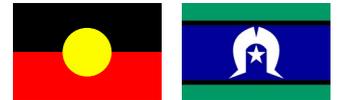




# Engagement Inspiration

from People Experiencing Family  
Violence in Latrobe





The Latrobe Health Advocate respectfully acknowledges Aboriginal people as the Original Custodians of the land we walk on today – the land of the Braiakaulung people of the Gunaikurnai nation and passes on respect to their Elders past and present, future and emerging.

The Latrobe Health Advocate thanks all the people who shared their time, experience, wisdom and ideas with us. It is their lived experience that we share in this document so that we might all learn to better connect, communicate with and support one another.

We refer to people who have experienced family violence as victim survivors. We recognise that not every person who has or is experiencing family violence identifies with this term. Family violence is only one part of a person's life and does not define who they are. Our use of the Term acknowledges the strength and resilience shown by people who have experienced or currently live with family violence.<sup>1</sup>

If this report raises issues for you and you need information or support please contact any of the following:

**The Orange Door in Inner Gippsland (9 am – 5 pm Monday to Friday)**  
Phone: 1800 319 354

**Safe Steps (24 hours, 7 days a week)**  
Phone: 1800 015 188

**With Respect (5 pm to 11 pm each Wednesday and 10 am to 10 pm Saturday and Sunday)**  
Specialist LGBTIQ family violence service  
Phone: 1800 542 847

**Lifeline**  
Phone: 13 11 14

**In an emergency call 000**



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## **Ministerial Foreword**

*Engagement Inspiration from people experiencing family violence in Latrobe* captures the significant and important voices of people who have experienced family violence across the Latrobe Valley. In doing so, this report provides valuable insights into how we can better engage with victim survivors and the importance of building a family violence system that is more integrated, inclusive and responsive.

In 2016, the Victorian Government announced our ambitious 10-year plan to rebuild Victoria's family violence system. The commitment to implement all 227 recommendations from the Royal Commission into Family Violence provided the basis for this reform.

Since then, we have invested more than \$3.5 billion to end gendered violence in Victoria – more than the Commonwealth and more than the other states and territories combined. We are continuing to drive reform to help end family violence and ensure easier access to help and support for victim survivors and people in need across the Victorian community.

We recognised from the outset that incorporating lived experience of family violence and the family violence system into policy development and service delivery was crucial for achieving better outcomes for everyone. We established our Victims Survivors' Advisory Council, and Australian first formal advisory group of victim survivors to inform and shape family violence reform.

Over the past five years, working alongside victim survivors, we have built a deeper understanding of the causes and impacts of family violence, and of the way in which family violence is experienced differently for different people in different communities and therefore requires a range of prevention, early intervention and response activities.

Lived experience, intersectionality and Aboriginal self-determination are the cornerstones of our reform effort. We continue to integrate intersectionality across our reform activities and programs, to deliver our commitment to Aboriginal self-determination, and to listen and learn from victim survivors to build an inclusive and accessible system for all Victorians.

Thank you to Jane Anderson and to all the victim survivors who showed great courage and strength in contributing to this report. It is for you and for all who have experienced family violence that we remain committed to this work, and to embedding lived experience expertise across the breadth of family violence reform in this state.



**Gabrielle Williams MP**  
**Minister for Prevention of Family Violence**

# What is family violence?

Family violence occurs when a perpetrator exercises power and control over another person. It involves coercive and abusive behaviours by the perpetrator that are designed to intimidate, humiliate, undermine and isolate, resulting in fear and insecurity. It covers a wide spectrum of conduct that involves an escalating spiral of violence. These behaviours can include physical and sexual abuse, as well as psychological, emotional, cultural, spiritual and financial abuse.<sup>2</sup>

The behaviours or actions of someone using family violence can be:

**Physical or sexual.** For example, they might:

- hurt you
- break objects or use force to scare you
- make you afraid to say 'no'

**Emotional, psychological, cultural or spiritual.** For example, they might:

- put you down and make you feel worthless
- criticise you, your loved ones, friends or family
- criticise or control decisions you make, no matter how small
- manipulate you
- stop you from connecting with your community or culture

**Financial.** For example, they might:

- manage or control your money, e.g. by giving you a spending allowance
- stop you from working
- sell your property without your consent
- take out loans or access credit in your name
- make it hard for you to live independently by taking away money or other things you need to do this
- get fines or penalties in your name

