

31 July 2026

Department of Social Services
National Office
GPO Box 9820
Canberra ACT 2601

Via email: [REDACTED]

ANGLICARE WA RESPONSE: SECOND ACTION PLAN (NATIONAL PLAN TO END VIOLENCE AGAINST WOMEN AND CHILDREN 2022-2032)

Dear Department of Social Services,

Anglicare WA is pleased to make the following submission with reference to the Second Action Plan (National Plan to End Violence Against Women and Children 2022-2032).

Anglicare WA is a leading not-for-profit organisation in Western Australia that reaches over 102,000 people each year in times of need. We provide support, counselling, accommodation, and advocacy for people impacted by poverty, homelessness, domestic violence, grief by suicide, and mental health issues. This included direct support to 3,339 people through family and domestic violence (FDV) services in FY 2024-25. Some of these services include (funded by a range of sources):

- Albany Women's Centre
- Broome FDV Hub
- CLEAR Project
- Connect and Respect/Men's Behaviour Change Program
- Derby Family Violence Service
- Family and Domestic Violence Coordinated Response Service
- Keeping Women Safe in their Home Katanning
- Place-based Domestic Violence Advocacy Support Services, Counselling, and Outreach Services
- Recovery After Violence Service
- Safe at Home Albany
- Specialised Family Violence Service

Anglicare WA is a member of the Centre for Women's Safety and Wellbeing, No to Violence, and is represented on the Men's Behaviour Change Network facilitated by Stopping Family Violence.

We thank you for the opportunity to share insights from frontline workers and practice leaders across Anglicare WA. This submission is in three parts: General Remarks, Recommendations, and Survey Responses. We look forward to continuing this dialogue and partnering with the Department on the development and implementation of its Second Action Plan. Please direct any questions relating to this submission to Philippa Boldy, Chief Operating Officer, philippa.boldy@anglicarewa.org.au.

Yours faithfully,

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GENERAL REMARKS

Family and domestic violence (FDV) remains a major health, welfare, and social issue in Australia. While people of all ages and backgrounds can experience FDV, women and children are disproportionately affected, and Aboriginal and Torres Strait Islander¹ women and children continue to experience significantly higher rates of violence due to the ongoing effects of colonisation, including intergenerational trauma, systemic and institutional racism, and barriers to accessing support and reporting violence.²

Anglicare WA recognises the important progress made since the Department of Social Services' (the Department) [First Action Plan](#), including the establishment of a nationally coordinated framework for action, significant investment in frontline and specialist services, the development of the first dedicated [Aboriginal and Torres Strait Islander Action Plan](#), and increased focus on prevention, workforce capability, and system accountability. While these initiatives have laid important foundations, sustained investment and reform are required to address the growing complexity and scale of need, strengthen culturally safe and integrated service responses, and ensure that all women and children can access the support they need to live free from violence.

Preventing and ultimately eliminating FDV requires a whole-of-community approach that prioritises prevention and early intervention, culturally safe and coordinated responses, integrated and relational service systems, and accessible pathways for recovery and healing. Such an approach must prioritise the safety and wellbeing of victim-survivors while promoting accountability and behaviour change among people who use violence. This is critical for individuals and families navigating complex and intersecting challenges, including housing insecurity, financial hardship, mental health challenges, and social isolation. When services are connected, responsive and centred on the needs of communities, they can support not only immediate safety, but also long-term recovery, stronger relationships, a sense of belonging, and improved wellbeing.

Anglicare WA welcomes the opportunity to contribute to the development of the Department's Second Action Plan across the five proposed priority areas. We support the Department's commitment to building more integrated, coordinated and culturally safe service systems that disrupt cycles of violence, strengthen safety and accountability, and support the long-term goal of ending FDV.

As one of WA's largest community service providers with 50 years of frontline experience, Anglicare WA is committed to creating safer, stronger and more resilient communities where everyone can live free from violence. Anglicare WA is proud to be one of the organisations funded by the Department to deliver programs under the [Families and Children Activity](#). In FY 2025-26, we received \$346,751 in funding to provide Specialised Family Violence Services (SFVS), directly supporting 168 people in WA and creating pathways to safety, wellbeing, and freedom from FDV.

¹ In WA, the term Aboriginal is used more often than Aboriginal and Torres Strait Islander and/or First Nations. Throughout the remainder of the document, the term Aboriginal is meant to be inclusive of Torres Strait Islanders.

² In WA Aboriginal and Torres Strait Islander women accounted for 68 per cent of hospitalisations due to FDV in 2022, the highest since 2005 (72.1%). [Duncan, A., Kiely, D., and Salazar, S., \(2022\), 2022 Women's Report Card: An indicator report of Western Australian women's progress](#); Commonwealth of Australia Department of Social Services (2022). [National Plan to End Violence against Women and Children 2022-2032](#), p.72.

Through this work, we see firsthand the increasing complexity and scale of need across the community. Growing numbers of people are presenting with increasingly complex and intersecting needs, requiring integrated, trauma-informed responses across multiple service systems.

This demand, together with the ongoing cost-of-living and housing crises and chronic funding pressures, has placed significant strain on service delivery and workforce sustainability. Workforce shortages, practitioner burnout, and the challenges of attracting and retaining skilled staff are further compounded by the unique geographic realities of WA, where delivering accessible and culturally safe services across regional and remote communities remains a significant challenge.³

At the same time, there is a growing need to invest not only in crisis responses for victim-survivors but also in prevention, early intervention and perpetrator accountability initiatives that address the underlying drivers of violence and contribute to safer communities.

