



ICN 1997

Office : 10 King St Smithton 7330 Tasmania
Postal : PO Box 335 Smithton 7330 Tasmania

Phone (03) 64521287 Fax (03) 64521187
Email: reception@chac.com.au
Web: www.chac.com.au

SNAICC
familysafetyplan@snaicc.org.au

11th November, 2024

Submission in Response to National Aboriginal and Torres Strait Islander Family Safety Plan

I write to you on behalf of the Circular Head Aboriginal Corporation (CHAC) in response to the development of the *National Aboriginal and Torres Strait Islander Family Safety Plan*. We write to you to represent the broader Aboriginal community of Northwest Tasmania and their interests as they pertain to family safety. We appreciate the opportunity to contribute to the engagement process as we see the effects of inadequate legislation, protections and services for our community every day. We have participated in a community consultation yarn on the 30th of October 2024, and this submission compliments our verbal contribution made at that consultation. We hope that the below submission will contribute to positive change for Aboriginal and Torres Strait Islander peoples living in and affected by family, domestic and sexual violence (FDSV), and our thoughts are with those people in each word we write through this submission.

We are based in a remote and rural community in Northwest Tasmania, with high rates of FDSV and a high proportion of Aboriginal and Torres Strait Islander community, so we can attest to the need for significant and meaningful change. Whilst it can largely be misconstrued, Tasmania is populated by multiple Aboriginal communities as well as a significant population of Torres Strait Islanders, it is important to acknowledge that Tasmania has complex issues pertaining to identity, acceptance and access to Culture, elements to which can contribute to the impacts discussed throughout this submission of which are unique to Tasmania.

At CHAC, we offer a small number of FDSV community support services, through our programs such as, the Youth Mental Health and Family Violence Program and Integrated Family Support Services Program, but these programs, are underfunded and under-resourced, and whilst the team in these programs do phenomenal and impactful work, they only scratch the surface of what this community needs to truly address the impacts of FDSV. When our team considered the questions prompted in the

discussion paper, it raised a number of interesting discussions but also highlighted the significant gaps and dire need for change. We will explore those questions as prompts below.

What are the key priorities and actions the Family Safety Plan should focus on to create real and sustainable change for Aboriginal and Torres Strait Islander families?

Priority 1: Adequately and sustainably fund our organisations

A key priority for CHAC and the Circular Head community is the need for Government to address funding models. Typically funding models operate for 12-36 months, with complex KPIs that do not address the true needs of community, but seemingly broader Government tokenistic goals. To create real impact in the FDSV space, funding models need to be longer-termed with 5+ year funding. Funding needs to be tailored to and acknowledge community differences and needs; this includes the need for appropriate allocation of staff under the funding. For example, for many years and still today, our Youth Mental Health and Family Violence program as funded by NIAA, allocates enough funding for one full-time employee, posing several issues; firstly though, that that staff member is placed in a high-risk situation both physically and mentally by working in a high-risk environment unaccompanied. To counter that inadequacy, CHAC outsourced private funding in this space to the Paul Ramsey Foundation to fund an additional part-time employee in this space. The additional staff member ensures that those staff members can support one-another in those high-risk situations, we are able to reach more families and are able to provide a consistent service. The same cannot be said for the Integrated Family Support Services Program which is only funded for one full-time employee who needs to rely on support from internal programs (at the cost of CHAC), to facilitate in-home visits safely, of which is a principle KPI of the program. The inadequacy of KPIs is evident in that example alone. Funding models need to be more weighted toward meaningful and effective impact rather than statistics and numbers as per the KPIs. For real impact, support and healing to be facilitated often requires a one-on-one time commitment with a client, but that impact is not measurable by a KPI. The current funding models focus on quantity rather than quality. Qualitative measurement could be a better way forward, and one that can focus on need. Furthermore, for funding models to truly be considerate of and adequate for Aboriginal and Torres Strait Islander communities, Culture needs to be at its core. Connection to Culture, Community and Country are key approaches for community to heal and find support. Facilitating the function and connection to these core elements would create greater impact and stability for community facing FDSV. Additionally, funding models need to look at what additional costs need to be considered to successfully operate the program, there is of course the administrative costs, which for ACCHO's can be quite high (i.e. large building to facilitate individual offices to offer confidential and safe spaces for clients, and well as large capacity spaces for group programs), but also the cost to staff who are

working in these spaces. All funding, not just FDSV funding should consider a % to go toward mental health and wellbeing for staff. In these support service roles, the emotional toll can be cumbersome, impacting the ability to deliver the service, combine that with the burden some of those staff endure who are working with lived experience, can be un-manageable without appropriate support. Without sufficient funding the organisations cannot provide the necessary support services, i.e, dedicated counsellor, or wellbeing space.

