



CONSULTATION ON THE SECOND ACTION PLAN

**National Action Plan to End Violence
against Women and Children 2022-
2032**

Introduction

Anglicare Victoria is one of Victoria's largest child, youth and family service providers, working with children, young people, adults and families across metropolitan, regional and rural Victoria. In 2024–25, Anglicare Victoria worked with more than 50,000 Victorians through a workforce of almost 2,200 people operating across 96 locations. Our services include family services, out-of-home care, residential care, kinship and foster care, youth services, family violence responses, financial counselling, emergency relief, education support, alcohol and other drug services, and programs that support families to stay safely together.

We are also one of Victoria's largest providers within The Orange Door network and have direct experience delivering specialist services for adult and child victim-survivors, children and young people affected by violence, adults and adolescents using violence, and families managing multiple and intersecting pressures.

Anglicare Victoria welcomes the opportunity to contribute to consultation on the Second Action Plan under the National Plan to End Violence against Women and Children. We strongly support a national approach that strengthens safety, healing and recovery for victim-survivors, increases the visibility of, and responses available to, children and young people in their own right, builds more effective responses for people who use violence, and improves the integration and capability of the systems and workforces that families must navigate.

Victoria has made important progress since the Royal Commission into Family Violence, including through the establishment of The Orange Door, MARAM and family violence information sharing reforms. These initiatives have helped create more visible and accessible pathways to assessment, referral and support. However, access pathways alone are not enough. The next phase of reform must ensure that people can receive the specialist, culturally safe and timely responses they need after family violence is identified, including safe housing, therapeutic support, family support, behaviour change interventions and practical assistance to recover and rebuild.

Anglicare Victoria also urges the Second Action Plan to give particular attention to children and young people. Children and young people are not simply witnesses to family violence. They are victim-survivors in their own right, with distinct safety, recovery and developmental needs. Our experience across residential care, youth justice, leaving care, homelessness and family services show high levels of current and historical family violence among young people accessing our services. Yet there remain very limited dedicated service options for children and young people experiencing family violence, including those who present without an accompanying adult or who experience violence within their own intimate relationships.

Prevention and early intervention must also be central to the Second Action Plan. Anglicare Victoria supports stronger investment in services that can identify risk early, respond before harm escalates, and work with families in the places they already go, including family services, early parenting services, schools, early childhood settings, libraries and community-based services. We also support evidence-informed approaches that engage people who use violence safely and effectively, while holding them to account, recognising the diversity of people's needs, and moving beyond one-size-fits-all program responses.

Through our work, Anglicare Victoria sees the way violence can sit alongside poverty, housing stress, trauma, mental health concerns, alcohol and other drug use, child protection involvement and social isolation. This means effective responses must be practical, timely, trauma-informed and capable of responding to the whole family and the whole person, rather than requiring people to move between fragmented systems while in crisis.

Finally, the Second Action Plan should strengthen system integration, workforce capability and shared accountability. People experiencing violence should not carry the burden of joining up fragmented systems. Stronger coordination across family violence, housing, homelessness, health, mental health, alcohol and other drugs, justice, policing, child protection, education and employment services is essential to improving safety, continuity of care, recovery and accountability.

Workforce development priorities should include continued investment in specialist capability, reflective practice, supervision, trauma-informed leadership, child-focused practice, and support for workforces beyond the specialist family violence system to recognise risk and safely connect people to support.

Anglicare Victoria thanks the Australian Government for the opportunity to provide input into the development of the Second Action Plan and welcomes further opportunities to contribute our service experience, data, practice knowledge and reform insights as this important work progresses.

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1 Priority Area 1: Victim-survivors

Anglicare Victoria (AV) strongly supports a Second Action Plan that strengthens safety, recovery and healing for victim-survivors, including adults, children and young people. Family violence has profound and lasting impacts, and victim-survivors need access to timely, trauma-informed and practical support to move beyond immediate crisis and rebuild safe, stable and hopeful lives.

