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Closing the gap clearinghouse

Family violence prevention programs in Indigenous communities

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Summary

What we know

- Family violence needs to be understood within broader contexts as both a cause and effect of social disadvantage and intergenerational trauma, poor parenting, and substance misuse. It remains a critical social policy issue, placing a huge burden on communities, especially women and children.
- In common with other colonised people, the negative legacies of past government policies and historical events in Australia persist in the form of intergenerational effects on parenting, relationships, and substance use. Contemporary efforts addressing these consequences are likely to help prevent family violence.
- Levels of Aboriginal and Torres Strait Islander family violence are likely to be under-reported, due to the complexity of different forms of primary health response, significant under-reporting to police by victims, and irregular collection of perpetrators' cultural backgrounds in data sets.
- The Australian Burden of Disease Study found that intimate partner violence contributed 1.6% to the total burden of disease for Indigenous Australians. This was 5 times the disease burden rate for non-Indigenous Australians.
- National survey data shows that nearly one-quarter of the Indigenous population aged over 15 reported they were a victim of threatened or actual violence of any type in the previous year. Indigenous Australians are also more likely to be re-admitted to hospital as a result of interpersonal violence than other Australians.
- In 2014–15 the age-adjusted hospitalisation rate for non-fatal assaults from family violence for Indigenous women was 32 times the rate for non-Indigenous women.
- Overall assault rates vary by geographic area and were highest in *Remote* and *Very remote* areas and lowest in *Major cities*.
- Although relevant national policies and plans are in place, the scale and scope of this issue suggests the availability and range of programs need to be expanded, especially in *Remote* areas.



What works

- The evidence remains inconclusive on what action works in reducing Indigenous family violence, as there have been too few adequate evaluations, but there are some clear principles and components for successful programs.

Indigenous specific

- An independent evaluation in 2012–13 of the Alice Springs Domestic and Family Violence Outreach Service in the Northern Territory found that although it was a small program, it had been successful in making Alice Springs town camps safer. It was awarded a National Certificate of Merit at the Australian Crime and Violence Prevention Awards.
- An independent evaluation of the long-term, government-funded Cross Border Indigenous Family Violence Program in several communities and 3 jurisdictions used limited linked, criminal justice data. The evaluation found some reduction in reoffending and recidivism, and that the program had been cost effective, given the costs of imprisonment and health care for victims.
- An evaluation of the Aboriginal Women Against Violence Project found that it demonstrated good practice, in a respectful and inclusive way. The project trained local Indigenous women in western Sydney to become mentors, and established an Aboriginal Women Against Violence Committee.

Other

- Using a comparison group, an evaluation of the mainstream Australian school-based program Respect, Protect, Connect found an improvement in the attitudes of the boys who took part in the program. All of the young people who were interviewed found the program to be beneficial. It is not known whether any Indigenous students took part.
- An international review of evaluations of programs to prevent intimate partner and sexual violence found that rigorous evaluations had shown the following 3 school-based programs to be effective:
 - Safe Dates (United States)
 - The Fourth R: Skills for Youth Relationships (Canada)
 - Youth Relationships Project (Canada).

Principles for success

- Practitioners considered the following principles to be important for the successful implementation of Indigenous family violence prevention programs:
 - community development principles, such as community ownership and control of programs wherever possible or appropriate, and responsiveness to local conditions and contexts
 - local cultural appropriateness (that is, sound communication ability, and sufficient levels of flexibility and adaptability to respond to changing circumstances affecting target communities, such as: cultural obligations, competing priorities facing participants and communication barriers)
 - integrated program development and implementation, involving government, non-government organisations, Indigenous organisations, and Elders
 - long-term sustainability
 - a holistic focus (dealing with underlying trauma and their antecedents), and a flexible approach that takes into account the complex and multiple factors that contribute to the occurrence of Indigenous family violence.



What doesn't work

- Interventions that view family violence in Indigenous communities as a singular and isolated problem, without taking into account the multiple, inter-related contextual factors that contribute to it and flow from it do not work.
- One-off interventions that are not sustained do not work. Evidence demonstrates that repeated programs are far more likely to take hold and succeed.

What we don't know

- Although local, community-owned programs can be considered most effective, their robust evaluation can be difficult. As data on family violence is expected to improve over the next decade, there is considerable scope for additional evaluations to be done.
- The scale and extent of family violence is not known. Some data show it might be growing, while other data sources show it might be declining slightly. Statistics reflect a growing awareness and lack of tolerance of violence, as well as better data collection and identification of Indigenous status in data sets.
- The effect of Indigenous family violence prevention programs in remote communities is difficult to gauge, as family violence rates are difficult to ascertain by region. As a result, systematic evaluations are critical, using linked data that include perpetrators' subsequent behavioural patterns.
- As some widespread community-based programs appear more effective in reducing recidivism of violent offenders in some locations than in others with similarly profiled men, further investigation is needed to better understand local and contextual factors.

Introduction

Family violence is a very serious and widespread issue in Australia, and has become an area of growing public concern, and a key priority area for Australian and state and territory governments.

Poor family functioning and parenting can have considerable negative impacts on children (Silburn et al. 2006). Several published reviews conclude that children affected by family violence can have inadequate brain development, which affects every part of their functioning (1800 RESPECT 2014; Atkinson 2013; Carpenter & Stacks 2009; Edleson 1999; Humphreys et al. 2008; Kitzmann et al. 2003; Sety 2011).

