

Royal Commission into Domestic, Family and Sexual Violence

Report

South Australia | August 2025

With courage: South Australia's vision beyond violence

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ROYAL COMMISSION
INTO DOMESTIC, FAMILY
AND SEXUAL VIOLENCE

Acknowledgment of Country

The Royal Commission into Domestic, Family and Sexual Violence (the Commission) acknowledges the traditional countries and Nations throughout South Australia on which the Commission has conducted its inquiry.

The Commission acknowledges all Aboriginal people across South Australia who are the Traditional Custodians of the land and waters and of the oldest continuous living culture on Earth. We pay our respects to Elders past, present and emerging.

The Commission acknowledges and honours the work of Aboriginal people to end domestic, family and sexual violence. Aboriginal people have been caring for their families, their communities and their country for millennia. The Commission recognises that self-determination is essential to addressing the rates of domestic, family and sexual violence experienced by Aboriginal people.

Acknowledgment of people with lived experience

The Commission is indebted to the victim-survivors of domestic, family and sexual violence in South Australia who have shared their lived experiences and expertise with the Commission and to the community groups and organisations who supported victim-survivors to share this advice with the Commission.

The Commission pays its respects to all those whose lives have been tragically cut short because of domestic, family and sexual violence, along with the loved ones who have been left behind. This includes the children and young people whose lives have been taken through domestic, family and sexual violence. This also includes the adults, children and young people who have died by suicide as a result of domestic, family and sexual violence.

The systems that provide services to people experiencing violence will always, without doubt, be better able to provide those services when there is a safe and effective way for these systems to learn from lived experience. The Commission reminds all those tasked with responding to this report of the diversity of people with lived experience, and of the need to ensure this diversity is represented when seeking the advice and expertise of victim-survivors. This includes the advice and expertise of children and young people.

The Commission has published 'Voices', an accompanying report in the words of the victim-survivors and supporters who shared their lived experiences and expertise with the Commission.



Cause no harm by Rachel Abdulla, 2025

This is a summary of the full description of the *Cause no harm* artwork painted by respected artist and Ngarrindjeri woman Rachel Abdulla. The piece was commissioned by the Royal Commission in early 2025. A full description of this important artwork is included on the Royal Commission website.

This piece tells the story of family, connection to land, lore and love, especially for First Nations people. It speaks of the importance of culture, community, inclusivity, safety, listening and learning.

The Grandfather Tree speaks of the
'journey of healing' and reminds us:
Healing is sacred.
It begins with truth.
It survives through unity.
It thrives in stories.

And it rises – sunset after sunset – with the power of the people.

Rachel is remembered for her work and advocacy in the domestic, family and sexual violence sector, as well as her beautiful artwork.

A note regarding the voices in this report

Throughout this report, submissions, quotes and Share With Us responses have not been edited for spelling or grammar, to preserve the authentic voices of those who have contributed to the Commission.

As this report contains direct quotes from people with lived experiences and those who support them, some content may be distressing or triggering.

Please take care while reading this report and reach out to support services, such as 1800RESPECT, if you need assistance.

Notes on language

As noted in the Commission's Issues Paper, language matters. Not all people prefer or use the terms the Commission uses in this report or in its other publications. These notes on language are included to provide some context to the Commission's use of particular terms, and to explain what is meant when these terms are used.

Aboriginal

The Commission uses the term 'Aboriginal' to refer to people who identify as Aboriginal, Torres Strait Islander, or both Aboriginal and Torres Strait Islander. The Commission acknowledges the different terms used throughout South Australia, including the terms 'First Nations people', and has determined its approach with the Aboriginal Partnership Committee.

CALD

'Culturally and linguistically diverse' or 'CALD' is used to describe people who have a cultural background that differs from Anglo-Australian culture, or whose primary language is not English. It includes people born outside Australia and people born in Australia from non-English speaking backgrounds. Far from suggesting a homogenous group, it encompasses a wide range of people with different experiences and needs.

Disability

The term 'disability' is used to reflect the language and definition in the *Equal Opportunity Act 1984* (SA).

Domestic abuse

In some parts of this report the term 'domestic abuse' is used instead of domestic, family and sexual violence. This reflects the terminology used in the *Intervention Orders (Prevention of Abuse) Act 2009* (SA), in certain other legislative provisions and by South Australia Police in some circumstances.

LGBTQIA+

This acronym stands for lesbian, gay, bisexual, trans and gender diverse, queer, intersex and asexual communities. The + signifies those who do not necessarily identify with any of the listed labels, but who do not conform to traditional heteronormative standards. Where the report departs from the use of this acronym, it is to reflect a specific service, organisation or group of people.

Lived experience and Victim-survivor

The use of the term 'person with lived experience' carries an acknowledgment that, for many people with lived experience of domestic, family and sexual violence, the experience is both lived and living – it is ongoing.

The Commission's Terms of Reference, Issues Paper and The Journey So Far use the term 'victim-survivor'. This term acknowledges the ongoing effects and harm caused by violence, as well as honouring the strength and resilience of people who have experienced violence.

The Commission has also used the term 'person experiencing violence' and 'person with lived experience of violence' throughout its inquiry. This report uses all of these terms in acknowledgement of the diversity of preferences across individuals and the sector.

It is important to remember that these terms include children and young people, who experience domestic, family and sexual violence and are victim-survivors in their own right. The Commission's Terms of Reference explicitly refer to this, along with the need to recognise that the overwhelming majority of victim-survivors are women and children.

Person using violence

This report uses the term 'person who uses violence' when referring to an individual who uses domestic, family or sexual violence to cause harm to another. This report occasionally uses different terminology in particular contexts; for example, 'perpetrator' is used in the context of particular programs or services that use that term, 'offender' is used in the context of South Australia Police operations and policies, and 'accused', 'defendant' or 'respondent' is used in the context of the justice system. As outlined in the Commission's Terms of Reference, it is recognised that the overwhelming majority of people who use violence are men.

ROYAL COMMISSION
INTO DOMESTIC, FAMILY
AND SEXUAL VIOLENCE

14 August 2025

Her Excellency the Honourable Frances Adamson AC
Governor of South Australia
Government House
ADELAIDE SA 5000

Your Excellency

On March 4 2024 you issued to me a Commission to inquire into and report on five areas aligned with the National Plan to End Violence Against Women and Children 2022-32.

It has been a privilege to assume this role and I dearly hope that this report will help address and prevent domestic, family and sexual violence in our home state in the future.

I hereby present you with my "***With Courage:*** *South Australia's vision beyond violence*" report, pursuant to the Commission addressing the Terms of Reference.

Yours sincerely

Natasha Stott Despoja AO
Royal Commissioner
Royal Commission into Domestic, Family and Sexual Violence

W: royalcommissiondfsv.sa.gov.au E: RoyalCommissionDFSV@sa.gov.au GPO Box 464, Adelaide, SA 5001

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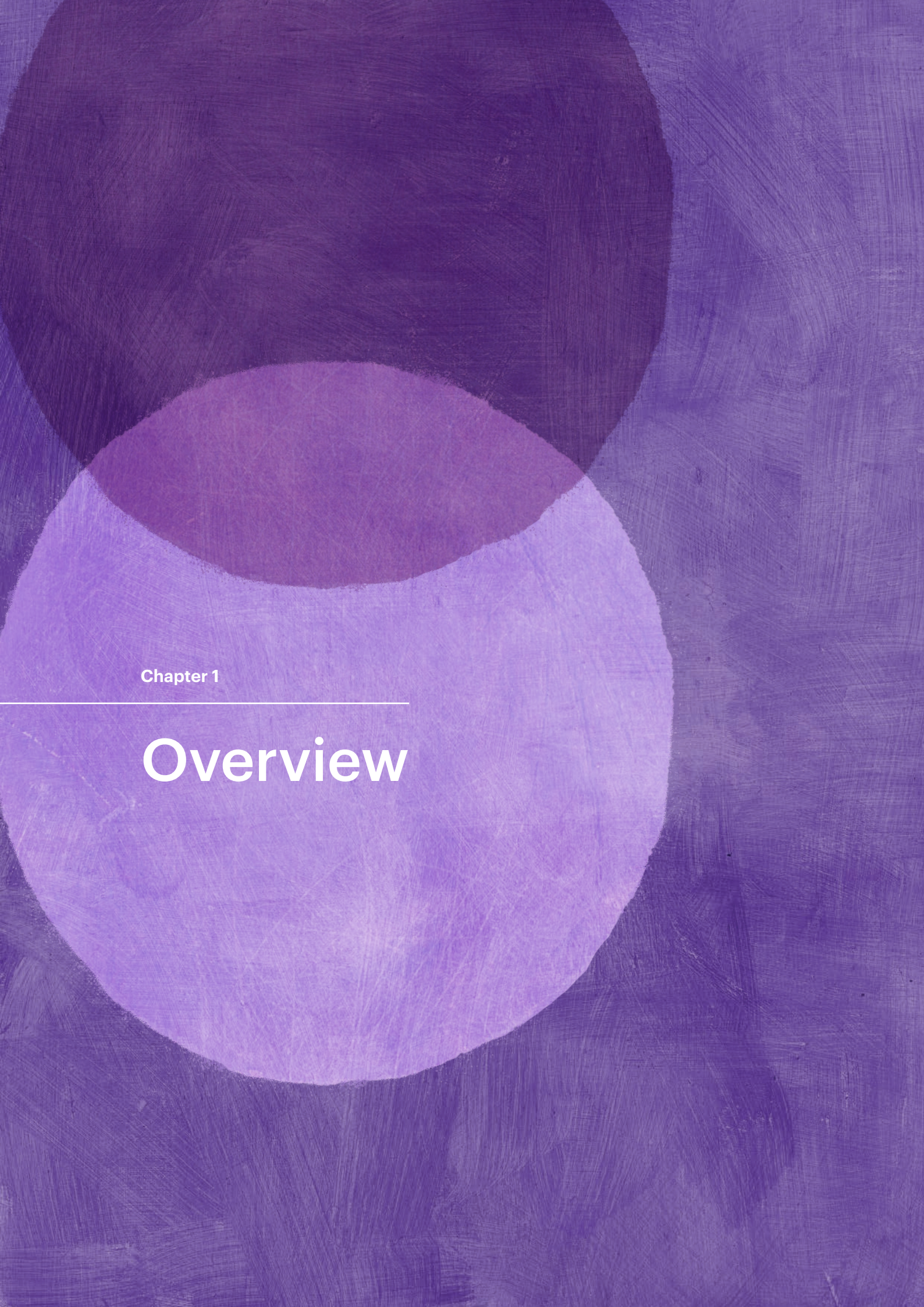
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Chapter 1

Overview

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Forewords

Commissioner Natasha Stott Despoja AO



This Commission was born out of unimaginable loss: four women's lives taken in one week in November 2023. This spate of fatalities shocked community and decision-makers alike.

It galvanised the domestic, family and sexual violence sector to call for this inquiry. Their tireless efforts have held the system together for decades, often against the odds.

Their advocacy was recognised by the Premier, the Hon Peter Malinauskas MP, with the establishment of the Royal Commission, and supported by Members of Parliament, across the spectrum. I am grateful for their faith in me and their goodwill towards the Commission.

The Terms of Reference for this Commission were wide-ranging and comprehensive, and our timeframe – one year – was ambitious.

It is thanks to an extraordinary team of compassionate and dedicated individuals, led expertly by Kim Eldridge, that we have been able to deliver such an expansive report in what is a relatively short time for a commission of this kind.

And, we did so without cutting corners. In fact, our consultations were extensive:

- We held more than 170 listening sessions in metropolitan, remote and regional South Australia.
- We ensured that the community had a genuine say, using an innovative survey tool 'Share With Us', through which more than 800 people participated.
- We received more than 380 written submissions.
- There were 10 days of public hearings with 48 sessions and 64 witnesses.

This is in addition to our desktop reviews and research, which built on the work of previous inquiries and commissions in this space.

I believe the result is a once-in-a-generation opportunity to prevent and respond to domestic, family and sexual violence in our state.

This report explores the prevalence of this violence, its gendered drivers, and the complex risk factors that underpin it. Critically, it calls for a systemic overhaul of how we fund, structure and coordinate our effort, placing prevention, early intervention, response, and recovery and healing at the centre of a more accountable and effective system.

We remain the only state without a dedicated, whole-of-government strategy to prevent and respond to domestic, family and sexual violence. That must change. South Australia needs a statewide strategy with prevention at its core.

The Commission's use of the term *'people who use violence'* is not meant to diminish the deeply gendered nature of this violence. We acknowledge, unequivocally, that most victim-survivors are women and children, and the majority of people who perpetrate this violence are men.

We recognise that some communities are severely underserved. There is a glaring lack of culturally safe and Aboriginal-led services. Services for LGBTQIA+ people, people with disability, culturally and linguistically diverse communities, men who are victim-survivors and men who use violence are chronically underdeveloped or missing entirely. Services for children who have experienced domestic, family and sexual violence are almost non-existent.

Integral to this Commission has been partnership with Aboriginal people. The creation of an Aboriginal Partnership Committee has ensured that all recommendations affecting service delivery to Aboriginal people and communities have been developed with Aboriginal people. I thank Scott Wilson, co-chair of the Partnership Committee, and all the members for their leadership and wisdom.

I am also grateful to the members of the Commission's Advisory Group, with a diverse array of specialist knowledge and a passion to end domestic, family and sexual violence in our home state.

I wanted the views of children and young people not only to be heard, but acted upon. They have shaped these recommendations at every stage, and they must remain at the centre of their implementation. As Conor Pall, family violence advocate, said of the Commission:

> **"The way forward must be built on pillars of hope - the hope that comes from leaning in and learning from the voices of young people.**

There are many experiences that will stay with me forever such as the message stick from Aboriginal children who had experienced family violence; candid discussions with men and women in custody; the privilege of spending time on the APY Lands; being trusted by young people at the Student Summit; emotional discussions in refuge accommodation with women and children; watching confronting situations play out in the SAPOL communications centre; a beautiful welcome ceremony from the NPY Women's Council in Alice Springs; and many more.

There are also stories that will haunt me.

But, overall, I will never forget the bravery, honesty and kindness of everyone with whom I had the privilege of speaking. My heartfelt thanks for your trust.

My special thanks to the wonderful Royal Commission team: Jenny, Jess, Julian, Katie-Jane, Kellie, Kerryn, Charlotte and Kim.

This Commission was always designed as 'forward facing', hence, a strong focus on practical change. I realise there are processes and changes that will require investment and time and that the South Australian government needs to weigh up and prioritise these recommendations.

Some truths are already clear and demand immediate action.

This report is our call to action. The recommendations build on the good work already underway and lay out a roadmap to a South Australia in which domestic, family and sexual violence is no longer tolerated and no longer possible.

The good news is that this violence is preventable. When it does occur, we can respond with care, with compassion and with trauma-informed systems that support healing and long-term recovery.

My vision – and our collective responsibility – is to create a South Australia that is respectful, equal, and free from violence. I know that is ambitious, but so is the courage of those who have demanded better, including children and young people.

We owe it to every victim-survivor who has suffered in silence or spoken up with courage, and to the frontline workers and service providers who show up every day with unwavering commitment to safety, healing and justice, to act decisively and without delay.

The late Helen Oxenham – one of the founders of women's shelters in South Australia – helped create what she named The Place of Courage: a 'permanent, visible tribute to the victims and survivors of DV'. Her vision lives on. It is now our time for South Australia to lead with courage.

I hereby commend this report to the people of South Australia.

Scott Wilson, Lead Convenor, South Australian Aboriginal Community Controlled Organisation Network; Olive Bennell, CEO, First Nations Healing; and Tosha Sambo, Deputy CEO, Family Violence Legal Service Aboriginal Corporation (SA)

The Commission's establishment of an Aboriginal Partnership Committee was an Australian first.

We were honoured to be nominated by the South Australian Aboriginal Community Controlled Organisation Network (SAACCON) to represent Aboriginal peoples' interests in relation to the domestic, family and sexual violence sector on the committee, and to work in equal partnership with Commissioner Natasha Stott Despoja AO, to produce this historic and significant report.

Our committee was one of the many ways the Commission sought the advice and expertise of Aboriginal peoples, their organisations and their communities throughout its inquiry.

We wanted our work to reflect what Aboriginal peoples and communities were thinking and feeling about domestic, family and sexual violence – in short, to focus on what we can all do to bring an end to it.

It is important we acknowledge the generosity of the Aboriginal peoples who chose to engage with the Commission and share their knowledge and ideas for change. There has been no shortage of commissions, inquiries or consultations that have held promise for transformational change for Aboriginal peoples, but which have fallen short in impact. Our communities' willingness to continue to turn up, to tell their stories and to demand change shows our strength and our conviction that reform with impact is possible.

The report acknowledges that self-determination is essential to addressing the rates of family, domestic and sexual violence experienced by Aboriginal peoples, as well as the over-representation of Aboriginal peoples in current service systems. It was pleasing the Commission was committed to conducting its inquiry in alignment with the Closing the Gap objectives and priority reforms.

Our committee met 5 times between September 2024 and June 2025, each time reviewing and assessing progress, while also providing the Commissioner and Secretariat with directions and advice on issues falling under the Partnership Agreement. We acknowledge the work of the Commissioner, a fierce advocate for the elimination of all forms of violence against Aboriginal and Torres Strait Islander women, children and families, for her commitment to working with us in equal partnership. We also acknowledge the work of the Commission's Secretariat whose commitment to partnership was evident in all of its work.

Many of the report's recommendations have been inspired by the work already underway within our specialist domestic, family and sexual violence community-controlled services. Aboriginal ways of seeing, being, doing and healing are essential to addressing violence across all South Australian communities. The report is another opportunity for all South Australians to learn from the strength and knowledge of the oldest continuing culture in the world.

We are proud to endorse the report and its recommendations. The Commission has shown what is possible when decision-makers work in genuine partnership with Aboriginal peoples – it is now for the South Australian government to commit to the same approach in the work to implement recommendations.

At a glance

64
witnesses

173
listening sessions

10 days
of public hearings



Distance travelled by the Royal Commission

15,000+ km

292
young people

1,147
Share With Us consultations

136
recommendations

381
written submissions

1,300
people engaged with lived experience

5,000
people engaged

Introduction

This Commission has grounded its findings in the voices of the people in the South Australian community.

Over the past 12 months, the Commission listened deeply to thousands of people, hearing their stories, struggles, wisdom, questions, hopes and pain. The advice, aspirations and lived experiences shared by more than 5,000 people are not just acknowledged by this report; they are its heartbeat.

Their voices resonate throughout these pages, and are further amplified in the Commission's accompanying report, Voices.

The Commission listened to voices from across the breadth and depth of South Australia – people of all genders and sexual identities; people with diverse abilities, cultures and lived realities. From those with privilege to those without, from many generations and communities, their stories and experiences were heard.

Voices came from the frontlines: survivors, workers, academics, advocates, police, public servants, service providers, and national and state commissioners. More than 1,300 people with lived experience of domestic, family and sexual violence shared their stories.

The Commission didn't just listen – it acted. It built deliberate, inclusive mechanisms to centre children's and young people's experiences, ensuring they help shape the path forward.

These voices powered the urgent call to action laid out in this report. Their bravery, courage and generosity in sharing deeply personal truths have illuminated the path forward, revealing not only what must change but also who must step up to make it happen.

The Commission has identified that lasting change demands collective responsibility and united action. Without both, the transformation we so critically need will remain out of reach.

It is as much the responsibility of police to ensure all police officers have the skills and knowledge to respond to domestic, family and sexual violence, as it is the responsibility of lawmakers to ensure that the regulation of liquor and gambling has reduction of harm as the primary outcome, as it is the responsibility of schools to ensure that all students receive the benefit of comprehensive and age-appropriate relationships and sexuality education, as it is the responsibility of governments to adequately fund services to meet the diverse needs of people who have experienced domestic, family and sexual violence.

The Commission recognises that many lived realities and experiences of domestic, family and sexual violence must be acknowledged and addressed simultaneously. Ongoing debates over which experience is more valid or which issue is most urgent allow governments to remain on the sidelines, delaying the deployment of policy, regulatory and funding levers that are clearly capable of reducing the frequency and severity of this violence. Collective action that addresses these diverse experiences, all at once, is urgently needed if we are to have any real chance of ending domestic, family and sexual violence **within a single generation.**

There is substantial evidence to support the following points:

- The majority of adult victim-survivors of domestic, family and sexual violence are women. In 2021–2022, 1 in 4 women in Australia reported experiencing violence by an intimate partner or family member since the age of 15, compared to 1 in 8 men.[1] These figures reflect a deeply gendered pattern of harm that must not be ignored. At the same time, children of all genders are impacted by domestic, family and sexual violence. Every child deserves a response that recognises their right to safety, dignity and support – to heal, recover and thrive beyond the violence they have endured.
- The ongoing and systemic social conditions that enable domestic, family and sexual violence across generations are rooted in harmful patriarchal norms embedded within society. Equally, intersecting systems of oppression and discrimination – such as racism, homophobia, transphobia, ableism, ageism, and the enduring impacts of colonialism – further sustain and exacerbate this violence in all its forms.
- Alcohol use does not, on its own, cause someone to commit domestic, family or sexual violence. However, alcohol was a contributing factor in nearly half of all high-risk domestic and family violence incidents reviewed by the South Australian Multi-Agency Protection Service (MAPS) in the 2023–24 financial year.[2]



- Australia has made impressive strides towards gender equality in recent years. This is evident in the World Economic Forum's Global Gender Gap Report, which shows that Australia has gone from 24th place in 2024 to 13th place globally in 2025.[3]
- Despite these results, there is still much work to do. The 2023–24 Workplace Gender Equality Agency Scorecard reports that for every dollar a man earns, on average, a woman earns just 78 cents.[4]
- Unpaid work remains unequally shared: data from Chief Executive Women (2022) shows that women in Australia, on average, do 81% more unpaid work than men, while undertaking 43% less paid work.[5] These persistent gaps point to the deep structural barriers still facing women in public and private life.
- At the same time, gendered inequalities are emerging in complex and intersecting ways. For example, 2024 NAPLAN data reveals that South Australian boys in Year 9 are more than twice as likely as girls to fall into the lowest literacy performance band and are also more likely to struggle in numeracy.[6] Meanwhile, Australian Institute of Health and Welfare data highlights that qualification levels vary across age and gender. Among people aged 50–77, men are more likely than women to hold a non-school qualification; the reverse is true for those aged 15–49.[7]

These patterns highlight the need to address gender inequality as a shared challenge. They should never be used to diminish the urgency of advancing gender equality or to undermine its vital role in preventing domestic, family and sexual violence. Instead, they speak to the complexity of our society and the importance of building inclusive responses and approaches that work for everyone.

The origins of the domestic, family and sexual violence sector in South Australia

South Australia holds a significant place in the history of feminism and women's rights. Its progressive strides towards gender equality, together with the establishment of the refuge movement, reflect a broader commitment to justice, safety and empowerment.

South Australia was the first Australian colony and one of the first places in the world in which all women attained not only the right to vote but also the right to stand for election to Parliament with the passage through the South Australian Parliament of the *Constitutional Amendment (Adult Suffrage) Act 1894* (SA) on 18 December 1894. This fight for women's suffrage and equal rights led the way for subsequent feminist waves that tackled a range of issues, from reproductive rights to combating gender-based violence.[8]

The refuge movement in Australia was closely tied to the feminist activism of the 1970s and 1980s. This period saw a growing awareness of domestic violence as a system issue that demanded urgent societal and governmental attention. Feminists at the time challenged the patriarchal structures that perpetuated violence and worked to support victim-survivors. Some faced government approbation and investigation.[9]

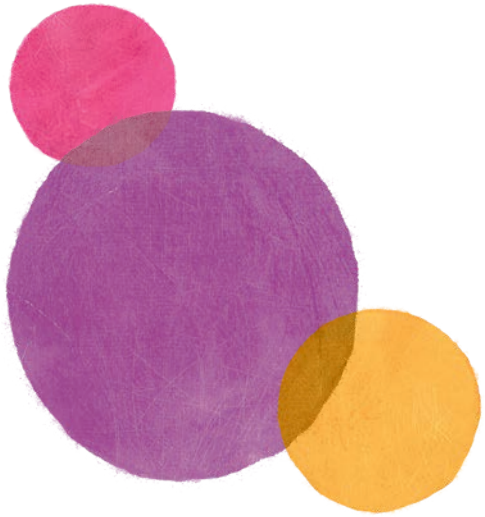
Documentation on the origins of the refuge movement in South Australia is limited, rendering invisible the enormous and sustained efforts to establish refuges and agitate for reform. Some written accounts identify the first non-government women's refuge as having been established in 1977 in Christies Beach by founders Helen Oxenham OAM,[10] Peggy Robinson, Josephine Harvie and Connie Frazer.[11] Others refer to the establishment of a women's shelter in 1973 by Annette Willcox, with the shelter receiving formal recognition and funding from the government in 1974.[12] All accounts speak of the work that was required to establish these safe havens for women escaping domestic violence, and the crucial role of refuges in establishing a solid South Australian base for continuing advocacy to change the systems and structures which perpetuated domestic, family and sexual violence. The development of a comprehensive written history of the refuge movement in South Australia would be a welcome addition to South Australia's existing records.

The decades following the establishment of South Australia's first women's refuges saw expansion across the state, driven by both feminist collective and government initiatives. In 2016, 3 frontline domestic and family violence non-government organisations merged to establish Women's Safety Services SA (WSSSA).[13] WSSSA, proudly women led, continues to be the lead (and in some instances sole) provider of a number of specialist domestic and family violence services in South Australia, including the Domestic Violence Crisis Line, multi-agency hubs, and the Domestic Violence Disclosure Scheme (DVDS).[14]

In 2025, the diversity of non-government organisations funded to provide domestic, family and sexual violence services has grown to include organisations such as the Australian Refugee Association, SHINE SA and Thorne Harbour Health in acknowledgment of the complexity of domestic, family and sexual violence and the need to embed responses within community-led organisations.[15]

Funding has also, for the first time, been directed at partnerships between organisations to provide innovative and community-led programs, including a highly successful collaboration between 2 Aboriginal Community Controlled Organisations: First Nations Healing and Kornar Winmil Yunti Aboriginal Corporation (KWY).[16]

Unlike the services provided by the domestic and family violence non-government sector, services in response to sexual violence in South Australia are largely provided by government. Yarrow Place Rape and Sexual Assault Service, operating out of Health and Recovery, Trauma Safety Services within the Women's and Children's Health Network, is the only specialist sexual violence service for people aged 16 years and over in the state.[17] Services to respond to sexual violence against children are also led from within SA Health, via the Child Protection Services operating out of the Women's and Children's Health Network, the Northern Adelaide Local Health Network and the Southern Adelaide Local Health Network.[18]



It is beyond doubt that the existence of these services is due to the tireless and courageous work of South Australian feminists and women-led organisations. The Commission acknowledges and thanks these individuals and organisations – the safety of women has rested on their shoulders for decades. This work and advocacy has also been the catalyst for significant change in how domestic, family and sexual violence is perceived and addressed. Legislative reforms, such as the restraining orders introduced in the 1980s (and replaced by intervention orders in 2011), have strengthened protections for people at risk of domestic, family and sexual violence. Public awareness campaigns and education programs have also contributed to shifting cultural attitudes towards gender equality and violence. The development of primary prevention frameworks has been relatively recent, and requires more investment, but increasingly are a core part of the approach to addressing domestic, family and sexual violence.

Despite progress, the challenges remain stark. Demand for safe accommodation and services continues to outpace supply. People in rural and remote areas, along with older people, people with disabilities, children and young people, culturally and linguistically diverse (CALD) communities, Aboriginal communities and LGBTQIA+ communities, face persistent and often insurmountable barriers to getting the support they deserve.

The Commission has heard one message loud and clear: South Australia – once a national leader in tackling domestic, family and sexual violence – has lost its way.

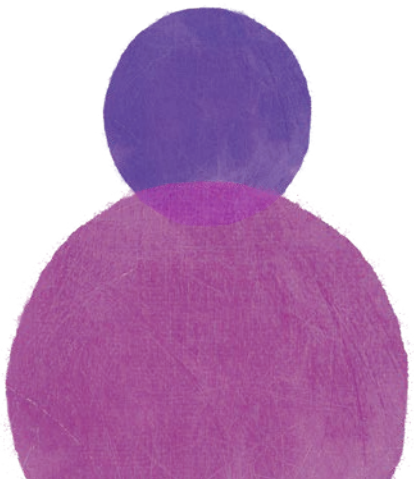
This moment is a call to action. It is a chance for South Australia to reclaim its leadership, to rise to the challenge, and to honour the vision set by the courageous women who ignited this work over 100 years ago.

Establishment of the Commission

In late 2023, after a series of deaths in South Australia involving domestic and family violence, which culminated in the horrific alleged murders of four women in just one week, the South Australian government announced the establishment of the Commission.[19] This announcement followed a sustained and passionate period of advocacy from domestic and family violence services, advocacy groups and lived experience advocates. Natasha Stott Despoja AO was appointed as the Royal Commissioner in March 2024 and the Commission commenced its work on 1 July 2024.

The Commission was originally asked to report its recommendations to Her Excellency the Governor of South Australia on 1 July 2025. The reporting date was later amended to 18 August 2025. The scale of engagement necessitated an adjustment to the Commission's timeframes.

The Commission was tasked with identifying how the domestic, family and sexual violence systems in South Australia can be improved across the spectrum of prevention, early intervention, response, and recovery and healing, so that these systems better meet the needs of those who use them and work within them.



The Commission's Terms of Reference (Appendix E) are comprehensive. They are underpinned by an intersectional approach, which requires the Commission, in making its recommendations, to have particular regard to the views and experiences of:

- victim-survivors and those with lived experience of domestic, family and sexual violence
- Aboriginal people, their communities and their organisations
- CALD communities
- LGBTQIA+ communities
- people living with a disability
- children and young people
- older South Australians
- people living in regional and remote communities
- experts, service providers and leaders in domestic, family and sexual violence
- medical professionals, including mental health providers
- police and the legal sector, including those involved in court administration and victim support.

In undertaking its inquiry, the Commission chose to interpret the reference to sexual violence in its Terms of Reference as encompassing not only sexual violence within the context of a domestic or family relationship but also sexual violence between people who have only just met, are known to each other, or between people who do not know each other at all. The Commission's Terms of Reference did not include sexual violence against children and young people outside of family relationships.

How the Commission conducted its inquiry

The Commission extends its deepest gratitude to every individual, group and organisation that bravely stepped forward to engage with this inquiry. Whether through written submissions, listening sessions, public hearings, or Share With Us, these voices have shaped this process in profound ways.

The stories shared were raw, courageous, and often deeply painful. Many were confronting. All were powerful. The strength it takes to speak truth – especially when that truth carries trauma – is immense. The Commission honours every person who found the courage to do so.

Aboriginal Partnership Committee

From the outset of the Commission, the Commissioner undertook to work in formal partnership with Aboriginal people. This commitment led to the establishment of the Commission's Aboriginal Partnership Committee, comprising:

- Commissioner Natasha Stott Despoja AO
- Scott Wilson, Lead Convenor, SAACCON
- Olive Bennell, Chief Executive Officer, First Nations Healing
- Tosha Sambo, Deputy Chief Executive Officer, Family Violence Legal Service Aboriginal Corporation (SA)
- Kim Eldridge, Executive Director, Commission secretariat.

Nerida Saunders, Executive Director, Aboriginal Affairs and Reconciliation, also joined the Aboriginal Partnership Committee as an independent member.

The Aboriginal Partnership Agreement establishing the Aboriginal Partnership Committee was signed by the Commissioner, Scott Wilson and Christine Brown (Chief Executive Officer of SAACCON). The objects of the agreement were to ensure the Commission developed recommendations regarding domestic, family and sexual violence sector service delivery to Aboriginal people and communities in partnership with the Aboriginal Partnership Committee, and to do so by ensuring the equal participation and shared decision-making by the members of the committee in developing those recommendations.

Written submissions

The Commission published an Issues Paper on commencement seeking initial responses to the Commission's Terms of Reference. The Issues Paper contained 15 questions to guide people in preparing their response.

Written submissions in response to the Issues Paper were sought by 16 August 2024. All other written submissions were sought by 27 September 2024. The 2 dates were chosen to give people as much time to prepare their submissions as possible, while still ensuring the Commission had sufficient time to read and analyse submissions before public hearings commenced in November 2024.

The response to the call for submissions was significant, with 381 written submissions received (Appendix D). The submissions represented a diversity of experiences, including from Aboriginal people, CALD communities, LGBTQIA+ communities, people with disability, people living in regional and remote communities, older people, young people, academics and researchers, service providers and leaders in the domestic, family and sexual violence sector.

The listening phase

During the course of its inquiry, the Commission undertook a significant program of engagement and consultation in metropolitan and regional locations across South Australia (Appendix C). This 'listening phase' was designed to ensure the Commission would hear from the South Australians who work within the many different parts of the domestic, family and sexual violence systems, and from South Australians who have experienced domestic, family and sexual violence. It also included people who use domestic, family and sexual violence. The Commission's key focus during the listening phase was ensuring that the diversity of experiences of domestic, family and sexual violence was heard.