1.1 Provide safe and easy pathways to help.

One of the keystones of Victoria's response to the Royal Commission into Family Violence (RCFV) (1) has been significant investment in ensuring that Victorians have a readily identifiable, easily accessible and non-stigmatising pathway to support.

The Orange Door (TOD) brings together family violence, child wellbeing and people-using-violence responses through a more integrated intake and assessment pathway. TOD is a free intake and assessment service for people experiencing family violence, adults using family violence, young people using violence in the home, families needing support with children's wellbeing, young and unsupported families, and children, young people or families needing parenting support. It reduces the need for families to navigate multiple entry points or repeatedly retell their story. (2)

A first step in addressing violence is to make it visible, and the TOD has been a critical reform in surfacing the need for services and providing referral pathways to assessment and support. The TOD has proven an effective way to ensure that access to assessment and referral is readily identifiable and is an essential first step in recognising the true extent of service demand.

Also critical has been the establishment of the Family Violence Multi-Agency Risk Assessment and Management Framework (MARAM) (3), which creates a shared approach to conceptualising, identifying and assessing risk and need across professions and sectors, as well as the development of the Family Violence Information Sharing Scheme.

1.2 Deliver appropriate and timely specialist services

Significant progress has been made in recent years in recognising the previously hidden and concerning high prevalence of family and domestic violence (4), particularly among women (48.4%) and people who are not heterosexual (70.2%). Victoria's important work in establishing TOD network and associated shared tools has increased awareness of the issue and provided a readily available pathway into support.

The challenge is ensuring that service responses are able to meet this significant demand. As a provider operating across many parts of the state, we are aware that people seeking support often experience lengthy delays in accessing services. This varies by geography, client group and service type, but is evident in

“The challenge is not generating solutions. It is creating the systems and accountability mechanisms to implement comprehensive and sustainable solutions - Michaela Cronin, Domestic, Family and Sexual Violence Commissioner

large numbers of referred cases awaiting assessment, large numbers of cases assessed but unassigned, large numbers of assigned cases that remain open, and a large number of cases waiting to be allocated to a service.

As discussed later in this submission, for some cohorts’ services are so limited as to be virtually absent. For example, there are very few dedicated service options for children and young people who are victim-survivors of family violence in their own right.

1.3 Embed family violence awareness and response across the service system, including providing safe housing as a core requirement.

Other parts of the service system also have an important role to play. This includes housing, financial stability, legal support, parenting support, and education and employment pathways.

Victim-survivors, like others in the community, often have a range of service needs, and their experiences of violence may affect their ability to access support in a safe and timely way. It is therefore not uncommon for a victim-survivor to require multiple forms of assistance, and many will benefit from a case-managed approach that supports access to services for both the victim-survivor and other affected family members.

Access to safe housing must remain a priority. AV's housing advocacy has highlighted that victim-survivors may remain with, return to, or be unable to safely separate from a person using violence when safe accommodation options are unavailable. In regional areas, AV staff report that housing is frequently raised by clients as a significant factor in safety planning and decision-making.

Our staff report that some victim-survivors remain in high-risk situations despite ongoing safety concerns because no safe housing options are available. As noted by the Council to Homeless Persons, 2021 research from Equity Economics found that “lack of access to housing results in approximately 7,690 women a year returning to perpetrators due to having nowhere to live”, with many more experiencing homelessness as a result of leaving. (5) The Council to Homeless Persons also notes that almost half of all women seeking homelessness support in Victoria in 2022 identified family and domestic violence as the primary reason they required housing assistance.

This demonstrates both the significant consequences of family violence and the importance of access to safe, stable housing as part of an effective response.

The Victorian Royal Commission into Family Violence also identified the safe removal of the person using violence from the home, where appropriate, as an approach that can help prevent victim-survivors and their children from being displaced into homelessness.

1.4 Target areas of high need

As discussed below, a further priority area is children and young people who have had contact with the child protection system, including those living in out-of-home care. Despite the extremely high prevalence of exposure to family violence among this cohort, service interventions often focus on whether protective action should be taken to remove the child, without the child being provided access to family violence services.

