T R A N S C R I P T

LEGISLATIVE ASSEMBLY LEGAL AND SOCIAL ISSUES COMMITTEE

Inquiry into capturing data on family violence perpetrators in Victoria

Melbourne-Monday 22 July 2024

MEMBERS

Ella George – Chair Annabelle Cleeland – Deputy Chair Chris Couzens Chris Crewther Cindy McLeish Meng Heang Tak Jackson Taylor

WITNESS

Associate Professor Kristin Diemer, Principal Research Fellow, Department of Social Work, University of Melbourne.

The CHAIR: Good afternoon. My name is Ella George, and I am the Chair of the Legislative Assembly's Legal and Social Issues Committee. We will now recommence this public hearing of the Committee's Inquiry into capturing data on family violence perpetrators in Victoria.

I acknowledge the traditional owners of the land on which we are meeting, the Wurundjeri Woi Wurrung people of the Kulin nation, and I pay my respects to their elders past, present and future.

I am joined this afternoon by my colleagues the Deputy Chair and Member for Euroa Annabelle Cleeland, the Member for Eildon Cindy McLeish, the Member for Mornington Chris Crewther and the Member for Bayswater Jackson Taylor.

On behalf on the Committee, I would like to thank everyone for appearing today and participating in the inquiry. We recognise that evidence to this inquiry may be distressing and urge people to reach out for support. You can contact Lifeline on 13 11 14, 1800RESPECT or the Blue Knot Helpline on 1300 657 380.

All evidence given today is being recorded by Hansard and broadcast live. While all evidence taken by the Committee is protected by parliamentary privilege, comments repeated outside this hearing may not be protected by this privilege.

Witnesses will be provided with a proof version of today's transcript to check, together with any questions taken on notice. Verified transcripts, responses to questions taken on notice and other documents provided during the hearing will be published on the Committee's website.

I welcome Dr Kristin Diemer, Principal Research Fellow from the University of Melbourne's Department of Social Work. I invite you to make a brief opening statement of about 10 minutes, and this will be followed by questions from members. Thank you.

Kristin DIEMER: Thank you. Nice to meet you all. I would also like to give an acknowledgement of the traditional owners of the land on which we are meeting today and pay respects to elders past, present and emerging.

In my statement today I would really like to focus on the data fragmentation of the system, which sort of impedes risk management, monitoring and evaluation. My background is in sociology and data analysis, and I have worked with family violence data for more than 20 years now. I have worked both with national surveys on victimisation and cohort analysis of perpetration. I have also worked with a lot of the administrative datasets that the CSA now works with. I was involved with the development of the initial family violence database before it was funded and evolved into CSA, so I am responsible for those static reports that Fiona mentioned earlier today.

Cindy McLEISH: They were good. They hit the mark.

Kristin DIEMER: They became something. I listened to the CSA session, and I do not want to repeat a lot of what she talked about today, because the whole system of CSA and the way that data can be linked together is one part of the system which is working really, really well. But the importance is what we feed into that database.

I would like to mention that I am also currently leading a Victoria-wide evaluation of perpetrator programs funded by DJCS. As part of this evaluation we are working with CSA to extract data on perpetration and also with individual agencies to look at what data they are currently collecting and how that is consistent or inconsistent between them and how that is shared. I am also working with Safe and Equal and looking at how needs can be monitored from victim safety support and risk assessment. So there is a lot of data background work I am doing.

I know that CSA spoke about the accuracy of the data—and their data is accurate; I do not want to dispute that. What I do want to focus on is how that data entry relies on the skills and knowledge of the person entering the data, and they will be variable in terms of mandatory data fields. So even the systems that are set up in terms of what they can and cannot answer or what is mandatory and then how much time they have to put extra information in will impact what we can then analyse in order to get a better picture of what is happening with perpetration in Victoria. The complexity of the issues of family violence also impacts the data captured. For example, the need to protect privacy and to protect safety of the victim-survivor may prevent some of the data being entered into the systems and, similarly, the shame of disclosure, both from the victim-survivor perspective and from the perpetration, because a lot of the perpetrator data relies on what the perpetrator discloses. Both victims and perpetrators experience fear, they experience shame and they experience minimisation and denial of what has been happening in their lives, so we will only ever have a partial picture of what has been happening. This is part of that tip of the iceberg, so even when we have people who do report and appear in the systems, we will only know a fraction of what is happening in their lives.

In thinking through the main data concerns, as we know, data will only be present for cases that come to the attention of the services. Women commonly wait between 5 to 10 years to formally disclose and ask for assistance, and perpetrators of violence only come to be known in the system when they are formally reported. It is very few men who would actually call up or find a service to ask for help or to formally go someplace and do something more. There might be a helpline, but actually to go to a service is usually after something has happened to either formally report them or there is the risk of losing their relationship. So it is significantly down the track before we start seeing them in our data systems.