There were more than 170 listening sessions which provided valuable insights and information to the Commission. Listening sessions took place in metropolitan Adelaide and its surrounding suburbs, with regional sessions undertaken in Port Augusta, Port Pirie, Kangaroo Island, Mount Gambier, Port Lincoln, Berri, Barmera, Renmark, Murray Bridge, Coober Pedy, the Anangu Pitjantjatjara Yankunytjatjara (APY) Lands, Alice Springs, Ceduna and Whyalla.

These sessions enabled the Commission to hear from domestic, family and sexual violence organisations, LGBTQIA+ community members and services, Aboriginal people (including the members of South Australia's First Nations Voice to Parliament) and Aboriginal community controlled organisations, migrant and refugee organisations and communities, homelessness service providers, faith leaders, disability and aged care service providers and advocates, child and family services, drug and alcohol services, health services, social workers, students, men and women in custody and leaving custody, people who have used violence, police, lawyers, community justice centres, judges and magistrates, Members of Parliament, South Australian and Australian commissioners, researchers and academics, schools, government agencies, Ministerial Advisory Councils and local government.

In acknowledgement of the number of Aboriginal and Torres Strait Islander people working in the domestic, family and sexual violence sector the Commission convened 2 Aboriginal and Torres Strait Islander frontline worker forums in November 2024 and April 2025. The Commission invited workers providing domestic, family and sexual violence service delivery from a range of organisations to share their advice and expertise across the 2 forums facilitated by Dana Shen Consultancy. A list of the frontline workers' employer organisations is at Appendix C.

Workers shared their expertise about the current service system gaps, and how the domestic, family and sexual violence systems in South Australia can better meet the diverse needs of victim-survivors, their families and their communities. Focus was also given to early intervention responses, healing and recovery, engaging men and boys, sexual assault service responses, family group conferencing, and the cultural safety and colonial load of workers in the sector.

The listening phase also included the release of the Commission's innovative online consultation, named 'Share With Us'. Share With Us was available from 8 October 2024 to 10 December 2024 and provided another way for people with lived experience, or those supporting people with lived experience, to share advice and information with the Commission. Participants were presented with a series of voluntary questions about the domestic, family and sexual violence systems in South Australia along with the ability to provide any other information they wished to share through an audio or written message. Share With Us was available in 12 languages.

The Commission would like to express its heartfelt thanks to the members of the Lived Experience Network in the Department of Human Services and the Consumer Engagement Committee in the Health and Recovery Trauma Safety Services division of the Women's and Children's Health Network. Both groups of lived experience advisors, together with lived experience advisors nominated by Embolden (South Australia's peak body for specialist domestic, family and sexual violence services), provided invaluable feedback on Share With Us prior to its release.

Share With Us attracted significant interest, with 1,147 responses received. Of those responses, 815 were fully completed and 332 were partially completed. Of the responses, 519 respondents left a text or audio response.

Due to the large number of Share With Us responses, the Commission engaged Curious Communities Consulting to undertake a review and analysis of the responses. A copy of the Analysis Report is at Appendix H.[20]

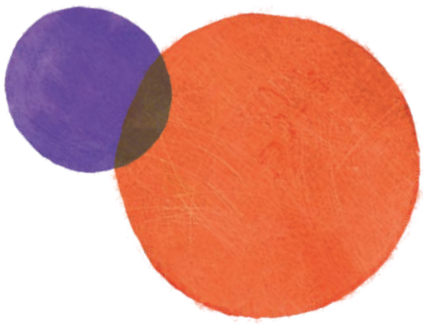
Alongside the listening phase, the Commission undertook numerous site visits to observe different elements of the domestic, family and sexual violence system. These site visits included:

- observing sittings of the Family Violence Court in Adelaide, Elizabeth and Port Adelaide
- observing domestic, family and sexual violence training at the South Australian police academy
- observing judicial officer training delivered by the National Judicial College of Australia
- a tour of the South Australia Police (SAPOL) communications centre and observing an example of a patrol response to a domestic abuse incident
- observing a session of the abuse prevention program Reset2Respect, which supports men to develop respectful relationships and to understand the impact violence and abuse has on others
- meeting with men undertaking the Domestic and Family Violence Intervention Program at Mobilong Prison
- meeting with women at Adelaide Women's Prison
- meeting with men undertaking an OARS Community Transitions pilot program at the Adelaide Remand Centre.

The Commission also conducted listening sessions in Melbourne, Victoria, to hear from domestic, family and sexual violence services, government agencies and commissioners about the implementation of the Victorian Royal Commission into Family Violence recommendations.

The final component of the listening phase was work undertaken by Good Government Advisory on behalf of the Commission to engage with, and better understand the needs of, the many non-government organisations who are providing services to people experiencing domestic, family and sexual violence in South Australia. Good Government Advisory met with 32 non-government organisations across a 2-month period, and asked questions about staffing, government engagement, funding, compliance and reporting, governance and leadership, workforce development and sector collaboration. Good Government Advisory's report, titled 'State of the Sector', provided valuable input to the Commission and described a non-government sector operating within a funding system that is crisis driven, administratively heavy and designed around government convenience rather than sector impact.

In acknowledgment of the commercial sensitivity of some of the information sought, the complete State of the Sector report will not be published. A summary report, produced with the consent of the interviewed organisations, is at Appendix I.



Children and young people

From the outset, the Commission developed specific engagement mechanisms to hear the advice and expertise of children and young people. The Commission undertook these approaches to ensure the voices of South Australian children and young people were heard.

Student summit

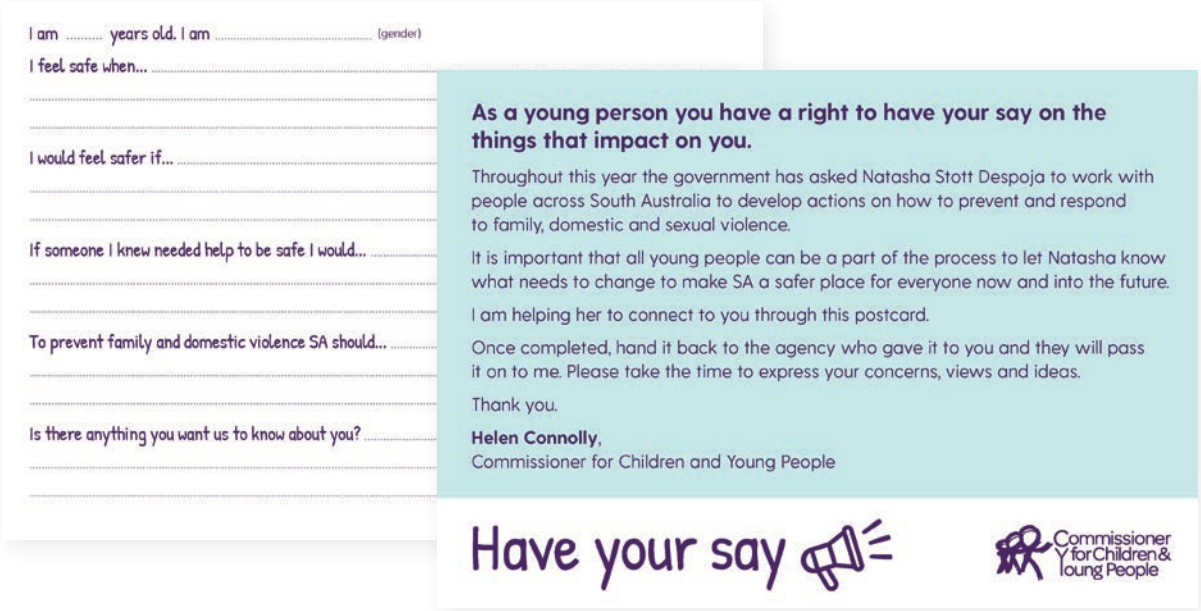
In November 2024, the Commission met with 89 Year 7 to 12 students from 15 South Australian public, independent and Catholic schools at a student summit on creating safety for all in South Australia.[21] The student summit was facilitated by Think Human and led by the South Australian Commissioner for Children and Young People with a keynote address from lived experience advocate, Conor Pall. It provided the Commission with important insights into the challenges faced by young people when it comes to their safety.

Key issues discussed included social media; the prevention of sexual violence, racism, stigma and bullying; safety on public transport, in schools and in public spaces and workplaces; and access to services for young people (especially in rural areas). The Student Summit Report is at Appendix J.

Commissioner for Children and Young People postcards

The Commission partnered with the South Australian Commissioner for Children and Young People to distribute postcards (Figure 1.1) to services working with children and young people so that children and young people could share their views with the Commission. More than 150 completed postcards were returned to the Commission. The content of the responses is a compelling and urgent call for domestic, family and sexual violence systems to better meet the needs of children and young people. Many of the responses are set out in the Commission's accompanying Voices report.

Figure 1.1: Commissioner for Children and Young People postcard



Silence and Inaction: Children and Young People's Experience of Violence and Systemic Failure in South Australia

Along with the student summit and postcards, the Commission engaged Dr Kate Fitz-Gibbon of Sequre Consulting to examine the experiences of children and young people who have lived experience of domestic, family and sexual violence and of the South Australian systems' responses to that violence.

The final report Silence and Inaction: Children and Young People's Experience of Violence and Systemic Failure in South Australia (the Silence and Inaction Report) draws on interviews with 53 children and young people aged 13–18 years and was released by Dr Fitz-Gibbon and Commissioner Stott Despoja AO on 11 July 2025.

The Silence and Inaction Report captures the voices of those whose perspectives are too often absent from policy, service design and system reform efforts.[22]

Their insights were bold, honest and insightful; they challenged the Commission to see differently, think differently, and act with greater urgency. Their voices were not only heard – they have been a vital force in shaping the Commission's vision for the systemic change that must now follow.



Public hearings

Given the nature of the work undertaken by the Commission and its focus on designing a domestic, family and sexual violence system to better meet the needs of those who interact with it, public hearings were primarily focused on understanding the way in which systems are currently operating, and exploring potential changes to those systems.

Five sets of public hearings lasting 2 days each were held between November 2024 and March 2025. The hearings focused on:

- Domestic, Family and Sexual Violence and Housing (Day 1) and Sexual Violence (Day 2)
- Primary Prevention in Schools (Day 3) and Effective Interventions (Day 4)
- Children and Young People (Day 5) and Intervention Orders (Day 6)
- Innovative Approaches (Day 7) and Empowerment and Recovery (Day 8)
- Family Violence (Day 9) and Helping Communities Thrive (Day 10).

Further detail on the public hearings and the witnesses is at Appendix F.

Public hearings were conducted by the Commissioner and Counsel Assisting, Ms Katie-Jane Orr. Witnesses were approached by the Commission. Some witnesses were identified by the Commission with others being nominated by their department or organisation. Witnesses appeared in person or via video link.

The public hearings were live streamed on the Commission's website. Video recordings and transcripts are available on the Commission's website.

Test and challenge sessions

As part of its inquiry, the Commission ran 6 'test and challenge' sessions with representatives from government agencies, with a focus on testing and refining the Commission's early findings as they related to government service delivery. The purpose of the sessions was to identify key gaps, inconsistencies and any practical considerations that the Commission had yet to identify.

Relevant government agencies were asked to nominate participants who had a strong understanding of their agency's role in the topic being discussed and the ability to engage meaningfully with the issues under discussion. Participants were asked to work together and provide insight as government experts – they were not asked to provide any formal position or the endorsement of their respective agencies.

In session 1, participants were asked to respond to high-level findings from the State of the Sector report, with a focus on the issues identified with government funding and reporting requirements.

In session 2, participants were asked to consider the consequences of implementing a statewide risk assessment and management framework.

In session 3, participants were asked to consider the court experience from the perspective of a person experiencing domestic, family and sexual violence. Topics included gaps in the provision of information, the role of court support workers and the establishment of more suites for vulnerable witnesses in more locations across South Australia.

In session 4, SAPOL was asked to discuss issues including organisational structure, opportunities for the development of multidisciplinary and multi-agency response models, the role of the Family Safety Framework (FSF) and Multi-Agency Protection Service (MAPS) and alternative reporting options.

In session 5, State Courts Administration Council members, court staff and judicial officers from the Magistrates Court, Youth Court, District Court, Supreme Court and the Court of Appeal were asked to consider the feedback the Commission had received about the operation of the intervention order systems and criminal justice systems in particular, with a focus on identifying levers for education and training across those systems and ways for support and information to be provided to people who have experienced domestic, family and sexual violence.

In session 6, judicial officers and staff of the Courts Administration Authority (CAA) were asked to discuss the recently completed evaluation of the CAA's Abuse Prevention Program.

These sessions provided the Commission with valuable insight and the Commission thanks all participants for their openness and willingness to engage.



Advisory Group

A dedicated Advisory Group was established to support and provide advice to the Commissioner. The Advisory Group comprised:

- Ms Rosie Batty AO – family violence prevention campaigner and lived experience advocate
- Professor Alastair McEwin AM – academic and consultant in disability rights and inclusion; former Disability Discrimination Commissioner and Royal Commissioner, Disability Royal Commission
- Dr Anu Mundkur – gender equality and social inclusion advisor and researcher
- Ms Vicky Welgraven AM – advocate for Aboriginal and Torres Strait Islander women, and Co-Deputy Chair of Our Watch
- Mr Arman Abrahimzadeh OAM – domestic violence prevention advocate and experienced board director.

The Advisory Group met on 5 occasions throughout the term of the Commission and provided advice on topics such as the development and implementation of lived experience advice mechanisms, the role of the media, the reasonable chastisement defence, and South Australia's anti-discrimination and anti-vilification framework. The Advisory Group also provided valuable feedback on the Commission's Issues Paper, its midpoint document 'The Journey So Far' and on the evidence received during public hearings.

The Commission sought advice from some Advisory Group members on particular sections of the final report. The Commission is grateful to these experts in their various fields for their sage and innovative advice.

Other inputs

The Commission also undertook a significant program of additional work, including an examination of the current systems in South Australia and a desktop review of the evidence base across Australia and overseas, such as past and current inquiries, projects and academic articles. The Commission issued a number of information requests to state and federal government agencies and external organisations on matters relevant to its inquiry.

The Commission's deliberations were informed by (but not limited to):

- the National Plan to End Violence Against Women and Children 2022–2032[23] and the National Agreement on Closing the Gap[24]
- the reports and recommendations of the Victorian Royal Commission into Family Violence[25] and the Queensland Women's Safety and Justice Taskforce,[26] and the responses of the Victorian and Queensland governments to those reports[27]
- the System Reform Plan and other relevant documents from the Government of Western Australia's Family and Domestic Violence Taskforce[28]
- the Report of the Rapid Review of Prevention Approaches[29]
- the Missing and Murdered First Nations Women and Children Report[30]
- the Domestic, Family and Sexual Violence Commission's First Yearly Report to Parliament[31]
- the South Australian Commissioner for Aboriginal Children and Young People's Holding on to Our Future Report[32]
- Our Watch's key prevention frameworks, including Change the Story, Changing the Picture and Changing the Landscape[33]
- the Thirty Ninth Report of the Social Development Committee into Domestic and Family Violence (2016)[34]
- the many reports and resources published by the Australian National Research Organisation for Women's Safety Limited (ANROWS)[35]
- research and policy papers published by Australia's eSafety Commission regarding technology-facilitated abuse and harmful online environments[36]
- the work of other recent Australian inquiries including the Australian Law Reform Commission Inquiry into justice responses to sexual violence,[37] the Inquiry into Family Violence Orders by the Commonwealth House of Representatives Standing Committee on Social Policy and Legal Affairs,[38] the Inquiry into South Australian Housing Availability by the Economic and Finance Committee of the South Australian Parliament[39] and the Inquiry into the Potential for a Human Rights Act in South Australia by the Social Development Committee of the South Australian Parliament[40]
- findings from Coronial Inquests from the Northern Territory, including the Inquests into the deaths of Miss Yunupiŋu, Ngeygo Ragurrk, Kumarn Rubuntja and Kumanjayi Haywood,[41] and inquests from South Australia, including the Inquest into the death of Kunmanara May and the Inquest into the deaths of Henry Shepherdson and Kobi Shepherdson. (In this latter matter, the Commission reviewed the transcript of the hearing and written submissions that were filed. At the time of writing, findings had not yet been delivered.)
- various relevant Federation Funding Agreements[42]
- relevant literature and reports, including on the drivers of domestic, family and sexual violence; the impacts of domestic, family and sexual violence on children and young people; the sector workforce; housing and homelessness; risk assessment tools; people who use violence; and technology-facilitated abuse
- data relating to occurrences of domestic, family and sexual violence in South Australia; evaluations of South Australian programs and services, sentencing remarks, trial transcripts and coronial Inquest transcripts and findings
- relevant South Australian, interstate and overseas legislation, frameworks and policies.

The Commission also received research conducted by University of Adelaide BetterStart Health and Development Research Group regarding the experiences of children and young people in South Australia.[43] The research was discussed with and endorsed by the Aboriginal Partnership Committee.

The Commission's Recommendations

The Commission's vision for change is encapsulated in a call to action in each chapter.

In each chapter, there is an explanation of the 'current state' pertaining to the relevant issue – this is followed by a discussion of the desired 'future state' and the recommendations to enable this future to be realised.

The following pages contain a consolidated version of the Commission's recommendations.

The Commission has also given thought to the sequencing of the recommendations in Appendix L.

Some recommendations are deliberately framed to allow for flexibility in implementation. Flexibility is not to avoid accountability in implementation, but to ensure the desired impact and outcomes are reached.

The Commission's focus has been on ensuring the impact of recommendations, rather than identifying precise delivery mechanisms. Where there are appropriate levers, mechanisms or channels that require greater prescription, the Commission has provided that detail.

It is important to note that implementation of the recommendations in this report may result in increased awareness of – and subsequently increased help seeking for and reporting of – domestic, family and sexual violence in South Australia.

An increase in South Australian prevalence and occurrences is not a surprising consequence of this work, nor should it be seen to work against the long-term reform blueprint set out in this report.



Recommendation 1

The South Australian government create a standalone ministerial portfolio for domestic, family and sexual violence.

Recommendation 2

The South Australian government establish and resource a stewardship function within government. The office of the Government Steward should:

a. lead collaboration across government agencies to support the development of the Implementation Plan by the Senior Leadership Committee, and the associated implementation work
b. lead the implementation and ongoing operation of recommendations, including Recommendations 10 - 12, 14 - 16, 18 - 22, 31, 46, 98 - 99, 112 -113 and 127.
c. lead the commissioning or recommissioning of state government–funded services within the domestic, family and sexual violence sector
d. have access to de-identified data to inform investment decisions and policy development
e. provide overall strategic direction to the South Australian government on the domestic, family and sexual violence system, ensuring that reforms and policy development are built on evidence-based practice and lived experience input, noting the delivery of some South Australian government services will remain with line agencies.

Recommendation 3

The South Australian government develop and maintain a domestic, family and sexual violence linked-data dashboard, for use by the Government Steward and the Implementation and Impact Monitor, noting the potential of BEBOLD to fulfil this purpose. The dashboard should:

a. draw together relevant de-identified data regarding domestic, family and sexual violence incidence and prevalence from all agencies and organisations responsible for using the South Australian Risk Assessment and Management Framework or participating in the integrated response model
b. provide consistent locational and demographic data regarding victim-survivors and people using violence, ensuring visibility of different priority population groups.

Consideration must be given to providing access to other relevant agencies and organisations (including non-government organisations commissioned to provide domestic, family and sexual violence services).

Recommendation 4

The Senior Leadership Committee develop an Implementation Plan for the phased implementation of the Commission's recommendations, for consideration by Cabinet. The Implementation Plan should:

a. be outcomes focused rather than activity focused by including an evaluation of impact approach
b. be informed by a rapid expenditure review across the South Australian government.

Development of Implementation Plan actions and outcomes relating to the delivery of domestic, family and sexual violence services to Aboriginal people and Aboriginal communities should occur in accordance with the Closing the Gap priority reforms.

Direction on sequencing of implementation is provided at Appendix L of the report.

Recommendation 5

The Commissioner of Police elevate the domestic, family and sexual violence portfolio to branch or service level.

The Commissioner of Police and the South Australian government ensure the new portfolio is appropriately resourced and staffed to meet the capability requirements set out in Figure 2.1.

The Commissioner of Police increase the capability of each police District and Local Service Area to best meet statewide domestic, family and sexual violence demand by:

a. increasing the number of family violence investigator and supporting positions in each District and Local Service Area
b. conducting regular needs analysis to ensure that the distribution and number of specialist domestic, family and sexual violence positions meets statewide demand
c. giving due consideration to all family violence investigator positions being recognised as specialist rather than generalist positions.

Recommendation 6

Before any commencement of the Criminal Law Consolidation (Coercive Control) Amendment Bill 2024 (SA), the South Australian government convene a working group to negotiate a new settlement across the criminal justice and intervention order systems of the roles and responsibilities of the different agencies and participants operating within those systems, including non-government organisations contracted to provide relevant services within the context of these systems.

Recommendation 7

The Attorney-General progress legislation to establish the South Australian Ombudsman as the Implementation and Impact Monitor. The functions of the Implementation and Impact Monitor are to monitor and report on the implementation and impact of the South Australian government's Implementation Plan. The Implementation and Impact Monitor should:

a. be resourced to undertake the role for a period of 10 years
b. identify, in consultation with the Senior Leadership Committee, the data and information to be made available to the Implementation and Impact Monitor to evaluate implementation and outcomes (see also Recommendation 3 regarding the development of a de-identified data dashboard)
c. be resourced to commission independent evaluations and research where needed to evaluate the impact of recommendations and pilot programs, such as the child protection notification system, the diversionary scheme, the peer support program and the saturation model.

The legislative amendments should have a sunset clause of 10 years and ensure that:

d. the Implementation and Impact Monitor:
    i. can utilise the existing powers of the Ombudsman
    ii. can make recommendations about actions to be taken by agencies against the Implementation Plan, with agencies required to report back on the steps taken to give effect to the recommendations
    iii. can write to the relevant Minister or Premier if action is not taken, with a response to be provided within 3 months
    iv. provides annual reports to Parliament.
e. section 29 of the *Ombudsman Act 1972* (SA) does not apply to the Implementation and Impact Monitor role.

Recommendation 8

The South Australian government provide further funding to Embolden, South Australia's peak body for domestic, family and sexual violence services, to establish an Advisory Group to the Implementation and Impact Monitor.

Recommendation 9

The South Australian government embed domestic, family and sexual violence as a sixth whole-of-government priority in the Chief Executive Performance Agreement template and require each chief executive's performance agreement to include achievement of the actions and impact identified in the Implementation Plan.

Recommendation 10

The South Australian government develop a 5-year statewide domestic, family and sexual violence strategy that includes the 4 pillars of prevention, early intervention, response, and recovery and healing, following delivery of the Implementation and Impact Monitor's first annual report to Parliament.

The South Australian government resource and support the development of a standalone 5-year Aboriginal domestic, family and sexual violence strategy.

Recommendation 11

The South Australian government establish 2 domestic, family and sexual violence Lived Experience Advisory Networks (one for adults and one for children and young people) to provide advice and expertise to the South Australian government. The Lived Experience Advisory Networks should:

a. be designed in consultation with the domestic, family and sexual violence sector and existing lived experience adviser groups and networks
b. be supported by practice frameworks
c. be representative of the diversity and intersectionality of lived experience
d. be appropriately remunerated for their advice and expertise and provided with appropriate therapeutic supports.

Recommendation 12

The South Australian government appoint a Lived Experience Advisory Group (or Groups) from the membership of the Lived Experience Advisory Networks to provide advice and expertise to the Minister for Domestic, Family and Sexual Violence.

Recommendation 13

The South Australian government require all chief executives with action items under the Implementation Plan to develop a Lived Experience Advisory Network engagement strategy for their agency. Engagement with the Lived Experience Advisory Networks should be included in chief executive performance agreements.

Recommendation 14

The South Australian government engage Australia's National Research Organisation for Women's Safety to develop a South Australian Risk Assessment and Management Framework, including each of the elements set out in Figure 2.2, in consultation with relevant government and non-government stakeholders.

Recommendation 15

The South Australian government develop and provide ongoing mandatory training to support the implementation and operation of the South Australian Risk Assessment and Management Framework.

Recommendation 16

The South Australian government resource an evaluation of the South Australian Risk Assessment and Management Framework to inform the development of legislation to support the ongoing operation of the South Australian Risk Assessment and Management Framework.

Recommendation 17

The South Australian government engage with experts and appropriate sector representatives to develop a South Australian framework for recognising and responding to harmful sexual behaviours in children and young people.

Recommendation 18

The South Australian government design, implement and resource a statewide integrated response model incorporating the elements set out in Figure 2.3.

Recommendation 19

The South Australian government resource the Family Safety Framework to provide broader multi-agency responses to high-risk and complex-risk matters. The Family Safety Framework should:

a. be informed by, and included in, South Australia's Risk Assessment and Management Framework
b. require mandatory participation by relevant agencies and organisations, through minimum standards set out in the South Australian Risk Assessment and Management Framework
c. be co-managed by the integrated response teams
d. be resourced to allow for administrative support
e. be expanded to support people aged 16 and over.

Further consideration should be given to:

f. whether Family Safety Meetings should remain fortnightly or be convened on a needs basis, or both
g. whether, and to what extent, Family Safety Meetings and Child and Family Safety Network meetings should be combined.

Recommendation 20

The South Australian government develop, implement and maintain a technological solution for whole-of-government information aggregation and sharing for domestic, family and sexual violence The technological solution must:

a. aggregate relevant information holdings concerning people using and experiencing violence, drawing from government agencies responsible for participating in the integrated response model or using the South Australian Risk Assessment and Management Framework
b. have regard to the current information-sharing product used by the Multi-Agency Protection Service
c. be available statewide in support of the integrated response model among other relevant matters.

Consideration should be given to whether this technological solution could also support South Australia Police with the efficient aggregation of relevant police information for use in information-sharing programs such as the Domestic Violence Disclosure Scheme and Family Law Information Sharing Program. Otherwise, the Commissioner of Police is to conduct a separate scoping study and procurement for that purpose.

Recommendation 21

The South Australian government consider repurposing the Multi-Agency Protection Service to become a central triage and information-sharing team in support of the local integrated response teams. Consideration must be given to the ongoing role of the Multi-Agency Protection Service, if any, once the technological solution for information sharing has been introduced.

Recommendation 22

The South Australian government develop a consistent model for community-based, open-door domestic, family and sexual violence service hubs and explore opportunities to roll out community-based service hubs where they will have impact. The model should:

a. draw from Western Australia's One Stop Hub model, particularly the community-based and soft entry-point design elements
b. provide co-located, non-statutory supports for people experiencing or recovering from violence
c. be repeatable and sustainable, and incorporate measurable impacts and outcomes
d. be applied to any hubs subsequently rolled out in South Australia.

Recommendation 23

The South Australian government's review of the Alliance model be informed by the views set out in this report, and by direct engagement with the domestic, family and sexual violence sector.

Recommendation 24

The South Australian government:

a. disentangle funding for domestic, family and sexual violence services from homelessness services and funding streams
b. provide a significant and sustained uplift in funding for the domestic, family and sexual violence sector. This uplift should reflect the long-term service needs of victim-survivors, service stability and workforce development.

Recommendation 25

The South Australian government align all domestic, family and sexual violence service commissioning practices with the model commissioning principles and the model principles for reporting and data collection set out in Figure 2.4.

Recommendation 26

The South Australian government conduct a review of all current contracting arrangements for all non-government domestic, family and sexual violence services to remove any duplicative reporting and compliance obligations.

Recommendation 27

The South Australian government develop and implement a 10-year workforce development strategy for the domestic, family and sexual violence sector. The strategy should:

a. identify the domestic, family and sexual violence workforce
b. be developed consistent with the Closing the Gap priority reforms
c. address workforce capability, organisational capability and sector development through foundational training, service governance, recruitment and retention, and collaborative learning
d. build pathways to specialisation, including through micro-credentials and skill-set models.

Recommendation 28

The South Australian government establish a Domestic, Family and Sexual Violence Workforce Fund, informed by the 10-year workforce development strategy and with the purpose of increasing the supply of workers within the domestic, family and sexual violence sector and the specialisation of the workforce.

Recommendation 29

The Minister for Industrial Relations advocate for Safe Work Australia to develop (in partnership with community-led organisations) an 18th psychosocial risk for inclusion in the Work Health and Safety (Managing Psychosocial Hazards at Work) Code of Practice 2024 relating specifically to colonial and cultural load through the Meetings of Workplace Relations Ministers / Work Health and Safety Meeting of Ministers.

Recommendation 30

The Commissioner for Public Sector Employment develop a framework for identifying, understanding and managing colonial and cultural load across the South Australian public sector, aligned to the approach taken in other jurisdictions.

Recommendation 31

The South Australian government resource, develop and implement statewide awareness and empowerment campaigns to increase community awareness of the nature and impacts of domestic, family and sexual violence, and empower people to respond to and prevent that violence. The campaigns should be co-designed with Aboriginal, CALD and LGBTQIA+ communities, people with disability, older people, and children and young people (with a specific campaign with and for children under Guardianship), and evaluated to ensure that they are targeted and effective.

Recommendation 32

The South Australian government resource, develop, implement and maintain 2 standalone government websites to provide information for victim-survivors, people supporting victim-survivors and people using violence, with one targeted at, and co-designed with, children and young people. The websites should:

a. contain information that is clear, accessible and available in multiple languages, and includes audio and visual resources
b. provide clear explanations of the nature and impacts of domestic, family and sexual violence, including coercive and controlling behaviour
c. provide information about how to seek help, the services that are available and the supports that they offer
d. provide information on intervention orders, including how to apply for private intervention orders, the conditions that can be imposed on a person using violence, and the process for finalising an order through the courts
e. consider the use of generative AI informed by Australia's Artificial Intelligence Ethics Principles
f. be continuously reviewed to ensure that information and links are up to date.

The development and implementation of the websites should be accompanied by a public marketing and engagement campaign to promote the websites and ensure community-wide awareness of their existence and purpose. Consideration should also be given to the development and availability of accessible and inclusive resources for people who do not have access to the internet.

Recommendation 33

Existing South Australian and federal professional regulatory frameworks should be:

a. reviewed by South Australian and federal professional regulators with a view to mandating and/or promoting domestic, family and sexual violence awareness to the people within their regulatory framework (including through codes of conduct and ongoing professional development requirements)
b. reviewed by the South Australian and Australian governments to determine whether any legislative changes could be made to better equip regulators to embed awareness of domestic, family and sexual violence in their regulatory activities.

Recommendation 34

The South Australian government develop and implement a South Australian community of practice to bring together state and federal regulators, including the Australian Health Practitioner Regulation Agency, to facilitate collective learning, knowledge sharing and collaboration about domestic, family and sexual violence.

Recommendation 35

The Commissioner for Public Sector Employment undertake a program of work, including the development of relevant policies and procedures, to increase the public sector's awareness of domestic, family and sexual violence and of the services available to support a person experiencing violence or a person using violence, including the use of domestic, family and sexual violence leave.

Recommendation 36

The South Australian government work with the South Australian university and vocational education and training sector (including the Skills Commission and TAFE SA) to identify pathways to embed domestic, family and sexual violence content within relevant higher education and vocational education and training qualifications.

Recommendation 37

The Commissioner of Police develop and implement a comprehensive and ongoing domestic, family and sexual violence training program for all sworn officers and any relevant staff members. This training must:

a. be designed alongside the specialist training program (see Recommendation 38) to ensure consistency with that program's evidence-based and trauma-informed content
b. deepen officers' understanding of the dynamics of domestic, family and sexual violence, its impacts across different communities, and how to recognise it and respond to it accordingly
c. equip officers to identify patterns of coercive control and behaviours of people using violence
d. equip police to provide child-focused responses
e. strengthen the ability to identify the primary aggressor and avoid misidentification
f. be embedded into professional practice through consistent, repetitive delivery
g. be accessible via flexible delivery modes (online and in person) that are designed to be interactive, not procedural
h. be backed by strong, visible leadership and supervision from senior officers.

Recommendation 38

The Commissioner of Police develop and implement an intensive, ongoing training program for family violence investigators and any other workers who require specialist knowledge of domestic, family and sexual violence. This training program is to be designed in collaboration with a suitably qualified provider with demonstrated expertise in developing specialist training, to ensure the program is effective, evidence based and trauma informed, as well as intersectional, inclusive and culturally relevant.

The training program must:

a. be informed by the Lived Experience Advisory Networks and the domestic, family and sexual violence sector
b. provide specialist knowledge regarding the dynamics of domestic, family and sexual violence and how it can present differently in different communities
c. provide practical tools to identify and manage trauma responses
d. address the complexities of coercive control and the different behaviours and tactics of people using violence
e. strengthen the ability to identify the primary aggressor and avoid misidentification
f. build cultural capability
g. strengthen understanding of interagency intersections – particularly with child protection and family law systems
h. equip investigators to provide child-focused responses.

Recommendation 39

The Minister for Police progress amendments to regulation 89 of the *Police Regulations 2014* (SA) to require the Commissioner of Police to report on the nature and scope of all domestic, family and sexual violence–related education and training in the annual report mandated under section 75 of the *Police Act 1998* (SA).