The Second Action Plan presents an important opportunity to build on the progress made in the First Action Plan and address current challenges, ensuring Australia's response to FDV remains evidence-informed, culturally safe, and responsive to the evolving needs of diverse communities. Drawing on our frontline experience, the following recommendations and responses outline key opportunities to strengthen systems, services, and outcomes for victim-survivors, families, and communities across Australia.

RECOMMENDATIONS

1. Improve coordination and alignment between State and Federal Governments.

The Second Action Plan should establish clear roles, responsibilities, and funding commitments across jurisdictions to reduce duplication, close service gaps, and ensure a more consistent national response. Funding and investment should better reflect local levels of need and risk while recognising the different responsibilities of each jurisdiction.⁴

2. Increase long-term funding across prevention, early intervention, response, and recovery.

The Second Action Plan should increase and sustain long-term funding across all stages of FDV response: prevention, early intervention, crisis response, and recovery and healing. Recovery must be recognised as a lifelong process and a critical component of violence prevention. Funding models need to support sustained engagement and long-term outcomes, rather than short-term crisis responses alone.

3. Build integrated, relational, and culturally safe service systems.

Develop integrated, relational and culturally safe service systems that place victim-survivors at the centre of service delivery.

³ Emerging Minds. (n.d.). [Supporting children in families with complex needs: nine tips for practitioners who feel out of their depth](#); ACOSS. (2023). [Community services face staffing crisis due to chronic funding shortages](#); WACOSS. (2024). [Communities sector at breaking point as underfunding cripples capacity](#); RTO Learning Materials. (2025). [A look at occupations in Demand in Australia: Healthcare and Community Services](#)

⁴ For example, some states have made significant investments in perpetrator responses while other states have comparatively lower levels of funding. Similarly, regions experiencing disproportionately high rates of FDV require proportional investment in evidence-based prevention, early intervention, response, and recovery.

This should include strengthened coordination across specialist services, police, health, housing, justice and child protection systems, implementation of "tell your story once" approaches, and greater investment in trauma-informed practices that promote trust, continuity of care and long-term recovery.

4. Strengthen Aboriginal-led responses and community self-determination.

Increase investment in Aboriginal Community Controlled Organisations (ACCOs) and Aboriginal-led prevention, response, healing and recovery initiatives, while ensuring Aboriginal communities play a central role in designing, delivering and evaluating services.

Responses need to acknowledge the impacts of colonisation, intergenerational trauma and systemic racism; strengthen culturally safe practice across mainstream services; and support community-led approaches that draw on culture, kinship and connection to Country as protective factors.

5. Invest in workforce sustainability, capability and regional service delivery.

Develop a long-term workforce strategy that strengthens recruitment, retention and capability across the FDV sector. This should include improved remuneration, supervision, professional development and wellbeing supports, as well as targeted initiatives to attract and retain skilled practitioners in regional and remote communities and grow the Aboriginal workforce.

6. Improve responses to coercive control, technology-facilitated abuse, and emerging drivers of violence.

Strengthen prevention and response efforts to address coercive control, technology-facilitated abuse and emerging drivers of violence, including online misogyny and harmful gender attitudes. Key actions should include public education, workforce training, technology safety initiatives, digital literacy programs, and investment in evidence-based prevention strategies that help people recognise abuse earlier and respond safely.

7. Adopt a human rights-based approach and legislate a federal Human Rights Act that prioritises safety, dignity and wellbeing for all victim-survivors, including children and young people.

Embed a human rights-based approach across the Second Action Plan that recognises safety, dignity, self-determination, freedom from violence, and the rights of children as fundamental rights. Strengthen victim-survivor and child-informed participation, promote equitable access to support and recovery, embed human rights principles in implementation and evaluation, and consider legislative reforms, including a federal Human Rights Act to strengthen accountability and protections for those experiencing violence. Consistent with the *United Nations Convention on the Rights of the Child*, children and young people should be recognised as victim-survivors in their own right, with their best interests, safety, and wellbeing reflected across all policies, services, and responses.

SURVEY RESPONSES

PRIORITY AREA 1: VICTIM-SURVIVORS

1. What service or system responses would make the biggest difference to victim-survivors' safety, wellbeing, healing and recovery?

The following service or system responses would make the biggest difference to victim-survivors' safety, wellbeing, healing, and recovery.

- **Integrated, coordinated, and relational service systems.** Victim-survivors would benefit most from well-integrated, coordinated and relational service systems that place their safety, wellbeing and long-term recovery at the centre of all responses. Too often, people experiencing FDV are required to repeatedly recount traumatic experiences to multiple services, agencies and practitioners. Victim-survivors are often unaware of what may be required of them to navigate complex systems such as justice, child protection, and financial services, which can often be difficult to access and deeply re-traumatising. A "tell your story once" approach and support navigating complex systems, underpinned by effective information-sharing, coordinated case management, and shared recovery planning that centres relationships, would reduce re-traumatisation and improve both service accessibility and safety outcomes. Consistency of support throughout a victim-survivor's journey, from crisis through to recovery and healing, is essential.
- **Greater investment across all stages of FDV support.** A significant shift is also required towards greater investment across the full continuum of prevention, early intervention, crisis response and recovery. While crisis responses remain essential, prevention, early intervention, and recovery often remain under-resourced despite their critical role in reducing future violence and supporting long-term wellbeing. Recovery must be recognised as a lifelong process and as a form of prevention. Meaningful investment in recovery supports can help break intergenerational cycles of violence, reduce re-victimisation, and strengthen long-term outcomes for individuals, children, families and communities.
- **Consistency across jurisdictions.** Integrated responses must also be supported by greater consistency across jurisdictions. This includes nationally consistent definitions, risk assessment frameworks, and approaches to information-sharing. Stronger collaboration between states and territories is needed to ensure victim-survivor safety is prioritised regardless of where a person lives or seeks support. Evidence-building and long-term evaluation ought to be embedded within funding arrangements so governments and service providers can better understand what works and support sustainable, community-based responses.
- **Improved police and justice system responses.** Police and justice system responses also have a significant impact on victim-survivor safety and recovery. While the Western Australian Government and Western Australia Police Force (WAPOL) have made commitments to improving responses to FDV, experiences remain highly variable across the country and within communities.⁵ Victim-survivors continue to report experiences of victim-blaming, inconsistent risk assessment, and the misidentification of perpetrators.

