management should allow a refuge to ascertain what other services will need to be engaged to ensure that a woman and her child(ren) are fully supported.

A case plan should inform the case management technique used by the Refuge and this should be updated regularly to ensure that all the needs identified are met within a comparable time.

A case plan should be based on what the woman and her child(ren) want to achieve whilst in the refuge and what can be achieved once she and her child(ren) leave the refuge.

2.18 Refuges will respond to women and children in a positive way and acknowledge the capacities evident in their responses to, and resistance of, the abuse, including their protection of family members or others.

When women and children enter the Refuge, they must be empowered to take control of their lives and it must be made known to them that they are never responsible for the violence.

Response Based Theory is one practice that empowers victims of violence to take the control back of their lives by demonstrating that in certain ways they resisted their violence. All the efforts made by the woman to protect her children from violence should always be emphasised and commended. Studies have shown that women respond better and heal quicker when they are shown to have resisted the violence and were not a passive victim.

2.19 Refuges will create and maintain a transparent and safe environment for women and children.

Women and children escaping family and domestic violence are placed in an extremely vulnerable position. It is therefore imperative that refuges create a transparent and safe environment for women and children who enter the refuge. Their rights and responsibilities should be clearly communicated to them, and complaint avenues should be provided to them.

Where a child or a woman does not feel safe whilst at the refuge, she must be consulted with and the Refuge should work with the woman or child to assist with making them feel more safe and secure during their stay, insofar as practicable.

The roles of various workers within the Refuge that the woman or child may come into contact with should be explained to them. The purpose of their engagement with the woman or child should be clearly explained and it should be communicated that if for any reason they are unhappy with any part of the services offered by the refuge, the complaints avenue should be made clear to them.

2.20 Refuges will develop a client centred approach when working with women and children within their refuge.

Women and children must always be treated as experts on their lives and their opinions and views should be heavily weighed when a decision is being made. Women and children should be consulted on every decision that is being made concerning them to ensure that the decision is best placed for them.

2.21 Refuges will actively carry out referrals by engaging in services that benefit the woman and child.

Refuges, as part of their advocacy role, should be engaging with services on behalf of the woman. Where appropriate, a Refuge worker should always attend meetings

or appointments with the woman or child, especially court related matters such as applying for a Violence Restraining Order or child custody matters.

2.22 Refuges will be aware of the practice implications for working with women and children escaping family and domestic violence.

Family and domestic violence have significant impact on the health and well-being of women and children both in the immediate and longer term, continuing even after the relationship has ended. The psychological effects of family and domestic violence can have serious consequences that can rival physical effects.

Refuge workers should be knowledgeable about the impact of relationships on infant's attachment patterns, the effect of maternal alienation, feelings of self-worth, possible self-harming and/or suicidal tendencies (Buchanan, 2008).

Many women who experience family violence lose their jobs due to a range of reasons; the perpetrator will often harass and stalk the victim at their place of employment. Women may also have to be hospitalized due to injuries and/or flee their homes. Women may also have to move numerous times to avoid their violent partner or ex-partner. Women often lose friends and family as a result of the violence, the perpetrator takes deliberate steps to isolate the victim as they anticipate the victim will seek help from friends and/or family. Often victims are made to believe the violence is their fault and may be embarrassed to speak about the abuse inflicted on them.

2.23 Refuges will support the woman to hold the perpetrator accountable for their use of violence against her and her children.

Women must be supported in holding the perpetrator accountable for his actions. The woman and her child(ren) are never responsible for the perpetrators use of violence, and there is no excuse for it. Women should be supported and information should be provided about the criminal and legal avenues that can be taken against him.

Where a woman does not want to pursue criminal charges or a violence restraining order, she must not be forced, coerced or pressured into doing so.

Where a woman states that she would like the perpetrator to stop using violence against her, information regarding Men's Behaviour Change Programs should be provided. She must be reminded that this may not stop the behaviour and is not a guaranteed fix but it may assist her.