Adverse effects can include depression and anxiety, cognitive functioning, developmental delays, and poor academic performance. Further, for older children and women, they can include sexually transmitted diseases, substance use, homelessness, and poverty (Hovane & Cox 2011). It can also force children into safe refuges or the care of relatives.

As acknowledged by several Prime Ministers, and documented in previous Clearinghouse publications (see for example, Atkinson 2013), Indigenous families and family/clan structures were severely damaged by past government policies and the colonial legacy (Haebich 2000), the consequences of which may still be evident.

Research in Australia as in other colonised societies has linked a collapse of traditional Indigenous institutions and roles to contemporary patterns of destructive behaviour, such as heavy alcohol consumption by a minority of Indigenous men and women. This in turn, is frequently associated with incidents of extreme interpersonal and intrapersonal violence and self-harm (Chandler & Lalonde 1998; Radford et al. 1991). Family violence therefore can be seen as both a cause and effect of social disadvantage and intergenerational trauma.

Family violence prevention encompasses a wide range of strategies intended to: shift attitudes and social norms that support violence; challenge unjust power relationships that sustain violence; address the social conditions



associated with violence; and promote non-violent norms. Effective programs can help to reduce and prevent family violence in Indigenous communities.

This resource sheet examines the extent of the problem, and explores some programs that have been trialed in Indigenous communities to reduce family violence. It also examines non-Indigenous-specific Australian and international programs. It identifies practice principles that contribute to the successful implementation of policies, and the methodological rigour of program evaluations.

Background

The spectrum of interpersonal and family violence

The extent of Indigenous family violence is difficult to determine, due to the complexity of different forms of violence and of primary health response, the significant under-reporting by victims, and the irregular collection of perpetrators' cultural backgrounds in data sets (for example, in clinics or accident and emergency services). The Productivity Commission's *Overcoming Indigenous disadvantage key indicators 2014 report* (SCRGSP 2014) noted that a lack of a nationally agreed definition and inconsistency in methods of data collection affect the quality and comparability of data on family violence.

It also notes that hospitalisations correctly attributed either to Indigenous Australians or to family violence are likely to represent an under-count (see also AIHW 2013).

As family violence is a subset of interpersonal violence, it is often hidden within discussions of assault and the burden of injuries on health systems and communities—or in its most extreme forms, of deaths from external causes. Therefore it is necessary to consider the various dimensions in a broader public health perspective.

Burden on populations

The Australian Burden of Disease Study found that intimate partner violence contributed 1.6% to the total burden of disease for Indigenous Australians (AIHW 2016a). This was 5 times the disease burden rate for non-Indigenous Australians. Intimate partner violence was the leading contributor to the burden of disease for Indigenous females aged 25–34.

Self-reported data from the 2014–15 National Aboriginal and Torres Strait Islander Social Survey shows that nearly one-quarter (23%) of Indigenous adults had experienced physical or threatened physical violence in the previous 12 months (ABS 2016c). Both Indigenous and non-Indigenous women experience physical assault and sexual assault at higher rates than men.

In relation to homicides, the victim and offender were intimate partners in over half of 24 Indigenous homicides in 2013–14 (SCRGSP 2016).

Hospitalisations

Hospitalisation statistics include both overnight and day-only hospitalisations, but not emergency department attendances. It is believed that Indigenous Australians are less likely to disclose family violence than non-Indigenous Australians, with one study arguing that close to 90% of violence against Indigenous women is not disclosed (Willis 2011). For these reasons this resource sheet draws on a wide variety of literature and data sources, and outlines the various terms used in the literature in connection with this topic to assist future research.



Nationally in 2014–15, after adjusting for different population age structures, the Indigenous female hospitalisation rate for non-fatal family violence-related assaults was 32 times the rate for non-Indigenous females. Between 2004–05 and 2014–15, after adjusting for differences in population age structures, for New South Wales, Victoria, Queensland, Western Australia, South Australia and the Northern Territory combined, hospitalisation rates for family violence-related assault for Indigenous Australians were between 25 and 35 times the rate for other Australians (SCRGSP 2016).

The effects on children are evident in various ways. Of particular concern are the rates for non-fatal hospitalisation (per 100,000 population) for family violence-related assaults. Data for 2012–13 show that Indigenous boys were 6.5 times as likely, and Indigenous girls were 12.3 times as likely to have been hospitalised for family violence-related assaults as their non-Indigenous counterparts.

For Indigenous children aged 0–14, 58 Indigenous boys and 77 Indigenous girls per 100,000 were hospitalised for family violence-related assault, an overall rate of 68. In comparison, the rate for non-Indigenous boys was 7, while for non-Indigenous girls it was 6.

The rate ratios increased with age into the middle age ranges. Indigenous young people aged 15–24 were 22 times as likely to be hospitalised for family violence assaults as their non-Indigenous counterparts, while Indigenous Australians aged 25–34 were 46 times as likely to be hospitalised. For those aged over 65, however, were 10 times as likely to be hospitalised (SCRGSP 2014).

Geographic contexts of Indigenous violence

Jurisdictional variations

The *Overcoming Indigenous Disadvantage* (SCRGSP 2016) report found that in 2015 an estimated 6,350 Indigenous females were victims of physical assault in the 3 jurisdictions for which data were available (New South Wales, South Australia, and the Northern Territory). Of these, on average, more than 90% knew their offenders.

