



DV-alert

Domestic and Family Violence Response Training

Consultation on the Second Action Plan

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



Introduction

DV-alert welcomes the opportunity to provide input to the Consultation on the Second Action Plan National Plan to End Violence against Women and Children 2022–2032 (henceforth, Second Action Plan).

The perspective presented in this document is informed by nearly two decades of national experience delivering the DV-alert training program. Our insights are directly informed by the lived realities of our trainers, who travel extensively across metropolitan, regional, and remote Australia to engage with frontline workers and the broader community. Through this consistent, on the ground presence, DV-alert has developed a deep understanding of the unique barriers, such as geographical isolation, limited local service provision, and the specific needs of regional and remote communities that influence how individuals recognise, respond, and refer those experiencing, or at risk of experiencing, domestic, family, and sexual violence (henceforth DFSV).

As detailed below, the DV-alert program has evolved into a comprehensive suite of tailored training offerings, specifically designed for priority populations including women with disability, multicultural communities, Aboriginal and Torres Strait Islander peoples, LGBTQ+ community and men who use violence.

Through the delivery of these programs, DV-alert has gained deep, first-hand insight into the lived experiences of frontline and adjacent workers and the systemic challenges they encounter daily. Drawing on this unique, multi-layered perspective, DV-alert is pleased to propose the recommendations within this document, for consideration in the Second Action Plan.

It is worth noting it's impossible to do this work without acknowledging the women and girls reportedly killed by men across Australia in recent weeks. Their deaths are a devastating reminder of the **urgency of preventing gendered violence** and of the work still ahead.



2 About DV-alert

DV-alert is a nationally accredited domestic and family violence training program delivered by Lifeline since 2007.

The program is fully funded by the Australian Government Department of Social Services; the program is provided at no cost to frontline workers and the general public and delivered nationally as a key initiative under the National Plan to End Violence against Women and Children 2022–2032.

DV-alert delivers domestic and family violence response training to build the capability of health, allied health, community frontline workers, volunteers and community members. DV-alert training equips learners to recognise signs of domestic and family violence, respond appropriately, and refer people experiencing, or at risk of, domestic and family violence to relevant support services.

DV-alert supports the National Plan by strengthening prevention, early intervention and response capability across frontline or adjacent workers and through the community. It also contributes to a trauma-informed, culturally safe and consistent service response, including through focus streams designed for diverse communities and settings.

As described further below, DV-alert is designed and delivered as a trauma-informed, nationally consistent accredited training program. Workshop content is developed with subject matter expertise and informed by those with lived and living experience to support accuracy, relevance and cultural safety practices across diverse settings. eLearning caters to learners who prefer to work in a self-paced environment.

Focused streams are co-facilitated by both subject matter experts and Lifeline DV-alert trainers, a dual-delivery model that is central to the program's success. This approach ensures that training remains grounded in deep, local community knowledge while upholding a rigorous, consistent pedagogical standard. By combining the subject matter experts with specialised lived and professional expertise, with the Lifeline DV-alert trainer's local knowledge and delivery skills, the program gains profound credibility and relevance for the learner. This model empowers participants to move beyond theoretical understanding, providing them with the practical confidence to apply the Recognise, Respond, Refer framework safely and effectively within their specific local context. As a nationally accredited training program, and one which is delivered under the Lifeline Registered Training Organisation (RTO), DV-alert is held to the associated and rigorous RTO quality obligations and governed by ASQA (Australian Skills Quality Authority) standards in delivering the following Unit of Competency pathway:

- Accredited two-day *Foundations* workshops, including a First Nations stream with regional and remote delivery options



- eLearning leading to the nationally recognised unit CHCDFV001 – Recognise and respond appropriately to domestic and family violence
- One-day *Focused* workshops for learners seeking deeper capability within specific priority populations

In addition, DV-alert delivers the following training to the general public:

- Public Awareness Workshops that build community understanding and confidence to recognise, respond and refer. Including the Brothers Standing Tall program, a workshop within which Aboriginal and Torres Strait Islander Men can talk about the issue of family violence and what they can do to help make a difference.

Together, these offerings provide both foundational and more specialised learning pathways. Focused workshops build deeper capability for particular priority populations, including Aboriginal and Torres Strait Islander peoples, multicultural, women with disability, gendered violence in diverse communities, LGBTQ+ and men who use violence contexts, while public awareness workshops (known as DV-aware) are options that give community members a free accessible entry point to build confidence to recognise, respond and refer safely. This includes Brothers Standing Tall, mentioned above.