⁵ Government of Western Australia. (2025). [Boost to expand frontline responses to FDV](#).

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These issues can be particularly pronounced in communities experiencing lateral violence and where there is limited access to specialist support services. Improving workforce capability, strengthening accountability, and ensuring coordinated responses between police and specialist services would improve both safety and confidence in the system.

- **Flexible and inclusive accommodation responses.** Accommodation responses require greater flexibility and inclusivity. Current refuge models often fail to adequately support women with adolescent sons, larger family groups, families with pets, and families whose structures do not align with traditional Western assumptions about family compositions (i.e., nuclear families). Service systems must recognise the diversity of contemporary families and ensure accommodation options support healing, connection and recovery, rather than create additional barriers to safety. This includes recognising the important role that pets, family relationships, culture, spirituality and community connection can play in recovery.
- **Culturally safe and community-led responses.** For Aboriginal peoples, safety, wellbeing, healing and recovery are strengthened when services are culturally safe, community-led, and grounded in connection to culture, Country, family and community. Greater investment is needed in culturally responsive programs that acknowledge the ongoing impacts of colonisation, intergenerational trauma, and systemic and institutional racism. Culturally safe responses should also challenge misconceptions that family violence is a feature of Aboriginal culture and instead recognise violence as a consequence of colonisation and historical disadvantage.⁶
- **Relational approaches embedded in recovery responses.** Recovery-oriented responses must move beyond a narrow focus on crisis management and safety planning to support victim-survivors to build the life they want after violence. This includes creating opportunities for connection, belonging, community participation, financial security, healing and hope. Relational approaches that centre trust, continuity of care and long-term engagement can help victim-survivors not only survive violence but recover from its impacts and thrive.
- **Recognition of the gendered nature of family and domestic violence.** While all victim-survivors deserve support, policy settings must continue to acknowledge that family and domestic violence disproportionately affects women and children and is fundamentally linked to gender inequality. Maintaining this focus is critical if Australia is to achieve the National Plan's objective of ending violence against women and children.

Insights from Anglicare WA staff:

"We under-invest in the pre- and post-stages. We need a more unified approach to early intervention, and greater recognition of how powerful that can be on reducing rates of FDV. This isn't about redirecting funding – it's about upping funding."

"More explicit investment in recovery would support a better systems response. This is really critical to preventing cycles of violence intergenerationally."

"Creating a space for bigger families [accessing refuges]. We have antiquated views about families and the size of families."

⁶ Please see Government of Western Australia. (2025). [Coercive control campaign resources for Aboriginal communities](#) as an example.

"Let's look at not whitewashing everyone's family. A cultural lens needs to be factored in."

"Some men's behaviour change programs aren't necessarily that culturally safe in terms of the content (very European family, mum, dad, kids, not the wider family) and the program doesn't necessarily recognise the strength of connection to Culture, Country, and protective factors."

"We need to speak about colonialism and the foundations it built regarding Aboriginal and Torres Strait Islander men committing violence against their partners. This is not a part of the culture. It would have been dealt with through [Aboriginal] law and culture. Colonialism has contributed to violence being normalised. We need an education piece around the history of colonialism and its impact on FDV."

"Shift from stability and crisis management into a recovery journey where we centre relationships, slow down the pace, and look at a family's life holistically. [Sunshine](#) and similar [service] models explore what a good life looks like. Not just the challenges, but the elements that start to pull out parts of their good life."

2. What helps people access support earlier, and what barriers prevent people from seeking help or engaging with systems and services?

The following **barriers** prevent people from seeking help or engaging with systems and services:

- **Help-seeking.** Early access to support is critical in preventing the escalation of FDV, yet many victim-survivors face significant barriers to seeking help or engaging with systems and services. One of the greatest barriers is the risk associated with help-seeking. Victim-survivors are often at greatest risk when they attempt to leave a violent relationship or disclose abuse. Fear for personal safety, the safety of children, and fear of retaliation from the person using violence can make help-seeking feel more dangerous than remaining in the relationship. As a result, services and systems must recognise that victim-survivors are often making highly considered decisions based on their assessment of risk and safety.
- **Coercive control.** Coercive control creates additional and significant barriers to accessing support. People using violence restrict access to information, social connections, support networks, and services by frequently monitoring phone use, social media activity, emails, online searches and physical movements. Technology-facilitated abuse can further isolate victim-survivors and limit their ability to seek assistance safely. These challenges are increasingly evident across metropolitan, regional and remote communities and affect people of all ages and backgrounds. Addressing coercive control requires sustained community education, workforce training, and public awareness initiatives that help people recognise patterns of non-physical abuse, understand the dynamics of power and control, and access support before violence escalates.
- **Shame, stigma, fear, and cultural expectations.** Shame, stigma, fear and cultural expectations also remain significant barriers to help-seeking. For Aboriginal peoples, the effects of colonisation, intergenerational trauma, systemic racism, and mistrust of government institutions can discourage engagement with services. Similarly, people from culturally and linguistically diverse (CaLD) communities may face additional pressures related to family expectations, cultural obligations, community perceptions, religious beliefs, and concerns about family breakdown. Greater use of culturally safe outreach, community-led education, and partnerships with trusted cultural, faith-based and community leaders would help reduce these barriers and strengthen pathways to support.