There are lots of escape ramps, particularly for people who perpetrate violence, in terms of being left out of the data system. Even if they are referred on to a perpetrator program, it might be a long six-month waitlist, so there is a lot happening in their lives that we do not know about. There are a lot of reasons why they will not go to that program or they can be excused from the program, so there is that missing information from those men in between being referred in and actually coming in to a program. Then there are lots of points at which they drop out. They can be excused for not going if it conflicts with their work. It is also the case that in many cases once they get access to their children they will stop going to the program. So there is a very small portion of people that we actually know about.

In both groups there is more that becomes known over time as they become known to more services or engage with more services. Data in the service system also depends on the database and the purpose of the database. For example, with the police data most of the information collected will relate to the police performance and what they need to do and the information related to the current incident, limited to the fields that are related to their policing role. Data that is collected by the service agencies is going to be much more broad and a lot more about what they are actually doing in their life rather than what happened at that point time. They are all entering into different data systems, as you well know. I am not suggesting that we bring the data systems together, but there could be commonalities across the data systems so that we have sort of like a minimum dataset that we ask for in most of the data systems.

There have certainly been improvements over the last 10 years, and there is much more information about perpetrators that is available. Particularly with the uptake of the common risk assessment framework, or the MARAM, we know that there are common fields being collected and we know that they are being shared but the sharing is limited. Especially to the perpetrator programs, they often receive very partial data back from the information-sharing requests that they make or they receive no data back. So then the perpetrator programs are sort of isolated in what they are trying to manage or the information that they receive in trying to manage the risks of that perpetrator.

Programs that are connected to the Orange Door may receive a CIP report, or Central Information Point data report. There are often delays with that. The CIP reports are put together manually—extracted from across the datasets and put together manually—and are often delayed in getting back to the agency, and they tend to only go back to agencies that are embedded in the Orange Door. There are a lot of service providers who are outside of the Orange Door, and they have difficulty getting access to that shared data. In principle it is great, and it has a lot of the consistency of the data fields that we are looking for.

The other element is that the data sharing or the risk assessment is meant to monitor risk over time, but we do not have a system for collecting data over time. So each time that something happens it kind of goes into the system and it may overwrite what has happened before—like, 'This is the current situation.' But we do not have a data system that records, 'Well, this is where it started and where it is now' and three, four or five more interventions that happened so that you can actually monitor ebbs and flows in risk. And that is both for the survivor and for the perpetrator.

Much of what we want to know about risk is kept in text fields or case notes and it needs to be manually extracted. It is either typed into a text field, if you are lucky, otherwise it is a PDF scan, and we all know how difficult it is to search and sort for data once it is in a PDF or a JPEG. So there could be improvements to data systems. Most agencies have their own data system or some way of entering the data that then feeds into their funding data system, whether it is IRIS—for most perpetrator programs it will go into IRIS—but then there is also SHIP and there is CRIS. Then there are some that have their own data system, and then they manually extract it and send it off. Then some services have to enter into multiple datasets. You can just imagine that if you are a service provider you are limited for time that you are working with the client and you do not really want to be entering data, so there is a lot riding on your skills, your knowledge and the time you have for entering data. There are a lot of data gaps in there.

I think that is where I would like to stop my opening statement and draw attention to the diagram that I have shared with you. I want to say it is very simple—we are trying to share in a simple way—but it is actually quite complex, because nothing is a straight line. What I have got here is the survivor data management, just at the top, as a brief inclusion, and at the bottom is the perpetrator—considering if they come into the Orange Door family violence system. So they will come in, whatever service provider has referred them in will have a set of data that they will record and then the service provider will get a lot of text information that they put into their own data system. Some of that will be included in the Orange Door, but a lot of it will sit within the case management within that service system. Then they are referred on to a men's behaviour change program, and there may be a delay of up to six months before they get there. There could be a lot happening and nobody is actually monitoring, or they are kind of aware but nobody is actually managing what is happening. So there could be other incidents of abuse that occur. When they get to the men's behaviour change program they might receive a little bit of information from the Orange Door or from whoever has referred them in, but it will usually be partial and broken if they receive it. Most men's behaviour change programs collect their own risk assessment. They do not rely on anything that has been shared with them. Either it will be outdated or partial.

If they enter into a program—which is down the bottom here, the 20-week men's behaviour change program there are lots of places where they might drop out once they get into that program. Even if they are court mandated, they might just stop coming, and there is nothing we can do to force them to come. It is a report that goes to court: 'Did they attend or did they not attend?' It might impact what happens to them at court, but usually they will wait until after they have been in court and have a good excuse—that it conflicts with work or that they have received what they need from the court system.

