

TRANSCRIPT

LEGISLATIVE ASSEMBLY LEGAL AND SOCIAL ISSUES COMMITTEE

Inquiry into capturing data on family violence perpetrators in Victoria

Geelong—Wednesday 7 August 2024

MEMBERS

Ella George – Chair

Annabelle Cleeland – Deputy Chair

Chris Couzens

Chris Crewther

Cindy McLeish

Meng Heang Tak

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WITNESSES

Bec Wilkin, Acting Executive Manager, Client Services, and

Lauren Famulari, Manager, Evidence and Strategic Advocacy, Sexual Assault & Family
Violence Centre.

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 resume our public hearings of the Committee's Inquiry into capturing data on family violence perpetrators in Victoria.

I begin by acknowledging the traditional owners of the land on which we are meeting, the Wathaurong people. I pay my respects to their elders past, present and future and extend that respect to First Nations people across Victoria.

I am joined today by my colleagues Meng Heang Tak, the Member for Clarinda; Chris Crewther, the Member for Mornington; and Cindy McLeish, the Member for Eildon. On behalf of the Committee, thank you to all the witnesses who have participated in hearings today.

All evidence being given today is being recorded by Hansard. 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 am now pleased to welcome witnesses from the Sexual Assault & Family Violence Centre in Geelong: Lauren Famulari, the Manager of Evidence and Strategic Advocacy; and Bec Wilkin, Acting Executive Manager of Client Services. Thank you very much for joining us today. I invite you to make an opening statement of 5 to 10 minutes, and this will be followed by questions from members. Thank you.

Bec WILKIN: I can jump in. First of all, I will just acknowledge that Helen Bolton, our CEO, is not here today. She was initially going to present, but she has had to take some leave unexpectedly. So you have got us—you have got me. My name is Bec Wilkin, I am the Executive Manager of Client Services at the Sexual Assault & Family Violence Centre. We are a not-for-profit organisation that provides predominantly family violence and sexual assault services in Victoria. Our main regions are the Horsham region, so Wimmera, down to Warrnambool and in Geelong. We cover geographically about a third of the state, so we have got quite a big stretch. Family violence services are predominantly in Geelong and Warrnambool, and sexual assault services are in Wimmera and Geelong.

We also have programs including the victims assistance program, which provides support to victims of crime, regardless of gender. We provide counselling support and staff at Orange Doors as well, and a legal support team in Warrnambool. In the last financial year we provided support to over 4,000 clients. Predominately those clients have come in through our therapeutic programs for family violence or sexual assault. I should also note that we provide 24-hour support in the areas of family violence and sexual assault in many of our regions. We also provide support to over a thousand victims of family violence—they include women and children. We have two women's and children's refuges, one in Barwon, one in Warrnambool, so it gives us quite a lot of insight into how these things work. We actually work with women there 24 hours a day then. The work at Orange Door is through the roof in Barwon. In our last financial year there were about 4,500 cases through our family violence program, but recent data—which I recently saw a few weeks ago—for the last financial year at the local Barwon Orange Door supported, either indirectly or directly, almost 30,000 people. They are slammed at the moment and are doing an amazing job.

Today we really want to have an opportunity to reflect our thoughts and experiences and practitioner knowledge about the focus on perpetrators. We know that a lot of our work unfairly focuses on women, on victim-survivors of family violence, and there is not enough focus on perpetrators. There are some gaps in our evidence, which we will talk about, some gaps in our knowledge base. There are certain areas that we think we can improve on in Victoria, and nationwide. Have you got anything else you would like to add?

Lauren FAMULARI: As an organisation we really value evidence across all of our service. As an organisation that is one of our key strategic objectives—to increase and enhance our evidence across all of our program areas, so that we have a greater understanding of clients in order to be able to inform both internal and external advocacy initiatives, to have some really good insight around the practicalities of capturing appropriate and relevant data, both for women and children, but also perpetrators of family violence.

The CHAIR: Thank you. The first area I would like to talk to you about is unreported family violence, so incidents that are not reported, say, through an Orange Door or through the justice system, through a court or police. Is that something that you come across in your work, people who have experienced violence who are not making an official report?

Bec WILKIN: You mean a report as far as police interventions go?

The CHAIR: A police report, a court report. What we are grappling with as a Committee is that we know that there is more family violence occurring that is not reported and is not reflected in the data. So how do we understand what is taking place outside of the data that has already been collected?

