Theorising family and domestic violence work:

What is the work and who does it?

Dr Kate Seymour
Professor Sarah Wendt
Dr Sharyn Goudie
April 2025

Flinders University

Acknowledgement of country

We acknowledge the Traditional Owners and Custodians of the lands on which we meet and work. We acknowledge that sovereignty has never been ceded. We pay our respects to First Nations Elders past, present and emerging and affirm our commitment to the ongoing work of reconciliation. We recognise the past atrocities against Aboriginal and Torres Strait Islander peoples of this land and that Australia was founded on the genocide and dispossession of First Nations people. We acknowledge that colonial structures and policies remain in place today and recognise the ongoing struggles of First Nations people in dismantling those structures.

Adapted from https://acij.org.au/about-us/acknowledgement-of-country/

Theorising family and domestic violence work: What is the work and who does it?

Report on research findings for ARC Discovery Project DP210101214 (Strengthening and Planning for Australia's Domestic and Family Violence Workforce).

Dr Kate Seymour
Professor Sarah Wendt
Dr Sharyn Goudie
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For any enquiries about the report, please contact:
Dr Kate Seymour
kate.seymour@flinders.edu.au

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Acronyms

FDSV Family, domestic and sexual violence

FDV Family and domestic violence

MBCP Men's behaviour change program

NGO Non-government organisation

PCW Partner Contact Worker

Executive Summary

Family and domestic violence (FDV) is a widespread social issue in Australia with significant health, welfare, and economic consequences. FDV disproportionately affects women, undermining their economic security, housing stability, and overall well-being (UNSW, 2019). Certain groups, including Aboriginal and Torres Strait Islander women, people with disabilities, and those from lower socioeconomic backgrounds, face increased risks due to overlapping forms of discrimination and marginalization (AIHW, 2024b). Aboriginal and Torres Strait Islander women, in particular, are 33 times more likely to be hospitalized due to FDV than non-Aboriginal women (AIHW, 2024c). While the FDV workforce is increasingly recognised, at both the Commonwealth and state/territory levels, as a key piece of the puzzle in addressing FDV in Australia, there remains limited understanding of the work itself, how it is done and experienced, why it is done in particular ways and its structural and organisational contexts.

Objective and Scope

Funded by the Australian Research Council (ARC Discovery, DP210101214), this project set out to understand the domestic and family violence workforce in Australia and the work that it undertakes. It focused specifically on how the work is done and experienced, why it is done in particular ways, and the structural and organisational contexts that shape this work.

Aims:

- Generate a coherent, qualitative evidence base on the nature and experiences of domestic and family violence work across three key domains: victim services, perpetrator services and Aboriginal specialist services.
- Conceptualise the domestic and family violence workforce with reference to the nature of the work across these three domains.
- Recommend workforce development strategies that are responsive to the context and needs of domestic and family violence work.

Research questions:

1. What is domestic and family violence work?
2. What are the structural, discursive and organisational dimensions of domestic and family violence work?
3. How does the nature of domestic and family violence work shape the expectations for and practices of the workforce?
4. What strategies will strengthen and support current and future domestic and family violence workforces?

Methodology

The project employed a layered qualitative approach informed by rapid ethnography, a multi-method approach that gathers extensive information from multiple sources and perspectives in a relatively short timeframe. Data collection included an analysis of key organizational policies and processes, direct observation of daily operations within organizations, and multiple interviews and focus groups.

This report presents key themes and findings based on data collected in 2022 and 2023 from 126 members of the FDV workforce across four key organizations in South Australia and Victoria. Participants worked across 12 sites and 28 services, including victim, perpetrator, and Aboriginal-led services.

Key Findings

The research generated a wealth of rich and insightful data; its findings encompass insights regarding both the FDV workforce as a whole and elements that are unique to specific sites:

- The diverse sociocultural and institutional contexts within which organisations operated shaped understandings of violence as well as perceptions of the skills and capacities that constitute, or are valued in, domestic and family violence work.
- DFV work was spoken about differently depending on the target population, the services being provided, and the worker's own previous experience.
- DFV services (like other social welfare services) are subject to budget rationalisation, narrow funding models, and competition for government contracts and funding. This was evident across all organisations but was especially marked in victim services in the form of an intensified pace & volume of work, and accountability to funding bodies.
- Differences in work conditions were observed across the victim and perpetrator service sectors, suggesting a gendered demarcation between women's work (victim support – caring work, femininised and devalued) and men's work (perpetrator accountability – challenging, 'man-to-man').
- The weight of responsibility associated with managing risk was especially acute for workers in victim services but relatively absent in perpetrator services where 'high risk' matters (i.e. immediate safety concerns) were diverted to a designated partner contact worker.
- The work for men's workers/services largely ended when a perpetrator chose to disengage. A perpetrator's resistance or non-compliance generated, not an increase in workload and intensity, but instead, either a cessation of contact altogether or a shift towards less challenging conversations.
- Community and social activism were central to the work in Aboriginal FDV services as workers dealt daily with the enduring and deeply entrenched impacts of colonisation.

Analysis and Interpretation

The findings underscore the interconnectedness of FDV work and its workforce with the gendered and raced structures that generate and perpetuate gendered violence. The ways in which work – all work but especially FDV work - is 'done' and experienced are shaped by gender and have impacts that are uniquely gendered, highlighting the need to interrogate the everyday practices that sustain gendered and other violences. Conversations about FDV work and FDV workers nonetheless continue to focus overwhelmingly on both skills, capabilities and training, and challenges relating to staff recruitment and retention. Such approaches underestimate the significance of the sociocultural and institutional contexts that shape understandings of and responses to violence and, in turn, the work itself.

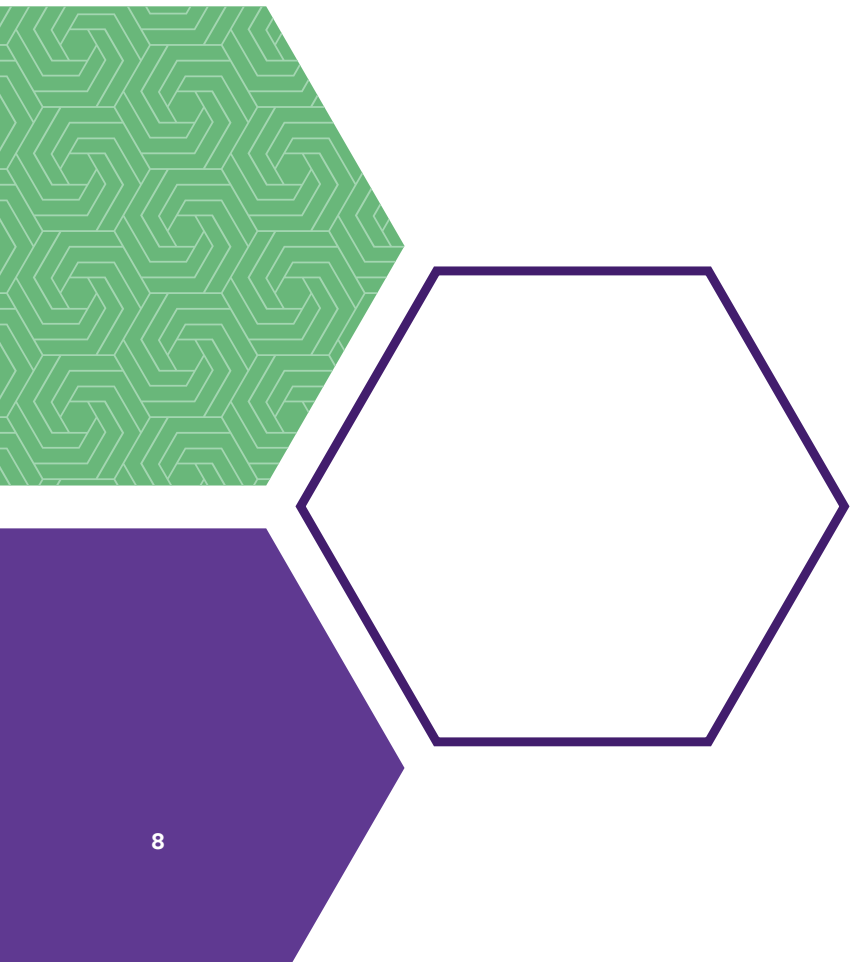
Conclusion and recommendations

This report has argued that the FDV workforce is constituted by gendered, colonial and neoliberal structures that reinforce raced and gendered privilege, thereby linking the experience and perpetration of FDV with institutional responses to FDV. Thinking about and strategising the FDV workforce thus requires strong and sustained attention to the interconnections between FDV as a gendered social problem and the conceptualisation and organisation of FDV work. This means taking seriously the ways in which political and sociocultural contexts, encompassing structural conditions, colonisation and profound, embedded social inequalities, continue to shape the work.

There is no question that adequately funding and resourcing FDV services is critically important. Strengthening the FDV workforce, however, and, in turn, responses to FDV, is not merely a funding issue but, rather, one that requires a fundamental rethinking of the enduring relationships between gendered, raced and classed inequalities, power and violence. Building a strong and sustainable FDV workforce, thus, demands a collective and comprehensive approach

that links the structural and sociocultural to the everyday experience of frontline workers. In the short term, strategies directed at strengthening the foundations for FDV work, as follows, may be valuable – not as a replacement for, but in anticipation of – future, transformational, change.

- Recognising and addressing gendered disparities in pay, conditions, and expectations within the FDV workforce.
- Strengthening funding and service models to address precarious employment and promote stability and continuity of services.
- Embedding intersectional and culturally responsive frameworks in FDV workforce planning.
- Taking actions to increase, appropriately fund and enable Aboriginal-led services.



Introduction

Family and domestic violence (FDV) is a widespread and intractable social problem in Australia with significant health, welfare and economic consequences. The most recent Personal Safety Survey, conducted by the Australian Bureau of Statistics and covering the period 2021-22, found that one in four (27%) women have experienced violence by an intimate partner or family member since the age of fifteen (ABS, 2023). Additionally, one in six women have experienced childhood abuse (18%) or witnessed parental violence (16%) before the age of fifteen (ABS, 2023).

FDV undermines women's economic security, housing stability and associated material resources (UNSW, 2019). The burdens of FDV are also carried by employers through decreased staff productivity and increased turnover, and by the community through pressures on health systems, welfare services and criminal justice responses. It is a leading contributing factor to preventable disease in Australia (AIHW, 2018), adding more to the burden of disease for women aged 18-44 years than any other risk factor (AIHW, 2019). In 2021-22, 3 in 10 (32%, or 6,500) assault hospitalisations were due to FDV, with the overall rate of FDV hospitalisations almost three times as high for women than to men (AIHW, 2024b).

Inequalities associated with a range of factors, including socioeconomic status, cultural background and disability, expose certain groups to "overlapping and/or increased sources of discrimination and marginalisation" (AIHW 2024b), associated with diverse vulnerabilities and increased risk and severity of FDV. Thus, social inequalities fundamentally shape the risk, experience and impacts of FDV. For example, women living with disability or a long-term health condition are twice as likely to experience physical and/or sexual violence by a cohabiting partner. The risk is particularly high for women living with an intellectual or psychological, as compared to a physical, disability (ABS, 2021).

Aboriginal and Torres Strait Islander women are substantially more likely to experience FDV, and 33 times more likely to be hospitalised due to FDV, than non-Aboriginal women (AIHW, 2024c). FDV also more frequently goes unreported by Aboriginal and Torres Strait Islander women due, in part, to the continuing impacts of colonisation and background of harm related to policing and government interventions (Nancarrow, 2019). Paying attention to intersectionality thus highlights the interrelated and compounding nature of vulnerabilities; for example, the experience of FDV for Aboriginal and Torres Strait Islander women is not only shaped by the cumulative impacts of colonisation and trauma but also intersects with gender, racism and rurality, among other factors. Relatedly, the higher risk associated with FDV in rural and remote locations crosscuts with factors such as greater access to firearms and limited access to support and other services (AIHW, 2019).

While FDV has been extensively researched, relatively little is known about the nature of FDV work – beyond the listing of generic tasks including crisis management, risk assessment, group work, counselling, support, and so on – nor the workforce that undertakes this work. While the FDV workforce is increasingly recognised at both the Commonwealth and state/territory levels as a key piece of the puzzle in addressing FDV in Australia, there remains limited understanding of the work itself, how it is done and experienced, why it is done in particular ways and its structural and organisational contexts. This is a knowledge gap that has also been observed elsewhere; Macy et al (2009), for example has noted this in the US context, albeit referencing only FDV victim services:

> **The current state of domestic violence and sexual assault service delivery can be described as a "black box" because the inner workings of the services, the critical service practices, and the crucial components of effective services remain largely unknown. (Macy et al., 2009, p. 361)**

The complexity, nature and experience of FDV work has been both undervalued and largely unexamined by governments and funding bodies in Australia. Efforts to support and strengthen the FDV workforce, however, must be informed by detailed and contextualised data and robust theorising of the purposes, forms, and contexts for the work. Continuing to rely on this, already stretched, workforce without understanding and directly responding to its complexities – beyond the narrow confines of capabilities and training – will reinforce, rather than counter, the structural, societal and cultural practices that constitute and perpetuate FDV as gendered violence.

Methodology and methods

This project used a layered qualitative design informed by rapid ethnography, a multi-method approach to data collection that generates extensive information from numerous sources and perspectives over a relatively short period of time. Rapid ethnography was chosen for its capacity to capture the complexities and conditions of work, encompassing both workplace culture and individual practices (Baines & Cunningham, 2011), as well as structural and discursive drivers. Thus, it enabled a focus across the macro and micro levels, on the social relations, structures, and institutions that organise the everyday world of individuals as evident in the micro-level experiences of workers.

In order to achieve an in-depth focus on the "local, ongoing practical activities of organising [FDV] work" (Acker, 2006, p. 442), and the ways in which these reproduce – or ameliorate – complex inequalities, the research team partnered with four key organisations operating across multiple sites in Australia. Data collection activities, for each site, included:

- document analysis of key organisational policies and processes;
- time spent in organisations observing daily operations; and
- multiple interviews and focus groups with 126 participants over the period August 2022 to September 2023.

Targeted questions were used at each site to ensure a strategic focus on the project aims and research questions, providing a consistent framework for the fieldwork, interviews and focus groups:

- ***Who*** does the work? (e.g. roles, socio-demographics, divisions of labour);
- ***What*** is the work? (e.g. programs, formal and informal tasks, clients, what is done, what should be done);
- ***Where*** is the work? (e.g. geographical location, local contexts, on-site/off-site, technologies);
- ***How*** is the work organised? (e.g. practice frameworks and modalities, organisational structures and policies, funding); and
- ***Why*** is the work organised as it is? (e.g. discursive, logical/practical, historical drivers).

All participants were provided with information and consent forms prior to the research team attending each site. Informed consent was further confirmed before each interview and/or focus group. Extensive field notes were taken throughout the data collection process and targeted discussions with other FDV-related organisations and stakeholders across Australia, including service providers, government agencies, peak bodies, and networks, also occurred over the duration of the project, to both inform and contextualise the analysis of data.

All interviews and focus groups were audio recorded and transcribed. Using an open-coding procedure, the researchers first coded a subset of the transcripts individually, followed by a comparison of themes and emerging concepts. After reaching an agreement on broad themes, all of the transcripts were then coded in NVivo. All participants were assigned a pseudonym (refer Appendix B) and these are used throughout this report.

Ethics approval was obtained from Flinders University Human Research Ethics Committee (Project ID 5195) and the South Australian Aboriginal Human Research Ethics Committee (Project ID 04-22-993).

Part 1

Thinking about gender, violence and FDV work

Centring violence

While the focus of this project is FDV work – its conditions, how the work is organised, the workforce, etc. – it is also, simultaneously, about violence. Thinking about, questioning and theorising violence, both that directed at women and children and more generally, has been a constant, running – like a needle with thread – throughout. Violence, as we have understood it, constitutes the social relations of gendered, raced, classed inequality, encompassing the governance and perpetuation of, and resistances to, violence, including in the form of labour markets. Violence, then, is not just a 'thing' that happens and to which the workforce responds but, rather, is structural and cultural, symbolic even, as well as interpersonal.

Johan Galtung's distinction between 'direct', 'structural' and 'cultural' violences, which he depicted in triangle form (see Figure 1), provides a useful way to think about the relations that enable, embed and perpetuate violence. **Direct** violences are those acts or events that are visible (or tangible) and widely recognised as 'violence' in its interpersonal, group or collective forms. **Structural** violence, however, refers to social arrangements that are "embedded in the political and economic organization of our social world" (Farmer et al, 2006, p. 1686), advantaging some groups and not others via, for example, access to goods, resources and opportunities including political power/agency, education, health care, and legal status (Fraser & Seymour, 2016). Thus, while direct violence "shows", structural violence is "silent, it does not show – […] it is the tranquil waters" (Galtung, 1969, p. 173). **Cultural** violence, however, was described by Galtung as "those aspects of culture, the symbolic sphere of our existence", including religions, ideology, language, dominant knowledge, and so on, that are "used to justify or legitimise direct or structural violence" (Galtung, 1990, p. 291). Cultural violence, he argued, makes direct and structural violence "look, even feel, right, [or] at least not wrong" (Galtung, 1990, p. 291).

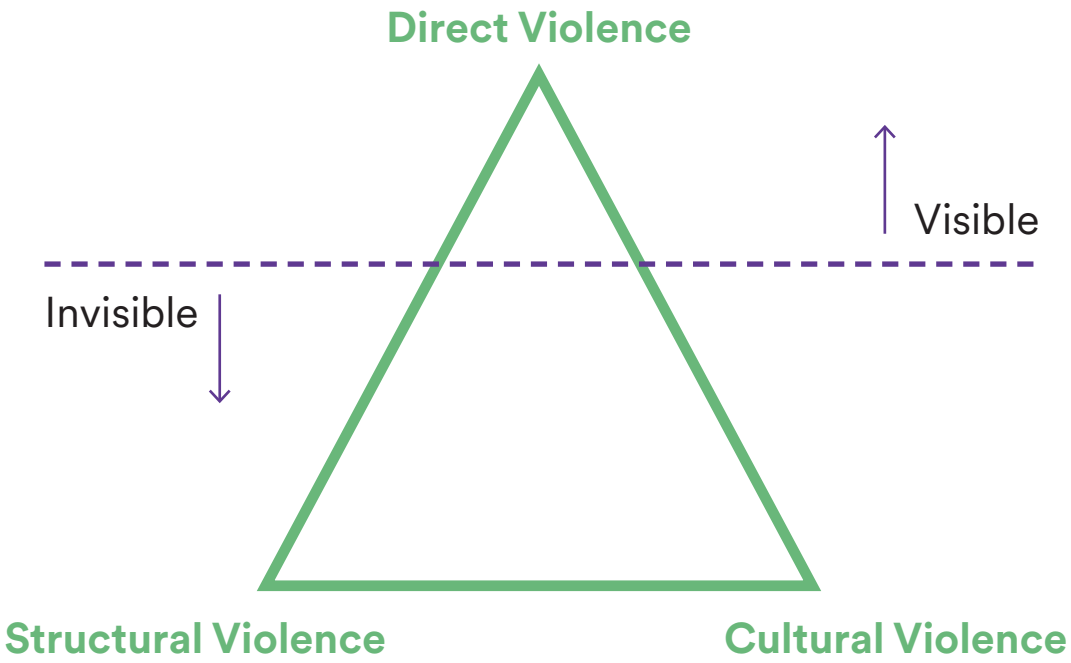


Figure 1

Galtung's work has been used to theorise the nature and conditions of work in caring professions, such as nursing and aged care, in which poor working conditions are understood as – and may be experienced as – structural violence (Banerjee et al, 2012). Likewise, the dynamics of neoliberal strategies in workplace settings, through institutional and social practices, create "persistent [and] systemic devaluation, marginalization or exploitation", recognisable as forms of violence "even in the absence of direct physical harm" (Choiniere et al., 2014, p. 40). Thus, the organisation of work and conditions in sectors that are characterised by "heavy workloads, low levels of decision-making autonomy, low status, rigid work routines and insufficient relational care", not only constitute "sources of suffering" but also prevent workers from "providing the kind of care they know they are capable of" (Banerjee et al, 2012, p. 391).

In a different context altogether – but illustrating the resonance of structural violence as a concept – Farmer (1997, p. 272) highlights how localized "suffering", such as that associated with disease, reflects and intersects with the "larger matrix of culture, history, and political economy" that constitutes structural violence. The relationships between violence, the economy, polity and civil society are, thus, fundamental to this project, as are the connections between neoliberal modernity and increasing global, national and local inequalities. This is reflected, to some extent, in the National Plan's (Commonwealth of Australia, 2022) framework for the governance of FDV in Australia which acknowledges the critical role of polity, civil society and the economy in, either, enabling or constraining FDV work, workers and the workforce.

Organisations, violence and inequality

Thinking about gender, violence and work in this project has necessitated a stepping away from the visceral impacts of physicality, of risk and danger, perpetration and intent, etc., to reflect instead on the 'quiet' violences of business as usual. This means noticing and paying attention to violence in organisations, not as aberrant acts or exceptions to the norm but, instead, as the tip of an iceberg; as Costas and Grey (2018, p. 12), put it, the "blood and bruises" that permeate organisational life.

Hearn's work on gendered inequalities and/as violence acknowledges the social and cultural contexts for violence while highlighting the specifically gendered forms and manifestations of violence woven into the everyday logic and practices of organisations. Organisations, for Hearn (1996, p. 43), are "sites or structures of violence"; violence is embedded in "managerial and work cultures, [and] in the ordinary enactment of authority". Importantly, and of direct relevance to FDV work, gendered power relations are reproduced and reinforced in "dealing with the violence of others" and "talking about violences" (Hearn, 1996, p. 55), as well as through the "differential experiences of violence" (Hearn, 1998, p. 197) that are brought into the workplace.

Acker (2006) also focuses on the inherently gendered nature of organisations and the 'inequality regimes' – or "loosely interrelated practices, processes, actions, and meanings" (p. 443) – that reinforce and embed class, gender, and racial inequalities. Thus, Acker's work alerts us to the wide-ranging ways in which inequality is built into and maintained in organisations, encompassing:

> **systematic disparities between participants in power and control over goals, resources, and outcomes; workplace decisions such as how to organize work; opportunities for promotion and interesting work; security in employment and benefits; pay and other monetary rewards; respect; and pleasures in work and work relations (Acker, 2006, p. 443).**

In this context, Acker's distinction between an 'occupation' and a 'job' is important for recognising the subtle yet powerful ways in which inequalities are sustained. An occupation, in Acker's (2006, p. 443) explanation, is a "type of work", and a job is a "particular cluster of tasks in a particular work organisation". People may share an occupation (or profession), such as social work for example, but their individual jobs might look very different; thus, jobs and occupations may be "internally segregated by both gender and race" (Acker, 2006, p. 443). In other words, work – in this case FDV work – demands *different things of men and women*. Divisions of labour within bodies or sectors of work, then, are neither neutral nor arbitrary but "entail differentiated violence on male and female bodies" (Hearn, 2012, p. 10).

Walby's (1990) 'six structures of patriarchy' complements Acker's inequality regimes, highlighting the multiple and interconnected sources and relations of patriarchal – that is, specifically gendered – power in society:

Six structures of patriarchy

1. Production relations in the household
2. Paid work
3. The patriarchal state (including policies and laws)
4. Men's violence (patterned and systemic)
5. Patriarchal relations in sexuality
6. Patriarchal cultural institutions (e.g. media, religion, and education)

In drawing attention to the interrelatedness of work, organisations, social institutions and violence, the work of Walby and Acker, together, emphasises the importance of interconnections and continuities for understanding complex problems. Organisations, thus, reflect and reproduce broader (gendered, raced, classed) power relations across the institutions of the family, state and labour market. These are power relations that are both deeply embedded and intractable or, as Collinson and Hearn (1996, p. 73) put it, "multiple, shifting but tenacious".

Work

Work itself is also highly gendered, reflecting and reproducing broader "social structural divisions of labour, power and cultur[al] hierarchies" (Martin & Jurik, 1996, p. 31) that are, themselves, intricately connected with the gendered power relations constituting the family and the state (Seymour, 2009). Thus, the "micropolitical operations of [gendered] hierarchy and advantage" (Eveline, 1996, p. 68) are fundamental to both work and the organisations in which (paid) work takes place, as is the broader neoliberal logic through which these are "increasingly integrated into the fabric and structure of capitalism" (Baines & Cunningham, 2020, p. 540).

Care and support work is widely recognised as feminised work; 'feminised', in this context, denotes both the overrepresentation of women in this work and its gendered association with the domestic sphere as 'women's work'. Traditionally seen as an expression of women's innate femininity – rather than labour that can or should be quantified and recognised, the advancement of neo-liberalism and new managerialism has further contributed to the devaluing of care work, both paid and unpaid. As observed by Cortis and Blaxland (2024, p. 90), "historical legacies of higher attentiveness to the features of male jobs" have manifested in "limited differentiation of skill" within care and support work, thus compounding the undervaluation of these areas of work. The undervaluing of care work across the wider social services sector is evident in employment precarity, low pay and status and the normalisation of unpaid labour. Importantly, the poor working conditions associated with care work have largely been seen, not as structurally and societally embedded, but as 'women's issues' (Baines et al. 2014; Baines & Cunningham 2020). As Whitman (2018, p. 270) points out, "neoliberal constructions of the 'good citizen'", in countries like Australia, are "tied directly to engagement with the labour market", thus providing a fundamental basis for the devaluation of unpaid labour.

Care and support work in Australia

Survey research recently undertaken by Cortis and Blaxland (2024) confirms that, of the more than 300,000 people employed in the Australian social and community services sector, "around three quarters are women and 95% work in private, non-government organisations, including charities" (p. 11). While the services delivered by the social and community sector provide a range of essential supports to individuals, families and communities, the "over 900 unique formal job titles" (p. 7) reported by the 3,122 workers who responded to the survey, highlight, both, the challenges of defining 'the workforce' and the often arbitrary connection between job titles and the actual work that people do. An especially notable aspect of Cortis and Blaxland's report is the attention they direct towards the highly skilled and complex nature of the work, countering the common perception of care and support as low skilled and non-specialised. Instead, in observing that survey respondents were, mostly, highly qualified, experienced and working under limited supervision, they emphasise that:

> **workers shared sophisticated skills in interpersonal communication, empowering others and engaging with empathy and understanding in the lives of people experiencing significant challenges. These were practiced in different ways, applied according to complex professional judgment about client's circumstances and needs, and knowledge and experience of navigating policies and systems of support. For many, these skills are particularly evident when they help de-escalate a situation or work with someone who is agitated or distressed – something 44.4% of the sector say they do on most days. They are also evident in workers' contributions to statutory systems and government effectiveness. (Cortis & Blaxland, 2024, p. 90)**

Many of these skills and responsibilities were not "fully recognised" in the relevant Award, however, leaving workers "highly vulnerable to underclassification, a form of undervaluation which is institutionalised and maintained by current regulatory arrangements" (Cortis & Blaxland, 2024, p. 92).

In its Draft National Care and Support Economy Strategy 2023, the Australian Government acknowledges the "undervaluation and underpayment of care and support workforces [as] a pervasive issue influenced by the historical context of care and support being provided, unpaid, by women from within the home" (PM&C, 2023, p. 30). It also recognises the specifically gendered implications given that women, not only, constitute the majority of the care and support workforce but are also "more likely to provide unpaid care when formal services are not available" (p. 1). Not considered though, is the institutionalised competition (tendering for funds, etc) and associated demands for cost efficiency and risk management that drive, intensify and maintain these conditions (Baines et al., 2014, Charlesworth et al., 2015).

The undervaluing of care work is both central to the entrenchment of gender, raced and classed inequalities, and antithetical to social justice. Care work "reflects, reproduces, and reinforces normative cultural perceptions about traditional gender identities" (Lavee & Kaplan, 2022, p. 1476) and, in this, enables the reproduction of normatively gendered roles, expectations and organisations (p. 1473). Unpaid work – for example, in the form of (unpaid) overtime and/or on-call work – and 'invisible' work are both important parts of the picture. Work that is invisible is that which goes beyond the job description, encompassing those "unidentified, unrecognized, and informal practices and services" that are not generally recognised as 'work' (Lavee & Kaplan, 2022, p.1465). As with invisible work in the household, there are multiple layers of invisibility; work might be invisible both to "the self" and to "society in general" (Lavee & Kaplan, 2022, p. 1469). As Lavee and Kaplan (2022, p. 1467) point out though, invisible work plays a crucial role in sustaining stretched and under-resourced organisations. These are dynamics that play out in particular and under-researched ways in FDV organisations and work settings.