The victim's partner was responsible for between 37% (New South Wales) and 55% (Northern Territory) of these assaults, while other family members were reportedly responsible for between 23% (New South Wales) and 14% (Northern Territory). These female victims represented between 65% (New South Wales) and 76% (Northern Territory) of all victims of family violence-related assaults in 2015 (SCRGSP 2016).

Remoteness

Assault rates vary substantially by remoteness. Between July 2011 and June 2013, hospitalisation rates of Indigenous Australians for assault were highest in *Remote* and *Very remote* areas (28 and 23 per 1,000, respectively), and lowest in *Major cities* (4 per 1,000). The hospitalisation rate for assault for Indigenous Australians in *Remote* areas was nearly 7 times as high as the rate in *Major cities*. For non-Indigenous Australians, rates were also highest in *Remote* and *Very remote* areas (both 1.4 per 1,000) and lowest in *Major cities* (0.7 per 1,000). After adjusting for age, the Indigenous rate in *Remote* areas was 20 times as high as the non-Indigenous rate, and 16 times as high as the non-Indigenous rate in *Very remote* areas (AIHW 2015).

Use of specialised homelessness services

Domestic and family violence is a major cause of homelessness in Australia. Many people who leave home because of family or domestic violence need specialist accommodation services, such as safe houses. In the specialist homelessness services data collection for 2011–12 to 2013–14, 19,601 Indigenous women indicated they had experienced domestic and family violence (AIHW 2016b).



The specialist homelessness services data for 2014–15 showed that:

- The age-standardised rate of female Indigenous clients aged 10 and over escaping family violence (227 per 10,000 population) was nearly 9 times the rate for non-Indigenous clients (26 per 10,000 population).
- The most common main reason both Indigenous and non-Indigenous Australians sought specialist homelessness services was accommodation difficulties (37% and 36%, respectively), followed by domestic/family violence (24% for both groups).
- The proportion of Indigenous clients who sought assistance due to domestic/family violence rose with increasing remoteness (from 32% in *Major cities*, to 46% in *Very remote* areas).
- Indigenous children aged 0–17 accompanying specialist homelessness services clients for family violence attended a service at a rate of 278 per 10,000 population, more than 8 times the rate for non-Indigenous children (33 per 10,000 population) (SCRGSP 2016).

Risk factors for family violence

Although no single risk factor predicts the probability that an individual will be the victim of family violence, a series of risk factors and individual stressors when combined, increase the risk of victimisation (Bryant & Willis 2008). Risk factors known to contribute to a propensity toward violence within Indigenous communities include the following (AIHW 2006; Bartels 2010; Bryant & Willis 2008; Clapham et al. 2006; Cripps et al. 2009; Wundersitz 2010):

- high levels of alcohol misuse and illicit drug use
- high levels of individual, family and community instability and additional social stressors such as: poor and overcrowded housing conditions, financial difficulties, low education, low income, and high unemployment
- remote location and poor access to services (such as police presence)
- childhood experience of violence and abuse
- younger age (14–15 years, reaching a peak during the mid 20s and early 30s)
- a relationship between the victim and the perpetrator
- for mothers, being a single parent and/or having been forcibly removed from her natural family
- poor physical and mental health
- disability.

Much of the literature suggests that alcohol is a major contributor to violence in Indigenous communities, and that this extends to homicides (Mouzos 2001). For example, there were 276 Indigenous male homicides over the period 2002–03 to 2013–14, and just over one-third of these (36%) recorded an alcohol-related argument as a motive. The corresponding proportion for the 171 female homicides over the same period was 11% (SCRGSP 2016).

The 2013 National Community Attitudes towards Violence Against Women Survey surveyed a cross-section of Australians aged 16 and older, and the results included a focus on Indigenous Australians. It found that Indigenous Australians had a higher level of understanding of violence against women than non-Indigenous Australians. Attitudes of Indigenous respondents were similar to those of non-Indigenous respondents, both being not supportive of violence against women, but Indigenous women and men were more likely to justify and excuse violence against women. A higher proportion of Indigenous Australians than non-Indigenous Australians also excused violence when the perpetrator was under stress, angry, or affected by alcohol (VicHealth 2014).



Terms used regarding violence in Indigenous communities

The *Overcoming Indigenous disadvantage 2014* report noted that violence and abuse is so prevalent in some communities that residents regard it as inevitable (Willis 2011). A 'language of minimisation' describing instances of violence as 'everyday' or innocuous is used to avoid confronting or aggravating the situation (Cripps & Adams 2014; Cripps et al. 2009).

According to Cripps (2010) frequently used phrases about violence in some Indigenous communities were: 'my husband was acting up'; 'he was being cheeky'; 'it was just a little fight'; 'we were drinking'; 'um [pause] well we were arguing'. Still, it is important to also acknowledge that some communities under strong female Indigenous leadership supported by many Indigenous men are confronting violence (see for example, Yarram & Yarram 2012 from the No To Violence conference).

The term 'family violence' recognises the extended nature of Aboriginal communities with their diverse and complex pattern of kinship ties and community networks extending beyond the nuclear family (Memmott et al. 2006; NSW Health 2011). In addition to applying to a broad range of kinship settings, the term 'family violence' covers a broad range of behaviours. They include physical, emotional, psychological, sexual, sociological, economic, and spiritual acts that occur in intimate, family and other relationships of mutual obligation and support (ACSAT 2006).

