



IWA
Australia Ltd

Submission to the Second Action Plan

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



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CONTACT



Co-Chief Executive Officer



Women & Family Support Services Manager | Solicitor



www.iwaa.org.au



1. Executive summary

IWA Australia Ltd welcomes the opportunity to contribute to the Second Action Plan. We write as a frontline culturally and linguistically diverse (CALD) specialist domestic and family violence service, drawing on daily practice across crisis accommodation, mobile support, settlement, family support and recovery.

The National Plan recognises the need for language access, culturally safe support and the removal of systemic barriers. The Second Action Plan must now translate those commitments into funded delivery, clear responsibility and measurable outcomes. Without dedicated architecture, CALD communities risk remaining visible in principle but insufficiently served in practice.

A 2021 national survey of almost 1,400 migrant and refugee women found that one in three participants reported domestic or family violence, with temporary visa holders reporting proportionately higher levels of violence and migration-related abuse. The study was not a representative population survey, but it remains one of Australia's most substantial national datasets focused on this cohort (Segrave, Wickes & Keel, 2021). ANROWS also identifies persistent evidence gaps because national surveys often include too few recent migrants for robust analysis and exclude people unable to participate in the available survey languages (ANROWS, 2026).

Our central recommendation is structural: develop a dedicated CALD Action Plan as a formal companion instrument under the National Plan, with its own actions, funding, governance, measures and public reporting. This recommendation does not equate CALD experiences with the distinct status, rights, histories and obligations of Aboriginal and Torres Strait Islander peoples, nor does it diminish the standalone First Nations framework. It applies the broader policy lesson that population-specific barriers require visible responsibility and accountability rather than being dispersed as a cross-cutting consideration.

The submission advances fifteen recommendations. The immediate delivery priorities are: recurrent funding for CALD-specialist crisis and recovery services; language justice through specialist interpreter capability and separately funded translation; culturally safe and trauma-informed police and court responses; culturally responsive whole-of-family models that include victim-survivors, children and people who use violence; visa-inclusive access to safety and recovery; recognition of children as victim-survivors in their own right; and disaggregated data and public accountability.

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2. Summary of recommendations

Our fifteen recommendations are grouped under five Reform Areas and set out in full below, with supporting detail in the corresponding sections.

Reform Area 1: CALD-Led National Architecture

- 1.1 Develop a dedicated CALD Action Plan as a formal companion instrument under the National Plan.
- 1.2 Establish a permanent national CALD advisory body with a formal role in policy, funding, implementation and evaluation.
- 1.3 Fund genuine CALD-led co-design with real decision-making power, from the beginning of policy and service development.
- 1.4 Strengthen CALD-responsive and trauma-informed police and court systems, so justice processes are safe, accessible and culturally appropriate for CALD victim-survivors.

Reform Area 2: Equitable Access and Language Justice

- 2.1 Establish a nationally recognised specialist DFSV accreditation for interpreters, and a priority pool of accredited interpreters.
- 2.2 Provide additional, separately identified funding for document translation and accessible communication formats.

Reform Area 3: CALD-Specialist Services and Culturally Safe Practice

- 3.1 Recognise and fund CALD-specialist crisis accommodation as a distinct service category.
- 3.2 Recognise cultural safety as a core DFSV practice principle, retaining the distinct First Nations obligation and adding an explicit CALD requirement.
- 3.3 Require mainstream services to demonstrate capability to work safely with CALD victim-survivors, complementing not replacing specialist investment.
- 3.4 Develop and fund culturally responsive whole-of-family models that provide coordinated but distinct responses for victim-survivors, children and people who use violence, while maintaining safety and accountability.

Reform Area 4: CALD-Led Recovery and Long-Term Safety

- 4.1 Fund CALD-specific recovery models, co-designed and delivered with CALD victim-survivors and specialist organisations.
- 4.2 Ensure visa-inclusive access to support, based on safety and need rather than visa status.
- 4.3 Recognise children as victim-survivors in their own right, with separately funded support, and never used as interpreters.

Reform Area 5: Evidence, Data and Accountability

- 5.1 Capture intersectional barriers in DFV data through consistent, disaggregated collection.
- 5.2 Strengthen accountability through public reporting on CALD access, unmet demand, safety and recovery outcomes.

3. About IWA Australia and Salam Safe House

IWA Australia Ltd is a not-for-profit charitable organisation established in February 1992. Over more than three decades it has grown into a multi-service organisation delivering aged care, disability support, respite, settlement support, domestic and family violence programs and refuge, and community development across Queensland, with offices in New South Wales, Victoria and South Australia. The community relationships on which our domestic and family violence work depends are the product of more than thirty years of continuous, faith-grounded, women-led presence. Community trust of this kind is built over many years, cannot be established at short notice, and does not survive the closure of a service. Short-term funding therefore risks not merely interrupting the work but dismantling the relationships on which it depends.