Theorising family and domestic violence work

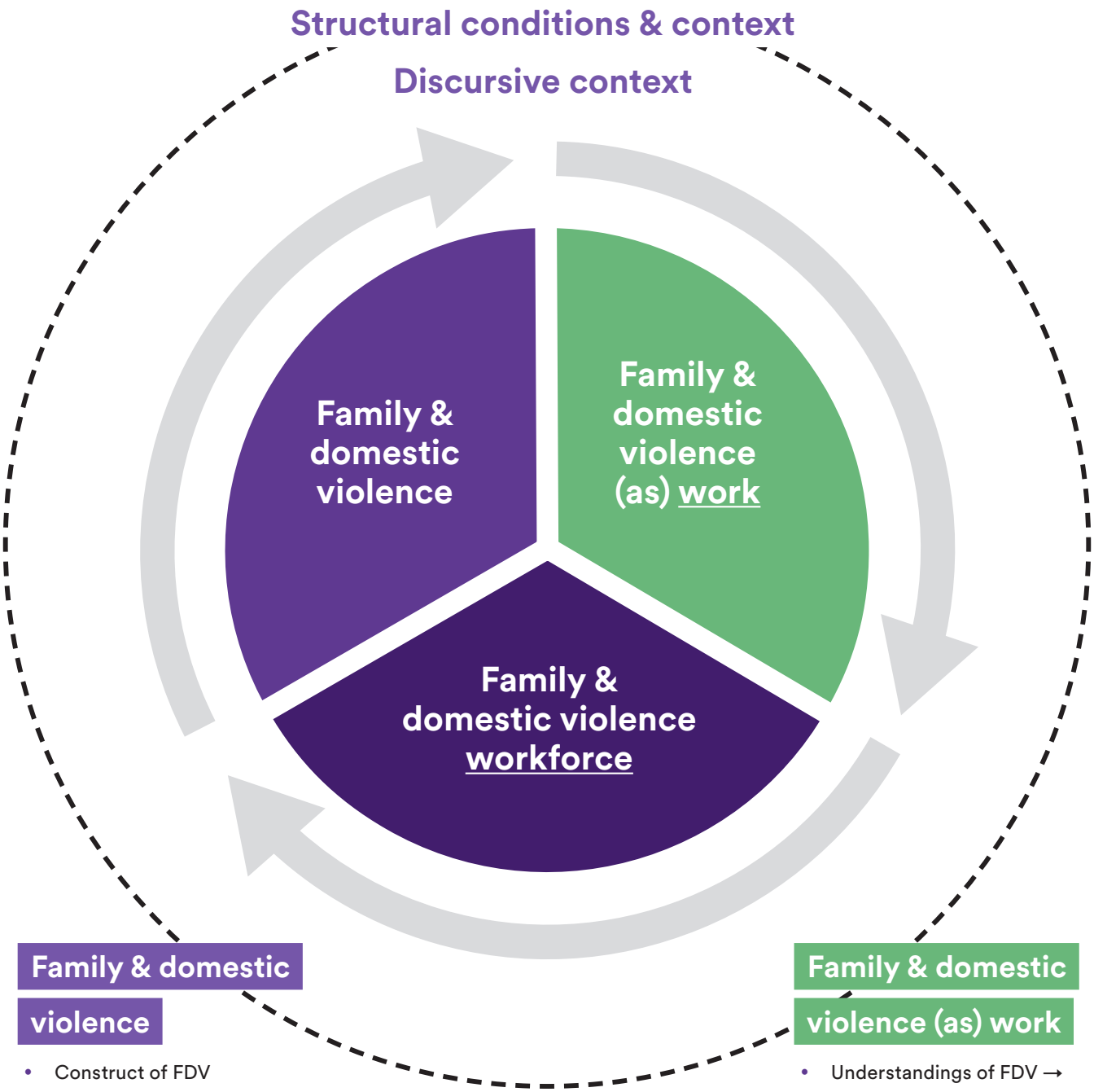
Theorising FDV work requires engaging with the constitution, practices and logic of FDV work, both in general and as expressed in specific sites. This recognises that dominant – societal – discourses of gender and violence, as well as work and labour, shape the institutional logics of FDV responses, service systems and service delivery – both across the state and/or sector and within individual agencies (refer Figure 2). Thus, as Hearn et al (2016) argue, violence and inequality (including structures of gender, 'race', class, etc.) are interlinked and perpetuated both societally and institutionally.

Discourses: Gender, work, violence

While all work is fundamentally gendered, FDV work is a distinctively gendered practice shaped by the interconnecting discourses of gender, work and violence, including societal discourses that shape expectations of and conditions for the workforce (Baines, 2016). These very same discourses also shape societal understandings of FDV. Beliefs about what constitutes FDV, what FDV looks 'like', etc. are thus intimately bound up with the "historical intersections of gender power, social divisions, ideology and hegemony" (Hearn, 2012, p. 12). Moreover, different "namings, framings and definitions" of violence and FDV generate different explanations "that are also more or less gendered and/or intersectional" (Hearn, 2012, p. 8).

FDV is defined, perpetrated and policed in a context of multiple, ignored or socially sanctioned types of violence and social processes that are themselves gendered (Seymour, 2009). Exemplifying the utility of a discursive focus, for example, Price (2012), argues that the "narrowing of violence to the private sphere is itself violent" (p. 104); that is, in reducing violence against women to the domestic sphere, dominant discourses of FDV negate the "violence generated by structures, institutions, and histories" (Price, 2012, p. 2). In this context, focusing on the interconnections between the structural, discursive, institutional and interpersonal highlights the ways in which reductive understandings of FDV (i.e. emphasising discrete incidents rather than patterns, and so on) are reflected in the increasingly narrow scope of FDV work.

Theorising FDV – and FDV work – thus requires a shift in focus, away from behaviours, incidents, and explanations, towards recognition of FDV as a "deeply embedded political-economic-cultural phenomena with wider social formations" (Hearn, 2012, p. 9). Societal, government and organisational understandings and responses to violence (including FDV) are, therefore, tightly bound up with "social divisions and inequalities, class positions and other social intersections" (Hearn et al., 2016, p. 523). It is in this sense that this inquiry into FDV work and the FDV workforce is also an interrogation of the society in which we live.



Family & domestic violence

- Construct of FDV
- What kind of problem is it?
- Who is the 'client'?
- What needs to be done about it?

Family & domestic violence (as) work

- Understandings of FDV →
- Nature of 'the work'
- *What is the work?*
- How is the work constructed differently across contexts & settings?

Family & domestic violence workforce

- Institutional logic/s of responding to FDV
- Organisations (structures & processes)
- How is work organised?
- *Who does the work?*
- Demands on workers

Figure 2

Histories of FDV work

Contextualising FDV work historically is critical for understanding how things have come to be the way they are, whether as continuities or breaks from the past. Work with victims and work with perpetrators of FDV, for example, have arisen in particular political and social contexts, each with their own distinct histories and social movement alignments.

Work with victim-survivors

The history of work with victims is also the history of feminism and feminist activism in Australia, and is, in turn, linked to the emergence of FDV as a distinct social problem:

> **In Australia, as in the UK and elsewhere, it was women who had experienced gendered violence who brought it to the attention of the Women's Liberation movement in the early 1970s. Australian feminists were amongst the first to develop the term 'domestic violence', inaugurating an enormously generative cultural shift in comprehending its causes, prevalence and features, as well as an entire sector dedicated to addressing it. (Curthoys, Kevin & Simic, 2021)**

In this context, the 'refuge movement' emerged alongside the "mostly overt radical feminist objectives" (Woodlock et al, 2023, p. 2) of women's liberation from patriarchal oppression; in establishing refuges for women and children escaping abuse, women's and children's safety was, "inexorably linked to their broader freedom" (Woodlock et al, 2023, p. 2). The participation of victim-survivors was also central; in contrast to the professionalised services of today, refuges/shelters emphasised peer support and solidarity, being "for survivors, run by survivors and their allies" (Wood, 2017, p. 310).

The crucial role played by women-only and women-led organisations in, not only activism and policy advocacy, but also the establishment of emergency/crisis accommodation and support for women experiencing FDV is well-recognised in Australia (Putt, Holder & O'Leary, 2017, p. 17). Originally "small, standalone services" operating as "inner city or suburban communal houses" (Murray et al., 2022, p. 4), most refuges were "grassroots women's organisations, with collective models of decision-making" (Putt, Holder and O'Leary, 2017, p. 17; see also Murdolo, 2014). The early focus on 'freedom' has since fundamentally shifted, with gender mainstreaming and the professionalisation of services culminating in an explicit emphasis on the separation of "feminist activism from direct service work" (Woodlock et al., 2023, p. 2). Coinciding with the emergence of neoliberalism, the growth of professional responses to FDV throughout the 1970s and 1980s have also been fundamentally shaped by the demands of competitive government funding (Woodlock et al., 2022).

Women's FDV services today are more likely to be larger organisations with "more formal governance and management structures, more professionalised workforces and with contracts and funding from government" (Putt, Holder & O'Leary, 2017, p. 17). Baines (2022, p. 2995) observes that the movement away from community and activist-based responses has also been accompanied by a growing emphasis on criminal justice responses to FDV, culminating in an "uneasy partnership with the carceral state". Thus, while feminist responses named and legitimised FDV as a significant social and political problem, "they also inadvertently reinforced conservative law-and-order agendas and enabled individualist rather than structural solutions" (Baines, 2022, p. 2996). Accordingly, most FDV victim services in Australia now have a narrow risk / safety remit in line with targeted funding arrangements, thereby decentring feminism and supplanting its focus on broader political and social change.

Work with perpetrators

The history of women's FDV services and refuges in Australia highlights the interconnection of societal change, the actions, activism and advocacy of social movements, and policy development. This has also been evident in other contexts such as the evolution of distinct men's and women's health policies in Australia, with the first National Women's Health Policy launched in 1989 following the sustained pressure generated by grassroots, largely feminist, activism (Seymour, 2018). Like FDV policy, women's health policy also emerged within the context of broader social change arising from public challenges to the male-domination of the State, reflected in the "increased representation of women and formation of feminist policy machinery" (Herrett & Schofield, 2015, p. 562). The National Male Health Policy, launched in 2010, was also the result of "many years" of male activism and men's health advocacy, "driven by grassroots men's groups" (Collins, McLachlan & Holden, 2011, p. 62) and culminating in the emergence of a "united men's health advocacy front" (Smith et al, 2009, p. 431). Spurred by the strong interest of professional organizations and academics and the establishment of national advocacy bodies such as Men's Health Australia, Federal funding and initiatives followed with the appointment of National Men's Health Ambassadors, a Senate Select Committee on Men's Health, and a National Men's Health Roundtable (Smith et al, 2009, pp. 431-2). Thus, whereas the women's health movement "arose from a broad political base in which health was only one component" the men's health movement was "initially as much a product of governments and health service providers [...], as it was of the grass roots" (Broom, 2009, pp. 270-1).

Lacking the foundation of a "broad, sustaining social movement" and "coherent social justice ideology" (Lumb, 2003, p. 4), men's activism in Australia has continued to be fragmented, encompassing both pro-feminist and anti-feminist (or 'men's rights') perspectives (Seymour, 2018a). Brown and James (2014, p. 171), for example, point to the influence of a "small number of men, most of whom were involved in men's self-awareness groups" and critical of the impacts of patriarchy in their own lives. More broadly though, men's collective responses to social changes have been of particular significance. For instance, "no-fault divorce" in the 1970s led to a "dramatic increase in women leaving marriages" and, in turn, the downgrading of women's government policy units and introduction of reforms promoting family values that were "sympathetic to men's claims of being 'silenced' by women's groups" (Brown & James, 2014, p. 180). In this context, the relative lack of attention to perpetrators as a distinct 'client' group and slow progress towards accessible and widely available perpetrator interventions is perhaps not surprising, and provides critical background for our discussion of specialist perpetrator services, later in this report.

Men's behaviour change programs

Men's behaviour change programs emerged in the late 1970s and early 1980s in response to growing recognition of the problem of violence against women; since then, however, men's programs in Australia have "developed slowly and in an ad hoc manner" (Mackay et al., 2015, p. 10). As in the UK, FDV activism and practice in Australia in the late 80s/early 90s mainly focused on the safety and protection of women and children:

> **Feminists and women's groups rarely dealt with abusive men beyond the drive to bring criminal sanctions for domestic abuse offences into the policy arena. The concept of 'working with men' was a huge cultural shift for some feminists and women's groups concerned with domestic violence. (Phillips, Kelly & Westmarland, 2013, p. 5)**

The Duluth Abuse Intervention Project, established in Minnesota in the 1980s, was one of the first coordinated community responses to domestic violence, and was developed with the understanding that domestic violence was a "cause and consequence of gender inequality" (Kelly and Westmarland 2015, p. 40). As Phillips, Kelly and Westmarland (2013, p. 6) point out, it is likely that the Duluth program's "feminist credentials" had a significant influence on the willingness of some women's organisations to collaborate and support men's programs.

According to Hearn (1998), the emergence and growth of men's behaviour change programs was rooted in:

> **faith in personal change, whether of liberal individualism, the counselling society or indeed psychoanalysis; the ineffectiveness of custodial and other criminal justice interventions; costliness and low cost effectiveness of such interventions; the search for causes of and allocating responsibility for men's violence; and the continuing interaction of feminist and pro-feminist politics. (Hearn,1998, p. 174)**

While men's programs in the US developed in parallel, if not in collaboration, with women's refuges, this was not the case in the UK nor, arguably, Australia, due in part to the women's led and women's only nature of the refuge movement. Instead, Hearn (1998, p. 174) observes, men's programs were taken up for other reasons, "as part of pro-feminist politics, as a self-help movement (comparable to Alcoholics Anonymous), [and] as an element in mental health provision". The theoretical underpinnings of contemporary perpetrator interventions thus range from psychoanalytic to structural and pro-feminist approaches and are likely to vary in line with "sources of funding, relationship to the state, style of working, and gender politics" (Hearn, 1998, p. 174).

Perpetrator interventions for non-mandated clients have, at least in South Australia, traditionally been positioned in the community health sector. Since 2011, however, alongside the mainstreaming of privatised, individualised, Medicare-funded services, government priorities and funding have shifted away from community approaches. This has, not only, impacted on the time and scope for political engagement but also eroded practitioner networks and collaborative work across professions, agencies and sectors (Wendt et al., 2019, p. 35). At the same time, the emergence of standardised, programmatic – and generally cognitive behavioural – interventions, promising cost-effective and measurable outcomes, have captured the attention of neoliberal policy makers. In their framing of FDV as an individual problem, though, such approaches detach men's use of violence from its socio-political context.

The FDV sector?

As reflected in their distinct histories, the victim (or women's) and perpetrator (or men's) sectors have developed in a binary fashion such that 'men's work' and 'women's work' have been understood as separate and largely disconnected domains of FDV work. This separation has also long been evident in the body of literature concerning FDV (see Haines et al., 2022). Echoing this binary, tensions have also existed for Aboriginal services striving to respond to family violence in culturally appropriate ways. For example, there has been little acknowledgment, let alone documentation, of Aboriginal ways of working with family violence (Carlson et al., 2021). In addition, the reliance on short-term funding contracts and pressures associated with KPIs and strict eligibility criteria, shaped by the political ideology of the day (Baines, 2016), have further hindered efforts to understand FDV work more comprehensively and bridge the division between men's and women's services.

As a social problem FDV continues to attract substantial media and public interest, characterised by heated, often polarised, debates and political grandstanding. Although positioned alongside gender (in)equality, at least at the policy level, without an explicit focus on the broader structural, political and societal arrangements that constitute inequality/ies, including institutional cultures and the distribution and differential valuation of work (such as caring work) (Seymour, 2018b), FDV is invariably reduced to the attitudes and behaviours of individuals, thus further fuelling the simplistic and divisive nature of much debate ('good' men & 'bad' men; #notallmen; #menarevictimstoo; etc). This fundamentally restricts the scope for exploring the diverse and nuanced ways in which gendered (and other) power relations "play out in the everyday realities" (Castelino, 2014, p. 11) of men's and women's lives. This, then, is the context within which FDV work takes place and, as became apparent in the fieldwork for this project, is reflected in work environments marked by increasingly fragmented feminist and backlash politics.

The FDV workforce

While descriptive statistics have captured socio-demographic information (Cortis et al., 2018), there has been no comprehensive or national analysis of the nature and experiences of FDV work, nor the interrelationship with (and between) workers' capacities, needs and experiences (Merchant & Whiting, 2015). There is, nonetheless, increasing acknowledgement across Australia of the imperative for a skilled and capable FDV workforce. The Royal Commission into Family Violence in Victoria, for example, drew attention to the expectations placed on the workforce, referring to the "complex set of high-level communication, organisation and management skills" (RCFV, 2016, p. 174) required of specialist FDV workers, as well as,

> **detailed knowledge of the dynamics of family violence, what risks look like, how to communicate with victims without causing more trauma, and how to help victims develop a detailed plan for their ongoing safety (RCFV, 2016, p. 173).**

Work with perpetrators is also a key responsibility of the specialist FDV workforce, and one that warrants closer attention. Thus, efforts to strengthen the workforce, as acknowledged by the Royal Commission, must do more than focus on skills and capabilities in isolation. Instead, workforce development strategies must be comprehensive, inclusive and informed by systematic research (Victoria State Government, 2016). Family Safety Victoria's 2017 release of capability frameworks for workforces both preventing and responding to FDV further reinforced this message (Victoria State Government, 2019). "Strengthening the sector [and] building the workforce", in both size and capacity, are also highlighted as key priorities in the most recent National Plan (Commonwealth of Australia, 2022, pp. 55-6). While many of the references to workforce issues in the National Plan relate specifically to victim services, perpetrator services are also acknowledged, for example, in the recommendation to "invest in the development and sustainability of a specialist workforce to work with men using violence, including in men's behaviour change programs and other perpetrator interventions" (Commonwealth of Australia, 2022, p. 115).

The Australian FDV workforce: Strategies and planning

While acknowledging the work of states and territories in contributing to the FDV workforce, the DFSV Commission (2024, p. 79) emphasises the importance of a national approach to capacity building for the specialist and non-specialist workforces that includes nationally coordinated workforce development and investment. The DFSV Commission (2024) advocates "careful design and planning" by governments, as well as training, capability development, and so on, but also cautions against workforce strategies that overlook factors such as "pay and conditions, workforce health and wellbeing, and career progression and satisfaction" (p. 73):

> **The domestic, family and sexual violence workforce cannot be developed in isolation from existing national and state and territory efforts to develop the wider social and community services sectors. Domestic, family and sexual violence is an intersectional problem and all parts of the social sector workforce need to be operating well to have a positive impact on the rates of domestic, family and sexual violence across the country. (DFSV Commission, 2024, p. 74)**

Focusing on the FDV prevention, rather than FDV response, workforce, Our Watch's (2023) report also contributes to understanding the FDV-related workforce in Australia. The predominantly female and highly qualified prevention workforce, according to Our Watch (2023, p. 26), encompasses a diverse range of roles and sectors but is currently "small, specialist, highly feminised, values-based and mainly concentrated in the state of Victoria". Echoing concerns regarding the broader FDV workforce, the report highlights the need for more "national and jurisdictional" workforce data to inform workforce planning (p. 7), and links difficulties in attracting and retaining qualified workers to "low remuneration and short-term contracts" (p. 8). Emphasising the "great strengths within the skills, experiences and expertise of the workforce" (p. 57), Our Watch further points to the "unique wellbeing challenges" faced by the prevention workforce including those associated with "having to deal with resistance and backlash" (p. 8).

Specific references to FDV workforce development also appear in the strategic plans of some states and territories; these are summarised in **Appendix C**.

Workforce challenges

Existing strategies for developing the FDV workforce, as discussed above, share an overriding focus on skills, capabilities and training. Understanding workforce challenges in terms of worker deficits, solvable through training and standards, however, ignores the gendered nature of FDV as well as the sociocultural and institutional contexts that shape understandings of, and responses to, violence.

Expectations placed on the FDV workforce are multiplying and intensifying alongside growing appreciation of the complexities and intersections of FDV; these demands are often unsupported, both materially and symbolically, in organisational and sector-wide structures and processes. Demand for services across the FDV sector continues to outstrip available funding and resources, while issues including insecure funding, low remuneration, burnout, lack of role clarity and limited access to professional development (Slattery & Goodman, 2009) have profound implications for attracting and retaining FDV workers. Compounding the pressures relating to the complex and challenging nature of FDV work, those working at the coalface are likely to face economic, psychological and professional challenges rooted in the gendered specificity of the work (Cortis et al., 2018). The potential for indirect trauma, such as vicarious trauma and secondary traumatic stress, is also well established (Tarshis & Baird, 2019). Supporting and strengthening the FDV workforce – and attracting and retaining current and future FDV workers – is a critical priority that requires careful consideration, taking into account the nature, structures and organisation of the work.

The lack of national data on FDV services (AIHW, 2024) is an important barrier to understanding the breadth and detail of FDV work and demands placed on the FDV workforce. The AIHW (2024) points out, for example, that the Australian and New Zealand Standard Classification of Occupations, used in the Census of Population and Housing, does not contain FDV-specific occupation codes. Further, while surveys of FDV services and workforce have been undertaken, many of these are either/both state-specific and/or restricted to the victim services sector. A notable exception is the National Survey of Workers in the Domestic, Family and Sexual Violence (Cortis et al, 2018), as discussed in the preceding section, and specifically designed for the purpose of understanding the workforce. Until recently, there has been no indication that this survey would be repeated; data gaps such as these have critical implications for achieving a comprehensive and up-to-date understanding of FDV services and, in turn, accurate and informed workforce planning. Earlier this year, however, the Federal government announced the commissioning of another national survey in support of a "robust workforce that is supported with the skills and qualifications to prevent and respond to gender-based violence" (Ministers for the Department of Social Services, 2024).

Specific workforce challenges were identified by the House of Representatives Standing Committee on Social Policy and Legal Affairs (SCSPLA, 2021) in its inquiry into FDSV, including "significant workforce shortages and a lack of coordination and resourcing to support retention, skill development and leadership" (p. 306). Having heard about the "incredibly disruptive" nature of the competitive funding model (SCSPLA, 2021, p. 307), the Committee considered that providing "longer-term funding to specialist service providers" could alleviate challenges to "workforce security and professional development" (p. 337). Cullen et al. (2022, p. 67) have also highlighted "inadequate and short-term funding cycles" as a key concern, not least in the constraints these place on the workforce's capacity for effective collaboration. Together with the impacts of resourcing on workforce competency and capability, this makes for a "high degree of variability" in the quality, capability and practices of FDV services for both victim-survivors and perpetrators (Cullen et al., 2022, p. 67).

Further challenges highlighted in the National Plan include that FDV workers are "under-recognised and undervalued", under "immense pressure", and often have to learn specialist skills "on the job", resulting in "worker burn out, vicarious trauma and risks to worker safety". Reference is also made to the "challenges and barriers to attracting, developing and retaining skilled and qualified staff in regional, rural and remote communities" as well as the lack of "clear career pathways into the sector". (Commonwealth of Australia, 2022, p. 55). Staffing levels, turnover and leave, as well as workforce capacity and wellbeing, all impact on service capacity. Service-level data such as average worker caseloads, experience levels, and role vacancies can all provide a useful indication of workforce capacity and wellbeing, however,

as emphasised by Safe & Equal (2023, p. 16), "additional and compounding system barriers" experienced by victim survivors must also be taken into account to capture the impacts of "navigating those barriers" on workers.

Currently, the clearest indication of the state of the FDV sector comes from Victoria. Recent research by Safe & Equal (2023, p. 7) highlighted high staff vacancies and a high proportion of entry-level staff, concluding that the family violence sector in Victoria is:

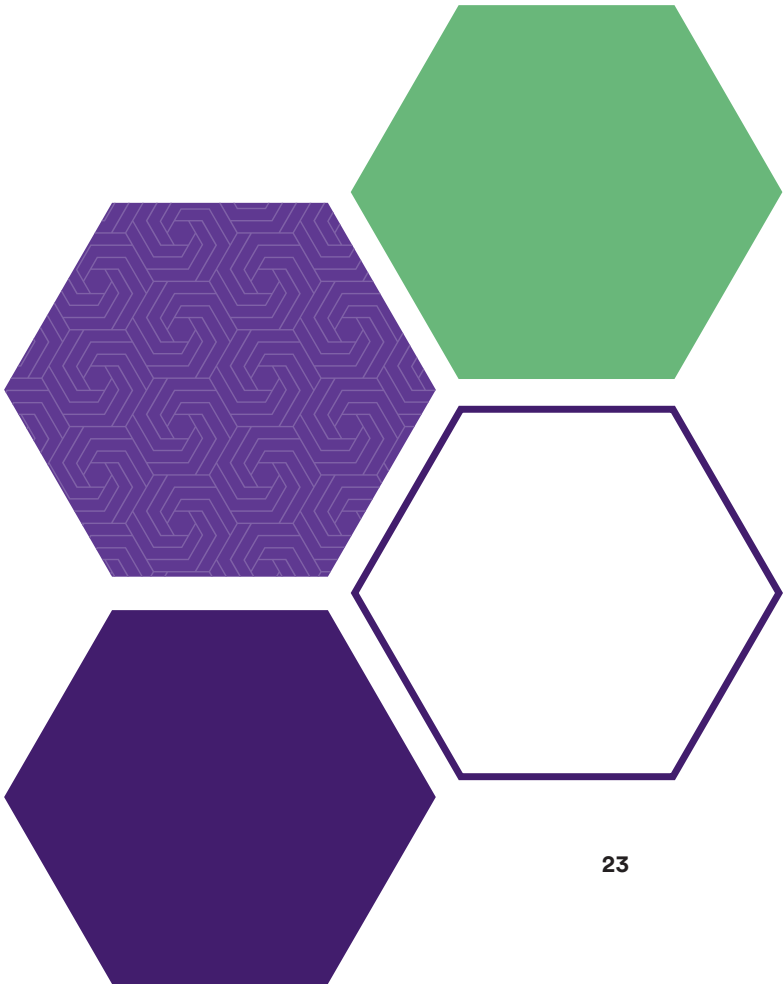
> **experiencing a critical workforce shortage, and that the employment and retention of senior staff continues to decline. These shortages are due to a multitude of factors, including short-term contracts creating insecure work; inadequate pay; limited career progression pathways; and exceeding levels of demand that contribute to fatigue. (Safe & Equal. 2023, p. 17)**

Safe & Equal (2023, p. 17) also noted the

> **challenges of recruiting and retaining skilled and experienced specialist practitioners in rural and regional areas, where there are workforce attraction and recruitment issues across a range of sectors; and of attracting and developing specialist family violence practitioners with Aboriginal and Torres Strait Islander cultural knowledge and lived experience. (p. 17)**

Similarly, Family Safety Victoria's (2023) F*amily Violence and Sexual Assault Workforce Pulse Survey Report 2022* indicated that the top barriers to "working optimally" reported by workers (in order of frequency) were:

- Staffing issues (short staffed);
- Too many competing priorities;
- Corporate processes (including administrative burden);
- High / complex case loads;
- Administrative processes (including leave and HR requirements);
- Decision making and authorisation processes;
- Communication processes;
- Poor work-life balance; and
- Technology limitations.



Who is the workforce?

The Royal Commission into Family Violence differentiated between four 'tiers' of the FDV workforce (broadly defined). The Tier 1 workforce, our focus here, includes the specialist workers whose primary role is direct service provision with victims and/or perpetrators of FDV (Victorian State Government, 2016), including crisis response, high-risk assessments, accommodation support and counselling (Wendt et al., 2017). Tier 1 work sites are a heterogeneous set of agencies with distinct, yet interconnected, mandates, practices and agendas.

As discussed in the previous section, the lack of national level data on FDV services leads to a lack of accurate and comprehensive information regarding the FDV workforce. Cortis et al.'s (2018) *National Survey of Workers in the Domestic, Family and Sexual Violence*, prepared for the Commonwealth Department of Social Services, was specifically designed to build this evidence base. Consisting of two survey instruments – one targeting workers and the other services – the survey was distributed to 1,007 FDV services across Australia, with a completion rate of 31.8% (or 320 services). 1,157 employees completed the worker survey. As Cortis et al (2018, p. 20) note, however,

> **[the] study sample had a strong focus on Commonwealth funded services and programs. This has implications for coverage of perpetrator services, the majority of which are delivered in law enforcement, criminal justice and correctional services funded and delivered by state agencies. While perpetrator responses delivered by the non-government sector were targeted, services funded and delivered by state governments were not. As such, workers in some perpetrator services may be under-represented.**

Thus, while the national survey provides a detailed snapshot of the workforce in FDV victim services, there are limitations in its representation of workers in the perpetrator sector.[1] This reflects the broader knowledge gap, particularly at the national level, regarding the characteristics and conditions of the FDV perpetrator workforce.

Overall, the *National Survey of Workers in the Domestic, Family and Sexual Violence Sectors* revealed a Tier One workforce that is predominantly female (83%), aged 35-54 (49.8%), and highly educated (over 90% have a post-school qualification). In, addition:

- 1 in 5 workers had caring responsibilities;
- 1 in 12 identified as LGBTIQ;
- 1 in 13 spoke a language other than English at home;
- 1 in 20 were from Aboriginal and Torres Strait Islander backgrounds; and
- 1 in 25 identified as having a disability.

Most were working full time (61%). For the remainder, reasons cited for working part-time included "caring responsibilities or other personal reasons" and "industry-related factors including the need to reduce exposure to the trauma and stress involved in their work, or because current levels of service funding were not sufficient to cover full time positions" (Cortis et al, 2018, p. 9).

1. For example, only 30 (2.6%) of the 1,157 survey respondents reported that they worked in a specialist perpetrator program setting (Cortis et al, 2018, p. 22).

The survey findings regarding job quality and employment conditions were especially telling:

> **Almost half of workers said they feel emotionally drained from their work (48.2%) and almost the same percentage said they felt under pressure to work harder (44.5%). Many were worried about the future of their job (44.5%) and a substantial proportion did not feel they were paid fairly (37.7%). More than 2 in 5 respondents said they worked unpaid hours at least once a week. Workers are highly exposed to bullying, harassment, violence and threats. Half of workers said they experienced these behaviours from a client in the last 12 months. More than a third of women had experienced bullying, harassment, violence or threats from a colleague, supervisor or manager in the last year, as had a quarter of men. Bullying, harassment, violence and threats from a client was more common, and particularly high among those working with perpetrators. Among those in daily contact with perpetrators, 65.7% had experienced bullying, harassment, violence or threats from a client in the last year". (Cortis et al, 2018, pp. 10-11)**

More recently, Family Safety Victoria's (2023) *Family Violence and Sexual Assault Workforce Pulse Survey Report 2022*, while limited to Victoria, captures the workforce across both victim and perpetrator services. 1,049 workers from more than 100 funded agencies were surveyed, representing an estimated 35% of the workforce in Victoria. While workers in specialist family violence services were most highly represented, 110 (10%) indicated that they worked specifically in family violence perpetrator intervention. Here, the workforce data largely mirrored the National Survey, that is: 87% female; median age 40-44; 5% identifying as Aboriginal or Torres Strait Islander; 15% speaking a language other than English at home; 10% having a disability that impacted on their work; and 81% both with a graduate or postgraduate qualification. Interestingly, 22% of survey respondents indicated that they intended to leave their current role, *and* 8% their current role and the sector, in the next 12 months. Reasons for plans to leave included career prospects (31%), excessive levels of demand (29%), insufficient income/salary (23%), lack of advancement opportunities (23%), not feeling valued by the organisation (15%), and negatively impacts of the job on health and wellbeing (14%).

While recognising their limitations, these descriptive statistics paint a picture of the FDV workforce that highlight its institutionally gendered and raced structures. In this project's focus on diverse forms and arenas of FDV work, we are interested in the relationships between these – their interconnections, commonalties and distinctions – as well as the interactions both between agencies and between individuals and agencies (Hearn, 1994). Thus, we challenge the separation of perpetrator work from victim support work and seek, instead, to understand the constitution, practices and logic of the FDV workforce, both as a whole and in specific sites.