Across financial year 2025 - 2026 DV-alert delivered:

- 420 workshops nationally
- 4,680 frontline workers trained
- 2,177 members of the general public trained
- totalling **7,230** people trained to recognise, respond and refer people experiencing, or at risk of, domestic and family violence.

The positive impact of the training must be measured as more than the number of participants themselves but taking into consideration the multiplying impact that extends to the many clients of frontline workers, their families, their friends and colleagues who will benefit from this training.



3 Response to the Consultation Paper

The following sections address the priority areas and consultation questions outlined in the Consultation Paper, drawing on evidence and insights gained through the delivery of the DV-alert program nationally.

3.1 Priority Area 1: Victim-Survivors

Centering the victim-survivor in all responses to end gender-based violence is the cornerstone of national efforts to end violence against women and children. A truly victim-survivor-centred approach must be holistic as it considers not only what a response system looks like in policy, but crucially how it is delivered in practice.

There is an increasing need to navigate the discourse regarding boys' childhood trauma and the risk factors for future perpetration of violence. While it is essential to address these factors in primary prevention, recent trends risk inadvertently shifting the focus away from the victim-survivor. To effectively end gender-based violence, we must ensure that explorations of perpetrator history or vulnerability do not eclipse the safety, needs, and rights of those currently experiencing violence. The victim-survivor must never be sidelined or treated as secondary to the analysis of the perpetrator's trajectory. A victim-survivor-centered approach is only as effective as its delivery on the ground. We advocate for a shift that prioritises the experiences of the victim-survivors.

While the First Action Plan established vital groundwork in awareness and coordinated action, the Australian Government must remain steadfast in its commitment to a national strategy that places the safety and well-being of victim-survivors at the heart of both policy design and service delivery. Below, we outline specific recommendations to ensure this core principle is embedded across the service system.

3.1.1 Earlier access to support and barriers to help-seeking

Earlier access to support depends not only on people recognising violence, but also on the availability of accessible services including those that can act as entry points to more specialised support.

A defining success of the First Action Plan was the recognition that community education and workforce capability are the bedrock of effective DFSV prevention and early intervention. As a core initiative under the First Plan, DV-alert has been instrumental in building a national network of informed responders ranging from frontline workers and first responders to family, friends, and community members. Sustaining and scaling this capability is not merely a priority, it is a prerequisite for a national system capable of identifying and responding to violence and abuse before it escalates to reach those in every corner of Australia.



DV-alert equips frontline workers and community members with the skills to recognise the nuanced indicators of DFSV either through verbal cues, behavioural patterns, systems, or physical and non-physical signs. Addressing violence at its earliest is a ***fundamental objective*** of the program.

DV-alert learners frequently report that, prior to training, they had observed concerning indicators such as physical trauma or a woman's visible anxiety when a partner is present but lacked the specialised knowledge to interpret these signals or initiate a safe, supportive conversation. This is a critical gap in a victim-survivor's window of opportunity to disclose as it is often fleeting. Without a frontline worker or community member who is trained to understand the signs and foster a safe, trauma-informed environment in that precise moment, the opportunity for support can be irrevocably lost.

Early access to intervention outside of the specialist DFSV sector is therefore imperative to a functional national safety net. Data from the *ABS 2021–22 Personal Safety Survey* confirms that informal support networks are the primary point of contact for many; approximately one in three women who experienced violence from a current partner sought support from a friend or family member. This reliance on community-based support increases significantly for those who have experienced violence from a previous partner, with roughly one in two women and men turning to their personal networks for help (ABS, 2023). These findings underscore that empowering the entire community to recognise, respond, and refer is not just a secondary support measure it is the frontline of prevention. This is the reason that the Rapid Review (*Unlocking the Prevention Potential* Rapid Review) recommended (Rec 8) the expansion of the DV-alert DV-aware program in recognition of family and friends being “natural responders” to both victim-survivors and perpetrators they know in the community.