Where a woman decides to return to her partner, the Refuge must ensure she has a safety plan in place that she can use if she ever is in imminent danger of serious harm. She must be assured that she can always seek assistance and reminded that going back to the perpetrator does not prevent her from seeking help in the future.

2.24 Refuges will ensure that all insurances needed are applied for and current.

Refuges must ensure that all insurances that are necessary are all current and up to date. Public liability insurance must be taken out by the refuges to ensure that if any employee acts negligently in their duties and harm is suffered by a client, the refuge is protected financially.

Legislation requires organisations to have worker's compensation insurance in place for all its employees. Refuges will need to be mindful of whether their current insurance policies cover volunteers.

Outreach Work

2.25 Refuge workers performing Outreach in their area need to familiarise themselves with services within their local community.

Outreach is an early intervention program that aims to engage and provide support to women and children experiencing family and domestic violence with the main goals of enhancing the safety of women and children.

In order to further the interests and maintain the safety of women and children who are not resident in the Refuge, it is imperative that she is linked with other support services within her area. The Outreach worker provides an important avenue for support and information in order to keep the woman and child(ren) safe.

Refuges providing Outreach services to women and children will need to be sensitive to the cultural and linguistic characteristics of the women and children. It is imperative that women and children have an active involvement in decision making.

2.26 Risk assessments and safety planning should be carried out on an ongoing basis for both the mother and the child.

Risk assessments and safety planning should be carried out as they would be in the Refuge and should be updated regularly to ensure the safety and security of the woman and child(ren) is paramount.

Legislative Responsibilities

2.27 Refuges must operate within the legislative contexts of the Western Australia Equal Opportunity Act 1984 (WA) and the Disabilities Discrimination Act 1992 (Cth), the Children and Community Services Act 2004 (WA) and must be aware of their responsibilities under the Restraining Orders Act 1997 (WA) and the Family Law Act 1975 (Cth).

All of the aforementioned statutes will impact on the Refuge in a multitude of ways, and it is important that Refuges know their responsibilities under each Act.

Having an understanding of when documents may be subpoenaed by the Court is important as it will inform Refuges on how to present their case notes on women and children in the Refuge.

2.28 In circumstances where the woman is not classed as high risk of serious harm, consent must be sought from the woman and her child(ren) before sharing her information.

There are circumstances where if the woman is at high risk of significant harm, her information can be shared with relevant agencies to ensure that the risk is mitigated to her or her child(ren). New amendments to the *Children and Community Services Act 2004* (WA) allow for information to be shared between government and non-

government agencies in the order to provide better accountability and transparency across the sector.

2.29 Refuges will have adequate policies within their organisation that assist with catering to the needs of a diverse clientele.

Where a client with a complex need or disability enters into the Refuge, there must be relevant policies that outline how this person should be accommodated especially where there is a physical disability. This may include policies on whether a full time carer is allowed to accompany the woman and child(ren) into the Refuge or whether a Refuge worker can perform carer duties.

All Refuges must make their refuge as accessible as possible insofar as practicable.

Court Proceedings

2.30 Refuges will respect a woman's decision to either pursue or not to pursue a Violence Restraining Order against the perpetrator.

The woman must always be treated as an expert on her own life and as an expert on the perpetrator's behaviour. Where an active decision is made by the woman not to pursue a Violence Restraining Order against the perpetrator, this decision must be acknowledged and supported.

A woman should never feel coerced or pressured by the refuge to obtain a Violence Restraining Order where she does not want one.

Where a Refuge worker is concerned about the safety and well-being of a child, the Refuge worker should contact the Department for Child Protection and Family Support and advocate that a Violence Restraining Order be taken out on behalf of the child.

2.31 Refuges will encourage women to report all breaches of violence restraining orders or protective bail conditions to the nearest Police Station.

In order to hold the perpetrator accountable for the use of his violence, all breaches of protective bail conditions or Violence Restraining Orders must be reported by the protected person immediately to the nearest Police station.