Bec WILKIN: I think that unmet need is quite important. There is a lot of misunderstanding about what family violence is. People know about family violence as physical assault, sexual assaults, and then they may not understand—they know about the highly illegal side of family violence, when people are harmed physically and sexually, but they may not be aware of coercive control tactics, which we particularly see through the family law court. So it is obviously an area we see a lot. Also there are certain demographics who may not interface with the service system at all. An example that we have noticed: we have actually partnered with maternal and child health nurses, and they are actually seeing a lot of this family violence. In Geelong they have actually hired their own family violence worker who is not attached to any funded program, but then through that program we have picked up some significantly high-risk cases, because they are likely to be in the home and that is how we are trying to pick up those unreported cases. There have been some unreported also due to fear. We know a lot of victim-survivors talk about fear of repercussions if they do report. So can they actually safely go home if they go to the police station and report the incident? There is fear of child removal, particularly around First Nations women and women from CALD backgrounds. There is a lot of intergenerational trauma, and they are terrified their children will be removed if they make a court report or any kind of legal report. We see the women that come through our refuge are often CALD women, and they are often threatened. They do not have a visa, so they are terrified that they are going to be—it is not correct.

Cindy McLEISH: So they do not have visas?

Bec WILKIN: They may not have a visa. They might be on a temporary visa, and then they have not got their permanency in Australia. Often a perpetrator tactic is to give them misinformation about their safety and that ‘Australia won’t support you. You’ll be sent home’. Making threats back home is something we hear as well when that happens—threats to family back home through associated family members, so that is another case. But you are right, a lot of things are not reported, I think mainly due to fear and knowledge of what is available and also what family violence is.

Lauren FAMULARI: Given that we also provide sexual assault counselling and therapeutic services, we operate across two different databases for our family violence case management support and our therapeutic support. So they are across two databases that do not talk to each other. What we are seeing emerge in our referrals for people coming to our service for sexual assault counselling is that there is a high co-occurrence of family violence in people’s experiences and backgrounds. However, the current database does not provide the opportunity to really understand whether that sexual assault is in relation to that family violence experience or whether it is separate to that. A lot of that knowledge we know is high co-occurrence, but actually understanding the perpetrator is really hard, because the way the database is designed is really focused on the perpetrator of the sexual assault, and the question that asks about family violence is around the client’s background. So then it is really hard as an organisation that works across family violence case management and therapeutic services to make sense of that more broadly, to understand kind of emerging trends of things that we actually might need to know about perpetrators because of the way in which our databases are designed.

We also see that a lot in the program that we have for young people around sexually harmful behaviours. There is also a high co-occurrence of family violence with that cohort of young people, but again the information is really limited in terms of accessibility around understanding that, other than that the client has a co-occurrence and experience of family violence as well as engaging in sexually harmful behaviours. And that is within an organisation that has, arguably, a really strong reach and a really strong access to lots of different information. However, we work across five different databases across all of our service areas, and neither of them talk to each other and each has different categories of information that we collect around perpetrators, particularly of family violence. All we can kind of speak to is that there are high rates of co-occurrence. Any useful

understanding of that any further than that is really limited because of the databases that we currently operate within.

Also, for our therapeutic services a MARAM, for example, is not embedded into the current system, so we cannot even correlate that data across our other family violence services, even though we know that a lot of people that come for support in our organisation will receive a family violence case management support as well as a therapeutic support. But currently there is no streamlined way that we can make sense of any trends across those service areas, and that is just within our own organisation, let alone across other service areas.

The CHAIR: Yes. So what would it take, Lauren, to bring those five databases that you are using together?

Lauren FAMULARI: A CRM.

The CHAIR: And is there a benefit to doing so?

Lauren FAMULARI: There is, absolutely. Obviously my team is tasked with looking at organisational data trends across all of our service areas, but the way in which they report and they collate is really different. So then making any meaningful interpretations or any meaningful understanding of what we are seeing is really hard, because the data actually does not align and does not talk to the same issues. A CRM that talks to all of those systems would be of benefit; however, there are restrictions. So with our VAP, our victims assistance program, as well as our legal services, they are kind of governed by different government departments, and access to those systems is restricted to that particular program area. So actually there are other things in place that prevent organisational oversight across all of our databases because of different bodies that we have and arrangements we have.