Priority 2: Legislative Reform

For Tasmania specifically, the urgency to review failing and inadequate legislation, such as the Family Violence Act 2004, is another key priority. In the Family Violence Act 2004, *family violence* means – “... conduct committed by a person, directly or indirectly, against that person’s spouse or partner...” This Act only “protects” intimate partner violence and does not consider the broader family network and if that violence is perpetrated from or to a different member of that family network, i.e. son to mother or vice versa. The definitions of family violence need to be broadened to factor all familial relationships and thus possible victims and perpetrators. This also needs to be inclusive of carers in that domestic setting. Tasmania are far behind other State’s progress in this area and the Tasmanian Government should be held to account for that.

Priority 3: Broadening the definition and understanding of FDSV

The terminology that is used in relation to FDSV by the Government, media and public is also one that needs to be addressed. Commonly, the understanding of “violence”, is generalised as physical violence, and therefore limits people’s awareness of violent situations, including the perpetrators understanding or awareness of their own behaviour. The onus needs to be on the Government to educate public on the meanings of FDSV and what behaviours constitute that, i.e. coercive control and emotional violence. A suggestion could be a government run nation-wide campaign, similar to the current “consent campaign”, to educate all on what behaviours are considered as family violence. What’s more, a change in the terminology could assist in the re-education and understanding of what FDSV means and could equally make it more inclusive of that entire family network. For example, “domestic abuse”, could be a more applicable term as the term domestic applies to all under that “home” environment, however that home may look and whomever may sit under it. Equally, the term “abuse” is broader and therefore more likely to be associated with more types of violence, especially those non-physical forms of violence. Education campaigns should be co-designed/co-developed with Aboriginal and Torres Strait Islander ACCOs and victim-survivors to ensure that they capture the nuances of experiences in a culturally informed and sensitive way.

Priority 4: Address police education and responses

There is a significant need to address police education, attitudes, responses and resources to make effective changes in this space, particularly for our small rural and remote area. Our police force is already understaffed and cover a large area, impacting their ability to respond effectively to FDSV call outs. What's more the education and training provided to our police is severely lacking regarding FDSV. It'd be our recommendation that the area, and all rural and remote areas, there is an allocated FDSV specialised police officer. We have instances in our community where we have had a young person report a FDSV incident(s) to police, and yet, that young person did not receive any follow up or any action at all regarding that report and was sent home into an unsafe environment. Examples such as this demonstrate the inadequacy of training, understanding and resources to address FDSV events, of which further contribute to youth distrust and animosity toward the police force, a symptom likely to carry on to adulthood. This fear and distrust of police, or even further to people of authority, can perpetuate into adulthood more severely to child sexual abuse victims, if that person(s) equally failed to protect them. The first priority for police should be to respond effectively to report from children and young people, provide a safe home for that child, and additional credence should be given to child testimony to such occurrences. If that child feels that their testimony was not believed, or given any credibility, then they are likely to internalise that trauma leading to ongoing issues of consent, self-harm and mental health impacts. Particularly when coupled with issues of identity, self-worth and acceptance for Aboriginal and Torres Strait Islander children.

Priority 5: Systematic responses must be holistic and culturally sensitive

Another key priority to consider, is the way in which the system works for victims of FDSV and thus their likelihood to escape it, remedy it, or even report it. For example, the onus is placed on the victims to leave that domestic setting to escape a violent situation, i.e, home relocation. For those instances of a woman with a family, that would then require the majority of that family network needing to relocate into either crisis accommodation or alternative accommodation options. This burden is incredibly cumbersome especially when the non-existence of local crisis accommodation, absence of public transport and lack of affordable housing are taken into consideration. With this stacked against you, it is unlikely that a victim would consider it an option to report or escape a violent situation out of fear of homelessness and the over-arching need to care for one's child(ren). The onus needs to be shifted to the perpetrator to relocate until such a time to be rehabilitated or invited back into the home. This would increase reporting but could equally act as a deterrent for perpetrators. Furthermore, in these crisis accommodations for perpetrators, there is the opportunity to provide a holistic support service with rehabilitation and trauma therapy services which would henceforth, facilitate the success of them rejoining the family home if invited to do so. This model would support the entirety of the family network.

There has been success in other States following this model of holistic care for the entirety of the family, for example in New South Wales with the Deadly Connections program where lived-experience men support perpetrators to understand their behaviours and to understand what trauma or situation may have led them to behave in that way, to then truly work toward rehabilitation. Closer to home, the South-East Tasmanian Aboriginal Corporation ran a similar program but that was defunded by the Government, another testament to the detriment short-term funding or KPI specific funding can have on true and meaningful impact in this space.