Salam Safe House is IWA Australia's specialist domestic and family violence service, comprising crisis accommodation, mobile support and family support for women and children from CALD backgrounds, with cultural safety embedded in our framework and practice. It is, to our knowledge, the only government-funded CALD-specialist domestic and family violence refuge in Queensland.

Our integrated model

IWA Australia stands as the only organisation in Queensland that delivers settlement services, respectful relationships education, domestic and family violence mobile outreach, crisis accommodation, and health and wellbeing support serving the same communities. Integration is built into our structure. All staff receive active training in recognising and responding to disclosures of domestic and family violence, so no matter where a client first engages with us, the capacity to identify risk and respond is already present. When a settlement worker identifies a woman at risk, they make a warm referral with her consent directly to our family violence team, while remaining part of her support network. When a disclosure surfaces during respectful relationships delivery, the same practitioner stays connected as our specialist response capacity steps in. Inter-organisational communication processes are established across our programs to ensure every handover upholds culturally safe and trauma-informed practice. Clients move through our services without losing the trusted relationships they have already built, which is a critical foundation for safety and healing.

We have built this despite the funding architecture. Commonwealth funding drives our settlement services; Queensland funding drives our specialist family violence services, each against separate outcome frameworks with separate reporting obligations. No funding instrument recognises or resources the connective work between them, yet that work is real, continuous, and absorbed entirely by IWA Australia. The National Plan is a joint Commonwealth and state instrument, and IWA Australia is one of the few places where both halves of that architecture meet in practice.

IWA Australia's service model is evidence-based with literature consistently demonstrating that positive settlement outcomes such as employment, personal safety and employment are contingent on access to integrated, trusted support (SCOA, 2024). The Settlement Council of Australia 2024 literature review prepared Deloitte Access Economics establishes that settlement services function as enabling infrastructure within Australia's broader productivity agenda, with migrant's economic contributions strengthened through organisations, such as IWA Australia, help people navigate systems, access employment, build English proficiency, and participate fully in community life. Integrated, wraparound support improves migrants' employment prospects by 15–20% and strengthens social connection and civic engagement (Andersson Joona et al., 2022). Safety is a prerequisite for integration with domestic and family violence a direct barrier to employment, education, and participation. Coordinated care models produce measurably better outcomes than siloed delivery (SCOA, 2024; Carlsson et al., 2022). IWA Australia's model addresses this full spectrum within a single organisation, enabling clients to move through trusted, culturally safe relationships rather than disconnected systems.

A note on terminology

We use "culturally and linguistically diverse" (CALD) as the governing term, inclusively, to encompass recently arrived migrants and refugees and also established, later-generation and Australian-born people from CALD backgrounds.

We use “migrant and refugee” only where a point is genuinely about migration or visa status. CALD is a broad label, and we ask throughout that data and services be disaggregated beneath it rather than treated as a single population.

Reform Area 1: CALD-Led National Architecture

CALD women and children experience distinct barriers relating to language, culture, faith, migration, visa status, racism and social isolation (Ibrahim, 2020; 2022). Perpetrators exploit these barriers through threats about immigration status, withholding documents, misinformation about Australian systems, misuse of culture or religion, and isolation from family and community (Ibrahim, 2022).

These experiences cannot be adequately addressed by simply adapting mainstream responses. CALD victim-survivors and CALD-specialist organisations must have a meaningful role in designing, governing and evaluating the national response.

The case for a distinct instrument is supported by the limits of one-size-fits-all policy. The First Action Plan and the Aboriginal and Torres Strait Islander Action Plan 2023-2025 demonstrate how a population-specific instrument can create visible reform areas, governance, grants and implementation reporting. The subsequent standalone First Nations National Plan reflects the distinct status, rights, histories and experiences of Aboriginal and Torres Strait Islander peoples and must remain separate and fully supported (Australian Government, 2023a; 2023c; 2026a).

A CALD Action Plan would not replicate or compete with that framework. It would establish clear responsibility for a different set of systemic barriers affecting migrant, refugee and established CALD communities. The Rapid Review similarly found that responses to diverse experiences remain uncoordinated, piecemeal and ad hoc, and called for targeted, culturally safe responses including ethno-specific services (PM&C, 2024).

1.1 Develop a dedicated CALD Action Plan as a formal companion instrument under the National Plan to End Violence against Women and Children 2022–2032.

The CALD Action Plan should include:

- clear national priorities, responsibilities and implementation timeframes;
- dedicated and identifiable CALD-specific funding;
- actions across prevention, early intervention, crisis response, recovery and healing;
- measurable outcomes for CALD women and children; and
- transparent public reporting on implementation and outcomes.