Recommendation 40

The South Australian government resource the Office of the Director of Public Prosecutions and the Commissioner of Police to collaboratively develop and implement an operating model for the investigation and prosecution of domestic, family and sexual violence offences, based on the United Kingdom Crown Prosecution Service national operating models. The model should:

a. be evidence based, either through reliance on existing evidence or in collaboration with relevant academics and researchers
b. ensure that work conducted in partnership with police occurs as early as possible in an investigation
c. keep in mind the levers available to police and prosecutors to mitigate risk to victim-survivors, including the use of intervention orders and bail conditions
d. focus on a suspect-centric approach to investigation and prosecution
e. be informed by input from the Lived Experience Advisory Networks
f. develop publicly available guidance documents on myths and misconceptions about domestic, family and sexual violence and how to address them
g. require ongoing evidence-based and trauma-informed training for prosecutors and investigators
h. consider how the model and training applies to barristers briefed by the Office of the Director of Public Prosecutions
i. build in reviews of the model to ensure that it is continuously updated to reflect new evidence.

Recommendation 41

The South Australian government resource the Courts Administration Authority to develop and implement regular and consistent education and training on the nature and dynamics of domestic, family and sexual violence, along with any changes to law and practice, for all judicial officers and court staff as appropriate. Education and training programs should:

a. be tailored to the audience and their particular role within the courts
b. be trauma informed, evidence based and culturally appropriate
c. recognise the intersectionality of domestic, family and sexual violence
d. include a focus on:
    i. the identification and assessment of risk, taking into account the evidence base used in the development of the South Australian Risk Assessment and Management Framework
    ii. coercive control and ongoing patterns of abuse and how to recognise and respond to it within the context of court proceedings
    iii. domestic, family and sexual violence myths and misconceptions
    iv. people using violence and identification of the primary aggressor
e. be flexible and accessible and include online modules, as well as in-person training
f. require interaction and critical thinking, as opposed to a tick-box exercise
g. be supported by ongoing supervision and leadership by heads of jurisdiction and senior judicial officers.

Recommendation 42

The South Australian government, through the Attorney-General:

a. progress regulations, in consultation with the Chief Justice, to confer the development and implementation, and subsequent monitoring, of a mandatory judicial education and training framework on the Judicial Conduct Commissioner pursuant to section 36 of the *Judicial Conduct Commissioner Act 2015* (SA)
b. resource the Judicial Conduct Commissioner to develop the framework in consultation with the heads of jurisdiction.

Recommendation 43

The Attorney-General implement Recommendation 10 of Equal Opportunity SA's 2024 Review of Harassment in the South Australian Legal Profession to develop and publish a protocol, determination or framework with clear criteria for the appointment of all judicial officers, including domestic, family and sexual violence legal practice experience or awareness.

Recommendation 44

The Chief Justice implement Recommendation 11 of Equal Opportunity SA's 2024 Review of Harassment in the South Australian Legal Profession to amend the appointment criteria for Senior Counsel.

Recommendation 45

The South Australian government design and implement a model to fund the development of local induction programs by local domestic, family and sexual violence service providers, to be provided at semi-regular intervals throughout the year to all new frontline government employees to a region.

Recommendation 46

The South Australian government fund the establishment and ongoing operation of a non-government central entry-point crisis and information service for any person experiencing domestic, family or sexual violence in South Australia. The service is to:

a. operate as an all-hours centralised phone and web-based service, incorporating (at a minimum) the accessible communication mechanisms used by 1800RESPECT
b. provide crisis response, including risk assessment and referral to services across a network of South Australian domestic, family and sexual violence organisations
c. develop innovative help seeking pathways for children and young people via a co-design process with children and young people
d. identify the places and spaces across South Australia where people may seek help for domestic, family and sexual violence and work to develop awareness of the central entry-point service within those places and spaces
e. develop a close working relationship with Yarrow Place, with guidelines on referrals between the 2 services.

Recommendation 47

The South Australian government procure and maintain a fit-for-purpose domestic, family and sexual violence records management and information sharing system suitable for use by the central entry-point service as well as the organisations that it refers to. Procurement of the system must be informed by input from members of the Domestic and Family Violence Safety Alliance regarding the limitations of the Homeless2Home system currently in use. This system must, wherever possible:

a. securely record, store and share information and documentation relevant to domestic, family and sexual violence, including but not limited to a narrative of events, case notes, risk assessment results, needs assessment results and safety plans
b. record and share relevant information regarding both people experiencing and people using violence between relevant organisations and referral points
c. record consistent locational and demographic information
d. be integrated with the accommodation register (see Recommendation 104)
e. be integrated with the technological solution for whole-of-government information sharing (see Recommendation 20)
f. be integrated with the linked-data dashboard (see Recommendation 3)
g. replace the function currently served by the Serial Offender Database.

Consideration should be given to the suitability of this records management and information sharing system to support the secure and efficient administration of the Domestic Violence Disclosure Scheme.

Recommendation 48

The South Australian government provide additional resources to Child and Family Support Services in the Department of Human Services to expand statewide service availability, with a particular focus on regional and remote areas of South Australia.

Recommendation 49

The South Australian government resource a pilot of a child protection notification system for pre-birth reports that builds on the existing Corka Bubs program. The pilot should:

a. be run in a regional area
b. include referral pathways for both pre-birth child protection reports and referrals from the intended birthing hospital
c. provide wraparound supports including family violence support services, family violence legal support services (such as Family Violence Legal Services Aboriginal Corporation and Aboriginal Legal Rights Movement) and Aboriginal drug and alcohol services.

Recommendation 50

The South Australian government resource the Commissioner of Police to develop and implement an alternative help-seeking pathway(s) for people experiencing domestic, family and sexual violence. The help-seeking pathway(s) should:

a. not be used in circumstances where a physical police response may be required to ensure safety
b. be optional and require informed consent from the user
c. be available statewide
d. provide consistent, quality and trauma-informed responses to people experiencing domestic, family and sexual violence
e. be staffed by employees who have received suitable training on the dynamics of domestic, family and sexual violence, and trauma-informed approaches
f. take steps to improve accessibility for the following priority population groups:
    i. young people
    ii. Aboriginal people
    iii. CALD people
    iv. LGBTQIA+ people
    v. people with disability
    vi. older people
    vii. people living in regional and remote communities
g. be integrated with the South Australian Risk Assessment and Management Framework and integrated response model as needed.

Recommendation 51

The South Australian government, in consultation with SA Health (Yarrow Place) and South Australia Police, develop, implement and resource an alternative and optionally anonymous reporting pathway for people who have experienced sexual violence in South Australia. The pathway should allow the reporting person to choose whether the report is provided to Yarrow Place and/or South Australia Police and allow the reporting person to indicate whether they would like to be contacted, and if so, how.

Recommendation 52

The Commissioner of Police and SA Health (Yarrow Place) develop a Memorandum of Understanding on the use of information derived from the alternative and optionally anonymous reporting pathway for sexual violence (see Recommendation 51), including consideration of how each agency will best engage with and support the reporting person should they choose to be contacted, and how de-identified data on prevalence and occurrence will be learned from and reported on.

Recommendation 53

SA Health develop, resource and implement a statewide model of care relating to the availability and conduct of forensic medical examinations across South Australia that includes minimum standards around:

a. trauma-informed training and education for staff
b. the level of supervision and support provided to staff
c. relevant oversight and governance
d. the provision of basic health checks, including checking for signs of strangulation
e. the provision of forensic medical examinations
f. the provision of 'just in case' examinations and the storage of collected evidence
g. the use of self-collection kits.

Recommendation 54

SA Health ensure timely access to forensic medical examinations, 'just in case' examinations and health checks for all victims of sexual violence in regional areas through investment in:

a. training and support for staff
b. additional outreach and telephone support from Yarrow Place
c. appropriate storage facilities for evidence collected from 'just in case' examinations.

Recommendation 55

The Attorney-General, in consultation with the Minister for Health and Wellbeing, consider progressing amendments to regulation 8(1)(a) of the *Criminal Law (Forensic Procedures) Regulations 2022* (SA) to broaden the scope of who may conduct forensic medical examinations to include registered midwives.

Recommendation 56

SA Health cease charging victim-survivors who do not have access to Medicare for health responses to sexual violence, including health assessments, forensic medical examinations and 'just in case' examinations.

Recommendation 57

SA Health review its practices, policies and procedures to ensure that paramedics and other relevant healthcare providers are consistently and confidently screening for and responding to instances of non-fatal strangulation among all young people and adults.

Recommendation 58

SA Health publish the CPS Model of Care together with timeframes for implementation.

In implementing the Model of Care, SA Health must ensure that a CPS health response will be provided to children and young people in all regional and remote areas throughout South Australia.

Recommendation 59

The South Australian government provide an increase in ongoing funding to the Domestic Violence Disclosure Scheme, with a view to further enhancing the scheme's statewide accessibility and reach through:

a. the introduction of additional service delivery partners, aimed at improving accessibility and inclusivity for all applicants, including:
    i. young people
    ii. LGBTQIA+ people
    iii. Aboriginal people
    iv. CALD people
    v. people with disability
    vi. male victim-survivors
b. ongoing additional loading to regional and remote service delivery partners to facilitate travel for face-to-face meetings where practicable
c. improvements to the Domestic Violence Disclosure Scheme's online application portal, with a view to:
    i. improving accessibility for people who speak other languages
    ii. improving accessibility for people with disability
    iii. moving the application portal from South Australia Police's website to the government's central domestic, family and sexual violence website (see Recommendation 32).

Recommendation 60

The South Australian government resource the Courts Administration Authority to establish a support worker service connected to the Family Violence Court (and regional courts that do not have a Family Violence Court) to provide non-legal advice and support to parties to an intervention order:

a. The role description should not be limited by mandatory qualification requirements; however, on appointment, support workers should be required to undertake appropriate domestic, family and sexual violence training.
b. Support workers should be available to provide information during Family Violence Court sittings and to provide follow-up contact where appropriate to ensure that the terms and effect of the intervention order are understood.
c. A service model for the APY Lands should be developed and implemented.

Recommendation 61

The Courts Administration Authority and South Australia Police develop and implement a model to deliver consistent, clear and accessible information to protected persons and respondents about the terms and effect of an intervention order as required by section 17 of the *Intervention Orders (Prevention of Abuse) Act 2009* (SA). The model should either be:

a. set out in South Australia Police General Orders and court practice notes, or
b. prescribed in the *Intervention Orders (Prevention of Abuse) Act 2009* (SA), consistent with the approach taken in section 110 of the *Domestic and Family Violence Prevention Act 2012* (Qld).

Recommendation 62

The Attorney-General, in consultation with the Commissioner of Police, explore amendments to the *Intervention Orders (Prevention of Abuse) Act 2009* (SA) to create a time-limited vacate order.

Recommendation 63

The South Australian government task the working group (see Recommendation 6) with identifying the resources needed to reduce the maximum number of intervention order proceedings considered by a Family Violence Court or regional Magistrates Court to an agreed benchmark per sitting day.

Recommendation 64

The Attorney-General explore amendments to the *Intervention Orders (Prevention of Abuse) Act 2009* (SA) to further strengthen section 23(1a).

Recommendation 65

The Courts Administration Authority consider changes to intervention order application forms to include an option to apply for changes to parenting orders, consistent with recommendation 3 of the Family Violence Orders Report.

Recommendation 66

The mandatory judicial education and training framework (see Recommendation 42) include training on the use of section 68R of the *Family Law Act 1975* (Cth).

Recommendation 67

South Australia Police amend its General Orders and Prosecution Practice Notes to ensure that the safety of children, and their inclusion on intervention orders, is a priority for police and police prosecutors.

Recommendation 68

The Attorney-General progress amendments to the *Intervention Orders (Prevention of Abuse) Act 2009* (SA) to include a rebuttable presumption that children should be included on intervention orders.

Recommendation 69

The South Australian government work with the Australian government to reinvigorate the work of the National Personal Protection Injunction Working Group on federal family violence orders through the Standing Council of Attorneys-General.

Recommendation 70

The Attorney-General progress amendments to:

a. section 46 of the *Criminal Law Consolidation Act 1935* (SA) to expand the list of circumstances in which a person is taken not to consent to sexual activity. The amendments should take into account the feedback received from the SA Consent Review.
b. the *Evidence Act 1929* (SA) to:
    i. expand the list of jury directions in section 34N to include directions about other common myths and misconceptions. The amendments should take into account the feedback received from the SA Consent Review.
    ii. provide for jury directions to be made in proceedings for domestic and family violence–related offences to address myths and misconceptions about domestic and family violence. The jury directions should be modelled on the *Evidence Act 1906* (WA).

Recommendation 71

The Attorney-General progress amendments to the *Intervention Orders (Prevention of Abuse) Act 2009* (SA) to introduce an offence of facilitating a breach of a domestic violence order on behalf of the respondent to the intervention order. The new offence should be limited to adults to ensure that children and young people are not inadvertently criminalised due to coercion from parents or family members.

Consideration should also be given to amendments to the *Security and Investigation Industry Act 1995* (SA) to make it clear that a conviction for this offence would disqualify a person from holding an investigation agent's licence.

Recommendation 72

The Attorney-General undertake a review of how character evidence is being used in sentencing and at trial for domestic, family and sexual violence offences, with a view to ensuring that the laws reflect current research and evidence about the nature of domestic, family and sexual violence and the people who use that violence. The review should take into account any recommendations of the NSW Sentencing Council in its review of the law relating to the use of good character evidence in sentencing proceedings.

Recommendation 73

The South Australian government, in collaboration with the Department for Correctional Services and the Courts Administration Authority, develop minimum standards to apply to any government-funded intervention or behaviour change program for domestic, family and sexual violence. The minimum standards are to:

a. align with the current (and any future) National Outcome Standards for Perpetrator Interventions
b. ensure that intervention programs are evidence based, using effective psychological and/or psychosocial approaches
c. ensure that intervention programs are trauma informed and take an intersectional approach
d. ensure that all intervention programs are relevant, inclusive, accessible and culturally safe
e. ensure that intervention programs correspond with partner contact programs.

Recommendation 74

The South Australian government provide ongoing resourcing and support for a Community of Practice for services and workers providing intervention programs for people using domestic, family and sexual violence.

Recommendation 75

The South Australian government scale up the Abuse Prevention Program and provide it with ongoing resourcing to sufficiently meet statewide demand, including for out-of-hours programs and greater capacity to conduct timely assessment. The expanded program should:

a. include interventions targeted at:
    i. LGBTQIA+ people using violence
    ii. women using violence, including Aboriginal women using violence
b. provide funding for associated partner contact programs
c. include pre-program readiness work to ensure participants have clear expectations and are prepared to engage constructively
d. address the challenges identified in the Abuse Prevention Program evaluation report.

Recommendation 76

The South Australian government scale up the Cross Borders Program and provide it with ongoing resourcing to sufficiently and sustainably meet statewide demand. The expanded Cross Borders Program should include culturally appropriate programs suitable for Aboriginal women using violence.

Recommendation 77

The South Australian government provide ongoing resourcing to the Department for Correctional Services to develop and implement an intervention program or programs for people on remand for domestic and family violence offences. The funding is to include programs for people exiting remand into the supervision of Community Corrections.

Recommendation 78

The South Australian government provide ongoing resourcing for the Courts Administration Authority and the Department for Correctional Services to adopt a continuous improvement model for all domestic, family and sexual violence programs, ensuring that the programs are evaluated for impact and outcomes, monitored for demand, and adjusted to ensure successful operation.

Recommendation 79

As part of the statewide domestic, family and sexual violence accommodation audit (see Recommendation 103), the South Australian government ascertain:

a. the current availability of accommodation for people using violence in each region
b. the potential demand for accommodation for a diversity of people using violence in each region
c. the availability of a suitable workforce to support people using violence
d. the availability of referral pathways for people using violence.

Recommendation 80

The South Australian government include accommodation for people using violence as part of the statewide domestic, family and sexual violence accommodation register (see Recommendation 104), ensuring that it is carefully delineated and physically separated from accommodation for people experiencing violence.

Recommendation 81

The South Australian government invest in supported accommodation for people using violence, as part of the 10-year domestic, family and sexual violence accommodation investment plan (see Recommendation 105). The supported accommodation for people using violence must:

a. provide sufficient support for, and oversight of, people using violence
b. provide and/or have referral pathways into programs to address violence, trauma, mental health, substance misuse and problem gambling
c. include provision of supported accommodation for Aboriginal people using violence that is culturally relevant and culturally safe, and preferably delivered by, or in partnership with, an Aboriginal Community Controlled Organisation(s).

Recommendation 82

The South Australian government conduct a scoping and feasibility study for the development of a supported accommodation site or sites for people using violence on the APY Lands, and commit to implementing the most feasible approach. The study is to:

a. be conducted in consultation with relevant stakeholders living and working on the APY Lands
b. be conducted with input from the Department for Correctional Services and Cross Borders Program
c. be carried out in conjunction with the scoping and feasibility study for accommodation for people experiencing violence (see Recommendation 108)
d. identify a clear pathway forward for increased safety on the APY Lands through the development of supported accommodation for people using violence and/or accommodation for people experiencing violence.

Recommendation 83

The South Australian government develop and pilot a domestic and family violence diversionary scheme in at least one metropolitan and one regional Family Violence Court, leveraging the enhanced Abuse Prevention Program (Recommendation 75) as a foundation for the scheme. The pilot scheme is to:

a. be referred into at the magistrate's discretion, subject to the view and needs of the victim-survivor
b. require the person using violence to accept responsibility for their behaviours (not amounting to an admission of guilt should the diversion be unsuccessful and the matter returned for trial)
c. be available to a diversity of people using violence, leveraging the enhanced Abuse Prevention Program
d. refer suitable participants into a relevant Abuse Prevention Program (with suitability determined by factors including readiness and any co-occurring needs)
e. include referral pathways for co-occurring needs such as mental health, substance misuse and problem gambling where relevant
f. involve suspension of relevant charges during the course of the diversion
g. include joint progress reports to the court provided by both the intervention program provider and contact program provider, along with a periodic check-in with the magistrate
h. be supported by relevant bail agreements and intervention order conditions through the duration of the diversion
i. allow defendants who have successfully completed the diversion to avoid conviction for the substantive offending, otherwise return defendants who have not completed the diversion to court for trial
j. require a minimum 12-month good behaviour bond following successful completion of the diversionary scheme.

Recommendation 84

The South Australian government undertake a review of state-based regulators' disciplinary powers, including investigatory powers, fit and proper person tests and other disciplinary levers, and make any amendments necessary to create the authorising and operating environment for regulators to replicate the Australian Health Practitioner Regulation Agency's approach.

Recommendation 85

The Community of Practice (see Recommendation 34) be tasked with identifying opportunities to promote across the regulator's relevant stakeholder network, the capacity for regulators to receive complaints about a person using domestic, family and sexual violence and to take action against that person.

Recommendation 86

The Commissioner of Police conduct a review of South Australia Police's domestic, family and sexual violence governance and policies, in relation to both reporting mechanisms and responses when it is alleged that the person using violence is a police officer. The review should:

a. identify a new and separate pathway for reporting these matters to South Australia Police (this could be considered in conjunction with the alternative help-seeking pathway(s) in Recommendation 50)
b. specifically address the procedures relating to confidentiality and allocation of investigations and intervention order applications to ensure they provide the necessary safeguards for victim-survivors, and avoid conflicts of interest and compromises to the integrity of matters
c. examine the development of a standalone protocol for these matters relating to reporting, administration (including allocation and confidentiality), investigation and victim-survivor management
d. address how the public could, within the limitations of the privacy of South Australia Police's internal procedures, be provided with sufficient information to provide assurance that these procedures are in place. This includes information that if people are unsatisfied with police conduct (including how reports and investigations are managed) they can make a report to the Office for Public Integrity.
e. address education to police officers about these matters and any new procedures
f. address the collection of information to enable the identification of patterns and systemic issues.

The review should be provided to the Implementation and Impact Monitor, and implementation of the review's recommendations be included within the scope of the Implementation and Impact Monitor's functions.

Recommendation 87

The South Australian government provide additional ongoing resourcing to expand the KIND program to increase current capacity and referral intakes and ensure that it is available in regional and remote South Australia. Consideration should be given to using partnership models with Aboriginal Community Controlled Organisations.

Recommendation 88

The South Australian government resource and establish a statewide service for harmful sexual behaviour interventions that sits alongside KIND in the Department of Human Services. Existing programs and relevant resourcing within SA Health should be transferred to this new service.

Recommendation 89

The Attorney-General ban the use of corporal punishment by parents and caregivers by progressing amendments to the *Criminal Law Consolidation Act 1935* (SA) to repeal the defence of reasonable chastisement.

Recommendation 90

The South Australian government undertake a public awareness and education campaign about the effect of the repeal of the reasonable chastisement defence and alternatives to physical punishment prior to commencing any legislative change.

Recommendation 91

The Government Steward, in collaboration with the Office for Early Childhood Development, develop a coordinated, evidence-based approach to parenting education across South Australia to inform the repeal of the reasonable chastisement defence.

Recommendation 92

The South Australian government advocate for the Australian government to progress the audit of Australian government child support, social security and tax systems.

The Australian government task and resource the national Commissioner for Domestic, Family and Sexual Violence with an independent audit of the family law system to identify and address the potential for systems abuse, including the use of section 102NA of the *Family Law Act 1975* (Cth).

Recommendation 93

The South Australian government undertake an audit of South Australian systems and services to identify and address the potential for systems abuse and safety breaches.

Recommendation 94

The Treasurer progress amendments to the *Essential Services Commission Act 2002* (SA) to clearly set out the Essential Services Commission's role in developing and ensuring consumer protections for domestic, family and sexual violence victim-survivors.

Recommendation 95

The national Commission for Domestic, Family and Sexual Violence work with the Australian government to develop a national standard for responsible media reporting on domestic, family and sexual violence. The national standard should be legally enforceable and binding and should be developed in consultation with print and electronic media; domestic, family and sexual violence service providers; and other relevant stakeholders.

Recommendation 96

The Attorney-General progress amendments to the *Victims of Crime Act 2001* (SA) in consultation with the Commissioner for Victims' Rights, the Lived Experience Advisory Networks and media to require a victim-survivor's consent before the contents of their Victim Impact Statement can be reported on, published, produced or reproduced.

Recommendation 97

The South Australian government develop and implement a flexible funding model for the operationalisation of the needs assessment and management components of the South Australian Risk Assessment and Management Framework. The model must:

a. fund the case management work to be undertaken by domestic, family and sexual violence organisations when connecting a victim-survivor with services to meet the needs identified during the needs assessment process
b. allow for flexible use to meet each victim-survivor's individual needs
c. operate separately to funding already available within the domestic, family and sexual violence system for housing outcomes and via the Leaving Violence Program
d. provide a loading for services and victim-survivors located in regional and remote areas in recognition of the increased costs of service provision in those areas.

Recommendation 98

The South Australian government develop, implement and maintain an adult victim-survivor statewide referral network and a child and young person statewide referral network that:

a. is co-designed with the Lived Experience Advisory Networks
b. prioritises the identification of, and referral pathways to, services.

Recommendation 99

The South Australian government fund the establishment and/or commissioning of services identified during the co-design processes (see Recommendation 98) that are not currently available.

Recommendation 100

The South Australian government, in partnership with the Child and Young Person Lived Experience Advisory Network, consider the need for law reform to remove parental consent as a barrier to seeking help and accessing services for children and young people. The parental consent review must include an examination of children and young people's access to statutory and legal services, health services, homelessness services and domestic, family and sexual violence services. The review should consider the applicability of the Gillick competency test as a means to overcome these and other relevant barriers, including in circumstances where unprotective parents and guardians are restricting access to crisis and support services.

Recommendation 101

The South Australian government commission a review of the statewide availability and accessibility of the Child and Adolescent Mental Health Service, the Youth Mental Health Service, the Intensive Therapeutic Care program, My Place and other domestic, family and sexual violence health services. The review is to:

a. Examine eligibility criteria, referral pathways, wait times and unmet need across South Australia, with a particular focus on children and young people living in regional and remote locations and all children under Guardianship;
b. Identify the system gaps experienced by 15 to 18 year olds requiring access to youth mental health services and domestic, family and sexual violence health services;
c. Consider whether the current fly-in-fly-out model is meeting the needs of children and young people on the APY lands and other remote areas of South Australia;
d. Make recommendations aimed at improving statewide access to mental health supports and domestic, family and sexual violence health services for all South Australian children and young people up to 18 years of age.

The review's recommendations are to inform a concerted effort by SA Health to improve statewide access to the identified health supports for children and young people who have experienced domestic, family or sexual violence, with oversight provided by the Implementation and Impact Monitor.

Recommendation 102

The South Australian government review the Safe at Home and Safer in the Home programs, with a view to streamlining and finding efficiencies. Following the review, the South Australian government provide a funding uplift to the Safe at Home program, with a view to:

a. increasing eligibility to include medium to high-risk domestic and family violence, inclusive of LGBTQIA+ people and male victim-survivors
b. providing short-term case management and referral to aid victim-survivors in their ongoing recovery journey
c. increasing the program's capacity to identify and respond to technology-facilitated abuse
d. providing an additional loading to regional and remote areas in recognition of increased cost and complexity.

Recommendation 103

The South Australian government conduct a statewide audit of crisis, emergency and transitional accommodation available for all people experiencing domestic and family violence. The terms of the audit are to be developed in consultation with an organisation with expertise in infrastructure accessibility for people with disability and the audit is to ascertain:

a. the quantity of accommodation options in each region
b. the type, size, style and condition of the accommodation
c. the accessibility and safety features of the accommodation
d. any eligibility criteria operating in relation to the accommodation
e. the suitability of the existing accommodation for pets
f. the availability and use of purchased accommodation in each region.

Recommendation 104

The South Australian government develop, implement and maintain a statewide domestic, family and sexual violence accommodation register, aimed at maximising the use of suitable accommodation statewide.

Recommendation 105

The South Australian government develop and implement a 10-year domestic and family violence accommodation investment plan with a corresponding investment fund. The plan is to include short-, medium- and long-term investment goals, including to:

a. in the short term:
    i. maintain any properties that are vacant due to lack of repairs
    ii. install accessibility features for properties that can accommodate people with disability with modification
    iii. identify opportunities to provide safe, inclusive accommodation options to adolescent boys and LGBTQIA+ people
    iv. install modifications to make suitable properties pet friendly
    v. invest in supported crisis and transitional accommodation for unaccompanied young people experiencing violence
    vi. begin the purchase or construction of additional housing stock in priority regions identified in the audit as having inadequate coverage
b. in the medium term:
    i. complete the purchase or construction of additional housing stock in priority regions identified in the audit as having inadequate coverage
    ii. begin the purchase or construction of accommodation for people using violence, in regions identified in the audit as having the greatest feasibility
    iii. ensure that domestic, family and sexual violence accommodation is made available for a broader diversity of South Australians
c. in the long term:
    i. purchase, build and maintain accommodation for people experiencing domestic, family or sexual violence, to meet statewide demand, with the phasing out of the use of purchased accommodation
    ii. purchase, build and maintain accommodation for people using violence in strategic locations across South Australia, integrated with services that deliver intervention and support programs.

Recommendation 106

The South Australian government to prioritise specialist Aboriginal Community Controlled Organisations' delivery of specialist domestic, family and sexual violence services and accommodation in relevant regional and remote locations, while ensuring that all South Australians remain eligible for services and accommodation in their regions.

Recommendation 107

The South Australian government review homelessness mutual obligations for people experiencing violence, with a view to waiving or reducing these obligations for people experiencing violence until they are out of their acute crisis phase.

Recommendation 108

The South Australian government conduct a scoping and feasibility study for the development of a supported accommodation site or sites for people experiencing violence on the APY Lands, and commit to implementing the most appropriate approach identified. The scoping and feasibility study is to:

a. be conducted in consultation with relevant stakeholders living and working on the APY Lands
b. be carried out in conjunction with the scoping and feasibility study for accommodation for people using violence (see Recommendation 82)
c. identify a clear pathway forward for increased safety on the APY Lands, through the development of supported accommodation for people experiencing violence and/or accommodation for people using violence.

Recommendation 109

The South Australian government:

a. conduct a review of available service delivery models to provide all children and young people presenting to the Domestic and Family Violence Safety Alliance services with a response in their own right
b. fund the implementation of the most appropriate service delivery model identified in the review.

Recommendation 110

The Minister for Consumer and Business Affairs undertake a review of the domestic abuse provisions within the *Residential Tenancies Act 1995* (SA), in consultation with domestic, family and sexual violence services and the Lived Experience Advisory Networks, to determine whether they provide appropriate protection and support for people experiencing violence.

Recommendation 111

The South Australian government resource the Commissioner for Equal Opportunity to co-design service accreditation frameworks for domestic, family and sexual violence service providers with priority population groups.

Recommendation 112

The South Australian government provide ongoing funding for LGBTQIA+ domestic, family and sexual violence workers to address the unmet need for specialist support and advocacy for South Australian LGBTQIA+ victim-survivors.

Recommendation 113

The South Australian government resource the establishment of Family Violence Disability Liaison Officers aligned with the functions performed by the equivalent positions at Safe Steps in Victoria to ensure all domestic, family and sexual violence services are accessible to people with disability.

Recommendation 114

The South Australian government resource the Courts Administration Authority to establish vulnerable witness suites with appropriate technology, infrastructure and staffing in a non-court building in metropolitan Adelaide.

Recommendation 115

The South Australian government undertake an audit of existing government buildings to identify opportunities to establish vulnerable witness suites in regional locations with a court presence.

Recommendation 116

The South Australian government resource the Courts Administration Authority to develop domestic, family and sexual violence safety standards for court infrastructure, informed by the Commissioner for Victims' Rights and victim-survivors with lived experience of the justice system. The new minimum safety standards should be used to inform a 10-year capital works plan.

Recommendation 117

The South Australian government establish a capital infrastructure fund for the Courts Administration Authority to meet the minimum standards via a staged approach.

Recommendation 118

The South Australian government resource the Courts Administration Authority to develop and implement an accurate, timely, accessible and victim-centred information sharing mechanism that meets the differing needs of adults, children and young people.

Recommendation 119

The Attorney-General consult on reforms to require prior written notice of all bail applications. The consultation must include consideration of amendments to enforce compliance with section 10(4) of the *Bail Act 1985* (SA) and section 7 of the *Victims of Crime Act 2001* (SA).

Recommendation 120

The South Australian government establish and fund a pilot for a free statewide, professionally facilitated peer-support program for victim-survivors of sexual violence over the age of 16 years who are currently involved in the criminal justice system. The pilot should be:

a. run by an experienced and evaluated peer support service, independent from government
b. accessible, inclusive and culturally safe
c. evaluated, and consideration given to further expansion.

As part of the pilot, the Attorney-General consider progressing amendments to the definitions in section 67D of the *Evidence Act 1929* (SA) to include communications during peer-support sessions as 'protected communications' under the Act.

Recommendation 121

The South Australian government resource a witness intermediary scheme for people with complex communication needs that are engaged with the criminal justice system in South Australia.

Recommendation 122

The Courts Administration Authority collaborate with South Australia Police, the Office of the Director of Public Prosecutions, Forensic Science SA and the Legal Services Commission (and any other relevant agency) to:

a. develop a joint budget bid for the expansion of the Criminal Priority Programme to include all domestic, family and sexual violence major indictable trials, and
b. include identification of the costs associated with including trials for the proposed new coercive control offences within the pilot's expansion.

Recommendation 123

The South Australian government commission research similar to that conducted by the New South Wales Bureau of Crime Statistics and Research, and consider how eligibility for and limitations around judge-alone trials operate in other jurisdictions, with a view to assessing whether amendments to the current South Australian approach should be made.

Recommendation 124

The Minister for Education, Training and Skills advocate for the national Education Ministers Meeting to task the Australian Curriculum, Assessment and Reporting Authority with developing a standalone national relationships and sexuality education curriculum via a co-design process with children and young people.

Recommendation 125

The South Australian government resource the Education Standards Board to undertake the following work program:

a. amending the Standards and/or Evidence Guide to mandate delivery in all South Australian schools of relationships and sexuality education content included in the Keeping Safe: Child Protection Curriculum but not covered in the Australian Curriculum
b. undertaking a co-design process with children and young people from all 3 schooling sectors to develop a relationships and sexuality education exemption model to be promoted across all 3 schooling sectors, with specific attention to:
    i. the types of information to be provided to parents/guardians and students about relationships and sexuality education
    ii. the age at which an exemption process should no longer apply (and in this regard, taking particular account of the age of consent to sexual activity)
    iii. the inclusion of a requirement for schools and/or systems to provide the Education Standards Board with data on the number of students who are opted out of receiving relationships and sexuality education
c. developing a best-practice response to disclosures of domestic, family and sexual violence framework for schools, taking into account existing laws and reporting obligations and:
    i. interaction and alignment with the South Australian Risk Assessment and Management Framework and the central entry-point service (see Recommendations 14 and 46)
    ii. information sharing between schools/systems, and information sharing with other jurisdictions.

