NACCHO
National Aboriginal Community Controlled Health Organisation
Aboriginal health in Aboriginal hands

www.naccho.org.au

National Plan to End Violence Against Women and Children

Submission to the
Department of Social Services

February 2022

About NACCHO

NACCHO is the national peak body representing 144 Aboriginal Community Controlled Health Organisations (ACCHOs). We also assist a number of other community-controlled organisations. The first Aboriginal medical service was established at Redfern in 1971 as a response to the urgent need to provide decent, accessible health services for the largely medically uninsured Aboriginal population of Redfern. The mainstream was not working. So it was, that over fifty years ago, Aboriginal people took control and designed and delivered their own model of health care. Similar Aboriginal medical services quickly sprung up around the country. In 1974, a national representative body was formed to represent these Aboriginal medical services at the national level. This has grown into what NACCHO is today. All this predated Medibank in 1975.

NACCHO liaises with its membership, and the eight state/territory affiliates, governments, and other organisations on Aboriginal and Torres Strait Islander health and wellbeing policy and planning issues and advocacy relating to health service delivery, health information, research, public health, health financing and health programs.

ACCHOs range from large multi-functional services employing several medical practitioners and providing a wide range of services, to small services which rely on Aboriginal health practitioners and/or nurses to provide the bulk of primary health care services. Our 144 members provide services from about 550 clinics. Our sector provides over 3.1 million episodes of care per year for over 410,000 people across Australia, which includes about one million episodes of care in very remote regions.

ACCHOs contribute to improving Aboriginal and Torres Strait Islander health and wellbeing through the provision of comprehensive primary health care, and by integrating and coordinating care and services. Many provide home and site visits; medical, public health and health promotion services; allied health; nursing services; assistance with making appointments and transport; help accessing childcare or dealing with the justice system; drug and alcohol services; and help with income support. Our services build ongoing relationships to give continuity of care so that chronic conditions are managed, and preventative health care is targeted. Through local engagement and a proven service delivery model, our clients 'stick'. Clearly, the cultural safety in which we provide our services is a key factor of our success.

ACCHOs are cost-effective. In 2016, a cost-benefit analysis of the services provided by Danila Dilba to Aboriginal and Torres Strait Islander people in the Greater Darwin region was undertaken by Deloitte Access Economics. The findings demonstrated that each dollar invested in the health service provides $4.18 of benefits to society. ACCHOs are also closing the employment gap. Collectively, we employ about 7,000 staff – 54 per cent of whom are Aboriginal or Torres Strait Islanders – which makes us the third largest employer of Aboriginal or Torres Strait people in the country.

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Recommendations

NACCHO recommends:

1. stronger alignment with the National Agreement on Closing the Gap. In particular, the four Priority Reforms which address the need for structural change, should underpin all aspects of the National Plan.

2. the pillars be reconfigured and elaborated to outline a multidirectional model of care. Pre-prevention, prevention, early intervention, response, and recovery are necessary components.

3. Survive and Thrive be added as a fifth component in a multidirectional model of care. This element would encompass activities and supports aimed at building and maintaining strong futures for victim-survivors and reformed perpetrators.

4. the focus area on the role of technology be considerably strengthened.

5. housing be addressed as a preventative measure in the National Plan.

6. the National Plan prioritise funding ACCHOs, and other community-controlled organisations, as key providers of health and support services to Aboriginal and Torres Strait Islander people experiencing violence.

7. the measures and outcomes be clearly aligned with the focus areas.

8. the outcome areas be clearly aligned to the Priority Reforms of the National Agreement.

9. strong alignment to the Coalition of Peaks Justice Policy Partnership recommendations, especially Action 2.1 relating to partnerships between Aboriginal and Torres Strait Islander people and mainstream policing agencies and how these can be transformed and strengthened.

Introduction

NACCHO welcomes the redeveloped *draft* National Plan to End Violence Against Women and Children and the opportunity to provide feedback to what extent the current draft National Plan meets the needs of people in Australia.

Aboriginal and Torres Strait Islander women and children are more likely to experience family violence than other Australians.[1] However, more than simply a gap to be closed, family violence within Aboriginal and Torres Strait Islander communities needs to be understood as both a cause and an effect of social disadvantage and intergenerational trauma.[2]

The current draft National Plan has not addressed the feedback previously provided by NACCHO (August 2021 attached) and does not adequately meet the needs of people in Australia - specifically Aboriginal and Torres Strait Islander peoples. The consultation format (survey) hinders real engagement on the topic and NACCHO provides this submission in addition to the survey responses.