The CALD Action Plan should complement, and not diminish, duplicate or compete with, the distinct First Nations National Plan and its implementation arrangements.

1.2 Establish a permanent national CALD DFSV advisory body comprising CALD DFSV lived experience, CALD-specialist services, multicultural and multilingual practitioners and with relevant cultural expertise.

The advisory body should have a formal and ongoing role in policy development, funding design, commissioning, implementation, monitoring and evaluation.

Its membership should reflect the diversity of CALD communities, including differences in language, faith, migration pathway, visa status, disability, age, geographic location and length of time in Australia.

1.3 Provide dedicated funding for CALD-led co-design from the beginning of policy and service development.

Funding should cover:

- victim-survivor participation and remuneration;
- CALD-specialist service expertise;
- qualified interpreting and translated information;
- childcare;
- transport;
- digital access; and
- disability and other accessibility requirements.

Co-design must involve genuine influence and decision-making power. CALD communities' involvement should not be reduced to merely endorse, translate or culturally adapt a mainstream model after its core structure, priorities and funding arrangements have already been determined – undermining CALD communities' agency and autonomy.

1.4 Strengthen CALD-responsive and trauma-informed police and court systems.

The Second Action Plan should require police, courts and justice agencies to implement consistent, culturally safe and trauma-informed responses for victim-survivors from culturally and linguistically diverse communities.

Women from CALD backgrounds experience additional barriers when engaging with police and courts, including language difficulties, limited understanding of Australian legal processes, fear of authorities, migration-related concerns, social isolation, financial dependence and pressure from family or community networks (Ibrahim, 2022; Taylor et al., 2017). These barriers may be intensified when justice systems do not adequately recognise the effects of trauma, coercive control and culturally or migration-specific forms of abuse.

The Australian Government should work with state and territory governments to:

- introduce mandatory and ongoing CALD-responsive, cultural-safety and trauma-informed training for police officers, court staff, judicial officers, prosecutors and other justice professionals;
- ensure qualified, independent and, where requested and available, gender-appropriate interpreters are provided from the first point of contact and throughout police investigations and court proceedings;
- establish clear procedures for identifying migration-related abuse, dowry abuse, forced marriage, honour-related abuse, spiritual abuse, extended-family violence and threats involving children or relatives overseas;
- provide access to CALD-specialist advocates and court-support workers who can explain legal processes, assist with safety planning and support victim-survivors before, during and after proceedings;
- improve information-sharing and referral pathways between police, courts, legal services, specialist domestic and family violence services, migration services and CALD-specialist and community-led organisations;
- provide translated, accessible and plain-language information explaining protection orders, criminal proceedings, family law processes, victims' rights and available support services;
- establish accountability measures to monitor the experiences, access and outcomes of CALD victim-survivors across police and court systems; and
- involve CALD victim-survivors and CALD-specialist organisations in the design, implementation and evaluation of justice-system reforms.

Police and court responses should minimise the need for victim-survivors to repeatedly recount traumatic experiences. Justice professionals should understand that trauma may affect memory, sequencing and the consistency of disclosure and that these effects should not automatically be interpreted as an absence of credibility.

Cultural, religious and migration-related factors must be properly understood when assessing risk and coercive control, but must never be relied upon to excuse, justify or minimise violence.

A nationally consistent CALD-responsive and trauma-informed justice framework would improve victim-survivor safety, increase confidence in reporting, reduce re-traumatisation and support more equitable access to protection and justice.