The objectives of DV-alert are aligned with the findings of the *Unlocking the Prevention Potential* Rapid Review, which argues that ending DFSV requires a broad, systemic effort that extends far beyond specialist services. By equipping frontline and allied workforces including health, education, and community services with the skills to recognise early warning signs, respond safely, and facilitate appropriate referrals, DV-alert operationalises the Review's core proposition: that prevention potential must be unlocked through the everyday systems that interact with women, children, and families.

From a workforce reform perspective, DV-alert serves as a strategic enabler of the Rapid Review's broader agenda. The program moves the DFSV response from a narrow, specialist-dependent model toward a distributed, whole-of-system approach. By standardising the Recognise, Respond, Refer framework, the program empowers a diverse workforce to act as safe, competent first responders. This force multiplier effect



ensures that responses to violence are consistent and trauma-informed, rather than ad hoc, thereby interrupting the escalation of violence across multiple stages from early recognition and crisis intervention to recovery and long-term rebuilding. DV-alert is a readily scalable and established example of the Rapid Review's recommendations on meaningful investment in services which can provide earlier intervention, prevention and the avoidance of violence being unaddressed until the crisis support response services ecosystem is reached. The Rapid Review provided the following advice on policy and investment to better prevent violence against women and children;

- **Investing earlier in prevention**, before violence escalates or reaches crisis response.
- **Building community capability**, including family, friends and informal supporters as "natural responders".
- **Expanding DV-alert/DV-aware reach**, including through Recommendation 8, so more people can recognise, respond and refer earlier.
- **Strengthening systems outside specialist DFSV services**, so prevention and early intervention happen through everyday settings like health, education, community services and local networks.

This expansion of capability is vital given formal specialist services are often inaccessible to those who need them most. The ANROWS Voices study highlights the systemic barriers victim-survivors face, including confusing terminology (72%), lack of available appointments (55%), cost (49%), and concerns regarding confidentiality (47%) (Hegarty et al., 2022). Furthermore, victim-survivors frequently encounter a fragmented, poorly coordinated service landscape that discourages help-seeking or leads to disengagement.

DV-alert mitigates these barriers empowering a vast workforce assisting in providing a low-barrier, accessible entry point for support. When frontline workers and community members are trained to act as the first point of contact, they provide an essential bridge for those who may never reach out to formal services.

DV-alert public awareness workshops directly support the Rapid Review's emphasis on building a whole-of-community prevention architecture. By extending capability beyond frontline workforces into the broader community, these workshops foster a culture of shared responsibility. This improves public understanding of the dynamics and impacts of DFSV, supporting earlier recognition and more timely connection to support. In doing so, DV-alert does not merely train individuals; it builds a connected, informed network capable of intervening effectively to prevent harm, ensuring that victim-survivors are supported by a community that is ready, willing, and able to respond.

DV-alert offers the following recommendations as regards the Second Action Plan:



- DV-alert recommends that the Second Action Plan expands the delivery of frontline workers education and capability-building, as a fundamental gateway to specialist support system. By ensuring that workers across health, education, and community services are trained to Recognise, Respond, and Refer, the government can provide a consistent, low-barrier entry point for victim-survivors, effectively bridging the gap for those who may never access formal, specialist services.
- Expand investment in community capability and early response, including family, friends and community touchpoints as a key cohort as identified in the Rapid Review into DFSV. Continue investment in DV-alerts community education programs to build the knowledge and confidence of families, communities and bystander to recognise domestic and family violence early, respond safely and connect people with appropriate support.

3.1.2 Gaps for Aboriginal and Torres Strait Islander peoples

Lifeline welcomes the First Action Plan's recognition of the importance of Aboriginal and Torres Strait Islander-led approaches and the need for culturally safe responses for victim-survivors. Building on this foundation, the Second Action Plan should continue to strengthen approaches that support Aboriginal and Torres Strait Islander peoples to access help in ways that reflect their culture, communities and lived experiences.

The prevalence DFSV within First Nations communities is inseparable from the systemic barriers of entrenched colonialism, racism, geographic isolation, and intergenerational trauma. To effectively address these challenges, the Second Action Plan should move beyond cultural awareness toward active anti-racist practice.

Institutional bias is a fundamental driver of poor health and safety outcomes. As the Public Health Association of Australia (PHAA, 2026) has declared, racism against First Nations peoples is a public health emergency. For victim-survivors, historical dispossession and the legacy of the Stolen Generations create a pervasive fear of child removal; if a service is perceived as culturally unsafe, women will choose to remain in violent situations rather than trigger unwanted child protection intervention (SNAICC, 2023). This distrust is further exacerbated by systemic issues within policing, including reports of racial profiling and failure to take victim accounts seriously, leading to cycles of underreporting and inadequate justice outcomes (Amnesty International, 2020; ALRC, 2018).