If there were no barriers, how would your community address FDSV?

In truth, money/funding is always our biggest barrier for creating change, so without that barrier in mind our team spoke of a holistic healing centre that could support Aboriginal and Torres Strait Islander families in a person-centred, trauma-informed, culturally sensitive way. A purpose-built Healing Centre that connects to Culture and Country as methods of healing, rehabilitation and of course, support. It would have crisis accommodation, transition housing, family violence specific counselling services, sexual violence support services, specialist practitioners, therapeutic approaches, parental support, home skills support, prevention programs, internal references to support programs, support staff that are dedicated to each family member, including the perpetrator, and is, in all, a safe space. It would be peer-run, so operated by CHAC for the community, to support families holistically to get back to a safe family home.

What does culturally appropriate and holistic service provision look and feel like?

Culturally appropriate service understands that connection to Culture is key for healing in all facets, it understands that Culture and what practices helps to facilitate that. It, in turn, empowers Aboriginal people to embrace Culture as a form of healing and form of safety. Connection to Culture is connection to Country and Community. Holistic service is as mentioned above, where Culture can be embraced, and every member of the family is supported through every facet of their life and self-determination is prioritised. CHAC essentially have that now, with the array of services that we offer, but not enough of it, and often not in the right ways, as mentioned with the barriers around Government funding. We of course need to build on this in ways such as supporting men, and accommodation assistance. A holistic service should be able to refer internally, keeping the trust of that client and family, and importantly keeping them on Country, and connected to Community.

How can governments and mainstream services best support Aboriginal and Torres Strait Islander people (including workforce and clients), services and solutions?

This question has likely already been answered in the above, but to reiterate, funding models need to be person-centred and qualitative, they need to focus on meaningful and impactful support rather than numbers. This is achieved through adequate staff ratios, adequate training, adequate funds for service provision, and adequate supplementary funding to support the support staff to ensure workforce safety and sustainability. Supporting Aboriginal people can often be as simple as keeping services local so that they can feel safe on Country and in Community. In a rural and remote community this is too often the biggest barrier for Aboriginal people. This barrier extends to the acquiring of trained Aboriginal staff for that peer-support. With local education and training opportunities extremely limited, this is a barrier that will stop Aboriginal people from skilling into those needed support roles, such as social work.

Connection to Culture is equally as important for staff as it is to provide for clients and families, so that they are at their best to provide the best support. Caring for their mental health and wellbeing, through Culture, or through mainstream services should be a priority for Governments, otherwise it will not matter what funding model is applied if the staff are not well enough to fulfill it.

Governments need to ensure that they are listening to Aboriginal solutions to Aboriginal problems. We know what is best for our community and how best to provide it, they need to trust that we can deliver that and not be governed under “white models”. If they are not prepared to deliver those real solutions, then the model is simply tokenistic.

How should the service system respond to the intersectional needs of Aboriginal and Torres Strait Islander people and communities?

By listening to Aboriginal solutions, allows us to guide the direction of the funding models, and empower us to fulfill those within our community. Intersectionality can be addressed through holistic service provision as mentioned above, where internal referrals are essential to addressing the complex needs of each member of the family with however many specialist support staff necessary. This should mean that one person can be working with a team of people for different reasons, but that team is through the one trusted service.

Ultimately, by addressing these issues would be in alignment with meeting Outcome 13 of Closing the Gap. Taking – and following – the advice from Aboriginal and Torres Strait Islander communities on how to best address the issues affecting them and the best practices for healing and change are the only real way that the Government will progress toward its target to reduce abuse by 50% and progress towards zero. Furthermore, the need to address FDSV rates in Australia is fundamental to Australia’s commitment under the UN Declaration on the Rights of Indigenous Peoples, which sets the framework of minimum standards for survival, dignity and wellbeing. Particularly in this case, in relation

to Article 7 which attests to the rights of Indigenous peoples to have the rights to life, physical and mental integrity, liberty and security of person. To live in a safe and secure home is a fundamental human right, and one that as we know, is disproportionate for Aboriginal and Torres Strait Islander peoples in Australia. By addressing the above, we will work together as a nation to restore that fundamental right to Aboriginal and Torres Strait Islander peoples.

I thank you for taking the time to consider our points mentioned above and I hope that they help to guide and inform the progress of this Plan.

Kind regards,

A handwritten signature in black ink, appearing to be 'Rochelle Godwin', with a long horizontal flourish extending to the right.

Rochelle Godwin,
Communications and Engagement Manager,
Circular Head Aboriginal Corporation