Generally, the term 'family violence' is favoured over 'domestic violence' (ATSISJC 2003; Memmott et al. 2001; 2006). These terms are used by professionals, but not generally by the victim/survivor or their families, as they are considered too confronting, and might aggravate the situation by attracting unwanted attention from authorities (Phillips 2000).

The term 'lateral violence' (also known as 'lateral love', 'horizontal violence' or 'intra-racial conflict') is gaining currency within Indigenous populations, as workshops under this rubric are raising the need (as expressed by Indigenous leaders) for all Indigenous Australians to take responsibility for behaviour, to reduce all forms of violence (ATSISJC 2011; Yarram & Yarram 2012).

The policy context

In recent years, community and government concern about family violence in general has been growing. Several prevention programs have been implemented across Australia (for example, DHS 2012; NSW Health 2011; Strategic Partners 2003).

The National Plan to Reduce Violence against Women and their Children 2010–2022 (the National Plan) was developed by the Council of Australian Governments (COAG), and released in 2011. The 12-year plan brings together the efforts of all Australian governments and the community to achieve a significant and sustained reduction in violence against women and their children (COAG 2011). The National Plan is being delivered through four 3-year action plans.

The National Plan recognises that Indigenous women and children are more likely to experience violence than other women in Australia. It also recognises the need for responses to violence to be place-based, and developed in partnership with the community.

Although the needs of Indigenous women are considered throughout the National Plan, Outcome 3, 'Indigenous women are strengthened', recognises that extra effort is needed to reduce the higher rates of violence against Indigenous women. The National Plan supports Indigenous communities to create and implement their own solutions to prevent violence. This includes encouraging women to have a stronger voice as community leaders, providing leadership opportunities for Indigenous women, supporting Indigenous men to reject violence, and improving employment, education and business opportunities in Indigenous communities.



A solid national evidence base is crucial to the success of the National Plan. Australia's National Research Organisation for Women's Safety was established in 2013, and its National Research Agenda to Reduce Violence against Women and their Children organises research priorities into 4 strategic research themes:

- experience and impacts
- gender inequality and primary prevention
- service responses and interventions
- systems.

Common across all strategic research themes is the need to focus research effort on what works, and on diverse groups and under-researched populations, including Indigenous women, women from culturally and linguistically diverse backgrounds, and women with disability. A national picture of what works to make Indigenous families safer will inform improved policy and service delivery in the future, and enable sharing of good practice across the Australian community.

Released in October 2016, the National Plan's third action plan 2016–19 outlines how the Australian, state and territory governments—together with the non-government sector, business and communities—continue to progress work to prevent and respond to domestic, family and sexual violence. The Plan includes a National Priority Area 2: Aboriginal and Torres Strait Islander women and their children. It progresses activities started during the first and second plans, and includes working in partnership with Indigenous communities to develop initiatives to reduce violence against Indigenous women and their children (DSS 2016).

Family violence prevention programs

The focus of this resource sheet is on programs aimed at preventing family violence. This includes strategies intended to shift attitudes and social norms that support violence, challenge unjust power relationships that sustain violence, address the social conditions associated with violence, and promote non-violent norms (Flood et al. 2009). Some programs provide support and advice to victims of violence, such as counselling, legal aid, or protection. Other programs target the perpetrators of violence—for example, programs that involve community policing, justice or behavioural reform, or safe house programs. There are also: school and community-based education programs; family violence prevention legal services; community action campaigns; programs aimed at strengthening Indigenous culture; and behavioural change programs (ADFVC 2014; DHS 2012). These might be delivered to the whole population or to particular groups that might be at higher risk of experiencing violence.

This resource sheet has not considered alcohol management programs or community patrols, as these are discussed in other Clearinghouse papers—*Reducing alcohol and other drug related harm* (Gray & Wilkes 2010) and *The role of community patrols in improving safety in Indigenous communities* (CtGC 2013).

The following sections review the evidence on family violence prevention programs, with a particular focus on Indigenous programs. This evidence includes findings from process evaluations that give information on participants' qualitative experience of programs, contextual factors, and cultural appropriateness. Some findings from reviews of non-Indigenous-specific community-based programs related to family violence are also discussed.



Indigenous family violence prevention programs

LOVE BITES

LOVE BiTES is a respectful relationships education program for teenagers (14–17) that focuses on the prevention of family violence and sexual assault, by supporting young people to develop healthy and respectful relationships (ACSSA 2013). It consists of two interactive education workshops on domestic and family violence and sexual assault, followed by creative workshops that consolidate the information previously covered. It uses various presentation styles to actively involve young people, including: youth-led small group activities; peer-to-peer learning; and art, music, and drama. The creative works produced are then used for local community campaigns developed and led by young people to prevent violence against women (NAPCAN 2014).

An evaluation of LOVE BiTES was done among Year 10 students in a Sydney high school. The study used a matched samples design, in which participants' responses to a questionnaire completed before and after they participated in LOVE BiTES were compared. This allowed testing of whether individuals' attitudes and self-reported skills changed over the course of the program (Flood & Kendrick 2012). But as no comparison group was used, it is possible that any change in attitudes and skills could have been due to factors other than the program.

The evaluation found that the program had a significant and positive effect on the students' attitudes towards domestic violence and gender relations, as well as skills in having respectful relationships. But it had no effect on students' attitudes towards aggression and alternatives to aggression (Flood & Kendrick 2012).