Many First Nations families face structural barriers to wealth accumulation, having been systematically excluded from the opportunities to build and transfer intergenerational assets and systemic discrimination in housing markets significantly



restrict First Nations women's ability to build security. Overcrowding often the only option due to chronic housing shortages creates distinct forms of sexual violence, including familial abuse and technology-facilitated exploitation (Our Watch, 2021). Without culturally appropriate crisis accommodation and long-term housing, women and children are effectively trapped in violent environments, facing the constant threat of homelessness or punitive child protection interventions (Productivity Commission, 2023).

Sexual assault services frequently fail First Nations communities due to a lack of cultural competency, geographic isolation, and fly-in, fly-out funding models that impede the development of community trust (ANROWS, 2022). These services often fail to identify the predominant aggressor in complex cases and fail to accommodate cultural norms regarding Men's and Women's Business. Furthermore, the prevailing narrative that DFSV is exclusively women's business wrongly places the burden of safety on victims-survivors, absolving perpetrators of accountability.

The impact of violence is compounded for vulnerable cohorts:

- First Nations women with disabilities face misinterpretation of symptoms due to racial bias, often being incorrectly identified as perpetrators or substance users.
- LGBTIQ+ First Nations people (Sistergirls and Brotherboys) face increased risks of homelessness, mental ill-health, and violence due to social exclusion.
- There is a devastating intersection between intimate partner violence, substance abuse, and human trafficking, where women are coerced into sexual exploitation.

To ensure a survivor-centered response:

- Police and the judiciary must be trained in systems abuse and perpetrator manipulation to avoid misidentifying victims as perpetrators.
- Move away from narratives that frame DFSV as an issue for women to navigate.
- Replace hub and spoke funding with flexible, long-term investments that support First Nations communities in regional, remote and very remote Australia.
- Foster partnerships between police, legal professionals, and First Nations peoples to ensure responses are coordinated, culturally safe, and trauma informed.

Existing initiatives provide for culturally informed principles can be operationalised across the national service system. Programs such as 13YARN demonstrate the value of Aboriginal and Torres Strait Islander-led support that centres cultural understanding, while the DV-alert First Nations streams act as a powerful driver of workforce capability. These approaches, which are deeply informed by the evidence base of *Our Way-Strong Ways-Our Voices*, prioritise the voices and lived and living experiences of First Nations



women. By building the skills of frontline workers and community to deliver culturally safe, trauma-informed care, these programs create pathways that are genuinely safe, relevant, and effective.

The DV-alert First Nations streams are a strategic mechanism for achieving the targets set out in the National Agreement on Closing the Gap, specifically the commitment to reduce the rate of family violence against Aboriginal and Torres Strait Islander women and children by at least 50% by 2031 as critical progress toward a goal of zero. To reach this goal, the Second Action Plan should embed the holistic prevention insights found in *Our Way- Strong Ways and-Voices* (National Aboriginal and Torres Strait Islander Plan to End Family, Domestic and Sexual Violence 2026–2036) across the broader service system.

However, a one-size-fits-all approach to service delivery is insufficient. While Aboriginal Community Controlled Organisations (ACCOs) are a vital pillar of the sector, they are not the only destination for First Nations women. We must acknowledge that for some, the high visibility of kinship and family connections within Aboriginal Controlled Community Organisations (ACCOs) creates genuine safety risks. Concerns regarding confidentiality and the potential for private information to be leaked within close-knit community networks can act as significant barriers to help-seeking. Therefore, upskilling the broader, non-specialist workforce and community through DV-alert First Nations workshops to ensure that First Nations women have access to culturally safe, confidential support, regardless of which service or touchpoint they choose to approach. By fostering widespread culturally safe practice across all touchpoints, we ensure that every woman regardless of her preference for, or access to, specific services is met with a frontline worker and community member who is trained to recognise her needs, respect her privacy, and provide a culturally safe, trauma-informed response. This is essential for delivering a coordinated, national infrastructure that honours the diversity of First Nations peoples experiences and choices.