Recommendation 126

The Minister for Education, Training and Skills appoint a Ministerial Advisory Committee to advise the Minister on potential reforms to the legal framework operating under section 141(2) of the *Education and Children's Services Act 2019* (SA) and regulation 33(1) of the *Education and Children's Services Regulations 2020* (SA), together with addressing the lack of any legal framework operating in relation to relationships and sexuality education exemptions in Catholic and independent schools.

Recommendation 127

The South Australian government, in partnership with local government, community members and community organisations, design and establish a primary prevention saturation model for South Australia. The model should:

a. be informed by the Ballarat Model and the Our Town model
b. be piloted in 2 communities in South Australia, selected based on de-identified data input together with community readiness
c. be supported by adequate resourcing over a 4-year period, which includes consideration of the impact on local service providers
d. be designed in consultation with the community
e. build on existing prevention strategies, including those run by community and volunteer organisations
f. include programs focused on the development of social supports for men, parenting programs and mental health support.

Recommendation 128

The Minister for Consumer and Business Services progress the following provisions contained in the Liquor Licensing (Miscellaneous) Amendment Bill 2025 (SA):

a. the paramount object of the *Liquor Licensing Act 1997* (SA) is to ensure that the sale and supply of liquor occurs in a manner that minimises the harm and potential for harm caused by the excessive or inappropriate consumption of alcohol
b. the minimum 2-hour 'safety-pause' delay to prevent the rapid delivery of alcohol
c. the restrictions on alcohol sale and delivery timelines.

Recommendation 129

The Minister for Consumer and Business Services amend the Liquor Licensing (Miscellaneous) Amendment Bill 2025 (SA) so that the term 'domestic violence' in the *Liquor Licensing Act 1997* (SA) is replaced with 'domestic, family and sexual violence'.

Recommendation 130

Following the passage and implementation of the Liquor Licensing (Miscellaneous) Amendment Bill 2025 (SA), the South Australian Liquor and Gambling Commissioner:

a. monitor and evaluate how the amendments to the *Liquor Licensing Act 1997* (SA) are operating in practice, recommending further reform if required
b. conduct a review of all available regulatory levers to ensure that alcohol regulation is occurring in a way that achieves the paramount consideration of harm minimisation.

Recommendation 131

The Commissioner of Police develop and implement a strategy to further disrupt the supply of alcohol into dry Aboriginal communities. The strategy must:

a. be developed in partnership with community leaders and relevant stakeholders
b. identify practical solutions such as the installation of additional Safe-T-Cams to cover common approaches to dry communities
c. adopt harm minimisation as the strategy's primary objective.

Recommendation 132

The South Australian government advocate for the Australian government to accept and progress the recommendations made by the House of Representatives Standing Committee on Social Policy and Legal Affairs in the You Win Some, You Lose More report, including, but not limited to, the phased approach to a comprehensive ban on all forms of advertising for online gambling.

Recommendation 133

The Minister for Consumer and Business Services:

a. progress amendments to section 3 of the *Gambling Administration Act 2019* (SA) so that the paramount object of the Act is the minimisation of harm and potential harm associated with the misuse and abuse of gambling activities, consistent with the changes to the *Liquor Licensing Act 1997* (SA)
b. undertake a review of the available regulatory levers under the *Gambling Administration Act 2019* (SA) to ensure that gambling regulation is occurring in a way that achieves the paramount consideration of harm minimisation and progress further reform as appropriate.

Recommendation 134

The Australian government ensure that the eSafety Commissioner is appropriately resourced and supported to continue in its role as Australia's independent online safety regulator, so that it may best meet its mandate to minimise online harm and improve online safety for Australians into the future.

Recommendation 135

The South Australian government work with the eSafety Commissioner on the ongoing monitoring and evaluation of online and technology-facilitated harms experienced by children and young people, and to take reasonable steps to minimise that harm. These harms include but are not limited to:

a. access to pornography, particularly pornography depicting acts of domestic, family and sexual violence and criminal acts
b. recommender systems and algorithms that expose children and young people to harmful content
c. influencer content openly encouraging acts of domestic, family and sexual violence, and violence against women and children, such as some manosphere and incel content.

Recommendation 136

The Attorney-General resource and undertake a comprehensive review of South Australia's anti-discrimination and anti-vilification frameworks, with a view to modernising the frameworks to ensure that they provide robust and future-focused protections against all forms of discrimination and vilification.

Domestic, family and sexual violence

Introduction

Domestic, family and sexual violence is pervasive and insidious. It transcends geographical boundaries, cultures, gender and sexual identities, age and socioeconomic statuses. It encompasses a range of harmful behaviours – physical, emotional, psychological, sexual and financial – committed within intimate, familial or domestic relationships and, in the case of sexual violence, between strangers or acquaintances. Such acts, at their core, often reflect an imbalance of power and control, deeply rooted in systemic inequalities, intergenerational trauma and societal attitudes.

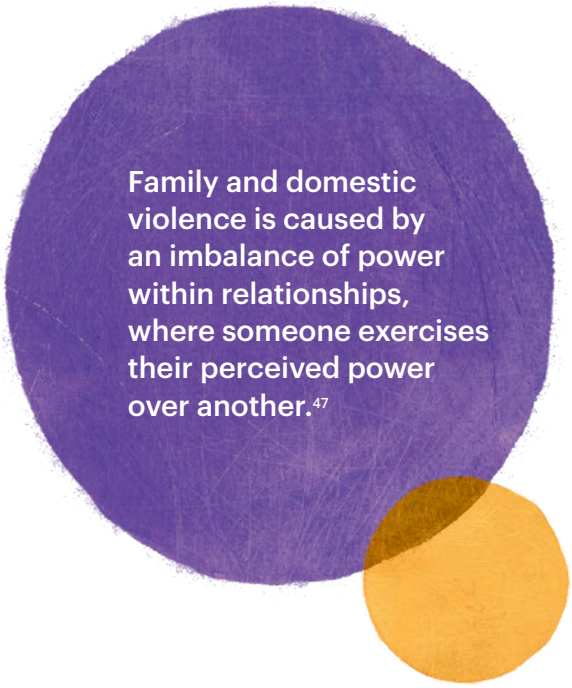
The Commission's mandate has been to inquire into all forms of domestic, family and sexual violence, and particularly violence against women and children. This means designing systems to meet the needs of those who use them and work within them, preventing the violence before it starts and ensuring trauma informed recovery and healing options.

The evidence establishes that domestic, family and sexual violence is overwhelmingly perpetrated by men against women and children. The available data has established, and continues to show, that more women than men experience domestic, family and sexual violence and that more men than women choose to use domestic, family and sexual violence. The gendered nature of this violence is undeniable and is central to the systemic changes that are needed to bring the use of this violence to an end.

The gendered nature of this violence justifiably received focused attention and resourcing by all Australian governments through the development of the National Plan to End Violence against Women and Children 2022–2032 (the National Plan). The National Plan sets out the ambitious shared commitment of all governments to end gender-based violence in one generation.[44] It recognises that 'violence against women and children is a problem of epidemic proportions in Australia' and that 'the impact of this violence ripples out across Australian families, communities and society as a whole'.[45] It goes on to state that 'it is also important that all people experiencing family, domestic and sexual violence, including men, are supported to access support and services and to leave violent relationships if and when they choose to do so.'[46]

This chapter considers the broad range of behaviours that can comprise domestic, family and sexual violence and the prevalence and impact of such behaviours. This background information is important to include in the report – it sets the context for the decisions the Commission has made about what needs to change.

What is domestic, family and sexual violence?



Serious physical violence – which includes homicide, rape, strangulation and assault – between people who are in an intimate relationship is often the most visible form of domestic, family and sexual violence, but domestic, family and sexual violence is much broader than that. The Commission heard that it occurs in different types of relationships, and in all sorts of ways. The Voices Report set out the many different descriptions and accounts of domestic, family and sexual violence provided to the Commission by victim-survivors and their supporters. Some of these are reproduced here.

> **He attacked me...my daughter tried to stop him and he threw her against the wall... the court made me let him see my daughters even though they were afraid of him.**[48]

> **I suffered cigarette burns, kicking, being spat on, called every name you could think of all while she maintained the perfect public appearance. I never had access to my own pay and had to beg to buy anything, it was a demoralising experience that will live with me for the rest of my life.**[49]

> **The perpetrator actually tried to kill us all (children too) but was only ever convicted of assault... I feel like I was failed in my case, my children and I have PTSD, anxiety, disability from injury and have lived in fear for years. I believe he will kill the next woman he has a relationship with.**[50]

> **I was often severely bashed, and habitually emotionally and verbally abused...Mum was female, blonde and well dressed. Because of this, she got away with it all.**[51]

> **He has also continued to subject our children to controlling, harmful and unsafe behaviour, which child protection calls "inappropriate parenting". My children are unable to get psychological support because their father threatened the services we attended until they said they cannot provide their services to us.**[52]

Coercive control and the myriad forms of violence that are not necessarily physical emerged as a theme:

> **I was told who I was and wasn't allowed to hang around with, was required to be home by a certain time and the multiple times I attempted to leave, he would threaten harm to me, or himself. When I finally built the courage to leave and did leave, the violence significantly escalated. I was accused of cheating, physically assaulted and had over $7,000 of my property destroyed by my ex.**[53]

> **Religion [was] used as a method to control me. I was denied access to secular education. I had the inability to think for myself.**[54]



> **During the time that my ex and I lived together I was often denied food ... and was only allowed to have it when he was home.**[56]

> **He would rip televisions off of walls, punch holes in walls and break furniture. I would come home to glass tables smashed, children's toys and belongings destroyed, and my personal items ripped up or missing. He started off throwing items near me, then to me and eventually throwing items at me directly hitting me.**[57]

> **There is opportunity for the perpetrator to put all joint finances in the names of his family members and reduce any payment that is likely to be made to the victim in case any separation eventuates. I'm aware of families where the man has sent all the money overseas to his family with no repercussion and limited transfer of old monies to the wife, the victim.**[58]

> **My friend was in a same sex relationship and experienced horrific coercive control, emotional, verbal abuse as well as physical from the perspective of her wife throwing things at her.**[59]

Different definitions of domestic and family violence appear across legislation and within policy documents, statistical reports and research. Definitions vary because they serve different purposes, depending on the context in which the definition is being used.

The National Plan aligns its definition of 'violence against women' with the United Nations Declaration on the Elimination of Violence Against Women, which defines violence against women as:

> **"any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.**[60]

The National Plan defines domestic violence, or intimate partner violence, as any behaviour within an intimate relationship (including marriage, partnership or dates) that causes physical, sexual or psychological harm. This type of violence often occurs within a domestic setting but can also occur in public or between 2 people who do not live together.[61]

Family violence is defined as including domestic violence and violence committed 'by parents (and guardians) against children, between other family members and in family-like settings' including 'elder abuse … and violence perpetrated by other family members such as parents-in-law'.[62] The Commission has included violence within carer relationships in its understanding of family violence. The National Plan states that family violence is the preferred term within Aboriginal communities 'because of the ways violence occurs across extended family networks'.[63]

The National Plan defines sexual violence as occurring any time a person is forced, coerced or manipulated into sexual activity whether in a domestic and family violence context or not. Such activity can include sexual assault, rape, sexual harassment and intimidation, and making a person watch or engage in pornography. Sexual violence does not have to be physical and can include unwanted sexualised comments and intrusive sexualised questions.[64]

The National Plan acknowledges that violence is not just physical.[65] Domestic, family and sexual violence encompasses a wide range of behaviours that result in physical, sexual, emotional and psychological harm. This can include coercive and controlling behaviours that often continue over a long period of time, with the aim of exerting power and dominance over others to create fear and deny liberty and autonomy.

This form of domestic, family and sexual violence is often referred to as coercive control. It is recognised in the National Plan and the National Principles to Address Coercive Control in Family and Domestic Violence (the National Coercive Control Principles) as a key area of focus for addressing gender-based violence in Australia.[66] The National Coercive Control Principles set out common features of coercive control:

- Coercive control is almost always an underpinning dynamic of family and domestic violence. People using violence exert power and dominance over others using patterns of abusive behaviours over time that create fear and deny liberty and autonomy.
- Coercive control can include physical or non-physical abusive behaviours, or a combination of both. An absence of physical abuse does not diminish the seriousness of non-physical behaviour and its impacts for the person experiencing violence.
- Behaviours can be subtle and insidious, and individually targeted and tailored. This can mean that the manipulative and coercive nature of the behaviour is only visible to the person using violence and the person experiencing violence, which can further isolate the person experiencing violence.
- Coercive control is particularly prevalent in relationships where there is an imbalance of power. This imbalance is often gendered but can also involve the manipulation or exploitation of circumstances where the person experiencing violence is reliant on the person using violence; for example, due to disability, age or financial circumstances.[67]

Coercive control examples include (but are not limited to):

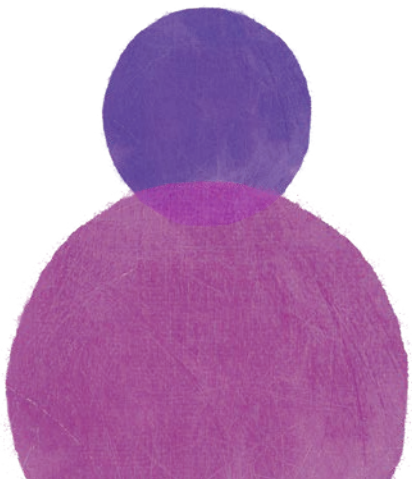
- restricting a person's freedom or independence, such as telling them who they can socialise with, or isolating them from their family and friends
- financial abuse, which can include dowry abuse, preventing a person from working, and control of money through bank accounts or child support payments
- harming or threatening to harm pets or animals
- love bombing, fast-moving romances and early marriage proposals
- withholding medication or access to necessary medical treatment
- forcing the person to marry another person
- reproductive coercion which can include sabotaging birth control or pressuring someone to become pregnant
- emotional manipulation, such as gaslighting or suicide threats
- stopping a person from participating in cultural or spiritual practices
- technology-facilitated abuse
- monitoring a person's movements, including through physical or digital surveillance and the use of private investigators.

In the Silence and Inaction Report, Dr Fitz-Gibbon discusses family violence and coercive control in the context of the experiences of children and young people, noting that 'coercive control may be perpetrated by parents, step-parents, caregivers and siblings' and that 'the tactics used may mirror those seen in adult contexts, including surveillance, threats, degradation and isolation, but are experienced within a context of developmental vulnerability, dependence and often limited access to external supports'.[68]

In South Australia, legal definitions of domestic, family and sexual violence refer to an act, or acts, of abuse. An 'act of abuse' is defined in section 8 of the *Intervention Orders (Prevention of Abuse) Act 2009* (SA) (the Intervention Orders Act) as an act against a person that results in or is intended to result in: physical injury; emotional or psychological harm; an unreasonable and non-consensual denial of financial, social or personal autonomy; or property damage. This includes patterns of abusive behaviours where someone intentionally tries to control another person by making them feel afraid, ashamed, anxious, unsure or upset.

Abuse is domestic abuse under section 8 of the Intervention Orders Act if it occurs between 2 people in a relationship. 'Relationship' is broadly defined and includes the common types of family relationships (e.g. domestic partners, parents and children) but also extends to include relationships such as Aboriginal kinship relationships and people in a caring relationship within the meaning of the *Carers Recognition Act 2005* (SA).

There is no single legal definition of sexual violence in South Australia. Instead, sexual violence encompasses the behaviours that are defined in legislation as offences such as rape, compelled sexual manipulation, indecent assault, image-based sexual offences and sexual harassment.[69]



When is domestic, family and sexual violence a crime?

Although the Intervention Orders Act defines domestic and family violence broadly, not all behaviours falling within the definition of 'act of abuse' constitute a criminal offence in South Australia.

Behaviours that amount to a criminal offence will attract a criminal justice response. This response includes the apprehension, investigation, prosecution and sentencing of those who are suspected or convicted of criminal offences.

In South Australia, there are 3 types of criminal offences – summary offences, minor indictable offences and major indictable offences. Summary offences are heard in the Magistrates Court and include offences with a maximum penalty of 2 years' imprisonment or less. Minor indictable offences generally have a maximum penalty of 5 years' imprisonment. They are also dealt with in the Magistrates Court unless the defendant chooses to have the charge dealt with in the District Court. Major indictable offences are the most serious offences and can only be dealt with in the District or Supreme Court. Further information about the criminal trial process is set out in Chapter 5.

Criminal offences relevant to domestic, family and sexual violence are largely set out in South Australia's *Criminal Law Consolidation Act 1935* (SA) and *Summary Offences Act 1953* (SA). The Criminal Law Consolidation Act, for the most part, does not set out specific offences of domestic or family violence but rather includes as an aggravating feature the commission of a criminal offence against a victim in circumstances where the offender knew that the victim of the offence was a person with whom the offender was, or was formerly, in a relationship.[70] As is the case in the Intervention Orders Act, 'relationship' is broadly defined.[71]

Offences in the Criminal Law Consolidation Act include conduct involving direct physical harm or force applied to a person, such as assault causing harm or serious harm, kidnapping, sexual assault, rape and murder. Offences also include conduct causing indirect or psychological harm, such as unlawful threats, stalking and harassment (see discussion further below) together with offences relating to property damage, and offences of dishonesty, trespass and blackmail.[72]

Some of the more specific criminal offences directed at domestic, family and sexual violence behaviours are explained below.

Section 20A of the Criminal Law Consolidation Act sets out the offence of 'choking, suffocation or strangulation in a domestic setting'. This offence was recently amended by the *Criminal Law Consolidation (Section 20A) Amendment Act 2024* to include a clearer and expanded definition of 'choking or strangling' and a higher penalty for circumstances when the act renders someone unconscious.[73]

The Criminal Law Consolidation Act also includes the offence of stalking and harassment. This offence was recently amended to reduce the threshold for criminal offending in order to capture a broader range of harmful stalking activities.[74]

Other relevant offences in the Criminal Law Consolidation Act include those regarding child marriage, sexual servitude and related offences, and incest.[75]

The Summary Offences Act contains South Australia's filming and sexting offences. These offences can often occur in the context of family, domestic and sexual violence. These offences, better known as image-based abuse, involve the capture, sharing and distribution of intimate and invasive images without consent. There are 4 types of offence:

- humiliating or degrading filming
- distribution of invasive images
- indecent filming
- threats to distribute invasive images or images obtained from indecent filming.[76]

Unless the offence relates to a victim who is under the age of 17 years, filming and sexting offences are summary offences. Offences relating to a victim who is under the age of 17 years are categorised as minor indictable.

The act of taking or sharing intimate images or videos has become increasingly common. In recent years, the availability of AI technology and the ease with which it can be used to digitally create invasive images (also known as 'deepfakes') has contributed to an escalation in image-based abuse. Australia's eSafety Commissioner, Julie Inman Grant, has stated that the presence of explicit deepfakes on the internet has increased by over 500% year on year since 2019.[77]

The South Australian Parliament recently moved to address the harm caused by humiliating, degrading or invasive material that has been generated through the use of AI technology, passing legislation on 14 May 2025. The *Summary Offences (Humiliating, Degrading or Invasive Depictions) Amendment Act 2025* (SA)[78] creates new offences of creating or distributing (including threats to distribute) humiliating, degrading or invasive depictions of a simulated person without consent.[79] Consent cannot be given if the person is under the age of 17 years or has a cognitive impairment.[80] An invasive depiction includes artificially generated content depicting the simulated person in a state of undress or performing a private act, such as a sexual act.[81]

A breach of an intervention order is also a criminal offence, attracting penalties ranging from 2 to 10 years' imprisonment.

In some jurisdictions in Australia and overseas, coercive and controlling behaviour has been criminalised.[82] Coercive control offences recognise that domestic, family and sexual violence is not limited to isolated incidents of physical violence and often occurs as an ongoing pattern of non-physical abuse designed to demean and manipulate and to take away a person's autonomy.

The South Australian government has introduced a bill to the South Australia Parliament to criminalise coercive control. The Criminal Law Consolidation (Coercive Control) Amendment Bill 2024 (the Coercive Control Bill) was introduced to the South Australian Parliament on 29 August 2024 and is currently under consideration by the Legislative Council, having passed the House of Assembly on 12 November 2024.

Although coercive control can be present in a range of relationships, the Coercive Control Bill seeks to criminalise coercive control between intimate partners and former intimate partners only. This limitation was explained in the second reading:

> **"We acknowledge that coercive control occurs in other kinds of relationships too: between siblings, carers, by children towards parents or by parents towards children, or even in a non-family context. Indeed, coercive control can occur in any context in which one person seeks to have power and control over another. However, this bill focuses on intimate partner relationships because we acknowledge the abhorrent link between coercive control and intimate partner homicide. This bill will only apply to coercive control in intimate partner relationships because we want to focus resources on this extremely high-risk area.**[83]

The central element of the new offence is a course of conduct that has, or is likely to have, a controlling impact on the person subject to the conduct.[84] A controlling impact means behaviour that restricts a person's freedom of movement, action or bodily autonomy; their freedom to engage in social, political, religious, cultural, educational or economic activities; and their ability to access the justice system, basic necessities, support services or property that they own.[85] Examples set out in the Coercive Control Bill include:

- restricting another person's freedom of movement by locking the other person in a room or building, or excessively monitoring or tracking the other person's activities, movements or communication
- restricting another person's freedom of action by physically harming the other person after the other person fails to undertake a household duty in accordance with the person's wishes
- restricting another person's ability to make choices with respect to their body by destroying the other person's method of contraception or threatening to sexually assault the other person if the other person were to behave or refuse to behave in a certain manner
- restricting another person's ability to access basic necessities by locking the refrigerator or pantry or engaging in derogatory name-calling of the other person each time the other person eats food.[86]

How the new offence is implemented, including the timeframe for implementation, is paramount. The Commission has heard that the implementation of a new coercive control offence represents a clear opportunity to transform South Australia's current understanding of domestic, family and sexual violence from an incident-based approach to recognising that coercive control almost always underpins domestic and family violence and can include physical or non-physical abusive behaviours, or a combination of both. This opportunity is further explored in Chapter 2.



At a glance

Prevalence of domestic, family and sexual violence

National prevalence

1 in 4 women
1 in 8 men



has ever experienced physical violence by a partner or family member since the age of 15.[a]

1 in 4 women
1 in 7 men



has ever experienced physical violence, emotional abuse or economic abuse since the age of 15 by a cohabiting partner.[b]

1 in 5 women
1 in 16 men



has ever experienced sexual violence since the age of 15.[c]

3 in 5 Australians



have ever experienced at least one form of childhood maltreatment.[d]

South Australian prevalence



1 in 30 children

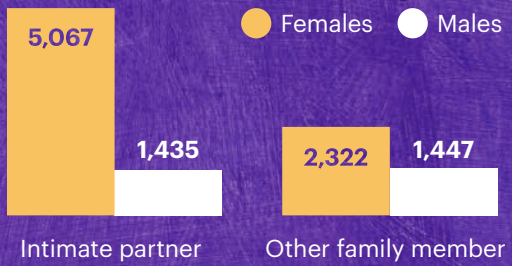
experience domestic, family and/or sexual violence each year in South Australia.[e]



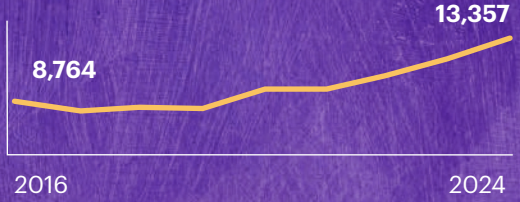
1 in 7 Aboriginal children

experience domestic, family and/or sexual violence each year in South Australia.[f]

Number of family and domestic violence–related victims by relationship of offender to victim 2023[g]



Family domestic violence offences against the person[h]



Prevalence of domestic, family and sexual violence

Painting a clear picture of the impacts and prevalence of domestic, family and sexual violence in South Australia is difficult. While it is clear this violence is pervasive, and that it has profound and enduring impacts on those who experience it, the true extent and effect of domestic, family and sexual violence remains largely unknown.

Historically, domestic, family and sexual violence was considered a private matter that occurred behind closed doors. While these societal attitudes have changed for the better in recent decades, domestic, family and sexual violence continues to be under-reported. The barriers to reporting are many and varied, and include stigma, taboo and shame, fear of reprisals, fear of not being believed, and fear of an unwanted intervention from police or child protection agencies. Barriers to reporting are further explained in Chapter 4.

While it is known that domestic, family and sexual violence remains under-reported in South Australia, it is also true that the disclosures that do occur are often not recorded or reported in an organised or coordinated way. Few South Australian government agencies report publicly on domestic, family and sexual violence. The CAA's intervention order statistics and SAPOL's rolling crime data are helpful but paint an incomplete picture. Domestic, family and sexual violence does not often feature on the websites and in the annual reports of most South Australian government agencies, thereby providing little indication of either the prevalence of the issue or how agencies are responding to it. This knowledge gap has prevented the Commission from developing a clear understanding of the true extent of the issue in South Australia, outside of collating a variety of insights from disparate sources.

The prevalence of domestic, family and sexual violence in Australia

There are several high-level resources providing insight into the prevalence of domestic, family and sexual violence in Australia. These resources are largely drawn from whole-of-population surveys, and often do not provide a breakdown of the data in relation to particular cohorts of the community such as Aboriginal and Torres Strait Islander people, people with disability, people from CALD communities and LGBTQIA+ communities.

A key national resource is the Australian Bureau of Statistics' Personal Safety Survey (PSS). The 2021–22 PSS asked survey participants about their experiences of physical and sexual violence, as well as emotional abuse, economic abuse, stalking and sexual harassment, since the age of 15. The PSS revealed that experiences of violence are common in Australia, with 2 in 5 Australians (39% of women and 43% of men) having experienced at least one form of violence since the age of 15.[87]

When asked about experiences of domestic and family violence, 1 in 4 women (27%) and 1 in 8 men (12%) responded that they had experienced physical violence by a partner or family member since the age of 15. When asked about experiences of sexual violence, 1 in 5 women (22%) and 1 in 16 men (6%) disclosed they had experienced sexual violence since the age of 15.[88] Women were almost twice as likely to experience stalking from a male intimate partner (45%) than a stranger (23%).[89] The PSS also measured respondents' experiences of sexual harassment within the past 12 months, finding that more than 1 in 8 women (13%) reported experiencing sexual harassment compared with 1 in 20 men (5%).[90]

Another key national resource is the Australian Child Maltreatment Study (ACMS). The 2023 ACMS asked Australians aged 16 and over about their childhood experiences of physical abuse, sexual abuse, emotional abuse, neglect and exposure to domestic violence. The ACMS found that 3 in every 5 Australians (62%) had experienced at least one type of child maltreatment. Exposure to domestic violence was the most common form of maltreatment experienced (40%), followed by physical abuse (32%), emotional abuse (31%), sexual abuse (29%) and neglect (9%).[91] The ACMS also examined the experiences of young people aged 16 to 24 at the time of the survey, in order to develop a contemporary picture of the prevalence of childhood maltreatment, revealing that:

> **child maltreatment is a major contemporary problem in Australian society, affecting a substantial proportion of Australian children and youth. Some types of child maltreatment are even more common in Australian society now, than in former times.**[92]

The youngest cohort of ACMS participants were more likely than any other age group to have been exposed to domestic violence (44%) and have experienced emotional abuse (35%) in their childhood; however, they did report a slightly lower rate of physical abuse than older cohorts (28%).[93]



When compared with the results of the PSS, the ACMS results reveal that experiences of childhood maltreatment may be more prevalent than adult experiences of violence in Australia. Alarmingly, the same appears true for sexual violence, with the ACMS finding that the national prevalence of child sexual abuse was 29%, or more than 1 in 4 Australians. As is the case with adult experiences of domestic, family and sexual violence, there are gendered differences. Girls were more likely than boys to disclose that they had experienced sexual abuse (37% compared to 19%). In the ages 16–24 cohort, girls were also more likely than boys to experience neglect (13% compared to 7%) and emotional abuse (51% compared to 27%). Girls and boys experienced similar rates of physical abuse (29% compared to 26%) and exposure to domestic violence (46% compared to 41%).[94]

A national resource specific to sexual violence prevalence rates across university student cohorts is the National Student Safety Survey (NSSS). The most recent NSSS was conducted in 2021, across 38 Australian university institutions. Key findings from the NSSS included:

- 1 in 3 Australian university students had experienced sexual assault at least once in their lifetime
- 1 in 2 Australian university students had experienced sexual harassment at least once in their lifetime
- 1 in 12 Australian university students had experienced sexual harassment in the last 12 months.[95]

The NSSS found that experiences of sexual harassment and assault were under-reported, with 2 in 3 (66%) university students seeking support or assistance following a sexual assault. Support or assistance was most likely sought from a friend (54%), family member (20%) or mental health professional (11%). Very few students sought support or assistance from police (2%) or a specialist sexual assault service (1%).[96] Not wanting to involve police was a common barrier to disclosing sexual harassment or assault to a university.[97]

The Australian Institute of Criminology's (AIC) statistical reports on homicide are the key national resource on domestic and family violence homicides in Australia. These reports reveal that the average rate of domestic and family violence–related homicides has declined substantially over the last 3 decades, despite population increases. For example, there were 88 domestic and family violence–related homicides in 2023–24, compared to 134 in 1993–94.[98] Notwithstanding this overall decline, since the 2021–22 report marked the lowest ever recorded national rate of domestic and family violence related homicides at 62, that rate has risen in the last 2 years to 79 in 2022–23 and 88 in 2023–24.[99]

The rates of domestic and family violence–related homicides in Australia are horrific, regardless of the overall downward trend. The 88 people who were killed by an intimate partner or family member in 2023–24 averages to 1 person every 4 days. One-third (34%) of all homicides in Australia in 2023–24 involved domestic or family violence, with 3 in 5 (62%) of these homicides carried out by an intimate partner or ex-partner and 2 in 5 (38%) by family members.[100]

Figure 1.3: Domestic and family violence–related homicide victims, 2023–24

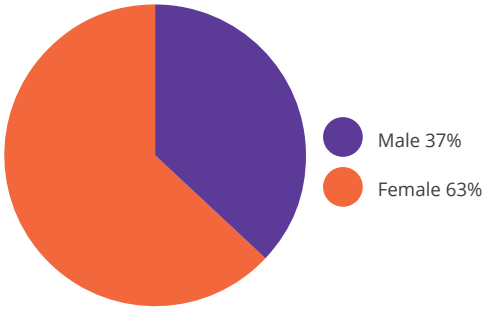


Figure 1.4: Domestic and family violence–related homicide offenders, 2023–24

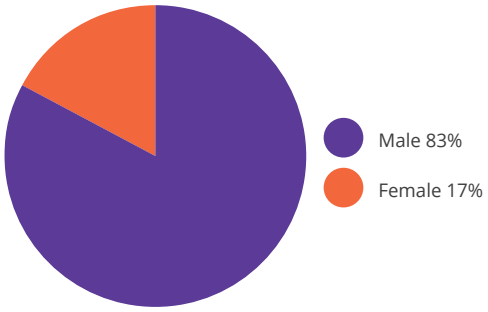
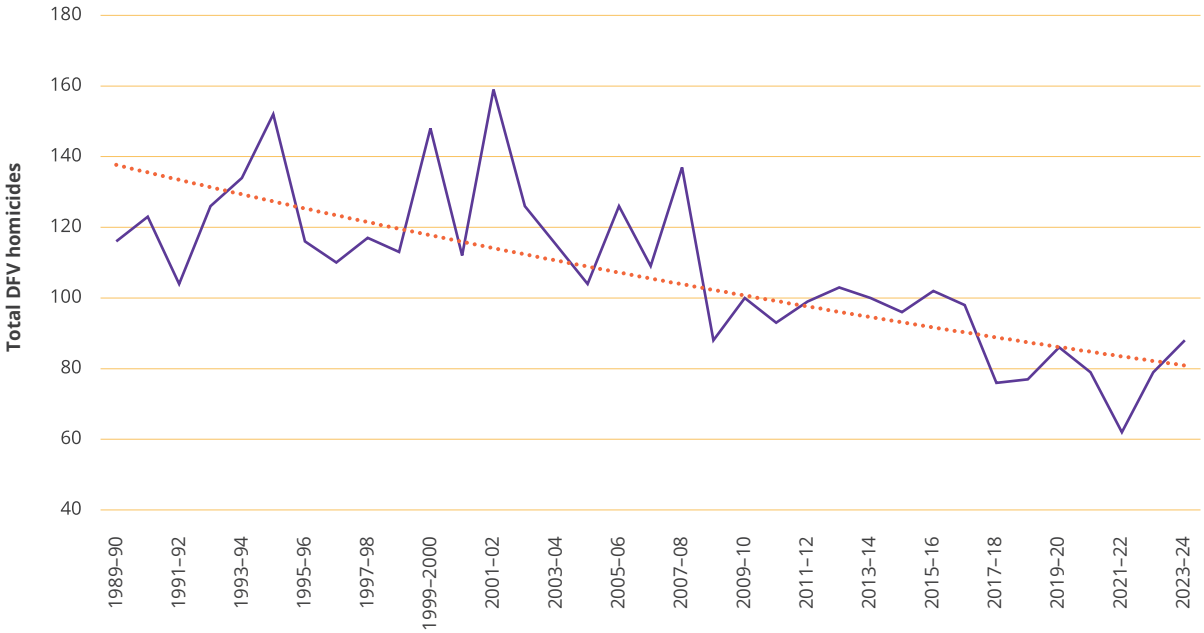


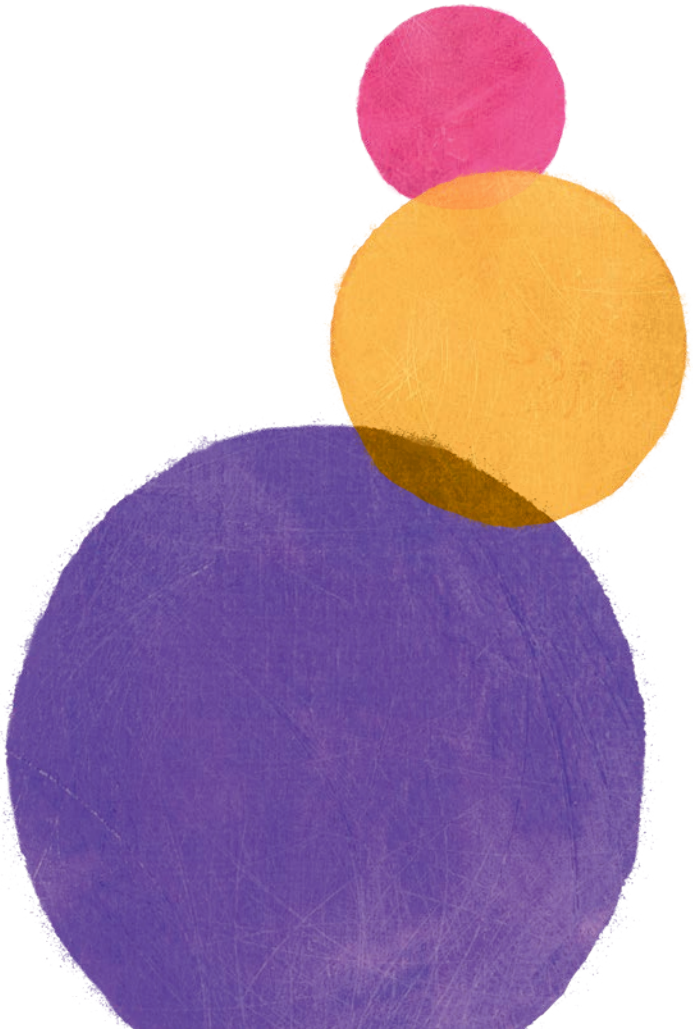
Figure 1.2: National domestic and family violence–related homicides, 1989–2024



While data regarding homicides is captured by justice agencies around Australia and published, much less is known about the prevalence of other lives lost in the context of domestic, family and sexual violence, such as by suicide or in the rates of disappeared persons.