Feedback on the National Plan

A need to better align with the National Agreement on Closing the Gap

The National Agreement on Closing the Gap is a commitment from Australian governments to four Priority Reforms target which will fundamentally change the way governments work with Aboriginal and Torres Strait Islander people and communities.

NACCHO is encouraged to note the National Agreement on Closing the Gap has been identified as a key agreement supporting the work of the National Plan; however, it appears tokenistic only. A serious limitation of the National Plan is the focus only on specific aspects of the National Agreement, its Priority Reforms, and socio-economic targets. Closing the Gap is about more than addressing just one target or Priority Reform.

The next National Plan to end Violence Against Women and Children must ensure that the commitments in the National Agreement on Closing the Gap are embedded across every element of the Plan. There must be one National Plan that deals with violence against women and children that is inclusive of, and informed by, Aboriginal and Torres Strait Islander people.

The National Plan cannot solely rely on the Aboriginal and Torres Strait Islander Action Plan to address the inequities of support for Aboriginal and Torres Strait Islander people affected by violence.

The over-representation of Aboriginal and Torres Strait Islander people and communities impacted by all forms of violence can only be addressed with responses that are led by Aboriginal and Torres Strait Islander people and the community controlled sector in the design, implementation, and evaluation of *all* efforts.

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[1] AIHW Indigenous Community Safety Snapshot 2019, https://www.aihw.gov.au/reports/australias-welfare/indigenous-community-safety

[2] AIHW 2018

The proposed targets of the National Plan must go further in order to demonstrate commitment to the targets of the National Agreement on Closing the Gap. These targets should not be 'in addition to' the targets of the National Agreement, but rather align with and give effect to all targets.

NACCHO recommend stronger alignment with the National Agreement on Closing the Gap. Specifically, the four Priority Reforms of the National Agreement, which address the need for structural change, should underpin all aspects of the National Plan. Without structural and systemic change, progress toward the targets, and toward closing the gap will continue to be slow and ineffective.

NACCHO recommend to ensure strong alignment with Priority Reform 1, all parties to the National Agreement are committed to the strong partnership elements at Clauses 32 and 33. Those elements apply to the Justice Policy Partnership (JPP). As a result, all Government parties recognise that adequate funding is needed to support the Aboriginal and Torres Strait Islander community-controlled sectors to be partners with Government in the JPP.

strong alignment to the Coalition of Peaks Justice Policy Partnership recommendations, especially Action 2.1 relating to partnerships between Aboriginal and Torres Strait Islander people and mainstream policing agencies and how these can be transformed and strengthened.

The Foundation Principles provide a weak backbone to enact change

NACCHO notes the proposed principles:

1. Gender equality
2. The diverse lived experiences of victim-survivors are informing policies and solutions
3. Closing the Gap
4. Intersectionality

Whilst NACCHO supports the inclusion of Foundation Principles to underpin the National Plan, the proposed principles are insufficient in recognising some of the critical catalysts of violence against women and children, including socioeconomic disadvantage, racism and class bias[3].

The principle of Closing the Gap does not adequately demonstrate the essential underpinning of the National Plan. As previously noted, a commitment to Closing the Gap must be more than just one target, in isolation. To implement the National Plan and exercise real change, the outcome areas presented in the National Agreement on Closing the Gap must be considered holistically: health and culture targets are also critically important, and there are intersections with the justice targets defined in the National Agreement.

The principle of 'Intersectionality' is silent on the historical impacts of colonisation and real control exhibited by Government or authoritarian agencies, as experienced by Aboriginal and Torres Strait Islander peoples and communities. This kind of racism and discrimination – historical, perceived and current – further compounds the risk of violence for Aboriginal and Torres Strait Islander peoples, and must be recognised to appropriately prevent, respond and recover from violence in these communities.

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[3] www.wcdvs.org.au

National Pillars

The National Pillars express a linear experience, rather than a multifactorial approach, of domestic and family violence that does not reflect the lived experience of victim-survivors, or reformed perpetrators. The term 'pillar' itself creates the impression that each component can be considered in isolation. This exacerbates an already siloed system, further intensifying the lack of appropriate support for victim-survivors and reformed perpetrators.