Accordingly, DV-alert recommends the following be enacted within the Second Action Plan to strengthen support for victim-survivors and address ongoing barriers and system gaps:

- Vigilance applied regarding DFSV funding, service design, and performance metrics anchored in the lived and living experience of the victim-survivor. We recommend that the Second Action Plan mandate trauma-responsive safety frameworks, where the physical and psychological safety of the victim-survivor is the primary metric of service success, ensuring that administrative processes never override the safety and needs of those seeking help.
- Moving beyond a one-size-fits-all approach acknowledging Aboriginal Controlled Community Organisations (ACCOs) are a vital pillar, we must also acknowledge that kinship and confidentiality concerns can sometimes act as barriers within



First Nations communities. The Second Action Plan should support a dual strategy to strengthen Aboriginal Controlled Community Organisations (ACCO's) to continue their essential work and upskill the broader, non-specialist workforce through DV-alert's First Nations streams to ensure First Nations women have access to culturally safe, confidential support at any service touchpoint they choose. This approach honours First Nations self-determination while ensuring every woman has a safe, private, and trauma-informed pathway to help and support. DV-alert recommends that the Second Action Plan provide for First Nations DV-alert Training be mandatory for ACCHO's, and AMO's nationally so to build the Recognise, Respond and Refer capability in a culturally informed way – fostering early intervention capability into this critical frontline workforce.

3.2 Priority Area 2: Prevention and early intervention

DV-alert endorses the First Action Plan's focus on primary prevention, exemplified in the Change the Focus framework, and early intervention approaches designed to stop violence before it starts. Although causal links are unable to be made, it is heartening that progress has been made in reductions of population level rates of people experiencing most forms of violence and in most states and territories (ANROWS, 2026).

Advancing DFSV prevention requires an ongoing commitment to understanding the drivers of violence and the intersecting factors such as condoning violence against women, rigid gender stereotyping and a lack of judicial accountability. This must be accompanied by a willingness to invest in primary prevention, acknowledging that these impacts take time to be realised in population-level data. Regarding early intervention, DV-alert submits that sustained investment in accredited training pathways that supports early recognition of DFSV, safe trauma-informed responses, and skills in connecting people at risk of and experiencing DFSV to support before harm escalation.

3.2.1 Prevention

Prevention is only as effective as the evidence base that informs it. To strengthen national efforts, we must continue to invest in research such as that produced by ANROWS that maps the intersection of structural and systemic drivers of DFSV. Deepening this knowledge is critical to ensuring that prevention initiatives are evidence-led and address the root causes of violence in an ever-changing ecosystem.

There is a correlation between Adverse Childhood Experiences (ACEs) and the later risk of both victimisation and perpetration of DFSV (Zhu et al., 2024). While this evidence base suggests that supporting families to reduce the prevalence of ACEs is a critical



prevention measure, current discourse often risks adopting a narrow, male-centric perspective.

It is critical that our understanding of ACEs moves beyond a focus on boys and young men. While males are significantly overrepresented in the perpetration of DFSV, we must not ignore the distinct and severe impacts of ACEs on girls, women, and gender-diverse individuals. According to the Australian Child Maltreatment Study (2023), these cohorts experience substantially higher rates of multi-type abuse and long-term health burdens.

Consequently, prevention strategies must be evidence-led rather than filtered through an exclusively masculine lens. Treating ACEs primarily as a pathway to perpetration in boys obscures the reality that girls and women are disproportionately subjected to the traumatic effects of early-life maltreatment. To be effective, the Second Action Plan needs to ensure that:

- Prevention efforts are gender-responsive in recognising that while ACEs increase risk for all, the specific manifestations and consequences of trauma differ significantly across genders.
- The correlation between ACEs and violence needs to be examined through a gendered lens that acknowledges power dynamics, rather than assuming a universal biological or developmental trajectory for boys and men.
- Investment based on the broad findings of the Australian Child Maltreatment Study, ensuring that the needs of female and gender-diverse victim-survivors including the need for specific service responses for female and gender diverse victim-survivors are not sidelined in favour of male-focused perpetrator research.

