

Submission to:

Domestic Violence Prevention Council

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Submission to Domestic Violence Community Consultation

Input on draft *Whole of Government Statement on Family Violence*

**From: Women's Centre for
Health Matters Inc.**

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The Women's Centre for Health Matters (WCHM) welcomes the opportunity to provide a submission to the Domestic Violence Community Consultation by providing feedback on the draft *Whole of Government Statement on Family Violence*.

This response is informed by the views and concerns of our partners with whom we work closely about the specific issues for and needs of ACT women, and with feedback from a variety of ACT women and service providers through focus groups and other consultation processes.

Introduction

The Women's Centre for Health Matters Inc. (WCHM) is a community-based organisation that works in the ACT and surrounding region to improve women's health and wellbeing. WCHM focuses on groups of women who experience disadvantage and uses social research, community development, advocacy and health promotion to empower these women to achieve the highest possible standard of health and wellbeing.

WCHM believes that health is determined not only by biological factors, but by a broad range of social, environmental and economic factors known as the 'social determinants of health'. We acknowledge that the environment and life circumstances that each woman experiences have a direct impact on her health, and in many cases, women's poor health is rooted in social disadvantage. For these reasons, WCHM is committed to taking a 'whole of life' and social approach to women's health, that is also firmly situated within a human rights framework.

Comments

WCHM welcomes the focus on developing a Statement about the Government's position on Family Violence, and a focus on developing an overarching Strategy.

This is particularly relevant to WCHM and our work because the link between violence and gender is well recognised in international and national literature, and we are concerned with the health impacts of violence. Family violence also has a long lasting impact on the physical and mental health and wellbeing of women, and has significant consequences, including homicide, homelessness, poor social, mental and physical health outcomes, as well as significant economic and health system costs.

The focus is also relevant to our work with, and feedback from, women in the ACT and women's groups such as Women With Disabilities ACT (WWDACT), the ACT Women and Mental Health Working Group (WMHWG) and the ACT Women and Prisons Group (WAP), and through our membership of the ACT Women's Services Network:

- Women With Disabilities ACT is a peer support and systemic advocacy group of women with disabilities who live in the ACT and region, which is involved in a

number of projects which aim to improve the lives and life chances of all women with disabilities.

- The ACT Women and Mental Health Working Group is a group of women working together on matters impacting on women with mental health issues in the ACT, and focusses on assisting women with mental health issues to voice their issues and ensuring that women's issues are raised in existing networks, organisations and current and future government processes.
- The ACT Women and Prisons Group is a not for profit community group, whose members include ex-prisoners and prisoners currently detained in the criminal justice system, representatives of various ACT Women's Services and other interested women. The Group functions under the auspices of the WCHM and is also supported by the ACT Council of Social Services (ACTCOSS).
- The ACT Women's Services Network is a network of women working in services and organisations that exist to provide services and support to women in the local (and in some cases regional) community, and who work collaboratively to improve services for women in the ACT. The Network provides a peak forum for women to share information and to develop responses to progress work on common issues, and to provide the women who need the services with a strong advocate that is able to identify gaps and emerging issues and influence more effectively than individual services could on their own. This helps to ensure that less women 'fall through the safety net' and supports services in providing effective and efficient service provision.

'Family' versus 'domestic' violence

The draft document refers to family violence throughout but there is no overall definition of family violence. Instead there are references within the document to the types of situations that would constitute family violence.

As a result the document seems to cover spousal relationships, intimate personal relationships (including dating relationships and same sex relationships), and family relationships (with a broad definition of relative). But it does not fully articulate or distinguish between what might be considered 'family' violence (i.e. based on interpersonal relationships such as relatives, intimate relationships and kinship and which do not require cohabitation) and 'domestic' violence (i.e. based on living arrangements where two or more people live together).

WCHM believes that the term family violence needs to be clearly defined in the Statement and take into account the more diverse range of relationships that women may be in.

The findings from the paper *'Double the Odds' - Domestic Violence and Women with Disabilities* (Salthouse and Frohmader, 2004), show that the 'domestic' situations for many women with disabilities are broader than the traditional understandings of what normally constitutes 'domestic' or 'family' violence, including community based group homes, residential institutions, boarding houses, and transition houses. Therefore a woman living in a group home or residential facility can experience domestic violence from other residents, carers and/or service providers. The draft Statement alludes only to carers (with no distinguishing that these may be both formal and informal care relationships).

Institutionalised women also face the same issue when their place of residence may be a community based group home, institution, a shelter, hospital, psychiatric ward, or nursing home.

In addition there is no reference to friends, housemates, or other cohabitants. We believe it is important for the draft Statement to recognise all the various domestic situations in which violence may occur through the inclusion of the potential involvement in violence by 'residents, co-patients,and/or a carer, whether family member or paid service provider '(Frohman 1998, KPMG 2000), and those in cohabiting arrangements such as friends, housemates.