At each of these points within the men's behaviour change program, in the beginning, in the middle and at the end, they will enter more information into their data system in a consistent way—if they have got the resources to do it. A lot of stuff can happen in between. As I said, lots of it is text that goes in. Then there are multiple datasets that it can go into, so there is not one that it goes into. Probably the one streamlined approach is if it goes into the RAMP, which is high-risk management—this red triangle at the top. If it goes into high-risk case management, then you bring together all the information, but it relies on service providers being involved, so it is intense. It is highly intense—the information comes in and they sit down and talk about what might be a high risk in that case for the safety and the accountability of the perpetrator. So that is where I will leave it, and I am sure you will have many questions.

The CHAIR: Great. Thank you for that excellent opening statement. I will start with a couple of questions before I hand over to my colleagues. One thing that you mentioned in your submission and that you have spoken about today, as have other submissions, is that incomplete nature of the data on family violence perpetrators. I am just wondering if you have some thoughts about how we can capture data on perpetrators that are not formally reported through the system.

Kristin DIEMER: That are not formally reported? It would be through perpetration surveys. I know ANROWS has just funded a perpetration survey. I literally got the invitation last week to be on the advisory panel. They are going to test one out in New South Wales. Professor Michael Flood up in Queensland will be the chief investigator on that. There have been perpetrator surveys done globally in different regions. The way that the questions are asked in perpetration surveys really needs to be done in the context of the community in which they are delivered. In Australia we have a very, should I say, high-level conversation about family violence in the community. People are well aware; they know what they should and what they should not say. So the questions you ask have to be subtle enough for perpetrators to be able to measure what might be happening without it being a question of, 'Do you hit your partner?' That is not going to get you much disclosure. So it is a sophisticated survey that needs to be developed, but it could be done, yes.

The CHAIR: You mentioned that perpetrator surveys have been done globally. Are there any good examples of this that you can point us to?

Kristin DIEMER: There is a group called What Works, and they have developed some perpetrator surveys that have been done, like, in low- and middle-income countries—and this is what I mean by the methodology is very robust but the questions would need to be redesigned for Australia. I do not know what is being planned for the ANROWS survey because the advisory group has not started, so I have not seen the questions and the way they are wording it. But I think the methodology is there; it is the design of the questions.

The CHAIR: Okay.

Cindy McLEISH: Did you say it was What Works?

Kristin DIEMER: What Works, yes. It comes out of the South African Medical Research Council. It is called What Works.

Cindy McLEISH: Thanks.

The CHAIR: Thank you.

Kristin DIEMER: I have run one perpetrator survey with Corrections Victoria here where we conducted the survey across all women and men who are in the corrections system, and we used one of these models through What Works as well as questions off the personal safety survey and the community attitudes survey. The results of that were not given to me—they were held internally within corrections—so I do not know what happened with that and what came out of it. Then we do surveys with men in men's behaviour change programs. They are already identified as a cohort of abusers, but there are tools that have been tested with them.

The CHAIR: Noting that that survey is held with Corrections Victoria, is there anything else that you can share with the Committee about it?

Kristin DIEMER: The design of it—I suppose what was interesting was when we saw the pilot data come back the women were much more likely to admit to more things that they had done than the men were likely to admit to. So that disclosure and women saying in their perpetration—we just need to be cautious about the differences between what women and men would say.

The CHAIR: Okay. That is interesting. The next question that I have is in relation to data collected through men's behaviour change programs, which I understand is often held in case notes. Can that be made more useful?

Kristin DIEMER: I think by having a minimum dataset that there are key elements that are drawn out on a regular basis, then that could be done numerically, sort of like through checkboxes. The benefit of the way that data is collected in these programs is that it is a conversation, and that is the best way you are going to get disclosures of things coming. But if there was a way for the practitioner to be able to then numerically record what has happened in that session so that it is built up into events over time rather than just one static database where you do not necessarily know what happened in relation to what and that is difficult to pull out of. I think that sort of underlying current that could be—and I am thinking that I am not going to rebuild everybody's datasets, so whether there is something that sits outside that is used for this purpose of monitoring risk and safety amongst perpetrators.

The CHAIR: Okay. Are there any standard statewide reporting tools when it comes to men's behaviour change programs that service providers need to adhere to?

Kristin DIEMER: So there are minimum standards, but they do not dictate the data that is collected. There are a lot of similarities in what most agencies collect, but the ways they do their assessments varies. You will get most of the core information, but you would not just be able to download them and match them together; you would have to do a lot of recoding.

