



Submission to the Royal Commission into the Protection and Detention of Children in the Northern Territory

The Domestic and Family Violence Network (DFVN) welcomes the opportunity to make a submission to the Royal Commission into the Protection and Detention of Children in the Northern Territory (the Commission) to advance improved outcomes for child protection and youth detention systems in the Northern Territory (NT). Our brief submission will focus on the experience of women and children in the NT impacted by cycles of domestic and family violence and contact with the child protection and justice systems.

About the DFVN

The DFVN was established in 1996 to link the various government and non-government organisations working in the area of Domestic and Family Violence in the Greater Darwin area. The Network keeps the focus of its work on subjects directly related to Domestic and Family Violence (DFV). The Network is committed to the prevention of DFV in the Darwin community and has zero tolerance towards Domestic and Family Violence. The key objectives of the DFVN are Information sharing, encouraging a more effective service system and strategic advocacy.

Key points for the Commission's consideration

1. Unresolved intergenerational and childhood trauma creating pathways into the child protection and juvenile justice systems.

The NT has some of the highest rates of DFV in the world. Aboriginal women are the disproportionate victims of this violence. It is widely acknowledged that exposure to DFV is traumatic and extremely damaging for young people's development. With such a highly-traumatised youth population, systematically addressing trauma should form the foundation of our educational, child protection and juvenile justice systems in the NT.

Those of us working directly with families impacted by DFV see clear pathways of children's childhood experiences of DFV and trauma, leading to contact with child protection system and youth detention system.

(De-identified) Case study

A woman- A enters a refuge in [Privacy] for the first time in [Privacy] escaping from severe domestic violence, with her two children- B and C. She returns to the refuge on several occasions over a two-year period. Although support is given to the woman and children for the brief periods they are in the refuge, their trauma experiences are ignored in the world beyond the refuge.

In [Privacy] A's daughter- B and her three children entered the refuge, escaping from domestic violence. During this time, intense case work was undertaken with the B including support with legal and family court issues. This client relocated interstate. At a recent Family Safety Framework¹ meeting, B was referred. She is back in [Privacy], now with a different partner, and experiencing serious DFV. At the meeting, DCF stated that there was an open case for one of her children with concerns over neglect and witnessing DV. Education stated that there was an issue with truancy. Police stated that the children were known to them for various activities including alleged car theft. At that point they had not yet entered detention.

We've got to ask how this family's lives may have looked if A and her children B & C had received intensive wrap around support to heal from the trauma they had experienced and recognise the dysfunction of violent relationships. Instead, the trauma goes untreated, the DFV is reproduced in B's adult relationship. She and her 3 children receive no effective trauma support, even with the involvement of the family safety framework. The cycle continues and B's children head on the path to the juvenile detention system.

2. Child protection practices increasing trauma for victims of DFV

2.1. The reality for many women living in remote Aboriginal Communities is that they have no real options for leaving violent relationships. Adequate safe housing is not available and enormous community and familial pressure is exerted on victims to return to a violent partner. Women with children experiencing abuse can feel backed into a corner, as child protection staff demand she leave the violent relationship or lose the kids. But to safely leave the relationship is to be severed from country, from culture, from identity. These women are in a double bind, they are traumatised victims of violence, living in communities where they have no realistic options of safely leaving the violence while staying on country.

¹ The purpose of the Family Safety Framework is to provide an action-based integrated service response to individuals and families experiencing family or domestic violence who are at HIGH risk of serious injury or death.

They are often pressured by those closest to them, and others in the community to stay quiet about the violence, at risk of losing more Aboriginal men into a justice system. They know that there is no accountability or reforming him in the justice system anyway, just a temporary reprieve from the violence, but for many there is a likely increase in violence from his family and others in the community. If we want to support these victims in protecting their children from the harmful impacts of DFV and the cycle of trauma and child protection involvement, there must be systemic change that gives them real options to be safe, to stay on country and for the perpetrators to be held fully accountable for the damaging impacts of their violence.