In a 2025 publication, the Australian Institute of Health and Welfare (AIHW) identified there is no nationally consistent collection of data for suicides relating to domestic, family or sexual violence despite the fact that, in 2023, one of the most common psychosocial risk factors for suicide in both males and females was 'problems in relationship with spouse or partner'.[101] Promising attempts at capturing this data are emerging – in 2024, the Coroners Court of Victoria prepared a data summary to assist the Rapid Review of Prevention Approaches (Rapid Review)[102] by analysing cases between 2009 and 2016 and finding that in 1 in 4 (25%) of the cases, the deceased had been exposed to domestic or family violence.[103]

On the rates of disappeared persons, the Senate's Legal and Constitutional Affairs References Committee's Missing and Murdered First Nations Women and Children report identified that fragmented and inconsistent data collection approaches prevent an accurate understanding of the rates of disappeared women and children and connections between disappearance and domestic, family and sexual violence.[104]



The prevalence of domestic, family and sexual violence in South Australia

The PSS provides some indication of the population-level prevalence of domestic and sexual violence in South Australia.[105] The survey estimated that almost 1 in 3 (29%) South Australian women had experienced violence, emotional abuse or economic abuse by a cohabiting partner since the age of 15 (the national rate is 27%). It also estimated that 1 in 5 (21%) South Australian women had experienced sexual violence since the age of 15 (the national rate is 22%). Of the South Australian women who had experienced partner abuse, the PSS indicated that 1 in 6 (17%) had experienced physical or sexual violence, 1 in 6 (17%) had experienced economic abuse, and 1 in 4 (24%) had experienced emotional abuse.[106]

Other than these PSS insights, indications of the prevalence of domestic, family and sexual violence in South Australia must be drawn from administrative data from South Australian government agencies and other organisations.[107] Administrative data differs from population-level surveys as it will show the number of reports and incidents recorded during a specific period of time (known as incidence), while population-level surveys like the PSS and ACMS tend to ask whether someone has experienced violence in the last 12 months or in their lifetime (known as prevalence). For example, while 1 in 6 South Australian women (17%) has experienced physical violence by a cohabiting partner at least once since the age of 15, a much smaller proportion of South Australian women (1.5%) are recorded as experiencing physical violence by a cohabiting partner specifically in 2021–22.[108]

In 2024, BetterStart Health and Development Research Group (BetterStart) assisted the Commission with population-level research aimed at answering the question: What proportion of children and young people are exposed to domestic, family and sexual violence in South Australia?

To answer this question, BetterStart used its BEBOLD linked data platform (Better Evidence, Better Outcomes, Linked Data), which draws de-identified administrative data from South Australian government agencies including the Department for Child Protection, SA Health and SA Housing Trust. At the time of the research being conducted, BEBOLD did not have access to data from SAPOL, the CAA, the Department for Correctional Services or any relevant non-government organisations. This is highly likely to mean that the findings set out in BetterStart's report are an underestimate of actual prevalence rates in South Australia.

In the report, which is attached as Appendix K, BetterStart made a number of important findings about the experiences of domestic, family and sexual violence among South Australian children and young people. Almost half (46%) of all screened in child protection notifications (more than 16,500 cases in 2022), involved domestic, family and sexual violence in the primary alleged grounds. Allegations of sexual harm were involved in 1 in 7 (14%) screened in child protection notifications. In other words, nearly half of all child protection matters of concern in South Australia relate to domestic, family and sexual violence.[109]

In South Australia, over 3% or 1 in 30 children and young people, experience domestic, family and/or sexual violence every year. This is the equivalent of one child in every classroom, and equates to approximately 12,000 children across South Australia who experience domestic, family and/or sexual violence every year.[110] For comparison, PSS yearly prevalence data for adult women victim survivors in South Australia found rates of 1.5% for physical violence from co-habiting partners, and 2.6% for sexual violence.[111]

Domestic, family and sexual violence was experienced across all age groups, although slightly more female than male children and young people experienced domestic, family and sexual violence each year; for example, in 2022 3.4% of females and 2.9% of males were reported to have experienced violence.[112]

The report clearly illustrates that social disadvantage, discrimination and where children grow up is related to a disproportionate increase in the experience of domestic, family or sexual violence for some population groups. For example, 1 in 18 children and young people living in outback South Australia (South Australia – Outback is an ABS Statistical Area Level 4; its boundary is North of the Barossa – Yorke – Mid North area, and extends to the Northern, Western and majority of Eastern State boundaries), 1 in 4 children living in socioeconomically disadvantaged areas, and 1 in 7 Aboriginal children and young people are affected by domestic, family or sexual violence each year. Of all children in South Australia who experienced domestic, family and sexual violence each year, one-third were found to be living in the northern suburbs of Adelaide.[113]

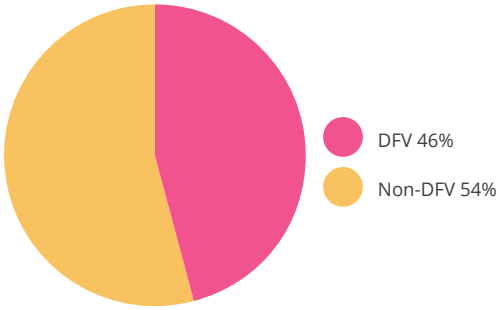
Justice data, such as statistics from SAPOL and the CAA, provide further insights into the incidence of domestic, family and sexual violence in South Australia. Data analysis generously conducted by Justice Policy and Analytics in the Attorney-General's Department[114] illustrates the increase in offences reported to SAPOL over a period of 9 years. The data represents what is classified as domestic and family violence–related 'offences against the person' and 'offences against property'. It does not include contraventions of intervention orders or breaches of bail, nor does it include reports to police that were classified as 'non-offence' reports; that is, reports of domestic and family violence that did not constitute potential criminal offences. These exclusions result in the following data being an under-reporting of the total volume of domestic and family violence that is reported to police. Notwithstanding this, the data does indicate a significant increase in reported offences over time.

Figure 1.5: Family and domestic violence offences reported or detected by SAPOL, 2016 to 2024



'Offences against the person' include the types of offences described on page 59. In 2024, domestic and family violence–related offences made up almost half (46%) of all offences against the person in South Australia.[115]

Figure 1.6: Proportion of domestic and family violence–related offences against the person in South Australia, 2024



The analysis conducted by Justice Policy and Analytics further reveals that there were 10,666 recorded victims of domestic and family violence–related assaults in South Australia in 2023. Such victims were most likely to be females between the ages of 29 and 34. Females experiencing domestic and family violence were more likely to be assaulted by an intimate partner than by a family member, while males experiencing violence were slightly more likely to be assaulted by a family member than by an intimate partner. Females were much more likely to experience domestic or family violence–related assaults than males overall.[116]

Figure 1.7: Assault: Number of domestic and family violence–related victims, by age at report and gender, South Australia, 2023

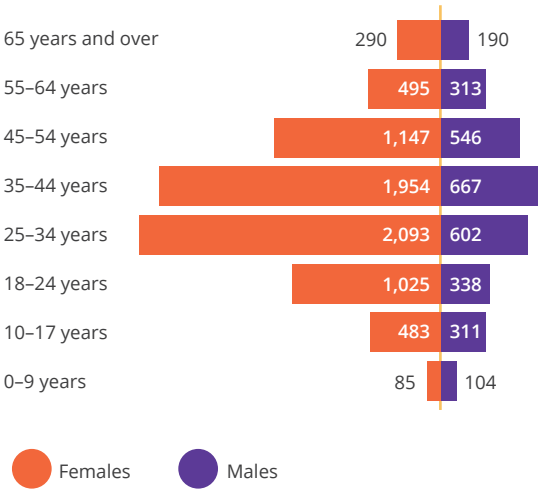
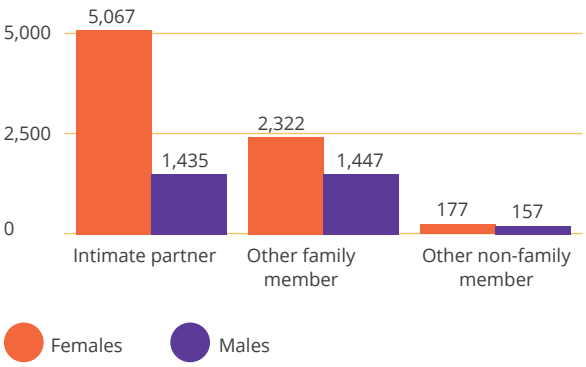


Figure 1.8: Assault: Number of domestic and family violence–related victims, by relationship of offender to victim, South Australia, 2023



In relation to sexual assault, the analysis identified 2,012 recorded victims in South Australia in 2023. Of these, more than 4 in 5 (83%) people who experienced sexual assault knew the offender, and almost 1 in 3 (31%) people who experienced sexual assault were aged between 0 and 17 at the time of the incident. Almost 2 in 3 sexual assaults were not domestic and family violence related. Females were significantly more likely to experience sexual assault than males (86% and 14% respectively).[117]

Figure 1.9: Sexual assault: Number of victims, by age at report and gender, South Australia, 2023

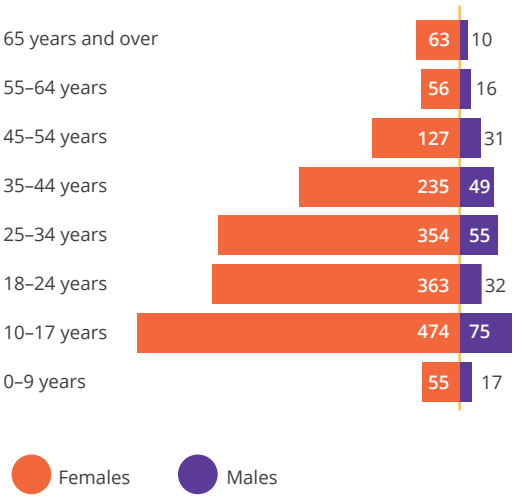
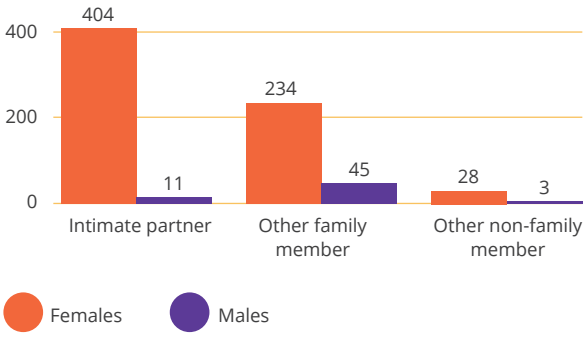
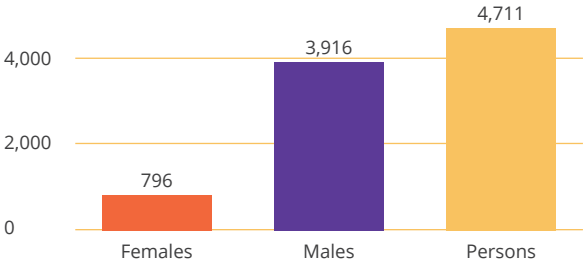


Figure 1.10: Sexual assault: Number of domestic and family violence–related victims, by relationship of offender to victim, South Australia, 2023



In South Australia in financial year 2023–24, there were 4,711 offenders charged by police for domestic and family violence–related offences, which was an increase of 10% from the previous year.

Figure 1.11: Number of domestic and family violence–related offenders by gender, South Australia, 2023–24



In South Australian courts in 2023–24, there were 4,307 defendants with at least one domestic and family violence offence finalised in court. The most common principal offences were acts intended to cause injury (66%), breach of violence orders (25%) and property damage (7%). More than half of the domestic and family violence offences in courts were withdrawn (56%), and two-fifths resulted in a guilty outcome (39%).[118]

Another indication of the prevalence of domestic and family violence in South Australia is the volume of intervention order lodgements each year, along with the number of alleged contraventions that are reported.

Data provided by the CAA reveals there were 3,969 domestic and family violence–related intervention order lodgements made in financial year 2023–24, equating to an average of 11 each day. Intervention order lodgements involved a male respondent in 4 in 5 (82%) cases, and less than 1 in 5 involved a female respondent (17%). In the same financial year, there were 2,698 lodgements for contraventions of intervention orders, an increase of 5% on the previous financial year.[119] In 2023–24, there were a total of 1,995 defendants in court for breaching domestic and family violence–related intervention orders.[120]

A final important indication of the prevalence of domestic and family violence in South Australia is the number of homicides. The AIC Statistical Report on Homicide in Australia 2023–24 reveals that, of 18 homicides in South Australia, 8 were carried out by a partner or family member. This means more than 2 in 5 (44%) of all homicides in South Australia in 2023–24 related to domestic or family violence.[121]

Impacts of domestic, family and sexual violence

The Commission heard that domestic, family and sexual violence can have serious and long-lasting impacts on victim-survivors and their family members, well beyond any physical harm that might be suffered. Domestic, family and sexual violence can impact a person's physical and mental health, as well as their family and social relationships, economic position, workforce participation and housing status. The impacts can range from short-term challenges to severe and lifelong harm.

Impacts of experiencing domestic, family and sexual violence can include:

- feelings of shame, doubt, loss and low self-worth
- loss of confidence and autonomy
- fear, anxiety, stress and hypervigilance
- physical injuries
- isolation from friends, family and community
- normalisation of violence in relationships and society
- loss of sick and personal leave at work
- loss of employment or employment opportunities
- loss of education and training opportunities
- loss of economic security
- separation from country and culture
- poverty
- homelessness
- alcohol and drug misuse as an anaesthetic or coping mechanism
- child removal or loss of access to children
- ill mental health caused by trauma, such as anxiety, depression, post-traumatic stress disorders (PTSD) and borderline personality disorders
- long-term health impacts, such as acquired brain injuries, disabilities, dental health issues and other chronic health issues
- poor sexual and reproductive health outcomes
- entrenchment of intergenerational cycles of violence and disadvantage
- death or serious injury
- self-harm and suicide.

The Australian Burden of Disease Study (ABDS) reports on the impact of fatal and non-fatal diseases and injuries on the Australian population, comparing the population's ideal health with actual health. The study considers the impact of 20 individual risk factors on Australia's burden of disease, including child abuse and neglect and female experiences of intimate partner violence. The 2024 ABDS found that child abuse and neglect was the eighth leading risk factor contributing to the disease burden of the Australian population (2.4%), and that intimate partner violence was the 15th (0.8%). In leading risk factors for females, child abuse and neglect increased to sixth (2.9%), and intimate partner violence to 11th (1.7%).[122]

The ABDS also explores the links between individual risk factors and different attributable disease burdens. The ABDS found that experiences of child abuse and neglect had links with anxiety disorders (26.7%), suicide and self-harm (25.8%), and depressive disorders (20.4%). Intimate partner violence was found to have links with early pregnancy loss (16.3%), experiences of homicide and violence (12.7%), depressive disorders (11.9%), anxiety disorders (6.3%), suicide and self-harm (4.7%), and alcohol use disorders (1.3%).[123]

The impacts of domestic, family and sexual violence are often intergenerational – the harm caused can ripple through families for many years, and manifest in different ways. Trauma has a long tail. Children and young people experience domestic, family and sexual violence profoundly, regardless of whether they are personally targeted by the violence. There has been increased understanding that adverse childhood experiences are a significant risk factor for both the experience of and use of violence in adolescence and adulthood, along with several other poor health and social outcomes.[124] Intergenerational cycles of disadvantage and violence can become entrenched in families and communities, denying people opportunities to thrive.

The Commission heard that in households experiencing violence there may also be animal abuse. Pets and animals are sometimes injured or killed as part of coercive and controlling behaviour and other acts of domestic and family violence.

Domestic, family and sexual violence causes ongoing and significant costs to the community. These costs include the impact of domestic, family and sexual violence on the health system, lower productivity and lost wages, as well as costs associated with policing responses, incarceration, the courts system, support services and violence prevention programs. According to a report prepared by KPMG in 2016 for the Australian Government Department of Social Services, the total annual costs of violence against women and children in Australia was estimated to be between $22 billion and $26 billion in financial year 2015–16. The report found that the cost to individual women experiencing violence made up more than half of that total, or $11.3 billion, with the rest of the cost shared by governments and the community.[125] A more recent report by the Commonwealth Bank of Australia and Deloitte Access Economics in 2022 estimated that the cost of financial abuse alone amounted to $5.7 billion, with the costs to the broader economy just below that at $5.2 billion.[126] Given the documented increase in the rates of domestic, family and sexual violence it can be inferred that these costs are increasing.

While domestic, family and sexual violence can affect people regardless of their background, the evidence is clear: women are more likely to experience this violence, compared to men. In addition to this, some population groups can experience violence at increased rates, be more vulnerable to its effects, and be subject to unique or specific forms of violence.

Children and young people

Children and young people are particularly vulnerable to the impact of domestic, family and sexual violence. The violence is, more often than not, used by a person who is in a position of trust, responsibility or power in relation to the child or young person. The harm caused by adverse childhood experiences, including experiences of domestic, family and sexual violence, can have serious and long-lasting impacts on children and young people's lives. Evidence shows that experiences of violence impact the development of children. The Australian Association for Infant Mental Health wrote in their submission that domestic, family and sexual violence 'during pregnancy and the perinatal period is associated with poor health outcomes for the foetus, newborn, and infant up to 1 year postpartum'.[127] Adverse childhood experiences can hinder physical and emotional development, lead to behavioural issues and increase the risk of using or experiencing violence in adulthood. Children in abusive households may also struggle academically and socially.[128]

The ACMS, which revealed that almost half of Australia's children and young people are exposed to domestic, family and sexual violence, also found that experiences of childhood maltreatment are associated with severe mental health challenges and behavioural harms both in childhood and into adulthood. Adults who had experienced childhood maltreatment were found to be more than twice as likely to have a mental health disorder than those who had not (48% compared with 22%).[129] Health risk behaviours, such as substance dependence, self-harm and suicide, were significantly more common in Australians who experienced childhood maltreatment than those who had not.[130]

While giving evidence at Day 5 of public hearings, Professor Leah Bromfield spoke about the results of the ACMS:

> **61% of young Australians reported experiencing one or more forms of abuse and neglect in our landmark nationally representative studies. 61%. That's telling us that child abuse and neglect is actually experienced by the majority of the population of children. That's really shocking. I don't know why we're not shouting about this from the rooftops. Our kids are our greatest asset for the country and 61% are experiencing one or more forms of abuse or neglect. One in four children actually experienced three to five types of abuse and neglect and that was often repeated incidents over a prolonged period of time. [This is] what I talk about as chronic abuse and neglect.**[131]

The impacts of domestic, family and sexual violence on South Australian children and young people are made clear in the Silence and Inaction Report:

> **For numerous young people interviewed, experiences of self-harm, and suicide attempts were directly linked to the trauma of ongoing or past violence, compounded by a lack of support, persistent feelings of powerlessness, and the absence of a safe or stable environment. Some young people described having made multiple suicide attempts, often without any sustained follow-up care or support. Others spoke of using self-harm as a coping mechanism when the psychological pain became overwhelming.**[132]

The Silence and Inaction Report found that children and young people experiencing domestic, family and sexual violence often struggle to be visible in a system that is designed by adults, for adults. This was evident in many of the lived experiences quoted in the report:

> **A lot of people, their services are to support people 16 and above. So, I wonder what will happen to the people below 16 … We should not be excluded because of that [age] … because all of us have the right to be treated with dignity and respect.**[133]

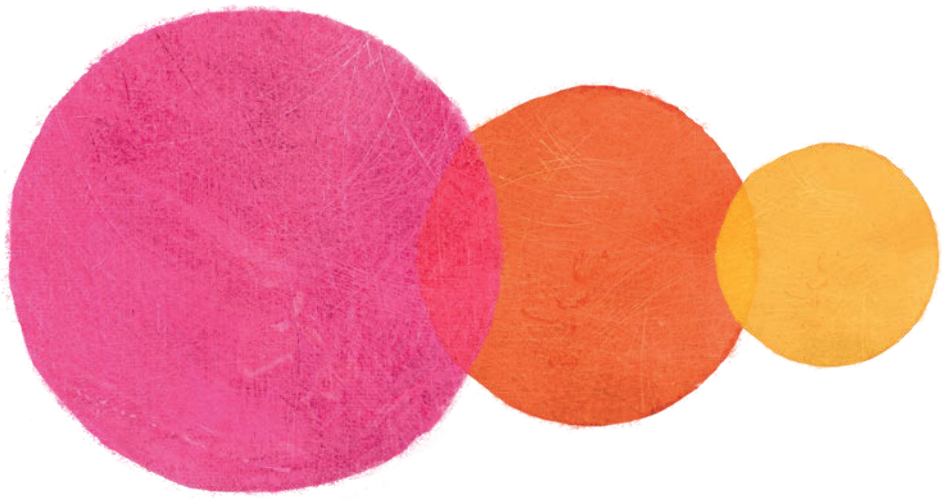
> **I've told so many people throughout my entire life … everyone knew [but] no services, no homeless shelters, no DV shelters … no one gave a f..k. And they saw the bruises.**[134]

> **[T]he mental health system has nothing for children.**[135]

When children and young people did manage to get a response in South Australia, more often than not they found themselves let down by the services meant to protect them:

> **Throughout the interviews, young people consistently described deep dissatisfaction with the institutions that were supposed to protect and support them. Police, child protection, courts, and other formal systems were not only seen as ineffective – they were often experienced as retraumatising, disempowering, or actively harmful. While a small number of participants shared positive or neutral encounters, the overwhelming majority reflected on systems that failed to respond with urgency, care, or understanding.** [136]

Domestic, family and sexual violence can have profound impacts on children and young people. These impacts are often compounded by a system that is not necessarily designed with children and young people in mind. The Silence and Inaction Report calls for a 'fundamental cultural shift' in South Australia, which can only be achieved by including the voices of children and young people, and building an 'entire system that meets their needs'.[137]



Aboriginal people

Aboriginal people, families and communities are disproportionately impacted by domestic, family and sexual violence. Violence experienced by Aboriginal communities is complex, and is often underpinned by the ongoing experiences of intergenerational trauma, colonial violence, disempowerment, discrimination and racism, as well as socioeconomic disadvantage and poverty.[138] These intersecting forms of disadvantage and discrimination are found to contribute to poor physical and mental health, substance misuse and incarceration, which further intersect with the use and experience of family violence.[139] Colonisation has the effect of disempowering Aboriginal people and communities, leading to the occurrence of what is known as 'lateral violence'. This is well explained in the joint submission from the Aboriginal Communities and Families Health Research Alliance and the Stronger Futures Centre of Research Excellence, who write that:

> **"Family violence in Aboriginal and Torres Strait Islander communities cannot be fully understood without considering the interconnections between intergenerational trauma, lateral violence and interpersonal and structural racism. Lateral violence has been described as the way powerless people covertly and overtly direct their dissatisfaction inward, toward each other, toward themselves and toward those less powerful than themselves. Lateral violence and the experiences of racism that underpin lateral violence in Aboriginal and Torres Strait Islander communities are important considerations in understanding causes of other types of violence experienced by Aboriginal and Torres Strait Islander communities.**[140]

The ongoing effects of colonialism also serve to disrupt traditional cultures, relationships and community norms, which otherwise serve as protective factors for Aboriginal communities.[141] Aboriginal people face additional barriers to seeking help and support for family violence, which include experiences of, or fear of experiencing, racism and discrimination from service providers and police, fear of child removal, remoteness and isolation, and pressure to avoid the incarceration of community members.[142]

Aboriginal people are significantly overrepresented both in their experience of violence and their use of violence. This is starkly apparent in South Australia, where in 2021, Aboriginal people represented 2.4% of the population[143] and in financial year 2023–24, one-third (34%) of defendants for domestic and family violence–related offences were Aboriginal.[144] Research compiled by ANROWS shows that:

- Aboriginal people are between 2 and 5 times more likely to experience or use violence than non-Aboriginal people[145]
- Aboriginal people are much more likely to be hospitalised for domestic and family violence–related assaults than non-Aboriginal people (35 times more likely for women and 25 times more likely for men)
- Aboriginal women are 5 times more likely to be victims of a homicide than non-Aboriginal women.[146]

These statistics highlight a particular national shame: the rates of domestic, family and sexual violence against Aboriginal women in Australia and the high death toll as a consequence. Contributing to Aboriginal women and girls' experience of violence is intersectional discrimination.[147]

Aboriginal people are also over-represented in the justice system, where they are 7 times more likely to be charged with a criminal offence and 12 times more likely to receive a prison sentence than non-Aboriginal Australians.[148] The overall prevalence of domestic, family and sexual violence against Aboriginal people means that Aboriginal children are 'particularly at risk' of experiencing domestic, family and sexual violence, thereby contributing to their over-representation in child protection systems.[149]

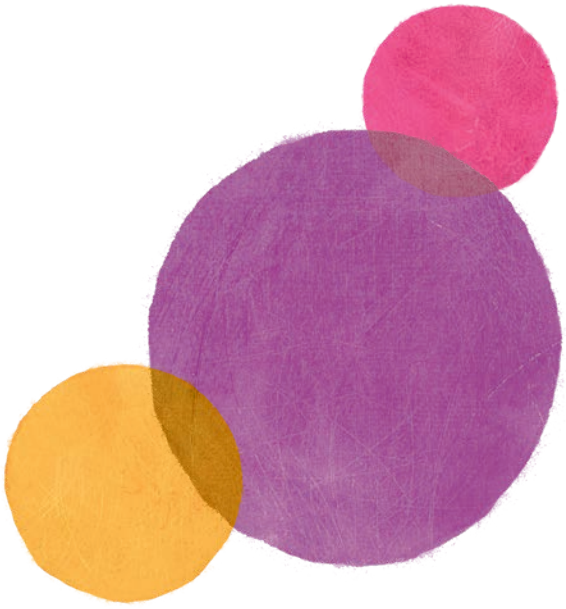
The Aboriginal Communities and Families Health Research Alliance and the Stronger Futures Centre of Research Excellence submission make clear:

> **It is critical to recognise that family violence is not part of Aboriginal and Torres Strait Islander culture.**

Professor Leah Bromfield reiterated the same truth in her evidence at Day 5 of public hearings:

> **My concern is when anyone uses that data and misconstrues that over-representation to suggest that Aboriginality or Aboriginal culture is a risk factor. That's not true. There's really strong evidence in multiple domains that demonstrate that culture is really protective. It's also an important element of healing … The direct and continuing impacts of colonisation are what make Aboriginal women and children more vulnerable to violence.**

> **I was really struck by a research study that I'm involved in for the Royal Commission into Institutional Responses to Child Sexual Abuse. In that study, we examined archival records from First Settlement, so accounts for people or from people on the First Fleet, and I think it's worth noting that that was at a time when British children were on the First Fleet as child convicts and exposed to significant violence as child convicts. But the accounts of all the archival records in relation to First Settlement were about how Aboriginal children were thriving. So, for millennia, Aboriginal people have grown Aboriginal kids strong and safe in culture to be thriving. The impacts of colonisation have been absolutely devastating for First Nation peoples and those impacts continue to contribute to the experience of violence.**[150]



Culturally and linguistically diverse communities

CALD communities can experience specific and unique forms of domestic, family and sexual violence. CALD communities are not a homogenous group, and cultural diversity in itself does not increase risk of using or experiencing violence. Some migrants, particularly refugees, are at an increased risk of pre-migration trauma caused by experiences of war, violence and disasters. Additionally, some cultures have different attitudes towards gender roles and family dynamics, with some expecting that women and girls submit to husbands and fathers, stay in violent relationships, and avoid bringing shame to their families.[151]

Insecure visa status can contribute significantly to the vulnerability of CALD communities to experiences of violence, especially in instances where the person experiencing violence may be dependent on the person or people using violence for residency. Temporary visas can place restrictions on work, housing, welfare and childcare, which can intersect with other vulnerabilities such as language barriers, financial dependency, social isolation and lack of formal and informal supports. Temporary visa holders are at a higher risk of domestic, family and sexual violence.[152] CALD communities can also experience specific forms of violence, which can include dowry abuse, visa abuse, reproductive coercion, modern slavery and forced marriage, female genital mutilation and honour killings.[153]

The impacts of domestic, family and sexual violence on CALD people can be compounded by the additional barriers and complications they may experience in South Australia.[154] These can include a lack of education on Australian laws, rights and values; language barriers and lack of CALD-specific information; fear and distrust of authorities due to pre-migration experiences; community norms that discourage the acknowledgement or disclosure of violence; and community beliefs that issues around domestic, family and sexual violence should be dealt with within family units. Along with barriers to seeking help, CALD communities often encounter a lack of culturally appropriate services and can have restricted access to social support such as income security and health care.

> **“ Even after undergoing a lot of domestic violence it took me time to move out since I was worried of my Visa cancellation. The violence was too much and later decided to leave and now in emergency accommodation. I have a baby and I am so stressed about the Visa since it will expire next year and am worried of going back home because of my safety since my (family) have been forcing me to stay in marriage. At the moment I have tried exploring different visa option and its even making me so stressful and mentally draining.**[155]

The National Community Attitudes towards Violence against Women Survey (NCAS) has demonstrated that attitudes to, and knowledge of, domestic, family and sexual violence is different for some people with CALD backgrounds than for people who may not be from a CALD background. For example:

‘Respondents who spoke English at home were significantly more likely than those who spoke a language other than English (LOTE) at home to demonstrate ‘advanced’:

- understanding of violence against women (48% of respondents who spoke English, compared with 31% of LOTE with good English and 22% of LOTE with poor English)
- rejection of gender inequality (30% of respondents who spoke English, compared with 21% of LOTE with good English and 13% of LOTE with poor English)
- rejection of violence against women (38% of respondents who spoke English, compared with 21% of LOTE with good English and 6% of LOTE with poor English).’[156]

This speaks to the barriers that women from CALD communities may experience when seeking help from within their communities, and the reaction they may receive if they do seek help from outside of their communities.