**Threatening.** For example, they might:

- make you feel afraid
- threaten to tell others about your visa or immigration status
- say they will hurt your family, friends or pets, or harm themselves if you choose to leave or do something they don't like
- threaten to tell others about your sex, gender identity, sexual orientation or personal health information
- tell you that you will lose your children if you don't do as you are told

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<sup>2</sup>Family Violence in Victoria (Findings from the Victorian Population Health Survey 2017) Released November 2020

**Coercive.** For example, they might:

- make you feel guilty when you see family or friends
- tell you that you are useless, worthless or not good enough
- try to convince you that you'd be lost without them
- make you doubt your own memory, or interaction you have had with someone
- make you feel stupid and that you won't be believed, or tell you that no one will help you if you try to get help

**Controlling or dominating.** For example, they might:

- check up to see what you're doing and where you're going, or ask you to constantly 'check in'
- not trust you and want to access your personal texts, emails or other messages
- cause you to feel afraid for your own or someone else's safety

<https://orangedoor.vic.gov.au/what-is-family-violence>

# Letter from the Advocate

This report captures the voices of people in Latrobe who have experienced or are experiencing family violence, highlighting the barriers and enablers of good health and wellbeing and what matters when it comes to engagement. It delivers on my 2020-21 Statement of Intent to the Victorian Minister for Health to learn more about ways to engage with people experiencing family violence, and to support improvements to a system that meets their needs.

The victim survivors I met with expressed a desire for empathy to be real and visible and spoke about the importance of knowledge and access to appropriate information. I heard that there is no one-size-fits-all approach to engagement with victim survivors, and that everyone has their own needs and preferences depending on their personality and individual circumstances.

People are not always aware of what they have experienced or of the physical and mental health impacts of family violence. I heard that learning about the struggles and hopes of others can often help victim survivors recognise and talk about their own experiences.

Family violence can impact anyone, anywhere. Its effects are compounded when people are also living with mental illness, disability, alcohol or drug addictions and financial hardship. It can lead to deteriorating health as victim survivors attempt to seek help and navigate complex services.

Victim survivors described the difficulties of navigating a complex service system and the toll this can take on their mental and physical health, self-esteem and confidence. I heard that family violence can be an enduring issue and occur in both intimate and family relationships again and again. Some victim survivors were fearful of the stigma attached to family violence. Some highlighted the justice system and how the legal process can lead others questioning the validity of their experience.

The Royal Commission into Family Violence of 2016 has brought about substantial investment and systems reform, with 60 recommendations still in progress for delivery. It is vital the lived experiences of victim survivors are heard, and their ideas and solutions considered when implementing these recommendations. We need to understand how they want to be engaged in order to achieve the systems

changes that need to occur to improve the mental health and wellbeing of victim survivors in Latrobe.

People experiencing family violence in Latrobe have inspired me to achieve these changes and I am confident in their ability to contribute to how policies, systems and services are designed into the future. I am committed to ensuring local services have the capacity to respond to and support people, and I will work with them to identify and overcome any challenges or obstacles that may prevent this from occurring.

I want to acknowledge the contributions of the people I spoke with to produce this report and thank them for trusting me with their stories. People showed remarkable strength and their drive to achieve change was inspiring. Despite the fact I had never met some of these people before and that they were vulnerable in sharing their experiences of family violence, I was struck by the impact of their experiences and their desire to achieve change for themselves and others.

I will continue to work with the Victorian Government and services operating within the Latrobe Health Innovation Zone to listen to and address the needs of people experiencing family violence to ensure they can realise their goals for health and wellbeing and be met with empathy, understanding and appropriate supports.



**Jane Anderson**  
Latrobe Health Advocate



## Considerations for good engagement

### Empathy and peer support

Empathy needs to be real and visible for victim survivors. Empathy can help people to feel safe and enable them to share their story and have their voice. Victim survivors have said that it is difficult to feel empathy from first responders and service providers if their questions or processes come across as robotic.

Empathy can be strengthened through providing opportunities for victim survivors to engage with each other, or to participate in activities together. We heard that people value hearing stories of similar experiences and hope. People described situations where they made new positive connection and stayed in touch. They like to bounce off each other and hear other people's experiences.