Theorising the FDV workforce

As a social institution, the FDV workforce is constituted by gendered, colonial and neoliberal structures that are sometimes in tension but also work to reinforce raced and gendered privilege in ways that link the experience and perpetration of FDV with institutional responses to FDV. The FDV workforce, thus, sits in a contested space between the gendered and raced specificity of FDV and FDV responses, and the broader neo-liberal structuring of work, and in particular FDV work, with raced and gendered impacts. A strategy that separates the workforce from these processes and centres its efforts for change on the capacities of workers will thus reinforce, rather than counter, the existence and effects of violence.

Our focus here on the intersections between FDV and the social institution of work/employment, requires paying attention to the discursive, social structural and material forces that shape policy, services, organisational practices and workforce conditions (Baines, 2016). This recognises both the inherently gendered nature of organisations and that workplaces are sites "in which stereotypes of masculinity and femininity are imposed and constructed, where the interface between men–women is pervasive" (Wilcox et al., 2020, p. 710). The ways in which work is 'done' and experienced, whether in the FDV context or not, are shaped by gender and have impacts that are uniquely gendered, highlighting the need to interrogate the everyday practices that sustain gendered and other violences.

Kaplan (2022, p. 864) discusses how the blurring of "boundaries between visible and invisible work" are embedded in job descriptions. For example, the comparison of job statements, in **Appendix A**, highlights gendered differences in the articulation of perpetrator work and victim work. Provided as an indicative example of a typical position statement, the disparities in language and detail evident here result in a considerably longer job description for victim workers, with 231 words used to communicate 'position purpose' (as compared to 66 words for the perpetrator worker), and 24 dot points (as compared to 7) making up the 'key accountabilities'. Likewise, there are 11 (as compared to 8) 'competencies' listed for victim work, each of which are expressed in complex, multi-part sentences. Combined with the higher salary range for perpetrator work, the jobs look quite different; whereas perpetrator workers appear to have a defined role, with clear areas of responsibility and lines of accountability, the role of victim workers, described in great detail and strongly emphasising relational and affective skills, seems to be all-encompassing. Indeed, it is the lack of detail in the job description for perpetrator work that is so telling, bringing to mind Acker's (2006) observation concerning the ways in which gendered expectations are, both, "reproduced as different degrees of organizational class hierarchy" and "reproduced in everyday interactions and bureaucratic decision making"' (Acker, 2006, p. 449).

Understanding FDV work and its workforce thus requires positioning it within the broader context of histories of work and its connections with other (feminised) workforces and related (feminist) struggles. Making these links is critical, foregrounding not only the importance of structural and social contexts but also the possibilities for change and 'equalities' more generally. This is to say that, while this project focuses on the FDV workforce, its concerns are much broader, reflecting the violence of gendered, raced, classed structures and imperative for collective action.

Part 2

FDV work and the FDV workplace

Findings

Summary of findings

Participants

126 individuals directly participated via interviews and/or focus groups, representing 28 different services or programs across the four organisational sites. Categorised by role, as depicted in Figure 3, participants included case worker / case managers (n=80), managers (n=20), team leader or other senior roles (n=17), CEOs (n=3), and various other support roles (n=6).

A pseudonym has been nominated for each participant for ease of reference throughout this report. A full list of participants and their roles is provided in **Appendix B**.

- The median and mean age of participants was 39 years (range between 22 to 67 years old).
- 116 identified as female and 10 identified as male.
- 10 participants identified as Aboriginal or Torres Strait Islander.
- Of the 108 participants who provided further demographic information:
  - The duration of their employment at the organisation ranged from 3 months to 31 years, with a median of 5 years and a mean of 7 years;
  - The majority of participants were on permanent contracts (n=78). 34 were employed on fixed term contracts, with just one on a casual contract;
  - The majority of participants were employed on a full-time basis (n=69). Of those who were employed part-time (n=45), most worked between 16 to 35 hours/week (n= 41) with 2 participants worked 15 hours or less;
  - 27% identified as having caring responsibilities (n=29);
  - 15% identified as LGBTQI (n=16);
  - 3% identified as having a disability (n=3); and
  - 42% had a postgraduate qualification (n=45). An additional 5 participants were currently undertaking postgraduate study.

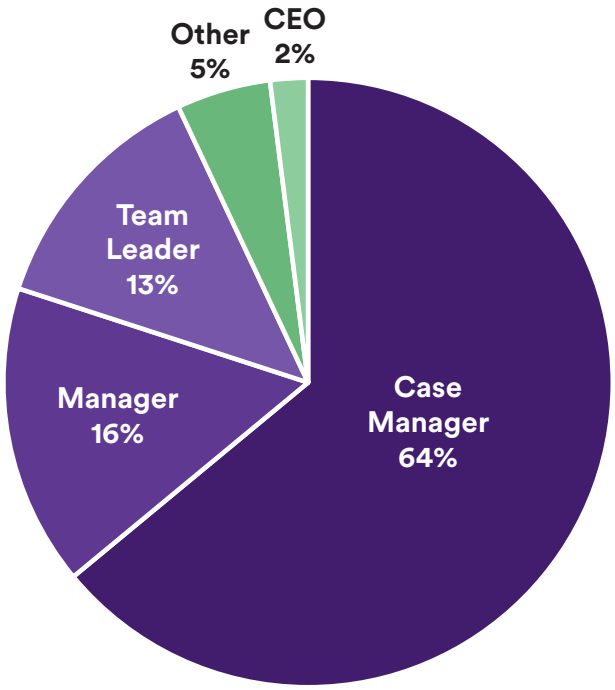


Figure 3: Participant roles

Overall themes

The research generated a wealth of rich and insightful data across the participating organisations. The findings encompass insights regarding both the FDV workforce as a whole and elements that are unique to specific sites. Figure 4 depicts our understanding of relevant conceptual interconnections, providing context for the key – overarching – themes as summarised below. These themes will be discussed further in the remaining sections of this report.

- The diverse sociocultural and institutional contexts within which organisations operated shaped understandings of violence as well as perceptions of the skills and capacities that constitute, or are valued in, domestic and family violence work.

- FDV and FDV work was spoken about differently depending on the target population, the services being provided, and the worker's own previous experience.
- FDV services (like other social welfare services) are subject to budget rationalisation, narrow funding models, and competition for government contracts and funding. This was evident across all organisations but was especially marked in victim services in the form of an intensified pace and volume of work, and accountability to funding bodies.
- Differences in work conditions (and perhaps pay) were observed across the victim and perpetrator service sectors, suggesting a gendered demarcation between women's work (victim support – caring work, femininised and devalued) and men's work (perpetrator accountability – challenging, 'man-to-man').
- Workers in victim services talked about the weight of responsibility associated with managing risk; the feeling that they – personally – carried the risk in relation to women and children's safety. This was not evident in perpetrator services where 'high risk' matters (i.e. immediate safety concerns) were diverted to a designated 'women's worker' or 'partner contact worker', generally within the organisation. Because this worker was invariably a woman, primary responsibility for women's safety was, in effect, shifted to women, thereby relieving men's workers of this highly stressful and crisis-laden area of work.
- Related to the above, the work for men's workers/services ended when a perpetrator chose to disengage. In others, a perpetrator's resistance or non-compliance generated, not an increase in workload and intensity, but instead, either a cessation of contact altogether or a shift towards less challenging conversations.
- Workers in Aboriginal FDV services talked about the impossibility of separating the personal, professional and community. They talked about the enduring and deeply entrenched impacts of colonisation and the constant battle against systems that were designed not to work for them. Community and social activism were central to their conceptualisation of the work.

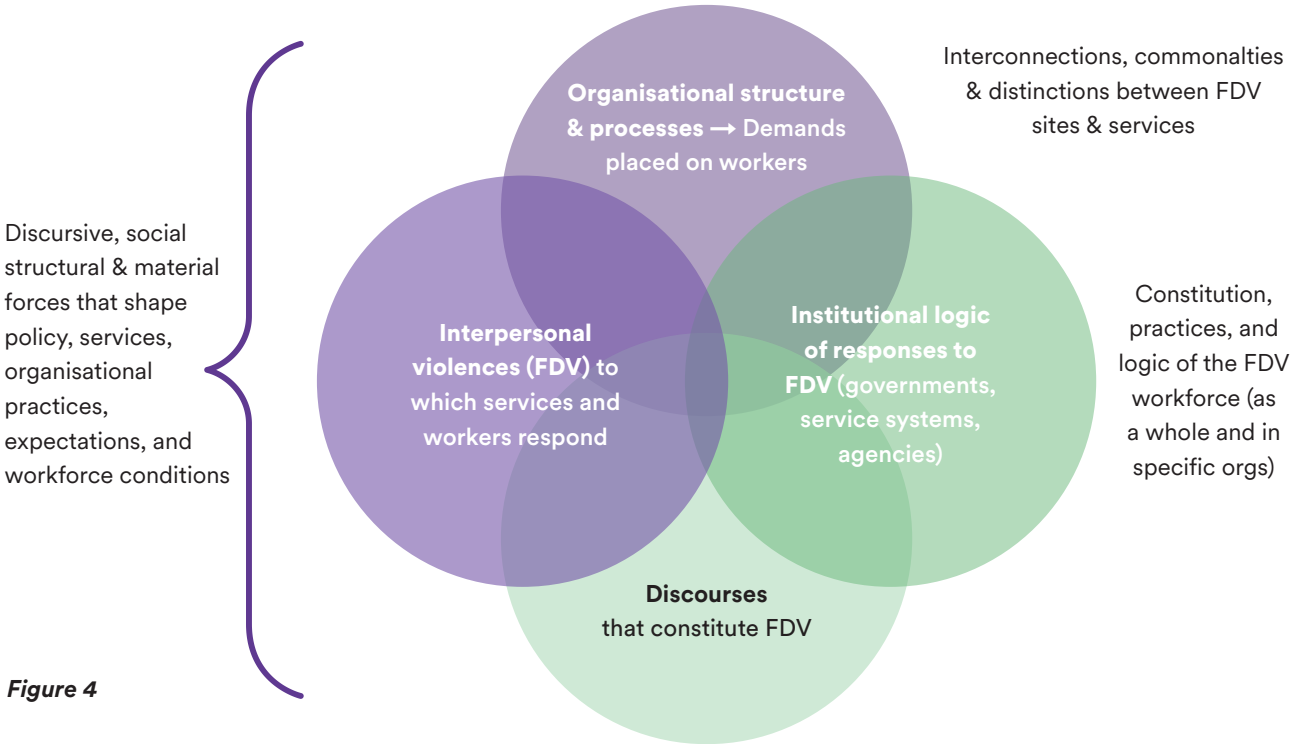


Figure 4

Women's specialist FDV services

Women's specialist FDV services (or 'victim services') have been described as the "backbone of the FDV sector" (Putt, Holder & O'Leary, 2017, p. 8). While a range of government and non-government organisations provide support and other services to victim-survivors, our focus here is on those specialist services which have FDV as their core business. Following Putt, Holder and O'Leary (2017), we take seriously the need to document the "exact nature" of what FDV workers do, in order that this work be "better understood and valued by governments, other organisations and wider communities" (Putt, Holder & O'Leary, 2017, p. 94).

Putt, Holder and O'Leary (2017 p. 26) have described women's specialist FDV services in Australia as, largely, "independent, community-based, often small but specialised, dependent on government funding, [and] providing multiple services and programs". Alongside a "significant and rapid rise" of demand for services in recent years, the sector has undergone substantial change; from the original "grassroots" organisations and collectives, "rooted in the feminist activism from the 1960s on" (Putt, Holder & O'Leary, 2017, p. 13), to organisations, largely NGOs, with "more formal governance and management structures, more professionalised workforces and government funding to provide contracted services" (p. 17).

An overview of key dimensions of analysis is provided in **Appendix D** (Data mapping: Victim Services).

The work of care/ing

> ***... the never-ending, vital and rarely accounted for care work that makes life happen*** **(Oscar, 2024).**

Exploring the nature of FDV work with victim-survivors involves asking questions that are both straightforward, generating a description of tasks and duties, and significantly complex, raising issues of politics, identity, the resonance of gender(ed) experiences and so on. Much of this chapter is taken up with the latter, however, addressing the former – the constitutive elements of FDV work with victim-survivors – is a good place to start. First though, it is important to 'set the scene' in terms of the context for understanding or making sense of FDV work as work. Positioning FDV work within the broader body of literature and theorisation enables us to make connections that encompass the structural, the discursive, and the material. At the same time, recognising parallels across, what might appear to be, distinct and disparate realms suggests the potential for a solidarity of interests and agendas.

Work with victims of FDV is, we argue, care – or caring – work. The gendering of care and care-work is a well-established body of research literature and provides critical context for theorising FDV work, emphasising its origins in women's (unpaid) activism and commitment to women's collective empowerment. The literature on 'social reproduction' – describing the work that has traditionally been done by women for low or no pay – provides an especially useful framework for thinking about care work and care workers. The lens of social reproduction, as explained by Hester and Srnicek, (2017, p. 375) recognises the "intricate and intimate ways in which historically gendered caring activities are tied to the imperatives of capitalism". Importantly, the tasks of social reproduction, while essential for the proper functioning of a capitalist society, are both under-recognised (if at all) as work and devalued as 'women's work'. This makes sense within the capitalist logic of the valuing – and, hence, renumeration – of labour that is profit producing.

The politics of care

The undervaluing of caring work sits alongside its association with femininity and essentialist assumptions about women's innate qualities, thus it is fundamentally intertwined with the politics of gender and intersectional power relations. Caring work is, by its very nature, relational, affective and spatially immediate; it is also constructed as something that women do *because they are women* and, hence, carries substantial ideological baggage concerning the 'proper' organisation of society, etc. Women working in caring occupations, then, are, not only, doing what comes naturally but also are fulfilling a role that is crucial to the prevailing social order. Following this logic, because "caring matters so much" (Tronto, 2013, p. 8) to women, as both a natural affinity and a moral responsibility, it need not be well-paid; the work of care/ing, is (or should be) its own reward.

Allard and Whitfield's (2024) discussion of the interconnection between work ethics, the ethics of care, and the emotion of guilt is especially useful here. Emphasising the resonance of "affective and moral capacities" in care work, they show how a gendered "care ethic" shapes workers' sense of personal and moral responsibility, expressed through close connections with care recipients and grounded in "attention, commitment, and respect" (Allard & Whitfield, 2024, p. 674). In this context, the experience of guilt relates to the inability or failure to provide (enough) care – which, given the overloaded state of the sector, is almost an inevitability. What Allard and Whitfield describe as the personalisation of moral responsibility, thus, relies on the gendering of care, collapsing the distinction between a 'good' care worker and a 'good' woman. This reconfiguration of 'care ethic' to 'work ethic' (Allard & Whitfield, 2024, p. 666), while not necessarily a job requirement, is nonetheless useful to the organisations that employ care workers.

Who does the work?

While extensive information is available for some states, most notably Victoria, Putt, Holder and O'Leary (2017, p. 22) point to the lack of national data regarding the specialist FDV victim services workforce. That women make up the majority of the workforce is uncontested, however, as is the proportionally high numbers of casual and part-time workers (Putt, Holder & O'Leary, 2017, p. 31). Despite data gaps at the national level, Putt, Holder and O'Leary (2017) highlight the findings of the Victorian Royal Commission on Family Violence as likely indicative of national FDV workforce trends: "ageing, largely tertiary-educated, and about one in four are planning to leave the sector in the next 2 years. More than half are employed part-time, and they undertake significant amounts of unpaid overtime" (Putt, Holder & O'Leary, 2017, p. 22).

Other, more recent, data from Victoria may also be suggestive of the national picture. For example, the Victorian government's second census of the specialist family violence response workforce, the majority in victim-survivor services, highlighted a workforce that is 87% female, 12% male, and 5% Aboriginal and Torres Strait Islander (Family Safety Victoria, 2023). Significantly, most respondents were fairly new to the role, with 67% reporting less than 5 years' experience. Safe and Equal's 2023 survey of FDV service organisations confirmed these findings, with 29% of services reporting that most of their FV case management staff were 'entry-level', in their first two years of specialist family violence practice. Services reporting a majority of entry-level workers also reported average caseloads that were high to very high (Safe and Equal, 2023, p. 16). High staff vacancies were also reported across services and location (p. 7).

What is the work?

In their national survey of women's specialist services across Australia, Putt, Holder and O'Leary (2017) asked FDV victim services organisations for detailed information about the work they do. While this varied across services, the provision of information and referral was, by far, the most common activity reported (95% of respondents), followed by community education (70%), outreach services (70%), court support (70%), counselling (70%), and crisis accommodation (53%). Services were also asked to nominate what they considered to be the "three main characteristics of a women's specialist FDV service". Falling into six broad categories, the identified characteristics included "service focus, understanding or knowledge of FDV, types of services, practice qualities, staff qualities and collaboration" (p. 26). Service focus, in relation to the centrality of women and children's safety, was, however, the "most important defining characteristic", while crisis response or accommodation and support were most likely to be named as key characteristics with respect to service type (Putt, Holder & O'Leary, 2017, p. 26).

Confirming these survey findings, the FDV victim services participants in our research emphasised the immediate and often urgent nature of their work, saying, for example, that:

> ***It's very hard to switch off and clients will often ring and be wanting a crisis response, an urgent response right then and there. [Marion]***

In this respect, workers described their sense of absorbing the pressure and urgency experienced by victims/clients, in order to respond to their immediate needs. Sasha explains:

> ***Like, I mean, these women are absolutely flat-chat trying to protect their safety 24/7. Having another process or thing to do is probably, you know, could be too much. [So] we try and take that off their hands. I'm really conscious of, yeah, just not overloading clients – and we've been talking about that a lot recently. About safety planning in person with them, we can throw so much information at them, but we're now looking to kind of change our process and to do like a printout of what we've discussed and give to them. Something they can look at later and reflect on, just yeah, anyway we can, to minimise that kind of added stress. [Sasha]***

The tension between clients' immediate risk and safety needs and their recovery and well-being, post-crisis, was also a strong theme throughout participant accounts. Reflecting the dominant policy focus on women leaving FDV relationships and, in-turn, the structure and funding of victim services (including the focus on accommodation, as discussed later in this chapter), this was a source of significant frustration for participants, as exemplified here by Leonie:

> ***[...] obviously women who are fleeing domestic violence need to be supported in that. But I think the more that gets awareness, I don't think a lot of the funding has been put into [other areas]. Yeah, because obviously it's focused on what can we do right now, when you're in emergency, but not really thinking about the longer-term effects. We know the cost of domestic violence is huge for long term effects, but I think maybe that's not been a focus because it's not immediate [Leonie]***

Systems and bureaucracy

FDV services, across the board, are subject to changing funding models and competition for government contracts as well as tendering for short term funding to provide defined services. As is also the case in other human services, FDV work increasingly involves a matrix of administrative minutiae and contract management alongside an impenetrable regulatory framework (see Carey, 2008). Respondents to Putt, Holder and O'Leary's (2017, p. 20) survey, for instance, nominated "meeting or managing demand" and "limited resources and funding uncertainty" as their most significant areas of challenge. Participants told us that bureaucracy significantly impacted on the nature of their work, substantially adding to the challenges of addressing clients' complex needs. Of particular significance was the interrelatedness of broader systems and, seemingly unrelated, trends and events. For example, the shortage of construction materials, post-Covid, had implications for housing repairs and modifications, thus impacting on the viability of Safe at Home programs and, in turn, increasing the demand on crisis and other accommodation.

The pressures associated with the increasingly bureaucratic nature of the work were consistently raised by the participants in this study. These, not only, made their day-to-day work more difficult but also contributed to a sense of disconnect from, what they saw as, the 'real' purpose of their work - standing alongside women experiencing FDV. This reflects the neoliberalisation of care which, as discussed by Hunter (2021, p. 345), encompasses the "marketized institutional contexts" in which "human fear, shame and anxiety are capitalised on as a means to reinforce the sorts of social distancing between welfare providers and users" that enable "increased efficiency, effectiveness and economy". This means that the disconnect that workers talk about is less an unintended consequence – or something that more funding will solve – than it is a constancy that is 'built in' to the system.

Funding models and systems, including accountability requirements, profoundly impact on the nature and experience of the work.

Participants' sense that they had to be the 'catchall for everything' to compensate for systems limitations, the lack of accessibility and/or appropriateness of services, restrictions on eligibility, and so on (see also **Balancing acts**), was also consistent across sites – and a source of considerable frustration and stress, as captured below:

> ***I actually want to speak to the funding body and I want to know what [they know] about DV. And if none, how do they make the decisions about what DV work should look like? Because if you're not doing the work and you're not understanding the work, how do you consciously decide what money should be spent? The increase of admin, which has happened over the last four or five years, to the engagement with the clients, it's kind of like 60% admin, 40% engagement. [...]. There is this real disconnect about what actually happens in a DV service and the patriarchy making decisions about that. Because what percentage of men are making these decisions? What percentage of women who've experienced domestic violence are making these decisions? It's clear, the work that we do, there's a real disconnect. [Sally]***

> ***The demand just always outweighs the capacity. […] We get like 35 referrals a month and we can only allocate 15. And so that's every month we accrue another 15. [Mindy]***

> ***Some of the not so good I think is the amount of work that we have to do and the amount of referrals that come through and just the staffing. I think there's just constantly understaffed for whatever reason here in terms of funding and those kinds of things. [..] we do feel like we're constantly on the back trying to get all of these women called. [..] We're just constantly feeling like we're not catching up with how many referrals come through. [Leonie]***

> ***And I'm going to say that we'd also need the workforce to meet demand as well because that is quite often here on the ground and I'm not going to ignore that, that people are so busy and they're exhausted and they're overwhelmed. [Indi]***

Participants also noted the impacts of broader policy and systems change on collaboration. Highlighting the enabling effects of interagency relationships, for example, participants contrasted, what they saw as, the currently siloed and disconnected context with their previous experiences of organisations working together effectively; when "we knew who was there [and] they knew us" [Laura]. This is consistent with Putt, Holder and O'Leary's (2017) finding that collaboration, or working with other agencies and services, was rated as the least important characteristic of a FDV victim service (p. 26), suggesting that the deterioration of interagency connections and relationships reflects a broader trend nationally.

The politics of paperwork

Administrative requirements – including paperwork, data entry, having to work across data systems, etc – were uniformly highlighted, across sites, as both time-consuming and frustrating elements of FDV work. While, mostly, recognised as a necessary element for ensuring accountability, participants were nonetheless concerned about the impacts for direct practice and service delivery. As Vanessa observes, "over the years, there's less time per client, they're not getting access to their worker as much as they need it and as much as workers would want to give it". Importantly, as Maddie, another participant, points out, while the push to be "accountable and structured in the ways that we approach things" has been central to the professionalisation of the DFV workforce, this has come at the cost of "some of that grassroots stuff". The demanding nature of DFV work, and its impacts on workers, as articulated by a different participant, was also critical here:

> ***I think it also – I mean I'm not speaking just for me. I don't know if I've got the energy to take that one on. I think we fight it every day in a small level. I mean we do that work every day on a micro level. But if I'm thinking about do I attend rallies? Do I write letters to MPs? Do I do that macro work? No, because I … Because I'm tired. [Mia]***

Making sense of the administrative burden in much human services work, Baines (2022, p. 2988) talks about how workers are increasingly "responsibilised for the delivery of services and the documentation that ensures continued funding for their workplaces". Thus, as organisations are pressured to "tightly quantif[y]" their services, risk and responsibility is transferred from the government (as funders) to managers and supervisors and "down to front line workers" (Baines, 2022, pp. 2987-88; see also Rogowski, 2020).

Professionalisation

While professionalisation has been broadly embraced in the advancement of occupational identity and status, including in social work, the fine line that exists between professionalisation and deprofessionalisation has also been recognised. Ernst and Tatli (2022) observe that knowledge – and claims to expertise in particular – are a "key determinant" (p. 192) of professionalisation. Professionalisation, it is argued, is closely tied with the "scientific capital of evidence-based knowledge" (Ernst & Tatli, 2022, p. 198) and, as such, the pursuit of "efficiencies and measurable outcomes" embedded in "positivistic, modern empiricism, and neoliberal ideologies" (Lee & Johnstone, 2024, p. 1384). It is in this sense that the emphasis on evidence, processes, procedures and outcomes represents the (de)politicisation of, both, social problems and the work that goes into responding to these. Thus, the quantification of work can render invisible its more complex dimensions while reducing it to distinct, technical 'tasks' (including actuarial assessment tools, electronic record-keeping, data entry, etc).

The "recognition and accreditation" (Payne, 2009, p. 353) of caring skills have been widely advocated as a response to the devaluing of gendered care/ing work. As Payne (2009) points out, though, this has opened the door to debates centring on "whether such attributes as patience, tolerance and cheerfulness are really skills at all or are best viewed as personality traits or dispositions" (Payne, 2009, p. 357). While positioning care/ing work as a reflection of one's "ethical and moral self […], the kind of person [you] are" (Payne, 2009, p. 357), is clearly problematic, so too is redefining inherently relational and affective work as merely a set of tasks. Likewise, whereas professionalism in FDV workforce strategies commonly takes the form of an emphasis on skills and competency standards, the language of competencies has also been widely critiqued as a "governmental tool for the regulatory control of professionals" (Rogowski, 2020, p. 104). These are complex issues; it remains the case that, as Meagher (2002, p. 15) observed almost 25 years ago, the "production-based frameworks" that characterise human service delivery have "limited capacity to grasp adequately the core activities and dispositions of social service work at the level of direct practices".

Going above and beyond

The volume and diversity of daily demands was a theme that was common across sites and programs. Participants talked about the variety and 'always on' nature of the work, such that:

> ***You can be packing food one day, packing up a house the next day, doing an intervention order, consoling someone that's just been assaulted, writing critical incident reports – everyday is different. And you need to be prepared to drop whatever you've planned and roll with what's happening. [Esther]***

That these demands manifested differently across program areas was also evident, with participants – many of whom had worked in different roles across more than one area – highlighting the variations in pace and intensity associated with, for example, emergency accommodation ("a lot more crisis stuff"), and "therapeutic, helping them feel safe, work", as compared to transitional and supported accommodation ("more case management, clunky housing system sort of stuff" and "a lot of mental health work").

Services are operating in a reactive environment, marked by crises and demand for rapid responses to victims' immediate or urgent needs. This is at the expense of more proactive or change-oriented actions such as therapeutic intervention as well as broader activism and advocacy work.

The expectations associated with on-call work emerged – almost uniformly – as an especially stressful dimension of the job, with particular implications for workers' support needs including debriefing and strategies for self-care. Issues of concern included the unpredictable nature of on-call work and its far-reaching impacts on people's personal lives (particularly those who are parents), and the pressures of working 'alone' and outside of business hours. For example, one participant referred to the specific demands of after-hours and on-call work, observing that "as soon as you take it home, as soon as it's after hours, the pressure is very different, the levels of anxiety are very different" [Gina]. Another participant explained that, when she is on-call, she avoids going out:

> ***I know like, with weekends and stuff, I'm like, I don't want to go out, because if I'm out and then I get an intake [...] you feel like you have to be able to respond straightaway. [...] For me, personally, I'm like, well what if it's something really risky, what if I miss it? It's just, yeah, that feeling of carrying a lot of risk. [Sadie]***

The expectation that on-call duties be managed in addition to the standard workload also seemed to contribute to the feeling of overwork – and, as work spilled over into their personal / home life, over-load. In addition, shiftwork, especially at night, came with its own challenges including those associated with solitary work, having to navigate systems (including Google maps), and pressurised decision-making in crisis situations: "problem-solving on your feet".

> ***Staff want to do good work. And I think that's the thing I constantly hear, I – 'there's just too much for me to do'. And I think there is, I think, yes people can work smarter and all of that sort of stuff. I think there also is, is hand on heart stuff, some days are more productive. [and some days] I procrastinate and all that. But if you, if you want to do a bit of a pie chart, no, there's way too much. [...] if you want us to do this work then, then how do we do it well? Because that's what staff want. I constantly hear that; 'I'm not doing my best work' [Helen]***

Complexities

Complexities associated with the multiple and intersecting needs of the client group were a consistent theme in the participant accounts. Participants in case management positions talked about the challenges of being "required to cover all the needs" of clients – including physical and mental health, substance use, homelessness, immigration issues, disability, and pet care – while navigating systems and services that are, themselves, under stress. Dealing with these multiple and often overlapping needs could get in the way of addressing FDV; for example, the FDV work could get "overshadowed" by mental health issues because "it isn't appropriate to address the DV stuff when their mental health is not great" [Jasmin]. Participants also drew attention to the inherent complexities of the work, particularly given the common co-occurrence of DFV and issues including substance use, mental illness, disability, and so on. As explained by one participant, describing a typically 'complex' case:

> ***Mental health said they couldn't help her because she had a drug problem. Drug and alcohol said they couldn't help her because she was too unwell, because she had a mental illness. Homelessness said she wasn't applying for private rental. [...] Then she had physical health issues, so she was in and out of hospital. Plus DV, plus the – her perpetrator was also her drug dealer. [Mia]***

Paradoxically, then, the perception that some clients are 'too complex' to help means that "those most in need of support are least likely to access it" (Murray et al., 2022, p. 10).

> ***[There are] clients you can focus on who really need the DV support [... but] we get these other people that come through who are really not ready to take the journey and there's other forces that are getting them to contact [the service]. [...] When you're supporting a high risk DV client who really needs to flee and is focused on being safe and safe for their children that's the most rewarding work ever. But it's when you're getting these other clients that present with significant complexity, don't really want the DV support, just want a house at the end of it and they're the ones that take up all your time, that's what makes the work hard and not enjoyable. And I'm not saying that there's more deserving DV clients than other, but when there's –there is a difference... [Lexi]***

Hanley and MacPhail (2023) point to two key issues that, while in the context of FDSV services in rural NSW, are highly relevant here. Firstly, "increased funding pressure" has resulted in service organisations becoming increasingly "focused on individuals who meet specific criteria" (e.g. women within a particular age range); and secondly, a "reduced ability to assist FDV clients who have complicated and multiple needs" (Hanley & MacPhail, 2023, p. 2542). This is especially the case for particular client groups; participants across several sites, talked about the dire situation of women with no income – those on dependent spouse visas, for example – who were not eligible for many services despite living with high levels of risk. Here organisations with a strong social commitment to women's safety felt compelled to provide a service but, operating in a neoliberal, corporatised environment, were forced to absorb the expenses.