The CHAIR: And do you think as a state we would have better data on perpetrators and people using violence if there was more standard reporting across men's behaviour change programs?

Kristin DIEMER: I do. I think then you could also embed your monitoring and evaluation—and the other point that I forgot to mention that is really missing is that we do not have those key indicators to monitor change over time to know whether the programs are working for whom. I think that programs work but it depends who is in them, who they are. They do not work for everyone. There is a small cohort of men who are ready for those programs, and we are not able to sort of monitor and evaluate that well because we do not have those markers built into the data systems.

The CHAIR: Okay. In your opening statement you mentioned that there is data going into a system that is overwritten so you are not able to build up a historic picture of one perpetrator. Just to confirm, is that data that is going into the central information point?

Kristin DIEMER: I cannot speak about how it is going into the Central Information Point because I am just not in the detail of that. But what I mean is that when they fill in case notes or if they are on system data, there might be a date and time at which things occurred but the overall general information about the client tends to be one point of information they can add to or take away from as the address changes, for example, or the relationship. They might change relationships, but we might not be able to see that sequentially over time. And we might see notes in their case notes about what has happened or what has been reported in that consultation, but we cannot necessarily get a history of how that happened in a time series.

The CHAIR: Why is that? It seems like it is a pretty basic function to be able to look at something that, say, happened five years ago and three years ago and one year ago and now. Do you know why you are not able to do that?

Kristin DIEMER: Dated system designs—the data systems were all designed usually before we had the risk assessment framework, and the old data systems are primarily built for accounting your case loads and what services you have delivered and how many you have delivered for your funding purposes. So they are not designed for risk management.

The CHAIR: Who would be using these data systems?

Kristin DIEMER: I think that the practitioners who are working with the perpetrators should have a good, robust data system, because they are probably the closest, but even then they are only receiving information that is coming from the perpetrator. Ideally you would be able to have a way of sharing or linking with the survivor network—both directions. But survivors—we need to be careful about what is shared, so they need to give permission for what is being shared. Because what can happen is if a perpetrator hears something that they think the survivor has shared, then it can come back on her and cause more harm. We also do not have a system in place where we ask permission from her what can be shared with the perpetrator's service. There is reluctance from the survivor systems to report in to the perpetrator systems because of that concern about safety risk. So she might be talking about a lot of things that are happening with him, but the perpetrator program will never hear about them. So the perpetrator practitioners are often working very blind—they have only got what the perpetrator tells them or they might have a police report, but they might not have any other information. If another incident has happened in the meantime, they will not know about it necessarily.

The CHAIR: I am just trying to understand how widespread that data system is across the state. Would you say that is a data system being used by the Orange Door or by other support agencies?

Kristin DIEMER: You mean the CIP? The Central Information -

The CHAIR: Yes, so is it the CIP that is overwriting data entries -

Kristin DIEMER: Not necessarily. No, they are all sitting separately. I think this is the thing.

The CHAIR: Just what I want to try to understand is, you know, it is concerning to hear that there are data systems being used that overwrite previous entries so that we do not understand that full picture of data.

Kristin DIEMER: So maybe I should explain it a little bit more. I think probably a better way to put it is that a practitioner can go in and update the data system with new information, but it does not necessarily mean

that they can keep—and they might have better, more, information but we may not necessarily have the historic effort over time or it might be in case notes by dates so you cannot see it numerically. Then when it gets uploaded into the system—depending on if there is already data in there for that into a wider system, so it goes back into IRIS if the client is already there—that is where it might be overwritten. So if there is address details, or it might be related to the wrong survivor—it might not have them in multiple relationships—that stuff can be confusing and complex. That is where there is that risk of it being overwritten.

Annabelle CLEELAND: Can I ask, as a supplement to that, when you are updating systems, individually do you have to do that to IRIS, SHIP, CRIS, CIP, or is it somehow miraculously perfectly integrated?

Kristin DIEMER: No it is not integrated, and not all services use all of those systems. So one service might only use IRIS. If a service is just being funded for a perpetrator program, they will use IRIS. If they are being funded for perpetrators and for family violence services, they might use SHIP and IRIS. With the perpetrator program, they will have a family safety support worker working with the partner to the man who is in the program, or hopefully if she is willing to end that, information related to her might also be in SHIP. This is also where you can have the same information going into multiple data systems and it might not be consistent in the way it is put in because the data fields are different. So then they do not merge together except through CSA. So CSA has the ability to extract it all and depending on the data linkage keys—and I do not know how the data can be linked together, the keys between them all—but they could have people in all of those data systems or with the same information duplicated or they could be related to separate incidents. It is very complicated.