The CHAIR: The next question I am going to ask you is quite complex, so please feel free to take it on notice if you would like to come back to us. I think it would be really beneficial for the Committee to get an understanding of what some of those barriers to having one CRM are and some of those, as you mentioned, different departments governing different elements of your service delivery. Understanding what maybe some of those legislative barriers might be—that would be helpful for us.

Cindy McLEISH: Excuse me, Chair. Can I get you just to outline what the five different databases that you use are, so we are very clear on that.

Lauren FAMULARI: Yes. So IRIS is across our therapeutic service area. SHIP is across our case management service area. Then we have got the CRM, which is at the Orange Door. Then we have got the VAP database, which I am actually not sure –

Bec WILKIN: I think it is called Resolve.

Lauren FAMULARI: Resolve, okay. And then we have got the legal services database, which again I am not sure of the actual name of because we do not actually have access to it. My team is not able to have that sort of access to that, so we might have to come back to you on the name of that particular database.

The CHAIR: Yes, I think it would be really helpful if you could come back to us on just outlining those different databases –

Lauren FAMULARI: Yes, absolutely.

The CHAIR: some of the challenges and barriers to that.

Bec WILKIN: Yes, we can get back to you on that.

Lauren FAMULARI: Absolutely.

Bec WILKIN: I mean, part of my thoughts is that if we had an overarching CRM that identified persons who use violence, even if you could not drop down, then you know who else is working in that system with that person, because part of our issue at the moment is we do not know who is working with what person, even within our own organisation let alone wider organisations.

Lauren FAMULARI: And often those CRMs—I mean, there is a cost element to those, which is often prohibitive for not-for-profits, given our funding streams and models, and a huge resource change management process that goes along with the implementation of big data changes and service systems. They are sort of the more practical barriers, but we would have to come back to you in terms of the legal –

The CHAIR: And are you aware of any other organisations who offer similar services to what you offer, either in Australia or internationally, that work with one single CRM?

Bec WILKIN: I think there are a few in the sexual assault and family violence sector, because we are one of the few services that do both in the state. I am not sure who does. I am pretty sure, as other people have mentioned, we are investigating CRMs, but there is the cost impact and also we are actually mandated to use certain systems that underpin those CRMs.

The CHAIR: Okay. And just one final question from me—you mentioned that the MARAM framework is not embedded in your therapeutic services. So is that the sexual assault side of the services that you provide?

Bec WILKIN: IRIS is the program that is used for sexual assault services and, as you would have heard, other funded services. It is an incredibly old service. I think I started using it 18 years ago or 20 years ago, and it has not changed. You cannot add any documents to it or upload. There are no fields that you can add to it, as opposed to SHIP, which you can add documents to. But also the MARAM and safety planning is embedded into the actual system, so you can type straight into it and generate a document. And that can be updated in real time, because we know risk changes from day to day. So it is quite a modern system. I know there has been a lot of discussion statewide from Family Safety Victoria and our funding bodies about maybe looking at IRIS being upgraded at some point, because it does not give the information that we need.

The CHAIR: Obviously the MARAM framework is really about understanding and assessing family violence risk, but to me it seems like there is a gap where you have got a sexual assault that has taken place in that family relationship. To me it seems like there is a gap there if you are not able to apply the MARAM framework to that incident.

Bec WILKIN: We definitely have to. We are mandated under MARAM. We are considered tier 1 both for sexual assault and for family violence. We do a comprehensive assessment, which is the top level of MARAM assessment. But because it is not embedded into the system that we have to use, we have to use a paper-based copy, effectively, and save it to an electronic file, which is obviously not the best use of our time. But it is important that we do the MARAM assessment. The issue there is that data is just held in a folder and it is not extracted anywhere. Also it is not as easy to update, whereas MARAM should be something that should be live. You close it off when you are done, when you finish the MARAM assessment, but then you update it every time risk escalates or even de-escalates. So it becomes a manual processing issue. And loss of data—it is hidden.

Lauren FAMULARI: But also, just to clarify, IRIS is also used for our family violence therapeutic counselling as well, not just sexual assault, as well as our sexually harmful behaviours. So again it kind of sits across those kinds of interventions.

The CHAIR: Okay. Thank you. Chris.