> ***So, we've got a woman on site with no income at all and she has no exit outcomes because we're paying for her food, we're paying for her electricity, we're paying for her rent. So, until we can get her onto special benefits through Centrelink, and that means applying for a change in her visa status, this is her only exit. This is where she'll remain until we can find another exit for her. [Laura]***

Thus, despite these "narrow organisational mandates", Hanley and MacPhail (2023, p. 2542) observed "a willingness to bend the rules in the interests of assisting women and families" even though this resulted in an "increased workload for which the organisation cannot account". (Hanley & MacPhail, 2023, p. 2542). A key finding of Safe and Equal's (2023, p. 6) survey targeting specialist FDV case management (victim) services, for instance, was the significant time spent by FDV workers on activities that, while "critical to supporting victim survivors", were "not captured in current targets or reporting, and therefore not adequately funded". In this context, the state reliance on 'goodwill', in the absence of a "systemic response" (Murray et al., 2022, p. 11), highlights the 'invisible work' undertaken at the organisational level, as well as that performed by individual care workers. Sage and Esther, for instance, provide an example of an 81-year-old woman who had come through the shelter more than once. On this occasion, the woman had left the crisis accommodation, however:

> ***on the same afternoon [we] got a phone call to say she's been re-assaulted. And so [we] opened it up the same day so that she didn't have to come back through the system – because, being 81 years of age, she just didn't have – English is her second language, she uses her daughter [to translate]. Her perpetrator is not only her husband but then, when he stopped perpetrating and we got him taken away, the son then picked up being a perpetrator. So, you had all these different elements. [Sage]***

Esther goes on:

> ***And all she knew was her house. So, bringing her into a motel and then trying to get her into a shelter was doomed to fail. [But] the system doesn't allow for you to work differently – you have to constantly manipulate the system to be able to provide support to women that actually need it. [..] So much of our work is invisible. [Esther]***

Invisible work

The concept of 'invisible work', as introduced in Part One, refers to practices that are not formally recognised as work – and don't appear in job descriptions – but are nonetheless critical to the everyday functioning of the organisation. Lavee and Kaplan (2022) argue that the performance of invisible work is a central means by which gendered organisations and services are reproduced. Workers might undertake invisible work through the investment of time (e.g., staying with or visiting clients after hours); emotional resources (e.g., providing psychological support); instrumental resources (e.g., assisting clients with bureaucratic tasks such as filling out forms); and material resources (e.g., giving cash or buying food or medicine for clients and their families) (Lavee & Kaplan, 2022, p. 1467) – all of which were discussed by the participants in this study. Esther expressed this so vividly that they are worth quoting at length:

> ***It is really difficult. We don't have an admin. We answer the doors. And remember, five acres, eleven units, toilets, blockages, pruning, every bit of maintenance that needs to happen, staff are dealing with it. [...] [E]verything has a flow-on effect. That's what people don't understand. If we just came in and did case management, beautiful, I can put that in a box. You can tie your ribbon at the end of the day, job done. But it's not. It's the crisis. It's the woman who's just been booted out from motel. It's the – It's actually the cost of caring. I think that if we did stick to our job descriptions and if we did stick to what is expected of us, we would get most of what we had to do done. But we don't do that. We don't do that very well here. [Esther]***

Lavee and Kaplan's focus on the discursive frames used by workers to justify this work is especially relevant – and clearly resonates with our participant observations and conversations. That invisibility is articulated in gendered terms is also critical, not least in the sociocultural negation of work by "making it appear natural rather than attributable to individual effort and skills" (Kaplan, 2022, p. 863). A key finding of Lavee and Kaplan's (2022) study was workers' use of the "discursive frame of individualism", attributing their 'above and beyond' efforts to their "personality, their unique traits, and the values they were raised upon". By framing this as "personal will", individualist discourses, not only, masked structural constraints but also provided workers with an "important sense of autonomy" in this "highly constrained environment" (p. 1469). Like Allard and Whitfield's (2024) 'care ethic', Lavee and Kaplan's identification of a "discourse of devotion to work" is also highly evocative. Thinking about the work "as a calling or vocation deserving single-minded allegiance" and "the right and moral thing to do" (Lavee & Kaplan, 2022, p. 1471), they argue, provides workers with a sense of meaning and purpose –

> ***Why do we commit so much? We just do. [Vivian]***

> ***It's that sort of analogy, you're walking along the river and you see drowning people. And you're like, ooh what's happening here? So, you pluck them out, 'good 'ol me kind of thing', on your way. And then all of a sudden, oh there's more. And so, you're plucking them out and then someone else goes back up to see, well the bridge is broken but they've got no choice but to jump into that water. So, I feel like it's, it's that sort of stuff. [Helen]***

Balancing acts

FDV work cannot be disentangled from its broader socio-political context, highlighting the ways in which violent practices, including FDV, interconnect with "social divisions and inequalities, class positions and other social intersections" (Hearn et al., 2016, p. 523). Embedded globally, nationally and locally, structural inequalities provide the context for 'complexities' that overlap and, despite siloed services and systems, cannot be disentangled (Bullock et al. 2020, p. 853). Alongside the "gradual economisation of the welfare state", as observed by Phillips and Heward-Belle (2023),

> **the nature and capacity of services traditionally driven by women's movement activists (advocate-providers), social justice, or specifically faith-based missions have now become less feminist, less social justice oriented, more corporatised, and, in some cases, completely generic homelessness services (Phillips & Heward-Belle, 2023, pp. 225-226).**

Housing or safety?

The overriding focus on housing outcomes was identified by participants as a key challenge and was raised consistently across all sites and services. Consistent with a policy positioning of accommodation as the solution to FDV, as observed by Putt, Holder and O'Leary (2017, p. 13), while "advocacy and empowerment of women" remains at the heart of service delivery, on a daily basis it is crisis accommodation and support that constitutes the bulk of FDV work. The positioning of FDV as a housing issue, predicated on women leaving the abusive relationship, was seen as fundamentally problematic, with participants highlighting the pressure placed on women and the time demands of the 'red tape' and 'bureaucracy of housing' that eroded the capacity for therapeutic engagement and support. This was seen as having significant implications for the quality of the worker-client relationship as well as job satisfaction. Participants told us that –

> ***we spend more time operating as housing workers and less time doing the DV work. [...] That's not the passionate side of the work. [Vanessa]***

> ***[..] housing and homelessness [is] probably the biggest, one of the biggest, pressure points. And I know staff lose sleep over the fact that. So, there's no houses, there's [no] private rental and I just think that's there's no answers. And there continues to be no answers. From government to respond to – just the lack of resources and the divide, this is growing bigger and bigger. So, and then that's where clients will ring up and they'll be abusive and it's really. [Marion]***

Participants also emphasised the difficulties associated with the 'housing crisis' – the "lack of long-term, affordable housing options" (Safe and Equal, 2023, p. 11) – in Australia. Despite the priority placed on housing outcomes for women experiencing FDV, the lack of available 'exits' from shelter and other forms of temporary accommodation made this impossible to achieve for many (see also Murray et al., 2021). A closely related issue – and what might be seen as a natural consequence of the housing crisis – was the perceived increase in women 'using' FDV as a way to obtain accommodation. This meant that some women, who may or may not have been experiencing FDV, were approaching services seeking access to housing but had no desire or intention to engage with FDV workers. This made it difficult for FDV workers to engage constructively with these women, while also further contributing to the accommodation bottleneck and, thus perpetuating the problem. As one participant put it, "there's no solutions in [this] space, people are basically just running in one spot" [Vanessa].

There is a shift away from the 'specialist' FDV role (victim support, therapeutic counselling and education), towards case management focused on FDV-related accommodation needs.

Closely linked was the perceived disconnect, and continuing tensions, between the housing and FDV sectors, conceptualised by many participants as a 'clash' between housing and women's safety. The tensions – both ethical and practical – associated with the conditions placed by housing authorities on women and children in crisis, were also consistently raised. Participants talked about stress of managing – or, what felt to them like, policing – these requirements, further contributing to the pressure on FDV victims:

> ***You tell them the mutual obligations and advise them that if they don't meet the obligations [..] then they're homeless. [Sabrina]***

> ***[W]hat we often discuss and debrief about is that the housing authorities can often take on roles that feel really similar to perpetrators, in the form of being very controlling. We've had them ask for client's receipts before to say, what are they spending money on? I know that myself, I have spoken to the housing authority and said 'Look, I am really concerned that if you're putting these conditions on a client who's just fled a really financially abusive relationship, that it's actually going to be quite triggering and traumatising for them'. It's really frustrating trying to work with that. [Gina]***

> ***We were getting more feedback from [housing authority] saying you need to do this, [...] and get all of those documents in at certain intervals of time. And we were saying, there's certain clients who can do that, certain clients have the capacity to do that, depending on their situation. But the majority of our clients don't, within the timeframes they've given. [Thalia]***

Tensions associated with working across different systems and organisations – such as having to negotiate conflicting policies and procedures – were also discussed:

> ***[T]here's this real disconnect between [housing authority] and DV. They're focusing on housing here, and money, and how much money's being spent in motel. And we're focusing on risk, and safety, and trauma informed. And it's just constant fighting up against each other constantly [Lorraine]***

> ***There's a real dichotomy between homelessness and domestic and family violence. And I know we always talk about housing first versus safety first [but] I don't think that's where it ends. I think that's, that's the obvious place but where we have – for example – a conversation that we're having with the community housing provider at the moment – guidelines around supported housing tenancies, where clients must engage with us, otherwise we can't provide them with that tenancy. The tenancy provider has those guidelines but don't have the support function attached to it. So, where we're saying, this person's not engaging, and we don't want the lease to continue because they need to find other accommodation – she's not looking for a house, that kind of stuff. They're actively saying, well, our guidelines say that we can't exit [her] into homelessness. So, there's a real tension between the work in the different sectors and that's not – it's not because staff don't want to be on the same page it's because their guidelines are different [Maddie]***

The strong orientation of FDV services towards accommodation and escaping violence, in line with policy and funding arrangements, also fundamentally shapes the scope and parameters of the work. This was especially apparent in work with clients who were not seeking to end their abusive relationship, creating tension for workers and services. Given high demand on services, this also left workers having to make difficult decisions about who should – and shouldn't – receive a service –

> ***Yeah and that's where we go back to them – we will work with you in motel but –and it's okay to love him still, but if you are wanting to re-enter that relationship we are not the service. And if she says no, I want to keep working with you – which is fine – we will keep working and go around that, but if it then becomes a pattern, we are like okay we are not the service for you. But then she might never have contact with him again ... It really is just about, are we the right service or not? [...] it's definitely about her safety [but] onsite here, it's the added safety of everyone else. [...] like I have got a woman at the moment who will go and see him because they share a child together. We get it, she wants him to be part of his life, she still loves him. She is incredibly trauma bonded to him, but she is – [...] she is still saying 'I don't know why I am doing this; I don't want to be in a relationship with him'. [Janine]***

'We're not funded for that ...'

The policy and infrastructure for FDV services in Australia, including competition for contracts, short term, outcome-focused funding, and alignment with housing and homelessness, means that organisations are perpetually drawing boundaries around their work. This was a source of considerable frustration for workers, especially those who could recall how things used to be. Participants talked about services that were previously provided, such as outreach services and therapeutic and educational groups for women, that had disappeared, alongside rising intensity and complexity of demand –

> ***we used to do much, much more outreach work. [..] We don't now, like we're unable to, and I think we found when we do pick [up] those outreach clients [...] they are the ones that actually need the support, they're the ones that really are higher risk, but we're unable to do anything but try and push them – not push them but refer them to other services. But I think if we had more staff and more finances, we could do that, I do think there's a massive gap... We get, you know, we still get lots of calls from women, 'can you help me with ...?'. [...] there is no one else that fills that gap. So, we could refer them to, you know, DV counselling ... or something in women's health or something, but it's that actual, practical, 'I need some support to navigate the world, how do I get a house? how do I get out of here? what do I do?'. [Jocelyn]***

> ***Because we've been told we're not funded for that, and we don't have capacity anymore, because there's just too much work. And I mean we stopped during COVID obviously for obvious reasons. But we used to have a dedicated community engagement manager role here. And she did all the group work, and that kind of stuff. But now we just –we don't have that role. So, we lost that role. And we don't do any groups now. And we know the importance of groups. Everybody knows the importance of the work – but we can't do the group work anymore because we're not funded to do groups. [Lorraine]***

Importantly, a number of the participants expressed their frustration with the restrictions imposed by funding limitations – with what they were not funded to do but did anyway:

> ***It feels like without the education groups, it feels like we're missing a foundation. It's like we're doing everything but that really solid domestic violence education foundation. It's a lot more of a struggle to get that when you're busy putting out fires around housing, mental health. It also means that by running a program you've got a specific worker who does that [...] But now, without it, we're having to do that as well [Thalia]***

> ***But we do have a broader sort of purpose and have very much invested in and kept a, I don't know, kept a focus on addressing issues of gender inequality more broadly and that isn't always an easy thing to continue to invest in because we're never really funded for that. [Vivian]***

> ***Our team is chronically under-resourced, as is everyone in the family violence sector. The way that we are, as a national peak body, so we don't receive national peak body funding but we function as a national peak body in terms of policy work that we do. [Jemma]***

Baines (2022) proposes that 'out of scope' work such as this – requiring the bending of rules, advocating, filling the gaps, and so on – can be understood, in the context of care/ing work, as a form of "gendered resistance", understood as resistance to "larger and local expressions of state and social uncaring and austerity" (p. 2991). Conceptualising this as resistance highlights individual and collective agency in the face of overwork and potential exploitation; asserting the "need to care because society no longer does" (Baines, 2022, p. 2990) thus centres "ethics and values" while also claiming solidarity with like-minded others. Importantly, these "everyday acts of rebellion against uncaring" may be deeply sustaining for FDV workers, enabling them to keep going until "larger social transformation comes about" (Baines et al., 2010, p. 462). In their recent study, Woodlock et al. (2022, p. 4414) observed something similar; that participants actively resisted the "transactional requirements of neoliberal care work" and, in turn, the "individualising and alienating neoliberal order", instead centring "relational care ethics".

Emotional labour

Discussions of care/ing work commonly draw on Hochschild's (1983) concept of emotional labour to consider the ways in which workers manage their own and other people's feelings as part of their job in a transactional exchange. Building on this, Ward, McMurray and Sutcliffe (2020) conceptualise emotional labour as "gendered edgework" that, in the context of violence, entails the "ability to navigate the 'edge'" in managing the emotions of self and others (p. 85). Thus, they argue that applying a gender lens to "embodied performances of emotional labour" illuminates the ways in which "both men and women purposefully control their emotions" in the face of violence (Ward, McMurray & Sutcliffe, 2020, p. 93). This shifts us away from the equation of emotional labour with 'women's work', to, instead, engage with "masculinity *and* femininity in emotional labour repertoires" (Ward, McMurray & Sutcliffe, 2020, p. 86, emphasis added).

Notwithstanding the agentic potential of 'over and above' acts, as discussed in the previous section, these remain mostly invisible and unrecognised. In the current context, thinking about emotional labour brings to mind the complex and nuanced nature of care work as well as the toll it can take on workers. Such work is, of course, the bread and butter of social work and FDV work; importantly, though, it may be that it is less the emotional labour itself than the "lack of discretion or autonomy" (Payne, 2009, p. 350) over its performance that is particularly salient for worker wellbeing. This is exemplified in Jemma and Tamara's account of how the work spills over into their lives:

> ***We all went out for drinks on Thursday last week and were all joking about, it's a real conversation killer when you meet someone and they're like so what do you do, and you're like I work in the family violence sector. I don't talk about my work. I have a few friends who work in the sector, not here, but I don't really talk about my work that much. [...] it's just depressing and I don't want that to be who I am. [Jemma]***

> ***You know, I've still been shut down many a time and stood over and spoken to quite terribly because of my opinion [about FDV]. [Tamara]***

Expertise and specialist knowledge

Participant narratives reflected a discomfort with, what was perceived to be, an erosion of the 'specialist' nature of the work; this was closely linked to the overriding focus on accommodation, discussed above. Most considered that FDV work is specialist work, with a distinct knowledge and skill set, particularly in the areas of risk, safety and trauma:

> ***Well, the level of expertise needed, so like I said, in actual fact, it takes a lot of investment to get a worker to a point that you're like, you've got it right, because the work is hard. This is not just, I'm just giving some food to a client, this is really hard [work] that takes a lot of skill. [Vanessa]***

Some participants talked more broadly about the diminishment of specialist knowledge and status in FDV work, highlighting gaps in tertiary education –

> ***I mean, we actually see a gap in social work now. We don't believe that specialisation on family violence or gendered focus is embedded in curriculum anymore. [...] Because we, that's our passion because we notice it even through student placements. Students aren't getting that political analysis or that family violence specialisation, that's why we're so invested in it, [...] because it is so intrinsic to what we do, those values. [Alice]***

Interestingly, while an understanding and analysis of gender was implicit – or, at least, implied – in most participants' accounts, relatively few explicitly identified as feminist. Clearly evident was a shared commitment to women and children's right to safety, however, this was not necessarily expressed in terms of feminism nor the significance of structural power relations. Largely, the participants who called themselves feminist had been working in the sector, and specifically in FDV victim services, for longer and, with the foreseeable retirement of women leaders, worried that feminist understandings were at risk of being eroded in the FDV sector. Pointing to factors including sociopolitical trends characterised by highly contested gender and backlash politics, they considered that the loss of nuanced understandings of power had significant implications for the future of the sector.

For those participants who described themselves as feminist, having a feminist lens or perspective was tightly bound with the specialist status of the work:

> ***...the feminist background and qualities that we all hold, as workers for [victim support organisation], is really important, in particular [with] ensuring that they're not – that a perpetrator is held accountable. Yes, we're trying to invite them to change, [but] you know, it's at the forefront of our mind, as feminists, to hold them to account for that. And just say, hey, her name is – if you choose not to use her name, we can't continue to have this conversation, you know. [Tamara[2]]***

> ***And so that's why we hold onto the specialisation. We don't want, we want our staff to hold the position around, our philosophical position, around family violence and hold that in their work because that, holding on to that is an empowering, it gives a message of empowerment to victim survivors. [Vivian]***

2. Note that Tamara's role involved working with both victims and perpetrators.

> ***I've always just loved working with women and I am really passionate about equality and women's rights and I sort of really enjoy that crisis feminism space. [...] because obviously here you get to follow people through and see where they end up, with all your hard work, but being able to attach a different meaning, I can just make someone's day a little bit better or give them a little bit of information. [Janine]***

Maintaining a focus on gender was, for some, a constant pressure. Keeping gender central, as emphasised by Sonia and Helen, was hard but necessary work –

> ***We are constantly turning that traditional patriarchal victim blaming narrative on its head and demonstrating why that exists, how it creates risk, and the current climate of reforms that we're in... we need to show our colleagues and our partners how we can do this better. That's where we need to be really strong advocates, and that comes with practice. [Sonia]***

> ***I feel like we need to do it more than ever but that's because the way society sees family violence as a whole. It's that old thing of, you say, "Why doesn't she just leave?". They never ask you why does he hit her – "Why doesn't she just leave"". So even that sort of, that's where we are with society, so we're forever having to fight against that. [Helen]***

Historically workers in the FDV victim services sector (victim services) have had a strong feminist approach, this informing both how they did their work and what constituted the scope of work. Focusing on social justice and social change was thus seen as a legitimate part of the work, running parallel to crisis and counselling services. In line with the increasingly dominant influence of neoliberalism, and in particular the shift towards minimal government, substantial changes to the nature, funding, organisation and delivery of human services have occurred. This has, in turn, driven changes in the conceptualisation, and hence the organisation, of human services work. Competitive contracts and tendering are also likely to play a critical role in muting the political voice of the FDV sector (Ishkanian, 2014). In the victim services context, the work has become progressively more differentiated and narrowly defined; alongside the depoliticisation of FDV and FDV responses, the emphasis on quantifiable tasks and outcomes, worker competencies, and workforce capacity has fundamentally transformed the 'grass roots' – activist – spirit of FDV work.

Most participants talked about the education and training provided (or facilitated) by the organisation as well as experiences of mentorship and support. Some could name their mentors or other people that had influenced them and shaped their thinking and practice. Many also reflected that much of their learning had been 'on-the-job', often from women who had many years of experience in the area. Interestingly, both this 'on-the-job' learning and formal training were largely framed as specialist knowledge in a way that, likely unintentionally, neutralised and distanced it from a specifically feminist perspective. Matilda, for example, talks about both:

> ***Absolutely, so definitely the field practice knowledge [was on the job]. But also attending training. I've done things like engage with the Red Rose Foundation training, or strangulation, and different things like that, different forums, on brain injury and strangulation. I would say definitely on the job. [Matilda]***

There was an overall tendency to focus narrowly on violence as interpersonal (private, domestic) rather than structural and institutional.

This reflects a broader trend across Australia in the depoliticisation of FDV and related shift in how FDV services define and position themselves (Putt, Holder & O'Leary, 2017; Woodlock et al., 2022). Putt, Holder and O'Leary (2017, p. 31), for example, observed that, while many FDV services see themselves as having a feminist-informed philosophy and aims, few actually identify themselves as feminist services. Similarly, only 42% of respondents to Victoria's census of the specialist family violence workforce indicated a commitment to gender equality as their motivation for doing the work (Family Safety Victoria, 2023). Interestingly, however, 70% said they were committed to preventing and/or responding to FDV, suggesting that decontextualised understandings of FDV are increasingly taking hold.

Surviving the work

> ***[W]e see such violence, such specific violence, rape with weapons, you know assaults with baseball bats, and this is, we, people are like, 'oh, does strangulation happen often?'. Every day, every day, and that's not an exaggeration, every day someone will call and they have been strangled. And so, I think there is that part of the conversation and that part of the work that is missing – that currently it's one woman a week dying but it's multiple women daily being raped and strangled. [Alex]***

> ***I respect so much the, the practitioners doing the work, the coal face of the work. Being abused on the phone and all of that sort of stuff, it's really, it's hard work. And I think the messaging around that is really important that we, we value that, we don't expect them to burn out, we don't want them to burn out. [Helen]***

The intensity of FDV work was a clear theme across all sites. Participants reflected on how overwhelming it can be to deal with crisis after crisis, emphasising the importance of manageable caseloads for having a sense of control and achievement in their work. Thus, intensity, in this context, related to both the work demands ('overload', volume, etc) as well as the nature of the work itself, encompassing the emotional content, "frontline trauma", difficult interactions, and so on. Participants talked about the investment in "every clients story, and journey" [Lorraine] that underpins the work of 'caring', and the particular challenges faced in the DFV sector. Mia goes on to describe it as like a "conveyor belt" in that "we literally see the same name come through 5 times" [Mia]. Participants also referred to the "cumulative weight" associated with the "duty of care" [Frankie] they felt they carried – and the perennial question, "have I done enough?". This seemed to be felt in a way that was highly personal, as captured in Maddie's observation that, while not necessarily at a conscious level, "people are scared that they'll say or do the wrong thing [… they] are scared that they will be held personally liable for things".

The immediate and cumulative impacts of working with victims of FDV services has been noted in a range of forums (see, for example, Gilbert, 2020; Slattery & Goodman, 2009). For example, 78% of the respondents to Victoria's *Census of Workforces that Intersect with Family Violence 2019-20* reported experiencing "moderate" work-related stress, while stress levels for a further 33% were "very high – severe" (Family Safety Victoria, 2021, p. 15). Of those workers reporting high stress, 84% attributed this to the high volume and demands of the work and 48% to poor management and/or organisational issues. Only half (50%) of the respondents reported (usually) having sufficient time to complete their tasks. Also in Victoria, Safe & Equal (2022, p. 14) highlight limitations on service provision and duration, necessary for managing the excessive pressure on services, as a significant point of stress for practitioners, forcing them to prioritise brief crisis intervention rather than long-term safety and recovery.

Systemic and structural stressors across the human service sector (funding, cut-backs, lack of services, etc) further intensify the difficulties and demands of the work.

Risk and responsibility

Workers in victim services talked about the weight of responsibility associated with managing risk. Closely aligned with the duty of care, discussed above, this was manifest in the feeling that they – personally – carried the risk in relation to women and children's safety. Tensions were evident in the pressure felt by many participants to be the "safety net"– alongside the niggling worry about whether it is "going to fall back on us if something happens" [Emily]. This worry is implicit in Deborah's observation that:

> ***I guess the, the worst-case scenario of what can happen – and the risk that practitioners sit with – is around what did we do to keep the woman safe? Well, we partnered with her, we respected her decision making, that sort of thing. [But] it doesn't sit, it probably doesn't sit very well in a coroner's court. [Deborah]***

Similarly, Esther talks about how the handling of critical incidents illustrates this overriding sense of responsibility:

> ***[Critical incidents are] framed [around] what have you done? So, most times, when there's a critical incident, we write what's happened and what we've done and then the department comes back and says it's not a critical incident [because] there's been no failure by the service to provide a service. Well, we bloody knew that but it doesn't mean that a critical incident hasn't happened! For us, our life has been turned upside down, and [same] for the woman and the family. There's that real lack of acknowledgement about what effort has gone into that work [...] And at the end of the day, it makes it feel like the buck stops with us – so that responsibility falls [on] us. So, if something happens to a woman, you're constantly going 'should I have done something differently?'; could I have done something more?' Who else goes home at the end of the day thinking, should I have done something else? That shouldn't happen but it does. [Esther]***

At the same time, participants – generally those with more experience in FDV work – talked about the need for balance in the work, recognising the implications of doing 'too much' for "creating dependence for clients". As Maddie explains:

> ***One of the biggest kickers for staff [is] where I will hear, 'I must feel I am doing my best', but supporting them to understand they don't have to do everything, and how to balance good work with current clients and pick up new cases. [So] trying to balance the seriousness of those cases, otherwise the load...you need a good mix of risk. And it is not about finger pointing; bottom line is staff want to provide good support to clients [but] it's about the collective working well too, not just the individual. [Maddie]***

Here we see a senior worker seeking to reassure more junior workers that they need not bear the load alone while, with an eye to the (metaphorical) queue of waiting clients, simultaneously asserting the imperative to keep moving. In another example, a participant reflects on the ways in which their approach to FDV work has developed over time:

> ***When I first started, I felt like that responsibility was –it definitely is – put on us a lot. I mean, I am always aware of, if this woman gets murdered they're going to look into everything I have done. Even if I have done everything perfectly I am still probably going to get criticised. But I think for me personally, at the end of the day, I feel really confident in my work. I feel really comfortable that I have fulfilled my role of giving this woman all of the information and making her aware of all of her options. At the end of the day, if something happens to her that's his responsibility, that's not mine. That if this woman, say for example, if I have given her all of the information in every possible scenario and she makes a choice one day to go to his house and he makes a decision to hurt her, that's not on me, and that's because she is a fully grown woman who is allowed to make her own choices. If she has that the information in that situation to, then, know how to keep herself safe and he has still hurt her, that's on him. He's the only person accountable for that. Knowing that we have done everything that we can, I think, takes that off – we can only do so much. [Janine]***

Especially interesting here is how Janine – correctly – sets out the limits of her responsibility, yet at same time, expresses an inherently individualist logic of personal responsibility. While primarily addressing the perpetrator in this scenario ('that's on him'), references to adulthood ('she is a fully grown woman') and the choices available ('who is allowed to make her own choices') also responsibilise the victim/client. In this sense, Janine's response vividly captures the struggle at the heart of this work – to maintain a structural focus while living with the everyday reality of the messiness of human lives.

We look out for each other: The team

Many participants talked about their own workplace as supportive, highlighting, in particular, the strength of local team relationships. They also valued the importance of being able to contact other professionals, not on site, especially when they felt they needed support with decision making. More experienced staff emphasised the value of broader networks of professional support for newer staff, supplementing on-the-job learning and providing space to de-brief, discuss and critically reflect on practice. Overall, though, the significance of the team environment was unanimous across all the participants. The relationships between team members were critical for surviving the work as expressed by Vanessa,

> ***I do believe that the team is what keeps people slightly okay. [...] If you felt like you were completely by yourself and you just came to work and you just did your work and went home you wouldn't survive this work. The ability to be able to have a laugh, have a debrief, have a – 'I need the afternoon off can you call my client' ... [Vanessa]***

Team relationships represented 'looking after one another', the message that "no you're – this is not on your shoulders. You've got a team around you, you've got a system around you" (Mindy). Perhaps paradoxically, however, the strength of the team culture could also impose extra demands; the sense of obligation associated with covering for other workers who are on leave, sick, etc. Kaplan (2022, p. 862) considers the potential for teamwork in caring occupations to impose another form of invisible labour. Here, Kaplan draws attention to the work associated with "cultivating employee relations, [and] maintaining a positive atmosphere" as well as "supporting, encouraging, and mentoring coworkers" (p. 862). This commitment to "not letting the team down", in this study, had impacts, not only, for individual workloads – in contributing to the "enormous backload of work" [Gabrielle] to be done – but also the prioritisation, and ability to take advantage, of opportunities for self-care, reflection, professional development, and so on.

Not just a job

Scholars of care under capitalism, (see The work of care/ing) have emphasised the ways in which care work muddies the distinction between the personal (or private) and the professional. As work that involves "constantly bearing witness to violations and violence", the implications for women working in FDV work may be especially stark because that violence is being "inflicted either on people that we know, or people like us" (Vidal & Tolmay, 2015, cited in Bandali, 2020, p. 241). As observed by Bandali (2020, p. 246), references to 'passion' and 'commitment' can be "used to perpetuate and justify the personal/professional boundary blur", thus undermining the profound impacts across all aspects of workers' lives –

> ***Sometimes, if I think too deeply about what we actually are doing, which is trying to prevent men from murdering the women who love them, it's like, it makes me not want to get out of bed [...] And so I think anyone who works in this type of sector gets really good at compartmentalising. [Jemma]***

Ironically then, in NGOs and workplaces such as FDV services, the focus on gender equality and social justice ('the personal is political') sits uncomfortably alongside the "working mentality" of "putting the work first" that enables the "perpetual exploitation of women's labour" (Bandali, 2020, p. 245). Moreover, because it is not able to be contained to 'work', care work also impacts on, and exacerbates, the unpaid caring workload carried by many women.