Some people prefer not to tell their close friends or colleagues about their experiences with violence and appreciate the opportunity to connect with others with shared lived experience who they can trust and relate to.

Some of the factors that detract from empathy include; an intimidating physical environment, a cold or impersonal demeanour, not being acknowledged, a process-oriented approach or bureaucratic language, not receiving any follow up or feedback. Services can make assumptions about what people need without listening to what people are saying. This can be off putting and unhelpful.

### Access to information and advice

Victim survivors talked about the importance of knowledge and being able to access information. Engaging with other victim survivors, first responders and services can be an opportunity to become more informed about family violence, its impacts and relevance to health and wellbeing. They suggested some of the sources of information and advice include professionals, websites, social media, books, radio and printed flyers.

### Different options for different people

In our conversations we heard a clear message that everyone has their own preferences and needs when it comes to engagement. We heard that preferred engagement styles depend on someone's personality and their circumstances. Victim survivors encouraged us to provide different options for different people.

We heard that people may want to have their voice through writing, drawing and art, online or in person. We heard that some people may prefer to participate through quiet reflection and listening to others. People talked about town hall meetings, forums, workshops and drop-in sessions where you can hear from others who might share their stories. We heard about the convenience and comfort of Zoom, where people can participate from work or home.



We heard that if someone is too anxious to join a face to face activity, Zoom is a good alternative.

Victim survivors encouraged us to respect the wishes and preferences of the people we were engaging with. We heard that it was important to be responsive and to address issues as they arise. People said that outcomes from engagement activities need to have a clear timeline and accountability.

We heard that it is important to hear directly from people (in their own way) and to be careful not to place more emphasis, or pay greater attention to, the effects of violence that might be more obvious or appear to be more significant such as physical abuse.

### Hope and connection through online activity

Social media was often mentioned as a way for victim survivors to connect with each other, join support groups, access information and resources and be informed about upcoming events and activities. Some people have said that the search functions on social media have helped them to come across additional information or other support services that they may not have been aware of. We heard an example of victim survivors accessing short movies and information about living with mental illness via a social media support group. This was informative and gave them hope.

We heard about a downside to social media, some people talked about the negative effects of stigma associated with family violence victim survivors and the impacts of harmful comments. Others shared examples of perpetrators accessing or seeing their profiles or online activity.

**“Love is my main belief at home; everything is around love.”**

**“In the last 6 years, I have lost who I am as a person.”**

**“Self-doubt can be all encompassing, people don’t take me seriously, am I a fraud?”**



## Barriers and enablers of good wellbeing

### Lifelong scars, healing and recovery

The mental scars of family violence can last a lifetime. The hurt that victim survivors have experienced and carry with them is not always visible and may not be known to others. We heard about the impacts of trauma including anxiety, depression, feeling paranoid, being frightened and intimidated. Some victim survivors talked about the impacts of violence on their own mental wellbeing in addition to expressing concern about the impact it has had on their children. They shared their goals of wanting to manage or improve their mental wellbeing to minimise the long-term effects for their children.

Some of the challenges victim survivors come across include; little to no access to maternal child health nurses during COVID-19 lockdowns, the isolation of parenthood, lack of time, financial hardship, ongoing exposure to violence within family or social networks, gender inequality, difficulties interacting with social workers or police, limited access to transport, family doctors and other health professionals. COVID-19 has placed some people in a holding pattern, where it's hard to determine how their mental wellbeing is going and they are reluctant to make plans because things can change quickly.

Some of the things that help include; access to medication when things are at crisis point, not taking on responsibility for other's problems, connecting with the right people, coffee with friends, working out your finances, taking control, support from parents, family and friends, going to work, access to health information on the internet, people showing that they care and going out of their way.

### A shared motivation to achieve good physical wellbeing

The victim survivors that we heard from were undoubtedly motivated to improve or maintain their physical health. People talked about bike riding, having fun, having more adventures, swimming, going to the gym, doing exercise,

losing weight, gaining muscle, stopping smoking, cooking healthy meals, fresh air, walking-and-talking.

This desire to achieve and maintain good physical health was often talked about in the context of healing or recovering from the violence that people have experienced. People talked about being free of pain and finding ways to live with their injuries.