The importance of focussing on children and young people as victim-survivors in their own right is discussed further in section 3 of this submission.

AV also supports the continued development of culturally safe and inclusive service options. This includes strengthening First Peoples-led options and ensuring Aboriginal and Torres Strait Islander people can access culturally safe mainstream services where that is their preference, or where confidentiality, geography or other personal circumstances make this important.

It also includes improving access for culturally and linguistically diverse communities, recognising that mainstream systems may not always feel safe, accessible or well understood. The trial involving a Centre for Multicultural Youth worker in the Western Melbourne TOD is one example of a promising approach to strengthening access for migrant and refugee communities by partnering with organisations that have already established trust within those communities.

2 Priority Area 2: Prevention and early intervention

AV supports a stronger national focus on prevention, early intervention and secondary intervention, including investment in services that can identify risk early, respond before harm escalates, and support families to build safety and stability.

Given the prevalence of family and domestic violence in the Australian community, it is clear that prevention and early intervention must be a key part of sustainable solutions to reduce harm and provide a basic level of community safety, particularly for women and girls and other groups at increased risk, including LGBTIQ+ people.

The numbers are too high for response services alone to provide a solution. However, it is important to note that activities regarded as prevention, early intervention, response and recovery "may be a helpful policy distinction, [but] they rarely reflect the complexities of individual lives and can get in the way of person-centred, individually tailored approaches." (7)

The evidence tells us that many people who use violence in their relationships have themselves experienced violence at the hands of family members. Effectively supporting victim-survivors to recover is therefore an essential part of prevention efforts.

2.1 Community and cultural standards

Broad-based education campaigns, positive role modelling, and a commitment to addressing the drivers of harmful behaviours continue to have an important role to play.

Violence prevention requires coordinated effort across schools, early childhood services, family services, child and family wellbeing systems, workplaces, faith communities, health services, the justice system, digital platforms and local communities.

These efforts should be complemented by broader education for children and young people that extends beyond respectful relationships education, as well as targeted support for workplaces and employers to recognise and respond safely to family violence. This includes organisations, including schools, taking proactive steps to establish appropriate standards and address harmful or unacceptable behaviour when it becomes evident.

2.2 Work with families

Family services are a key service platform for vulnerable families and have a particularly important role in prevention and early intervention. AV's internal data collection tells us that approximately half (48%) of all families we worked with during the nine months from July 2025 to March 2026 in the Family Services program identified current or historical family violence. When we look at Intensive Family Services, which works with families experiencing more complex challenges, the figure is consistently closer to 60%.

This is an important reminder that broader social services are also key intervention points, providing opportunities to identify risk, support protective parenting, connect families to specialist services and prevent escalation where required. Accordingly, AV has developed a Family Violence Practice Framework for Family Services (8) to ensure staff are well equipped to respond when family violence is identified. The Framework emphasises the importance of family violence-informed language, risk awareness and recognising children as victim-survivors in their own right, rather than simply as witnesses.

The Framework draws on the internationally recognised Safe & Together model, which AV is embedding across the organisation, with key programs such as Family Services undertaking the full four-day Safe & Together training alongside MARAM implementation. Given the prevalence of family violence in the community –nearly 40% of adults report experiencing it in childhood (1) and about one in four women have experience intimate partner violence (2)– AV recommends that all organisations working with families ensure their workforces are equipped to support clients who disclose either experiencing or using violence in the home. This includes identifying immediate safety concerns and providing appropriate advice, support and referrals.

Early parenting services also provide a key opportunity for intervention. The evidence tells us that the risk of intimate partner violence can increase during major life transitions, including becoming a parent, particularly for younger parents. Therefore, "early parenting services may represent one of the few reliable points of contact where behaviour change work can begin and where the motivation of becoming a parent can be a powerful

Safe At Home

A three-year trial of the Safe at Home program began in Geelong in 2025, sponsored by the Victorian government and local agency McAuley.