LOVE BiTES has been adapted and implemented in more than 100 communities across metropolitan, regional and remote Australia, including Aboriginal communities (NAPCAN 2014). This has involved program coordinators working in partnership with Indigenous services to run Indigenous-specific LOVE BiTES programs. Adaptations have included the use of local language and myths, implementation with separate gender groups, and the use of facilitators with cultural knowledge (ACSSA 2013). The program impact on the attitudes and skills of young Indigenous Australians has not been specifically evaluated.

The Aboriginal Family and Community Healing Program

The Aboriginal Family and Community Healing Program was established to develop effective culturally informed responses to family violence in a northern metropolitan region of Adelaide. In particular, it boosted skills in communication and conflict resolution. It was implemented through primary health care Indigenous outreach services provided by the South Australian Department of Health's Central Northern Adelaide Health Service. The program comprised inter-related group activities for Indigenous women, men and youth, built around community engagement. The key focus was on family and community healing to equip people with the skills to communicate effectively and resolve conflict (Kowanko et al. 2009).

An evaluation of the program was done by Flinders University using a participatory action-oriented methodology. The men's and women's groups were considered effective because they met regularly over a long time period (which enabled relationships of trust to develop, to begin a process of healing), and they provided a safe environment to talk about family violence. The group dynamic (of having older and younger people together) was also seen as positive, as everyone brought important skills to the group. Providing transport was considered essential to program participation. The holistic approach of the Aboriginal Family and Community Healing Program was also seen as vital, addressing social, cultural, spiritual, emotional, and physical dimensions of wellbeing of individuals in the context of family and community (Kowanko et al. 2009). It is not known how this program might have affected family violence rates in these areas of Adelaide.



Cross Borders Indigenous Family Violence Program

The Cross Borders Indigenous Family Violence Program is a group-work based offender rehabilitation program that has been operating since 2007 in South Australia, the Northern Territory, and Western Australia. It was first evaluated in 2009. The second evaluation was done by the Australian Institute of Criminology (AIC unpublished 2014), primarily through face-to-face interviews with participants, and limited follow-up with law enforcement officers and magistrates. The evaluations took place from 2007 to 2014. The AIC had rare access to police and corrections data, and tried to track participant's subsequent offending behaviour.

The program was implemented in: Docker River, Finke, Mutitjulu, Kintore, and Papunya in the Northern Territory; Amata, Ernabella/Pukatja, Fregon, Indulkana and Mimili in the Anangu Pitjantjatjara Yankunyatjara Lands of South Australia; and Blackstone, Warakurna, and Warburton in Western Australia. It had been run at least 6 times in many of these communities.

In total more than 500 men began the program—including 450 mandated to attend on referral from corrections departments. Just over three-quarters (77%) of participants completed the program by attending at least 12 of the 15 sessions. Completion, to a significant extent, was found to depend on the particular community in which it was done—that is, where the program had been run 5 or more times, the proportion of men completing the program was much better than in communities in which it was run only once or twice.

The multi-program sites achieved a completion rate of more than 70%, consistent with the overall average of 72%. This suggests that the program takes time to become accepted in each location. A key learning from this evaluation was that the program needs to be tailored to some extent to each site or community. Course completions overall have also substantially improved since the first evaluation in 2009.

All jurisdictions contributed limited police and corrective services data to the evaluation for violent reoffending by participants. This enabled program records to be linked to subsequent behaviour and reports.

The evaluators noted that, due to the remote locations, it was a relatively expensive program to deliver, but that such costs pale into insignificance compared with the costs of imprisonment, health care, and social support to victims of violence. So the evaluators reasoned that costs could be recovered relatively quickly if the program was successful.

The evaluation report sets out the methodology in some detail, and a separate section explains the underlying program logic and evaluation framework. Mostly the evaluation was done in the Northern Territory and South Australia, with surveys and personal interviews (both of participants and some police and corrections department staff in some communities). It also involved program manager report analysis, and subsequent checking of police and corrections data to ascertain likely impact. A typical response from a participant was the 'the program had helped him understand violence, that breaking the cycle of violence was hard, but that he would now walk out if he became angry'.

The evaluation found that violence seemed to have become much more entrenched in the Northern Territory than in South Australia or Western Australia. That is, they found a higher reoffending rate in the Northern Territory (70% compared with 20% for South Australia). This compares with a national reoffending rate post-imprisonment (without such a program) of about 55%. The AIC noted they were not able to determine the reasons for such a significant difference between the Northern Territory and South Australia, but that this would be a fruitful area of future inquiry. However, they commented that:

'men participating in the program often have substantial histories of violent offending, including family violence, and are in relationships that involve violent arguments. ...it is arguable whether any individual program could reasonably be expected to produce lasting behavioural change. Nonetheless, evidence for positive behavioural outcomes—while limited—does provide indications that the Program is effective to contributing to behavioural change resulting in reduced levels of family violence among participants' (AIC unpublished 2014).



The AIC suggests that similar programs for all violent people, regardless of gender might have a greater combined impact.

Overall, they concluded the model of service delivery implemented through the Cross Border Indigenous Family Violence Program 'appears to be an effective and appropriate way of delivering a behavioural change program to Aboriginal communities in remote Australia' (AIC unpublished 2014).

Aboriginal Women Against Violence Project

This project received funding under the National Community Crime Prevention Program to address family violence in the Liverpool and Campbelltown areas of Sydney. The project identified 2 specific strategies: to train local Indigenous women to become trainers, mentors and advocates in their own communities; and to establish an Aboriginal Women Against Violence Committee.