- **Complexity of service systems.** The complexity of service systems can also deter people from seeking help. Victim-survivors are often required to repeatedly recount traumatic experiences to multiple agencies while also explaining the complex safety decisions they have made to protect themselves and their children. Many become discouraged by the burden of retelling their story, particularly when responses fail to recognise the expertise they have developed in managing their own safety. Victim-survivors often possess a deep understanding of the person using violence, their behaviours, triggers and patterns of coercion. Service systems should recognise this "safety intelligence" and work in partnership with victim-survivors rather than questioning or undermining the strategies they have used to survive.

The following can **help** people access support earlier:

- **Technology, coordination, and education.** Earlier access to support could be strengthened through greater use of technology, coordinated service responses and consistent public education. Community awareness campaigns that improve understanding of FDV, coercive control and available support pathways can help people recognise abuse earlier and seek assistance sooner. Technology can also play a positive role by providing safe and accessible information, referral pathways and support options, particularly for people living in regional and remote communities. Initiatives like the [WA Digital Inclusion Project](#) could facilitate this.
- **Intersectional and place-based approaches.** Earlier intervention requires a deeper intersectional and place-based approach that recognises the diverse experiences of different communities. Governments and service providers need to invest in culturally safe, trauma-informed and community-led responses that acknowledge the impacts of colonisation, systemic racism, social isolation, and cultural expectations on help-seeking behaviour. Victim-survivors are more likely to engage with services when they feel understood, respected and confident that support will enhance, rather than compromise, their safety, dignity and self-determination.

Insights from Anglicare WA staff:

"A woman is never more at risk than when she first leaves."

"There's a lack of knowledge around what supports are available because of coercive control, created dependency. [Perpetrators] control [victim-survivors'] access to information so they're monitoring their socials, phones, tracking where they're going, monitoring friends and family, so it's significant, the impact that technology is having."

"Having to retell a story to the new service and explain the nuances of your situation. The burden of retelling their story is greater than the challenge they've got that that support could resolve."

"The system needs to understand why that person chooses to stay or keeps safe in the ways that they do. There's the example of a victim-survivor who found it easier to maintain contact with the perpetrator than amend a VRO."

"Greater use of technology, consistent media messages, a deeper intersectional approach, this could include partnerships with faith-based people and leaders in migrant communities."

"Truth telling regarding the impact of colonisation and the link as a primary driver for violence."

3. What current or emerging issues should the Second Action Plan address, including in relation to coercive control and technology-facilitated abuse?

Coercive control and technology-facilitated abuse are increasingly significant forms of FDV that require greater attention within the Second Action Plan. While public awareness of physical violence has improved, many victim-survivors continue to experience patterns of coercion, emotional abuse, financial abuse, surveillance, and control that can be difficult to identify, respond to and recover from.

Increased investment in community education, workforce capability, and public awareness is needed to improve understanding of coercive control and its impacts, particularly as a precursor to more overt forms of violence.

Education about coercive control can be a powerful catalyst for recovery. Anglicare WA's experience demonstrates that helping victim-survivors understand perpetrator behaviours, patterns of abuse and the dynamics of power and control can support healing, improve self-determination and reduce self-blame.

These educational approaches should be embedded throughout the service system and reinforced through relational and recovery-oriented practice, enabling victim-survivors to apply this knowledge in rebuilding their lives and navigating future relationships.

Technology-facilitated abuse is also becoming increasingly sophisticated and accessible. Perpetrators are using technologies such as GPS trackers, location-sharing functions, AirTags, vehicle-tracking devices, social media monitoring and other forms of digital surveillance to monitor victim-survivors and maintain control following separation. Greater investment is required in public awareness campaigns, technology safety education and workforce training to help victim-survivors identify and respond to these forms of abuse. Practical information should be readily available to assist people recognise surveillance technologies and safely access support.

At the same time, technology presents opportunities to enhance victim-survivor safety and improve service integration. The development of secure digital tools, information-sharing platforms and case management systems like [The CLEAR Project](#) has the potential to reduce fragmentation across the service system and minimise the need for victim-survivors to repeatedly recount traumatic experiences. Future technological solutions should be designed with safety, privacy and accessibility at their core.

Importantly, technological innovation must be inclusive and culturally responsive. Aboriginal communities should be involved from the outset in the design, development and evaluation of digital tools and service innovations. Greater partnership with ACCOs is essential to ensure technologies are culturally safe, accessible, and responsive to diverse language, literacy and communication needs. Without this involvement, there is a risk that emerging technologies will perpetuate existing barriers to service access and engagement.

The Second Action Plan should also recognise the importance of aligning responses to family and domestic violence, sexual violence and child abuse. While these forms of violence may require distinct service responses, they share many of the same underlying drivers and frequently co-occur. Greater consistency across prevention, early intervention and recovery strategies would strengthen system-wide responses and improve outcomes for victim-survivors.