Chris CREWETHER: Thank you, Chair. Just noting some of your earlier comments, we see a situation in Australia and in Victoria with modern slavery, including things like domestic servitude and forced marriage, often linked in with sometimes very severe family violence and often with CALD victims who are more susceptible due to visas, sponsorship—and their families as well are often more susceptible, as you noted. These things are often hidden in plain sight in Victoria and in Australia, and where authorities are involved it often can be immigration or the AFP. Do you find that the data from these victims and these people using family violence in these circumstances are being picked up by Victorian authorities and in Victorian data or has it been missed altogether or is there a big gap there?

Bec WILKIN: I think it is a big gap. We would only see this happen usually when it hits quite a pointy end, and usually it is when someone has entered the refuge system. That is probably often when we are most likely to see this happen. To get into a refuge is incredibly challenging because you have to hit the highest risk, have nowhere else to go and often have intersectional risks. Often someone who has got no visa and no income has

got the most to lose. Often it is not until they are so high at risk that they will actually go see a police officer or speak out, because they have got so much to lose and there are so many factors that make them quite vulnerable. So I think it is quite hidden. There is also a cultural pressure to remain in the marriage, a religious pressure to remain in a marriage. I think it is more far-reaching than we realise. When we do see it happen it has been quite extreme. And as you mentioned, it is a marriage that has been arranged or someone has come from overseas to Australia and the family violence commenced very soon after their relationship started in Australia—like almost immediately as far as the coercive control and the siloing and not allowing the person out of the home, restricting finances. Often that also affects—if any children come along with that marriage as well, then we have got intergenerational concerns. I know in our refuge we have actually housed multigenerational families because of this, because of a visa or there is a focus on ‘If you leave, I will then threaten your family’—so it might be grandma, mother and child affected as well.

Chris CREWETHER: Thank you. Time for one more? Yes.

I know your service of the Horsham area, which, as I noted with the previous witness, is where I grew up originally. Do you liaise much with schools in the area, particularly in getting referrals from them particularly where there are students who are susceptible? I know personally growing up I went to Horsham (No. 298) Primary School, which became Horsham Primary School, which was a merger of that school and Horsham North Primary School. There are a lot of susceptible students that go to that school and other, similar schools. Do you pick up much data from those schools or referrals and so on that link into your work?

Bec WILKIN: We would get referrals. I think a lot of them come through the Orange Door. We have got a very strong relationship. In Horsham I should clarify that we provide therapeutic support. We are funded for sexual assault services in Horsham, so sexual assault counselling and also support for young people who are using sexualised behaviours. We do get those referrals from the schools and keep that—in rural communities it is so important to keep relationships going with local stakeholders, and that is definitely something that happens. We also should note that we provide extensive counselling for family violence in the Horsham area, but we actually do not get funded for it. We just cannot not deliver it, because the demand is so high in the area that we just had to keep on doing it. We just ethically could not not deliver it. That is really what is happening.

In Horsham, in that remote region, we notice significant high rates of family violence and sexual assault, but we are not always seeing the throughput. Unfortunately, we know there must be a lot of people who are not accessing the service. When people are sexually assaulted, there is a service that is provided if they report it to police within 72 hours as far as having a medical response and an evidence response goes. That forensic response is actually not occurring that often, so it is quite concerning that there is an unmet need there. That is an area that we are definitely going to try to focus on in the next few years.

Chris CREWETHER: Yes. Do you find that because there are perhaps more close-knit family and community relationships there is also more reluctance to refer or come to services because of the need to try and maintain those relationships, which you might not get in metropolitan environments as much where people are more of a number, if I could put it that way?

Bec WILKIN: Yes, you are more anonymous in a metropolitan area, but there is a lot of shame attached to accessing services. It is a bit of a catch 22 in that we want to be located in an accessible area but also people then know who you are. We are located opposite the courthouse in Horsham, so people might be at court and see someone else access our service, so that is a problem, but we just cannot figure a way out of it. Also distance—people might have to drive. We do a lot of outreach, which means our workers spend a lot of time driving, but then it is how to access that service. Also, if you are, say, working on a farm, how do you make an excuse to leave safely and go to speak to someone at a local healthcare centre? It is just not as accessible.