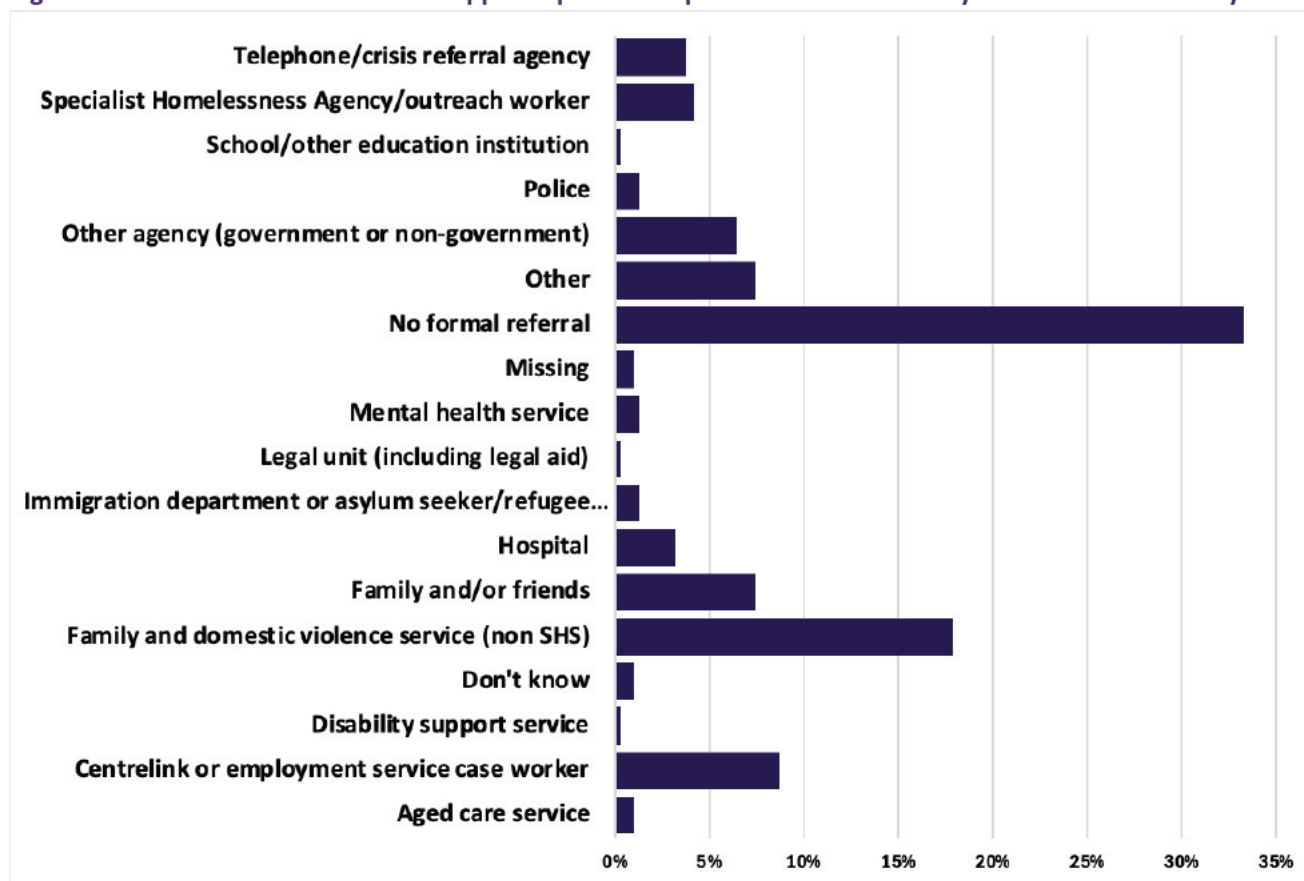
Reform Area 2: Equitable Access and Language Justice

CALD victim-survivors must be able to access support, understand information and make informed decisions from their first contact with a service. Language and communication barriers should not delay safety, restrict access or require women to rely on children, relatives or community members to interpret.

Recent reform illustrates the distinction between eligibility and practical access. The Leaving Violence Program is available to eligible victim-survivors regardless of visa status and provides web, telephone and referral-agent pathways (Australian Government, 2026b). This is a welcome reform. However, a person with limited English, limited digital literacy, a monitored device, no safe telephone or low awareness of the program may still be unable to use those pathways without trusted, language-accessible assistance. Eligibility alone does not guarantee equitable access.

Figure 1. refers to the percentage of referral sources received for opened support periods from our program commencement in July 2024. More than 40% of clients in our service are referred through a trusted community access point including informal referrals including community member, multicultural organisations, friends, families, etc. This demonstrates that women will seek support when a service is known, culturally safe and able to respond in language.

Figure 1. Referral sources of support periods opened from 1st July 2024 – 31st July 2026



2.1 Develop a nationally recognised specialist domestic, family and sexual violence accreditation or endorsement for interpreters working with victim-survivors.

In addition to holding current NAATI certification, interpreters undertaking DFV matters should complete specialist training in trauma-informed interpreting; coercive control and patterns of abuse; cultural and religious abuse; risk, safety and confidentiality; interpreting sensitive disclosures; professional boundaries and impartiality; working safely with children; and recognising and managing vicarious trauma. TIS National and other government-funded interpreting services should maintain a priority pool of specialist DFV-accredited interpreters for crisis, refuge, legal, health, housing and recovery services.

2.2 Provide organisations with additional and separately identified funding for accessibility and translation.

Funded services are required to ensure that clients understand the information provided to them, including their rights, responsibilities, consent arrangements, privacy protections, complaints processes, safety plans, service agreements and relevant organisational policies. These obligations are consistent with the expectations of the Human Services Quality Framework and are essential to informed consent, procedural fairness and safe service delivery.