Breaches of Violence Restraining Orders or protective bail conditions are a serious criminal charge. It is even more serious to the woman and her child(ren) as this significantly increases her level of risk.

2.32 Legal Advice concerning child custody matters must always be sought from appropriate legal organisations.

Refuge workers must never provide legal advice to women and children who are resident in the Refuge. Workers may provide information about the processes of Court and who to contact for further legal advice.

Refuges must familiarise themselves with the availability of community legal centres and other legal services that may be of service to the woman and her child(ren).

2.33 Where a refuge worker is served with a subpoena, it must be complied with otherwise a warrant may be issued for the refuge worker's arrest and may be faced with charges for non-compliance.

A Subpoena issued by a Court must be complied with unless it was not served correctly in accordance with the relevant Court Rules.

Where a worker is served with a Subpoena relating to a client, the worker should seek immediate legal advice.

SECTION 3

3. WORKING WITH CHILDREN

3.1 When children and young people enter the Refuge escaping domestic and family violence, they will be supported and accommodated appropriately.

Family and Domestic violence is the leading cause of homelessness, which in turn has wide-ranging effects on children's long term physical and mental health well-being (Bland & Shallcross, 2015). A meta-analysis of 118 empirical studies published between 1978 and 2000 found that 67% of children who were exposed to domestic and family violence were at a risk of a range of developmental and adjustment problems. They were also shown to fare worse than other children in terms of academic success, cognitive ability, mental health and well-being (Kitzmann, Gaylord, Holt, & Kenny, 2003).

3.2 Refuges will treat children as a client within their own right.

Women's Refuges should strive to ensure that their services not only have a client's centred approach but should also have a child centred focus. The focus of the service, where children are clients, should be listening to the child or young person and working with the child to address their values. Being child focussed means that all staff employed within the refuge have an appreciation of and respect for the needs of the children or young people who enter the women's refuge.

The AIFS Survey of Recently Separated Parents (De Maio, Kaspiw , Smart, Dunstan, & Moore, 2013) found that children who were exposed to domestic and family violence:

- Reported higher levels of behaviour problems in children aged between 1 and 3 years;
- Reported higher levels of behaviour problems in children who had been exposed to emotional violence;
- Children aged 5 to 17 years were faring worse in terms of schoolwork, peer relationships and overall well-being than children who had never witnessed violence.

3.3 The best interests of the child or young person will always be treated as the paramount concern.

Where there is a significant risk of harm to a child or young person of abuse or neglect, notifications should be made to the Department for Child Protection and Family Support. The safety and well-being of the child or young person should always be the primary consideration of the women's Refuge. Refuges must endeavour to create a safe environment for children or young people that is appropriate to their needs.

To ensure the safety of a child or young person after they leave the Refuge, Refuge workers must endeavour to develop a safety plan that identifies practical and

realistic steps that can be used by the child or young person if they ever feel in danger. This may include the use of Protective Behaviours education, use of a telephone or identifying safe people and places.

3.4 The Child Advocate (or equivalent) will support the child or young person to advocate for themselves (where appropriate).

Refuge workers should be advocating for the child or young person's needs separate from their mother, where appropriate. This includes individually or collectively through networks. Appropriate and warm referrals should be made on behalf of the child or young person.

3.5 Refuges will provide a safe and secure environment for the child and young person.

It is important that children and young people of all ages, abilities and cultures feel safe and comfortable when at the Refuge. The practices adopted by the Refuge should be inclusive and reflective of the diverse cultures of their communities. Staff should explain to the child and young person the service and what they can expect to receive from it.

The Refuge should ensure that the appropriate resources are available and cater to the varying ages, developmental and cultural differences of children and young people. Where appropriate, Refuges should seek feedback from children and young people on their service delivery.

3.6 Children and young people should have their own case file whilst in the Refuge.

A case plan and ongoing case management should be made available to the child or young person during their stay at the Refuge. The case plan should have clear focussed goals and outcomes that the child or young person has been consulted on.