Cindy McLEISH: Who owns the systems? Who owns CRIS and SHIP and IRIS -

Kristin DIEMER: They are a combination. Some are federal, like the SHIP data system is a federal system that is then licensed down here in Victoria. IRIS I think is all Victoria DFFH, and CRIS I think is DFFH. They have been doing a lot of work to improve them, it is just very complicated.

Annabelle CLEELAND: Do you envisage a centralised database that is above all and have it more integrated—so these four systems with an overarching one?

Kristin DIEMER: I do not how much it is possible to modify any of these data systems. I have been engaged with the data systems for a long time. It seems to be such a big job. What I often think about is a risk management portal that sits alongside—and maybe it is through the Orange Door—but there should be better access to it from the service providers who are working directly with the clients. I think that is where our barrier is, and that is probably the best option for having that CIP data system or the Orange Door data system that could have embedded risk management. There would need to be some real thinking about it in terms of who could access that risk management information, what could be shared, what could not be shared and those permissions granted.

Annabelle CLEELAND: Okay. Thanks.

The CHAIR: Jackson.

Jackson TAYLOR: Thank you, Chair. A bit more broadly, I note in your submission that you mentioned that Victoria's data collection and analysis is better than other interstate or global jurisdictions. Could you comment on briefly what you are referring to there, but more so focus on what you think are—and I know it has obviously been touched on, like a lot of the questions will be asked in some of your submissions already, which is greatly appreciated—the key issues and challenges that need to be overcome in the context of this Committee's work?

Kristin DIEMER: Sure. I think because we have the CSA working with all these data systems—that is not present anywhere else in Australia, and I do not know of anyplace else in the world that has something like that, bringing all these multiple datasets together focusing specifically on family violence data. So that is what I mean by we are in a better place than most globally. I think how it could be improved is by having a standardised minimum dataset. There has been some thinking around that already. The Australian Bureau of Statistics has sort of identified what they would see as a framework for family violence data, and yes, that could be embedded into each of the systems.

Jackson TAYLOR: Thank you. I know that the Chair was talking previously about men's behaviour change programs, and obviously they are a key part of intervention, particularly for recidivist offenders. We are talking a bit about how that information is shared primarily with the courts. Something that I have spoken a little bit about and seen in some of the submissions is: is there an opportunity for, in your view, and would there be benefit from, more frequent sharing of attendance, non-attendance and the type of attendance at these programs with police informants in terms of better outcomes?

Kristin DIEMER: I think the problem we have with the sharing of information is that we do not know what is going on behind the scenes when the men are not in the program. We are not having that conversation. As you can imagine, they are not going to disclose a lot of the behaviour that they are doing, and so it is very hard for a program to write a report that says that someone has improved or changed or done something better when they do not really know what is going on outside of the program—unless they are engaged with the partner. That only happens in a small proportion of cases where the partner actually wants to be involved in the support work. I talk about triangulation in my report, so that you have got this sense of between the practitioner, the perpetrator and the partner of the perpetrator sort of talking about what is happening at the home—or someone else. It does not necessarily have to be the partner.

Coming back to what you could improve in terms of reporting to the courts, I do not think with the system we have got at the moment that we can improve those court reports because it would place too much risk on the practitioner because they can only talk about what they see in the sessions.

Jackson TAYLOR: It was more about improving reporting to police.

Kristin DIEMER: To police?

Jackson TAYLOR: Because often these individuals are managed by high-risk family violence investigation units. Could that assist with ongoing risk assessment?

Kristin DIEMER: I have worked quite a bit with the police and different ways that they have reformed family violence policing. When they have intense family violence teams that are funded to actually work with, say, revisiting perpetrators, then you can actually reduce some of that recidivism. If you had a program of policing that was working actively with the perpetrator programs, I think, yes, putting information back and forth and working collaboratively. In my experience, what I have seen is that the police are often short of time, the practitioners are short of time, and so that sort of work falls through the cracks, but that is a model that could be done, sort of more community policing where you have got practitioners and police working.

Jackson TAYLOR: Thank you.

The CHAIR: Anything further for now?

Jackson TAYLOR: That is all for the moment. Thanks, Chair.

The CHAIR: Great. Chris.

Chris CREWTHER: Thank you, Chair. Firstly, I like your quote in your submission from Isaac Newton that says, 'What we know is a drop, what we don't know is an ocean.' There is another quote from a Japanese writer, Satoro, who says, 'Together, we are an ocean.' So by sharing drops of knowledge, as we are doing, I guess, through this inquiry, hopefully it will lead to an ocean of better outcomes. On that note, your submission suggests that a shared dialogue between service providers and the Victorian government on data priorities could lead to improved data collection practices and data collection tools. What should this shared dialogue look like, and can you expand upon that?