Finally, the growing influence of online misogyny, harmful gender stereotypes and "manosphere" content present an emerging challenge that warrants greater attention. Digital platforms are increasingly shaping attitudes, beliefs and behaviours, particularly among young people.

Continued investment in prevention initiatives, digital literacy, respectful relationships education and evidence-informed responses to harmful online content will be critical to addressing the evolving drivers of violence and ensuring future generations are equipped to build safe, respectful and equitable relationships.

Insights from Anglicare WA staff:

"Education around coercive control was the most significant indicator of recovery for one victim-survivor. That needs to be elevated for victims of violence, especially around emotional abuse."

4. What gaps remain in addressing the needs of diverse communities, including Aboriginal and Torres Strait Islander people?

Despite ongoing investment and reform, significant gaps remain in ensuring FDV responses are accessible, culturally safe and responsive to the needs of diverse communities across Australia, including Aboriginal people. These gaps are particularly evident in regional and remote areas, where service availability is often limited, crisis accommodation options are constrained, and long-term recovery supports are scarce. Many services remain focused on immediate safety and crisis response, with insufficient funding available to support the sustained healing and recovery that individuals, families, and communities require.

Place-based responses are essential, particularly in regional and remote communities where cultural obligations, family structures, kinship systems, language and community dynamics can significantly shape how people experience violence and engage with support. The needs of communities in the Kimberley, for example, may differ substantially from the needs of communities in metropolitan Perth, requiring flexible and locally informed approaches rather than one-size-fits-all solutions.

For Aboriginal peoples, there remains a need for stronger recognition of the ongoing impacts of colonisation, intergenerational trauma, and systemic racism on experiences of FDV. These challenges are particularly pronounced in remote and northern Australia, where Aboriginal communities are disproportionately affected by FDV and often face significant barriers to accessing timely, culturally safe, and appropriate support. Greater investment in Aboriginal-led solutions, culturally safe service delivery, community leadership and place-based responses is critical to improving outcomes.

Service systems must also better account for the complexity of family, cultural, and community obligations. Victim-survivors may be balancing their own safety needs alongside caring responsibilities, extended family obligations, and community expectations. In some communities, family violence cannot be understood in isolation from broader family and community relationships. Victim-survivors may remain closely connected to people, services, or institutions linked to the person using violence, creating additional barriers to seeking support and recovering safely. These dynamics require nuanced, culturally informed responses that recognise the broader social context in which violence occurs.

Similar challenges exist for culturally and linguistically diverse communities, where stigma associated with family separation, cultural expectations regarding marriage and family preservation, religious obligations, language barriers, and concerns about community standing can discourage help-seeking. Greater investment is needed in culturally responsive services, community education initiatives and partnerships with trusted community leaders who can help bridge gaps between services and communities.

Another significant gap relates to recovery, connection, and belonging. Service systems often focus appropriately on immediate safety but can unintentionally contribute to social isolation by removing people from existing relationships, communities and support networks without creating pathways to rebuild connection.

For many victim-survivors, the loss of community, identity and belonging is one of the most significant consequences of family violence. Recovery responses should therefore support people not only to be safe, but also to maintain or rebuild meaningful social, cultural and community connections wherever possible. Relational approaches that help broker new opportunities for belonging, participation and community engagement can strengthen both safety and long-term wellbeing.

Finally, there is a need for stronger and more visible national leadership to ensure that responses for diverse communities are coordinated, consistent and informed by lived experience.

This includes strengthening partnerships with ACCOs, culturally specific service providers, and community leaders to ensure policy development, service design and implementation reflect the realities of the communities they are intended to support.

Only through genuinely inclusive, culturally safe and community-led approaches will Australia be able to address the persistent inequities experienced by Aboriginal peoples and other diverse communities affected by family and domestic violence.

Insights from Anglicare WA staff:

"Gaps in addressing needs of diverse communities are creating accessible services. If they're remote, there's nothing there. A lot of regional and remote refuge services are short term. There isn't a lot of funding to continue support."

"In culturally diverse communities there's shame and stigma in a family unit breaking down or leaving or admitting abuse in a relationship...A gap is not breaching those stigmas and familial and cultural and religious expectations."

"We don't acknowledge the love that the victim-survivor has for the perpetrator. The gap isn't why is she staying, it's what can we do to support her to stay safe if she chooses to stay. She's been doing it by herself for so long so how do we support? A lot of safe at home programs are for getting people out or getting people to leave."

"People may want to engage but capacity is limited because of cultural obligation or family obligation. For example, experiencing FDV and living in a household with other family members who are aware of the FDV but can't do anything about it and need to support those other family members. How can they reach out to support when there are conflicting demands?"

"More broadly, connection is not encouraged after violence and recovery, but it's what people lose. How do we keep people connected to community and relationships whilst also keeping safe? People will probably choose their connections and relationships over their personal safety. Through relational approaches, we can find different pathways to community belonging."

"[The system] wants to keep you safe by keeping your world small. It may be useful, but as recovery happens, we need to find and support new ways to find community."

PRIORITY AREA 2: PREVENTION AND EARLY INTERVENTION

1. What would make the biggest difference in preventing and ultimately ending violence?

Preventing violence requires greater investment further upstream. Education remains critical but must go beyond awareness-raising and become embedded within everyday environments, including schools, workplaces, sporting clubs, community organisations and industry settings such as FIFO workplaces.