An evaluation of the project used a mixed methodology including questionnaires, focus group discussions, artwork, interviews and documentary analysis. The evaluation concluded that the project provided an example of good practice in working with Indigenous women to prevent violence especially, because it was thoughtful, respectful and inclusive.

The mentoring component of the program created a safe space for Indigenous women to explore the painful reality of violence in their lives, their families and their communities. It broke down barriers to formal education and mainstream support services, and highlighted Indigenous women's rejection of violence, and their determination to address violence in their communities (Rawsthorne 2010). It is not known how this might have affected family violence rates in these areas of Sydney.

Mildura family violence and sexual assault campaign

Victoria Police and Indigenous community leaders in Mildura together planned and implemented a campaign of resistance to family violence and sexual assault.

This public awareness campaign consisted of television commercials and posters, to communicate anti-violence messages. The idea for the campaign resulted from Victoria Police consultations with local Indigenous community representatives, and was primarily funded by Victoria Police.

All relevant Indigenous groups working in the area were involved in the campaign, which built on the strengths of existing networks, and led to improved relations between Indigenous organisations and Victoria Police. It also created a network for ongoing consultations on police protocols (HREOC 2008).

The campaign has not been evaluated, but anecdotal evidence has been very positive, indicating the program resulted in better recognition among Mildura residents of family violence and sexual assault, and in increasing reporting to police.

The campaign is considered to be an example of promising practice for community education and development, because it recognises the diversity of Indigenous Australians, responds to the needs of individual communities, builds on community knowledge and strengths, and is based on partnerships between government and non-government organisations (HREOC 2008). But it is not known whether this campaign reduced family violence rates in Mildura.



Balgo women's law camp

A traditional law camp held in Balgo (located in very remote Western Australia) in 2007 increased young women's understanding and capacity for handling conflict and violence, while reinforcing the strengths of culture and community.

This camp is operated annually by the Kapululangu Women's Law and Culture Centre, one of Australia's most remote women's centres, and the only Indigenous women's law and cultural centre in Australia (Kapululangu Women's Law and Culture Centre 2013).

In 2007, more than 100 women and girls participated in the camp, where they celebrated women's ceremonies. The Elders saw it as an excellent opportunity to pass their knowledge on to the younger generations. They also wanted to discuss the problems that were happening in their community—including family violence and child sexual assault—to identify strategies to eliminate them. The camp was a positive initiative, which enabled local women to connect with their cultural heritage, with their land, and with themselves (dé Ishtar 2007).

However, it is not known how this annual program might have affected subsequent family violence rates in the Balgo region.

Alice Springs Domestic and Family Violence Outreach Service

As described in the *Overcoming Indigenous disadvantage 2014* report (SCRGSP 2014), the Alice Springs Domestic and Family Violence Outreach Service (Northern Territory) began in 2009, providing targeted outreach support to women living in Alice Springs and the surrounding town camps, who are experiencing domestic and family violence. The program also runs support and education groups to women in town camps. In 2012–13, almost 400 women were assisted, with about 80% identified as Aboriginal or Torres Strait Islander (ASWS 2013).

An independent evaluation of the project in 2012–13, using a mix of interviews and analysis of crisis accommodation data, found that:

- 100% of the 19 women (with 43 children in their care) interviewed reported their safety had improved with support of the program
- of those women who had previously used the crisis accommodation service (84% of respondents), 42% had not used it since receiving outreach services (Gander 2013).

The project was awarded a National Certificate of Merit at the 2013 Australian Crime and Violence Prevention Awards (AIC 2013).

Working with Aboriginal Families: a family-centred approach

The Working with Aboriginal Families Program is an education, post-intervention support, and preventive program in East Gippsland. Yarram & Yarram (2012) presented a review of the program at the No To Violence Conference in Melbourne in 2012. They concluded that the program suggests promising strategies, and identified the need to do things differently:

'We also do post-intervention support. After, say, a domestic or a family violence dispute between the man and a woman, the police and other agencies are brought in to the first line. The woman may be relocated or the fellas put in gaol, and the kids are put in child protection, or whatever. Around three days later, we're brought in to work with all of the family, to see what sort of level of support they need, and also to work with the agencies that are supporting them. We make sure the support the family is getting is culturally appropriate and safe, and that they are engaged. A lot of time the family is so traumatised that the agencies don't know how to approach and work with our families.'



Occasionally we have been called in at the time of an incident, at 2 o'clock in the morning in some community, where the police have come in and the families don't want to leave their partner who's been belting them. We've come in to work with those families as well. So we've faced a range of challenges as part of setting up our organisation.

The thing that I especially want to let you know is that our practice is different to a lot of practices in that it is family centred. So when there's been an incident, we don't see victim and perpetrator; we see this family unit has been disengaged because of this incident. The family does want to stay connected, and we've seen that from models where an intervention's been put in place where a woman has been put into a shelter. She's then put through a process for her safety and then asked challenging questions about whether or not to come back into the relationship with her partner.

We've experienced this a lot—where the woman's been put into a shelter, and the rhetoric or the conversation is how to say, 'No, you don't want to go back into that relationship, it's dangerous for you ... you have to look after your children. Do not go back to your partner'. We look at the fella and his remorse and work with him about his behaviour, and acknowledge that it's what his action is. It's not the person. And I think a lot of times when you work in this space people find it really hard to separate the individual who's the perpetrator from their action. And we are really conscious that this person is a good person; it's just their behaviour that needs attention. People need to consider what's going on in their life that's making them act that way.