Defining types and examples of family violence

'Family violence' can describe a range of abuses perpetrated within a domestic context whether physical, financial, sexual, spiritual, social or emotional.

The draft Statement refers to a wide range of behaviours and types of violence within one long paragraph and as a result many of the key elements are lost under an overall heading – for example the inclusion under physical violence of sexual violence, and the inclusion of withholding and controlling finances under a long list of emotional, verbal and psychological abuse examples.

While most people consider domestic violence to be comprised of physical and sexual assaults, there is evidence that fewer people regard social, psychological and financial abuse as constituting domestic violence (VicHealth 2009).

Yet economic and social abuse are common forms of abuse experienced by women with disabilities. As WWDA quotes in relevant documents:

- Other forms of abuse include denying personal care, rough handling, and withholding medical treatment.
- Women who are visually impaired may have their physical environment rearranged.
- Women with physical disabilities may have essentials such as house keys or medication kept just out of their reach.
- Women who are reliant on communication aids may have access to aids restricted.

The Australian Public Health Association uses a comprehensive definition outlining examples of abusive behaviour which might be simpler and provide more clarity for the reader:

- *Physical abuse*, causing pain and injury; denial of sleep, warmth or nutrition; denial of needed medical care; sexual assault; violence to property or animals; disablement; and murder;
- *Verbal abuse*, in private or in public, designed to humiliate, degrade, demean, intimidate, subjugate, including the threat of physical violence;
- *Economic abuse*, including deprivation of basic necessities, seizure of income or assets, unreasonable denial of the means necessary for participation in social life; and
- *Social abuse*, through isolation, control of all social activity, deprivation of liberty, or the deliberate creation of unreasonable dependence

Alternatively the definitions in the following table may also offer a simpler way of conveying the information.

Physical abuse	Threatening or physically assaults, including punching, choking, hitting, pushing and shoving, throwing objects, smashing objects, damaging property, assaulting children and injuring pets
Sexual abuse	Any unwanted sexual contact, including rape
Psychological abuse	Emotional and verbal abuse such as humiliation, threats, insults, swearing, harassment or constant criticism and put downs
Social abuse	Isolating partner from friends and/or family, denying partner access to the telephone, controlling and restricting partner's movements when going out
Economic abuse	Exerting control over household or family income by preventing the other person's access to finances and financial independence
Spiritual abuse	Denying or manipulating religious beliefs or practices to force victims into subordinate roles or to justify other forms of abuse

Impacts of family violence on the community

The draft Statement acknowledges that family violence has a 'devastating and far-reaching impact across the whole community' and 'has profound consequences for the lives of children, each individual and each family'. For many people in the community this may translate to be seen only as only physical costs to the victims and their families.

But family violence also 'incurs significant social, emotional and economic costs to victims, their families and the broader community' (*Laing & Bobic 2002*). So Government policies and strategies need to challenge the social and economic factors that contribute to violence.

WCHM would therefore like to see an acknowledgement of the social, emotional and economic costs through a stronger statement about the impact of family violence, and especially on health and wellbeing of women overall, because:

- Domestic violence is associated with a range of health problems (Marcus & Braaf 2007) and is the single biggest health risk to Australian women aged 15 to 44 years (Access Economics 2004).
- Domestic violence has a significant impact on the general health and wellbeing of individuals by causing anxiety, depression, impairing social skills and increasing the likelihood that they will engage in practices harmful to their health, such as self harm or substance abuse (NSW Office for Women's Policy 2008).
- Substantial numbers of long term disabilities are caused by family violence or abuse of children but this is rarely recognised by service providers, policy makers, researchers, or the community.
- Domestic violence results in significant morbidity and mortality, and is a significant cause of early death.
- Physical abuse also increases the risk of criminal offending and a significant proportion of women in prison have experienced some form of prior abuse, either as adults or children (NCRVWC 2009a).
- The flow-on effects extend to issues of homelessness and barriers in seeking justice and legal redress.

Other

The Statement has a strong focus about the need for safety for women and children affected by violence, for perpetrators to be held accountable, and for a community role in encouraging respectful family relationships and eliminating family violence.

The Statement is also clear that violence will not be tolerated in the ACT, that there needs to be a government leadership response and that relevant Government and community sector agencies need to respond.

WCHM would also welcome a commitment in the Statement to the fact that family violence is everybody's business and therefore needs to be addressed at every level including in organisations and institutions, in businesses and workplaces, in education and in homes.

In addition the Statement also needs to reflect the Government's commitment to an integrated family violence response. While the immediate safety of women and children is essential, a whole of government response is more than support for people to leave violence (through safe and secure accommodation to those who need to relocate from their usual residence) and includes access to other appropriate services that are not housing or justice related.

Conclusion

In conclusion, WCHM looks forward to participating further in the consultation process, and the development of the ACT Prevention of Violence Against Women and their Children Strategy, and in supporting the work of the Domestic Violence Prevention Council.