Lauren FAMULARI: And generally if we see spikes in referrals from particular schools in the area, it can usually be mapped to someone who has knowledge of our service, so that kind of speaks to the importance of relationship building, particularly in those rural areas. If someone has knowledge and trust in our service, then generally we can kind of start to see that mapped out through our referrals from particular schools. If we are going ‘Hang on, why are we getting so many referrals from a particular school?’, it is usually because the professional that has recently been employed there has worked with our service before or has had some good outcomes for clients. It speaks to the importance of that relationship building in those particular rural areas.

Chris CREWITHER: Yes. I am sure I could ask more, but I had better pass on to my colleagues.

The CHAIR: No worries. Thanks, Chris. Heang.

Meng Heang TAK: Thank you. I have just a short extra question, following on from Chris, about clients that sought your service in terms of visas and visa expiry dates and all of that. My understanding is the sponsor would have to pass some kind of a police character reference before being able to sponsor a partner and all of that. When clients turn up, are you able to have access to those databases, in terms of the sponsor?

Bec WILKIN: No. We would not have any of that information.

Meng Heang TAK: Not even from the immigration department or the AFP?

Bec WILKIN: No, and the thing is that someone may have passed that test with flying colours –

Meng Heang TAK: Character test.

Bec WILKIN: the character test, that's right, because they may never have a criminal record. We know a lot of people are under-reporting, as we spoke of earlier, about family violence and sexual assault and other crimes, so people may not have any worries about that. But no, I have never heard of our getting that information.

Meng Heang TAK: Or signs of psychological or coercive behaviour.

Bec WILKIN: But that would be interesting.

Meng Heang TAK: Yes. Thank you. Now moving on, how can the capability or capacity or skills of service providers be improved to accurately capture and analyse data on people who use family violence?

Bec WILKIN: How can we increase our capacity?

Meng Heang TAK: That is right—and capability.

Bec WILKIN: I think our capacity is pretty strong actually. We do not actually work with people who use violence, but we do use the information gained about them in our work, so there is actually a lot of uplift. In our work in Geelong in my teams I can confidently say that they are quite strong in that area. We do a lot of information sharing and use that to assess risk, and they are very strong in looking at that. An example might be that if we have a case come through and we are concerned that he has got a criminal history or mental health, we will then put information-sharing requests out to the system and get that information, hopefully in a timely manner, to help assess risk. We can find out where he is, how he is responding—men's behaviour change might be able to tell us how his attitudes are towards women or how he is responding to the program. Is he disclosing any current risks—'I want to go; I'm feeling violent and aggressive'—those kinds of things. I think the skill set is quite high. What we experience are the barriers to getting that information.

Meng Heang TAK: Yes, all right. Chair.

The CHAIR: Thank you. Cindy.

Cindy McLEISH: Thank you. I am just going to go slightly off topic just for a second, but it is something that you have talked about. Something that is concerning me greatly is the non-permanent residents, the women who are out here on visas. I am actually really pleased to hear that some of them have made it through to refugees, because I thought that it would have been almost impossible for them to get to that point.

Bec WILKIN: I think there is nowhere else to go.

Cindy McLEISH: I know, but for them to even somehow work out that they can get there is pretty amazing.

Bec WILKIN: Cindy, I have got one story that resonates with me a lot. One woman kept a diary on scraps of paper and collected it all. Every time there was an incident she wrote it down. She had the foresight to do that, so when she left—she knew that she was at such a high risk—all she had was the bits of paper and a few photos, because she could prove that she was married to him and she could prove some evidence of her ID, and

she took that to the police station. That is what she had, and we were able to support her from then on. But there are not a lot of other places to go. If someone does not have an income –

Cindy McLEISH: No. I hear too many terrible stories. Is there any way of quantifying –

Bec WILKIN: I do not know if you would ever know. I know most refuges would say, ‘We access specific funding for women who don’t have visas.’ Most refuges will have at least one woman—we have six units at our refuge in Geelong and we always have at least one woman there with no visa. What we have to provide is all her needs—her financial needs, medical needs, everything.

Cindy McLEISH: Yes, they have nothing.

Bec WILKIN: Yes, and people on visas also cannot even get ambulance cover, they do not have healthcare cards, they do not have all the extra things that come with that.

Cindy McLEISH: Then it is the threat that ‘You’ll go home or else all of these things will happen’.