Kristin DIEMER: I think this is working with the practitioners, because on a day-to-day basis they will see the sorts of questions and information that they gather as insights or triggers into knowing that something else might be happening. I think that is what can help to build what a minimum dataset might look like or critical points for intervention. At the moment, because the systems are overwhelmed with requests for services, those points for intervention can be lost, especially in an earlier intervention where you were waiting for a crisis to occur. I think that is what that dialogue could assist with—when can we intervene earlier.

Chris CREWTHER: Thank you.

The CHAIR: Any further questions?

Chris CREWTHER: That is it for me at this point in time.

The CHAIR: All right. Annabelle?

Annabelle CLEELAND: Sorry, I jumped in earlier as well. I guess we understand a little bit more about the data flow and information flow, but what can you see that currently is not being monitored that should be monitored? Because one thing that I think is pretty tragic in all of this is just the amount of potential perpetrators that we are not connecting with this information flow. Do you see, in your experience, an area that we should be getting more information from?

Kristin DIEMER: Probably at an early intervention, when people do ask for help at an earlier point in time. we are not very good at identifying that there might be a risk of family violence happening and then being able to refer them on. The system is overwhelmed at the crisis end, and so finding a support service at an early point in time, I know that survivors really struggle with that. I think perpetrators could be supported better through the health system. I think that the health system is probably what is going to come into contact with perpetrators first, before a criminal interaction will happen, or a police or criminal justice interaction. So there is training with health practitioners, more of that to support that, and referral pathways for concerning relationship indicators could help get us in earlier. I have lost my train of thought—the first thing that you asked about?

Annabelle CLEELAND: I guess just the way that the government could be supporting the sector to collect data in areas that we have not collected data before.

Kristin DIEMER: Okay. I think that risk management that I keep coming back to is not really collected or looked at as a whole; we do not analyse it as a whole in real time. Something like the CSA has all this data and can do a lot of work at identifying profiles of who has come through the service system and at what stage in their life, but we do not have something you can access at a current point in time. The police cannot log into a system to see whether someone they have attended has popped up in a different system somewhere, that their partner has reported violence in the past, and this might be the first time the police have turned up. I think if we had something that is more in real time, and the safety and security around that, as I said, needs to be really carefully thought through.

Annabelle CLEELAND: We just heard about a MOU between CSA and Orange Door. What do you hope will be included in that information sharing that will benefit this space?

Kristin DIEMER: Hopefully all the information that comes into the Orange Door—which is meant to be a multisector database, which is something that we do not have—where if you have got the Orange Door services, which would be survivor and perpetrator, both come into that in some organisations. But you are still going to have that delay with CSA, because they will get the data on a regular basis, whether it is monthly, quarterly or six-monthly. It is not going to give you that immediate access, where a practitioner might want to find out: is this person linked in or been reported? Are there some red flags that we need think about? I think that is what is missing.

Annabelle CLEELAND: I guess just a follow-up to that. We are very focused on that justice, or the courts and crime, as the point of data collection. Are there other systems that we could be looking at to collect on people using family violence through non-justice systems? And if collected, how will this data link integrate with other datasets?

Kristin DIEMER: I think health is probably the one place and probably schools in terms of looking at children's wellbeing, how children are being affected and what they are living with and they are witnessing to abuse and violence. I think the child protection system is still not very good at looking at dads. They find it really hard to work with men or engage men. Part of it is the training. Part of it is because the way that men who are abusive have sort of gotten away with it for a long time and they often know how to evade services and systems, so they also do that with child protection. Child protection tends to fall back on the mothers, who might be trying to protect themselves and the children, and it is another avenue for not holding the perpetrators of abuse responsible.

Annabelle CLEELAND: It was mentioned earlier that some legislative barriers exist around collection of data. Can you see that in your work?

Kristin DIEMER: What comes across to me is that sharing, that privacy for sharing information. That is where I see it. But there are opportunities to share, both for children and people who are at risk. There are ways to move around that. I think it is how it is interpreted rather than the legislation itself.

The CHAIR: Do you want to go, Cindy?

Cindy McLEISH: Thank you. Good on you for developing the first lot of data way back when it needed to be done. That was an important milestone there, I am sure.

Kristin DIEMER: An important one, yes.

Cindy McLEISH: You mentioned earlier that you were doing a project for DJCS. What was that project again?

Kristin DIEMER: It is an evaluation of perpetrator programs, or men's behaviour change programs, in Victoria. We have got funding for a longitudinal evaluation. It started this year and will go through till, hopefully, 2026. We are hoping to keep extending it. What is missing in the space is longitudinal follow-up of the men who have gone through the programs to see what does stay with them and what changes over time.