Some of the barriers for victim survivors who want to achieve good physical health include; physical injuries, cost of access to activities or days out, being put down and controlled, being frightened to do things, not having someone they can trust to look after their pets, family dysfunction, not being informed about their own health conditions, being socially disconnected.

### Empathy, care, and support from people who represent 'the system'

Many of the victim survivors we heard from did not recognise that what they had experienced or were still experiencing was in fact family violence. Some people were able to vividly describe the moment they realised that what they had been experiencing was not OK. This realisation was often prompted by someone showing that they care and providing information about or access to resources and help. Provision of safety, support and care for victim survivors is important for reducing their exposure to violence and can help them to achieve improved health and wellbeing.

We heard that it can be hard for people to access or receive support when they don't know where to go for information, when there is a constant change over of personnel, when victim survivors experience a blaming attitude, stigma about family violence and health issues such as alcohol or drug addictions, mixed messages from authorities and lack of clarity about the court system, when it is difficult to navigate NDIS, when language or cultural differences exist.

We heard that some of these barriers can be overcome when services and personnel are trained to develop skills to support and show care for people experiencing family violence. One person shared an example of a carer who could see ‘illness in their eyes’, demonstrated empathy and offered to help. Victim survivors said that it helps to have access to female police officers, receive counselling and guidance before and after a court experience.

When services can create trust and establish positive relationships it can help victim survivors with their healing. When this is absent, the recovery and resilience building is more difficult.

## Skills and education for victim survivors

Education is a social determinant of health. A consistent theme throughout our discussions was a desire from victim survivors to learn, be informed, access information and gain knowledge. People talked to us about the importance of understanding what family violence is and the affects it can have, learning about parenting and relationships, developing skills to become a community worker or gain other employment.

## What really matters

### Yelling out for help

Victim survivors pointed out to us that it is important to protect those that need it, some people can't help themselves and need extra support. They said that yelling out for help is not easy and for some people not possible. They are reliant on others to see the trouble in their face.

### Living amongst the oldest living culture

Some of the people we met with expressed a keen interest in learning more about Aboriginal and Torres Strait Islander culture, they have been teaching their children about different flags and looking at maps of Indigenous Australia. One person described the privilege of living in Australia amongst the oldest living culture in the world

## Love, trust, and family

We heard stories of victim survivors protecting or receiving protection from the people that they love, their children, their parents, grandparents, aunts, uncles or their siblings. People shared fond memories of time spent together on holidays, travelling, and enjoying the company of loved ones. Some people said that their children are the most important thing to them. We heard about the value of a trusted grandmother and place where you can feel safe. Some victim survivors recognised the healing effect of long held positive memories and the connection between long lasting positive relationships, commitment and resilience.

## Breaking through with education

Victim survivors talked about education from three perspectives. First and foremost, education about family violence, what it is, the harmful impacts it has and where people can go to for help. Secondly, victim survivors expressed a strong desire to educate their children, to help them to break free from any exposure they have had to violence and importantly to set them up for future learning and employment. Lastly, the role of education in empowering victim survivors to pursue greater independence, employment and learning opportunities.

## Everyone should be warm at night

Victim survivors expressed sincere empathy towards people experiencing homelessness. They showed concern for people who may be couch surfing, experiencing hardship or making sacrifices to support others. We heard that it is so easy to become homeless and that some people may not have the skills to address this issue when they experience it.





## Insight 1      The powerful voice of victim survivors

Victim survivors are not always aware of what they have experienced or the physical and mental health impacts of family violence. We heard about moments where victim survivors learned about the struggles and hopes of others with shared experiences and the powerful effect that this can have. It was often described as a trigger to give victim survivors permission and confidence to recognise and talk about their own experiences. This was fuelled by a strong desire to help others who were also being impacted by family violence and to improve the systems and supports that are in place to protect and help victim survivors.

People talked to us about the positive impact of being able to share their stories, knowing that their point of view is valued and heard. We heard that all you need is to see or hear one positive experience of someone sharing their story to enable others to see that they too can make a difference for themselves and others by having their voice.

Having voice was described to us as a sense of excitement and freedom, a sense of self that comes from removing oneself from the experience of family violence and in particular the psychological control of perpetrators.

We heard that some of the conditions that enable people to hear from others and share their own experiences are

appropriate access to services, support staff and peers, a willingness from services and professionals to listen, show empathy or go above and beyond, and a shared desire amongst victim survivors to use their experience to benefit others.