Bec WILKIN: Absolutely. It is a threat that is false, in that the Australian Government will support people. But if you are isolated, do not speak the English language and do not have access to documentation, how are you going to know that?

Chris CREWITHER: It sometimes depends on the training of the immigration officials as well, as to whether they are providing support or recognise that the person needs support.

Bec WILKIN: Yes.

Cindy McLEISH: Now, I know that you do the work with those that have suffered the sexual abuse and not so much with the perpetrators, but what sort of data do you think should be collected on perpetrators? What do you think? You would hear stories from people who access family violence and sexual assault support, and the things that they would tell you. What is the important data that should be captured? It is easy enough to get your date of birth and country of birth and things like that, but what about the real nitty-gritty that helps us better understand the risk profile of somebody?

Bec WILKIN: When you are doing a MARAM risk assessment you do actually capture a lot more than demographics, so you do capture mental health history, drug use, AOD use, access to weapons, history of violence –

Cindy McLEISH: As provided by the –

Bec WILKIN: As provided by the victim-survivor, and even nitty-gritty like: how does he react around pets, is he violent towards animals, has he threatened children? We ask specific questions around sexual assault and we train our staff in how to do that in a way that will provide a response, because for an outright question you will get a ‘No’ usually. Choking is always asked about, because we know it is a significant risk factor and an escalating problem, particularly around young people and sexual violence. We do ask lots of questions that are quite broad, and the staff are trained to ask questions in quite a conversational manner, but that is not the only thing in a risk assessment. Then we will do family violence requests out to agencies who may know what is happening with the perpetrator. The issue is that all the agencies have different ways of getting that information to us, or even us applying for it. Police, it is through a portal; hospitals might be through a different system, and if you don’t have the right email address or the right way of asking the question it slows down the process. So there are multi factors that we look at when we are assessing risk.

Cindy McLEISH: Do you think within all of those different agencies the right data is being captured?

Bec WILKIN: I think it depends on –

Cindy McLEISH: Is it there and no-one is accessing it, or is it not there or only half there?

Bec WILKIN: I think it depends on how they are working and the person using violence. It might be your GP who is actually working with them and of course doing their normal work but maybe does not understand their responsibilities under MARAM. If someone requests, they might want to protect privacy. So that is more

the thing that we have. For example, I once put a request out to a health service asking about the mental health of a perpetrator who was actually quite violent to their mother. He was an adult person—significant mental health, quite violent. I did an information-sharing request to this agency, and that agency erroneously tried to get his consent before they gave the information. Thank goodness he did not answer his phone, because otherwise that would have put our victim-survivor's risk through the roof. I only knew that because when they sent me the information afterwards which I needed, it had a comment around 'was shared without consent because we could not get hold of him', which I was terrified about. So of course I went through the complaint process, but that is the kind of thing that we are managing at the moment. Some sectors do not understand the risk or are not applying the same lens.

Cindy McLEISH: Yet they are working within the broadly –

Bec WILKIN: Everybody has got different responsibilities under MARAM, and they may not just have an understanding of it.

Cindy McLEISH: Yes, how they can increase a risk.

Bec WILKIN: How they can make people 'at risk'—yes, that is right.

Cindy McLEISH: Yes. Okay. I was going to ask too just about the maternal and child health. That was a bit of a revelation for me, because there are not a lot of people that do get into homes.

Bec WILKIN: No.

Cindy McLEISH: And even if you are a new Australian who does not speak English, if you have got somebody coming into your home that can have a look, you have obviously got some sort of relationship here. Is that a widespread relationship, do you think?

Bec WILKIN: No.

Cindy McLEISH: Because that can give you some great risk factors.

Bec WILKIN: Yes. It does give us some great risk—and access. The other way actually, which is quite new to us, is that I met this week with Barwon Health, who have got an early years parenting service where they have a sleep school. Usually a mother will stay for a week with the child and get sleep patterns sorted. We are actually going to start co-locating there so we can start supporting anything that comes up during that process, because that is unique, again, another window of opportunity to speak to someone who actually—most likely there are going to be lots of high-risk referrals that come out of that.

Cindy McLEISH: Yes. They would be always stressed.

Bec WILKIN: Yes. And you are right. Also, we know that, unfortunately, new births, pregnancy and leaving a relationship are the highest peaks of risk of family violence.

Cindy McLEISH: Yes.