Appropriate assessments will ensure that children and young people are involved in programs that are appropriate for their age and developmental stage. Comprehensive, professional assessments play an important role in determining the social, behavioural and developmental effects that the child or young person may be experiencing as a result of family and domestic violence. Once identified, the refuge worker may then have more intimate knowledge of what best supports are needed for the child or young person.

3.7 Children and young people should have their own case manager and risk assessments and safety planning must be updated regularly.

Children and young people who have experienced domestic and family violence are placed in an extremely vulnerable position, one where stability is not usually the norm.

It is vital that each child or young person has an identified worker that stays as their case worker throughout their stay at the refuge. Having one identified person that manages their casework through its life at the refuge will allow for a trusting and more therapeutic relationship to be formed between the child or young person and the refuge worker. It is acknowledged that there may be cases where this is not possible

and as such every effort should be made to allow for a comprehensive handover to be undertaken.

3.8 Where childcare is needed for a child or young person, Certified Childcare or After Hours School Care will be used.

Where a woman has numerous appointments to attend or is expected to work during the day, the enrolment of children into a certified childcare should be the preferred option.

Each Refuge should have their own Childcare policy, and this should detail when and where childcare should be offered and by whom.

The use of Certified Childcare as the preferred method of operation must be used as this limits the refuges duty of care when the mother is offsite.

3.9 Refuges will ensure that all staff employed by the Refuge have a current and valid Working with Children Check.

It is the responsibility of the Refuge Service to ensure that any staff engaged with children through their work has a current Working with Children check.

The Working with Children Check (WWC Check) is a compulsory screening strategy in Western Australia. It aims to protect children by deterring people from applying to work with children where they have a relevant charge or conviction on their criminal record that indicates they may harm a child.

It also provides an avenue of detecting new charges and convictions of those people who hold a current WWC Card and preventing them from continuing to engage in child-related work where their criminal record and behaviour indicates they may harm a child. Finally it works as a mechanism to protect children by creating awareness that safeguarding children is a whole of community responsibility.

3.10 Refuge workers engaged with children and young people should be knowledgeable on Protective Behaviours.

Protective behaviours training has been identified as a highly relevant form of education as it may serve as a protection for children. The Family Court often recommends children attend Protective Behaviours where there are concerns raised about domestic violence and/or sexual abuse. Where appropriate, parents should be encouraged to enrol their children in the protective behaviours program.

Protective Behaviours can be used by children, young people and adults to keep themselves safe and work towards reducing violence in the community. The program teaches children and young people how to identify when they are feeling safe and unsafe. The program works on the basis that people have the right to be safe and that opening avenues of communication is important and should always be reinforced.

Protective behaviours is also available for parents and people working with children.

3.11 Refuges will ensure that all children of school age are enrolled in a school.

Where a child is not enrolled into an educational program for each year of the compulsory period for that child, the parent may face up to \$2,500 in fines (S 9 School Education Act 1999). The child must attend school on a regular basis and give a reasonable excuse (as defined by the Act) where attendance is not practicable otherwise the parent may face a fine of up to \$1,000.

3.12 Refuges will ensure that a safety plan has been formulated for the child and young person.

It is important for the child that the school is kept abreast of any relevant information that concerns the child including any risks posed whilst they are on school property.

Schools may be hesitant to restrict contact with the father of the child and as such it is vital that any orders made by any court be provided to the school to ensure the safety of the child is paramount.

Where there are no court orders in place, a safety plan may be implemented that may assist in delaying access and keeping the child safe for a limited time whilst the Police or mother is contacted.

3.13 Where there are legitimate concerns for the safety of a child whilst in the Refuge, a notification will be made to the Department for Child Protection and Family Support.

Where the Refuge recommends the involvement of the Department of Child Protection and Family Support because of the level of serious risk to the child(ren), a notification must be made to the relevant District Office. This decision should be made by the Manager in conjunction with an Executive Level Officer.

The notification must be made as soon as practicable after the decision has been made. The notification should be made by the Executive Officer or other authorised person to a Team Leader at the relevant District Office.