The pillar structure suggests that the experience of violence is a one-directional pathway and fails to recognise the compounding factors that impact on a victim-survivors experience. We know it takes on average seven attempts to leave a domestic violence relationship[4] and that a circular support response is required. The pillars are not isolated, linear components and NACCHO recommend the National Pillars be amended to reflect a person-centred model of care to best support victim-survivors.

NACCHO recommends the pillars be reconfigured and elaborated to outline a multidirectional model of care. Pre-prevention, prevention, early intervention, response, and recovery are necessary components.

NACCHO recommends the addition of a fifth component – Survive and Thrive – which encompasses activities and supports aimed at building and maintaining strong futures for victim-survivors and reformed perpetrators.

The 'Survive and Thrive' element would consider opportunities for individuals and communities to recover, thrive and build strong futures. Aboriginal and Torres Strait Islander peoples are survivors of many adversities, and the inclusion of this element reflects the great strengths drawn from communities. For example, trauma-informed, culturally appropriate healing resources for Aboriginal and Torres Strait Islander victim-survivors and perpetrators are important in communities to support response, recovery, and prevention of violence against women and children, and to ensure communities can survive and thrive into the future.

Although critical, the focus areas outlined under the National Pillars are lost and are poorly reflected throughout the plan. NACCHO would like to see these considerably strengthened and strongly linked to the measures and outcomes.

The focus area on the role of technology must be considerably strengthened. NACCHO note that use of technology to harass, intimidate and stalk women is becoming increasingly easy, and consequently prevalent, and cannot be limited to actions under a single pillar. A recently released report examines the extent and impact of technology facilitated violence on women in regional, rural and remote areas.[5] Anecdotal evidence suggests that technology-facilitated violence, including control, coercion, abuse, harassment and stalking are increasing for Aboriginal and Torres Strait Islander women. For Aboriginal and Torres Strait Islander communities, funding the e-Safety Commissioner to advance this work is likely to be ineffective; community-led solutions are required, and community-controlled organisations should be funded to ensure effective implementation, an approach that aligns with the National Agreement.

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[4] www.wcdvs.org.au

[5] Harris B & Woodlock D 2022. Spaceless violence: Women's experiences of technology-facilitated domestic violence in regional, rural and remote areas. Trends & issues in crime and criminal justice no. 644. Canberra: Australian Institute of Criminology. https://doi.org/10.52922/ti78405

Additionally, the focus areas do not identify inadequate housing as a catalyst of violence, particularly for Aboriginal and Torres Strait Islander peoples. A recent study from the ANU sought to determine what it would take to effectively address family and community violence in Aboriginal and Torres Strait Islander communities. The study found that housing shortages were interconnected with other community issues, including violence[6]. It further identified that having stable housing and living conditions that were not overcrowded were significantly associated with a lower prevalence of violence[7].

NACCHO recommends the focus area on the role of technology be considerably strengthened.

NACCHO recommends housing be addressed as a preventative measure in the National Plan.

Measures of success are poorly articulated

The measures and outcomes are poorly considered and must be clearly aligned with the focus areas detailed under the National Pillars. There appears to be no alignment currently.

Reduction of the outcomes to particular pillars is extremely limiting and again, does not reflect the multi-directional and complex experiences of violence and recovery by victim-survivors or perpetrators. Further, the four-tiered approach does not accommodate Aboriginal and Torres Strait Islander communities. Individual-level outcomes must be considered at a community level to be effective.

The community level outcomes as they stand are wholly inadequate. Focussing solely on attitudinal indicators is likely to be ineffective without corresponding measures that correlate changing attitudes with other determinant indicators including the prevalence of catalysts and predictors of violence (homelessness rates, AOD use, mental health, employment, etc), and importantly, behaviours. None of these appear in the measures outlined. A recent report identifies specific types of behaviours likely to lead to violence and death, and emphasises the need for such behaviours, such as threats to kill, to be heeded, rather than, as they often are, ignored8.

Service level outcomes must differentiate between systemic services, such as police and the justice system, and those specialist services catering to victim-survivors and perpetrators. They are significantly different, they perform significantly different roles for both victim-survivors and perpetrators, and conflating them is unhelpful. NACCHO notes that service level outcomes should be aligned with Priority Reform 2 of the National Agreement.

Police and justice are system elements, not services. For example, the well-documented and pervasive negation of women's experiences of physical and sexual violence by police forces and the justice system will require specific actions that are not required of specialist service providers.