Sustaining the workforce

Participants also reflected on the practices within organisations that they consider are important to building sustainability in the FDV workforce. First, many identified the importance of career pathways – in the potential to progress as a professional, experience different roles, and build new skills and knowledge within the sector. Diverse career pathways could involve anything from working directly with men who use violence or longer-term recovery work with women and their children, through to project work, education / training and leadership or management. Within the context of competitive tendering, though, losing highly trained people to other organisations was a constant worry for some:

> ***I worry about, for our workforce, I think of some of our best workers – you could only do that direct work for so long [they] end up going into, say, project coordinator roles, those things which are fantastic and it's great but you lose all of that really good skill and good quality practice. [Vivian]***

Supervision was also valued by many participants who talked about the importance of opportunities – and 'permission' – to talk about and reflect on gender, power and violence. The significance of reflective practice for enabling practices of self-care and self-awareness – which are central to sustaining the workforce – was also highlighted. Making time and space for supervision within the pressures of day-to-day work was, nonetheless, a challenge –

> ***It was no structures around, no clinical supervision, no meaningful reflective practice. It was just respond, respond, respond. And I think, I don't know, I think there's steps towards changing that but I think we've got a long, long way to go in that. And I don't know how – I don't think it's possible within our current funding structure. [Frankie]***

Some participants argued that sustaining the workforce requires truly valuing – and rewarding – the specialist knowledge it has built over decades. For some, this meant establishing an evidence base showcasing the quality of this knowledge, while, for others, it was important to challenge the politics of neo-liberalism and managerialism by emphasising the structural and sociocultural context for FDV and its impacts on families and societies. Other participants considered that the combination of specialist knowledge and complexity of the work warrants higher pay and access to advanced training. While acknowledging that organisational practices are key enablers of workforce sustainability, they argued that professionalism, qualifications, and market reward should all be prioritised, requiring investment in the workforce without compromising feminist values and principles.

Specialist FDV services for perpetrators

Work with perpetrators has increasingly been prioritised in responses to FDV but the tendency has been to think about this work in isolation from the wider sector, with a strong focus on behaviour change programs. Perpetrator accountability ("People who choose to use violence are held accountable") is named in Australia's National Plan as one of its six "cross-cutting principles", recognising that "violence against women and children will not end without a clear and sustained focus on perpetration" (Commonwealth of Australia, 2022, p. 73). Only two of the Plan's 21 objectives, however, directly address perpetrators; across the four 'domains' of the national framework, enhancing the "accountability of people who choose to use violence and address misidentification of perpetrators" (p. 20) appears in the 'Early intervention' domain, and improving "justice responses to all forms of gender-based violence" (p. 21) in the 'Response' domain. In this context, accountability is linked with legal and criminal justice responses and associated with denunciation, punishment and/or intervention in the form of mandated or non-mandated programs.[3] While the Plan emphasises the importance of diverse perpetrator interventions "delivered across mainstream and specialist services" (p. 74), our focus here is on specialist perpetrator services including individual and group interventions, prevention and training.

Perpetrator services in Australia

There is limited data on perpetrator services in Australia (AIHW, 2021). Moreover, the data that is available is "collected and reported using different definitions and practices", hence it is not comparable across states and territories and "cannot be used to provide an overview of the sector" (AIHW, 2021, p. xi). As observed by Chung et al. (2020, p. 14), "comprehensive and consistent" information about men's behaviour change programs, for example – including demographic data, numbers of perpetrators entering, withdrawing, and completing, etc. – is vital for ensuring an informed approach to policy, planning and investment in this space.

AIHW's summary of the situation in Australia is short and to the point:

> **Perpetrator interventions are fragmented and multi-sectoral. Currently, there is limited visibility of services that provide targeted perpetrator interventions outside police, courts and selected men's behaviour change programs. The system is fragmented, and services are administered by a range of government and non-government agencies. There is limited visibility of specialist family and domestic violence services and this can make it difficult to assess the performance of perpetrator interventions within the context of family and domestic violence service system more broadly. Further, the diversity of service providers operating targeted perpetrator interventions means that data collection and reporting capabilities will vary. There is also limited visibility of how perpetrators move through the intervention system. (AIHW, 2021, p. 41)**

A summary of the 'users of violence' consultation, undertaken by the Department of Social Services (2018) to inform development of the final action plan for the previous National Plan, highlights critical issues that remain relevant. Key themes discussed by the stakeholders in attendance, including service providers and peak bodies, fell into five main areas: 1) the importance of a coordinated, joined up service delivery system; 2) workforce capability; 3) perpetrator accountability; 4) primary prevention; and 5) community-based approaches.

3. Refer to Chung et al. (2020) for a critical exploration of perpetrator accountability systems and the distinction between perpetrator accountability and perpetrator responsibility.

Each theme includes issues that are of direct relevance to, and reflect the findings of, this project. For example, service providers' "lack of knowledge about men's behaviour change programs, safe referrals and perpetrator accountability" (DSS, 2018, p. 6) was identified as a particular challenge impacting on service delivery. Relatedly, the need for clearer understanding regarding perpetrator accountability - and what this means in practice – was emphasised, as well as "what collective responsibility means for generalist services" (p. 7). Ongoing funding for men's behaviour change programs was a strong priority, with reference made to the lack of perpetrator services and "very limited funding in most jurisdictions", which, in turn, "compounds difficulties in recruiting and retaining staff" (p. 6). Integration with services for victim-survivors was also identified as a critical gap, with particular emphasis on the importance of "more nuanced conversations" when women choose to stay in abusive relationships. Particular gaps in services for CALD men were also discussed and the need for a "long-term strategy over 7-10 years for workforce development, training and equipping workers in CALD communities" (DSS, 2018. p. 9).

The challenges of staff recruitment and retention were also identified by Cortis et al. (2018) through their consultation with sector stakeholders for their national survey, noting that:

> **Finding quality staff to work in men's behaviour change programs was described as 'incredibly difficult'. Sudden injections of funding for men's behaviour change and other perpetrator interventions was seen to create sudden demand for organisations to recruit new practitioners, who may not be ready to work and may need substantial training and supervision. (Cortis et al. 2018, p. 101)**

Workforce perspectives canvassed by Cullen et al. (2022) have highlighted shortcomings in perpetrator responses including "insufficient services to meet demand" and an overriding focus on "averting risk [rather than] generating lasting behavioural change" (p. 54). Insights from the sector emphasised the need for perpetrator programs to be "longer and more intensive" (p. 53) and provide supports to perpetrators that are both long-term and trauma-informed (p. 53). Chung et al. (2020, p. 13) also argue that, because perpetrators attending programs are "typically marginalised individuals with intersecting issues" including child protection involvement, poor mental health and alcohol and other drug ab/use, specialist perpetrator services carry a "heavy burden" to "address far more" than FDV behaviours –

> **This is not a reflection of the workforce; the studies for this research involving practitioners and policymakers found highly committed individuals who were often limited by the policy silos that funding is delivered in, with varying responsibilities placed on them for different types of service delivery. Therefore, in order to have a more responsive set of DFV perpetrator interventions, services must have the flexibility to address mental health, alcohol and other drug concerns, and the life crises which often stem from being on a low income, such as the risk of homelessness and a lack of access to regular transport. (Chung et al., 2020, p. 13)**

Men's work?

Acker's (2006) distinction between an 'occupation' and a 'job', as discussed in Part One, is an important starting point for thinking about FDV work, alerting us to the subtle yet powerful ways in which jobs can reflect and embody – as well as generate – gendered division. While ostensibly equivalent fields of practice, what constitutes FDV work – how the work is seen, done, described, experienced and organised – differs substantially across the victim and perpetrator sectors, vividly illustrating its "internally segregated" nature (Acker, 2006, p. 443). Thus, while the context of care/ing work makes sense in our theorisation of FDV victim services, we have found this less useful in our analysis of work with perpetrators – both as this has been presented to us and in our own observations – as discussed later in this chapter.

As “persistent features of labour markets” (Moskos, 2020, p. 528), sex-differentiated patterns of employment are enabled by “essentialist notions of gender appropriate work” and “deeply entrenched in the social organization of work and labour markets” (p. 541). While men can (and do) work in female-dominated occupations such as social work, Moskos (2020, p. 530) argues that masculinity is “challenged when men cross gendered work boundaries” unless the tasks “can be aligned — either by men themselves or by managers and/or clients — with male essentialist traits” (p. 540) including “physical strength, being an authority and/or disciplinary figure, being less at risk (or having more capacity to deal with risks) and presumed knowledge and/or expertise” (p. 538). Christie’s (2006) work on men in social work is now quite old but nonetheless offers insights that remain relevant, especially given the continued underrepresentation of men in ‘helping’ professions. Highlighting the normative association of men workers and work with aggressive or violent clients, Christie observes that the “differentiation between men as violent or protecting” is central to everyday practice, enabling male workers to distance themselves from other men’s violence while also enacting masculinity as “heroic men of action” (Christie, 2006, p. 402).

It is in this sense that work with violence, in this case, with FDV perpetrators, may be seen as ‘men’s work’ – which isn’t to say that only men do this work. It shows how (re)constructing “what the work involves […] in ways that are consistent with gender essentialism” (Moskos, 2020, p. 540) – such as through an emphasis on strength, risk, authority, etc. - enables male workers to be accommodated in female-dominated professions without disrupting the gendered status quo. Hanlon (2024), for example, drawing on research such as Cottingham et al.’s (2015) study of men in nursing, observes that, by “reframing emotional labor in terms of instrumental and technical competence”, men are able to affirm, both, their masculinity and their dominance relative to women (see also Dahlkild-Öhman & Eriksson, 2013). As evident in certain areas of social work, including perpetrator intervention, these reconstructed elements of work become “specialized areas” and “male dominated, while the original occupation remains female dominated” (Moskos, 2020, p. 541).

Overwhelmingly, then, research shows that men “take their gender privilege with them into women’s work” (Moskos, 2020, p. 530), thus reproducing gendered divisions of labour. For Hyvönen (2023, p. 186), while the appeal of care/ing work for men can be understood in the context of perceived threats to the “legitimacy of men’s social dominance”, it also perpetuates and obscures power and inequality. For example, Nentwich and Hsu (2023, p. 316) argue that entering a female-dominated occupation can bring status for men, allowing them to claim a “privileged position”. Further, by “distancing themselves from female colleagues and female-connoted tasks in their jobs” (Nentwich & Hsu, 2023, p. 315), men are able to both secure a “certain masculine identity” and manage any “identity dissonance”. Rather than challenging or ‘undoing’ gendered assumptions and expectations, these may instead be reasserted, even solidified. As Hanlon (2024, p. 1682) puts it, then, “[a]ny simplistic notion that doing caring equates with equality and destabilizes hegemonic masculinity is untenable” (see also Schwiter, Nentwich & Keller, 2021).

An overview of key dimensions of analysis is provided in **Appendix E** (Data mapping: Perpetrator Services).

What is the work?

Perpetrator work encompasses a range of roles including men’s behaviour change – group programs or work with individuals, brief intervention, case management, assessment, and telephone lines (counselling and referral). While only a minority of the respondents to Cortis et al’s (2018) national survey of workers in the FDSV sector worked with perpetrators, the majority (60%) of these worked directly with individuals. Of the remainder, 16.4% worked in direct practice with both individuals and groups, 4% with groups only, and 9.5% in ‘other’ areas including family dispute resolution, assessment and referral to perpetrator programs, parenting interventions, family therapy, capacity building work with staff, and legal advice (Cortis et al., 2018, p, 43). A similar spread of roles was reported across the participants in this project. Interestingly the participants, some of whom had worked in both victim and perpetrator services, talked about FDV work as a continuum, with perpetrator services at one end – focused on trying to stop the violence – and victim services at the other – dealing with the after-effects of violence.

Distinct to perpetrator work was the dominance of telephone work; most contact between workers and clients was via the telephone, with little conducted face-to-face. While this likely reflected, at least to some extent, the post-Covid context, it also highlighted differences in the organisation of services – certainly as compared to victim services. Workers on phone lines, for example, answered calls from anywhere in Australia, relying on directories of, and/or liaison with, local or other accessible services for referral purposes. Many of these workers also worked remotely, either via a space in another organisation or from their home residence. Other services offered appointments, enabling direct contact with a FDV worker over a series of sessions, but all by phone. Some participants had mixed feelings about this:

> ***What I do get is men who will say, 'where is the face-to-face office? I prefer face to face'. They may have trust issues. I had one man who said –you know, his English was quite good – but he said, 'I need to see your facial expression to know that I can trust you, because I can tell when I'm looking in someone's face'. And I said, 'look I totally understand, and unfortunately I can't offer that to you, but I'm hoping by my tone of voice –and you can ask me, what does my face look like right now?' I try and be transparent. So, yep, I do think that face to face [...] would be helpful. [...] I want to see their, what they're doing, I want to see is this person's leg tapping?, are they fairly unregulated? I want to see how they react. I want to see if they're looking or not looking. And especially with culture, people with diverse cultures or backgrounds, to be able to look and see. [Sally]***

A typical day would likely involve 2 – 4 phone appointments, follow-up and other calls, database entry/recording, meeting/s and, sometimes, training. A typical telephone appointment (or session) would go for 30 minutes, with 30 minutes allocated for preparation and 30 minutes for documentation. Comprehensive assessment appointments involved use of a risk assessment tool to determine low, medium or high risk status. Work associated with perpetrator accommodation programs included organising bookings and checking in with clients.

Perhaps the most striking aspect of the perpetrator work, based on what we heard and observed, was its order and relative predictability; that is, on the whole, client contacts were prearranged, conducted by phone, sessions were relatively short and limited in number, and the organisation of the workday allowed for preparation, planning and follow-up. The focus of sessions was relatively broad and mostly determined by the individual worker. Brenda, for example, described telephone contact, via the phone line, as follows

> ***I mean we average at about six sessions. Some of them will drop out after one or two, because they're not really up for it, for one reason or another, and some of them – I've got a couple at the moment, who I'm seeking extensions for, where we might go to eight sessions just because they're engaging well, and they seem to be sort of getting something good out of it. I think in theory we can only go up to a top of 10, but [...] that hasn't happened often – I don't think I've ever made it to 10 sessions. Basically, there will be men either ringing up wanting a referral to a Men's Behaviour Change Program, or to whatever [...] they're not always sure. But [...] you've got a moment of opportunity to try and talk to them about what's happened, and that they could change it, and 'if your –if the [affected family member] was here right now, your children, what would they say?' [...] then, even doing safety planning with them on the phone, sometimes. So, sometimes those calls can be lengthy. Other times they just brush you off, because they don't want to go there. [Brenda]***

On other occasions, callers presented with,

> ***more of a crisis. [..] And personally, for me, that was great, because it's looking at how can you change that narrative, or how can you work with someone to help them recognise that narrative, but also look at their readiness for counselling. [If] their focus is on getting food, clothing, shelter, sometimes it's just about getting that. But there is great opportunity to work with people – and I had some good opportunities working with men who actually came forward a bit more and moved in the change direction. [Sally]***

A typical brief intervention session, as a prearranged appointment, could involve motivational interviewing, recognising body signs, patterns of thinking and 'dangerous thinking', emotional awareness, the anger iceberg, and conflict resolution. Participants described sessions as largely client-led; as expressed by Richard, "my sessions, I feel, need to be tailored by what they want, so it's more beneficial for them". Importantly, the parameters of the work were quite clear in that "if he [the perpetrator] is not willing to engage [we] will close it" (Vivian). In other words, the work for men's workers/services ended when a perpetrator chose to disengage. Relatedly, a perpetrator's resistance or non-compliance generated, not an increase in workload and intensity, but instead, either a cessation of contact altogether or a shift towards less challenging conversations. As Nina explains:

> ***it's their choice if they want to engage or not. We offer support for men who want to make a positive change to their behaviour because they have hurt their loved ones in the past. And now [if] the motivation is that they want to make the positive change, we can help create referral pathways, predominantly with men's behavioural change program or any other supportive program, depending on the narrative. So, we lay out the foundation with them, very subtly, not with, like, you have a police report, you have to do this ... No, we leave the decision to them. And even if the courts have asked them to do a course, it individually comes down to a person being ready to get that help. [...] We do offer them that respect that, look, if you're not ready right now, take your time, think about it, come back to us. We will still be very happy to help you out. [Nina]***

Gendered caring?

Social work and social care work remains a non-traditional area of employment for men. Moreover, in these contexts, men typically work in areas / roles that are associated with 'masculine' traits, such as "disciplining, controlling, intervening, [and] surveillance" (McLean, 2003, p. 64), and/or are considered specialist work. In our earlier discussion of FDV victim services, we drew heavily on research and literature concerning care/ing work; thus, it is worth considering, at the outset, whether men's work with FDV perpetrators can – or should – be seen in the same way. Here, Camilleri and Jones' (2001) discussion of the distinction between "caring for" and "caring about" is valuable:

> **'Caring about' is an intellectual activity. It does not denote intimacy but rather the opposite – abstractness and objectivity. There is no personal involvement and it denotes a sense of professionalism. [...] Caring about, therefore, seems to be embedded with a language that is similar to the descriptions of masculinity. It is a language in which power and control are central themes. (Camilleri & Jones, 2001, p. 28)**

'Caring for', in contrast, invokes relationality, intimacy and connection, with a focus on the doing – the actual tasks – of care. Recognising that organisations – not least human service organisations – are inherently gendered, reproducing broader power relations, caring about people, thus, "becomes a 'male' task [… that] is elevated by its association with rationality and knowledge" (Gillingham, 2006, p. 83) as well as its differentiation from the devalued "female task of caring for" (see also Hanlon, 2024). In enabling the occupational segregation described by Acker (2006), this distinction between caring about and caring for provides a useful frame for thinking through the differences – both subtle and not so subtle – between, both, work with victims and work with perpetrators, and men and women's ways of doing the work.

Men doing men's work

In describing their individual (as compared to group) work with individual perpetrators, male participants focused on:

- **Strategies** – working with clients to develop skills (e.g. communication) and strategies (e.g. anger management), including the "traffic light" model and "strategies to approach, disagreements, arguments, or conflict" [Richard].
- **Homework**, hand-outs, and "growth work".
- **Self-awareness** – including exploration of patterns of thinking and identification of "dangerous thinking" as well as bodily signs of stress.
- **Focusing on the positive**

  [I] get them to, maybe, look at the positives. And if they can't, then I – go through their narrative again – the notes I've made and if I can pick out any positives, I'll tell them what I think the positives are. That kind of puts that positive spin on it and I think that can engage them a bit more [Richard].

- **Considering the 'pros and cons' of using violence**
- **Healthy relationships**

  [G]oing back to the concept of power and control – 'you said you did this, this, this. Now talking about healthy relationships, do you think that's a healthy way to approach a relationship? What can you do differently?' [Richard]

- **Rationality and decision-making**

  You're trying to get to the bottom of why he does, what he does and when he's going to do [it]. [Arthur]

Bearing in mind that these are not necessarily reflective of the totality of their work, what is, perhaps, most striking is the emphasis on the individual (emotions, cognition, reactions, etc) and interpersonal (communication, relationship skills), as compared to the social or structural. Hearn (1998, p. 162) has highlighted how perpetrator interventions vary in the extent to which violence is "seen as separate from or an integral part of the man's/client's masculinity" and, hence, the potential for change. Here, the target for change seems to have been very much focussed on the individual perpetrator – his ability to understand, recognise, manage and control (himself); self-improvement and personal development. The objectivity and rationality, as discussed in the preceding section, also stands out – both in how workers talked about their work and their emphasis on discussion, logic and reason.

Also noteworthy was the ways in which participants talked about their work with perpetrators – across both individual interventions and group programs – using words like exciting, curiosity, investigation, prediction, stimulating, and fun. Some evoked almost a sense of male camaraderie in describing their enjoyment of group programs (MBCPs):

> ***You know groups [are] really fun, it's a bit more, it's men with their peers. That's what I find rewarding. We've got a bunch of men and, you know, it's fun. [Peter]***

Participants also referred to the work as 'mentally stimulating' and seemed to relish the challenging interactions with perpetrators. In describing work with perpetrators as something like a puzzle to be solved, these accounts emphasised stereotypically masculine traits such as reason and rationality, bringing to mind the gendered distinction between 'caring for' and 'caring about' (Camilleri & Jones, 2001), as discussed earlier:

> ***It is, it's like I treat everyone like it, every man is an investigation. And you're trying to get to the bottom of why he does, what he does and when he's going to do. It's pretty stimulating work mentally, like, you get the problem solving and trying to figure out what a man's going to do, why he does it. [...] And it – when you find the answer it's really good or when you predict it, that he's going to do something, and you got it right. You know you feel really good about adding safety. [It's] not so much about being right [although] I like being right! [Arthur]***

> ***I like to go into lots of detail about it [the incident] and ask more questions because I think the more understanding I have of the situation and the relationship, the more behaviours I can pick out and think, oh, we can work on that. [Richard]***

Women doing men's work?

Women and men's accounts of perpetrator work differed in a range of ways. Female participants distinguished between work with perpetrators and other areas of practice. In describing her experience of group work, for instance, Ella says:

> ***I can sit for 2 hours in a group and just nothing else exists other than that group. It's just, I love group work, I love the dynamics, I love bringing women's and children's voices into that space, I like the challenges, I like – it's really interesting to see from when a man first comes through the door session 1 to session 20 and what that conversation and journey's been like for him. [Ella]***

Yasmin, however, talked about her particular preference for perpetrator work and, in this, we catch a glimpse at the caring for/about distinction evident in her own assumptions about 'caring' work:

> ***I feel like men's work, I like, because it suits my personality. I like, you know, caring and compassion but also, I like to have boundaries and I like structure and I like, yeah, curiosity and all those kind of things. That's me. [Yasmin]***

Here Yasmin contrasts boundaries and structure – consistent with the stererotypically masculine 'caring about' – with 'caring and compassion'. Importantly, in attributing her preference for the former approach to her 'personality', she – perhaps unintentionally – reduces the social to the individual. In comparison, Nina gives a more conventional account that resonates with the feminised 'caring for':

> ***[Men] have negativity towards their partners. Some people are very, very, very pessimistic. You only have, only women get that help. I want to change that perception. It doesn't mean that we are going to put you in a cradle and rock your cradle. No, that's hard work. Someday, in an idealistic world, I would want them to realise that before raising your own hand, just have that empathy for your loved one. Don't take them for granted. Somewhere that motivation, it's a work in progress. We can't fix the world, but we can help change one person. It'll change one life. [Nina]***

Interestingly, however, the emphasis on logic and rationality, discussed earlier, was also discernible in her account::

> ***Like, let's just go back into that day, whatever happened. Do you think it could've been handled differently? We start from there. So, they get time to calm down, think about it. They [might] come up with their own answers [...] 'she does this; she pushes my buttons'. [...] We are not here to take her side. We are just trying to explain [...], because 50% could be an instigation from her. What happened there that she got so heightened? [Nina]***

This – the attempt to reason with the perpetrator – was further evident as Nina went on to describe her response to a client's deflection of responsibility ("'she [partner] did this, she did that'"):

> ***I was like okay, say, for example, you were just sitting on the sofa and watching TV and suddenly she starts yelling at you. How does that happen? How did that happen? It sounds a little off that two people are happy watching TV and suddenly it's one person starts shouting. What was your answer there? What did you do? 'She was suggesting something. I was telling her that that is wrong'. I was like do you think if you, for once, maybe you are right, but for once, if you would have let her do what she wanted to do, understand that it was the wrong thing to do, and then direct her to the right path, what did you have to lose? [...] Yeah. I was like, is it always necessary that [it's] your way or the highway? [Nina]***

Participants also spoke about the importance of being able to contribute to gender accountability, particularly in the context of group programs, and felt acutely their responsibility to represent the interests of absent women and children. For example, having previously worked with victims of DFV, Sally recalled, "when I left the women's service, the women said, 'if you're going, can you be our voice?' And so, I take those words with me every day – 'be my voice'". Ella explains:

> ***So, being able to be a woman, and I'm not saying it's easy at times, but being able to be a woman in that space where 13 or 14 men are. Bringing the voices of women and children is really critically important to me because, and even men will say that, 'I've never thought of that, I hadn't considered that'. [So] it's really good to have a women's voice in this space or a woman's perspective. [Ella]***

While male worker, Joel, also talked about the necessity to "always be grounded in women and children's voices", he acknowledged that "not being grounded is, I think easier, especially for a man [...] [and] is why people can't sustain it". Thus, for Joel, effectively engaging with perpetrators "without jeopardizing risk and safety" was (or could be) what made the work challenging, rather than the profoundly personal – and heavy – load to carry, as described by women.

A number of participants talked about a broader perception that perpetrator work is less important than work with victims; Zara for example, described:

> ***[getting] feedback from practitioners feeling like, oh, you know they don't value my work as highly because it's with men. [...] I think that makes it hard for some of that workforce to, kind of, feel valued in the same way. So, I think that's a consideration because it does become – 'oh well, you just do that sort of work, it's not really important', you know. Those kind of flyaway comments actually are really hurtful. [Zara]***

In contrast, while this was also discussed by Joel, he saw it as a devaluing of the programs themselves, due to debates about their effectiveness, rather than a devaluing of the work of men's workers – or of *his* work. The deep personal and emotional impacts of this work for women have been observed elsewhere (see, for example, Seymour, 2009) and, as argued by Renehan (2021), may relate to the struggle to maintain a balance between "challenging men and avoiding coming across as 'raging feminists'" (p. 321) as well as its potential to trigger past traumas.

Why work with perpetrators?

A number of the women had come to the perpetrator field after working in victim services; for some, their experiences there, and/or their overall dissatisfaction with 'the system', directly motivated their decision to work with perpetrators –

> ***I remember having come into [agency] from women's work, and where I was –because I was doing partner contact work in my last role, and quite infuriated with the people who were running the men's program, often for their lack of understanding of some of the dynamics of the work and the ways that the privilege and the expectations play out, and the need for sort of appropriate scepticism, I suppose, on the work that the men were doing. [Brenda]***

Similarly, Matilda talked about, "this really fine line where you're working in the system and trying to encourage women that you're supporting to use the system, but also you have no faith in the system". This led her to conclude that there is too much "money and time and investment with women and victim survivors" and not enough attention "where it should be" – on men who are perpetrating this violence. Similarly, Veronica observed that while work with victims is "incredibly important", it doesn't "do anything about the actual risk", hence her commitment to doing "something about the person who's [doing the] harming". Billie spoke of her "rage" at "the injustice of it all – the fact that this is such a prevalent issue in our society and not enough seems to be happening".

In general then, women's motivations for doing the work were tightly bound with their politics and their acute awareness of the violence of gender as well as, for some, their own experiences of FDV (see Wood, 2017). Indeed, Brenda specifically refers to the "mixture of the political and the personal that really keeps me very engaged". This contrasts with the more diverse motivations described by male participants. Belief in men's capacity to change was seen as critical across the participants; Peter, for example, said, "Yeah, I wouldn't do the work if I didn't think there was a chance the men could change", and Ella stated her belief that "all men should be afforded an opportunity to change". For Peter though, this reflected his broader commitment to activism and advocacy across a range of issues including, but not limited to, gendered violence. Richard talked about how he loved "being a part" of work to address FDV:

> *It's like, if you shoot someone, yes you can bandage up the wound but if you've got – if that person's still got that gun, you can shoot again. It's about taking away that gun. [Richard]*

Tim said he felt "drawn to the work" which he described as "really exciting to be involved with and really dynamic". Thus, while men clearly communicated their commitment to the work, there was little of the embodied and profoundly personal sense of gendered injustice expressed by women. This gendered insight was also evident in, what seemed to be, women's more critical approach to perpetrator work and, in particular, its frequently individualised and psychologised focus, as discussed in the preceding section. Here, Sally provides an example highlighting how this can miss the mark:

Perpetrator workers included women who felt burnt-out and frustrated by their previous work in victims' or child protection services. Perpetrator work was, for them, a way to redress the lack of attention to perpetrators, while countering the over-focus on victims-survivors in a range of contexts.

> *[I've] had a man who [..] said, 'I've done 77 groups of Men's Behaviour Change Program, and my partner is just not up to speed. There needs to be a program for women, because I just can't communicate with her, because she's just not in her smart brain, you know, she's always in her limbic system'. You know, and he really came in and weaponised what he'd learnt, and I wondered how he'd managed to achieve 77 group sessions without being monitored. But [...] I was able to say, 'well if I was your partner, which I'm not, I would really have trouble relating to you, because you're only in your smart brain and you're not connecting on any emotional level or understanding, or connecting, and I'm wondering what that's like for you'. And he ended up in tears, because he said, 'well you're right'. And I said, you're just weaponising what you've learnt, and then using that, and then saying your partner's not connecting to you, but I said, my feedback is, 'I can't connect to you, because you're using all this stuff to undermine me or show me how good you are, and I'm wondering if you actually feel okay with yourself, like what does all this stuff mean for you that you need to have it, and then use it'. [Sally]*

(More) Invisible work

Reflecting the gendered structures that shape our lives, both personally and professionally, we observed deeply gendered differences in the nature and experiences of perpetrator work. While it is absolutely the case that this is an area of work in which many workers feel deeply challenged, it nonetheless incorporates dimensions that are uniquely difficult for women. Ella, for instance, talked about the acute pressure of "being a woman" in a group of 13-14 men, in which "not only is it one man that's firing something left, right, and centre", but 2 or 3 men might be doing this at the same time. Sasha expressed how difficult the work could be, saying that:

> *it really kind of skewed my view of the world [... and] of men in particular. Just really working with men that do that every single day and running those programs is so exhausting and being a female facilitator in a male perpetrator group was just hard. [Sasha]*

Bethany explained that perpetrator work was not something she could do on a long-term basis because,

> ***... as much as I can stand my ground, it was quite challenging with the males, obviously they don't want to hear a female telling them, so to speak. [Bethany]***

For Veronica, broader societal beliefs about gender made the work more difficult and, personally, frustrating:

> ***Because there's nothing stopping them from lying to us, there's nothing stopping them from disengaging [...] I guess, well because of, like, society. Men give up, you know, they give up really easily, about lots of stuff. So, as soon as the external motivators go or child protection or corrections finishes, they just disengage and it's made no long term difference to safety. [Veronica]***

Ella referred specifically to the "gendered nature of the work", describing the,

> ***challenging work with male facilitators, with that unintentional collusion that might go on in the room, or you know they'll say, 'oh I didn't know whether I should step in or shouldn't step in because I don't want to seem like I'm talking over the top of you' and then you get men that do just actually talk over the top of you. [Ella]***

Participants also, however, described positive experiences of working with male coworkers, particularly those who "describe themselves as pro-feminist" (Brenda) and were open to critical feedback regarding their "awareness of male privilege". Likewise, some of the male participants acknowledged the vital role played by female workers; Joel, for example, talked about the "privilege" of women's "mentorship and guidance" which "is just essential to do the work". Above all, this is work that, while critical to FDV perpetrator intervention, doesn't appear in job descriptions and is expected of women, not men, who work in the perpetrator space: this is women's invisible work. Consider, for example, Naomi's account of the work that she does to support perpetrator intervention:

> ***I'll go through, review the cases. So, we'll be looking at what's going on for the men, what have they mentioned in counselling sessions, and then doing some information gathering, so using [relevant technology] [...] to get all the information from child protection, the courts, police, and corrections as well, just to help inform our risk assessments, and then pass on any of that relevant information to the counsellors that might help them in terms of how they'll go around their counselling sessions with the men. [Naomi]***

The work that Naomi describes is pivotal; synthesising multiple sources of information to identify and assess risk lies at the heart of perpetrator work. While the separation of responsibilities that Naomi alludes to here might have made sense for the organisation, it does suggest the reduction of, at least some, areas of work to sets of tasks that can be outsourced, detached from the 'real' work that 'counsellors' do. If so, this renders considerably more manageable the load associated with perpetrator work (or, generically, 'men's work') while also invisiblising key elements, thus shaping what constitutes men's work (and, by default, women's work).