- 2.2.** Culture of victim blaming and perpetrator non-accountability in Child Protection responses when DFV present. These attitudes result in an organisational culture where child protection staff are not partnering with and supporting the non-offending parent and where victims of DFV are terrified of Child Protection staff.
- 2.3.** Problematic and traumatic practice of child protection staff removing children from their mother's care while their mothers are safely staying in DFV Shelters.
- 2.4.** Children are being removed from care of non-offending parent to unsafe care in child protection system.

3. Juvenile justice practices increasing trauma for victims of DFV

The youth detention system works against basic principles of trauma informed care (see Attachment A).

4. Effective, evidence based, culturally relevant perpetrator behaviour change programs are urgently needed.

One very small long-term pilot program is running in Alice Springs and the Department of Corrections has a 5-day program offered to inmates. Research from elsewhere tells us that short programs do not adequately address the issues to result in behavioural change. Perpetrator Accountability and behaviour change is urgently required to turn off the tap that feeds DFV and trauma and flows into the pathways of the child protection and criminal justice systems. In Victoria for instance there are mandatory provisions for referring male perpetrators of family violence once a final order intervention order (the equivalent to a DVO) has been made, to engage in a Men's Behaviour Change Program if assessed suitable for the program. (Reference s129 and s130 *Family Violence Protection Act 2008* (Vic). Similar provisions should be considered in the Northern Territory.

5. Primary prevention required

With such high rates of DFV, trauma, child protection notifications and juvenile and adult incarceration rates, the NT is a system in crisis. As well as trauma support and behaviour change programs, an NT wide violence prevention strategy is urgently required. There is currently no model or commitment to the delivery of Respectful Relationships programs for school aged Territory children. Evidence is clear that to break the cycle of violence children and young people need to have with opportunities to be informed in culturally relevant ways about underlying drivers of violence including gender inequities, an understanding of consent and to be able to identify healthy, respectful relationships for themselves and their peers. Communities must be supported and resourced to promote violence prevention.

We call for:

1. Investment into long-term NT wide, culturally relevant, trauma informed (see attachment A) systems, interventions and strategies for adult and child victims of DFV. Adequately funded long term family and community support services are urgently required to address the increasing numbers of NT families in a trauma cycle of DFV and the statutory system. Trauma informed care must be embedded in our educational, child protection and justice systems. This will require a massive investment of money into assisting individuals and communities to heal from the trauma they have experienced, often intergenerationally. A failure to invest in this will require increasing investment in the child protection and detention systems.
2. Children accessing crisis accommodation / safe houses should be assessed as clients in their own right. Effective interventions/ trauma support for children who have experienced significant childhood trauma from exposure to DFV are urgently needed. Children need to receive services specifically designed for them and to have access to the same level of counselling and support afforded to adults accessing services. Additional funding must be provided for this.
3. The NT needs a violence prevention strategy that promotes universal, early intervention and prevention programs to support families to build healthy respectful relationships- the vast majority of services are only available at the point of crisis.
4. The Commission must specifically address the needs and realities of Indigenous women who come into contact with child protection system because they are victims of DFV, to ignore these women is to ignore the needs of their children. The specificity of women's needs as detainees must also be addressed.
5. There must be cultural change within the child protection system in Territory Families to ensure that staff are partnering with non-offending parents while holding the perpetrator of violence responsible for the damaging impacts of DFV on children. Staff must be adequately resourced to build these relationships and must be able to refer victims into a support system of organisations as outlined at 1.
6. Effective, evidence based, culturally relevant perpetrator behaviour change programs are urgently needed.

To Contact the DFVN

Thank you for your consideration of the above if you wish to discuss this submission further, or have any questions for the network, please contact the facilitator of the DFVN- Alex Richmond, Community Educator at Dawn House Women's Shelter via community.educator@dawnhouse.org or (08) 8945 1388.

Attachment A: Key principles of trauma-informed care

- Understand the prevalence and nature of trauma arising from interpersonal violence and its impacts.
- Ensure practices and procedures promote the physical, psychological and emotional safety of victims. Ensure practices and procedures do not re-traumatise victims.
- Adopt service cultures and practices which empower victims in their recovery from trauma by emphasising safety, autonomy, collaboration and strength-based approaches.
- Recognise and be responsive to the social and cultural contexts which shape victims needs and healing pathways.
- Recognise the importance of relationships in overcoming trauma and supporting healing.