### **The Office of the Advocate is now reflecting on...**

How can the stories of victim survivors in Latrobe be heard and elevated to enable others to recognise the impacts of family violence and to give hope to those who are suffering?

What changes can occur across the broader service system in Latrobe to create the conditions that will enable more victim survivors to have their voice?

### **What if...**

Family violence awareness campaigns went beyond broad messaging, and could be localised in a way that victim survivors are empowered to share their stories in broad range of communities?

**“HELP - yelling out is important.”**

**“Things that happen are humiliating and you don’t want to share it, particularly with people who haven’t experienced it.”**

**“I want to be part of the voices in Latrobe Valley having our voice for positive change, systemic change.”**

**“I am free now. The more I tell my story, the better I am.”**



## Insight 2 Preventing the compounding effects of violence

We know that family violence does not occur in isolation. It can impact anyone, anywhere. In our conversations with victim survivors, we heard about the complexities of experiencing family violence alongside, living with a disability, financial hardship, mental illness, alcohol or drug addictions, dysfunctional family or social settings.

We heard about the deterioration of people's health as they experienced violence and made efforts to seek help and navigate multiple and complex service systems. We heard about the recurring cycle of victim survivors moving from one relationship to another in which family violence may continue to be present. We heard about the dependency that some people have on their disability carers or aged care services, that can create a vulnerability for them.

Some victim survivors have clear expectations that there needs to be greater and more timely consequences for perpetrators. We heard about the complexities of victim survivors wanting to maintain their relationships and the stigma that can be associated with this if services or society maintains a view that victim survivors should end their relationships with perpetrators. It was suggested to us that if services placed greater emphasis on the behaviour of perpetrators, it might encourage more people to speak up.

### **The Office of the Advocate is now reflecting on...**

What policies and strategies does the Victorian Government have in place to prevent and minimise the compounding effects of family violence? How effective are these for people in Latrobe?

If navigating multiple and complex services can be traumatizing for people who have found the means to access help and share their voice with us, what does this mean for those who have not?

### **What if...**

The well-documented concept of reorienting health services towards prevention could be applied to the family violence service system, placing greater emphasis on early warning signs, early intervention and preventing the ongoing risks for victim survivors as they continue to live their lives?

“People are not dumb, they are traumatised.”

“People want the behaviour to change but not necessarily for the relationship to end.”

“DHS made me move but didn’t fund anything, they wouldn’t put me in the shelter because the kids were not in my care.”

“I found a tracker on my phone six months after I left.”



## Insight 3      Build confidence where there is self-doubt

Victim survivors talked with us about the impacts that family violence and navigating the service system can have on their self-esteem and confidence. They talked about the constant self-doubt or feeling of questioning themselves every time they asked for help. We heard stories from people who have found themselves experiencing family violence again and again, in intimate relationships and family relationships. We heard that for some, the justice system process leads to others questioning the validity of their experience and feelings of being misunderstood. We heard from people who are fearful of the stigma that can be associated with family violence. Some victim survivors talked about having a greater sense of self preservation. They follow their instincts in relation to any unease they feel around people and have learned to be cautious around others.

In contrast, we heard about the positive effects of acknowledging someone's experience, reinforcing that what they have gone through is family violence and taking the time to listen to the whole story, without being constrained by what the justice system or social support processes require. Victim survivors spoke positively about support they have received from family, friends and peer support groups. These informal and positive social connections can help to rebuild confidence and tackle the damage that has occurred through family violence.

### **The Office of the Advocate is now reflecting on...**

What positive impacts have the implementation of Royal Commission recommendations about service delivery had to date on victim survivors?

How can services be further strengthened to ensure that victim survivors receive the support they need, and experience a "believe-first" approach that enables them to tell their story without fear of being disbelieved?

### **What if...**

First responders and service providers were able to prioritise and manage physical safety risks in a way that also takes into account psychological safety, social and emotional wellbeing?