Risk

Across the fieldwork for this study, we have been struck by the ways in which the differences between victim and perpetrator focused work seem to align with a gendered binary. This was evident in the structure and predictability of perpetrator intervention work as compared to the messier and more chaotic nature of victim services, as discussed earlier in this chapter. This was most stark, however, in the management of and responding to risk.

Risk, for those working in victim services, is a constant; it is the everyday, bread and butter of the work. The same was not true for men's workers in perpetrator services though. Instead, 'high risk' matters – that is, concerns for the immediate safety of women and children – were diverted to a designated 'partner contact worker' (PCW) or victim liaison worker, generally located within the same organisation. These workers - invariably women, perhaps reflecting that the majority of victims of FDV are women – were positioned as largely responsible for risk responses and the enactment of safety measures. Thus, shifting responsibility for women's safety to distinct workers, in effect, not only insulates perpetrator workers from the confronting impacts of FDV but also confines PCWs (i.e. women) to the gendered and messy space of negotiating safety.

Richard, for example, described the process for responding to significant risk in his workplace:

> ***So, any, any risks I pick up on during a call that I have either got from the client themself or by checking our [database], I then bring that to my team leader and our [PCW]. Yeah, so, any concerns like, I go straight to [PCW], because again, [PCW] works with the [affected family members]. So, this might be something [the PCW is] already aware of but then if I can add extra information then that informs her risk assessment as well. So, the team is really good at all communicating with each other about any new risks. [...] the risk is shared - it's, it's a very coordinated response towards risk. [Richard]***

Interestingly, despite his assertion that risk was "shared", Richard was nonetheless clear that "when it comes to calling the police, she [the PCW] takes on that responsibility". Naomi, as the PCW in this setting, also talked about how "sharing that risk with the government organisations like Police, Child Protection, takes the risk off us". It is this that makes it possible for FDV perpetrator workers – like Richard – to prioritise relationship building in their work with perpetrator.

It is important too that talk of 'shared risk' was not something we heard from the workers in victim services. Nor did this come through in the accounts of women working with perpetrators; instead, risk and safety was named as an unwavering concern –

Considerable diversity was evident in understandings of perpetrator work and its purpose. For some, the purpose of the work was to represent the perspective of women and children, ensuring that their voices were not lost. Others, however, emphasised the need to recognise and address the impacts and influence of childhood trauma on men's use of violence.

> ***But I'm always looking at safety first. [...] So, I'm trying to find out some background in the initial session, the intake, so I want to hear – I'm looking for the risk indicators, I'm looking for the incident, I'm looking for his resources; so, what does he currently do right now and what are his resources? what's his safety plan for himself and his partner? So, I go there first. [...] Because I'm thinking risk; when you get off the phone, what's that going to mean for the affected family member and the children? [Sally]***

Work with perpetrators of FDV, then, imposes different (gendered) loads for different workers; as Matilda puts it, this constitutes the "extra pressure because you care".

How is the work organised?

The separated nature, and distinct structure, of specialist FDV victim services and specialist FDV perpetrator services, as highlighted here, is not unique to Australia. Hearn (2021, p. 26), for example, has commented on the "different systems, politics and policies" that distinguish perpetrator services across the world. This is reflected in – and reproduced by – separate funding arrangements, funding bodies, and governance structures, and manifests as differences in status, pay and employment conditions. Thus, the association of perpetrator work with better pay and conditions may be largely attributable to differences in the ways that the work is conceptualised and organised, suggesting a gendered demarcation between 'women's work' (victim support, caring-for, femininized, and devalued) and 'men's work' (challenging conversations with perpetrators, 'man-to-man', the ambiguity of accountability). This is not to suggest that either area of work is any more or less challenging, nor that any particular organisation or workplace is better than the other. It is, however, to draw attention to the gendered structure and organisation of FDV work, the ways in which it draws on – is premised on – gendered foundations, thereby perpetuating gendered and other inequalities.

Perpetrator services, like victim services, are also shaped by the neoliberal context, evident in the emphasis on violence as a choice made by individual men, exemplified by Jemma:

> ***[T]he ethos of [organisation] is men's family violence is a choice by men so we need to work with men so they don't make that choice [...] And I think the other part of it is that it's kind of respecting men to be like, we believe that you can change. It's not like you're not just this horrible person who is beyond recovery. We think you can actually move past this, but in order to do that, you're going to have to be able to hold yourself accountable and commit to change. [Jemma]***

This individualised conceptualisation of FDV and behaviour change also distinguished the strategies and self-improvement focus of perpetrator work, as discussed earlier in this chapter. Some participants also referred to the broader systems and structures, including the courts, police, media and societal perceptions, that regularly undermine perpetrator accountability. As Sally explains:

> ***I'm not the lifesaver, we're a community. So, it takes a community to change a community. [...] so [we need to be able to] trust the other services, work together, not in parallels, work together, and then we can be that voice together, and hopefully we're in unison with what we're trying to achieve. [Sally]***

The need for more integrated services was recognised by a number of participants; Kiera, for instance, made the point that:

> ***Hav[ing] women's [victims] workers and men's [perpetrator] workers not even talking to each other – so what's the point of doing it? You need to talk, you need to consult, you need to share the risk. [Kiera]***

Yasmin's frustration in this respect is clearly evident in her observation that:

> ***I feel like, you know this – we've got a ... integrated service model but at times it feels like it's not an integrated service model, it's just that men come to .... I feel like, I want to say, it's like a big show almost. You know what I mean, sometimes I feel disgruntled because like we're not actually working – you know we're not hearing the voice of the woman. We're not working together. [Yasmin]***

Further, Sasha, now in victim services but having previously worked with perpetrators, emphasised the value of FDV workers who have experienced both areas:

> ***I feel privileged in that I've got both kind of lenses. In that, yeah, I've seen kind of their side of it, and, in a way, I understand, kind of, how [perpetrators] think and sometimes, why they do the things they do [...] And that's helpful, I think. Sometimes, in talking with staff, especially newer staff, like, talking about that, you know, that cycle of abuse from his side, and then what she might be saying on her side. And how they kind of interrelate is quite interesting, drawing those parallels as well. [Sasha]***

The clear systemic and institutional division that exists between specialist FDV services for victims and those for perpetrators is a significant finding of this study. What is, perhaps, most significant, however, is that this is likely to be no news to anyone who works in the sector/s. We argue, though, that this should not be taken for granted; that it has important implications for, both, women and children's safety, and broader efforts to address and reduce FDV. Thus, rather than a single, unified FDV workforce, as things stand, two distinct workforces seems closer to the truth; this has critical implications for FDV work and FDV workers.

Specialist work

Whereas work with victims, as observed in this project, was associated with safety planning, crises and form-filling, perpetrator work was commonly spoken about in ways that framed it as specialist work. The DFSV Commission (2024), for example, considers that "working with people who use or have used violence requires highly specialised skills and capabilities". This was reflected in participants' accounts of, what they considered to be, its distinctive aspects –

> ***Even communication and interpersonal skills are so different. You know like general conversation – someone talks to you, you know, those kinds of things we all do. And that might be seen as collusion, like you have such – you have to be so mindful of such small things, yeah, just things like that, [...] it's almost like you have to unlearn everything you've learnt about you know social work, communication skills. [Yasmin]***

Nina focused on 'what it takes' to work in this area, pointing to the limitations of university education as preparation for work with perpetrators. In doing so, Nina draws a sharp distinction between the standard (presumably non-specialised) social work approach of "having empathy towards people who are affected adversely", and specialised work with perpetrators:

> ***It takes a lot of maturity, a lot of understanding, and lot of cognitive expansion to come to a level of working with perpetrators. [...] So, it takes a lot of conditioning of the mind to approach every day a perpetrator with empathy, not telling them 'good job buddy', but telling them you used violence, how can you remove yourself from the use of violence and become a better version of yourself. There is a lot of past trauma [...], past childhood trauma that can drive a person's behaviour. It is instrumental in that, complex trauma. [Nina]***

Interestingly, while Alice also talked about the importance of "family violence specialisation" in university preparation – and social work in particular – their emphasis was on a gendered understanding of FDV:

> ***I mean, we actually see a gap in social work now. We don't believe that specialisation in family violence or gendered focus is embedded in curriculum anymore. [...] Because we notice it even through student placements. Students aren't getting that political analysis or that family violence specialisation, that's why we're so invested in it – more than just sending someone off to do [training] – because it is so intrinsic to what we do, those values [Alice]***

Other participants also stressed the importance of a shared understanding and language for centring gender, and voiced their concerns that this was being eroded in mainstream service provision.

'We do need male workers'

Difficulties in recruiting and retaining male workers to work with perpetrators – or, as Vivian puts it, "find[ing] the right men and keep[ing] them" – was a consistent theme across sites, alongside the cost of training required to meet the minimum standards[4]. The Men's Behaviour Change Minimum Standards, developed by Family Safety Victoria (2018), relate to the design, delivery and staffing of state government funded MBCPs in Victoria. Retention issues were also highlighted by Cullen et al. (2022, p. 22) and attributed to "poor pay, challenging work, limited organisational support and career pathways". Participants referred to stigma as an important contributing factor; according to Alice, "it can be challenging for the men because there's lots of perceptions and stereotypes of men who do this work". Vivian further explained that:

> ***[I]n terms of our Men's Behaviour Change program we have two facilitators, one male, one female. And we do draw on sessional or casual staff to do some of that work and we certainly have some of our men's workers who are employed full time as men's workers who are female. But we do need male workers, partly because of the MBC model, and it's not easy, it's not necessarily easy to find the right ones. At the moment we have an opportunity to put in a funding submission for [program] that's just opened last week. And my biggest concern about submitting for funding for that is workforce issues. I'm not sure that that's going to stop us [...] [But] we need a men's workforce strategy, that's what we need. [Vivian]***

4. The Men's Behaviour Change Minimum Standards, developed by Family Safety Victoria (2018), relate to the design, delivery and staffing of state government funded MBCPs in Victoria.

The assumption that it is male workers that are needed in this context has been observed elsewhere and reflects the belief that the needs of male service users (boys or men) are best met by a "positive [male] role model" who can provide "balance and improve the quality of life" (McLean, 2003, p. 50). In this perspective, "increased clients' contact with men" is inherently beneficial, providing both a "role model and/or exposure to being a man" (Moskos, 2020, p. 538). This relates closely to the valorisation of particular (stereotypically masculine) traits, such that "demand for these traits in turn increase[s] the demand for male workers" (p. 538). A "preference for male workers over similarly-qualified female workers", according to Jones et al. (2019, p. 69), is often justified "in terms of heterosexual complementarity, or achieving a balance of male and female energy, traits, or skill sets". Reflecting deeply essentialist assumptions about sex and gender, positioning men as a "scarce and valuable resource" in this context thus further renders invisible "women's value" (Fahlgren, 2013, p. 22).

Notably, Hyvönen (2023, p. 179) has observed that men working in social work/care services increasingly "describe the care they can and should provide as assertive, controlling and problem-solving", in contrast to "feminine modes of care" that are considered to be "soft" (p. 180). Fahlgren (2013) also points to the "normalisation processes" rooted in work practices that simultaneously enable the "transcendence of stereotypical ideas of a gendered division of labor (everyone can do everything; gender does not matter)", while reinforcing ideas about gender complementarity – that "men and women are good at different things and have different value" (p. 29). We do not suggest that men and women in this sector – and those who work with perpetrators in particular – are anything other than fully committed to gender equality. We do, however, emphasise the potential for underestimating the embeddedness of gendered discourses; that "[f]ocusing only on what men say, how they judge themselves, and what their actions look like may overlook men's [and women's] material, embodied and affective attachments to less progressive trends" (Hyvönen, 2023, p. 180).

The need for a skilled workforce

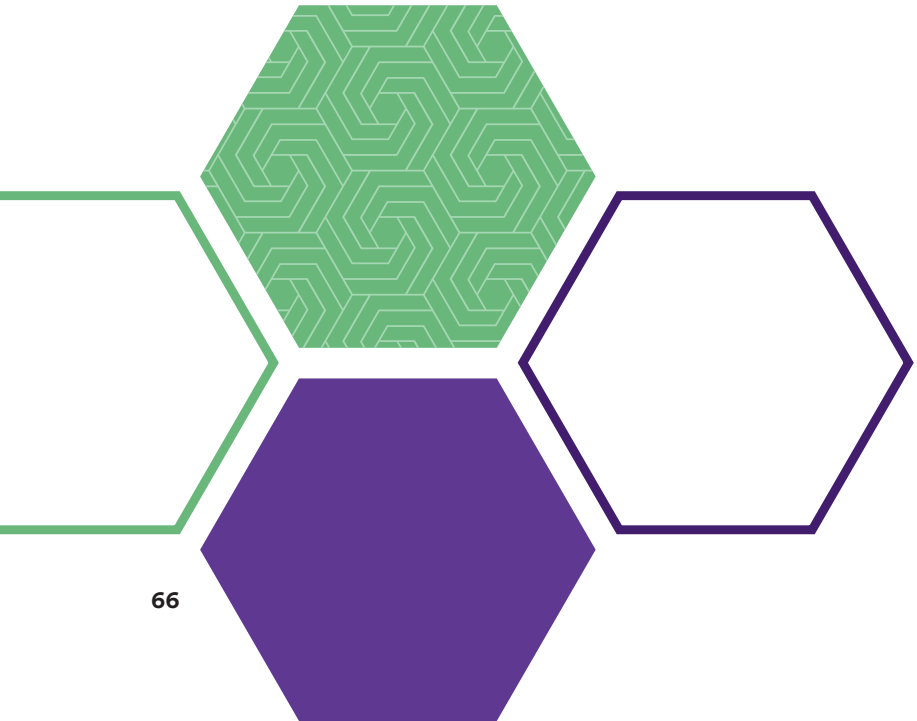
The difficulties associated with ensuring an appropriately skilled perpetrator workforce sit alongside these recruitment and retention challenges. Skye considered that this reflects, at least to some extent, the demands of the workplace:

> ***often the organisation does not support it. So, they will –they will expect people to do the training, but not give the time to do the training. [...] The message here is it's not important. It's a tick and flick, just go to it. [...] And, so, the only way to [fix this] would be, in the long run, to build a workforce [so] this becomes – not the sector that can't get enough workers – but [the one that] has got really good workers, that the sector can actually hand pick who they want working. But how we get to that, I have no idea. [Skye]***

Matilda referred specifically to the extent of "assumed knowledge within the sector" which can mask variabilities in worker competence:

> ***[There is] a level of knowledge [that's] just not there. And so, we have a lot of people who are feeling very vulnerable in their practice, but aren't being supported by their organisation to develop their practice. And so, when we've been running some of the trainings, people are like, 'oh my goodness this is amazing'. And we've reflected on that going, wow we didn't think that was incredibly amazing. Like for us this is what we – we talk about. We talk about respectful engagement. We talk about what collusion could be. How do you even have a conversation? How do you set that up? And we were thinking – well I know I was thinking, for me that just seems really fundamental in terms of working with men who use violence. And I'm often sort of quite surprised at some of the feedback we get from participants in the – in the class, or in the sessions saying, 'this has just made so much sense to me. I had no idea about that. I didn't know how to frame that before. And I'm going to take so much from this'. And I think that's really humbling for us, because we know that we're having a – an impact on practitioners. But I think it also highlights the vulnerabilities of the sector when we have huge expectations, or assumptions around the knowledges that they already hold – because, realistically, a lot of people don't hold it. And we know this sector rolls over very, very quickly. [Matilda]***

By way of context, in their 2018 survey of the FDV workforce, Cortis et al. asked perpetrator workers how "well-equipped" they felt for their practice with perpetrators (Cortis et al., 2018, p. 43). While 71% said that they felt well equipped to assess risk to women and children, and 68.8% to address complex issues and needs, only 42.5% reported that they felt well equipped to work with perpetrators who were resistant to intervention. In addition, only 51% felt well equipped to support behaviour change and 50.8% to evaluate the progress of perpetrator-participants. Moreover, only 16.7% of managers felt that their workers were well equipped (22.5% somewhat equipped) for work with perpetrators (Cortis et al., 2018, p. 79); thus, workers were more likely than managers/service leaders to rate themselves as well equipped for the work (p. 82).



Feminist practice/s

The influence of feminism was a strong theme across sites and was most strongly articulated at the organisational level and by senior leaders. The organisational culture was vital in signalling the centrality of gendered power relations to FDV, with the importance of a gendered lens communicated to workers as overarching values. As noted by some participants, however, it was often hard to 'hold that view' in mainstream settings:

> ***I think we spend quite a lot of time at all levels reminding partner organisations why we're doing that work with men and that we need to work really hard at keeping women and children's safety at the centre of that work with men. Yes, we want to address trauma issues with men, change etc. but the core reason we're doing it is because it keeps them visible. But we have to work really hard to continue to guide others that we're working with to hold that view. [Vivian]***

As a feminist-aligned man, Joel demonstrated an awareness of the authority that men's voices carry in this context:

> ***that's certainly something I come up against and I know, for me, as one of a few male workers at [organisation], how often services say "I'll talk to [Joel]" because they're more comfortable hearing a feminist narrative from a man than they are from ... And so, I'll come in and say the same thing that a women and children's worker has been saying for six months [...] And it's "[Joel], what an extraordinary thing to say!". [Joel]***

Tim also referred to reflecting on his "accountability – of what am I doing, as a white heterosexual male who is not experiencing gender inequality and ... haven't experienced it".

Other participants talked more directly about women and children's safety than they did feminism – or even gender. Here there was a sense in which focusing on safety was more palatable – and less confronting – than gender or feminism; being "grounded in women and children's voices", as Joel acknowledged, "definitely makes the work way harder".

The relative absence of 'race' and indigeneity in these discussions was also noteworthy. This mirrors the findings of other research concerning FDV work in colonised countries, highlighting the tendency for white workers to either avoid 'race' or discuss this in a way that distances "themselves from their own privilege" – by, for example, reflecting on the "discriminatory or problematic behavior" of other (white) workers (Rodney et al., 2024, p. 23). Rodney et al. (2024, p. 22), thus, argue that "there can be no real cohesion" within the FDV sector, "without addressing the experiences of racialized women and understanding the colonial project that informs the performance of whiteness". We consider these issues, alongside the experiences of Aboriginal and Torres Strait Islander workers, in the final section of this report.

Specialist Aboriginal FDV Services

Despite the critical role of Aboriginal FDV victims services in the community, relatively little is known about their work, structure and organisation. While available FDV workforce data provides some indication of numbers employed across the sector, this tells us little about services for Aboriginal and Torres Strait Islander women. According to Putt, Holder and O'Leary (2017, p. 9), the research base is 'thin' and lacks detail regarding what Aboriginal FDV services "do and practice". In highlighting "how much foundational information is unknown", they point out that:

> **There is no national map and analysis of women's specialist services and the work that they do, no analysis of need (from the perspective of Aboriginal and non-Aboriginal women seeking help for FDV), and no national map and analysis of specialist Aboriginal-led services responding to Aboriginal women seeking help as victim/survivors of FDV. There is hardly any information about the workforce for specialist domestic and family violence services: Their responses and practices with and for Aboriginal women specialist services responding to victim/survivors (Aboriginal and non-Aboriginal), who they are, what skills they use and need, what quality assurance regimes are required, and what professional competencies and development is needed. (Putt, Holder & O'Leary, 2017, p. 97-98).**

Workforce data: Aboriginal and Torres Strait Islander employees in FDV services

4.9% (or 1 in 20) of the respondents (n = 1,157) to Cortis et al.'s (2018, p. 31) National Survey identified as Aboriginal and Torres Strait Islander, with relatively higher proportions working for services in remote areas (p. 73). Putt, Holder and O'Leary's (2017, p. 22) own national survey, while restricted to specialist services for victims, found that 58% of services employed Aboriginal people or had dedicated positions. Services in country areas were more likely to have Aboriginal staff or positions (Cortis et al., 2018). More recently, 5% of respondents to a FDV workforce census undertaken by Family Safety Victoria (2023), identified as Aboriginal and Torres Strait Islander.

Services by Aboriginal people, for Aboriginal people

Talking about the Aboriginal and Torres Strait Islander workforce represents a critical shift in focus away from mainstream organisations as employers of Aboriginal peoples. Building capacity in the Aboriginal and Torres Strait Islander workforce is named as a priority, under Reform Area 3 (Reform institutions and systems), in the national Aboriginal and Torres Strait Islander Action Plan to End Violence against Women and Children 2023-2025. Importantly, increasing the "proportion of services delivered by Aboriginal and Torres Strait Islander organisations" is acknowledged as a key goal and the foundation for reform, requiring both that the community-controlled sector be expanded and government organisations transformed (Commonwealth of Australia, 2023, p. 44). This is especially critical given the recognition that targeted FDV services, such as Aboriginal Community Controlled Organisations, are "under more pressure than other specialist family violence services", including higher average caseloads and higher percentages of direct referrals (Safe & Equal, 2023, p. 7).

Victoria is the only Australian state or territory to explicitly address the Aboriginal and Torres Strait Islander workforce in its FDV workforce strategy. In addition to improving the capacity of the mainstream service sector to work with Aboriginal service-users, building the Aboriginal family violence workforce is a specific focus, with proposed actions including increasing the number of Aboriginal workers through development of "new pathways", "cultural supports and specialised training", grants and traineeships, etc. (Family Safety Victoria, 2019, p. 477). In contrast, the Northern Territory DFSV Workforce and Sector Development Plan makes no specific mention of the Aboriginal and Torres Strait Islander FDV workforce or services, with the exception of a reference to increasing Aboriginal employment in the context of (generic) workforce recruitment and retention strategies (Northern Territory Government, n.d., p. 9).

The (colonial) politics of care

A recent report by Klein et al. (2023) on 'caring about care' discusses the politics of care in incredible depth, drawing attention to the important nuance and complexity of issues. Without wishing to undermine the overall depth and scope of this report, we are struck by their insights concerning the significance of 'care' for Aboriginal and Torres Strait Islander peoples; these resonate strongly with our findings in this study.

The gendered and devalued status of caring and care work has been a defining theme across this project. As Klein et al (2023, p. 19) point out, in a colonised country like Australia, the unpaid care labour of Aboriginal and Torres Strait Islander people is, and has been, "at the forefront of struggles and endurance against oppressive settler colonial structures", including "settler-induced trauma, violence, state incarceration, and the removal of children by the state". Research and literature on care, though, is dominated by "western and white feminist accounts of care" (p. 17) and this has shaped mainstream understandings of unpaid care "as a burden that is unrecognised, undervalued, and which women need to seek liberation from" (p. 12). Grounded in the elevation of paid work and subjugation of unpaid work (Klein et al., 2023, p. 121), this fails to capture the "vast and broad" meanings of care for Aboriginal and Torres Strait Islander women –

> **[W]hilst jobs and external accolades are not unimportant, and care loads can be extremely heavy and demanding, Aboriginal and Torres Strait Islander women place great value on family, community, culture, and Country. In this regard, the use of (white) liberal feminist thought to explain Aboriginal and Torres Strait Islander women's care can result in harmful and inaccurate framings, which elevate paid and formal work over unpaid work across many policy settings including (but not limited to) social security policy, economic policy, employment policy, Indigenous policy, gender policy, and education policy. In doing so, these entrenched policy settings systematically marginalise all women, but particularly Indigenous women. (Klein et al., 2023, p. 12)**

Thus, as Hall (2016) points out, while "violent colonial oppression and exploitation" is embedded within the work of social reproduction, so too is resistance; through the "creative labours of resistance, growth, and possibility", Aboriginal and Torres Strait Islander women embody and stand up for "Indigenous, non-capitalist, non-patriarchal forms of caring, living and working" (Hall, 2016, p. 228).

What is the work?

Multiple parallels are evident in the descriptions of the work provided by Aboriginal and Torres Strait Islander participants and non-Aboriginal participants working in mainstream services, with core themes of crisis, care, and healing common across both settings. This is not unexpected given the focus on standardised systems and services, rules of eligibility, and so on, that characterise FDV service provision across the board. Aboriginal and Torres Strait Islander workers' experiences of the work, however, including its challenges, impacts and implications as well as its specific contexts and meaning, represent critical insights for this project.

Crisis work

Crises dominated everyday work in Aboriginal FDV services, demanding that workers pay attention to the immediate needs of women and children including accommodation, clothing, health care, food, etc. These tasks also required workers to navigate mainstream service systems and maintain eyes on the perpetrator while remaining connected to women's emotional, cultural and relational safety.

Aboriginal and Torres Strait Islander participants talked about the challenges of working in a system that is designed to work against them alongside the lack of understanding from broader, mainstream, services. The expectation that Aboriginal FDV workers 'police' their clients was named as a particular challenge.

Managing women and childrens' housing needs was especially pressing and, given, the perennial shortage of crisis accommodation, often required negotiating funding for short-term motel accommodation with the relevant government agency. This meant that accommodation was conditional, with clients required to fulfil certain obligations in exchange for temporary shelter. Requiring that women 'prove' they are actively seeking alternate accommodation (eg via the private rental market), the onus was on women themselves to show that they are 'worthy' of assistance, a classic neoliberal move. Thus FDV workers are centrally positioned as the intermediary between client and government authority, fundamentally shifting the focus of their role from safety to compliance. Harper captures this dilemma in her account -

> ***You need to start having conversations with her around rentals because – so you're trying to do this best practice, crisis, trauma-informed work but we work in a system that means, even though I know that's what she needs, I also know that if I don't have this conversation with her about 'hey, you need to start looking for rentals right now', then she'll get kicked out of that motel and she won't be safe. Ultimately, we have to have those conversations because it links back into her safety and having somewhere to be. So, we advocate and then they fund that... We advocate for a housing needs assessment... We advocate when there is a vacancy in a shelter, or a transitional accommodation, and then [for the] furniture, household needs, schools. It is hard to build rapport with a woman when you are always talking about the next housing, rent, applications, And it becomes, your work just becomes solely about housing outcomes and there's not much space for counselling or therapeutic domestic violence work. [Harper]***

While this is so across FDV victim services and it is not restricted to Aboriginal services, its experience and implications are uniquely shaped – and intensified – for Aboriginal and Torres Strait Islander peoples in a colonised context. Encounters with government agencies – whether police or other agents of authority – are, for example, inherently fraught, inseparable from the legacies of Australia's violent history of colonisation and dispossession. As expressed by Sabrina, this constitutes the everyday reality of having to "operate in a system that doesn't work for us". For Hunter (2021), this can be understood as the "tensions produced through negotiating between the demands of binary system logic and relational practice" (p. 358) within the context of service systems that deny interdependence. It also represents a point of connection – of racism, of discrimination – that joins worker and client; there is no divide between personal and professional, instead the personal is the professional is the political:

> ***I would actually like to reflect on the conversation and how Aboriginal women are often discriminated against. I actually have a physical emotional response rising up in my body, because I understand what it means to be discriminated against. So how do women that don't have a landlord to write a glowing support letter for them, land a property? How do women, Aboriginal women, traditional women, how do they go? There is next to no rental available, there's a housing crisis, yet the colonial system keeps asking them arbitrary, meaningless things, but they have to keep doing it. So, we teach them how to deal with this, that they (the system) don't care if you're going to get a property or not, [but] we care and will advocate for a tenable option for you. [Sabrina]***

Care and community

The centrality of care and community to participants' commitment to and experience of the work was a powerful theme. Care and community in this context were not isolated or abstract notions but tightly bound with accountability and the politics of connection – as expressed so powerfully by Patricia:

> ***But this is what we have always done. It doesn't matter what role we're in, as Aboriginal people, we're a resource to our community. It doesn't matter if I work in a school or if I work at a car yard or if I'm a mechanic or if I'm a DV counsellor or what, you're a resource. So, we have to give back. So, that's our accountability. We do it because we're Aboriginal, that's our superpower! The past two hundred odd years, that have challenged us, that we have to then step into this space and we have to continuously prove our existence, our wealth, our worth. But we know our worth. [Patricia]***

Aboriginal and Torres Strait Islander participants talked about their accountability to community and the impossibility of drawing a line between personal and professional. Political and social activism was also central to the work.

Bringing to mind Hunter's (2021) argument that "struggles to care in practice are often struggles against the dominance of [..] white sovereign affect" (Hunter, 2021, p. 358), Sandra explained that:

> ***We are in a community that's connected in a most beautiful way. And I think about how our work and our place and what it is doing for our community because that's our story, it's about how do we give back to our community. [...] You gain strength from women in roles like this, I think it's a cycle being silently done for our people and how we give back and how we go through life. So, let's talk about spirit, let's talk about how we're guided and how we give back and we think about the story of that. It's really beautiful. So we're all connected and it's about where do we want to be. This is a silent truth. [Sandra]***

Participants' involvement in FDV work, as they expressed this, was, thus, not merely a job but a profound expression of love, solidarity, and community. Further, in Sabrina's reference to Aboriginal women's "certain tenacity and resilience", we get a glimpse of, what Hall (2016, p. 228) calls, the "creative labours of resistance". Talking about her work with new employees, Sabrina explains:

> ***I have taught them, role modelled resilience and tenacity. That's something that [other worker] and I, as Aboriginal women, have grown up with – and [another worker] too – [she's] grown up with that, being resilient, strong women. Adaptable [women] who have had to operate in a system that doesn't work for us. So, you can either choose to get caught up in why the system don't work for you, or you can choose to get on with it. [Sabrina]***

Healing

Aboriginal and Torres Strait Islander participants, like other participants, were troubled by the dominant focus in FDV work on housing, outcomes and administrative accountability to funding bodies. Highlighting the specific implications for Aboriginal and Torres Strait Islander women, they emphasised that this came at the expense of peoples' need for community, connection, culture and spirituality; as Sabrina put it, "there's an element that's missing and that's the healing process. […] we need healing led by Aboriginal people for Aboriginal people". Critically, healing was conceptualised not as an individual act or outcome but, rather, representing a complex bringing together of resistance, counter-discourse and identity.