It is an early intervention model that “aims to keep women and children safe in their own homes and prevent homelessness. It does this by providing rapid, flexible and coordinated support for the whole household including women, children and the person using violence.

The program aims to provide fast response times, a whole of household approach supported by a broad range of tailored supports for each household member, including addressing economic and financial stability.

Program design has been strongly informed by research and evidence including input from people with lived experience.

For further information see: <https://www.mcauley.org.au/about/advocacy/safe-at-home/>

driver of change when met with appropriately trauma-informed, wraparound support". (3)

The Second Action Plan should support practical early intervention models in places where families already go. AV's family services work with families who are often managing intersecting pressures, including poverty, housing stress, trauma, mental health concerns, child wellbeing issues and family violence. Internal consultation identified opportunities for family violence specialists or social workers to be located in accessible community settings such as schools, early childhood services, libraries and primary care. This approach could improve early identification, reduce stigma, and help people access advice and support before they reach crisis point.

Models such as McAuley's Safe at Home (4) , with its whole-of-family, case-managed approach, provide an example of a pilot that draws on the lived experience of families to develop new approaches to early intervention. The model recognises the complexity of the challenges families are managing and seeks to reduce the range of risks that can occur alongside the risk of violence.

There have been important improvements in recent years in making service responses easier to access and more readily available. However, achieving better outcomes – including long-term reductions in the prevalence of family violence – will require a stronger focus on identifying risk and intervening earlier in a person's journey through better referral pathways, faster intervention, and stronger integration across services.

Opportunities for secondary prevention and early intervention exist across the service continuum, including within crisis responses. Staff report that high demand and urgency can create an environment where crisis responses focus heavily on accessing brokerage and other resources to address immediate safety concerns, sometimes at the expense of more comprehensive planning and longer-term intervention.

2.3 Systemic and cultural drivers

Jesuit Social Services, through its Men's Project, has identified that the risk of using violence in relationships is associated with a rigid set of beliefs about masculinity (the 'Man Box'):

"We found that the endorsement of masculine norms strongly correlated with a range of adverse outcomes and harmful attitudes and behaviours. Specifically, men who held such beliefs were 20 times more likely to self-report sexually harassing a woman, and 14 times more likely to self-report the use of physical violence." (5)

This highlights the ongoing importance of gender and gender norms in family violence, and the value that a gender lens can offer in designing both primary and secondary prevention strategies.

Positive male role modelling is an important part of this, particularly in an online environment where misogyny, coercion and controlling behaviours are being overtly promoted. While this messaging primarily targets young men, it also negatively impacts women and girls by reinforcing harmful stereotypes and contributing to online environments that are unsafe and exclusionary.

Public figures and the media will continue to play an important role in this space, particularly in shaping how violence against women is discussed and represented in public discourse.

3 Priority Area 3: Children and young people in their own right

A significant proportion of children are exposed to family violence. The Australian Childhood Maltreatment Study found that 39.6% of Australians report exposure of domestic violence during childhood, making it one of the most common adverse childhood experiences in Australia (1)

However, there is strong evidence that children and young peoples' experience of violence in the home is frequently overlooked or deprioritised in service delivery.

This may occur because the focus is on supporting the parent or other family member, because it is disclosed in the context of other family or protective concerns, or when there is youth justice or policing concerns. For example, the Victorian Children and Young Person's Commissioner's recent report (6)

An internal review of cases referred to AV by child protection found multiple examples where family violence was repeatedly reported with no action taken. In one such example the child themselves reported ongoing family violence and being scared, only to be disbelieved. This was despite multiple past reports and the police having been concerned enough to put an Intervention Order (IVO) in place. In this case, the child's claims were only believed when they sustained physical injuries during a family violence incident.

An in-house (unpublished) study conducted by AV's Therapeutic Specialists found that a third of young people in residential care had been exposed to violence in the home, and one in six reported that they continued to be exposed. However, even where family violence is identified as a key protective concern, there is no guarantee that therapeutic services or responses to address that exposure will be provided as part of a young person's care.