Meeting these requirements involves substantially more than arranging an interpreter for a single appointment. Services may need to translate a large volume of client-facing documents across multiple languages, including intake and consent forms, risk and safety planning documents, privacy statements, complaints information, client rights and responsibilities, tenancy or accommodation agreements, child-safety information, exit documentation and referral materials.

Translation costs accumulate quickly, particularly where documents must be translated by appropriately qualified translators, updated whenever policies or forms change, and made available in several community languages. Organisations may also need plain-language, Easy Read, audio, visual and digital formats for clients with low literacy, disability, limited digital literacy or no written proficiency in their first language.

These costs should not be absorbed within existing case-management, crisis-support, accommodation or operational funding. Doing so effectively requires CALD-specialist services to choose between meeting accessibility and quality obligations and funding direct client support.

The Second Action Plan should provide:

- separately identified and recurrent funding for translation and accessible communication;
- reimbursement for qualified translation of essential client-facing documents;
- funding to update translated materials when policies, legislation or service forms change;
- resources for audio, visual, Easy Read and low-literacy formats;
- access to centrally developed, quality-assured translated templates for commonly used DFSV documents; and
- funding that reflects the number of languages and communication needs within each service's client cohort.

Language access is not an optional enhancement. It is necessary for informed consent, safety, compliance and equitable access to domestic and family violence support.

Reform Area 3: CALD-Specialist Services and Culturally Safe Practice

The Rapid Review found that current funding streams do not enable frontline services to provide a holistic community-based response, but compel them to privilege one type of prevention over another and design within a narrow frame, while many services perform the holistic work regardless, unfunded and unaccounted for, at cost to their sustainability (Rapid Review, 2024). This describes the position of CALD-specialist services, which carry additional language, cultural, migration and community-safety work within restrictive funding models designed for mainstream provision.

CALD-specialist services provide expertise in language, migration, faith, community safety and culturally specific tactics of coercive control that cannot be reproduced through minor adjustments to mainstream models. Mainstream services must still provide safe and accessible support, but stronger mainstream capability must operate alongside, not instead of, dedicated specialist investment.

Since July 2024, only 17.9% of Salam Safe House support periods resulted from referrals by another domestic and family violence service, while 4.2% came from a specialist homelessness agency or outreach worker. Combined, only 22.1%, fewer than one in four, originated through the specialist DFSV and homelessness systems.

This means that 77.9% of support periods originated through other pathways, including direct help-seeking, family and friends, community relationships, settlement services and other general service systems. Referrals from police, courts, legal services, social housing and migration-related services were also comparatively limited. Almost four in five support periods originated outside specialist DFSV and homelessness referral pathways

3.1 Recognise and increase funding for CALD-specialist services provider as an essential pathway for victim-survivors missed by mainstream systems

Funding should reflect the additional foundational work required to provide culturally safe and language-accessible crisis support; culturally responsive case management; migration and visa-related assistance; support for accompanying children; qualified interpreting and translated information; and connections to appropriate legal, health, housing, settlement, faith and community supports. CALD-specialist providers should not be expected to meet these additional needs within funding models designed for mainstream crisis accommodation services.

CALD-specialist organisations should be funded not only for the clients formally referred to them, but also for their role in identifying and reaching victim-survivors who are not being captured by mainstream DFSV, homelessness, police, court, health and legal systems.

3.2 Explicitly recognise cultural safety as a core domestic, family and sexual violence practice principle across all funded services.

The distinct requirement for services to be culturally safe for Aboriginal and Torres Strait Islander peoples must be retained and strengthened in accordance with the First Nations National Plan. A separate, explicit practice requirement should address the needs of people from culturally and linguistically diverse backgrounds. Services should understand how culture, faith, language, migration and visa status may affect violence, help-seeking and recovery; recognise cultural, religious and migration-related tactics of coercive control; provide qualified interpreters and translated information; work in partnership with CALD-specialist organisations; support multicultural and multilingual workforces; and demonstrate culturally safe practice through service standards, monitoring and outcomes. This is not a substitute for dedicated investment in CALD-specialist services.

Practice insight: legal safety is not always experienced as complete safety

For some CALD women, a civil divorce does not, on its own, mean the relationship is truly over. If a religious or cultural marriage is not also formally ended within their faith, they may still be considered married within their community, exposed to ongoing pressure, or unable to remarry or move forward with their life as they choose.

We have supported women who needed both processes: a civil divorce recognised by Australian law, and a religious divorce recognised within their faith. Facilitating contact with a religious leader to support the second process was not a cultural nicety alongside legal advocacy, it was part of what safety and closure actually meant for that client. Cultural safety, in practice, means treating a client's faith-based processes as seriously as her legal ones, not as optional extras layered on afterward.