In referring to the pressure on Aboriginal and Torres Strait Islander women, from child protection authorities in particular, to sever their relationships with perpetrators, Poppy talks about the importance of responding to FDV in ways that prioritise healing in families:

> ***[By] working with families, healing families [...] you're setting up a bit of a base for healthier communities and healthier outcomes [...] I mean, most people would know within our communities we get tired of our children being removed. We get tired of the level of scrutiny that's placed on a mum who's having a child. We get tired of men or women being incarcerated. So, there's all of these things that community gets really tired [of] and really worn down and you get a lot of the emotional load that is being carried by women anyway. If men are incarcerated, 9 times out of 10 it's the women that are supporting them, the aunties, the grandmothers, the sisters, whatever. So, I think it's just about getting real on how do we make real change in community for our community. [Poppy]***

Relatedly, Sabrina recounts that:

> ***A woman said to me, I'm tired of people thinking because I'm Aboriginal, that violence is a normal part of my life. I was blown away that for her to heal, she needed something that was really appropriate for her, but yet the system didn't allow for that. And yet she could vocalise that and say that, that she didn't want to be in violence anymore. [Sabrina]***

This vision of healing recognises and responds to the interweaving of FDV and colonisation and associated "systemic disadvantage, cultural dislocation, forced removal of children and the intergenerational impacts of trauma" (Blagg et al., 2020, p. 12). It also reflects the tensions between Aboriginal and Torres Strait Islander perspectives on FDV and dominant feminist accounts that focus on gender inequality, coercive control and patriarchy (see Blagg et al., 2022). Reliance on western constructs of gender and patriarchy, it is argued, risk erasing the "colonial experience", thereby enhancing the "power of the very repressive instruments of the settler state that have acted as tools of Indigenous dispossession" (Blagg et al., 2021, p. 544). Klein et al. (2023), nonetheless, point out that hierarchical gendered relations came with colonisation; that is, "settler colonisation" brought "patriarchal attitudes and practices" to Australia (p. 123). Thus, "gender relations cannot be separated from issues of gender inequality" (Klein et al., 2023, p. 123), neither of which negate the enduring significance of racialisation and colonisation.

Sabrina's reference to healing by Aboriginal people, for Aboriginal people is especially critical. Participants also emphasised the structural and systemic barriers that made it difficult to do the healing work that is needed to make a difference to women and children's lives. The importance of Aboriginal and Torres Strait Islander designed and run responses, such as Aboriginal Community Controlled Organisations (ACCOs), grounded in community and healing through connectedness, has been emphasised elsewhere – including the national Aboriginal and Torres Strait Islander Action Plan, as discussed earlier. Blagg et al. (2018) also emphasise Aboriginal organisations' interdependence with, and fundamental commitment to, community which lies at the heart of healing work. There are, however, relatively few ACCOs across Australia and even fewer dedicated to supporting Aboriginal FDV victims (see Putt, Holder & O'Leary, 2017). Data from the SNAICC (2023, p. 15), for instance, shows that only 11% of DSS funded Specialised Family Violence Services had ACCO providers. Likewise, there are few programs in Australia that have a specific focus on, let alone are led by, Aboriginal and Torres Strait Islander women (see Blagg et al., 2015).

Who does the work?

The tendering, contracting and standardisation of FDV services reflects the practices and impacts of colonisation that continue to inflict violence and inter-generational trauma on the victims (and perpetrators) of FDV (Nancarrow, 2006). This is evident in the lack of priority given to Aboriginal organisations – and Aboriginal understandings of violence – in mainstream FDV service provision (Blagg et al., 2018). Despite growing recognition of the specific challenges facing Aboriginal workers and organisations, there was relatively little discussion of these by non-Aboriginal participants in this research. The need for Aboriginal FDV services to be both run and staffed by Aboriginal people, however, was a strong theme among the Aboriginal and Torres Strait Islander participants. Reflecting the inherently political nature of the work, participants also talked about the challenges of recruitment and how they had learned, through experience, how important it was to consider the values and lived experience of potential workers, rather than just their qualifications. This recognises their efforts to counter the "nullification of lived experiences, and the denial of particularity and context" (Hunter, 2021, p. 346) that constitute the enduring effects of colonialism.

Aboriginal and Torres Strait Islander workers emphasised the significance of the cultural load they carry and, consequently, the necessity of cultural safety.

While, as indicated earlier, relatively little is known about Aboriginal services, Putt, Holder and O'Leary (2017) estimated that at least half of the surveyed FDV victim services employed Aboriginal people and/or had dedicated positions, however, this was less likely in urban, as compared to regional and remote areas. Importantly, they found that Aboriginal staff working in non-Aboriginal organisations were usually the "minority within a service" (Putt, Holder & O'Leary, 2017, p. 32). While the participants in this study worked in specialist Aboriginal services and, thus, largely, within a team of Aboriginal workers, the sense of minority status within the organisation and/or sector was, nonetheless, strong.

Carrying the cultural load

Klein et al.'s (2024) study of Aboriginal women's care work resonates with the accounts of Aboriginal and Torres Strait Islander participants in this project. For instance, Klein et al. describe women's experience of:

> **having to juggle various demands from their employers who on one hand employed Aboriginal and Torres Strait Islander women because of their knowledge and skill in the Indigenous sector, but on the other hand, did not adequately acknowledge, support or remunerate the skills for which they were being employed. (Klein et al., 2024, p. 129)**

While Aboriginal and Torres Strait Islander participants in this project described generally positive relationships with their (non-Aboriginal) colleagues and managers, there remained a constant tension described by some as a 'cultural load'. Cultural load, according to Klein et al., (2024, p. 129), is work that draws on Aboriginal and Torres Strait Islander peoples' "intricate knowledge and connection to community" but is "taken for granted, overlooked, unremunerated or misunderstood". Here Poppy, for example, specifically refers to the significance of cultural load:

> ***So, if you have an Aboriginal person in this space, if you have a lot of non-Aboriginal staff, you don't want someone to become burnt out with a whole lot of cultural loading and to become ... I see that happen in so many other sectors, government especially, where that person tends to be the be all and end all and there's no downtime because you live and breathe it at work but the minute you step out, you're going back and you're living and breathing it in community, within your own family. [...] also it's something that needs to be renumerated because I don't think it is. [Poppy].***

As evident in Poppy's account, this may relate to the invisible burden of "cultural brokerage" (see Kirkham et al., 2018) as well as the need to mediate (by advocating, justifying, explaining, managing resistance, etc) between Aboriginal service-users and non-Aboriginal services and workers. While in a different context – concerning the experiences of Māori nurses in New Zealand – Komene et al. (2023) highlight the multiple manifestations of "cultural loading" including being expected to "fill Indigenous knowledge gaps and educate their colleagues" and act as "unofficial spokespersons" for Aboriginal and Torres Strait Islander clients (p. 2589). Komene et al. (2023, p. 2589) also refer to the labour associated with addressing the exclusion of Indigenous knowledges and values as well as the constant need to defend against "cultural compromise".

In this context, the importance of culturally safe spaces is paramount, as reflected in participants' accounts of working together in an Aboriginal-led setting:

> ***Coming here is like healing. I couldn't do this work if I worked in another team. I couldn't do this work if I worked in a white workplace. Nobody else is going to have my back when I start ranting about whatever stupid thing the government's done this day or whatever thing I see in the news. We do that filling up each other's cup. And that's what allows us to continue doing the work that we do. I show up for these women as much as I show up for the women who are my clients. [Cleo]***

> ***We are Aboriginal led, that's something that feeds our souls. It feeds our souls. We are passionate women who strive to make changes in a system that excludes... It's knowing that we've grown up black, who we are and how we represent our community. We're led to do this, our spirit, it's our accountability. [Sabrina]***

Aboriginal women, leading change

Aboriginal and Torres Strait Islander participants were unequivocal in naming the sociostructural and political origins of violence, including FDV, in Aboriginal communities. Sabrina, for example, powerfully articulated the ways in which colonisation continues to shape the everyday and, hence, the indivisibility of the personal and political:

> ***Violence exists within the Aboriginal community because violence was perpetrated against us. So, I go back to that statement before about, because we're Aboriginal, violence is a normal part of our life. That's such bullshit. That was learnt. We learnt that from colonisation. From trauma. But we're not unlearning it either. So, where's the system that teaches us to unlearn that? [...] [And] that's the really sad part of it, is that us, as workers, it's almost like we have an internal navigation [in] which we have an understanding what it means to be black. We have an understanding what it means to be Stolen Generation. We have an understanding of what it means to be in a domestic violence relationship. We have all these understandings and so what we do is we learn to teach, we've learnt to navigate it ourselves, so we teach women to navigate that themselves [...] because it's the first time that they've been able to think about themselves, focus on themselves. Because society has told us who we should be [...] because their perception and that stigma about you're black, you're Aboriginal, violence is normal. What a crock of shit! [Sabrina]***

The recent Wiyi Yani U Thangani Change Agenda, described as a "visionary Blakprint for transformation" (AHRC, 2024, p. 18), outlines the "paradigm shift" (p. 8) needed to reshape systems, in the form of a series of "outcome visions", related "systemic areas of change", and the "signals" that will show that change is happening. Representing the collective voices of Aboriginal and Torres Strait Islander women and girls, and grounded in the recognition of their central role in "caring for children, family, kin and Country" (p. 7), the Change Agenda emerged from the earlier Wiyi Yani U Thangani Report (AHRC, 2020) which set out to "fill a major gap in the representation of the voices of women" (AHRC, 2020, p. 17). In this, it reflected the consistent message from Aboriginal and Torres Strait Islander women, that:

> **Piecemeal and disjointed governmental decisions that impact our lives are part of broader societal structures that have entrenched and perpetuated intersectional discriminations including racialised sexism, gender and wealth inequalities, intergenerational trauma and harms and violence against women and children. (AHRC, 2024, p. 8)**

Firmly centred on systemic and structural change, its reference to "systems actors" reflects it emphasis on "people seeing systems and witnessing themselves as actors within systems, holding influence in different contexts, and understanding how they can contribute to change". Encompassing both single systems actors and groups of actors, the Agenda prioritises "collaboration with many actors across layers of systems" (p. 23), from governments to corporations, educators to activists, and community organisations to the media. Of particular significance to this project is the Wiyi Yani U Thangani Change Agenda's foundational emphasis on the centrality of care work (that is, women's care work) to the "redefining and functioning of systems", and, hence, the prioritisation of a "transformed care economy" (AHRC, 2021) including:

- Recognition (including defining and measuring) of the full spectrum of care work;
- Construction of economic models that are informed by, support and remunerate care work; and
- (Re)definition of mainstream services as culturally and gender responsive. (AHRC, 2024, p. 28)

Understanding the depth and complexity of work undertaken by Aboriginal women, for Aboriginal women, in the FDV context is critical. So long as this remains unrecognised in mainstream service models and funding arrangements, the load will continue to be borne by Aboriginal women and communities. As articulated so powerfully by the participants in this study, FDV is inseparable from – and interwoven with – the "protracted and ongoing violence of colonisation" (Blagg et al., 2020, p. 64) in Australia. Creating space for Aboriginal and Torres Strait Islander voices, grounded in this uncomfortable truth, is both necessary and long, long overdue.

Conclusion

Labour forces are core institutions of the gender order. The demographics and practices of the FDV workforce reflect gendered and raced structures, as do the service agencies/organisations themselves. The FDV workforce is not separate from the dynamics of FDV but rather is constituted by the very structures that shape those dynamics. Hanlon (2024) observes that few studies direct attention to the "gendering work" that workers – and organisations – undertake, shaping their role, its parameters and objectives. This project has sought to address this gap by focusing on the "relational dynamics of gender", not only in the context of "practice between colleagues, service users, and workers", but also "within occupational hierarchies, managerial, and governance structures" (Hanlon, 2024, p. 1685).

FDV work and its workforce is grounded in decades of feminist and Aboriginal and Torres Strait Islander activism, research and advocacy, centring structural, gendered, raced and other intersectional analyses. This foundation risks being eroded without strong and sustained attention to the interconnections between FDV as a gendered social problem and the conceptualisation and organisation of FDV work. Thinking about and strategising the FDV workforce must, therefore, move beyond the professional skills and capacities of workers, to instead take seriously the ways in which political and sociocultural contexts, encompassing structural conditions, colonisation and profound, embedded social inequalities, continue to shape the work, reproducing the very conditions that enable gendered violences.

References

ABS. (2019). *Aboriginal and Torres Strait Islander women's experiences of family and domestic violence*. https://www.abs.gov.au/ausstats/abs@.nsf/Lookup/by%20Subject/4714.0~2014-15~Feature%20Article~Aboriginal%20and%20Torres%20Strait%20Islander%20women%27s%20experiences%20of%20family%20and%20domestic%20violence%20(Feature%20Article)~10100

ABS. (2021). *Disability and Violence – In Focus: Crime and Justice Statistics.* https://www.abs.gov.au/statistics/people/crime-and-justice/focus-crime-and-justice-statistics/disability-and-violence-april-2021

ABS. (2023). *Personal Safety, Australia (2021-22).* https://www.abs.gov.au/statistics/people/crime-and-justice/personal-safety-australia/2021-22

Acker, J. (2006). Inequality regimes: Gender, class, and race in organisations. *Gender & Society*, 20(4), 441-464. https://doi.org/10.1177/0891243206289499

ACT Government. (2024). *Domestic, Family and Sexual Violence Strategy Consultation draft*. Community Services Directorate. https://hdp-au-prod-app-act-yoursay-files.s3.ap-southeast-2.amazonaws.com/7617/1080/6119/FE_ACT_Domestic_Family_and_Sexual_Violence_Strategy_-_March_2024.pdf

AIHW (Australian Institute of Health and Welfare) (2018) *Family, domestic and sexual violence in Australia, 2018,* Cat. no. FDV 2, AIHW.

AIHW (Australian Institute of Health and Welfare) (2019) *Family, domestic and sexual violence in Australia: Continuing the national story 2019,* Cat. no. FDV 3, AIHW.

AIHW. (Australian Institute of Health and Welfare). (2021). *Monitoring perpetrator interventions in Australia.* Cat. no. FDV 7. AIHW. https://www.aihw.gov.au/getmedia/da936eb6-305d-423f-bd9f-a58b417cee29/aihw-fdv-7.pdf?v=20230605172459&inline=true

AIHW. (Australian Institute of Health and Welfare). (2022). *Family, domestic and sexual violence data in Australia.* AIHW. https://www.aihw.gov.au/reports/domestic-violence/family-domestic-sexual-violence-data/contents/about

AIHW (Australian Institute of Health and Welfare). (2024a). *Family, domestic and sexual violence: FDSV workforce.* https://www.aihw.gov.au/family-domestic-and-sexual-violence/responses-and-outcomes/fdsv-workforce#what

AIHW (Australian Institute of Health and Welfare). (2024b). *Family, domestic and sexual violence: Health services*, AIHW.

AIHW (Australian Institute of Health and Welfare). (2024c). *Family, domestic and sexual violence: Aboriginal and Torres Strait Islander People*, AIHW.

Allard, C., & Whitfield, G. J. (2024). Guilt, care, and the ideal worker: Comparing guilt among working carers and care workers. *Gender Work & Organization*, 31(2), 666–682. https://doi.org/10.1111/gwao.12956

Baines, D. (2016). Moral projects and compromise resistance: Resisting uncaring in non-profit care work. *Studies in Political Economy*, 97(2), 124-142.

Baines, D. (2022). Soft cops or social justice activists: Social work's relationship to the state in the context of BLM and neoliberalism. *British Journal of Social Work*, 52, 2984–3002. https://doi.org/10.1093/bjsw/bcab200

Baines, D., Charlesworth, S., Turner, D., & O'Neill, L. (2014). Lean social care and worker identity: The role of outcomes, supervision and mission. *Critical Social Policy*, 34(4), 433-453.

Baines, D. & Cunningham, I. (2011). 'White knuckle care work': Violence, gender and new public management in the voluntary sector. *Work, Employment and Society*, 25(4), 760–776. https://doi.org/10.1177/0950017011419710

Baines, D. & Cunningham, I. (2020). 'How could management let this happen?' Gender, unpaid work and industrial relations in the nonprofit social services sector. *Economic and Industrial Democracy*, 41(2), 436-456. https://doi.org/10.1177/0143831X17715768

Baines, D., Cunningham, I., Kgaphola, I. and Mthembu, S. (2020). Nonprofit care work as social glue: Creating and sustaining social reproduction in the context of austerity/late neoliberalism. *Affilia*, 35(4), 449–465. https://doi.org/10.1177/0886109920906787

Bandali, A. Z. (2020). Who cares? A lack of self-care for women in the non-profit/non-governmental sector. *Gender, Work & Organization*, 27(2), 236-250. https://doi.org/10.1111/gwao.12362

Banerjee, A., Daly, T., Armstrong, P., Szebehely, M., Armstrong, H., & Lafrance, S. (2012). Structural violence in long-term, residential care for older people: Comparing Canada and Scandinavia. *Social Science & Medicine*, 74(3): 390-398. https://doi.org/10.1016/j.socscimed.2011.10.037

Blagg, H., Bluett-Boyd, N., & Williams, E. (2015). *Innovative models in addressing violence against Indigenous women, State of knowledge paper* (ANROWS Landscapes 08/2015). Australia's National Research Organisation for Women's Safety

Blagg, H., Williams, E., Cummings, E., Hovane, V., Torres, M., & Woodley, K. N. (2018). *Innovative models in addressing violence against Indigenous women: Final report* (ANROWS Horizons, 01/2018). ANROWS.

Blagg, H., Tulich, T., Hovane, V., Raye, D., Worrigal, T., & May, S. (2020). *Understanding the role of Law and Culture in Aboriginal and/or Torres Strait Islander communities in responding to and preventing family violence.* ANROWS Research report, Issue 19.

Blagg, H., Hovane, V., Tulich, T., Raye, D., May, S., & Worrigal, T. (2022). Law, culture and decolonisation: The perspectives of Aboriginal Elders on family violence in Australia. *Social & Legal Studies*, 31(4), 535-558. https://doi.org/10.1177/09646639211046134

Brown, J., & James, K. (2014). Therapeutic responses to domestic violence in Australia: A history of controversies. *Australian and New Zealand Journal of Family Therapy*, 35, 169–184. doi: 10.1002/anzf.105

Bullock, H. E., Reppond, H. A., Truong, S. V., & Singh, M. R.. (2020). An intersectional analysis of the feminization of homelessness and mothers' housing precarity. *Journal of Social Issues*, 76(4), 835–858. https://doi.org/10.1111/josi.12406

Camilleri, P., & Jones, P. (2001). Doing 'women's work'?: Men, masculinity and caring. In B. Pease & P. Camilleri (Eds.), *Working with men in the human services* (pp. 25–36). Allen & Unwin.

Carey, G. (2008). Conceptualising the Third Sector: Foucauldian insights into the relations between the third sector, civil society and the state. *Third Sector Review*, 14(1), 9-22.

Carlson, B., Day, M., & Farrelly, T. (2021). *What works? Exploring the literature on Aboriginal and Torres Strait Islander healing programs that respond to family violence* (Research report, 01/2021). ANROWS.

Charlesworth, S., Baines, D., & Cunningham, I. (2015). 'If I had a family, there is no way that I could afford to work here': Juggling paid and unpaid care work in social services. *Gender, Work & Organization*, 22(6), 596-613. https://doi.org/10.1111/gwao.12111

Choiniere, J. A., MacDonnell, J. A., Campbell, A. I., & Smele, S. (2014). Conceptualizing structural violence in the context of mental health nursing. *Nursing Inquiry*, 21(1), 39-50. https://doi.org/10.1111/nin.12028

Christie, A. (2006). Negotiating the uncomfortable intersections between gender and professional identities in social work. *Critical Social Policy*, 26(2), 390-411.

Chung, D., Upton-Davis, K., Cordier, R., Campbell, E., Wong, T., Salter, M. … Bissett, T. (2020). *Improved accountability: The role of perpetrator intervention systems* (Research report, 20/2020). ANROWS. https://anrows-2019.s3.ap-southeast-2.amazonaws.com/wp-content/uploads/2020/06/30164900/Chung-RR-Improved-Accountability.pdf

Collinson, D., & Hearn, J. (1996). 'Men' at 'work': Multiple masculinities/multiple workplaces. In M. Mac an Ghaill (Ed.), *Understanding Masculinities*. Open University Press.

Commonwealth of Australia. (2023). *Aboriginal and Torres Strait Islander Action Plan to End Violence against Women and Children 2023-2025.* https://www.dss.gov.au/national-plan-end-gender-based-violence/resource/aboriginal-and-torres-strait-islander-action-plan-2023-2025

Commonwealth of Australia. (2022). *National Plan to End Violence against Women and Children 2022–2032*. https://www.dss.gov.au/national-plan-end-gender-based-violence/resource/national-plan-end-violence-against-women-and-children-2022-2032

Cortis, N. & Blaxland, M. (2024). *Australia's Social and Community Services Workforce: Characterisation, classification and value*. UNSW Social Policy Research Centre. https://static1.squarespace.com/static/661f04b91fdda6655ac8d468/t/664ee846fbe0332f1a2dbb3a/1716447307208/Final+report+for+ASU_19_April_2024.pdf

Cortis, N., Blaxland, M., Brekenridge, J., valentine, k., Mahoney, N., Chung, D., . . . Green, D. (2018). *National survey of workers in domestic, family and sexual violence sectors*. Social Policy Research Centre and Gendered Violence Research Network, UNSW.

Costas, J. & Grey, C. (2019). Violence and organisation studies. *Organisation Studies*, 40(10), 1573–1586. https://doi.org/10.1177/0170840618782282

Cullen, P., Walker, N., Koleth, M., & Coates, D. (2022). *Voices from the frontline: Qualitative perspectives of the workforce on transforming responses to domestic, family and sexual violence* (Research report, 21/2022). ANROWS. https://www.anrows.org.au/publication/voices-from-the-frontline-qualitative-perspectives-of-the-workforce-on-transforming-responses-to-domestic-family-and-sexual-violence/

Cunningham, I., & James, P. (2014). Public service outsourcing and its employment implications in an era of austerity: The case of British social care. *Competition & Change*, 18(1), 1-19. https://doi.org/10.1179/1024529413Z.00000000045 22

Curthoys, A., Kevin, C, & Simic, Z. (2021). A 'National Disgrace?': Notes from a history of domestic violence in Australia. https://16daysblogathon.blog/2021/12/06/day-twelve-a-national-disgrace-notes-from-a-history-of-domestic-violence-in-australia/

Dahlkild-Öhman, G. & Eriksson, M. (2013). Inequality regimes and men's positions in social work. *Gender, Work & Organization*, 20(1), 85-99. https://doi.org/10.1111/j.1468-0432.2011.00572.x

Day, A.S., & Gill, A.K. (2020). Applying intersectionality to partnerships between women's organisations and the criminal justice system in relation to domestic violence, *The British Journal of Criminology*, 60(4), 830–850. https://doi.org/10.1093/bjc/azaa003

Department of Social Services [DSS]. (2018). *Users of Violence Consultation Summary*. https://plan4womenssafety.dss.gov.au/wp-content/uploads/2018/09/dss-4ap-consultation-summary-users-violence.pdf

DFSV Commission. (2024). *Yearly Report to Parliament, Domestic, Family and Sexual Violence Commission.* https://www.dfsvc.gov.au/sites/default/files/2024-10/DFSVC0011%20YearlyReport2024%28A4%29_FA6.pdf

Ernst, J. & Tatli, A. (2022). Knowledge legitimacy battles in nursing, quality in care, and nursing professionalization. *Journal of Professions and Organization*, 9, 188–201. https://doi.org/10.1093/jpo/joac005

Fahlgren, S. (2013). The paradox of a gender-balanced workforce: The discursive construction of gender among Swedish social workers. *Affilia*, 28(1), 19-31. https://doi.org/10.1177/0886109912475162

Family Safety Victoria. (2023). *Family Violence and Sexual Assault Workforce Pulse Survey Report 2022.* https://www.vic.gov.au/family-violence-and-sexual-assault-workforce-pulse-survey-report

Family Safety Victoria. (2021). *Census of Workforces that Intersect with Family Violence 2019-20: Summary Findings Report.* https://www.vic.gov.au/sites/default/files/2021-06/FSV7472_Census%20Final%20Overall%20Summary%20Report_final.pdf

Family Safety Victoria. (2019). *Building From Strength. 10-Year Industry Plan for Family Violence Prevention and Response.* https://www.vic.gov.au/sites/default/files/2019-05/Building-from-strength-10-year-industry-plan-for-family-violence-prevention-and-response.pdf

Farmer, P. (1997). Social scientists and the new tuberculosis. *Social Science & Medicine*, 44(3), 347-358. https://doi.org/10.1016/S0277-9536(96)00143-8

Franzway, S. (2000). Women working in a greedy institution: Commitment and emotional labour in the union movement. *Gender, Work & Organisation*, 7(4), 258.

Franzway, S., Moulding, N., Wendt, S., Zufferey, C., & Chung, D. (2019). *The sexual politics of gendered violence and women's citizenship*. Policy Press.

Fraser, H. & Seymour, K. (2016). *Understanding violence & abuse: An anti-oppressive practice perspective*. Fernwood Press.

Galtung, J. (1990). Cultural violence. *Journal of Peace Research*. 27(3): 291-305.

Gilbert, B. (2020). Exploring the experiences of domestic abuse survivors working in the field of domestic abuse support: Assisting recovery or re-victimisation revisited? *Journal of Gender-Based Violence*, 4(1), 73-87. https://doi.org/10.1332/239868019X15750194039901

Gillingham, P. (2006). Male social workers in child and family welfare: New directions for research. *Social Work*, 51(1), 83–85. https://doi.org/10.1093/sw/51.1.83

Haines, A., Andary, S., Amos, J., Louth, J., Mannik, A., Jacobs, R., Best, P., Calio, P., Petrovic, T., Scott, R., & Vlahos, A. (2022). Men working with men in intensive family services: Reflections on violence, trauma lifeworlds, and organic interventions. *Australian and New Zealand Journal of Family Therapy*, 43(4), 442-461. https://doi.org/10.1002/anzf.1517

Hall, R. (2016). Caring labours as decolonizing resistance. *Studies in Social Justice*, 10(2), 220–237. https://doi.org/10.26522/ssj.v10i2.1353

Hanley, N. & MacPhail, C. (2023). "You can't meet everyone's needs after-hours": After-hours domestic and family violence services in rural and remote areas. *Violence Against Women*, 29(12-13), 2527-2550. https://doi.org/10.1177/10778012231183655

Hanlon, N. (2024). Masculinities and affective equality; the case of professional caring. *Gender, Work & Organization*, 31(5), 1676-1689. https://doi.org/10.1111/gwao.12937

Hearn, J. (1996). Men's violence to known women: Historical, everyday and theoretical constructions by men. In B. Fawcett, B. Featherstone, J. Hearn, & C. Toft (Eds.), *Violence and gender relations: Theories and interventions.* Sage Publications.

Hearn, J. (1998). *The violences of men: how men talk about and how agencies respond to men's violence to women*. Sage.

Hearn (2012) The sociological significance of domestic violence: Tensions, paradoxes and implications. *Current Sociology*, 61(2), 152-170. https://doi.org/10.1177/0011392112456503

Hearn J, Strid, S., Husu, L., & Verloo, M. (2016). Interrogating violence against women and state violence policy: Gendered intersectionalities and the quality of policy in The Netherlands, Sweden and the UK. *Current Sociology Monograph*, 64(4), 551-567. DOI: 10.1177/0011392116639220

Hearn, J. & Collinson, D. (2018). Men, masculinities, and gender relations. In R. Aldag (Ed.), *Oxford research encyclopedia of business and management.* Oxford University Press. https://doi.org/10.1093/acrefore/9780190224851.013.55

Hester, H. & Srnicek, N. (2017). The crisis of social reproduction and the end of work. *In The age of perplexity: Rethinking the world we knew* (pp. 372-389). Random House (for BBVA). https://kclpure.kcl.ac.uk/portal/files/104129555/Hester_and_Srnicek_2018_The_Crisis_of_Social_Reproduction_and_the_End_of_Work_.pdf

Hochschild, A. (1983). *The managed heart: Commercialization of human feeling*. University of California Press.

Hunter, S. (2021). Decolonizing white care: Relational reckoning with the violence of coloniality in welfare. *Ethics and Social Welfare*, 15(4), 344-362. https://doi.org/10.1080/17496535.2021.1990370

Hyvönen, H. (2023). Bodies, embodiment, bodywork, care, caring and self-care. In J Hearn, K Aavik, D Collinson & A Thym (Eds.) *Routledge handbook on men, masculinities and organisations: Theories, practices and futures of organising* (chapter 13). Taylor & Francis.

Ishkanian, A. (2014). Neoliberalism and violence: The Big Society and the changing politics of domestic violence in England. *Critical Social Policy*, 34(3), 333-353. https://doi.org/10.1177/0261018313515973

Jones, M., Mlcek, S. H., Healy, J. P., & Bridges, D. (2019). Gender dynamics in social work practice and education: A critical literature review. *Australian Social Work*, 72(1), 62–74. https://doi.org/10.1080/0312407X.2018.1524919

Kaplan, A. (2022). 'Just let it pass by and it will fall on some woman': Invisible work in the labor market. *Gender & Society*, 36(6), 838 –868. https://doi.org/10.1177/08912432221128544

Kelly, L., & Westmarland, N. (2015). *Domestic violence perpetrator programmes: Steps towards change.* Project Mirabel Final Report. London Metropolitan University and Durham University.