Emphasis should be placed on engaging boys and young men early. Anglicare WA staff identified growing concern about the influence of misogynistic online content and the radicalisation of young men through online spaces. Addressing these influences before attitudes and behaviours become entrenched is essential.

Prevention efforts must also address broader social determinants of violence.

Financial stress, housing insecurity and poverty can exacerbate family conflict and contribute to violence. Investment in family wellbeing, income security and social supports should therefore be recognised as part of violence prevention.

Meaningful progress will also require a sustained focus on gender equality, intersectional equity and community-wide attitudinal change.

2. How can existing efforts to prevent violence be strengthened or built upon at the individual, community, organisational, institutional and societal levels?

Existing prevention efforts could be strengthened through multi-layered approaches that engage children, young people, families, workplaces, schools and broader communities simultaneously. Prevention initiatives should be tailored to different developmental stages and settings that meet people where they're at, rather than relying on one-size-fits-all programs.

Greater investment is also needed in therapeutic supports for children and young people affected by violence. Recovery should be understood as a lifelong process rather than a time-limited intervention, with flexible life-course funding models that allow children and young people to re-access specialist support as needed throughout their lives.

Whole-of-family approaches could also prove effective. Families often require simultaneous advocacy, case management, therapeutic support and practical assistance. Better resourcing of intensive family support models would strengthen prevention and early intervention outcomes.

3. How can governments, communities, schools, workplaces, online platforms and others better support people to recognise and respond to harmful attitudes and behaviours?

Governments, communities, schools, workplaces, and online platforms can better support people to recognise and respond to harmful attitudes and behaviours by prioritising sustained, evidence-based prevention and early intervention efforts. This includes moving beyond one-off awareness campaigns and investing in ongoing education that challenges harmful gender stereotypes, misinformation, and online influences. Such education must be reinforced throughout people's lives.

Harmful attitudes are often shaped over many years and require sustained efforts to challenge and replace them.

Schools, workplaces, and communities should be equipped with the resources, training, and specialised supports needed to identify the early signs of trauma, violence, and unhealthy behaviours, and to respond in ways that are trauma-informed, culturally safe, and effective.

Positive male role models, community leaders and culturally respected voices should also be supported to challenge attitudes and model respectful behaviour. Engaging boys and young men consistently throughout their development is critical.

Governments and institutions should also ensure systems are equitable and responsive for Aboriginal peoples by recognising the impacts of colonisation and systemic racism, and the importance of Culture. This means co-designing programs and communications with Aboriginal communities, embedding human rights principles, and improving access to justice by simplifying complex systems and processes.

Finally, technology companies have an important role to play. Anglicare WA staff raised concerns about the manosphere and online algorithms that amplify misogynistic content and reinforce harmful beliefs. Greater accountability should be placed on digital platforms to address harmful content and create safer online environments that promote respectful attitudes and behaviours.

4. What prevention and early intervention approaches appear most promising or effective, and what is needed to strengthen or expand them?

Respectful relationships education and protective behaviours programs remain important prevention strategies. However, these approaches should be expanded to help young people recognise coercive control, emotional abuse, and unhealthy relationship dynamics earlier.

Programs addressing harmful sexual behaviours were also identified as promising but require greater investment and stronger integration with family support services. Effective prevention requires intensive support not just for the young person but for the broader family environment.

5. What emerging issues should the Second Action Plan address in relation to primary prevention and early intervention?

The growing influence of the manosphere and online misogynistic content emerged as one of the most significant concerns. Anglicare WA staff described increasing normalisation of harmful attitudes toward women and girls among some young men and boys.

They also identified pornography as an emerging issue that requires further research and policy attention. There is concern about the role pornography may play in shaping attitudes towards relationships, consent and violence. More evidence and targeted interventions are needed in this area.

Social media platforms continue to expose young people to harmful content despite current regulatory efforts, highlighting the need for stronger prevention measures and platform accountability.

PRIORITY AREA 3: CHILDREN AND YOUNG PEOPLE IN THEIR OWN RIGHT

1. What would make the biggest difference to improving safety, recovery and wellbeing outcomes for children and young people affected by this violence?

Children and young people must be recognised as victim-survivors in their own right, rather than as an extension of the adult victim-survivor. While services often focus on supporting non-offending parents, children's therapeutic, developmental and recovery needs can be overlooked. There is a need for greater investment in child-specific services that are trauma-informed, developmentally appropriate and able to respond to the complexity of family violence, sexual abuse and other forms of harm.

Flexible service models are critical. Current program timeframes do not always reflect the realities of complex trauma, neurodiversity or developmental needs. Longer-term therapeutic supports, alongside whole-of-family interventions and case management, would improve outcomes for children and young people. Schools also require greater resources and capability to respond to trauma and provide ongoing support for children affected by violence.

2. How can governments, services, education settings, families, communities and others better recognise and respond to children and young people experiencing violence or harm?

Anglicare WA staff emphasised the need for more child-centred and trauma-informed responses across all systems. Children and young people should be listened to, believed and supported in ways that recognise their developmental stage and lived experience.

There is a need for increased workforce capability to identify trauma responses and distinguish them from behavioural issues or developmental conditions. Improved access to specialist therapeutic supports, including child and adolescent mental health services, would assist earlier identification and intervention.

For Aboriginal children and young people, responses should recognise the importance of identity, culture, kinship, community and connection to Country as protective factors that support safety, healing and wellbeing.