System level outcomes are largely lacking. Though the preamble to this section mentions legislative and policy levers, these are not well translated into system level outcomes. Systemic change is needed in particular in terms of the accessibility of justice responses and the support services available to Aboriginal and Torres Strait Islander people experiencing violence. Eliminating racism

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[6] Family and Community Safety for Aboriginal and Torres Strait Islander Peoples Study Report, 2020, pg. 47: https://nceph.anu.edu.au/files/CHM200082%20TAWTBWMCI%20v9%20WEB.pdf#overlay-context=research/projects/facts-study

[7] Family and Community Safety for Aboriginal and Torres Strait Islander Peoples Study Report, 2020, pg. 48.

[8] Boxall, H., Doherty, L., Lawler, S., Franks, C., & Bricknell, S. (2022). The "Pathways to intimate partner homicide" project: Key stages and events in male-perpetrated intimate partner homicide in Australia (Research report, 04/2022). ANROWS.

and embedding cultural safety, improving engagement and partnership with Aboriginal and Torres Strait Islander people and communities is essential to ensure accessibility to and engagement with services. NACCHO notes that system level outcomes should be aligned with Priority Reform 3 of the National Agreement.

NACCHO recommends measures and outcomes be clearly aligned with the focus areas

NACCHO recommends the outcome areas be clearly aligned to the Priority Reforms of the National Agreement.

Implementation and Governance

As outlined in NACCHO's previous submission, the current governance structure is inequitable between mainstream and Aboriginal and Torres Strait Islander representation and consequently, it is not clear that the voices of Aboriginal and Torres Strait Islander people and community-controlled organisations have been appropriately considered in the development of the National Plan.

The need for a culturally safe and trauma-informed workforce is absent from the National Plan. We know that there are workforce shortages across the health and care sectors with workforce need estimated to be in the order of 14.2% or around 250,000 workers to 2025[9]. The increased need for workers is also impacting the family violence sector, however the National Plan does not address this need.

The system is failing our community

The system is failing Aboriginal and Torres Strait Islander people. To help our communities we need far greater integration across the service system so that it can respond to the whole family in a way that avoids disruption and further trauma. We need Aboriginal and Torres Strait Islander led, whole of community solutions that are enabled to focus on primary prevention at the community level if we are to lower the rate of violence experienced. Building a service system around existing trusted relationships such as with health services amplifies the opportunity and reach of programs.

Primary prevention approaches have a demonstrated ability to deliver sustainable local solutions that not only reduce the number of family violence incidents experienced but they contribute to more positive life outcomes for Aboriginal and Torres Strait Islander people. These local solutions can incorporate traditional knowledge and cultural elements to strengthen their effectiveness.

To support these types of approaches Aboriginal and Torres Strait Islander community-controlled organisations need assistance to strengthen their ability to meet the need. The support for our organisations should include the key elements of a strong sector including workforce capability, capital infrastructure investment, service delivery resources and governance.

We must also make room for Aboriginal and Torres Strait Islander men to be part of the solutions and to empower them to advocate for change as well.

This should include better information, data and training materials that challenge the unconscious bias that exists as to who the perpetrators are. This material would also educate about the level of violence experienced by our men when they were children, particularly those who experienced abuse due to removal from their families.

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[9] AIHW 2020.

We know barriers that prevent Aboriginal and Torres Strait Islander women and children experiencing violence from reporting it include a fear of child removal, the threat of homelessness, and the fear of isolation from family and community.

Aboriginal and Torres Strait Islander people seeking support are entitled to choose where and with whom they receive services, especially when they are most vulnerable. This can be achieved if this work is supported by meaningful and equitable partnerships with Aboriginal and Torres Strait Islander organisations and leaders ensuring a strong, consistent, and appropriate service system is available to respond to the needs of our people wherever they choose to present.

Aboriginal and Torres Strait Islander people are diverse not just in culture and customs but across all aspects that make up who we are. That is why we cannot assume that a one size fits all approach will work. In line with Priority Reform 1 of the National Agreement, community-led, integrated, person-centred solutions which place Aboriginal and Torres Strait Islander decision making at the centre are essential to effective reforms.

NACCHO recommend the National Plan prioritise support to ACCHOs, and other community-controlled organisations, as key providers of health and support services to Aboriginal and Torres Strait Islander people and families experiencing violence.