And we've found that as part of our service we're challenging the paradigms for the way services are delivering and working with our people around family violence. They're confused by this method. They don't recognise that a family-centred approach is one that doesn't exclude the perpetrator's extended family and community. That the perpetrator needs these people around as part of their healing journey with their family kept safe. The perpetrator can't be cut off from those who have impact on them and are part of their lives. If family aren't involved in helping work to heal them and support them, then the person can't be healed.'

Mainstream Australian and international programs

The World Health Organization (WHO) has developed a framework for developing policies and programs for the prevention of intimate partner and sexual violence—*Preventing intimate partner and sexual violence against women: taking action and generating evidence* (WHO 2010).

A WHO review of evaluations of international programs for preventing intimate partner and sexual violence against women found that few evaluations were rigorous and able to demonstrate the effectiveness of programs (WHO 2010). There is emerging evidence about the possible effectiveness of non-Indigenous-specific international and Australian programs, but these have not been adapted for Indigenous Australians or evaluated for their effectiveness in that context.

Australian school-based violence prevention programs

Schools have been the main setting for preventive efforts to address violence and promote respectful relationships. Two such programs have been evaluated: the Sexual Assault Prevention Program for Secondary Schools (SAPPSS) and the healthy relationships program Respect, Protect, Connect (Flood et al. 2009).

SAPPSS uses a whole-of-school community approach to prevent sexual assault, and has the following components:

- training for all staff
- Train the Trainer workshops for self-nominated staff
- the development of policy and procedures



- a student curriculum program for Years 9 and 10
- a peer educator program.

An evaluation of SAPPSS in 4 secondary schools in Melbourne assessed young people's engagement with the program, and its effects on their knowledge and understanding. It found that SAPPSS increased young people's understanding of sexual assault issues, and their ability to discuss them in an open, respectful and appropriate manner (CASA House 2008). This evaluation did not use a comparison group, so the changes in knowledge and understanding that were found could have been due to factors other than the program. The evaluation report did not mention whether any Indigenous students took part in the program.

An evaluation of the Respect, Protect, Connect program involved:

- 16 Year 8 students (9 boys and 7 girls) in a high school who did the 8-week program
- 53 Year 9 students (27 boys and 26 girls) in another high school who did the 2-week program
- 38 Year 8 students (16 boys and 22 girls) in a third high school who comprised the comparison group.

All 3 high schools were located in the southern metropolitan region of Victoria. The evaluation methodology comprised pre- and post-program questionnaires for the first two schools, questionnaires for the students in the comparison school, and interviews with 5 boys and 5 girls who took part in the program. The analysis of the questionnaires found an improvement in the attitudes of the boys who took part in the program. All of the young people who were interviewed found the program to be beneficial (Fergus 2006).

International school-based violence prevention programs

The WHO classified school-based programs to prevent violence within dating relationships as being effective in preventing violence. Evidence for this was based on evaluations of 3 programs:

- Safe Dates (United States)
- The Fourth R: Skills for Youth Relationships (Canada)
- Youth Relationships Project (Canada).

These programs have been evaluated using randomised-controlled designs. Safe Dates was found to significantly reduce dating violence among those with no previous history of such violence, but was less effective in preventing re-abuse. The two Canadian programs were also found to be effective in preventing violence in dating relationships among young people (WHO 2010).

Safe Dates includes school and community activities. School activities include a theatre production, a 10-session curriculum, and a poster contest. Community activities include special services for young people in abusive relationships (a crisis line, support groups, materials for parents), and community service provider training (Foshee et al. 1998).

The Fourth R: Skills for Youth Relationships and the Youth Relationships Project are integrated into the health and physical education curriculum, and taught in sex-segregated classes.

- The Fourth R: Skills for Youth Relationships includes 21 lessons that focus on extensive skills development, using graduated practice with peers to develop strategies for dealing with pressures and resolving conflict without abuse or violence. The cost of training and materials averaged \$16 Canadian per student (WHO 2010).
- The Youth Relationships Project aims to help young people aged 14–16 who were mistreated as children to develop healthy non-abusive relationships. Participants are taught conflict resolution and communication skills. A randomised-controlled evaluation of the program found it to be effective in reducing incidents of physical and emotional abuse, and the symptoms of emotional distress over a 16-month period (WHO 2010).



Principles for successful programs

Despite the lack of data on the effectiveness of mainstream and Indigenous-specific family violence prevention programs, practitioners consider the following practice principles as being important for their successful implementation with Indigenous communities:

- community involvement, engagement and a strong acceptance (which takes time)
- consideration of cultural factors
- service delivery and program integration
- planning for long-term sustainability
- holistic focus and flexible approach.

The barriers to effective programs include:

- lack of integrated and coordinated service delivery practices
- expecting too much too soon
- applying a simplistic approach to policy development to deal with entrenched issues
- operating with a lack of cultural awareness
- unsustainable responses that rely solely on short-term government funding.

Gaps in the evidence

The literature reviewed for this resource sheet noted that:

- the extent that mainstream program evaluation frameworks and methodologies can be applied to Indigenous communities and programs have limitations
- government program funding has not always included funds for monitoring and evaluating outcomes
- evaluating family violence (irrespective of cultural context) is difficult—there have been few published, rigorous, multi-stage evaluations of programs designed to reduce family violence in Indigenous communities, and little research has explored the apparent variation in violence levels and relative success of preventive programs in distinct Indigenous communities or between jurisdictions.