This cohort of children and young people is also recognised as being at high risk of sexual violence, including exploitation. This is a gendered issue, primarily affecting young women and

THE SHARK CAGE

Many young women experience violence in relationships for the first time before they have turned 18.

The Shark Cage for Young Women program is designed to address this by engaging young women before patterns of family violence in relationships can take hold by providing tools and strategies to help recognise the warning signs of unhealthy relationships and assert their boundaries confidently.

The program can be offered in youth hubs, schools and other community settings, and participants receive approximately 6 hours of contact across a 7-week groupwork program.

For further information see <https://thesharkcage.com/>

girls. However, as recent research from Queensland has shown, the residential care workforce is not always well equipped to respond to issues of family, domestic and sexual violence. (6).

We also know that young people, particularly young women, are at high risk of intimate partner violence (3), and that their initial experience of violence frequently occurs prior to adulthood.

However, there are few dedicated services for young people who are victim-survivors of family violence, whether as victims of intimate partner violence or violence within their family of origin. Multiple sector reviews, together with internal data and staff insights, highlight a systemic gap: young people are consistently not seen, prioritised or responded to as victim-survivors in their own right. There is also a lack of specialist family violence services for young people using violence within intimate partner relationships.

Whether children and young people are being directly subjected to violence or witnessing their care-givers as being assaulted or belittled, these young people are experiencing significant harm and have a right to access the kind of support and recovery that older people are entitled to. (9) A secondary benefit is that such interventions play a role in disrupting long-term cycles of violence. Research has found that exposure to violence in the household is positively associated with the perpetration of interpersonal violence and abuse (IPVA) for both young women and young men, and that regardless of whether the young person had directly experienced abuse or had witnessed violence directed at other household members.

violence

3.1 Develop a dedicated service stream for children and young people

Young people experiencing family violence in Australia face significant systemic gaps in support. While there are numerous family violence services nationally, most are designed to support adult victim-survivors and their dependent children, leaving young people who present alone largely overlooked.

Crisis services are primarily funded to support adults and accompanying children, leaving a significant gap for young people seeking help independently, including in relation to intimate partner violence. For example, boys aged 13 years and over who accompany their mother are often unable to access refuge accommodation. Safe Steps data suggests this missing cohort may also contribute to Victoria's high rates of youth homelessness.

Anglicare Victoria's internal desktop review of services supporting young people affected by family violence across Victoria found that:

- There are **only two dedicated case management services** specifically supporting young people affected by family violence in Victoria. However, eligibility criteria limits access to young people who are homeless or at risk of homelessness.
- Other services are **primarily therapeutic in nature and do not address a young person's immediate safety needs.**

- Therapeutic services often require **parental involvement or consent from both parents, including the parent using violence**, which is a major access barrier.
- **Crisis and generalist services, such as TOD, are not youth-specific** and do not tailor their responses to young people.

AV has commenced a service design process to consider how we can respond to this significant unmet need. This will include speaking to young people, AV programs and external subject matter experts. The project aims to identify opportunities for a dedicated service platform for young people. This would draw on AV's extensive experience across young services, family violence services, child protection, intake and community services to deliver a holistic response to young people.

3.2 Focus on prevention and early intervention

AV undertook a scoping exercise to understand the prevalence of family violence among young people accessing AV services. Data from the programs selected identified high rates of both past and current family violence among the young people we support.

Residential Care

Two thirds of young people in our Residential Care program have experienced family violence from their family of origin, with one in six identified as currently experiencing family violence from their family of origin.

One in three young people in our Residential Care program have past experiences of intimate partner violence, either as a victim-survivor or as a person using violence, while almost a quarter were identified as having current experiences of intimate partner violence.

Thirteen per cent of young people in our Residential Care program have used intimate partner violence in past relationships, with half of these young people also identified as victim-survivors of family violence.