**“Sometimes it is nice to get a kick in the right direction, someone to say are you okay?”**

**“It is important to look at all the aspects of yourself.”**

**“It wasn’t what I was looking for. They treated me as being very fragile, but I just wanted financial advice.”**

**“Being fact checked by police continually, it feels like you are being interrogated and not believed.”**



## Insight 4 Help for victim survivors in the Latrobe Valley

The Royal Commission into Family Violence delivered its report to the Victorian Government in March 2016. Reports indicate that significant investment and systems reform have occurred as a result; as of November 2020, 167 recommendations have been implemented and 60 remain in progress.<sup>3</sup>

Through our engagement we heard firsthand experiences from victim survivors who have accessed and navigated the support systems that are available to them. We also sought direct advice from staff working within local agencies and support services. Staff were generally positive about the changes that have occurred, although remained overwhelmed by the high demand on the local system.

Victim survivors described some of the challenges they have experienced in seeking help. We heard from some people who felt they received little support or follow up, were only supported to access shelter and food, did not know where to go or how to find information, were confused and lost in trying to access the justice system, felt unprepared for what was involved in asking for help from the police. Some people have sought ongoing counselling, however, have been turned away due to services no longer taking on patients. Victim survivors expressed gratitude for individual workers who were able to help them and often described this as going above and beyond.

Notably, we heard about the positive effects of employment for victim survivors, alongside the limitations this creates for them when they need to access help. Victim survivors described their workplace as a safety net, providing independence and income and a safe location away from home where they can access other people and the internet. One person described feeling valued and a sense of belonging at work and said that as they walk out the gate at the end of the workday the palpable burden and self-doubt returns. However, we heard that social support services don't adequately cater for someone who is working either due to hours of operation or eligibility criteria based on income testing.

### **The Office of the Advocate is now reflecting on...**

What positive impacts have the implementation of Royal Victim survivors need to accommodate the various pressures being experienced by services such as high demand and strict protocols. How does the service system accommodate the various pressures that victim survivors are experiencing?

There are local and statewide services that exist to provide support to victim survivors in Latrobe. How well are these services working together and are people in Latrobe receiving optimal service provision that is commensurate with community need?

How do local and statewide services receive feedback from victim survivors about their experiences in accessing help and what is their current capacity to respond to this?

## What if...

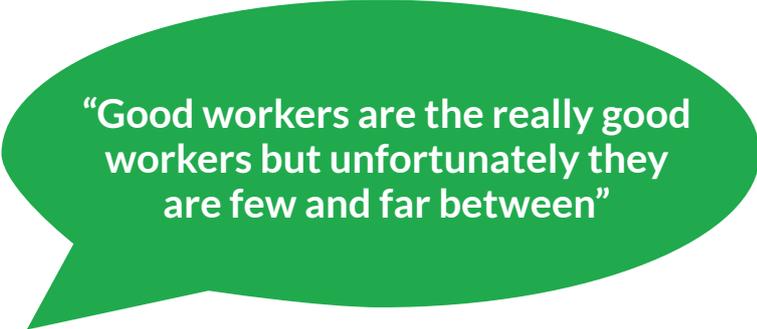
Victim survivors and services could come together to reflect, learn, and change the way things are done to meet the needs of people accessing services?

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<sup>3</sup> <https://www.vic.gov.au/family-violence-recommendations>



**“Unless I ring to ask for something, I don’t hear from her.”**



**“Good workers are the really good workers but unfortunately they are few and far between”**



**“Help wasn’t available for me because those things weren’t operating at hours I needed them, ... we are here to help but only between the hours of 9 and 3.”**

# Active reflection

## Questions that might get you started...

### If you are a **decision maker** consider;

- How well does your workplace support people who may be experiencing family violence in Latrobe?
- What influence do you have over the ways first responders and support workers interact with victim survivors and what can you do to enable greater emphasis on social and emotional wellbeing?

### If you are a **staff person, family member or friend**, consider;

- What can you do to prevent self-doubt in others?
- How can you demonstrate a “believe-first” approach to people that you are interacting with?

### If you are a **community member**, consider;

- What do you know about family violence and how can you share this knowledge with others?
- What opportunities are there for you to initiative or encourage community conversations about the impacts of family violence?

### If you are **someone who is experiencing family violence**, consider;

- How might you share your story with others and what impact could this have on you? Do you have suggestions about changes that could be made to service delivery to improve the experience for yourself and others?
- Who can help you to achieve your health and wellbeing goals?



“It would be nice to affect change for future generations.”

“If you don’t have education you can’t climb.”





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