The Clearinghouse issues paper *Programs to improve interpersonal safety in Indigenous communities: evidence and issues* (Day et al. 2013) concluded that no evaluations in the category 'prevent interpersonal violence' had sufficient methodological quality to determine that any observed changes were the direct result of the intervention. Limitations of the evidence base includes lack of comparison groups, little detailed assessment of the effects of programs on subsequent rates of violence, and the use of different outcome measures across studies making it impossible to combine results (Day et al. 2013). Another review of the evidence on family violence in Indigenous communities similarly concluded there were few robust formal evaluations of such programs (Cripps & Davis 2012).

Administrative data on perpetrators and victims of violence are expected to improve from 2022. The National Plan (COAG 2011) includes a National Data Collection and Reporting Framework for family and domestic violence and sexual assault that recognises the need to improve the evidence base to support future policy and program development.



In 2014, the Australian Bureau of Statistics (ABS) released the National Data Collection and Reporting Framework for family, domestic and sexual violence. The framework built on the ABS's work over the past few years, and is outlined in two background papers: *Defining the data challenge for family, domestic and sexual violence* (ABS 2016a) and *Bridging the data gaps for family, domestic and sexual violence* (ABS 2016b). The AIHW is currently working with jurisdictions to build on the framework to improve data collection, data sharing, and reporting capabilities on family, domestic and sexual violence.

Work is also progressing national outcome standards for perpetrator interventions (Reos partners 2013), and this remains a priority area in the National Plan. Under the National Plan, the ABS Personal Safety Survey 2012 will be repeated every 4 years. But data are not available by Indigenous status for a variety of data quality reasons.

Family and domestic violence has become an area of increasing public concern, and a key priority area for Australian, state and territory governments.

Some recent reports that address the issues and possible government responses in this area include the Senate Inquiry into Domestic Violence in Australia (August 2015) and the Victorian Royal Commission into Family Violence (March 2016). The report *Existing knowledge, practice and responses to violence against women in Australian Indigenous communities: state of knowledge paper* (Olsen & Lovett 2016) noted several gaps in the evidence base specific to Indigenous communities, including a need for dedicated resources to improve the evidence base, in particular, information sharing about the positive progress being made in Indigenous communities.

All these documents note the importance of effective national data collection and research to develop and monitor policies and programs to address domestic and family violence. Lack of data sharing has been noted as an important issue. The COAG Advisory Panel on Reducing Violence Against Women and their Children (April 2016), for example, made wide-ranging recommendations about the need for data improvement, program processes, effects and monitoring outcomes over the longer term.



Conclusion

Although historical considerations are important in relation to the manifestations of violence in contemporary Indigenous communities, family violence among Indigenous Australians remain at a disturbingly high level. The impacts are severe in terms of avoidable mortality, the health and wellbeing of victims, imprisonment of perpetrators, and serious adverse impacts on children's development and wellbeing.

Reported levels of Indigenous family violence are likely to be understated, due to the complexity of different forms of primary health response, significant under-reporting by victims, and irregular collection of perpetrators' cultural backgrounds in data sets. The available data, however, indicate that Indigenous women are between 24 and 35 times as likely as non-Indigenous women to experience serious injury and need hospitalisation due to violence committed by a partner.

It was difficult to find rigorous evidence of successful family violence prevention programs in the Indigenous context, due to a lack of evaluations. But several preventive programs in cities and remote communities have demonstrated some positive effects.

The Cross Borders Indigenous Family Violence Program was delivered in 3 jurisdictions over 8 years. It was one of few programs to have incorporated data on subsequent reoffending rates of participants. The apparent success of the program in turning around entrenched patterns of violent reoffending among at least some participants highlights the necessity of repeated programs in communities. This is to gain acceptance and build relationships, as well as to cement non-violent messages, and adapt properly to local cultural and governance contexts. For some participants, evaluators found that levels of interpersonal violence in some households were such that they recommended development of similar programs for women, partly in support of men's behavioural change, as well as to reduce similarly unacceptable violence by women.

Another program warranting close consideration is the Alice Springs Domestic and Family Violence Outreach Service (Northern Territory), which was found to have increased safety in Alice Springs town camps. It was awarded a National Certificate of Merit at the 2013 Australian Crime and Violence Prevention Awards.

In relation to mainstream programs, an evaluation of the Australian school-based violence prevention program Respect, Protect, Connect found an improvement in the attitudes of the boys who completed the program. All of the young people who were interviewed found the program to be beneficial. But it is not known whether any Indigenous students took part in the program, or how or whether it might have affected subsequent family violence patterns.

Internationally, a review of evaluations of programs to prevent intimate partner and sexual violence found that the following 3 school-based programs had been rigorously evaluated and shown to be effective: Safe Dates (United States), The Fourth R: Skills for Youth Relationships (Canada), and Youth Relationships Project (Canada).

The evidence suggests there is scope to significantly expand the availability of such programs. These must be combined with carefully designed evaluation strategies. Such expansion is likely to pay significant dividends, for example, in improving education and the wellbeing of Indigenous children and women. The expansion of programs is also likely to reduce spending on imprisonment rates, and on the health care of the victims.



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Terminology

Indigenous: 'Aboriginal and Torres Strait Islander' and 'Indigenous' are used interchangeably to refer to Australian Aboriginal and/or Torres Strait Islander people. The Closing the Gap Clearinghouse uses the term 'Indigenous Australians' to refer to Australia's first people.

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