Leaving Care - Seventy-six per cent of young people aged 16–21 engaged in the Loddon Better Futures program had experienced family violence, either from their family of origin or within an intimate partner relationship.

Homelessness Services - Eighty-six per cent of young people aged 16–21 who stayed in Kirrang Wilam youth refuge in 2024–25 had experiences of current or historical family violence, either from their family of origin or within an intimate partner relationship.

Family Services - AV provided support to over 2,100 young people aged 12–17 years through our Family Services programs in 2024–25. Approximately 55 per cent of cases in Family Services feature family violence as an issue affecting the family. Based on this

prevalence, AV supported approximately 1,200 young people affected by family violence.

As reported by the CCYP (6), we also know that a significant proportion of young people involved in the youth justice system have experienced family violence. This is borne out by our own delivery experience: in one youth justice program we are involved in, all of the young people involved have been affected by family violence.

It is evident from these figures that child and family services organisations including AV have a critical role to play in supporting vulnerable young people, and that this presents an important opportunity for prevention and early intervention.

The link to child protection is important to recognise. AV is one of the state's largest providers of out-of-home care, and in 2025 conducted a 'snapshot' review of young people in our care during a given week. We found that family violence was a significant issue for most young people living in our care at that time, including both current and historical experiences of family violence from their family of origin and violence in their current relationships. However, therapeutic support specifically addressing experiences of violence in the home is not embedded or funded in the out-of-home care system.

3.3 Engage children and young people in service design and delivery

There are numerous documented reports of children receiving a poor response when they seek help for violence they are experiencing within their family. AV supports sector calls for a dedicated youth-specific family violence service. We frequently hear from young people that services are not suited to their needs, do not understand their experiences and are focused primarily on the adults involved. We also hear reports of young people disclosing violence and not being believed.

In some cases, young people find themselves at greater risk after seeking help. These issues have been well documented by the Monash Gender and Family Violence Prevention Centre (10) and Safe Steps (11), among others. Where supports do exist, children and young people are sometimes required to seek consent from a legal guardian to participate, even where that legal guardian may be the person using violence against them.

As a result, children and young people often end up being referred to the statutory child protection system, where little action is taken. They may then bounce between statutory and family violence services, while receiving little or no direct engagement or support themselves.

AV has commenced a series of workshops to co-design a service response with young people. These workshops are being co-facilitated with a young person and include

appropriate safeguards and remuneration for lived experience participation. AV has a dedicated lived experience strategy, youth engagement lead and skilled program staff to support this work safely.

Preliminary work suggests that such a service should:

- include digital platforms supported by case management and longer-term therapeutic interventions
- welcome both unaccompanied young people and young people within family settings who are seeking support in their own right
- be co-designed with young people
- address both family violence and intimate partner violence
- provide specialist consultation to family violence services on working directly with young people, alongside training and capacity building
- work closely with schools, police, youth services (including headspace and homelessness services), and child protection
- incorporate early intervention and prevention strategies.

Young people should be meaningfully involved not only in the initial co-design process but also in the ongoing oversight and governance of new services.

Care will need to be taken to address issues of privacy, confidentiality and consent, and to manage child protection concerns that may arise. Specialist advice from practitioners working across family services, child protection and family violence sectors will also be important and should be incorporated into the design.

4 Priority Area 4: People who use violence

AV supports a stronger, more varied and evidence-informed national response to people who use violence. Victim-survivor safety must remain the central purpose of this work, but safety cannot be achieved unless people using violence are visible, engaged and supported to change their behaviour.

4.1 Increase service capacity and availability

The Second Action Plan should address the significant gap between demand and service availability for people who use violence. A number of our staff report substantial unmet demand, including for men's behaviour change programs and other interventions targeting people who use violence.

The shortage of available services means that many people who use violence disengage while still waiting to access support, representing a missed opportunity to intervene and support behaviour change. Further, delays in engagement mean that opportunities to work with people during critical periods, when they may be most motivated or able to engage, can be lost.