3.14 Refuge workers will report instances of child sexual abuse to the Department of Child Protection and Family Support.

It is a legal requirement in Western Australia for doctors, nurses, midwives, teachers, police officer and boarding supervisors to report all reasonable beliefs of child sexual abuse to CPFS.

Refuge workers are not legally required to report their beliefs of child sexual abuse, however, in order to protect children and young people from harm, it is considered best practice to notify CPFS immediately of any concerns. This can be reported through a local District Office.

Unaccompanied Children

3.15 Where a child under 16 seeks refuge due to family and domestic violence, the Department for Child Protection and Family Support should be notified immediately.

Unaccompanied children refers to all children and young people under 16 years of age who request assistance from a Women's Refuge and are seeking refuge because of domestic and family violence.

The paramount concern for a child or young person seeking assistance from a Women's Refuge should always be their safety and wellbeing.

Where the child or young person is assessed as being at risk or high risk of significant harm, the refuge should provide accommodation to the child or young person, making sure there are appropriate services and staff available to support that child.

3.16 Refuge workers and the Department for Child Protection and Family Support will work together to ensure the child is safe from further abuse.

Crisis Accommodation is not an appropriate place for a child to remain long term. Refuge workers should endeavour to arrange other age appropriate community connections and supports to assist the child or young person to transition out of the women's refuge.

Where urgent medical attention is required for the child, the Refuge should assist the child or young person in accessing medical care. Where possible, the parent or the Department for Child Protection and Family Support should be engaged as some medical practitioners can refuse treatment except in emergency situations.

3.17 Refuge worker will advocate for the child in terms of insisting the Department of Child Protection and Family Support apply for a Protection Order in favour of the Child.

As the parent still has the legal responsibility for the child, decisions cannot be made for the child concerning accommodation.

Where a child is escaping family and domestic violence perpetrated against themselves, the Department for Child Protection and Family Support will need to be engaged as soon as possible.

Protection Order proceedings may be instituted where the Department of Child Protection and Family Support is of the opinion that the child is in need of protection and care and is worried about the child's safety and wellbeing.

SECTION 4

4. PERPETRATOR ACCOUNTABILITY

4.1 Perpetrators will be held accountable for their use of violence against women and children.

The vast majority of those who use violence and other abusive behaviours to control and dominate in relationships are heterosexual men (Blacklock, 2001).

Research has showed that there is a great diversity of men who perpetrate violence against their partners and children.

The motivation and rationale of each domestic violence perpetrator is a complex interplay between power and gender on an individual, family, social, institutional and cultural level.

The research work carried out by numerous bodies reveal some commonalities in the men's lives such as child abuse, domestic violence in their families of origin, poor educational backgrounds, mental health problems, alcohol and drug abuse and unemployment. These are not excuses for a perpetrator's active decision to use violence; they may contribute to the severity of the violence but they are never an excuse.

Breaches of Violence Restraining Orders and/or Protective Bail conditions must be reported immediately to the closest police station.

4.2 Where a perpetrator is engaged in a Certified Men's Behaviour Change Program, the Refuge will work as close as possible with the Men's Behaviour Change Program.

When delivered appropriately, Men's Behaviour Change Programs (MBCP) seek to address the use of violence, threats, abuse, controlling behaviours and attitudes, jealousy and other controlling techniques used by perpetrators of domestic and family violence (Juodis, Starzomski, Porter, & Woodworth, 2014).

MBCP's strive to ensure that perpetrators domestic and family violence take responsibility for their actions and aim to teach them alternate behaviour. It also encourages perpetrators to accept women's decisions and boundaries, including the end of the relationship (Juodis, Starzomski, Porter, & Woodworth, 2014, p. 382).

Refuges who work closely with an MBCP allow for a further level of protection for the woman. Where an MBCP identifies an increase in risk to the woman or child based on the perpetrator's engagement in the program, they can notify the Refuge to ensure relevant safety precautions are taken.

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