LGBTQIA+ communities

A 2023 population scale study commissioned by the Australian Government Department of Health and Aged Care to inform development of a 10-year LGBTQIA+ Health and Wellbeing Action Plan (Rainbow Realities Report) found that domestic, family and sexual violence 'is a high prevalence experience among LGBTQA+ people, which shapes negative immediate and long-term outcomes for individuals impacted by it'.[157] The Rainbow Realities Report estimated that LGBTQIA+ communities experience domestic, family and sexual violence at a comparable or higher rate than the general population, and that experiences of sexual violence 'appear to disproportionately impact members of the LGBTQA+ community'.[158]

LGBTQIA+ communities can experience specific forms of domestic, family and sexual violence. In its written submission to the Commission, Thorne Harbour Health advised that forms of violence can include identity abuse (threats to reveal someone's sexual orientation, gender identity or HIV status), rejection by or abuse from family members, discrimination based on sexuality or gender identity, forced conversion practices, withholding gender-affirming care or HIV medication, coercive medical interventions and targeted sexual assaults.[159]

Research also indicates that the normalisation of bigotry, violence and discrimination in everyday LGBTQIA+ lives can make the identification of domestic and family violence more difficult. The Commission has heard that some LGBTQIA+ people have lower relationship expectations and higher tolerances for violence in relationships 'due to past experiences of discrimination as well as the internalisation of homophobia and other forms of oppression.'[160]

> **"I accepted so much of this [violence] because was raised to believe that queer and neurodivergent/disabled people deserved less or had it to good... I still don't stand up for my rights every time because some part of me believes that perhaps I (when I see myself as a monster) don't have any.**[161]

LGBTQIA+ communities can also face additional barriers to help seeking due to discrimination and bigotry. The Rainbow Realities Report found that prevailing portrayals of domestic, family and sexual violence 'often focus on heterosexual and parent–child relationships' and that this can 'obscure the recognition of abusive patterns within LGBTQA+ individuals' own relationships'.[162] The focus on domestic, family and sexual violence as experienced by heterosexual and cisgender people can lead to minimisation and even to discrimination against LGBTQIA+ communities, who 'more frequently anticipate and experience negative treatment at support services'.[163]

> **"Services for people who identify as LGBTIQ+ need to be easily accessible and meet their needs. My brother is currently accessing counselling at [service name] which was the only service we could find that was inclusive. The waiting time for counselling with them was more than 6 weeks. I was providing him with emotional support in the meantime. He is also living with me...since leaving his abuser ... There wasn't any suitable emergency or post emergency accommodation for him as a victim on DFV - didn't meet the criteria.**[164]

In his evidence on Day 10 of public hearings, Mr Ben Bjarnesen, Managing Director of the LGBTQ Domestic Violence Awareness Foundation, explained that domestic and family violence against LGBTQIA+ people can often be overlooked by family members or work colleagues because 'they just don't think about domestic violence affecting LGBTQ people'. Instead, abusive or unhealthy behaviours might be blamed on 'things like mental health or drug or alcohol abuse'. This can mean that people stay in relationships because 'they're just simply not aware that its affecting them'.[165]

People with disability

People with disability are disproportionately impacted by domestic, family and sexual violence, experiencing specific forms of abuse, and facing additional barriers to seeking and receiving help. The distinct forms of abuse can include discrimination and ableism, abandonment and institutionalisation, restriction of access to aids and medication, exploitation of National Disability Insurance Scheme (NDIS) plans, medical exploitation and restrictive practices.[166]

Research reveals that people with disability are more likely to experience violence as a child, and are more likely to experience both intimate partner violence and family violence after the age of 15.[167] Both children and adults with disability are significantly more likely to experience sexual violence than those without disability, and people with a severe or profound disability are more likely to experience all types of domestic, family and sexual violence than both those with a disability and without a disability.[168]

The 2023 Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability found that across all age groups, "a greater proportion of people with disability experience violence than people without disability" and that "[p]eople with disability also experience violence more frequently'.[169] The Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability further found that women with disability experience all forms of interpersonal violence at higher rates than women without disability,[170] and that (as described in a written submission from the Flinders University Criminology Department):

> **violence is more likely, more frequent and more severe for groups of women with disabilities who face multiple intersecting disadvantages and inequities, such as Aboriginal and Torres Strait Islander women, LGBTQIA+ people, older women, and women living in regional, rural and remote areas.**[171]

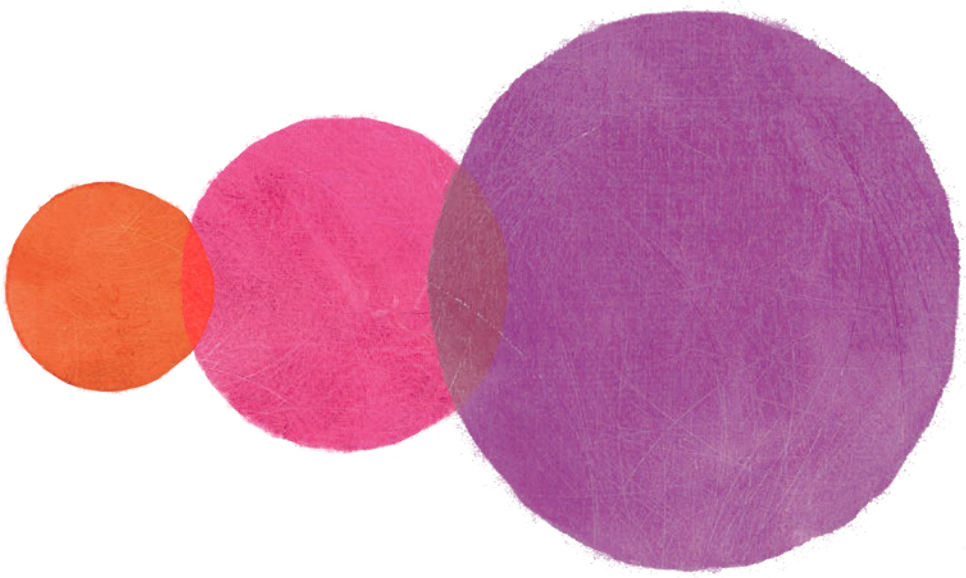
Despite people with disability being disproportionately impacted by experiences of domestic, family and sexual violence, people with a disability regularly encounter difficulty accessing help. In their submission, Purple Orange stated that:

> **systems intended to support prevention and to respond to DFSV are much less, or not at all, accessible to people with disability... With fewer options for response support, these groups are placed at heightened risk of further harm or even death. We do not advocate for 'special' separate responses for victim-survivors with disability, but for all services to be fully accessible and inclusive with more specialised supports provided within the context of mainstream services. It would be deeply counterintuitive to recognise that discrimination, segregation, and exclusion of people with disability is a causal factor in the higher prevalence of DFSV, but to then support fully segregated services (as opposed to specialist support within mainstream contexts) as part of the response infrastructure. We do, however, support increased engagement of lived experience peer support workers across all groups experiencing DFSV, particularly people with disability.**[172]

Specific examples of the impacts of domestic, family and sexual violence on people with a disability were shared with the Commission on Day 9 of public hearings by Ms Belinda Lake, Chief Adult Safeguarding Practitioner in the Adult Safeguarding Unit. Ms Lake explained that financial abuse can lead to people not having access to their disability support pension or Centrelink income and being unable to buy basic personal items, or being 'overcharged for rent for substandard accommodation'.[173] Impacts can be further exacerbated for people with mobility issues through 'abusing or damaging the equipment that someone needs to function independently, or dismantling a wheelchair to stop movement or isolate someone'.[174]

Purple Orange referred to specific types of domestic, family and sexual violence experienced by women and girls with disability that are less prevalent among the general population, including 'forced sterilisation, seclusion and other restrictive practices'.[175] The setting in which violence can occur against people with disability are broad, and include supported accommodation, group houses, boarding houses, transitional and "respite" accommodation and aged care facilities amongst others.[176]

Share With Us responses identified a common intersection between two factors: victim-survivors supporting someone with a disability and victim-survivors with a disability. Over 1 in 3 (35%) victim-survivors identified experiencing a disability, and 1 in 8 (12%) identified as caring for someone with a disability. Almost 12% identified as both having a disability and caring for someone with a disability. Some of the themes arising from Share With Us responses included the lack of available supports where family violence was being used by a child with a disability on another family member, lateral violence between people with a disability who may be living together, the need for a better understanding of neurodiversity including neuro-affirming practices, and experiences of discrimination from systems such as the justice system or police because of a person's disability.



Older people

Along with children and young people, older people (aged 65 and over) can also be more vulnerable to experiences of domestic family and sexual violence. Elder abuse can take a variety of forms, some of which are specific types of abuse experienced by older people. These can include age discrimination; carer abuse and neglect such as restricting access to aids, medication and autonomy; and financial abuse including 'inheritance impatience', which can involve the transfer of significant funds or property from older people.[177]

While older people should not be considered vulnerable merely because of their age, some factors commonly associated with age can make certain older people more vulnerable to abuse. Disability, for example, is more common among older people.

> **"Vulnerability does not only stem from intrinsic factors such as health, but also from social or structural factors, like isolation and community attitudes such as ageism.**[178]

Older people's vulnerability to violence can be due to 'diminishing physical and cognitive capabilities result[ing] in an increased dependency on partners and adult children, which can expose them to situations of abuse … other risk factors include disability; past experience of abuse; financial disadvantage across the life span, including income dependency, carer responsibilities, so older adult children and also grandchildren, caring for grandchildren; co-residency with the perpetrator; a lack of awareness of what violence is … aged care as a tool or location for abuse, and also social isolation and loneliness.'[179]

The Aged Rights Advocacy Service (ARAS) submission to the Commission provided statistics of elder abuse as reported by their South Australian clients. Clients reported that psychological abuse (41%) and financial abuse (34%) were the most prevalent, and that the alleged abusers were mostly likely to be the client's son (29%), daughter (29%) or partner (10%).[180] In their submission, ARAS spoke about the complexities experienced by older people in circumstances where the person using violence is also their carer, as well as their child or partner. ARAS commonly found that older people experiencing violence wanted the violence to stop, but did not necessarily want criminal sanctions, as the person using violence may be their sole carer, and their removal may result in consequences for the older person such as isolation or having to move into a care facility.[181]

The Council on the Ageing provided evidence about these complexities during Day 9 of public hearings:

> **"[A]ged care can also be used as a means of accessing assets by moving older women into an aged care facility and out of their home … so that the home can be sold to generate money. So financial abuse is also experienced in intimate partner situations and this highly increases an older woman's vulnerabilities later in life.**[182]

> **"So we know from the literature that the main perpetrator of the violence against older women is adult children, so sons and daughter, but then also partners and spouses, but other family members such as adult grandchildren, siblings, extended relatives - they're also reported as perpetrators. So it's important to note, though, for older women violence is often lifelong and she may have had many different perpetrators throughout her life, so this may have started with a parent, moving on to the intimate partner and then moving on to the adult children or carer … this, of course, makes older women particularly vulnerable when we think about the normalisation of violence that she has occurred throughout her whole life.**[183]

People living in regional and remote communities

Isolation, distance, an increased need for self-reliance, lack of services and the dynamics of living in small communities all contribute to an increased vulnerability for people living in regional and remote communities. This can be especially true for CALD people living in regional and remote settings, who may not speak English as a first language, may not have access to transportation, and who can be particularly isolated from support networks such as family and friends.

> **My experience ...living rural, without family or friends, the closest hospital is 50km away, the closest resources for a domestic violence agency is 100kms away and their main office is 200kms away...I could have suicided and no one would have known unless there was a physical check, which was only conducted every 2-3 weeks, in accommodation on a farm located 10 kilometres out of town. There was no concern regarding my welfare.**[184]

Overall, the Commission heard that the general lack of services from medical, to accommodation, to therapeutic supports, in regional and remote communities exacerbate the experience of domestic, family and sexual violence and restrict victim-survivors' ability to recover and heal.

The benefit of living in a small town and the strong sense of community that it can provide can end up being a detriment when a person is experiencing domestic, family and sexual violence. Anonymity can be difficult to maintain when the location of domestic, family and sexual violence services, or crisis accommodation, is well known. Many victim-survivors may choose not to seek help due to the visibility of attending appointments or reporting the violence to police and the fear that it will get back to the person using violence.

Existing relationships can create concerns about confidentiality and privacy. It can be difficult to seek support from someone that you socialise with or even work with in a professional capacity.

> **Regional communities make it difficult particularly where both the perpetrator and victim are in professional roles - both have a reputation to uphold, both are well known throughout the community - this provides less certainty about reporting or seeking help services.**[185]

A lack of accommodation options can also mean that victim-survivors, rather than the person using violence, are forced to move away from their community in order to feel safe.

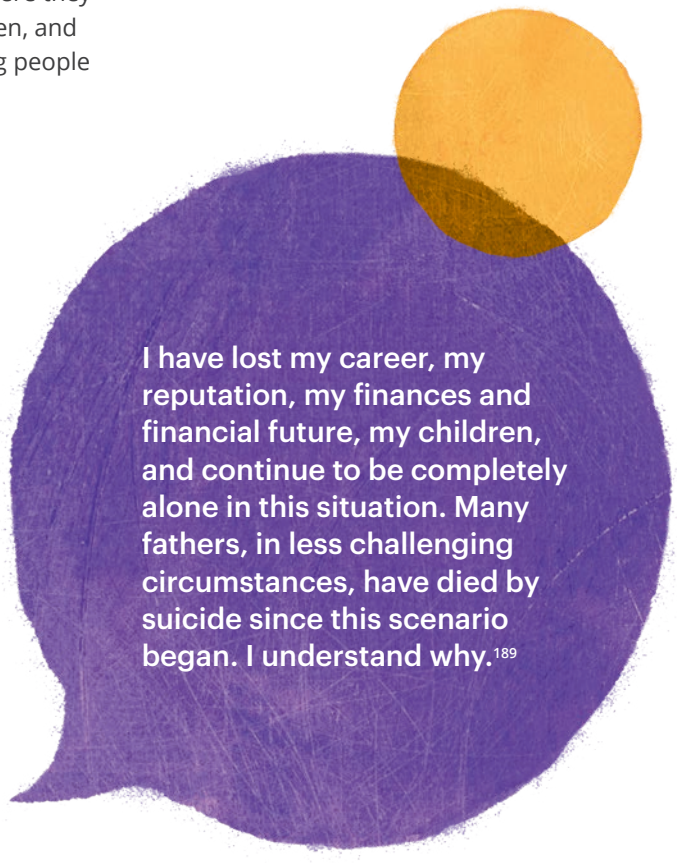
People using violence

Consequences for the use of violence are a critical part of keeping a person who uses violence accountable.

The use of violence can lead to a person's arrest and remand, and to criminal justice outcomes such as home detention, electronic monitoring and imprisonment. Experiences of the criminal justice system can be confronting and even traumatising for people using violence, and in some cases entry into the criminal justice system can result in significant and long-term detriment for those people, such as homelessness, unemployment and repeated incarceration.

People using domestic, family and sexual violence also impact their own lives and wellbeing. The use of violence can result in that person experiencing a range of consequences for their behaviour, such as losing the support of friends, family and community members; loss of education opportunities; housing instability; and economic insecurity. It can lead to that person experiencing civil sanctions, such as intervention orders and family law injunctions that can restrict their movements, limit where they can live, restrict their access to their children, and prevent them from speaking with or seeing people who may once have been loved ones.

People using violence can also experience self-harm and suicide because of their behaviour.[186] The 2024 data summary prepared by the Coroners Court of Victoria reported that, of suicides involving exposure to domestic and family violence, half (51%) involved a person using violence and 1 in 5 involved people both using and experiencing violence (18%). Males made up more than two-thirds (71%) of total suicide cases and were more likely to have used violence (65%) than experienced it (19%).[187] Suicide cases involving domestic and family violence were more likely to have a history of diagnosed mental illness, financial stressors, legal stressors and substance misuse than cases without domestic and family violence concerns.[188]



Endnotes

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15 Submission #351: South Australian government, p 97.

16 Submission #351: South Australian government, p 106.

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18 Public Hearing transcript: SA Health panel, Kirby, R, Baron, H, & John, M. 25 February 2025.

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20 It is important to acknowledge that the results of Share With Us do not represent the whole community of people with lived experience in South Australia. Participation was voluntary and the information provided is only reflective of individuals who were willing and able to access and engage with Share With Us. This caveat is important, because while the results were valuable to the Commission in understanding people's experiences of domestic, family and sexual violence and the South Australian systems' response to those experiences, the results are not representative of the total population.

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Cause no harm by Rachel Abdulla, 2025

Grandfather Tree and the Journey of Healing

In a sacred clearing, where sunset rests upon the shoulders of the earth and the winds remember every footstep, Grandfather Tree stands. His roots stretch into desert rock, ripple through ocean tides, nestle into fertile soil, and rise into the sky itself. From his branches hang truths—some painful, others powerful—all waiting to be told.

A Whisper of the Past

"I have heard the cries that never reached daylight," Grandfather Tree speaks, his voice brushing across horizons. "Cries hidden behind doorways, masked by laughter, softened by shame. I have witnessed the impact of colonisation—the way it tore through families, disrespected law, and fractured connections to land, lore, and love. Especially for First Nations people, whose pain was silenced in policy and shadowed in systems."

The Four Realms Rise

From the desert, the wind carries Layla's song—the voice of a woman whose story was buried beneath red dust and harsh silence. Her healing began under stars, as elders gathered and helped her rediscover language, kinship, and her sacred strength. Layla's rise is not just personal—it speaks to the journey of reform, undoing violence with cultural revival.

From the sea, Kai comes with tidal energy. His people remember the weight of shame carried across generations, men taught silence in pain. Kai swims not to escape but to cleanse, calling others to reframe masculinity, to be protectors and healers, not carriers of harm.

On the land, Mira and Jarran walk together—mother and son—survivors and educators. They speak of housing, justice, disability, of access denied and dignity reclaimed. Their movement through valleys and towns teaches that healing must be measured in restored laughter, not reports alone.

Above them, Tala, a non-binary youth, dances across the sky. Tala's voice represents LGBTQ+ communities whose truths were too often erased in legislation and stigma. But the sunset honors them now. Tala weaves colours into clouds—visible, vibrant, valid.

The People Gather

Grandfather Tree calls not to government alone, but to families, community leaders, artists, doctors, uncles, cousins—men, women, children, storytellers, all. "Come," he says, "with your pain, your courage, your resolve."

The people travel far and wide.
They offer testimonies not as victims but as changemakers.
They speak so systems might shift—not slowly, not softly, but with intention.

Transformation Begins

From these stories, actions sprout.
Trauma-informed services bloom in every town.
Cultural ceremonies begin where silence once dwelled.
Outcomes are measured in safety, in children dancing freely, in elders respected.
Law reforms echo with truth, shaped by real voices—not just statistics.

The Legacy Continues

Grandfather Tree does not forget.
He grows stronger with each step forward.
His bark bears carvings of policy transformed,
Roots knit with threads of justice, leaves catching dreams of a future safe and whole.

And he reminds us:
Healing is sacred.
It begins with truth.
It survives through unity.
It thrives in stories.
And it rises—sunset after sunset—with the power of the people.

Chapter 2

Creating a cohesive and effective system

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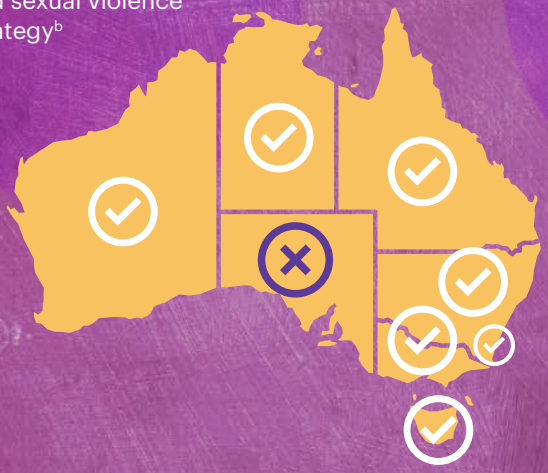
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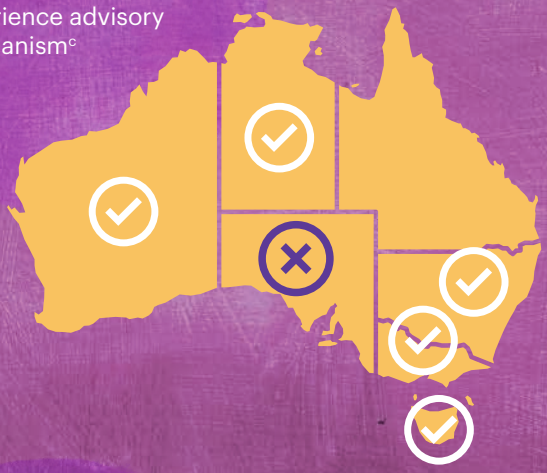
Comparisons of South Australian government investment under the National Plan with other jurisdictions[a]



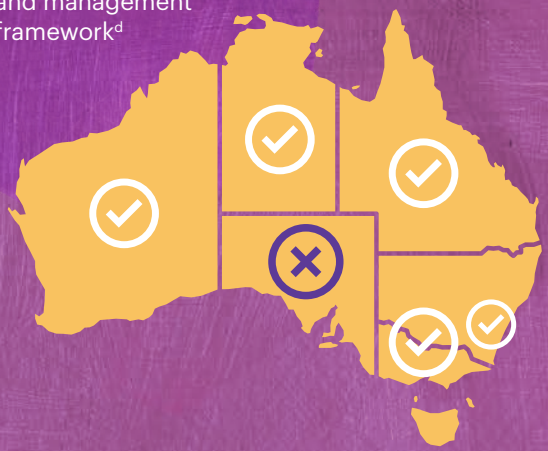
Current government domestic, family and sexual violence strategy[b]



Government-funded domestic, family and sexual violence lived experience advisory mechanism[c]



Existing statewide risk assessment and management framework[d]



Introduction

In September 2024, the National Cabinet declared gender-based violence a 'national crisis'.[1] This is not just rhetoric – it reflects a devastating reality. In Australia, more than 1 in 4 women has experienced violence, emotional abuse or economic abuse by a cohabiting partner since the age of 15, and 1 in 5 has been subjected to sexual violence since the age of 15.[2] Alarmingly, 3 in 5 have experienced child maltreatment.[3]

In South Australia, the situation is no less dire and, in some respects, even more concerning. Almost 1 in 3 women has faced violence, emotional abuse or economic abuse by a cohabiting partner since the age of 15, and 1 in 5 has experienced sexual violence since the age of 15.[4] An analysis provided by BetterStart reveals that at least 1 in 30 children and young people experiences domestic, family and/or sexual violence every year in South Australia – a figure that is likely to be an underestimate due to missing data sources.[5]

This is not only a social issue. It is a national emergency demanding urgent, coordinated and systemic action.

The South Australian government acknowledged this when it established the Commission, tasking it with identifying how the state can 'best intervene and prevent domestic, family and sexual violence, and how best to respond when it occurs'.[6] As this chapter outlines, South Australia's current approach has failed to meet the scale and seriousness of the crisis.

The Commission's inquiry found a stark disconnect between the rhetoric of urgency and the reality of inaction. Despite the acknowledgement of domestic, family and sexual violence as a 'scourge',[7] this crisis has not been treated as a whole-of-government priority in South Australia. There are no clear structural mechanisms, funding pathways or coordinated responses across government to drive systemic reform.

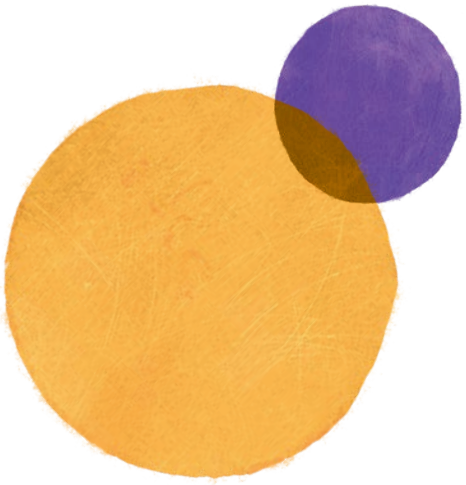
Several critical gaps illustrate this failure:

- South Australia does not have a whole-of-government strategy: there is no unified, statewide strategy to prevent and address domestic, family and sexual violence. The last coordinated framework, Committed to Safety: A Framework for Addressing Domestic, Family and Sexual Violence in South Australia, expired in 2022 and was never replaced.[8]
- South Australia does not have a statewide risk assessment and management framework. The Domestic Violence Risk Assessment tool (DVRA) was last revised more than a decade ago in 2014.
- South Australia does not have a dedicated domestic and family violence lived experience advisory mechanism: there is no formal advisory body representing the voices of victim-survivors to advise the Minister for Women and the Prevention of Domestic, Family and Sexual Violence.
- South Australia has fragmented service delivery: domestic, family and sexual violence services in South Australia are largely delivered by non-government organisations funded through the National Agreement on Social Housing and Homelessness (NASHH) or the National Partnership on Family, Domestic and Sexual Violence Responses (National Partnership). Government provided services are limited and inconsistent.

- The family and domestic violence portfolio sits within SAPOL's structure as a section within a branch whereas this portfolio sits at branch or service level in almost all other Australian policing jurisdictions.
- Health responses to domestic, family and sexual violence have been prioritised inconsistently across the state's Local Health Networks, leading to a complete lack of service delivery to some areas.
- In the justice system, underinvestment and a lack of education and training has severely hampered the system's ability to deliver timely and effective justice. The result is a system that fails to deliver the safety, accountability and justice that South Australians deserve.

Most concerningly, there is no central authority responsible for leading or coordinating domestic, family and sexual violence responses. Without government stewardship or an accountability mechanism, no-one is held responsible when services fail to protect or support victim-survivors.

The first and essential step toward meaningful change has now been taken: the South Australian government has established and resourced this Commission to chart a pathway out of this fractured system. In doing so, the government has acknowledged the structural barriers and funding limitations that have hindered long-term reform.



> **"Current funding gaps limit our long-term ability to reduce and prevent domestic, family and sexual violence and ensure that victim-survivors can return to or achieve positive outcomes after escaping violence. Similarly, there is limited investment into early intervention perpetrator behaviour change programs to shift attitudes and behaviour towards violence before reaching crisis point or engagement with the justice system.**[9]

But acknowledgment alone is not enough. Action must follow – funded action.

Other jurisdictions have heavily invested in their domestic, family and sexual violence systems following local inquiries and taskforces. The Queensland government has invested more than $1.9 billion since 2015, following the Special Taskforce on Domestic and Family Violence and later the Women's Safety and Justice Taskforce.[10] The Victorian government is recorded to have invested $2.9 billion across several budgets in its response to the Victorian Royal Commission into Family Violence.[11]

In the 2024–25 State Budget, the South Australian government committed $1.9 billion to early childhood services and support, in response to the Royal Commission into Early Childhood Education and Care. The same level of ambition and investment is now required urgently to address the scourge of domestic, family and sexual violence.

South Australia's failure to embed a response to this crisis within the heart of government policy, budgeting and accountability mechanisms means victim-survivors continue to fall through the cracks. If this crisis is to be treated with the gravity it demands, bold, coordinated and sustained action must replace piecemeal efforts. This chapter outlines the structural reforms necessary to drive lasting change.

The call to action

South Australia's domestic, family and sexual violence system is at a critical turning point. Despite decades of reform, the system remains underfunded, fragmented and reactive – driven more by crisis response than by prevention and early intervention.

The consequences are clear: victim-survivors are left to navigate a disjointed web of services, often alone, while safety and accountability are weakened.

Often, essential systems – justice, community services, health, housing, child protection, education, and disability support – operate in silos, with only limited cooperation. The difference between cooperation and true collaboration is fundamental. Cooperation may involve working together on individual tasks, but collaboration demands shared ownership of a common purpose, mutual accountability and a collective commitment to outcomes.

The first pillar of a safe and effective domestic, family and sexual violence system is the establishment of whole-of-government leadership. A designated steward must be empowered to drive systemic reform, bringing agencies together to share goals, align strategies and meet clear performance standards. This unified leadership will help ensure that South Australia can deliver the safety and support victim-survivors need.

The second pillar is the implementation of a statewide risk assessment and management framework. A consistent, integrated framework is the foundation for collaboration across government and with non-government partners. Without it, the safety of victim-survivors will remain compromised.

The third pillar is an integrated response model that places victim-survivors at the centre. This model must co-locate police, non-government specialist workers, child-focused practitioners and perpetrator-focused practitioners to ensure that those using violence are kept accountable and in view. This can ensure a timely, place-based response, which is critical to breaking cycles of abuse.

Systemic and cultural transformation is essential. This requires strong leadership from the South Australian government, in partnership with the non-government sector and private industry.

The justice system must lead by example. It must understand domestic, family and sexual violence – not as a peripheral issue, but as a core responsibility. This requires not just better resourcing but a cultural shift within policing and the courts.

Reform is urgently needed in the health system. It is unacceptable that South Australians are travelling to Adelaide to receive a health response to domestic, family and sexual violence. A responsive and culturally safe health system must be available to all, regardless of postcode. Chapter 4 further explores this critical gap.

This is a defining moment. The time for half-measures and fragmented responses has passed.

South Australia must seize this opportunity to build a system that is coordinated, accountable and equipped to prevent violence before it begins – and to respond with strength and compassion when it does.

Structural and cultural reform requires sustained, strategic investment. For too long, this sector has been held together by short-term contracts, pilot projects and a funding model that shifts risk from government to frontline non-government organisations.

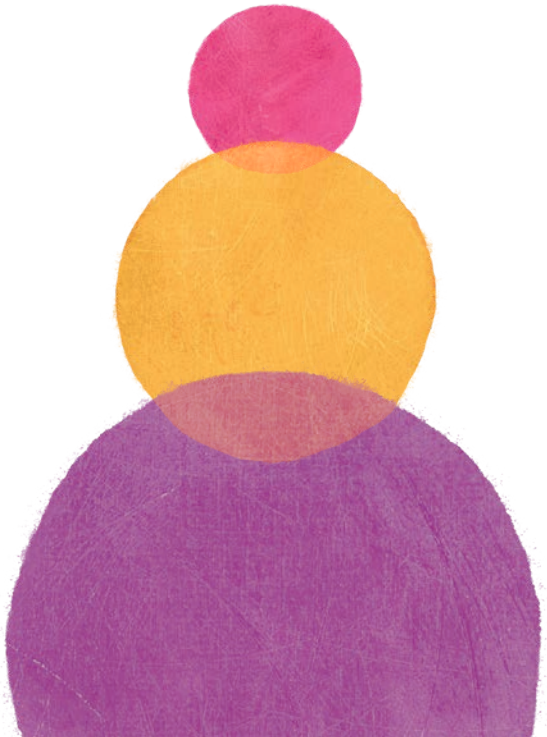
These organisations – who are doing the heavy lifting in the response to domestic, family and sexual violence – are being asked to deliver life-saving support without the long-term financial certainty to plan, grow and innovate. These organisations also need a skilled and capable workforce.

This piecemeal approach must end.

It is no longer acceptable that the future of critical services rests on a national homelessness funding agreement and a partnership agreement that 'may or may not be extended beyond 2030'. South Australia must break this cycle of uncertainty. The State Budget must reflect the urgent and ongoing need to prevent and respond to domestic, family and sexual violence – through long-term, guaranteed funding that extends well beyond the forward estimates.

This not only requires funding; it calls for leadership.

The call to action in this chapter is clear: we must move from a patchwork of disconnected efforts to a cohesive, collaborative, purpose-driven system that is accountable for outcomes and grounded in the long-term safety and wellbeing of all South Australians.



Leadership, collaboration and stewardship

The crisis-driven, fragmented and siloed nature of the domestic, family and sexual violence system was a key theme during the Commission's inquiry. There is no single point of leadership within the South Australian government for the domestic and family violence system. There is an overall lack of structure, governance and collaboration across government and between government and the non-government sector.

This section highlights how the lack of leadership and governance limits the effectiveness of the response to domestic family and sexual violence and the steps that the South Australian government must take in order to create a cohesive, safe and effective system.

Current state

In its submission to the Commission, Embolden called for 'overarching governance mechanisms to drive and oversee a whole-of-government strategic approach'.[12] This was echoed in many other submissions, with some calling for the creation of an office within government that could identify critical gaps, drive system change and government engagement, and hold agencies accountable. Others called for political leadership and the development of frameworks and strategies to guide ongoing collaboration and the implementation of reforms.

> **Child focussed services, mental health providers, and law enforcement often work in silos rather than in coordinated efforts, leading to inefficiencies and gaps in tracking children and young people's safety. Without integrated communication and monitoring systems, children and young people at risk of ongoing family and domestic violence exposure may go unnoticed.**[13]

> **Establish a framework for clear governance structures with clear accountability and decision-making responsibilities to guide organisations and partnerships for implementing sector reforms and establishing integrated partnerships.**[14]

> **South Australia requires a genuinely holistic response sector which is inclusive of a cultural, family and holistic lens, including evidence-based, best practice responses to all victim-survivors, including those who may require respite, to return to a family home with a person who uses violence, or may not wish to leave, as well as those at different stages of their experience or support needs.**[15]

Lived experience submissions talked about the need for cultural and structural change across the domestic, family and sexual violence system:

> **My experience shows the deep flaws in South Australia's systems for responding to family, domestic, and sexual violence. Instead of providing protection, these systems failed to believe me and left me in a dangerous environment. I was abandoned by the very institutions that were supposed to keep me safe, leading me to a path of homelessness and further trauma. By sharing my story, I hope to shed light on the urgent need for reform. The system must be improved to ensure that every child is believed, supported, and protected. I strongly urge the Royal Commission to take action to address these failings so that no other young person is forced to endure what I went through.**[16]

> **The fact is that our governments, other community groups, and countless individuals, all bear principal responsibility for every single act of abuse and trauma and other disadvantage that affects every individual, and therefore also share responsibility for the effects of that maltreatment in the actions of those individuals.**[17]

The siloed and fragmented approach to domestic, family and sexual violence is acknowledged by the South Australian government in its submission:

> **In South Australia, work to prevent domestic, family and sexual violence, support victim-survivors, and address perpetrator behaviours is segmented between different State Government departments, including the Department of Human Services, the Department for Child Protection, the Attorney-General's Department, SA Health, SA Police, Department for Education (DfE), and the SA Housing Trust.**[18]

This 'segmentation' reduces accountability and allows for people to fall through the cracks that emerge between each individual system. The Commission has heard that there is no current impetus for collaboration between these systems to identify and strive for better outcomes for people experiencing domestic, family and sexual violence because service delivery and policy development occurs within individual agencies. People, and the non-government organisations providing services to those people, do not experience life in accordance with a government portfolio structure.[19] Domestic, family and sexual violence is a wicked social problem that crosses into almost every government agency. Collective responsibility across both political and public sector leadership is needed, together with collaboration on the actions that will deliver shared outcomes.