3.2.2 Early intervention

An often overlooked, a component of prevention is the need to systematically map public perceptions of conflict within DFSV contexts. Many individuals in the broader community, including in influential decision-making positions (e.g. Legal) struggle to distinguish between normal relationship conflict and the patterns of coercive control, power imbalances, and violence that characterise DFSV. This blurring poses a significant barrier to early intervention; if the public perceives violence merely as conflict or relationship breakdown, they are less likely to recognise the signs, intervene safely, or encourage help-seeking. We recommend that the Second Action Plan prioritises research into these public perceptions to better understand where these misinterpretations originate. By identifying how these narratives are constructed, the Government can develop targeted public awareness campaigns that dismantle the myth that violence is simply an extreme form of conflict, thereby empowering the community to identify and respond to the specific, gendered dynamics of abuse.



By training frontline workers across a wide range of services to recognise, respond and refer people at risk of, or experiencing, DFSV related signs or distress, enhanced capability is embedded across a wider range of contexts and national geography. Workplaces and community settings across all jurisdictions covering metro, regional, rural and remote settings, all have a role to play in ensuring recognition, response and referral capabilities are accessible.

DV-alert submits that in addition to a more broadly conceived network of formal services, informal *supports* play a critical and under recognised role in early intervention. ANROWS estimates that 64.4% of women experiencing violence seek support from friends and family first (Hegarty et al., 2022). Positive informal support can buffer the impacts of violence on physical and mental health and has been shown to be protective against future abuse, whilst also creating opportunities for earlier recognition and referral. Friends and family are often the first, and sometimes only, source of support (Campbell et al., 2024). On those bases, DV-alert submits that training and support for the broader community is a key enabler not only for supporting those experiencing DFSV, but for wellbeing of those providing the support.

Based on the above considerations DV-alert recommends the following actions for consideration in the Second Action Plan.

- Strengthen the evidence base through ongoing research into the drivers of violence, as well as the intersecting stressors and protective factors that influence DFSV risk. This should be supported by targeted competitive funding rounds and dedicated investment for central agencies, such as the AIHW and ANROWS, to produce robust, data-driven reports.
- Implementation of outcomes measured approaches with scope for short- and medium-term benefits including evidence-based extrapolation to long term benefits to DFSV reduction.
- To achieve a more effective and cohesive national response, we must move away from fragmented, siloed services by establishing formal, operational connections of integrated care between DFSV services, mental health providers, and suicide prevention sector. This requires broadening how we conceptualise the DFSV support system: rather than viewing safety exclusively through the lens of police, legal aid, and specialist refuges/services, mental health and general crisis supports should be integrated as core entry points into the safety net.
- Recognition of the diverse support needs of victim-survivors most of whom are women and children experiencing DFSV, and perpetrators most of whom are men in the design of any comprehensive support system.
- Recognition of the key role of informal supports, and the design of policy to support training for that informal support mechanism not only in core skills to support the person experiencing DFSV, but also skills in workforce wellbeing literacy to build personal sustainability and trauma-informed self-management in high stress working environments.



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

DV-alert recognises that exposure and experience of DFSV is a form of Adverse Childhood Experience (ACE), with immediate and lifelong impacts on children's safety, development, mental health and wellbeing. As previously stated, there is a well-established, cumulative relationship between ACEs and a range of adverse outcomes across the life course, including poor mental and physical health, suicide attempts and suicide deaths, and both victimisation via, and perpetration of, DFSV (Gladieux et al., 2023; Webster et al., 2022; Hughes et al., 2017).

We commend the First Action Plan for recognising that children directly and indirectly exposed to DFSV as victim-survivors in their own right. This focus has led to substantial enhancements in our baseline understanding of the extent and impact of DFSV and how this co-occurs with other forms of violence (Haslam et al, 2023).

DV-alert notes that children and young people are most likely to initially disclose abuse to a trusted adult, such as a parent, family member, teacher or coach, or to a peer, and there is opportunity to improve consistency in responses nationally. Trusted adults and the general public need the capability to respond safely, calmly and without blame. Responses should be trauma-informed and appropriate to children and young people's age, developmental stage and circumstances (Australian Institute of Family Studies [AIFS], 2025a). For Aboriginal and Torres Strait Islander children, families and communities, responses must also be culturally safe, accessible and respectful (Truong & Miller, 2025). This might include practical guidance on recognising trauma in children, responding in age-appropriate ways, supporting safe disclosure and applying child-centred safety planning, alongside a more standardised, evidence-informed framework for practice across jurisdictions and service settings

Furthermore, children and young people are navigating increasingly complex social and digital environments, where harmful content, technology-facilitated abuse, and peer and dating violence are becoming more visible and consequential. Within this context the development of appropriate guidance and support to children and young people requires actively engaging children and young people as partners in shaping safe, relevant and impactful solutions.