4.2 Increase evidence-based service options

AV supports a broader range of interventions for people who use violence, rather than relying on a one-size-fits-all model. In many areas across Victoria, service availability is largely restricted to Men's Behaviour Change programs. However, there are many cohorts for whom this group-based model may be inappropriate or insufficient, including but not limited to:

- young men aged 18–25 years, who may benefit from developmentally appropriate responses tailored to their stage of life
- people with co-occurring needs, including mental health concerns, alcohol and other drug issues, cognitive impairment or acquired brain injury
- people with significant trauma histories
- people whose behaviours or attitudes may be disruptive, disrespectful or harmful to group-based interventions and their participants.

It is also important to recognise that the evidence base for programs and services targeting people who use violence remains relatively limited compared to more established service systems. This is an area where innovative service design, piloting and evaluation have an important role to play, followed by the scaling of effective interventions for different cohorts.

There also needs to be a more diverse mix of program options available to maximise effectiveness. Better outcomes will be achieved if the service system moves beyond a 'one-size-fits-all' approach to people who use

Breaking the Cycle

Breaking the Cycle comprises of two therapeutic approaches to support families: Breaking the Cycle Group and Breaking the Cycle Family Therapy.

The Breaking the Cycle Group runs for eight sessions once a week. It is suitable for mothers, fathers, stepparents and carers whose adolescent (aged 12-18 years) is abusive and/or violent in the home. The group aims to stop the violence and equip families with the skills and strategies to repair and develop long lasting healthy relationships.

Breaking the Cycle Family Therapy provides individual family support that can build on the BTC group work or be offered independently of the group. The BTC Family Therapy is a whole of family support that aims to strengthen family dynamics and functioning, improve communication and establish and maintain new patterns of family behaviour. The BTC Family Therapy offers flexible support and is tailored to individual family's needs and goals.

Anglicare Victoria offers Breaking the Cycle for families with adolescents (aged 12-17 years) who use family violence in the home, residing in Melbourne's Eastern Region, Western Region and Loddon.

violence. This includes ensuring service options recognise that a person who uses violence may also continue to experience the impacts of trauma, abuse or violence within their own life history, while maintaining a clear focus on accountability, safety and behaviour change.

4.3 Expand interventions for adolescent violence

Breaking the Cycle (BTC) is AV's flagship program for working with young people and their families to address violent or controlling behaviours in the home. BTC is delivered with support from the Victorian Government's Adolescent Violence in the Home (AVITH) program.

While the AVITH program is relatively new, demand is very high and most programs are oversubscribed. The Second Action Plan should support specialist AVITH models, improve referral pathways, ensure consent requirements do not prevent children and

young people from receiving therapeutic support, and strengthen evidence-informed responses that address violence while maintaining a focus on safety, accountability, development and family functioning.

Further improvements in service delivery data, particularly in relation to wait times and service demand, will help inform the future expansion of the program.

Our staff in residential care have also raised concerns that the unique circumstances of statutory care may obscure the fact that violence occurring within residential care settings can, in effect, constitute violence in the home. However, the unique nature of these settings mean such incidents may instead be identified and responded to as ‘client-to-client violence’, potentially resulting in appropriate therapeutic interventions not being triggered.

The development of the AVITH program is an important first step towards addressing a significant service gap for young people who use violence. Further development is needed to ensure that young people using violence within their intimate relationships can also be identified and

Pathways to Change

Pathways to Change (PTC) is an innovative program designed to quickly engage people using violence following court intervention.

Developed by Anglicare Victoria in partnership with Court Services Victoria, PTC provides rapid engagement, digital delivery and participant-centred design. The model was developed to reduce barriers to participation and referral, improve accessibility, and create earlier opportunities for reflection and change.

Innovations including plain-language content, tailored elective pathways for diverse cohorts and a focus on building hope, motivation and readiness for change recognising that attitudinal change is often a critical first step towards sustained behavioural change.

PTC is now operating across seven Victorian Specialist Family Violence Courts and continues to be refined through an embedded evaluation model. Early findings have been promising, with an average referral-to-commencement time of less than a week, very strong completion rates and strong client feedback.