The Commission also received significant input about the justice system's failure to recognise and understand domestic, family and sexual violence, keep victim-survivors safe and hold people using violence to account. Some aspects of the justice system's approach are dealt with in the following pages – many others are discussed in other chapters of the report.



South Australia Police structure

Desktop research on the justice system models and approaches in other states and territories reveals that SAPOL's Family and Domestic Violence Section (FDVS) has among the lowest organisational primacy of any Australian police agency.

Currently in SAPOL, family and domestic violence is managed through a centralised/decentralised model. The policy and training portfolio for family and domestic violence, as well as complex sexual violence investigations, are managed by the Public Protection Branch, which makes up part of the Crime Service. The FDVS, which is a section within the Public Protection Branch, is responsible for SAPOL's family and domestic violence policy development, specialist training, and multi-agency programs such as the Multi-Agency Protection Service (MAPS), the Domestic Violence Disclosure Scheme (DVDS), Multi-Agency Hubs, and the Family Law Information Sharing Program. Some of these programs are discussed later in this chapter.

With the exception of staff from the FDVS working in multi-agency programs, all of SAPOL's specialist family violence investigators are decentralised, and work within each metropolitan District and regional Local Service Area (LSA).[21] SAPOL's Metropolitan Operations Service is responsible for 4 metropolitan Districts. Each District includes a Child and Family Investigation Section (CFIS), as part of that District's Criminal Investigation Branch (CIB). The Commission understands that family violence investigators working in each CFIS are employed in 'generalist' positions, such as supervisors, detectives and general duties members.

SAPOL's State Operations Service is responsible for 7 LSAs. The CIB in each LSA incorporates the same roles and responsibilities as metropolitan CFISs. Each regional CIB includes a small team of Family Violence Intervention Officers (FVIOs). FVIOs work alongside detectives from the CIB to manage their LSA's family and domestic violence caseload. The Commission understands that while FVIOs have similar roles and responsibilities to CFIS family violence investigators, they are employed in 'specialist' positions.

SAPOL also manages sexual violence through a similar centralised/decentralised model. The Public Protection Branch includes a number of sections which specialise in complex sexual violence investigations involving both adults and children. Local incidents involving sexual violence which do not require a specialist response from the Public Protection Branch are typically managed by detectives from each District and LSA's CIB or CFIS.

The organisational primacy given to SAPOL's central domestic and family violence policy, training and programs portfolio determines the seniority of its officer in charge and its reporting lines, as well as its resources and capabilities.

Currently, the FDVS is managed by a Chief Inspector, reporting to the Superintendent responsible for the Public Protection Branch. The Chief Superintendent responsible for the Serious Crime Coordination Branch and the Assistant Commissioner, Crime Service have accountability and responsibility for the Public Protection Branch.

Other than the Australian Capital Territory, all other Australian police agencies have given greater organisational primacy to their domestic and family violence portfolios, mostly commonly in the form of a domestic and family violence command at either Service or Branch level. This means that in other Australian jurisdictions, management of domestic and family violence portfolios has become the direct responsibility of a Superintendent, Commander or Assistant Commissioner.

Some Australian police agencies have positioned their domestic and family violence portfolios with vulnerable person portfolios (disability, mental health and elder abuse), sexual violence portfolios, and child and young people portfolios at the service level.[22]

A number of Australian police agencies employ domestic and family violence liaison officers, who work to improve frontline and prosecutorial responses to domestic and family violence and sexual violence through the provision of advice, quality assurance and community liaison.[23] Some police agencies also have the benefit of dedicated domestic, family and sexual violence intelligence capabilities embedded in the workforce.[24]

There is a point to be explored between the amount of time SAPOL has stated is spent on responding to domestic, family and sexual violence, described by the Commissioner of Police as 'one of the most time consuming things that police officers are doing during the course of their shift'[25] and the priority addressing this violence takes within SAPOL's current structure.

Criminalisation of coercive control

Another issue relevant to the justice system is the South Australian government's proposal to criminalise coercive control. This proposal represents a clear opportunity to transform the justice system's understanding of domestic, family and sexual violence and to bring a new clarity to the roles and responsibilities of the various participants within the justice system.

The Coercive Control Bill proposes to criminalise a course of conduct that has or is likely to have a controlling impact on the person subject to the conduct.[26] The effect of the Coercive Control Bill will be, if passed by Parliament, to criminalise conduct that has not previously amounted to a criminal offence. This will have an impact on the criminal justice system and, potentially, a corresponding impact on the intervention order system. The Commission was told that SAPOL policy requires the commission of a criminal offence, or the threat of a criminal offence, for SAPOL to consider issuing a police-issued intervention order. When asked about the potential impact of the Coercive Control Bill on policing operations during Day 6 of public hearings, Chief Inspector Kellie Watkins said, 'SAPOL's continuing to work with government to be in a position to enforce any new policy position'.[27] This lack of specificity about the likely impact of the implementation of the new offence is concerning, and may also reflect a lack of specificity and clarity across all justice-system participants about the impact and costs of this reform.

Data collection and monitoring

Submissions from the domestic, family and sexual violence sector highlighted key issues that need to be addressed when it comes to data collection, analysis and reporting:

> **"There is a lack of reliable data about DFSV in Australia and this gap is even more pronounced in relation to the experiences of people with disability. This applies not just to quantifying rates of DFSV but also to if and how systems and services respond. We believe actions to address data shortcomings will be essential for effective change.**[28]

This shortfall not only hinders accurate measurement of the prevalence of domestic, family and sexual violence, but also affects the capacity to assess outcomes and impact. Addressing these data limitations is fundamental to driving meaningful and evidence-based reform:

> **"South Australia lacks a robust strategy for the utilisation of data and evidence for best practice, innovation, monitoring and evaluation. Many services still do not have access to the totality of their data (e.g. Homeless2Home data system), while across the sector we are lacking the requisite capacity, skills and resources to use data effectively to inform decision-making at all levels. This is impacting our ability to meaningfully evaluate and continuously improve our offerings, to build service models which reflect best practice and emerging research, evidence and experience, and to bring together data from across sectors to provide a holistic understanding of the needs, experiences and gaps in the system.**[29]

Reliable and comprehensive statistics are essential to fully understand the scope of domestic, family and sexual violence and to inform policy responses:

> **Better statistics are needed in order to clearly see the issue in its entirety and magnitude. How can we expect people to be more informed when services, statisticians, government agencies, and academics still struggle to come to an agreement on definitions and terminology.**[30]

Disparities in definitions and terminology across stakeholders present significant challenges to consistent data collection and interpretation, further complicating the response to domestic, family and sexual violence. One solution proposed to the Commission was to support and expand the use of existing data platforms, such as BEBOLD, to facilitate better linkage and research:

> **[The South Australian Government should] invest in the BEBOLD platform (University of Adelaide) to expand linkage to additional FDSV relevant datasets, and to conduct research that will inform FDSV intervention monitoring and identify, characterise, and assess outcomes for victim-survivors and perpetrators.**[31]

As outlined in Chapter 1, obtaining an accurate picture of the prevalence of domestic, family and sexual violence in South Australia remains difficult due to inconsistent and uncoordinated data collection. This issue became apparent early in the Commission's inquiry during attempts to better understand the scope of domestic, family and sexual violence across the state. The Commission found that some government agencies that regularly responded to domestic, family and sexual violence were unable to quantify the extent of violence reported by individuals seeking assistance. For instance, when asked to provide data on the number of forensic medical examinations for sexual violence undertaken in regional areas, SA Health advised:

> **Each region currently has their own processes for documenting health information leading to an inconsistency in recording and capturing the number of medical/forensic examinations and presentations relating to domestic family and sexualised violence. For this reason, this data is not available.**[32]

Similarly, when SA Health was asked about forensic medical services for children and young people, the response from the Women's and Children's Health Network was caveated with a note that the data was not considered to be easily accessible, validated or accurate.[33] This fragmented approach to data collection undermines efforts to assess service demand and identify trends, limiting the effectiveness of policy and program response.

Justice agencies such as SAPOL and CAA were more easily able to produce data on domestic, family and sexual violence when asked; however, each agency had to use time and resources to collate and produce this data, as it was not immediately available.

Data collection, monitoring and reporting for domestic, family and sexual violence is important. When carried out in a consistent and coordinated manner, data collection allows governments to understand the scale of the problem, identify areas of high demand, determine where to best invest resources, and, crucially, monitor the impact of that investment. For example, Victoria has developed a publicly available Family Violence Dashboard, which provides linked data from the justice system and service sector which can be filtered by local government areas.[34]

Where data collection, monitoring and reporting is incomplete, government responses are more likely to be uncoordinated, piecemeal and difficult to measure. This issue is particularly important for marginalised communities, which can be rendered invisible to policymaking and investment due to poor data-collection practices. For example, Thorne Harbour Health wrote:

> **At present, government departments, agencies and service providers choose whether to adopt data collection standards for LGBTQIA+ people, and how these standards can fit into their respective data collection guidelines and infrastructure. These inconsistencies lead to significant gaps and inaccuracies in the data, especially regarding LGBTQIA+ communities. It is also worth noting that government and other funding bodies often cite the lack of LGBTQIA+ family violence data as a rationale for no or limited funding, or otherwise there being no need for LGBTQIA+ specialist services. However, because there is no government mandate or support to collect this information, it becomes harder to advocate for targeted services and supports.**[35]

The lack of coordinated data collection, monitoring and reporting across agencies was acknowledged in the South Australian government submission:

> **South Australia to date has not adequately invested in the infrastructure and resources that enable accurate and timely reporting, either of unmet demand and gaps in the service system or more broadly in building on a state government evidence base to guide public policy decisions.**[36]

> **Of importance is recognising that all initiatives should be data-informed, evidence-based and should consider diverse and marginalised groups that may require a more nuanced response than relying solely on data.**[37]

Future state

Effective systems leadership not only requires coordination, it demands a bold, strategic steward capable of driving coherence and long-term transformation across complex service systems. This approach recognises that human services do not exist in isolation; they are part of a larger, interconnected system that must be purposefully designed, developed and governed to meet the needs of those it serves.

At its core, this leadership model involves a dedicated agency or office collectively guiding the system toward a unified vision – one that delivers high-quality, consistent and long-term outcomes for individuals and communities affected by domestic, family and sexual violence.

The South Australian government recognises that it has a crucial role to play in this system.[38] It must step into this role – not just as a passive overseer but as an active driver of system-wide accountability and excellence. This means taking responsibility for setting strategic direction, aligning efforts across agencies, and ensuring that policies, services and funding models are designed to reinforce collaboration and effectiveness. It also means investing in the essential functions of public policy development, service design, commissioning and cross-sector partnerships.

To create a safe and effective response system, South Australia needs system-level leadership that is visible, resourced and unambiguously accountable for delivering results.

The South Australian government must adopt a fundamentally new way of working – one that goes beyond ad hoc cooperation and embraces cross-government collaboration as a driver of bold, measurable outcomes. This transformation must be anchored by a permanent stewardship function embedded within government, empowered with the authority to lead systemic change.

Crucially, this function must report directly to a dedicated minister with clear responsibility for domestic, family and sexual violence to ensure leadership, accountability and sustained focus at the highest levels.

Ministerial leadership

The Commission notes with concern that South Australia lacks a dedicated ministerial portfolio for domestic, family and sexual violence. The Honourable Katrine Hildyard MP currently holds a dual portfolio as Minister for Women and the Prevention of Domestic, Family and Sexual Violence. While the Commission affirms the importance of maintaining a gendered lens, it also emphasises the need for dedicated, focused leadership. Establishing a standalone Minister for Domestic, Family and Sexual Violence would send a powerful signal: that this work is about a whole-of-government, whole-of-society responsibility. Such a move would elevate the visibility, accountability and authority required to drive system-wide change.

Government Steward

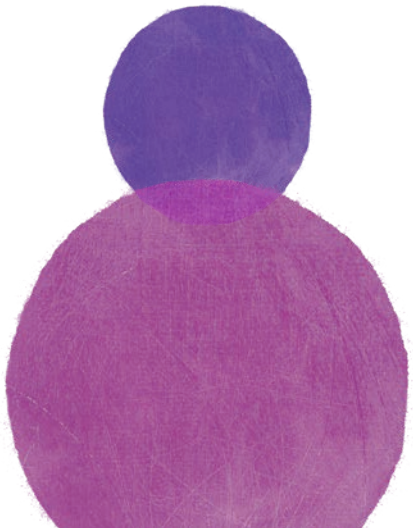
To drive system-wide reform, the South Australian government must establish a new, dedicated coordinating agency or office within government to serve as the steward for the domestic, family and sexual violence system.

The Government Steward should serve as the government's primary interface with the broader domestic, family and sexual violence system. It must be empowered to directly commission and contract services, ensuring that funding is coordinated, evidence-informed and designed to maximise impact without burdening providers with duplicative reporting. Access to robust, de-identified data is critical. The Government Steward must be resourced to harness comprehensive data to guide funding and policy decisions. Under the *Public Sector (Data Sharing) Act 2016* (SA), the government can already share de-identified data relating to the prevalence of, types of and responses to domestic, family and sexual violence – collected across a range of services and systems – to inform both statewide strategies and targeted interventions.

The Commission notes that South Australia already has access to a powerful data resource in the BEBOLD platform developed by BetterStart. This platform includes 'de-identified information about child protection contact, pregnancy, early development, well being in adolescence, education, youth justice, corrections, hospital admissions, emergency presentations, drug and alcohol services, housing and homelessness, community mental health, and Centrelink welfare payments.[39] This data has been provided by South Australian government agencies under various agreements; however, key datasets – particularly from SAPOL and CAA – are still missing. The Commission urges the government to progress agreements with these agencies.

The Government Steward must also lead the establishment of a lived experience advisory mechanism to ensure that the voices of victim-survivors are embedded in the reform. Further details on this are provided in later sections of the report.

The Government Steward must act as a champion for change – empowered, accountable and dedicated to long-term system transformation. Additional responsibilities are explored in detail in the chapters that follow, underscoring its central role in driving whole-of-government accountability and sustained reform.



An implementation plan

Transformational reform requires more than ambition – it demands disciplined leadership, long-term investment and the courage to act with patience and purpose. Safe and Equal Victoria highlights this in its submission, urging that political and public sector leaders must adopt a measured, strategic approach to implementation if meaningful change is to be achieved.

Reflecting on Victoria's experience implementing recommendations from its Royal Commission into Family Violence, Safe and Equal points to critical lessons. The Family Violence Reform Implementation Monitor's first report underscored how the 'pace of initial reforms and the failure to take the time to fully plan a systemic approach to sequencing the reform for maximal effectiveness, in favour of focusing on acquitting individual recommendations' undermined overall impact.[40]

Learning from this, Safe and Equal urges the South Australian government to avoid reactive implementation and instead:

> **"invest significantly and directly into the specialist family violence sector in the state and work with the individuals and services who have been doing this work for a long time. Any redesign of a family violence system requires a considered, stepped approach that allows services to test how changes to the system manifest on the ground to ensure the intent of the reforms are realised. Any resourcing to engage and drive this redesign needs to be in addition to increased resources provided for frontline service delivery.**[41]

The recommendations in this report are grounded in 12 months of deep engagement with the South Australian community, the domestic, family and sexual violence sector, and government stakeholders. Some actions will require further co-design to shape a future state that is fit for purpose – and this report makes clear when such additional engagement is necessary. But the majority of reforms do not need more consultation. They need commitment, planning and implementation, supported by mechanisms to monitor, evaluate and adjust if the reforms are not delivering on their intent.

The development of a considered and resourced Implementation Plan should form the basis of the South Australian government's response to this Commission. In keeping with the Commission's call for collaboration (not cooperation), the Implementation Plan should be developed by South Australia's Senior Leadership Committee (being the committee of South Australian government chief executives) for consideration by Cabinet. The Government Steward should support the Senior Leadership Committee's development of the Implementation Plan, and lead cross-government collaboration to deliver on it.

A necessary precondition to Cabinet's consideration and endorsement of an Implementation Plan must be a process to identify the current level of South Australian government investment across the 4 domains identified in the National Plan (and set out in the Commission's Terms of Reference): prevention, early intervention, response, and recovery and healing. As discussed later in this chapter, the Commission was unable to obtain a clear picture of the total investment by the South Australian government in the domestic family and sexual violence system. Input on current investment for domestic, family and sexual violence services and Aboriginal Community Controlled Organisations, in alignment with the ACCO Sector Strategic Plan (2024–2028), should then form the basis of a budget process for the new investment that is needed to implement the actions identified in the Implementation Plan.[42]

In the Northern Territory, the Domestic, Family and Sexual Violence Interagency Coordination and Reform Office (the NT Reform Office) was directed to map and assess existing governance, investment and efforts to inform a whole-of-government 2022–23 budget submission for domestic, family and sexual violence prevention and response.[43] Part C of the published mapping report provides an overview of existing activity and investment together with an analysis of the gaps, opportunities and future directions.[44] The report also identifies some of the barriers encountered by the NT Reform Office when undertaking its work, including the different approaches taken by agencies to measuring the cost of service provision and a lack of identification within agency budgets on the allocation of funding for domestic family and sexual violence purposes.[45]

The approach adopted by the NT Reform Office was comprehensive. This approach could form the model for a rapid review of South Australian government investment to inform the development of the Implementation Plan.

The Commission is also calling for the South Australian government's Implementation Plan to identify what successful implementation will look like, and how this will be measured. The intention should be to embed a way to evaluate for impact rather than focusing on implementation itself as the achievement. This will allow for the process Safe and Equal has advocated for – 'to test how changes to the system manifest on the ground to ensure the intent of the reforms are realised'.[46]

Where the Implementation Plan relates to the delivery of domestic, family and sexual violence services to Aboriginal people and Aboriginal communities, the South Australian government should ensure that this work is done in partnership with SAACCON, consistent with the approach taken by the Commission in developing its recommendations in partnership with the Aboriginal Partnership Committee. The Aboriginal Partnership Committee has identified the Women's and Family Safety Partnership Committee, established pursuant to Action 3.26 of the SA Closing the Gap Implementation Plan, as an appropriate partner for this process.

South Australia Police structure

Despite the prevalence of domestic, family and sexual violence in South Australia, SAPOL's current organisational structure does not reflect the urgency and priority of this crisis. In 2024, domestic and family violence–related offences made up almost half (46%) of all 'offences against the person' in South Australia. The considerable time and effort SAPOL's workforce spends responding to, investigating and prosecuting domestic and family violence is not well reflected in SAPOL's current organisational structure.

The Commission considers the South Australian government's response to the Commission's report, together with the proposed criminalisation of coercive control, to be an opportune time for the Commissioner of Police to transform SAPOL's organisational structure to better reflect the priority that must be given to domestic, family and sexual violence and the complexity of investigating and prosecuting this violence.

The criminalisation of coercive control requires a fundamental shift across the justice system in terms of the way in which domestic, family and sexual violence is recognised and understood. Domestic, family and sexual violence is, at its core, the perpetration of power and control over another person. The criminalisation of coercive control amounts to a recognition of the types of behaviour that give rise to the perpetration of power and control, aside from the incidences of physical violence (or threats of physical violence) that are already recognised by the justice system.



The Commission has heard that police approaches to domestic, family and sexual violence have reflected the justice system's current understanding of this violence as primarily incident based. The timeline for implementation of the proposed coercive control offence presents an opportunity for the South Australian government to invest appropriately in the justice system to ready it for implementation. It is also an opportunity for SAPOL to elevate its domestic, family and sexual violence portfolios to Branch or Service level to support the considerable work needed before the new criminal offences are brought into effect.

In response to the recommendations of this report, and in preparation for the introduction of the coercive control offence, SAPOL's domestic, family and sexual violence portfolio will need expanded, improved and, in some cases, new capabilities. These should include:

- expanded governance and policy capabilities to support the criminalisation of coercive control along with the implementation of the Commission's recommendations
- an improved training capability
- an additional investigative capability
- a statewide domestic, family and sexual violence intelligence capability
- a quality assurance capability
- a liaison or accessibility capability.

These capabilities are set out in more detail in Figure 2.1.

The elevation of these portfolios must be underpinned by appropriate resourcing and staffing increases. This should include the creation of more family violence investigator positions in each policing district and LSA, along with the creation of a statewide domestic, family and sexual violence intelligence capability to better identify, respond to and report on trends and issues. It is the Commission's view that SAPOL's sexual violence portfolio should remain integrated with SAPOL's domestic and family violence portfolio.

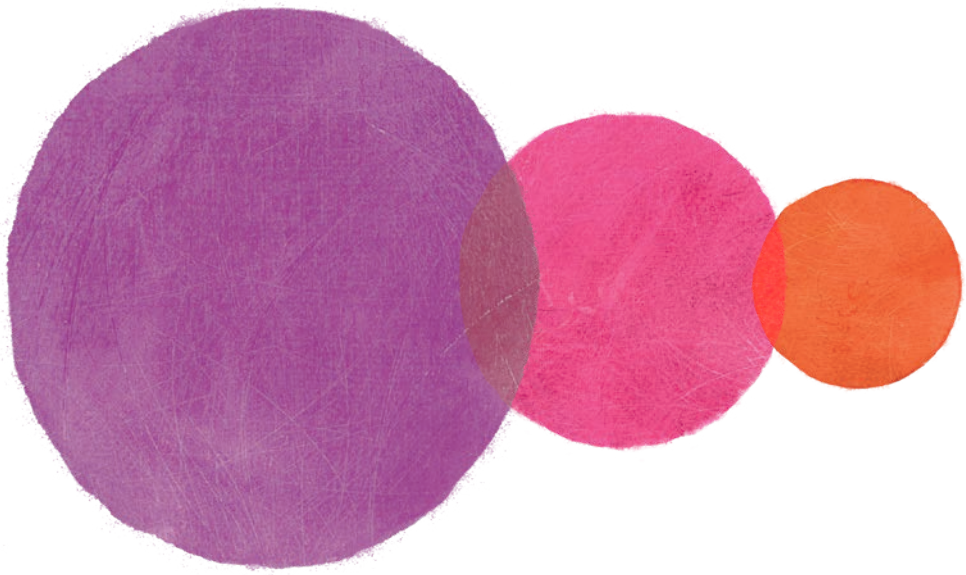
The Commission has also heard of the need to embed an intelligence capability across SAPOL, Western Australian Police and Northern Territory Police to better address, investigate, respond to and prevent violence on the APY Lands. This initiative should be led by SAPOL; either by, or in coordination with, the new Branch or Service level leadership.

Criminalisation of coercive control

The proposed criminalisation of coercive control will have ongoing operational impacts across the justice system and to the various participants within that system. It may be that these impacts have been costed, and roles and responsibilities clarified, but the Commission has not received any input to confirm that this is the case. The Commission recommends the South Australian government convene a working group of all relevant government agencies and services to negotiate a new settlement of roles and responsibilities across the criminal justice and intervention order systems, in light of the proposed implementation of the Coercive Control Bill. This working group must include the CAA, Chief Magistrate, Chief Judge, Office of the Director of Public Prosecutions (ODPP), SAPOL and the Legal Services Commission (and, in particular, representation from Women's Domestic Violence Court Assistance Service [WDVCAS]).

The issues to be addressed by this working group will include (among other matters):

- the threshold test to be applied by SAPOL when determining whether to issue a police-issued intervention order in circumstances relating to the use of coercive control within an intimate partner relationship (further information on the intervention order system is set out in Chapter 5)
- the impact of any change in that threshold test on the work of the WDVCAS and the number of private applications for intervention orders overall
- the work required to be undertaken between the ODPP and SAPOL regarding the way in which the new offence will be investigated, and the types of evidence that will be needed to develop a prosecution brief
- the resources needed to ensure SAPOL has the capability to conduct coercive control investigations
- the impact of the new offence on the work of the Family Violence and Committal Courts in the Magistrates Court, and in the District Court
- the education and training needed across the justice system about coercive control, and about domestic, family and sexual violence generally (this is further discussed in Chapter 3).



Recommendation 1

The South Australian government create a standalone ministerial portfolio for domestic, family and sexual violence.

Recommendation 2

The South Australian government establish and resource a stewardship function within government. The office of the Government Steward should:

a. lead collaboration across government agencies to support the development of the Implementation Plan by the Senior Leadership Committee, and the associated implementation work
b. lead the implementation and ongoing operation of recommendations, including Recommendations 10 - 12, 14 - 16, 18 - 22, 31, 46, 98 - 99, 112 -113 and 127.
c. lead the commissioning or recommissioning of state government–funded services within the domestic, family and sexual violence sector
d. have access to de-identified data to inform investment decisions and policy development
e. provide overall strategic direction to the South Australian government on the domestic, family and sexual violence system, ensuring that reforms and policy development are built on evidence-based practice and lived experience input, noting the delivery of some South Australian government services will remain with line agencies.

Recommendation 3

The South Australian government develop and maintain a domestic, family and sexual violence linked-data dashboard, for use by the Government Steward and the Implementation and Impact Monitor, noting the potential of BEBOLD to fulfil this purpose. The dashboard should:

a. draw together relevant de-identified data regarding domestic, family and sexual violence incidence and prevalence from all agencies and organisations responsible for using the South Australian Risk Assessment and Management Framework or participating in the integrated response model
b. provide consistent locational and demographic data regarding victim-survivors and people using violence, ensuring visibility of different priority population groups.

Consideration must be given to providing access to other relevant agencies and organisations (including non-government organisations commissioned to provide domestic, family and sexual violence services).

Recommendation 4

The Senior Leadership Committee develop an Implementation Plan for the phased implementation of the Commission's recommendations, for consideration by Cabinet. The Implementation Plan should:

a. be outcomes focused rather than activity focused by including an evaluation of impact approach
b. be informed by a rapid expenditure review across the South Australian government.

Development of Implementation Plan actions and outcomes relating to the delivery of domestic, family and sexual violence services to Aboriginal people and Aboriginal communities should occur in accordance with the Closing the Gap priority reforms.

Direction on sequencing of implementation is provided at Appendix L of the report.

Recommendation 5

The Commissioner of Police elevate the domestic, family and sexual violence portfolio to branch or service level.

The Commissioner of Police and the South Australian government ensure the new portfolio is appropriately resourced and staffed to meet the capability requirements set out in Figure 2.1.

The Commissioner of Police increase the capability of each police District and Local Service Area to best meet statewide domestic, family and sexual violence demand by:

a. increasing the number of family violence investigator and supporting positions in each District and Local Service Area
b. conducting regular needs analysis to ensure that the distribution and number of specialist domestic, family and sexual violence positions meets statewide demand
c. giving due consideration to all family violence investigator positions being recognised as specialist rather than generalist positions.

Recommendation 6

Before any commencement of the Criminal Law Consolidation (Coercive Control) Amendment Bill 2024 (SA), the South Australian government convene a working group to negotiate a new settlement across the criminal justice and intervention order systems of the roles and responsibilities of the different agencies and participants operating within those systems, including non-government organisations contracted to provide relevant services within the context of these systems.

Figure 2.1: Capabilities of the new South Australia Police branch or service

In response to the recommendations of this report, and in preparation for the introduction of the coercive control offence, South Australia Police's domestic, family and sexual violence portfolio will need expanded, improved and, in some cases, new capabilities.

The South Australia Police branch or service should include the following capabilities:

1. **Governance and policy capabilities to support the adoption of recommendations, the criminalisation of coercive control, and to ensure ongoing best practice.**
2. **A training capability able to co-design and deliver an uplift in ongoing, evidence-based organisational training.**
3. **An investigative capability that can:**
   a. investigate complex reports of coercive control, child abuse, sexual violence and stalking
   b. identify and respond to technology-facilitated abuse such as tracking, surveillance and online dating violence
   c. provide and/or support consistent, quality responses to all domestic, family and sexual violence offences.
4. **A statewide domestic, family and sexual violence intelligence capability that can:**
   a. identify, monitor and disrupt serious and repeat offenders
   b. use the alternative reporting pathway for sexual violence to identify, monitor and disrupt serious and repeat sexual violence and online dating offenders
   c. build pathways with online dating providers and the eSafety Commissioner to permanently block online dating offenders and to remove harmful content
   d. improve coordination with other relevant jurisdictions, including cross-borders coordination of the APY Lands
   e. support organisational demand mapping.
5. **A quality assurance capability that can:**
   a. ensure consistent, quality responses to all reports of domestic, family and sexual violence
   b. ensure consistent, quality prosecutions of all domestic, family and sexual violence offences.
6. **A liaison or accessibility capability focused on improving responses to priority population groups experiencing domestic, family and sexual violence, including:**
   a. children and young people
   b. LGBTQIA+ people
   c. Aboriginal people
   d. CALD people
   e. people with disability
   f. older people.

Accountability

Current state

Currently, there does not seem to be an established or coordinated process of cross-government service delivery within the domestic, family and sexual violence system. This lack of structure and accountability may create challenges identifying who should drive reform across departments and agencies. With no precise mechanism for accountability, services can continue to operate in silos, and agencies can deflect responsibility for achieving outcomes.

Embolden, on behalf of its members, has called for:

- the establishment of an independent mechanism to monitor and review the implementation of the Commission's recommendations
- an independent monitoring function underpinned by a strong monitoring and evaluation framework that is aligned with the National Plan Outcomes Framework, Closing the Gap targets, and the National Plan's Aboriginal and Torres Strait Islander Action Plan 2023–25.[47]

Both the Victorian Royal Commission and the Queensland Women's Safety and Justice Taskforce recognised that meaningful reform requires an accountable and transparent system that monitors whether commitments are being implemented and whether outcomes are improving.

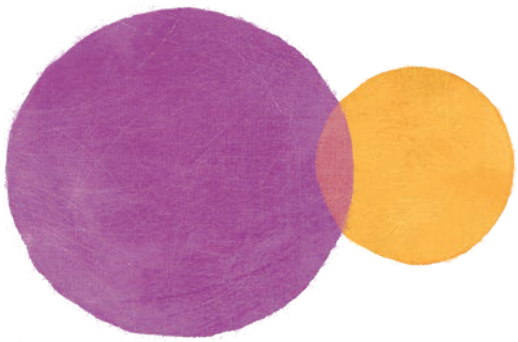
The Royal Commission into Family Violence in Victoria recommended:

> **"The Victorian Government establish a statutory Family Violence Agency [by 1 July 2017] to … monitor and report on implementation of the Commission's recommendations and of the Statewide Family Violence Action Plan.**[48]

In response to this recommendation, the Victorian government created an independent statutory body – the Family Violence Reform Implementation Monitor or FVRIM – to monitor and report on the implementation of that Royal Commission's recommendations.

Legislated through the *Family Violence Reform Implementation Monitor Act 2016* (Vic), the role was granted significant statutory powers, including the ability to compel information and to enter and inspect the premises, documents and activities of relevant agencies. The legislation also mandated the production of annual implementation reports to assess the progress of the reform.[49]

In 2016–17, the Victorian government budgeted $15.4 million to establish the FVRIM and an implementation unit.[50]



In its first report, the FVRIM raised concerns about the Victorian government's approach to implementation. It found that the Victorian government was focused on ticking off individual recommendations, stating that:

> **While such a focus is understandable and an important element of accountability, it is less important than the work needed to ensure that all the constituent parts of the system are interrelated and will work together over time, within the context of Victoria's broader social services system, to improve outcomes for current and future victim survivors. It is imperative that the government shifts its implementation activity and reporting away from acquitting recommendations, and towards continuing its whole-of-system reform approach. As part of this, the government should focus its work on articulating the long term perspective including for diverse communities, building capability in the relevant government agencies, and engaging more efficiently with the sector.**[51]

Although the FVRIM's role was extended by 18 months as part of the 2021–22 Victorian Budget, its work concluded less than 7 years after its creation.[52] In its submission to the Commission, Safe and Equal Victoria warned of the vacuum left behind:

> **The FVRIM performed a critical function in providing system level oversight and accountability for the family violence reforms. This system function continues to be needed; to provide systems oversight and accountability as efforts to realise the intent of the Royal Commissions and improve the family violence system will not be complete by the end Victoria's 10-year plan for change … In the absence of the FVRIM, Victoria currently has no mechanism to ensure independent oversight, transparency and accountability at a systems level for how the family violence system is functioning and if outcomes for victim-survivors are improving.**[53]

In Queensland, the Women's Safety and Justice Taskforce recognised the need for enduring governance structures to guide reform. It recommended that:

> **The Queensland Government establish a suitably qualified independent implementation supervisor with an adequately resourced secretariat within the portfolio responsibilities of the Department of Justice and Attorney-General, as the agency responsible for the prevention of domestic and family violence, to oversee both the implementation of the recommendations made by the Taskforce and the achievement of system outcomes identified in the monitoring and engagement evaluation plan.**[54]

In response, the Queensland government established the Office of the Independent Implementation Supervisor with $3.3 million (including $936,000 per annum ongoing) included in the Queensland government budget in 2022–23.[55] The office was responsible for overseeing the progress of reform, reporting biannually on the implementation of recommendations and the achievement of systemic outcomes, and identifying areas where further effort was required.