DV-alert submits the following considerations to further enhance support for children who are impacted, exposed and experiencing DFSV in the Second Action Plan.

- DV-alert proposes the development of a dedicated DV-alert focus stream on children and young people. As national policy shifts to explicitly recognise children and young people as victim-survivors in their own right, there is an



urgent need to close the current gap in workforce capability. A focused training stream will ensure that frontline workers are equipped with the distinct, age-appropriate skills required to recognise child-specific trauma, implement safety planning, and provide support that honours the rights and developmental needs of the young person. Integrating this focus stream into the DV-alert workshop offerings is essential to building a system that truly protects and empowers the next generation.

- Address current and emerging harms affecting children and young people, including technology-facilitated abuse, harmful online content, and violence within peer and dating relationships, through age-appropriate education, workforce training and safer digital environments.

3.4 Priority Area 4: People who use violence

DV-alert commends the First National Plan and the accompanying Change the Story framework, which provides a strong foundation for prevention by promoting respectful relationships, gender equality and healthier community attitudes, while also supporting earlier intervention with people at risk of using violence.

Despite this foundational work, gender-based violence remains prevalent. Recent data indicate that around one in four men aged 18–30 report using at least one form of violence against an intimate partner (The Man Box 2024), and a substantially higher proportion of Australians report experiencing violence from a male perpetrator compared to a female perpetrator (38% versus 11%) (Australian Institute of Health and Welfare, 2024b). These patterns underscore the urgency of strengthening early identification and engagement of people who use, or are at risk of using, violence, and supporting their connection to appropriate prevention and intervention pathways whilst and all times keeping the victim-survivor and children at the centre of all actions.

3.4.1 Preventing exposure to ACEs to reduce use of violence against others

DV-alert submits that a key priority is strengthening upstream prevention efforts, particularly through reducing exposure ACEs. As previously stated, the well-established, cumulative relationship between ACEs and a range of adverse outcomes across the life course means that addressing the intergenerational transmission of violence is central to long-term prevention.

The *Unlocking the Prevention Potential* report (2024) highlights the importance of centring children's safety and recovery to disrupt current trauma and future cycles of violence. This includes investment in developmentally appropriate responses for children and young people who have experienced or are using violence, strengthening relationships with protective caregivers, and ensuring access to stable housing and financial supports.



3.4.2 Improving early service engagement for people who use violence through accessible, low-barrier entry points

Improving early engagement with people who use violence requires accessible, low-barrier entry points. Evidence indicates that many individuals who use violence do not identify with the labels such as “perpetrator” (Hegarty et al., 2022), which can limit engagement with services framed solely around domestic and family violence. This underscores the value of services that meet individuals where they are, including generalist and relationship-focused supports.

Crisis support services also represent an important, and often underutilised, point of early intervention. Individuals who use violence may present during periods of acute distress such as relationship breakdown, heightened emotional dysregulation, or suicidality rather than seeking help for their behaviour directly. In this context, crisis services such as Lifeline or MensLine Australia can play a role in recognising potential risk and facilitating safe, supported transitions to appropriate services.

There is also value in continuing to build the capability of universal and frontline workforces to recognise patterns of coercion, abuse and escalation risks earlier. Programs such as DV-alert contribute to this by strengthening safe recognition, first response and referral skills across community and service sector, including where people using violence may first come into contact with workers outside specialist perpetrator responses.

Based on these considerations, DV-alert submits the following actions to enhance the early identification and engagement of people who use, or are at risk of using, violence in the Second Action Plan.

- Continue to fund ANROWS research into perpetrators of violence to create accurate, evidence-based profiles as well as causal factors.
- Research into existing Behaviour Change programs to truly understand their efficacy is urgent. Self-reported improvement is not a true measure of efficacy and should not be routinely used to demonstrate effectiveness of these programs. This should be completed before further funding goes into this area.
- Prioritise reducing ACEs through child-centred, trauma-informed supports and strengthened family stability to disrupt intergenerational cycles of violence. This should be for all genders of children, not exclusively boys.
- Strengthen early engagement with people who use or are at risk of using violence by investing in accessible, low-barrier entry points, support help-seeking beyond violence-labelled services, and enable safe transitions from crisis to ongoing behaviour change supports.
- While maintaining a clear focus on victim-survivor safety and perpetrator accountability, strengthen integration between domestic, family and sexual



violence, mental health and suicide prevention systems to enable coordinated responses to the use of violence.