Community education is also required to improve understanding of child abuse and violence against children and to challenge attitudes that minimise or dismiss children's disclosures of harm.

3. What approaches are most effective in supporting children and young people who are using violence or displaying harmful sexual behaviours to take accountability, change behaviours, and reduce harm?

Responses should recognise that children and young people who use violence or display harmful sexual behaviours may also be victim-survivors of violence and trauma. Interventions should avoid purely punitive approaches and instead focus on understanding the underlying causes of behaviour while still promoting accountability.

Further, there is an increasing influence of misogynistic attitudes and harmful gender norms among children and young people. Insights from practitioners working in schools indicate that problematic attitudes towards women and girls are emerging at increasingly younger ages, highlighting the importance of strengthening primary prevention efforts, respectful relationships education and early intervention initiatives.

Early intervention programs that work with the young person and their family show significant promise. Whole-of-family approaches can address trauma, strengthen parenting capacity and reduce exposure to ongoing violence or harmful influences.

Programs should be developmentally appropriate, trauma-informed and flexible enough to work with young people as both victim-survivors and users of violence. Children and young people should also have a meaningful role in developing their own support plans and identifying what safety and accountability look like for them.

4. How should the Second Action Plan respond to current or emerging forms of harm affecting children and young people, including technology-facilitated abuse, harmful online content, and violence within peer and dating relationships?

Technology-facilitated harm, harmful online content and the influence of misogynistic online communities are significant emerging risks for children and young people.

Consent education, bodily autonomy and respectful relationship education should begin early and be delivered consistently throughout childhood and adolescence.

Young people are often exposed to harmful messages online before they receive the skills and knowledge needed to critically assess them.

There is also a need for stronger regulation and accountability of social media platforms and technology companies whose algorithms can amplify misogynistic, violent and harmful content. Innovative technological solutions that disrupt harmful content, encourage safer online behaviour and support young people to make positive choices should also be explored.

Importantly, prevention efforts need to focus not only on restricting harmful content but also on strengthening protective factors such as connection, belonging, positive role models and healthy relationships.

5. How can children and young people be meaningfully involved in shaping the policies, programs and services that affect them?

Children and young people must be actively involved in designing, implementing and evaluating the policies, programs and services that affect them. Their lived experience provides important insight into what works, what creates barriers and what meaningful support looks like.

Consultation needs to move beyond tokenistic engagement. Children and young people must see their feedback reflected in decision-making processes and service design. Child-inclusive and youth-led approaches must be embedded across policy development, service planning and program evaluation.

PRIORITY AREA 4: PEOPLE WHO USE VIOLENCE

1. What would make the biggest difference in preventing and responding earlier to the use of violence?

Earlier identification and intervention were consistently identified as the most important strategies for preventing and responding to violence. This includes improving the capacity of police, frontline workers and community services to recognise warning signs before violence escalates.

Anglicare WA staff highlighted the importance of integrated systems that enable information-sharing and early intervention before situations reach crisis point. Education for both victim-survivors and people using violence, alongside more effective identification of financial abuse and coercive control, could support earlier responses.

Priority attention must be given to young men, young fathers and first-time parents, who may benefit from targeted support during periods of transition and vulnerability.

2. How can services, families, communities, workplaces, institutions and others better recognise and respond safely to people using violence or at risk of using violence?

There is a need to create environments where people can acknowledge harmful behaviour and seek help without fear of immediate judgement, while maintaining a clear focus on accountability and victim-survivor safety.

Workforces, schools, communities and families require greater education and training to recognise warning signs and understand the drivers of violence. Cultural safety and awareness of the impacts of colonisation should be embedded in responses involving Aboriginal peoples.

Positive male role models, community leadership and parent education were also identified as important mechanisms for preventing violence and challenging harmful attitudes before they become entrenched.

3. What approaches are most effective in supporting people who use violence to take accountability, change behaviours, and reduce the use of violence, while focusing on victim-survivor safety?

No single intervention will be effective for all people who use violence. Person-centred, culturally responsive and strengths-based approaches that meet people where they are while maintaining clear accountability for their behaviour are essential.

Programs should recognise cultural, linguistic and community differences and be adaptable to diverse populations. Interventions that support men to understand the impact of violence on children, parenting and family relationships were identified as particularly promising.

Long-term therapeutic and relational approaches that address the underlying drivers of violence, alongside evidence-informed men's behaviour change programs, were viewed as critical to achieving sustained behaviour change while prioritising victim-survivor safety.

4. How can governments and services, among others, strengthen culturally safe, accessible and evidence-informed responses for a range of communities and cohorts?

Organisations need to regularly assess their cultural capability and responsiveness to ensure services remain accessible, inclusive and effective for diverse communities. Additionally, there is a need for greater investment in culturally safe assessment tools, interventions and workforce capability, particularly for Aboriginal communities.

Many current programs are based on Western concepts of family and may not adequately reflect Aboriginal family structures, kinship systems or cultural strengths. Greater involvement of Aboriginal organisations in the design, delivery and evaluation of interventions is required.

Programs should be accessible, linguistically appropriate and responsive to the needs of diverse communities. Increased investment in Aboriginal-led responses and positive community role-modelling was identified as a key priority to achieve this.

There is also an opportunity to strengthen alignment between the National Plan and *Our Ways, Strong Ways, Our Voices*, ensuring Aboriginal peoples are visibly recognised as a priority population throughout implementation. This is important in regional and remote communities, where rates and severity of violence can be extreme, service demand is exceptionally high, and system responses often struggle to meet the scale of need. Anglicare WA's experience delivering Coordinated Response Services across regional Western Australia highlights the urgency of addressing violence in these communities through culturally safe, place-based and adequately resourced responses that reflect local needs and realities.