Lauren FAMULARI: But it is also another potential access point for women, vulnerable women, who you were asking about before, that do not have visas, as a way which hopefully creates opportunity to have further –

Cindy McLEISH: Yes. Having that more widespread sounds so—but I guess it is all resourcing too, isn't it, and the cooperation. Is that through the city of Geelong?

Bec WILKIN: The early years parenting service is through Barwon Health. So we are just looking at different –

Cindy McLEISH: And the maternal and child health care?

Bec WILKIN: That is through the city of Geelong. Yes.

Cindy McLEISH: City of Geelong. Yes. Okay. Thanks.

The CHAIR: Anything else, Cindy?

Cindy McLEISH: No. I think that is it, Ella. Thanks.

The CHAIR: Okay. I have got a few more that I will keep going with before we wrap up. With regard to young people, do you collect data or analyse data about young people who are using sexual or family violence?

Lauren FAMULARI: We have got data on young people that are engaged in sexually harmful behaviours. However, we also partner with Meli around the delivery of the adolescent family violence program. We do not have access to their database; that sort of sits with Meli. But we do hold information around children and young people engaged in sexually harmful behaviour. Yes.

The CHAIR: Okay. What are some of the barriers to collecting and analysing data about young people?

Lauren FAMULARI: I mean, there are a few, particularly around how we view children and young people engaging in both family violence and sexually harmful behaviours. We would not necessarily use the term 'perpetrator' to describe young people, given where they are at developmentally and that the treatment is quite different given their age and development and that it is a more therapeutic response. Systems are designed, obviously, to capture adult information and not for young people. So even with the information that we do have for children and young people, particularly around engaging in sexually harmful behaviours, a lot of the data fields and a lot of the things are not relevant, so they are just not filled out. So being able to develop an understanding more broadly that sits at just individual work is really limited. And then also often the age varies, so there is consent as well and how we use it and talk to young people. Often we need to make sure that we are doing that ethically and working with consent frameworks as well.

The CHAIR: And do you think that the Victorian Government should seek to address some of those barriers and some of the differences around data collection when it comes to adults and young people, or do you think there is good reason that there are different data points collected?

Lauren FAMULARI: In terms of how we capture data on adults and young people?

The CHAIR: Yes.

Lauren FAMULARI: The information that we capture around young people in terms of being able to inform how we work with young people, particularly that are engaging in different types of behaviours, is very different to adult and what we would need to capture. I do not necessarily know if there is a reason other than—it just seems with the royal commission that there is greater focus on the need to understand children and young people as individuals in their own right, and I actually just do not think the databases have been designed with that in mind so far. But I do think that the information we require to make sense of that work is different.

The CHAIR: Okay. You have spoken today about the co-occurrence of family violence and sexual assault. How can better collection of data around that relationship between sexual violence and family violence help form a fuller picture of the profile and volume of people who use family violence?

Lauren FAMULARI: It is so tricky to answer. It is so multifaceted because there is, one, the co-occurrence of sexual assault occurring in the family violence, but also we see emerging trends around people accessing family violence support that have also experienced childhood sexual assault. So the co-occurrence is really tricky and really hard to start to make sense of, and we do not have sufficient databases that can help us really understand those trends apart from just that practitioner experience and knowledge that actually is just held through working in the sector and understanding those trends. So I think more sophisticated databases need to be developed to be able to capture some of that co-occurrence in a more detailed kind of way.

The CHAIR: We have heard about data that is captured in case notes from some other witnesses over the course of the past couple of days, and it sounds like across the sector there is a huge amount of data sitting in case notes that cannot really be extracted or analysed because the databases do not have that capability. Is that your experience too?

Lauren FAMULARI: Absolutely. Even the databases in our current database systems: once extracted, it is a real challenge to make sense of because of the way in which we run reports and the way in which data is

different across—you cannot even align, you cannot even make sense of trends across program areas. So even just the raw data, let alone the ability to pull case notes—it is just not there, the capacity is not there.

The CHAIR: Okay. One final question from me: we have heard from some other witnesses too about the potential benefits of a national or a state-based survey that looks at people who use violence as a way to capture, record and analyse more data about the cohort of people who are using violence. Is this something that you have given any thought to, or do you have an opinion about a national population survey?

Bec WILKIN: Can you explain what that would involve?