Kirkham, R., Rumbold, A., Hoon, E., Stuart-Butler, D., & Moore, V. (2018). Emotional labour and Aboriginal maternal infant care workers: The invisible load. *Women and Birth*, 31(2), 110-116. https://doi.org/10.1016/j.wombi.2017.07.001

Klein E., Hunt J., Staines Z., Dinku Y., Brown C., Glynn-Braun K., Yap M. (2023). *Caring about care* (Commissioned Report No. 7/2023), Centre for Indigenous Policy Research, Australian National University. https://doi.org/10.25911/7S8N-8C87

Komene, E., Gerrard, D., Pene, B., Parr, J., Aspinall, C., & Wilson, D. (2023). A tohu (sign) to open our eyes to the realities of Indigenous Māori registered nurses: A qualitative study. *Journal of Advanced Nursing*, 79(7), 2585–2596. https://doi.org/10.1111/jan.15609

Lavee, E. & Kaplan, A. (2022). Invisible work at work and the reproduction of gendered social service organisations. *Gender, Work & Organisation*, 29(5), 1463–1480. https://doi.org/10.1111/gwao.12839

Lee, E. & Johnstone, M. (2024). Critical pedagogy to promote critical social work: Translating social justice into direct social work practice. *Social Work Education*, 43(5), 1384-1397. https://doi.org/10.1080/02615479.2023.2185602

McLean, J. (2003). Men as minority: Men employed in statutory social care work. *Journal of Social Work*, 3(1), 45-68. https://doi.org/10.1177/1468017303003001004

Macy, R. J., Giattina, M., Sangster, T. H., Crosby, C., & Montijo, N. J. (2009). Domestic violence and sexual assault services: Inside the black box. *Aggression and Violent Behavior*, 14, 359-373. http://dx.doi.org/10.1016/j.avb.2009.06.002

Martin, P. Y. (2003). "Said and done" versus "saying and doing": Gendering practices, practicing gender at work. *Gender and Society*, 17(3), 342-366.

McDonald, J. (2005). Neo-liberalism and the pathologising of public issues: The displacement of feminist service models in domestic violence support services. *Australian Social Work*, 58(3), 275-284.

Meagher, G. (2002). *Making care visible: Feminism, social services and the challenge of performance management.* Social Justice and Research Program, UnitingCare Burnside (NSW).

Ministers for the Department of Social Services. (2024, February 19). Joint media release: The Hon Amanda Rishworth MP & The Hon Justine Elliot MP. https://ministers.dss.gov.au/media-releases/16051

Moskos, M. (2020). Why is the gender revolution uneven and stalled? Gender essentialism and men's movement into 'women's work'. *Gender, Work & Organization*, 27(4), 527-544. https://doi.org/10.1111/gwao.12406

Murdolo, A. (2014). Safe homes for immigrant and refugee women: Narrating alternative histories of the women's refuge movement in Australia. *Frontiers: A Journal of Women Studies*, 35(3), 126-153. https://www.jstor.org/stable/10.5250/fronjwomestud.35.3.0126

Murray, S. (2006). The origins and development of the Australian Women's Refuge Movement. *Parity*, 19(10), 11.

Murray, S., Bullen, J., Theobald, J., & Watson, J. (2022). Building the evidence for family violence policy reform: The work of specialist women's refuges in Victoria, Australia. *Social Policy and Society*, 21(3), 422–438. https://doi.org/10.1017/s1474746421000051

Nancarrow, H. (2006). In search of justice for domestic and family violence: Indigenous and non-Indigenous Australian women's perspectives. *Theoretical Criminology*, 10(1), 87-106.

Nancarrow, H. (2019). *Unintended consequences of domestic violence law: Gendered aspirations and racialised realities*, Springer Nature.

Nentwich, J. & Hsu, C. (2023). (Un)doing masculinity? Men working in women's occupations. In J Hearn, K Aavik, D Collinson & A Thym (Eds.) *Routledge handbook on men, masculinities and organisations: Theories, practices and futures of organising* (chapter 22). Taylor & Francis.

Northern Territory Government. (nd). *The Northern Territory (NT) Domestic, Family and Sexual Violence Workforce and Sector Development Plan.* https://tfhc.nt.gov.au/__data/assets/pdf_file/0004/984613/nt-dvsv-workforce-and-sector-development-plan.pdf

NSW Women's Safety Commissioner (2024). *Working together to address DVSV: Strategic Plan 2024–2027.* https://dcj.nsw.gov.au/documents/legal-and-justice/our-commissioners/nsw-women%E2%80%99s-safety-commissioner.pdf

Our Watch. (2023). *Growing with change: Developing an expert workforce to prevent violence against women.* https://assets.ourwatch.org.au/assets/Key-frameworks/Growing-with-change_AA.pdf

Payne, J. (2009). Emotional labour and skill: A reappraisal. *Gender, Work & Organisation*, 16(3), 348-367. https://doi.org/10.1111/j.1468-0432.2009.00448.x

Phillips, R., & Heward-Belle, S. (2023). Exploring the role of frontline Domestic and Family Violence 'Advocate-Providers': Can they be part of the national policy process in Australia? *Journal of Policy Practice & Research*, 4(3), 220–237. https://doi.org/10.1007/s42972-023-00084-7

Phillips, R., Kelly, L. & Westmarland, N. (2013). *Domestic violence perpetrator programmes: An historical overview.* Briefing Note. London Metropolitan University and Durham University. https://durham-repository.worktribe.com/output/1119220

PM&C. (Prime Minister and Cabinet). (2023). *Draft National Care and Support Economy Strategy 2023*. Department of the Prime Minister and Cabinet, Care and Support Economy Taskforce. https://www.pmc.gov.au/sites/default/files/resource/download/draft-national-care-and-support-economy-strategy-2023.pdf

Price, J. (2012). *Structural violence: Hidden brutality in the lives of women.* University of New York Press.

Putt, J., Holder, R., & O'Leary, C. (2017). *Women's specialist domestic and family violence services: Their responses and practices with and for Aboriginal women: Final report* (ANROWS Horizons 01/2017). https://anrows-2019.s3.ap-southeast-2.amazonaws.com/wp-content/uploads/2019/02/19025131/Womens-specialist-domestic-and-family-violence-services_Putt_HorizonsFINAL.pdf

Rodney, R., Forde, A., Khan, A., & Bonilla-Damptey, J. (2024). "These conversations shouldn't be easy … You're going to have to shift. It means reflection … It means change": Moving anti-oppression beyond incremental changes in the GBV Sector. *Violence Against Women, online first.* https://doi.org/10.1177/10778012241270276

Rogowski, S. (2020). *Social work: The rise and fall of a profession?* Bristol University Press.

Safe and Equal. (2022). *Measuring family violence demand project: Phase two Outcomes report.* https://safeandequal.org.au/wp-content/uploads/REP_Measuring-FV-Services-Demand-Project-Phase-Two-Outcomes-Report_Dec22.pdf

Safe and Equal. (2023). *Measuring family violence service demand and capacity: An emerging picture of the specialist family violence sector.* https://safeandequal.org.au/wp-content/uploads/REP_2023-Safe-and-Equal-Measuring-FV-Service-Demand-and-Capacity-Report-FINAL.pdf

Schwiter, K., Nentwich, J., & Keller, M. (2021). Male privilege revisited: How men in female-dominated occupations notice and actively reframe privilege. *Gender, Work and Organization*, 28(6), 2199-2215. https://doi.org/10.1111/gwao.12731

SCSPLA. (2021). *House of Representatives Standing Committee on Social Policy and Legal Affairs: Inquiry into family, domestic and sexual violence.* https://parlinfo.aph.gov.au/parlInfo/download/committees/reportrep/024577/toc_pdf/Inquiryintofamily,domesticandsexualviolence.pdf;fileType=application%2Fpdf

Seymour, K. (2009). Women, gendered work and gendered violence: So much more than a job. *Gender, Work and Organization*, 16(2), 238-265.

Seymour, K. (2018a). 'Respect for each gender': Gender, equity and backlash in Australia's male health policy. *Australian Journal of Social Issues*, 53(2), 123–138. https://doi.org/10.1002/ajs4.37

Seymour, K. (2018b). 'Stand up, speak out and act': A critical reading of Australia's White Ribbon campaign. *Australian & New Zealand Journal of Criminology*, 51(2), 293-310. https://doi.org/10.1177/0004865817722187

Shin, H., Rogers, H., & Law, V. (2015). *Domestic violence in the longitudinal study of Australian children.* Department of Social Services.

Slattery, S., & Goodman, L. (2009). Secondary traumatic stress among domestic violence advocates: Workplace risk and protective factors. *Violence Against Women*, 15(11), 1358-1379.

SNAICC. (2023). *Stronger ACCOs, Stronger Families - Final Report.* https://www.snaicc.org.au/wp-content/uploads/2023/09/230502_8_Stronger-ACCOs-Stronger-Families-Report.pdf

Tarshis, S., & Baird, S. (2019). Addressing the indirect trauma of social work students in intimate partner violence (IPV) field placements: A framework for supervision. *Clinical Social Work Journal*, 47(1), 90-102.

Tronto, J. (2013). *Caring democracy: Markets, equality, and justice.* New York University Press.

UNSW Social Policy Research Centre. (2019. *Researching the economic dimensions of domestic and family violence: Information gaps and data strategies.* ANROWS. https://www.anrows.org.au/resources/researching-the-economic-dimensions-of-domestic-and-family-violence-information-gaps-and-data-strategies/

Victorian State Government. (2016). *Royal Commission into Family Violence: Summary and recommendations.* Victoria State Government.

Victorian State Government. (2019). *Family violence capability frameworks.* https://www.vic.gov.au/family-violence-capability-frameworks

Victoria State Government. (2019). *Building from Strength: 10-year Industry Plan for Family Violence Prevention and Response.* https://www.vic.gov.au/sites/default/files/2019-05/Building-from-strength-10-year-industry-plan-for-family-violence-prevention-and-response.pdf

WA Government. (2024). *Strengthening Responses to Family and Domestic Violence: System Reform Plan 2024 to 2029.* https://www.wa.gov.au/system/files/2024-04/fdv-system-reform-plan_0.pdf

Walby, S. (1990). *Theorizing patriarchy*. Basil Blackwell.

Ward, J., McMurray, R., & Sutcliffe, S. (2020). Working at the edge: Emotional labour in the spectre of violence. *Gender, Work & Organisation*, 27(1), 82–97. https://doi.org/10.1111/gwao.12377

Wendt, S., Chung, D., Elder, A., Hendrick, A., & Hartwig, A. (2017). S*eeking help for domestic and family violence: Exploring regional, rural, and remote women's coping experiences. Final Report.* ANROWS.

Wendt, S., Seymour, K., Buchanan, F., Dolman, C., & Greenland, N. (2019). *Engaging men who use violence: Invitational narrative approaches* (Research report, 05/2019). ANROWS.

Whitman, K. (2018). Working-class masculinities at the nexus of work, family and intimacy in the age of neoliberalism: Or, are the times really a-changin'? In C. Walker & S. Roberts (Eds.), *Masculinity, labour, and neoliberalism: Working-class men in international perspective* (pp. 265–287). Palgrave Macmillan. https://doi.org/10.1007/978-3-319-63172-1_12

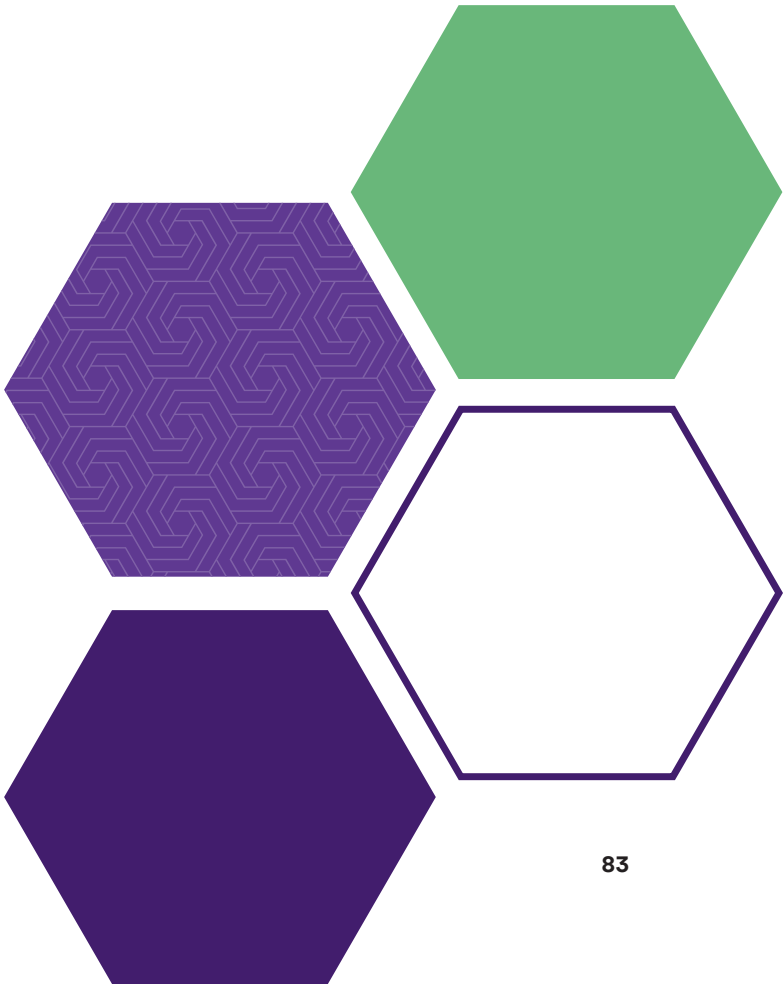
Wilcox et al. (2020) Interfaces of domestic violence and organisation: Gendered violence and inequality. *Gender, Work & Organisation*, 28, 701-721. DOI: 10.1111/gwao.12515

Wood, L. (2017). 'I look across from me and I see me': Survivors as advocates in intimate partner violence agencies. *Violence Against Women*, 23(3), 263-394. https://doi.org/10.1177/1077801216641518

Woodlock, D., Salter, M., Conroy, E., Burke, J., & Dragiewicz, M. (2022). 'If I'm not real, I'm Not Having an Impact': Relationality and vicarious resistance in complex trauma care. *British Journal of Social Work*, 52, 4401–4417. https://doi.org/10.1093/bjsw/bcac054

Woodlock, D., Salter, M., & Western, D. (2023). The "freedom work" of feminist domestic violence advocates. *Australian Social Work*, 1–13. https://doi.org/10.1080/0312407X.2023.2228289

WorkUP Queensland. (2023). Workforce Capability Framework (Domestic, Family and Sexual Violence and Women's Health and Wellbeing Sector). https://workupqld.org.au/wp-content/uploads/2023/11/Workforce-Capability-Framework-July-2023.pdf



Apendices

Appendix A

Perpetrator work	Victim-survivor work
E.g. Men's Worker	E.g. Women & children's Worker
SCHCDS Award level 5-6, $90,085-$102,771	SCHCDS Award level 5 $90,085 - $94,156
Position Purpose (66 words)	***Position Purpose*** (231 words)
Key Relationships Internal x 2 External x 2	***Key Relationships*** Internal x 2 External x 3 (+ various Govt depts)
Key Accountabilities (Total number of dot points = 7) 1. Intake and assessment 2. Facilitation 3. Counselling 4. Referral management (incoming) 5. Case management 6. Consultation 7. Coordination	***Key Accountabilities*** (Total number of dot points = 24) 1. Client work (including 7 sub points) 2. Teamwork (incl. 2 sub points) 3. Training (undertake) (incl. 2 sub points) 4. Projects, processes & compliance (incl. 8 sub points)
Competencies • Group work programs • Understanding of family violence • Counselling skills • Organisational skills • Communication skills ('well-developed') • Information technology skills • Interpersonal skills ('Well-developed interpersonal skills with the capacity to liaise effectively with ....') • Experience of intervention models	***Competencies*** • Teamwork (incl. information sharing, support others, show consideration, concern and respect) • Problem solving ('specialist problems') • Time management (efficient use of available resources, timely, etc) • Ability to manage tasks • Negotiation skills (re: 'delivery of conflicting time critical tasks') • Interpersonal skills ('ability to gain cooperation and communicate') • Attention to detail • Relationships (gain cooperation & assistance from other staff) • Responsiveness (to organisation & managers) • Judgement and decision making (with 'well-defined objectives re: method, process or equipment selected from a range of available alternatives') • Written communication skills (clear & accurate)
Qualifications/requirements Relevant tertiary undergraduate degree (in social work, psychology, counselling, or a related subject). Graduate diploma / cert qualification in men's family violence. 100 hours of experience facilitating men's behaviour change programs	Not included as a separate heading or section
Key selection criteria 8 criteria	***Key selection criteria*** 14 criteria including – • relevant tertiary qualification in social work, psychology, community services &/or a related human services field • at least 2 years' experience in a family violence or related role.

Appendix B

PARTICIPANTS		
Pseudonym	*Role*	*Regional/Metro*
Alex	Victim Support	Metro
Alice	Victim Support	Regional
Amanda	Victim Support	Metro
Anita	Men's Worker	Regional
Anne	Victim Support	Metro
Arthur	Men's Worker	Metro
Avery	Victim Support	Metro
Barbara	Victim Support	Metro
Bethany	Victim Support	Metro
Bethany	Victim Support	Regional
Beverly	Victim Support	Regional
Billie	Men's Service (Support)	Regional
Bree	Aboriginal Service	Metro
Brenda	Men's Worker	Metro
Bridget	Victim Support	Regional
Brook	Victim Support	Metro
Byron	Victim Support	Regional
Caroline	Victim Support	Metro
Catherine	Victim Support	Metro
Charlotte	Victim Support	Metro
Chelsea	Victim Support	Metro
Chris	Men's Service (Support)	Metro
Cindy	Victim Support	Metro
Cleo	Aboriginal Service	Metro
Danielle	Aboriginal Service	Metro
David	Men's Worker	Metro
Deborah	Victim Support	Regional
Diane	Victim Support	Metro
Dorothy	Victim Support	Regional
Eileen	Victim Support	Metro
Ella	Men's Worker	Metro
Emily	Victim Support	Metro
Estelle	Victim Support	Regional
Esther	Victim Support	Metro
Evie	Victim Support	Regional
Felicia	Aboriginal Service	Metro
Fiona	Victim Support	Regional

Florence	Victim Support	Metro
Frankie	Men's Service (Support)	Metro
Gabrielle	Victim Support	Metro
Gena	Victim Support	Metro
Gillian	Victim Support	Metro
Hannah	Aboriginal Service	Metro
Harper	Aboriginal Service	Metro
Helen	Victim Support	Metro
Hilary	Victim Support	Regional
Holly	Victim Support	Metro
Hope	Victim Support	Regional
Indi	Victim Support	Regional
Isla	Victim Support	Regional
Jocelyn	Victim Support	Metro
Janelle	Victim Support	Metro
Janine	Victim Support	Metro
Jasmin	Victim Support	Metro
Jemma	Men's Service (Support)	Metro
Jenna	Victim Support	Regional
Joel	Victim Support	Regional
Joy	Victim Support	Regional
Kerri	Victim Support	Metro
Kiera	Victim Support	Regional
Kirsten	Victim Support	Regional
Kristina	Aboriginal Service	Metro
Kylie	Aboriginal Service	Metro
Lainie	Victim Support	Regional
Lexi	Victim Support	Metro
Laura	Victim Support	Metro
Lauren	Victim Support	Metro
Lena	Victim Support	Regional
Leonie	Victim Support	Metro
Lily	Men's Worker	Regional
Lorraine	Victim Support	Metro
Louise	Victim Support	Metro
Maddie	Victim Support	Metro
Malcolm	Men's Worker	Metro
Mariana	Aboriginal Service	Metro
Marion	Victim Support	Regional

Marlene	Victim Support	Regional
Martine	Men's Worker	Regional
Maryam	Aboriginal Service	Metro
Matilda	Men's Service (Support)	Metro
Matthew	Men's Worker	Metro
Meera	Victim Support	Metro
Meg	Men's Worker	Metro
Mei	Victim Support	Metro
Mia	Victim Support	Metro
Millie	Victim Support	Regional
Mindy	Victim Support	Regional
Monica	Victim Support	Regional
Nadine	Victim Support	Regional
Naomi	Men's Worker	Metro
Naomi	Victim Support	Metro
Nicole	Victim Support	Regional
Nina	Men's Worker	Metro
Pam	Victim Support	Regional
Patricia	Aboriginal Service	Metro
Peter	Men's Worker	Regional
Poppy	Aboriginal Service	Metro
Richard	Men's Worker	Metro
Rita	Victim Support	Metro
Ruth	Men's Service (Support)	Metro
Sadie	Victim Support	Metro
Sage	Victim Support	Metro
Sabrina	Aboriginal Service	Metro
Sally	Men's Worker	Metro
Sandra	Aboriginal Service	Metro
Sasha	Victim Support	Metro
Selina	Victim Support	Metro
Skye	Men's Service (Support)	Metro
Sonia	Victim Support	Regional
Sophie	Victim Support	Metro
Sylvia	Victim Support	Regional
Tamara	Both Victims and Perpetrators	Regional
Tamsin	Victim Support	Regional
Tessa	Victim Support	Regional
Thalia	Victim Support	Metro

Thea	Men's Service (Support)	Metro
Tim	Men's Service (Support)	Metro
Tina	Victim Support	Metro
Vanessa	Victim Support	Metro
Veronica	Men's Worker	Regional
Victoria	Victim Support	Metro
Virginia	Victim Support	Metro
Vivian	Victim Support	Regional
Yasmin	Men's Worker	Regional
Zara	Victim Support	Regional
Zoe	Aboriginal Service	Metro

Appendix C

FDV workforce development and planning: Australian states and territories

		Targets	Structure	Indicative Actions
NT	***The Northern Territory (NT) Domestic, Family and Sexual Violence Workforce and Sector Development Plan***	Workforce and Sector Development Workers "across the spectrum of prevention, early intervention, intervention, recovery and healing responses" - including "universal workers" (for whom FDV is not their core business), statutory workers, and specialised FDSV workers. (p. 3)	Three focus areas (p. 5): **1. Workforce Capability** (Workers have the right skills and support to provide effective services)	• Foundational and advanced / specialist training • Practice and service standards
			2. Organisational Capability (Specialist FDSV services are accountable, sustainable, responsive to emerging needs, and support the health and wellbeing of their workers).	• Governance • Occupational health and safety wellbeing (prevention & management) • Staff recruitment, retention and supervision • Service standards
			3. Sector Development (The specialist FDSV sector is strong, sustainable, collaborative and integrated, so that clients experience a joined up system).	• Shared standards, training and practice tools • Interagency collaboration & information sharing • Communities of practice
WA	***Strengthening Responses to Family and Domestic Violence: System Reform Plan, 2024 to 2029***	System-wide reform Workers across the system including government, non-government and Aboriginal Community Controlled Organisations	Workforce development is the first of the four 'pillars' (2. information sharing, 3. risk assessment and 4. risk management) (p. 6). **Pillar 1. Workforce Development** Goal: A system-wide workforce where everyone is clear about their roles and responsibilities and have the knowledge and skills to provide safety-focused, family violence informed and culturally appropriate responses to victim-survivors and those using violence.	Developing a FDV Workforce Capability Framework
				Establishing a dedicated FDV workforce 'entity' (to "develop and support FDV informed workforces") (p. 8)
				Embedding family and domestic violence workforce capabilities (e.g. quality or practice standards)
				Establishing minimum training standards
				Appropriate responses for employees who are experiencing or using FDV

		Targets	Structure	Indicative Actions
NSW	***Working together to address DVSV, NSW Women's Safety Commissioner, Strategic Plan 2024–2027.*** NB: NSW Department of Communities and Justice is currently working on a 10-year FDV workforce development strategy with the Workforce Innovation & Development Institute at RMIT.	System-wide reform. Specialist and general workforces Informal support networks	Six priority areas focused on improving ways of working across the whole system, strengthening accountability and driving broader societal change (p. 29) **Priority 5. Strengthening workforces and informal support networks** Objective: Build the capacity of specialist and general workforces as well as informal support networks to identify, prevent and respond to DFSV (p. 34)	Support the flow of skilled workers into the specialist DFSV sector (by, for example, improving qualification and training options, and strengthening relevant course content in general education programs)
				Advocate for ongoing training and capacity building, both for workers in the specialist DFSV sector and for other workers who regularly respond to DFSV but are not specialists
				Raise awareness and strengthen the capacity of informal networks and communities to identify, prevent and respond to DFSV
QLD	***Workforce Capability Framework*** ***(WorkUP Queensland, 2023).***	Domestic, Family and Sexual Violence and Women's Health and Wellbeing Sector Qld gov funded	Five "high-level capability" domains to "grow, retain, develop, support, connect and sustain the workforce" (p. 4) Identification of 4 'workforce levels': Allied support; Leaders; Practitioners; Advanced Practitioners (p. 11) 3- 4 "supporting capabilities" identified for each domain, aligned with specific workforce levels.	Capability domains: 1. Understanding the nature, drivers, and context of domestic, family and sexual violence and trauma
				2. Upholding dignity and value through healing-centred engagement
				3. Managing risk, prioritising safety, and recovery
				4. Working as part of an integrated system
				5. Demonstrating a reflective and self-aware approach

Appendix D

Data mapping: Specialist FDV work (Victim-survivors)

	Global – National	National – Local	Service systems & provision	DFV Sector / Org.	'The work' of DFV
↑ **Colonialism** **Neoliberalism** **Dominant discourses (gender, violence, 'race', etc.)** **Politics of knowledge (power / knowledge)** **Gendered organisations, gendered work** ↓	Political and socio-economic contexts Rising inequality	Global – national Cost of living crisis Housing crisis	"gradual economisation of the welfare state" (Phillips & Heward-Belle, 2023, p. 225) Service systems – under stress (capacity, demand) → Service systems –adequacy & accessibility →	High demand for services Short-term, competitive funding Complex, multiple / high needs of service users →	Overload Intensity of work & impacts for self Spillover between work & home* On-call, after-hours and remote work* Changing nature of the 'client' Emotional labour (high stakes)
	Gender politics (gender equality)	Counting of deaths Use of media	Contested Feminism / backlash politics →	More than just a job	'look after one another'* Importance of team relationships & peer support (but also adds to work load; invisible labour)
	Gendered work	(De)Politicisation Mainstreaming	De-professionalisation: reductive focus on tasks & roles, quantification of work	Work devalued Forms, record-keeping Case management Managing risk	What is the work? Established processes & limits – make work more challenging and render invisible its more complex dimensions

	Global – National	National – Local	Service systems & provision	DFV Sector / Org.	'The work' of DFV
	*In*equalities Care under capitalism Commodification of care Gender binary Individualism	Care / caring work Care roles as social reproduction Perpetrators OR victims	Care ethic ⟷ work ethic. Guilt (Allard & Whitfield, 2024) Systemic and institutional distinction Separate funding (& funding bodies, governance, etc) Stand-alone services (work against integration) "shift[s] the focus to the 'what' of the problem, not the 'who' is (usually) impacted" (Alldred, 2023, p. 4)	Undervalued, underpaid, under-recognised → Stripping out the 'care' Do the 'job' (and not the care) or Go 'above and beyond' (good will) and be exploited (in which case, chosen) → guilt Siloed services Lack of interagency connections & relationships	Invisible labour Not able to be contained to 'work' so muddies distinction between private and professional → impact on & exacerbation of unpaid caring workload 'be everything to everyone'* Sense of personal responsibility*; carrying risk
	Goal of FDV work: relationship ends, woman leaves (= safe)	Policy framing: accommodation as solution to problem of DFV Funding of services: DFV as a housing issue →	Crisis focus Shortage of accommodation (PRM, public & community housing) →	DFV as 'gateway' to accommodation Lack of housing 'exits' (bottlenecks)	Housing, not DFV, focus Case manager, not DFV worker

Appendix E

Data mapping: Specialist FDV work (Perpetrators)

	Global – National	National – Local	Service systems & provision	DFV Sector / Org.	'The work' of DFV
↑ **Colonialism** **Neoliberalism** **Dominant discourses (gender, violence, 'race', etc.)** **Politics of knowledge (power / knowledge)** **Gendered organisations, gendered work** ↓	Political and socio-economic contexts Rising inequality	Policy framing: Not all men (some men) Hold (individual) men to account Focus on 'high risk'	Service systems – capacity, demand, fragmented → Service systems –program based, time-limited, focused →	High demand for services but not necessarily high client numbers Lack of data re: perp services/programs Focus on immediate risk mitigation (not long-term change)	What is the work? Who is doing the work?
	Gender politics (gender equality)	Men as part of the solution 'Healthy' masculinity	Backlash politics	Stigma for men?	Men's work Valuing of men
	Gendered work	Gendered construction of the work & the worker	Need more men Men's workforce strategy Recruitment, retention	Perpetrator work as specialist, separate Find the "right" men and keep them	Ideal worker = Man Shortage of men "we need male workers"
	Gender binary	Perpetrators OR victims	Services & Funding → Courts, policing, perp programs; violence prevention / community awareness Complex, multiple / high needs of service users → dilution of focus on DFV Conflicting messages re: responsibility	Siloed services (victim services / perpetrator services) Limited integration Is child protection also perp work? What about youth work? (See Alldred, 2023 – not just an adult problem)	Challenging work ? Gendered work: - Personal - resonance / impacts & importance of peer support (for women) - Professional – stimulating, 'fun', all-male groups
				Partner contact as women's work? (Whose role?) Investment in?	Inconsistent / inadequate focus on safety (in perp work) Where does risk sit?

	Global – National	National – Local	Service systems & provision	DFV Sector / Org.	'The work' of DFV
	Punishment versus treatment Violence as individual behaviour / choice	Goal of FDV work = behaviour change Abusive attitudes and behaviour Violence as chosen and/or learnt (mad, bad, 'cultural') Decontextualisation Separation of 'types' of violence	Separation of legal/criminal and service contexts Purpose: Change men's behaviour (client = men → compliance / completion)? OR keeping women safe (client = men and women → safety)? Lack of focus on broader sociopolitical & global contexts 'different systems, politics and policies' (Hearn, 2020, p. 26)	Emphasis on assessment and information, less so on service provision (bottlenecks) Assessment (information, documentation, etc) versus engaging/ working with perp (difficult conversations, resistance, etc) Service delivery, not social change Individual, not community change ('not funded for that')	Structure (beginning and end), managed / manageable, 9-5 Established processes & limits – make work manageable and visible Perps can choose not to engage (service ends) Skills / confidence < job satisfaction Frustration
	Covid / Pandemic	Impacts Post-Covid		Online delivery of MBCPs	> isolation Change nature of work

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