Cindy McLEISH: And will you be doing interim reports?

Kristin DIEMER: Yes, we will, and we are working with CSA to extract data on the people who are in the programs throughout the evaluation.

Cindy McLEISH: I am probably going to jump around a little bit, because I wrote down things as everybody else was speaking. You were talking about the MARAM before. There is not a lot of data for the perpetrators. Is that because most of it is given from the survivors?

Kristin DIEMER: No. We have got a lot of MARAM data, but it sits in text fields in most of the databases. There are a couple of points of data that I know that they are embedding into the CIP, into the Orange Door information-sharing portal. I am not quite sure which pieces of information they are embedding into that, but most of it sits in text fields. That is part of the problem of it. It is hard to find the information.

Cindy McLEISH: Yes, especially when you PDF things, as you mentioned. What sort of relationship do you have with the Orange Door?

Kristin DIEMER: None.

Cindy McLEISH: None.

Kristin DIEMER: I have done a little bit of work with FSV, looking at what they were putting into the CIP, but that was through Safe and Equal and FSV. But I do not have any working relationship with Orange Door.

Cindy McLEISH: So more generally, when we look at practitioners on the front line who are collecting data, inputting data, do you have a sense that they really understand how that data might be used and how useful it could be down the track, or do you think it is just quickly ticking the box 'Because I'm busy'?

Kristin DIEMER: Yes, it is primarily just trying to fill in exactly what they need to fill in. We have done workshops in the past with the first family violence database, going back out to practitioners and showing them 'This is the data you put in, and this is what we can get out from it, what it means.' They found it very meaningful. But I think by and large, unless they have got someone doing data analysis within their organisation, they are very removed from the data they need to complete just for the reporting purposes—apart from their case notes.

Cindy McLEISH: If you have got turnover of staff too, you lose that continuity. You mentioned before about the men's behaviour change programs and those who are ready and those who are not ready. Why do you think they all get lumped in the one program?

Kristin DIEMER: I think because we do not have multiple programs and services to be able to separate them out. A lot of the services, or I should not say 'a lot'. Some services—we are just mapping this at the moment—have seen this problem and they have developed like a pre-program readiness. Some services are putting men through that readiness program before they will put them into the main men's behaviour change program. We could benefit from more research into that too.

Cindy McLEISH: I guess that will come out in some of your longitudinal stuff too.

Kristin DIEMER: We hope so.

Cindy McLEISH: Perhaps. If a male through this whole process, where their data is being collected, a perpetrator, and if they get a new partner, is it picked up?

Kristin DIEMER: Sometimes. So sometimes when they come into the program the family safety practitioner reaches out to the partner or the former partner, and she says, 'Look, I've finished that relationship. I don't want anything to do with it.' So she is not there to check what is happening, if he is still behaving this way. But he might have a new partner, and the family safety worker might reach out to her and ask if she wants to be involved, but of course everything is all happy at that point in time, so they usually do not want to be involved. In that instance they will be aware that there is a new relationship. But yes, it just depends if it is comes out. It is not consistent.

Cindy McLEISH: And you mentioned earlier about men asking for help. Where do they go to ask for help?

Kristin DIEMER: Very few places. Some of them will ask for help from their GP -

Cindy McLEISH: Yes. You said health practitioners.

Kristin DIEMER: but otherwise there is the Men's Referral Service or the men's helpline. They are probably the main places.

Cindy McLEISH: And do you get data from there?

Kristin DIEMER: I do not get data from there, no.

Cindy McLEISH: Does that go into the crime stats, do you know?

Kristin DIEMER: I am not sure.

Cindy McLEISH: Okay. I am all done, thanks.

The CHAIR: Great. Thanks. Jackson.

Jackson TAYLOR: Thank you, Chair. In your submission you talk about challenges to improving data systems, which seems to be a key theme of course. If you had a magic wand, what are some of the things that you would have people in government do to be able to resolve these ongoing issues?

Kristin DIEMER: I think a lot about what police do with their data systems. They have safety and security around that—you can log in in real time and see what is happening or what has been reported. I think we could do something like that where there is one database, whether it is about risk and safety or sort of an overarching system where any time a person comes into the system they are included in that dataset, and then you are very careful about who has access to it. So it might be a particular workforce that can log in and see what is happening at any point in time, or as a general practitioner if I put someone in there I could see, 'Well, there's a flag. There's something about that; they've been in the system before.' And then maybe there is a way to make an inquiry or to find out from whatever that workforce is to see, well, 'Is it the perpetrator or is it the partner or something?' We are much better at picking up red flags, and that is what is embedded in a police system.

Jackson TAYLOR: Thanks.