- Review the efficacy and outcome of programs that provide preventative mental health programs for boys and young men, including positive male role models and resources. However, for every dollar spent on a boy equivalent funding should be attributed to girls education. Assisting them to see the signs of boys and men influenced by the manosphere, the dangers of rigid gender norms, on-line misogyny, tech-facilitated abuse and the normalising of harmful attitudes. Empowerment and education solely directed at boys will undermine efforts to end violence against women and children.

3.5 Priority Area 5: System Integration and Workforce

The First National plan comprehensively outlined that preventing violence against women and children is dependent on an expert workforce supported by mainstream services.

The disability sector is a critical workforce that also needs education and representation when discussing workforce. There is a huge gap in the disability support workforce and their capacity to recognise, respond and refer due to the casualisation of the workforce and limited ability to take time for professional development. DV-alert's Women with Disability workshop should be considered when looking at NDIS accreditation and training, as well as seeking other measures to enhance the likelihood that this workforce can and does engage with DV-alert or other relevant training. Without efforts to close this gap it leaves some of the most vulnerable women in our community exposed to DFSV.

DV-alert Australia submits the following issues for consideration in the Second Action Plan.

- Training is paramount for the non-specialised workforce. Currently DV-alert trains 7000 people per year but this needs to be vastly expanded. Some organisations have introduced DV-alert as a part of Induction of new staff, but this should not be inconsistently applied, it should be a requirement across all adjacent workforces.
- Strengthen alignment between DFSV and suicide prevention systems by integrating training and workforce capability to better identify and respond to the intersection of violence and suicidality.
- Review barriers to accessing appropriate training for the disability support sector and consider options to make access easier through funding for professional development for casual as well as permanent staff.



3.5.1 Policy to increase cross-organisational collaboration to improve service integration

As previously highlighted system fragmentation remains a key barrier to prevention and early intervention of DFSV against women and children. A range of reports highlight the poor integration within and between services in the mental health, suicide prevention and DFSV service sector result in victim-survivors feeling that their support needs are not fulfilled, and there is a mismatch between what people want and what services actually offer (Royal Commission into Victoria's Mental Health System, 2021; Productivity Commission, 2020; Hegarty, 2019). Consequently, there are a range of opportunities to enhance operational integration through organisational collaboration, including:

- 1800RESPECT is the front door for DFSV services but it must be funded to ensure all calls are answered and it is of a high quality. If this is the main referral source it has to be adequate to meet demand, professional in all dealings with callers and be able to refer locally.
- Standardise minimum interoperability requirements across jurisdictions to support consistent referral and coordination, including feasibility of information sharing and required safeguards.
- Fund national infrastructure enabling shared service navigation and practical support for transitions between services.

3.5.2 Appropriately resourced culturally safe workforce

DV-alert submits that cultural responsiveness is a significant accessibility factor for priority populations, including Aboriginal and Torres Strait Islander peoples. Racism remains a barrier both to help-seeking and to the recruitment and retention of Aboriginal and Torres Strait Islander workers, which in turn makes culturally safe service delivery harder to sustain. The Second Action Plan should increase investment in Aboriginal and Torres Strait Islander workforce leadership and in the conditions needed to recruit, retain and support Aboriginal and Torres Strait Islander workers across the DFSV and crisis support systems.

The Second Action Plan should strengthen inclusive and accessible support for priority populations, including LGBTQ+ communities, culturally and linguistically diverse communities, and people living in rural, regional and remote areas. This requires service models and workforce capability that reflect different patterns of risk, help-seeking and barriers to support.

Based on the considerations outlined above, DV-alert endorses the following workforce and system integration actions for inclusion in the Second Action Plan.



- Enhance system integration through national policy settings that support real-time referrals, interoperability, and shared service navigation across DFSV, crisis, health, and community sectors.
- Invest in a culturally safe and inclusive workforce by strengthening Aboriginal and Torres Strait Islander leadership and supporting workforce capability to meet the diverse needs of priority populations.



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