PRIORITY AREA 5: SYSTEM INTEGRATION AND WORKFORCE

1. What would make the biggest difference in creating a more coordinated and connected system response for people affected by violence against women and children and other forms of gender-based violence and people using violence?

- **System integration.** System integration is one of the most important reforms required to improve outcomes. Services and systems must be designed to prevent victim-survivors from having to repeatedly recount their experiences, with information shared safely and effectively across agencies.

Integrated digital platforms, coordinated response models and clear case coordination arrangements would improve communication, reduce duplication and strengthen safety planning. Aboriginal voices, governance and data sovereignty should be embedded throughout the design and implementation of integrated systems.

The system needs to become more trauma-informed and capable of responding flexibly to the unique needs of individuals and families, rather than relying on rigid service pathways.

- **National consistency.** There is currently significant variation across jurisdictions in the availability and quality of interventions for people who use violence. While some states have invested substantially in perpetrator interventions and Men's Behaviour Change Programs, access remains inconsistent across much of Australia. Emerging evidence suggests that early intervention approaches, alongside evidence-informed behaviour change programs, can contribute to improved outcomes and reduced recidivism.

Greater national consistency, stronger accountability across jurisdictions, and increased investment in evidence-building are required to strengthen responses for people who use violence while prioritising victim-survivor safety. Priority actions should include strengthening national coordination across prevention, response and recovery systems; addressing evidence gaps regarding community attitudes and institutional responses to violence; greater investment in public education and primary prevention to improve understanding of FDSV, challenge harmful attitudes, and promote respectful relationships; and expanding targeted prevention initiatives in settings with significant influence on social norms, including workplaces, universities, financial institutions and sporting codes.

2. What workforce capabilities, supports, or conditions are most needed to strengthen prevention, early intervention, response and recovery?

Workforce sustainability requires increased investment in remuneration, supervision, professional development and wellbeing supports.

Family and domestic violence workers often experience high levels of vicarious trauma and require structured support systems, including peer supervision and communities of practice.

Further, family violence and sexual violence require distinct expertise, practice frameworks and workforce capabilities. Care should be taken to ensure that efforts to integrate service responses do not inadvertently diminish specialist knowledge within the sexual violence sector or create expectations that services possess expertise beyond their scope.

Long-term, greater investment in workforce capability, service integration and specialist sexual violence responses is required if genuinely integrated approaches are to be realised and staff are to be retained. Anglicare WA further notes the challenges attracting and retaining specialist workers in regional and remote areas, including Aboriginal practitioners, psychologists and therapeutic specialists.

There is also a need to strengthen partnerships across sectors, including with large employers and industry, to support prevention and workforce development initiatives.

3. What supports do specialist and universal services need to provide inclusive, accessible and response services?

A key concern is the proposed integration of Specialised Family Violence Services (SFVS) into broader family support funding arrangements under the Department's reforms. SFVS represents one of the Commonwealth's most significant investments in specialist family and domestic violence responses, delivering integrated case management and coordinated support for adults, children and young people experiencing violence.

While there is value in outcomes-focused commissioning, there is a risk that moving away from clearly defined specialist family violence models could weaken the quality, consistency and safety of responses if specialist FDV expertise is no longer a core funding requirement. The Second Action Plan should ensure that specialist family violence capability, risk assessment, safety planning and integrated case management remain central features of future service delivery models.

Further, specialist family violence services are experiencing increased demand and complexity, highlighting the need for sustained investment in service funding, workforce development, ongoing training and quality improvement processes.

Universal services also require greater capability to identify and respond to family and domestic violence. This includes access to training, specialist consultation and improved referral pathways.

4. What evidence, workforce or system gaps should the Second Action Plan prioritise to strengthen implementation and improve outcomes over time?

Underinvestment in family violence, sexual violence and Aboriginal-led services is a key system gap. Greater investment is needed in culturally appropriate assessment tools, Aboriginal-designed interventions and evidence-building initiatives that reflect Aboriginal ways of knowing and healing.

There is also a need for stronger engagement of the health sector, particularly general practitioners, in the early identification of violence and trauma. Improved workforce capability across health, education and community services would support earlier intervention and referral.

Finally, longer-term funding and evaluation frameworks that support innovation, build evidence and enable services to understand outcomes over the life course, rather than within short funding cycles, are essential.

OTHER AREAS OF ACTION

1. Are there any other actions you think should be a priority to stop family, domestic and sexual violence?

Family court system. The family court system remains a significant barrier to recovery for many victim-survivors. It is overburdened with FDV-related matters, creating protracted legal proceedings that can be exploited and weaponised by perpetrators through coercive litigation, misuse of subpoenas, repeated applications and parenting arrangements that enable ongoing control and harm.

Family law support services across the country are under growing pressure, often navigating the complexity of FDV matters in family separation while being drawn into litigation by perpetrators in order to further weaponise the legal process. Therapeutic records may be used in ways that deter help-seeking, and consent requirements can create barriers to children accessing counselling and other supports. Children's rights to safe, confidential and protected therapeutic spaces should be strengthened.

Given the growing intersection between family law and FDV, a coordinated national reform agenda is needed to reduce systems abuse, improve integration between family law and family violence responses, strengthen protections for victim-survivors and children, and ensure legal processes support, rather than undermine, safety and recovery.