Participants have demonstrated increased recognition of harm, coercive control and the impacts of their behaviour. These results suggest that service models based on rapid engagement, digital accessibility, tailored pathways and continuous learning have strong potential to improve both engagement and outcomes.

appropriately supported to change their behaviour.

Working with young people, whether through prevention or early intervention, presents a unique opportunity to achieve significant and lasting benefits for individuals, families and the broader community.

Caring Dads

The core purpose of caring dads is to improve safety, stability and emotional wellbeing for children.

Caring Dads is a specialised evidence-informed intervention that supports fathers who have used violence, abuse or neglect to develop safe, child-centred and respectful parenting. The program builds trust with fathers with supporting full accountability and improving safety for children and mothers.

We use a trauma-informed approach to help fathers recognise harmful behaviours, understand its impact and learn new, safer ways of responding. We introduce child-centred parenting strategies, empathy building exercises and emotional regulation tools.

Anglicare Victoria is currently providing Caring Dads in locations across Inner and Outer Gippsland.

5 Priority Area 5: System integration and workforce

5.1 Better outcomes through service partnerships and integration

Better outcomes are achieved when integration is strengthened across the systems that people affected by violence must navigate, including family violence, child and family services, housing, homelessness, health, mental health, alcohol and other drugs, policing, justice, child protection, education and employment services.

People experiencing violence should not have to carry the burden of joining up fragmented systems. As the national consultation paper recognises, many people experiencing violence must navigate multiple systems at once, and improving coordination is critical to safety, continuity of care, accountability and recovery outcomes.

TOD provides an important example of integrated service design. However, AV's experience also demonstrates that integration must be supported by strong governance arrangements, practice and workforce support, information sharing, role clarity and accountability. Safe, lawful and practical data sharing, including across jurisdictional boundaries, is an important part of safety planning. Further work is also needed to explore how de-identified linked data can better quantify the impact and cost of family violence across multiple domains, including housing, health, justice, child protection, employment and productivity.

The Second Action Plan should reinforce a whole-of-family approach grounded in safety, accountability and recovery. Achieving this will necessarily involve a range of different services and service types. AV's family violence position statement and internal materials emphasise that AV is uniquely placed to work with adult and child victim-survivors, as well as adults and adolescents who use violence. This breadth of experience provides a strong perspective on the need for integrated responses that hold risk, safety, healing, child wellbeing, behaviour change and family functioning together. The next stage of national reform should make this integration easier for services, families and communities.

5.2 Workforce development

Workforce capability is a critical enabler. AV materials highlight the importance of embedding Safe & Together, undertaking agency-wide MARAM alignment, and supporting staff with targeted learning in engaging fathers who use violence, working with young people who use violence, family violence safety planning, and family violence leadership development.

Workforce shortages and professional isolation can also affect the recruitment and retention of staff who work with people who use violence. Professional practice in this area presents challenges that differ from those faced by practitioners working primarily with victim-survivors, including securing client engagement and motivation while maintaining accountability and avoiding any perception of collusion.

Developing safe and reliable practice models for staff working with whole families, including families who remain together while addressing violence, adds further complexity. The Second Action Plan should therefore invest in workforce pipelines, supervision, communities of practice, reflective practice, trauma-informed leadership, specialist capability, and the conditions needed to retain skilled practitioners.

As an agency that works across both family violence and child protection, AV also recognises that skilled and experienced family violence practitioners may require additional training and practice support when working with children. This is particularly important where there are protective concerns and/or existing child protection involvement.

Finally, workforces beyond the specialist family violence system also have an important role to play in supporting families and connecting people with specialist services. While they are no substitute for specialist family violence services, they can provide critical pathways to support and safety. These workforces are often well placed to identify risk and connect people with support, particularly where a person has not yet identified or disclosed that they are experiencing violence in the home.

Given the prevalence of family and sexual violence across the community, ongoing investment in community education will continue to be important.

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