3.3 Require mainstream domestic, family and sexual violence services to demonstrate the capability to work safely and effectively with CALD victim-survivors.

Increased capability to work safely and effectively with victim survivors must include mandatory training in cultural safety, language access, migration-related abuse, visa-related risks and cultural and religious forms of coercive control; access to qualified interpreters and translated information; clear referral and partnership pathways with CALD-specialist organisations; recruitment and support of multilingual and multicultural workers; and measurable accountability for access, safety and outcomes for CALD clients. Strengthening mainstream capability *must* complement, not replace, dedicated investment in CALD-specialist services. Multilingual and multicultural

3.4 Develop and fund culturally responsive whole-of-family models that provide coordinated but distinct responses for victim-survivors, children and people who use violence.

CALD-specialist services should be funded to deliver coordinated whole-of-family responses that recognise victim-survivors, children and people who use violence as connected, but distinct, members of the family system. These models should support families where relationships continue because of children, cultural obligations or other circumstances, without assuming reconciliation or continued contact.

A whole-of-family approach should include culturally safe and trauma-informed and trauma-responsive support for victim-survivors; separately funded, age-appropriate support for children as victim-survivors in their own right; culturally responsive behaviour-change and accountability interventions for people who use violence; coordinated risk assessment, safety planning and information-sharing; responses to cultural, religious, migration-related and extended-family forms of coercive control; parenting and fathering interventions where safe and appropriate; and ongoing support where family relationships continue.

Work with people who use violence must maintain a clear focus on responsibility and accountability. Culture, religion, migration experiences, trauma or discrimination must never be used to minimise/excuse abusive behaviour.

A whole-of-family model must not require joint participation, reconciliation or continued contact. Victim-survivor safety, choice and informed consent must remain central, with separate practitioners and service pathways used wherever necessary.

Case study: Reached through settlement, supported through the whole continuum

Salam Safe House supported a woman from a refugee background who was illiterate and spoke no English. She first came to IWA Australia through our settlement service. Because our settlement and DFSV services sit within the same organisation, we were able to do a warm handover and respond in a trauma-informed way from the outset, without requiring her to repeat her story or navigate another unfamiliar service.

A specialist DFV practitioner who spoke her language supported her throughout. This helped build trust and allowed safety planning, case management and information about her options to be explained in a way she could understand.

A cultural lens was applied throughout her case plan. Her main goal was to be safely reunited with her adult children, who were also at risk. Salam Safe House worked with the whole family unit who became separated because of domestic and family violence. There was significant coercive control with heightened risk. IWA Australia worked with the client and the family unit together to empower them through addressing and reducing the barriers. Salam Safe House assisted her adult children enter the workforce and gain financial independence.

Due to the limited availability of social housing and other suitable exit pathways, IWA Australia successfully assisted the client to secure accommodation in the private rental market. Following her exit from crisis accommodation, she

remained connected to Salam Safe House through mobile support, allowing safety planning and recovery work to continue with the client and her family.

As her level of risk reduces and her immediate domestic and family violence needs stabilise, she will continue to receive support through IWA Australia's settlement service. This integrated model provides continuity of care, preserves trusted relationships and ensures that the client and her family are not left to independently navigate the next stage of settlement and recovery where there is a risk of disengagement with systems.

This case demonstrates why CALD-specialist and integrated services must be recognised within the national architecture. The client's safety and recovery depended not only on crisis intervention, but also on language access, cultural understanding, housing assistance, employment support, family-focused practice and continuity across domestic and family violence and settlement systems.

Reform Area 4: CALD-Led Recovery and Long-Term Safety

Recovery cannot rely on mainstream programs being developed first and culturally adapted afterwards. CALD communities must be able to shape recovery models that reflect their own languages, cultures, faiths, identities, migration experiences and understandings of family and community (Ibrahim, 2020). This requires dedicated co-design, delivery partnerships and funding rather than late-stage consultation.

There is no single CALD experience or model of healing. Recovery must be co-designed with women and children from the communities it is intended to support and delivered in partnership with CALD-specialist organisations, multilingual and multicultural practitioners and, where chosen and safe, trusted faith and community supports. These culturally grounded approaches should operate alongside therapeutic, legal, housing, financial and practical assistance and must always be guided by the victim-survivor's individual choices, agency, safety and recovery goals.

The Second Action Plan Consultation Paper identifies culturally responsive support, recovery and workforce capability for migrant and refugee communities as continuing priorities (ANROWS, 2026). The Rapid Review also called for unmet-demand analysis that includes targeted and culturally safe responses such as ethno-specific services (PM&C, 2024). In practice, counselling through an interpreter, multilingual therapeutic support and culturally grounded long-term recovery remain underdeveloped and inconsistently funded.