The CHAIR: I think the best example is probably the public safety survey—either a new survey or an expansion on that that more specifically looks at people using violence.

Lauren FAMULARI: I think it comes down to determining the purpose. I do not think we have really thought that far other than the barriers to obtaining statewide data, because there is the risk purpose and then there are the characteristics, again, of perpetrators. I do not know that we are overly clear around what that then could be used for if we are wanting to get information about characteristics that are not perhaps already a part of the MARAM, because arguably across SHIP, at least in Victoria, we could probably get some of those domains. So I am not sure.

The CHAIR: I think one purpose you could identify is that not understanding the full volume of people using violence and not understanding the full cohort—because there is so much unreported family violence, what tools do we have then to really try and measure the full extent of this?

Lauren FAMULARI: So the rates more broadly that are outside of those police- or court-reported instances of family violence?

The CHAIR: I think it would cover the rates, the prevalence and the characteristics.

Bec WILKIN: It would be interesting even understanding some of the beliefs of people responding to that survey. It would be interesting how that picks up on that nuance as well. I think more data is better than less, because you are right, there are a lot of people who are not covered.

Lauren FAMULARI: But happy to take that question on notice as well and think about it further.

The CHAIR: Thanks very much.

Cindy McLEISH: Just a really quick one.

The CHAIR: Chris, then Cindy.

Chris CREWITHER: Just a final one from me, before I go to Cindy. Sorry, Cindy.

Cindy McLEISH: That is okay. It is all good.

Chris CREWITHER: What is the extent of your liaison and communications with Orange Door, whether that is in Horsham or elsewhere? Particularly, we heard on Monday from Sexual Assault Services Victoria, SASVic, and they said that the Orange Door is not taking into account sexual violence sufficiently and that SASVic cannot go and train Orange Door workers in that regard. Do you find a similar thing? Would you agree with that? What is your, I guess, liaison with Orange Door, and do you think it is taking into account sexual violence sufficiently?

Bec WILKIN: Sure. We have staff at Orange Door, and I sit on a leadership panel with Orange Door. We have got influence over the local Orange Door in Barwon because we have staff. We would not have the same degree by any means in Horsham. We also have it in Warrnambool—we have staff in Warrnambool. But you are right, the focus is on family violence. As we know, since the royal commission there has been a lot of funding and investment in the family violence sector, and I am sure that Kathleen would have spoken about the fact there is not enough investment in sexual violence as well—not to the same focus. Staff at Orange Doors, they would definitely be trained on how to ask the questions around sexual violence, but they would not have probably the knowledge about how to respond, if someone walked in and said, ‘I’ve just been sexually

assaulted,' as we do. In Barwon we are located at MDC, the Multidisciplinary Centre, so we have police onsite, sexual assault police onsite, nurses and child protection, so we can provide that wraparound response. But that is very different to the Orange Doors.

Chris CREWETHER: Yes, thank you.

The CHAIR: Cindy.

Cindy McLEISH: Mine is a quick one just relating to when you were talking about the maternal and child health and early parenting: do they have teen pregnancy programs? That might be another one where there are some high risks.

Bec WILKIN: No, but we do know that we are seeing higher trends of intimate partner family violence and also sexual violence in teenage years.

Cindy McLEISH: Yes, we have heard that a bit.

Bec WILKIN: I am sure that the perpetrator services would have spoken about that, that they are having to amend their programs to apply them to young people as well, so that is a concern. I know personally I have supervised staff who have had young people who attend the same school, and there have been intervention orders against the other party when there has been family violence as far as relationships go. That is quite a unique challenge in that young people have the right to an education. But my main concern is the safety of the victim-survivor in that circumstance. So that is quite a nuanced bit of work.

Cindy McLEISH: And that is possibly going to get worse.

Bec WILKIN: Hopefully not.

Cindy McLEISH: Hopefully not, but trends are looking bad. Thank you. It is interesting.

The CHAIR: Thank you, Bec and Lauren from the Sexual Assault & Family Violence Centre, for appearing before the Committee today and for the evidence that you have provided to us. We are incredibly grateful for your contribution.

I also thank all the witnesses who have given evidence to the Committee today here in Geelong, as well as the Hansard team and the Committee Secretariat, who have travelled from Melbourne to be here with us. And staff from the Eastern Hub, thank you very much for having us.

I declare this hearing adjourned.

Committee adjourned.