The CHAIR: Great. Thank you. In your submission you speak about ethical and anonymous data linkage systems that are already used in Victorian primary health networks and how these could be adopted to map

people using violence—the intersection between those two systems. I am just wondering if you can expand a little bit more on that for us.

Kristin DIEMER: I think that is similar to what I was just explaining, about how you would build a database where you would have all the practitioners or the input of each person into that database, which could then be linking people together in terms of relationships and risk. But not everybody would have access to it, so that keeps it confidential, and there would be a way of triaging what the risk is, like what we already do in the RAMPs for high risk where there are certain flags or indicators that you pay more attention to and maybe you do a secondary risk assessment with that person. I do not know if that explains it well enough, but it is kind of like its own dataset that has a very high level of access to it.

The CHAIR: When you are looking at connecting that perpetrator data with victim-survivor data to monitor risk and impact—and this is pretty similar to what you have just taken us through—do you see creating that dataset as that practical way for that ongoing monitoring of risk?

Kristin DIEMER: If you want something that is live and in real time, I think that is the only way you can do it. You have to have some identifying characteristics in it so that whoever does have access at that high security level is able to do some background checks and see who is working with whom, and maybe there can be some discussions with practitioners to say, 'There are some things going on.' Otherwise all you are going to be working with is post data. While post data is important for understanding the patterns of what we are seeing and maybe looking at how we might improve service systems, if you are actually looking at reducing immediate risk, you need to be able to see what is happening now.

The CHAIR: Okay. In your submission you provide a list of data items that should be monitored but cannot currently be. How can the Victorian Government support the sector to start thinking of ways that we can measure these items?

Kristin DIEMER: I think it is reviewing each of these data systems where we do have perpetrator data going in or survivor data going in, to see, ideally, if they can be set up with a better interface that makes it easier to enter the data and with these minimum data fields in there, and probably training of the supports or funding people to actually put data in.

The CHAIR: And on that family violence minimum dataset, is there anything else that you can expand on here to help enhance our understanding of what you are proposing?

Kristin DIEMER: I would be proposing consistency in the first instance: consistency of the things that we do collect that are common—so the way that we record age, the way we record risks—and then the actual risk indicators that are in our risk assessment framework.

The CHAIR: Okay. Thank you. Any further questions?

Annabelle CLEELAND: Is there something that you want to get on the record or mention or raise for our attention down the track that we have not asked?

Kristin DIEMER: Not that I can think of at the moment.

Annabelle CLEELAND: Obviously you are very switched on with the inquiry, so if down the track you want to guide us further with some of your feedback and observations, please reach out to the secretariat or us. We would be really grateful for your expertise and guidance on this as well.

Kristin DIEMER: Great. Thank you.

The CHAIR: Cindy.

Cindy McLEISH: Just a couple of really quick ones. You mentioned age. Now, I thought 'age' is 46 is 46, but is it sometimes done as 40 to 50 or 40 to 49—something as simple as that?

Kristin DIEMER: Yes. Sometimes they will put date of birth in, but that might not be completed, and then they might not have age or they might have it in bands that are different across the data systems.

Cindy McLEISH: Yes, so having that mandatory field the same -

Kristin DIEMER: Yes, the same—that is what I mean by making them consistent so that when you are collecting relationships you have the same sorts of relationship categories in each of the databases and you use the same age categories.

Cindy McLEISH: Same terms, common terms—consistency.

Kristin DIEMER: Same terms, common terms, yes.

Cindy McLEISH: You also mentioned there are a couple of escape ramps for perpetrators—you know, once they get the kids back or if it interferes with work. Is that also for court ordered –

Kristin DIEMER: Programs.

Cindy McLEISH: So if the court orders you to go and do -

Kristin DIEMER: You might be assessed out. You might not be suitable. So even if you are court mandated to go into the program, there are some men that just are not suitable. They might be drug and alcohol affected or mentally they just might not be in the right place to do it. So that is one. Then there is –

Cindy McLEISH: Doesn't a court know that?

Kristin DIEMER: They may or may not until they are actually assessed. But work is another one—if the times of the programs interfere with work, it can be a reason for not doing it.

Cindy McLEISH: So then they are kind of lost to even the longitudinal studies.

Kristin DIEMER: Yes, that is right.

Cindy McLEISH: Thanks. That is it, Chair. Thank you very much.

The CHAIR: Great. Thank you. Kristin, thank you very much for appearing here today and for your contribution to this inquiry. The Committee greatly appreciates the time and effort that you have taken to prepare for today but also the submission that you made to the inquiry. Thank you very much for appearing.

I thank the other witness from earlier today who gave evidence to the Committee, as well as Hansard, the Committee Secretariat and security. I declare this hearing adjourned.

Committee adjourned.