Practice insight: belonging as the measure of recovery

For the women we support, recovery is not a return to an individual baseline. It is the rebuilding of belonging: to family, to community, to faith, and to a place where she is understood in her own language.

We see recovery arrive not when a woman is stabilised and discharged, but when she is reconnected, when there is someone safe to call, a community that holds her, and a family relationship restored where it is safe to restore it. This is why we work to a whole-family model of healing rather than to individual case closure.

The National Plan's architecture measures recovery at the level of the individual. It overlooks belonging, reconnection or restored family and community relationships, the things that, in our experience, actually indicate that a woman is safe and well. We ask that recovery be understood, and measured, at that level for this cohort.

4.1 Develop and fund recovery and healing programs that are co-designed and delivered with CALD victim-survivors and CALD-specialist organisations, rather than mainstream programs adapted after the fact.

Recovery models should be able to draw on healing through language, culture, faith, identity and safe community connection; a whole-family model of healing where it is safe and chosen; multilingual and bicultural practitioners and peer support; trusted faith and community supports where the victim-survivor chooses them; and therapeutic, legal, housing, financial and practical assistance alongside culturally grounded approaches. Recovery must be guided by each victim-survivor's own choices, safety and recovery goals, and funded on a long-term basis, recognising that trust and healing are built over time.

Practice insight: recovery through community or group based support, not just counselling

For many of the women we support, individual counselling is unfamiliar and, in some communities, carries real stigma. Being seen attending a counsellor, or being known within the community as someone in "therapy", can feel like a second exposure: first to the violence, then to judgement. Some women decline formal counselling altogether, not because they do not want to heal, but because the format itself does not feel safe.

In our experience, healing more often happens through community: shared meals, culturally familiar activities, faith-based connection, and time spent with other women who understand her experience without needing it explained. These are not soft additions to recovery, they are frequently where the real therapeutic work happens, even when no formal session is ever booked.

This does not mean clinical support has no place. It means recovery models built solely around individual counselling will miss many CALD women entirely. Funded recovery models must make space for community-based, culturally led healing as a legitimate and, for many women, primary pathway to recovery, not an adjunct to it.

4.2 Ensure eligibility for crisis accommodation, housing, financial assistance, legal support and recovery services is based on a victim-survivor's safety and need, not her visa type, residency status or whether her immigration matter has been resolved.

Women on temporary, dependent, bridging or uncertain visas must not be excluded from support or left without a safe pathway because they are ineligible for mainstream assistance. Governments should provide dedicated funding for longer-term case management while visa matters are being resolved; migration and legal assistance; crisis and transitional accommodation; financial support and access to essential services; and coordinated support across DFV, housing, health, legal and settlement services. A woman should not be forced to remain with, or return to, a perpetrator because her visa status prevents her from accessing safety.

Between 2017-2020, selected IWA Australia staff delivered a CALD-specific healing and recovery program for women victim-survivors of DFSV trauma. The program (inspired by NAFSi Personal Leadership), Dr Nada Ibrahim's signature program, supported more than 50 women from CALD backgrounds. Plans are underway to revive the program to continue supporting DFSV victim-survivors.

4.3 Recognise children accompanying CALD victim-survivors as victim-survivors with their own safety, cultural, developmental and recovery needs.

Children should have access to separately funded, culturally responsive and age-appropriate support, including therapeutic and trauma-recovery services; education, childcare and developmental support; assistance in their preferred language; culturally safe activities that strengthen identity and belonging; and ongoing support after leaving crisis accommodation. Children must never be used to interpret disclosures, risk assessments, consent processes or service information for a parent. Support for children should not be treated as an incidental part of their mother's case management.

CHILDREN'S VOICES

De-identified artwork created by children (aged 6 years) residing at Salam Safe House

Children experiencing domestic and family violence often communicate their experiences through art, play and simple language rather than formal disclosures. These drawings were created during trauma-informed therapeutic activities. They reflect themes commonly observed among children recovering from violence: a desire for friendship, safety, kindness and relationships free from fear.

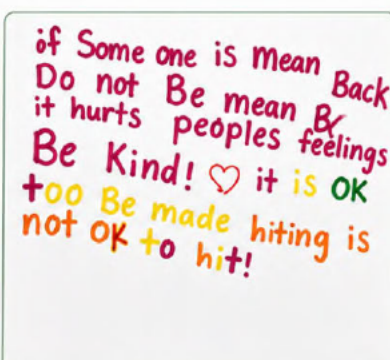


Child A (aged 6)

When asked what she would wish for if she had a magic wand, the child wrote simply:

"Be my friend."

Her response reflects the profound loneliness and social isolation many children experience after fleeing violence.



Child B (aged 6)

The child wrote messages she believed were important:

"Be Kind." "Don't be mean back." "Hitting is not OK."

These messages demonstrate how children living with domestic and family violence understand violence, fairness and safety.



Child C (aged 6)

This drawing shows a child standing under a bright sky with the words:

"Be my friend."

It reflects children's hopes for friendship, connection and emotional security.



These images are reproduced with identifying information removed. They illustrate the voices of children and reinforce the need for specialist, culturally safe, trauma-informed support for children who experience domestic and family violence.

Reform Area 5: Evidence, Data and Accountability

Current data often records CALD status too broadly and does not capture the intersecting barriers that shape a victim-survivor's access to safety, support and recovery. Better data is needed to understand who is being reached, who is missing out and where systems are failing CALD women and children.

This gap is documented. ANROWS identifies migrant and refugee communities among those requiring consistent and comparable monitoring that does not yet exist (ANROWS, 2026), and the National Plan Outcomes Framework, which the Department of Social Services states guides investment and future action, contains no measure specific to these communities (Australian Government, 2023c). Data already held offers a starting point: the Specialist Homelessness Services Collection captures country of birth, main language and interpreter requirement alongside domestic violence as a reason for seeking assistance (AIHW), and could be analysed to produce a national picture without new collection.

5.1 National and state DFSV data systems should collect consistent, disaggregated information about CALD victim-survivors.

At a minimum, national and state data systems should capture a victim-survivor's preferred language, dialect, literacy and communication needs, and interpreter requirements; country of birth, migration pathway, countries previously lived in and length of time in Australia; visa and migration status, where safe and relevant; cultural and faith background; disability; age; geographic location; housing and financial insecurity; children accompanying the victim-survivor; barriers to accessing services; and reasons for disengagement, returning to an unsafe relationship or being unable to access support.

Where relevant to risk assessment, service delivery and recovery planning, data should also separately capture the language, cultural, faith, migration, disability and support needs of accompanying children. Children's identities and needs should not be assumed to be the same as those of their parent.

Information about the person using violence should also be recorded separately where it is safe, relevant and necessary. This may include their relationship to the victim-survivor, language, cultural and faith background, migration or visa-related circumstances, disability, use of extended family or community networks, and culturally, religiously or migration-specific tactics of coercive control. This information is important for understanding patterns of violence, assessing risk and designing culturally responsive perpetrator interventions.

Data collection must be trauma-informed, culturally safe and limited to information that has a clear and legitimate purpose. Victim-survivors should receive accessible explanations about why information is being collected, how it will be used, who may have access to it and how their privacy and safety will be protected. Data relating to victim-survivors, children and persons using violence must be clearly distinguished rather than combined into a single family record.

5.2 Governments and funded services should publicly report on access, service use, unmet demand, safety and recovery outcomes for CALD women and children.

CALD data should be disaggregated rather than grouped into a single broad category. Findings should inform funding decisions, service design and future Action Plans. CALD victim-survivors and CALD-specialist organisations should be provided with opportunities to be involved in providing recommendations on what data is collected, how it is interpreted and how findings are used.

4. Conclusion

Research consistently demonstrates that safety is a prerequisite for successful settlement, and that integrated, wraparound services delivered through trusted relationships produce measurably better outcomes for migrant and refugee women and children across employment, social participation, and recovery from violence (Andersson Joona et al., 2022; SCOA, 2024; Carlsson et al., 2022). The Second Action Plan has a clear opportunity to embed this evidence into national policy and funding, ensuring that responses to DFSV for CALD communities are not only accessible, but effective.

The Second Action Plan sits within a strong national policy foundation — the National Plan to End Violence against Women and Children 2022–2032, the First Action Plan, the Outcomes Framework, and the Our Ways – Strong Ways – Our Voices: National Aboriginal and Torres Strait Islander Plan to End Family, Domestic and Sexual Violence Plan 2026–2036. To fulfil the intent of these frameworks for CALD women and children, the Second Action Plan must move beyond recognising diversity as a cross-cutting consideration and establish dedicated, measurable commitments. A standalone CALD Action Plan would make those obligations transparent and enable public accountability for progress.

The reforms proposed in this submission span five interconnected areas: a dedicated CALD-led national architecture; language justice and equitable access; culturally safe specialist services and mainstream capability; CALD-led recovery and long-term safety; and robust evidence, data and accountability. Together, these measures form a practical, evidence-informed framework for translating national policy intent into equitable outcomes for CALD women and children. IWA Australia and Salam Safe House welcome the opportunity to contribute to this work alongside government, CALD victim-survivors, and the specialist sector. The measure of the Second Action Plan will be whether every woman and child can access safety, justice, and recovery in a language and setting they can trust.

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