In its fifth progress report (November 2024), the Independent Implementation Supervisor acknowledged that, while progress had been made, the system still lacked stewardship. It called for a fundamental shift:

> **a shift to systems stewardship is needed. As the reforms move firmly into onground implementation, there is an opportunity to revise and refresh overarching governance arrangements to take a systems approach to strengthen the DFSV system, break down siloes and truly consider the interdependencies of actions and resourcing in one part of the system on the operations of other parts of the system. Good governance should optimise decisions and outcomes for the community and encourage improved performance.**[56]

While the Independent Implementation Supervisor's website remains online, emails sent to the listed address bounced back and there is no current public information about the office's status. The Commission understands the office may have been disbanded, highlighting the fragility of accountability mechanisms when they are not embedded systemically.

Accountability must also extend to individual leaders. The Commission of Inquiry into the Tasmanian Government's Responses to Child Sexual Abuse in Institutional Settings (Tasmanian Inquiry) underscored the consequences of weak oversight:

> **"We consider leadership failures are more likely to occur, and be far more damaging, where there is a lack of accountability. We saw some senior leaders use terms like 'shared accountability', in some cases, to sidestep their individual accountability.**[57]

The Tasmanian Inquiry cited expert evidence from Dr Samantha Crompvoets, Director of Australian Human Rights Commission and a sociologist specialising in organisational culture, who emphasised that genuine accountability should be embedded in how leaders are evaluated, not as a 'tick and flick' exercise.[58] In response, the Tasmanian Inquiry called for the inclusion of clear key performance indicators within the performance agreements of public sector leaders.[59]

In South Australia, the Chief Executive performance appraisal process is conducted under Premier and Cabinet Circular 029: Guidelines for the Chief Executive Performance Appraisal Process. The process includes the development of a Chief Executive Performance Agreement in accordance with a published template. The template for the 2024–25 financial year lists 5 whole-of-government priorities, including Closing the Gap, government board gender balance and the South Australian Multicultural Charter.

Future state

The Commission recommends a robust accountability mechanism to independently monitor progress against the Implementation Plan and assess its impact over time.

Drawing on the strengths of the Victorian and Queensland models, where independent offices were established, the Commission supports an alternative approach: resourcing an existing statutory body to take on this role.

The Commission recommends that the South Australian Ombudsman be appropriately resourced to undertake the independent monitoring function. This monitoring role will provide an independent and enduring solution – one that can drive system-wide transparency, foster performance improvement, and ensure accountability to victim-survivors and the community.

The Ombudsman is an existing independent officer who handles complaints about government. The functions of the Ombudsman are set out in section 5A of the *Ombudsman Act 1972* (SA) and include:

- receiving, assessing and investigating or otherwise dealing with complaints about public administration or reports about misconduct and maladministration in public administration
- assisting agencies to identify and deal with inappropriate or improper conduct
- giving directions or guidance to public authorities in dealing with misconduct and maladministration in public administration
- evaluating the practices, policies and procedures of public authorities
- conducting or facilitating the conduct of education programs or the publication or distribution of educational materials
- performing other functions conferred on the Ombudsman by any other Act.

The South Australian Ombudsman currently holds significant investigative powers under the Ombudsman Act. They include:

- investigating any administrative act or any suspected misconduct or maladministration in public administration (section 13(1))
- for the purposes of an investigation, exercising the full powers of a Royal Commission (section 19), including issuing summonses, inspecting documents and examining witnesses.

The Ombudsman also has accountability and reporting functions, including:

- recommending or directing agencies to take specific actions (sections 25 and 28A)
- reporting directly to the Premier or relevant ministers, and ultimately to Parliament, where agency responses are inadequate (sections 25 and 28A)
- publishing reports or statements about an investigation (section 26).

To assume a dedicated implementation monitoring role, legislative changes would be required. This could be achieved either by amending the Ombudsman Act or introducing a new standalone Act. The Commission supports incorporating a sunset clause to limit the expanded powers to a defined timeframe, recommending a 10-year period, aligned with the scope and ambition of the proposed reforms.

This duration surpasses the 7-year term allocated to the Victorian Family Violence Reform Implementation Monitor and reflects the Commission's focus on long-term system transformation.

The amendments should ensure that the Ombudsman can use existing powers to:

- monitor implementation of the Commission's recommendations against the Implementation Plan
- independently evaluate the impact of implementation based on criteria agreed with the Senior Leadership Committee
- provide annual reports to Parliament on implementation and impact
- make recommendations about agency actions and require agencies to report back on how those recommendations are being implemented
- escalate matters to the Premier or Minister when action is not properly taken, with a mandatory response required within 3 months.

The amendments should also provide that section 29 of the Ombudsman Act, which empowers the Inspector (under the *Independent Commission Against Corruption Act 2012*) to review the Ombudsman's operations does not apply to this new role. It is the Commission's view that independent oversight of the Ombudsman's expanded role is unnecessary.

The resourcing of this new function must include the development of a data analytics capability within the Ombudsman's office to monitor for impact, as well as drawing on the Ombudsman's existing expertise in monitoring the implementation of recommendations. The Ombudsman should collaborate with the Senior Leadership Committee and Government Steward to identify the data that will be needed to monitor impact, and reach an agreement on the provision of that data to the Ombudsman's office. The Ombudsman should also receive advice from the domestic, family and sexual violence sector to inform the Ombudsman's accountability role, and to ensure a clear line of sight to the impact of reforms across the sector. Embolden should be funded to establish a sector Advisory Group to the Ombudsman, with membership drawn from across the South Australian domestic, family and sexual violence sector and including organisations that primarily work with Aboriginal people, LGBTQIA+ people, people from CALD communities, people with disability, older people, children and young people, people who use violence and organisations from regional and remote areas of South Australia.

Accountability for delivery against the Implementation Plan should also be embedded in South Australian government Chief Executive Performance Agreements. The South Australian government should consider the inclusion of domestic, family and sexual violence as a sixth whole-of-government priority in the template, with chief executives then identifying the actions their agency will collaborate on and contribute to under the Implementation Plan.

Recommendation 7

The Attorney-General progress legislation to establish the South Australian Ombudsman as the Implementation and Impact Monitor. The functions of the Implementation and Impact Monitor are to monitor and report on the implementation and impact of the South Australian government's Implementation Plan. The Implementation and Impact Monitor should:

a. be resourced to undertake the role for a period of 10 years
b. identify, in consultation with the Senior Leadership Committee, the data and information to be made available to the Implementation and Impact Monitor to evaluate implementation and outcomes (see also Recommendation 3 regarding the development of a de-identified data dashboard)
c. be resourced to commission independent evaluations and research where needed to evaluate the impact of recommendations and pilot programs, such as the child protection notification system, the diversionary scheme, the peer support program and the saturation model.

The legislative amendments should have a sunset clause of 10 years and ensure that:

d. the Implementation and Impact Monitor:
    i. can utilise the existing powers of the Ombudsman
    ii. can make recommendations about actions to be taken by agencies against the Implementation Plan, with agencies required to report back on the steps taken to give effect to the recommendations
    iii. can write to the relevant Minister or Premier if action is not taken, with a response to be provided within 3 months
    iv. provides annual reports to Parliament.
e. section 29 of the *Ombudsman Act 1972* (SA) does not apply to the Implementation and Impact Monitor role.

Recommendation 8

The South Australian government provide further funding to Embolden, South Australia's peak body for domestic, family and sexual violence services, to establish an Advisory Group to the Implementation and Impact Monitor.

Recommendation 9

The South Australian government embed domestic, family and sexual violence as a sixth whole-of-government priority in the Chief Executive Performance Agreement template and require each chief executive's performance agreement to include achievement of the actions and impact identified in the Implementation Plan.

Statewide domestic, family and sexual violence strategy

Current state

South Australia requires a statewide strategy to address domestic, family and sexual violence. The strategy must have prevention at its core.

> **The Royal Commission into Domestic, Family, and Sexual Violence should recommend that the South Australian Government design and implement a state-based strategy to end violence against women and children. This strategy should be co-designed with priority groups, including women with disability and disability advocacy and representative organisations, and explicitly include action to centre, prioritise and equitably respond to the needs of priority groups, especially those overrepresented amongst those experiencing domestic, family, and sexual violence.**[60]

> **In our experience there is limited and inconsistent understanding across South Australia of the importance of primary prevention, and the roles of government, businesses, organisations, community groups and individuals in ending violence. The Salvation Army believes that the South Australian Government can change this by developing a state-based primary prevention strategy that builds on the existing evidence base for primary prevention. This strategy should outline what primary prevention is and provide key guidelines about what it should look like across the state.**[61]

> **Development and implementation of a standalone primary prevention strategy to address domestic, family and sexual violence, or the inclusion of primary prevention as a key pillar of South Australia's overarching domestic, family and sexual violence strategy.**[62]

> **No to Violence strongly recommends that the South Australian government follow other jurisdictions' lead and develop a dedicated strategy focussed on people using violence.**[63]

As noted in the South Australian government submission, there is no current South Australian strategy or plan regarding the prevention of and response to domestic, family and sexual violence. The previous strategy, Committed to Safety: A Framework for Addressing Domestic, Family and Sexual Violence in South Australia, ran from 2019 to 2022.[64]

The only South Australian strategy document currently addressing some aspects of domestic, family and sexual violence is the Women's Equality Blueprint.[65] The Women's Equality Blueprint expands on the Women's Statement (2023–24 State Budget) by highlighting the key initiatives and activity that the South Australian government is leading under 4 priority areas: safety and security, leadership and participation, economic wellbeing and health. Under the priority area of safety and security, several government actions have been identified.[66]



South Australia also has no standalone strategy or plan relating to the prevention of and response to domestic, family and sexual violence that has been drafted and led by Aboriginal people.

South Australia's second iteration Implementation Plan 2024–2026, under the National Agreement on Closing the Gap, includes a number of actions for the South Australian government under Outcome 13 (Aboriginal families and households are safe) and the 4 priority reforms.

Implementation Action 3.28 under Priority Reform 3 commits the Office for Women to 'engage with SAACCON to develop an accompanying action plan focused on responding to violence against Aboriginal women and children in South Australia. The development of this dedicated action plan will be a commitment within the new strategy frameworks in South Australia'. The Office for Women has also committed to, in partnership with SAACCON, establishing a Women's and Family Safety Partnership Committee 'representing relevant service divisions that will provide advice and oversee implementation of any actions undertaken that will directly affect Aboriginal women and children experiencing family, domestic and sexual violence' (Action 3.26).[67] This is especially important given the rates of violence against Aboriginal women and children in South Australia.

At the national level, the National Plan was developed and agreed by Commonwealth, state and territory ministers with responsibility for women's safety.[68] The development of the National Plan included consideration of the National Agreement on Closing the Gap and the Wiyi Yani U Thangani (Women's Voices): Securing our Rights, Securing Our Future Report (2020)[69] and was informed by an Aboriginal and Torres Strait Islander Advisory Council.

Following finalisation of the National Plan, the Aboriginal and Torres Strait Islander Advisory Council led the development of the Aboriginal and Torres Strait Islander Action Plan.[70] The action plan built on the commitments made through the National Agreement on Closing the Gap – in particular, those relating to the 4 priority reforms and Target 13: 'By 2031, the rate of all forms of family violence and abuse against Aboriginal and Torres Strait Islander women and children is reduced at least by 50%, as progress towards zero.'

The Australian government also committed, via the National Plan, to deliver a standalone First Nations national plan. The language used in relation to this plan has now shifted to a 'national Aboriginal and Torres Strait Islander family safety plan' (the Family Safety Plan).

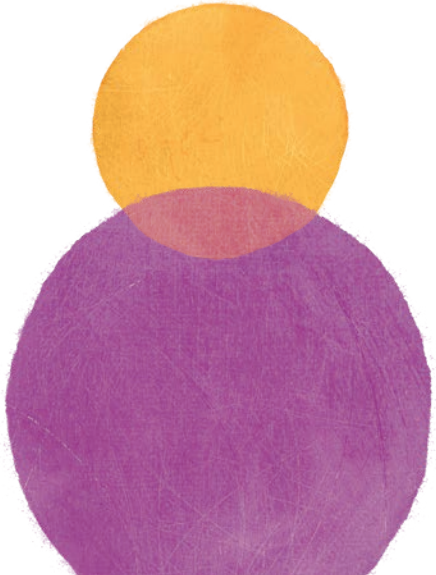
The development of the Family Safety Plan is being led by SNAICC, the national peak voice for Aboriginal and Torres Strait Islander children, with assistance from the Aboriginal and Torres Strait Islander Family Safety Steering Committee. The Commission heard evidence from 2 members of the Steering Committee – Adjunct Professor Muriel Bamblett and Mr Craig Rigney – on Day 9 of public hearings. Adjunct Professor Bamblett spoke about the work undertaken so far and the principles that will inform the Family Safety Plan:

> **"agency, self-determination, and human rights; around voice, strength, resilience, healing; in transformation of institution and systems, inclusions, intersectionality, evidence, data, ecosystems, accountability; and respect for country waters, lore – L-O-R-E – and language.**

> **Our focus is really around governance and partnerships around the centralised voice of victims, and particularly women and children, self-determination and agency. We've got to focus on, rebuild, and re-engage with strengths.**[71]

The Commission notes that there is no consistent approach across jurisdictions in domestic, family and sexual violence strategies. Some jurisdictions have separate strategies; for example, the Northern Territory has the Domestic, Family and Sexual Reduction Framework 2018–2028: Safe, Respected and Free from Violence and the Sexual Violence Prevention and Response Framework 2020–2028. New South Wales and Queensland also have separate strategies or frameworks for domestic and family violence and for sexual violence. A separate sexual violence prevention and response strategy is under development in Western Australia. Other jurisdictions such as Tasmania, Victoria and the Australian Capital Territory do not have standalone sexual violence strategies.

In its submission to the Commission, the South Australian government noted that the profile of sexual violence as an issue needed to be raised and suggested a 'statewide responding to sexual assault policy directive to create consistency and pathways for consumers across the State to receive a trauma informed health care response'.[72]



Future state

The Commission has called for the development of an Implementation Plan to respond to this report. This does not replace the need for a statewide strategy to address domestic, family and sexual violence – a plan is not a strategy.

South Australia must commence the work to develop a statewide strategy to address domestic, family and sexual violence following the delivery of the Implementation and Impact Monitor's first annual report on the South Australian government's implementation against the Implementation Plan. The development of the strategy must occur in partnership with the domestic, family and sexual violence sector and people with lived experience. The sector and government must agree on the 'North Star' to drive collaboration and the work forward, well beyond the implementation of this report's recommendations.

While the Commission is recommending one strategy, the South Australian government should actively consult on the issue of whether a separate sexual violence strategy is the preferred approach during the consultation and development process.

The South Australian government must also fund the development of a standalone Aboriginal strategy to address domestic, family and sexual violence, in line with the Aboriginal and Torres Strait Islander Action Plan 2023–2025 under the National Plan to End Violence against Women and Children 2022–2032, and Safe and Supported: Aboriginal and Torres Strait Islander First Action Plan 2023–2026 under Safe and Supported: the National Framework for Protecting Australia's Children 2021–2031. The strategy must be developed by Aboriginal people, organisations and communities, with a strong focus on the rates of violence against Aboriginal women and children and the over-representation of Aboriginal people in current service systems.

Recommendation 10

The South Australian government develop a 5-year statewide domestic, family and sexual violence strategy that includes the 4 pillars of prevention, early intervention, response, and recovery and healing, following delivery of the Implementation and Impact Monitor's first annual report to Parliament.

The South Australian government resource and support the development of a standalone 5-year Aboriginal domestic, family and sexual violence strategy.

Listening to and acting on the advice of people with lived experience

The National Plan identifies that policies and solutions to addressing domestic, family and sexual violence should be informed by the diverse lived experience of victim-survivors:

> **No effective solutions can be developed without the people most affected by them, and whom this National Plan intends to serve. Victim-survivors must be at the heart of solutions. Victim-survivors have specific and contextual expertise that comes from lived experience of abuse and violence. They have intimate first hand knowledge of services, systems, and structures that are meant to support them but have sometimes failed them. They know from experience the weaknesses and strengths of interventions in practice.**[73]

At the national level, the Domestic, Family and Sexual Violence Commission has established the Lived Experience Advisory Council to amplify the views of people with lived experience of domestic, family and sexual violence. Lived Experience Advisory Council members share advice with the Domestic, Family and Sexual Violence Commission, report on implementation and progress on the objectives of the National Plan, and provide advice to governments to inform policies, systems and services.[74]

The first Yearly Report to Parliament states that:

> **[g]overnments have recognised the critical role of lived experience in policymaking. Lived experience engagement needs to be embedded across all aspects of policy design, implementation and evaluation, prioritising a co-design approach.**[75]

The report also recognises:

- the need for agencies engaging with people with lived experienced to provide adequate support, including suitable debriefing and support services and remuneration
- that government must consider how to engage with people who have used violence, including those from diverse populations, to inform improved interventions.[76]

A number of jurisdictions in Australia have established domestic, family and sexual violence lived experience advisory bodies to government.



Victoria

The Victorian Victim Survivors' Advisory Council (VSAC) was formed in July 2016 following a recommendation of the Victorian Royal Commission into Family Violence.[77] VSAC is designed to give people with lived experiences of family violence a voice and ensure they are consulted in family violence reform.[78] VSAC states that it is 'representative of all ages, genders and demographics, from children, adolescents, and young people, to culturally and linguistically diverse communities, people with disability, LGBTI communities, and elders'.[79]

The Victorian Victims of Crime Commissioner also has the Lived Experience Program, designed to enable victims of crime who are over 18 years of age to use their experiences to provide feedback about key issues affecting victims of crime in Victoria.[80] The program consists of 2 participation options:

- Lived Experience Experts Network – a group of community members who provide feedback, advice and input on issues and topics affecting victims. Members can join the network at any time and receive emails about opportunities to help the Victims of Crime Commissioner with their work.
- Lived Experience Advisory Group – a small group who meet regularly to discuss priority issues.[81]

Tasmania

The Tasmanian Victim-Survivor Advisory Council includes 8 to 12 members who live in Tasmania and have lived experience of family and / or sexual violence, including adults (18 years or over) who experienced family and /or sexual violence as a child. Membership is for a maximum of 4 years, and members are paid for their time and expertise. Members are also able to access free debriefing or mentoring support from the Tasmanian Government Advisory Council Support Partner(s) or an existing practitioner of their choice.[82]

New South Wales

In June 2025, New South Wales, through its Women's Safety Commissioner, closed the call for expressions of interest for the Domestic, Family and Sexual Violence Lived Experience Advisory Group and received 317 applications. The Women's Safety Commissioner is establishing this group to 'amplify the diverse voices of people with lived experience, and share their insights and advice with the NSW government.[83] The advisory group will consist of people who have lived experience of domestic, family and/or sexual violence, live in New South Wales, are 18 years of age or older, and are able to attend a minimum of 4 meetings per year. Members will be paid for their participation and will have access to 4 therapeutic session per person per year following each meeting (among other supports).

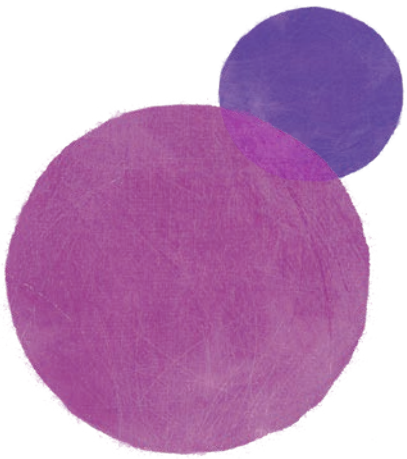
Domestic Violence New South Wales, the non-government peak organisation for specialist domestic and family violence services in the state, also has its Lived Expertise Policy Advisory Group, which was established in 2021.[84]

Western Australia

The Family and Domestic Violence Lived Experience Advisory Group (LEAG) was established in Western Australia in 2024. The design of the LEAG was informed by consultation which found that a common theme was the importance of lived experience voices beyond LEAG members being given the opportunity to provide input into the LEAG's discussions. It was highlighted that the LEAG should avoid working in isolation, that training should be provided to LEAG members, and that LEAG members should be paid a sitting fee and other costs when needed.[85]

The LEAG provides advice to the Minister for Prevention of Family and Domestic Violence. It comprises 12 members who have been impacted by family and domestic violence, either as a primary victim-survivor or as a family member or carer of a victim-survivor. The first meeting was held in January 2025.[86]

The Terms of Reference state that the group will specifically include Aboriginal and Torres Strait Islander people. Members will be appointed for 2 years (with possibility of reappointment for another 2 years), will meet 6 times per year, will make decisions by quorum, and will undergo an annual review and self-assessment.[87]



Current state

The role that people with lived experience can play in informing policy development, training and education, government investment and service delivery was raised with the Commission in many submissions and listening sessions.

> **Historically, the lack of victim-survivor-centred approaches has not only perpetuated harm but also undermined the efficacy of our justice system. Enhancing the role and voice of victim-survivors in these processes is not just a matter of justice but also of necessary reform to ensure their rights and needs are adequately protected and addressed. Given this, we suggest the use of a lived-experience expert advisory group to ensure victim-survivors can participate in and influence system improvements.**[88]

> **There is no emphasis on lived experience in the sector, it feels like acknowledging lived experience can put you at a disadvantage in terms of jobs and workplaces, because it's seen as a vulnerability/risk factor rather than a strength. (And what does that say about the view of the sector servicing us?! A lot!)**[89]

> **As a victim survivor with 39 years of lived experience, I believe I gave a lot to offer the Government in regards to strategies to support individuals, including developing and implementing programs to be put in place in schools, this is the only opportunity society has to support eradicate the horrendous experience of DFSV.**[90]

> **Lived experience needs to have more of a voice to drive the change in recovery we need to see.**[91]

Embolden called for the South Australian government to resource and establish a lived experience advisory council, comprising diverse South Australians with lived experience of domestic, family and/or sexual violence.[92]

Other inputs to the Commission also emphasised the importance of listening to a diversity of lived experience voices.

> **Convene a state-based LGBTQIA+ expert advisory group to support the South Australian Government implement its strategy to end domestic, family and sexual violence, and to give ongoing advice to the South Australian Government and the DFSV sector more broadly.**[93]

> **A lived experience of any situation adds invaluable knowledge that no one but those who have lived through it can offer. Each lived experience is different, and each person who can use their voice to assist in better outcomes and change into the future should be embraced, utilised, supported, and reimbursed for their contributions.**[94]

> **It is critical that diverse South Australians with lived experience of domestic, family and sexual violence are at the centre of all domestic, family and sexual violence informed system responses and reforms. This should include ensuring there is best practice lived experience engagement in policy development, service planning and delivery, and practice. Governments and organisations delivering services need to hear from the people using the service to achieve best practice, recognise and address barriers to access, and improve cultural safety. The South Australian Government is committed to ensuring the voice and perspective of lived experience informs the planning, delivery and measurement of actions and responses to domestic, family and sexual violence, including in policy and legislative reform.**[95]

There are a number of existing lived experience advisory groups that provide advice to government in South Australia; however, none of these groups are specific to lived experience of domestic, family and sexual violence.

As a key deliverable under its funding agreement with the Office for Women, Embolden has partnered with the Domestic and Family Violence Safety Alliance (DFVSA) to develop A Roadmap for Lived Experience Engagement (Roadmap).[96] The Roadmap states that for South Australia:

> **the combination of a standing lived expertise advisory group to government specific for DFSV, a standing advisory group to the peak body for specialist DFSV services, and a dedicated lived experience strategy to guide statewide efforts offer South Australia an opportunity to create meaningful improvements to lived experience engagement with long-term impact.**[97]

In considering current lived experience engagement practices in South Australia, the Roadmap identifies the following key insights:

1. A diverse set of lived experience engagement initiatives exist across the sector, but the most common approaches (informal feedback, feedback surveys) offer limited agency and influence for survivor-advocates.
2. The specialist domestic, family and sexual violence services sector has essentially reached its ceiling for lived experience engagement within current resourcing and conditions.
3. Current practices of lived experience engagement have resulted in improvements at the practitioner and service level. However, there is significant scope to strengthen the sector's relationships with survivor-advocates to elevate lived expertise in policy development, service planning and practice.
4. Current lived experience engagement practices have resulted in limited engagement with the survivor-advocates who experience systemic exclusion and marginalisation.[98]

Future state

The numerous existing lived experience advisory mechanisms established across the South Australian government are acknowledged, and the processes establishing each are to be commended. The discussion that follows does not in any way seek to disrupt the continuation of those mechanisms. Indeed, the Commission experienced the invaluable benefit of engaging with 2 of the established lived experience mechanisms when developing Share With Us.

However, the Commission does consider there to be a need for the South Australian government to establish lived experience mechanisms specific to domestic, family and sexual violence to advise all government agencies, leaders and ministers.

Not every agency in the South Australian government that would benefit from the advice of people with lived experience currently has the skills, expertise or resourcing to establish safe, supported and remunerated lived experience advisory groups. There may also be a reluctance within some agencies to engage with a process that will, in all likelihood, lead to uncomfortable or difficult conversations.

Given the prevalence of domestic, family and sexual violence and the ways in which government services and systems continue to be weaponised to perpetrate and perpetuate this violence, the vast majority of South Australian government agencies would benefit from the opportunity to seek and receive advice on policy and service delivery from people with lived experience of domestic, family and sexual violence.

The Commission recommends that the Government Steward be tasked with establishing Lived Experience Advisory Networks in consultation with the domestic, family and sexual violence specialist sector and existing lived experience advisors.

The Adult Lived Experience Advisory Network should include diverse perspectives, including from Aboriginal people, CALD people, older people, LGBTQIA+ people and people with disability. A separate Child and Young Person Lived Experience Advisory Network should also be established, potentially in collaboration with the Commissioner for Children and Young People, the Commissioner for Aboriginal Children and Young People and the Guardian for Children and Young People.

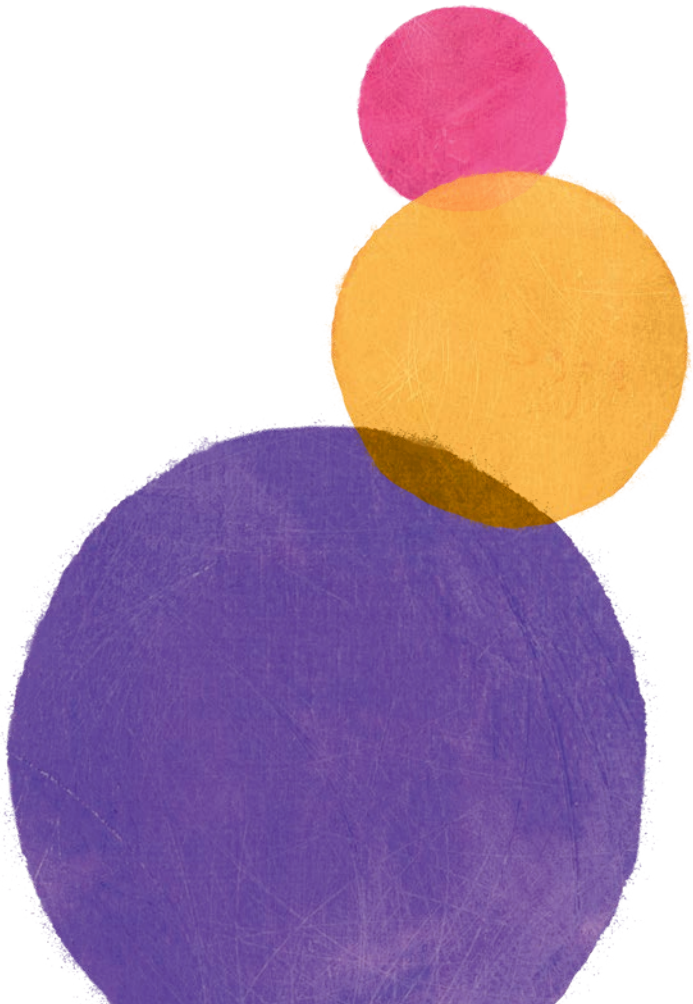
The Commission considers that the model implemented by the Victorian Victims of Crime Commissioner meets the dual needs for a diverse and extensive network of people with lived experience who can choose to participate in particular pieces of work across government, and for a smaller group to provide advice to the Minister for Domestic, Family and Sexual Violence. The Commission has heard that this direct line to political leadership is important – but that this should not be at the expense of ensuring that others across government can also receive the benefit of listening to and acting on the advice of people with lived experience of domestic, family and sexual violence.

Practice frameworks for the model should be developed by the Government Steward. This should include, at a minimum:

- a remuneration framework for participation in the Lived Experience Advisory Networks
- a support framework for participants, such as access to peer support and other therapeutic supports
- a professional development framework to build participants' capacity as lived experience experts and advisers
- expression of interest and appointment processes, to both the broader networks and a Ministerial Advisory Group (with further consideration about whether children and young people are represented on the Ministerial Advisory Group or whether a separate Children and Young People Ministerial Advisory Group is established)
- Terms of Reference for the Networks and the Ministerial Advisory Group which ensure intersectional representation on all groups.

A further consideration should be the inclusion of engagement with the Lived Experience Advisory Networks within relevant Chief Executive Performance Agreements. In acknowledgment that engagement with lived experience will be an entirely new concept for some agencies and chief executives, the Government Steward should prepare guidelines for engagement and training programs for the public sector, and should proactively work with each chief executive to identify opportunities for engagement.

Further consideration is also needed regarding how non-government organisations commissioned by the South Australian government to provide services to people experiencing domestic, family and sexual violence should be supported to seek lived experience advice and expertise. One option may be to enable non-government organisations to access the Lived Experience Advisory Networks. An alternative model could be to fund Embolden to develop its own lived experience advisory network. This should be further explored by the Government Steward during consultation on the establishment of the Lived Experience Advisory Networks.



Recommendation 11

The South Australian government establish 2 domestic, family and sexual violence Lived Experience Advisory Networks (one for adults and one for children and young people) to provide advice and expertise to the South Australian government. The Lived Experience Advisory Networks should:

a. be designed in consultation with the domestic, family and sexual violence sector and existing lived experience adviser groups and networks
b. be supported by practice frameworks
c. be representative of the diversity and intersectionality of lived experience
d. be appropriately remunerated for their advice and expertise and provided with appropriate therapeutic supports.

Recommendation 12

The South Australian government appoint a Lived Experience Advisory Group (or Groups) from the membership of the Lived Experience Advisory Networks to provide advice and expertise to the Minister for Domestic, Family and Sexual Violence.

Recommendation 13

The South Australian government require all chief executives with action items under the Implementation Plan to develop a Lived Experience Advisory Network engagement strategy for their agency. Engagement with the Lived Experience Advisory Networks should be included in chief executive performance agreements.

A statewide Risk Assessment and Management Framework

What is risk assessment in the domestic and family violence context?

The process of assessing risk is a common feature in service responses to domestic and family violence in Australia. Many South Australians who have sought help from specialist services or from police for domestic and family violence will have gone through the risk assessment process. Of these South Australians, many will have completed the process more than once, and some may have been subject to dramatically varied risk results based on who completed the assessment with them and when. Some victim-survivors, and most frontline workers, will be keenly aware that in South Australia the severity and imminency of risk assessment scores will subsequently determine what response, if any, a victim-survivor will be eligible for.

In Australia, every state and territory has developed and uses different risk assessment tools, along with different risk management practices and procedures. Almost all Australian jurisdictions use their own version of a shared or 'common' risk assessment, which is used by all agencies and organisations responsible for responding to domestic and family violence within that jurisdiction.

Common risk assessment tools for domestic and family violence are often actuarial tools, meaning they are designed to quantify and predict risk by drawing on a series of known risk factors. Risk factors are generally sorted into 2 categories: 'lethality' or 'high risk' factors and other risk factors.

Some of the common risk assessment tools used in Australia are newer and can be considered more accurate than others. For example, a 2018 evaluation of the New South Wales Domestic Violence Safety Assessment Tool (DVSAT), which was implemented in 2015, found that it performed little better than chance in predicting repeat and serious offending,[99] and that:

> **Given that items included in the [DVSAT] were selected following review of the literature and existing risk assessment tools, and not on the basis of empirical methods, it is perhaps not surprising that many items were not found to be predictors of repeat victimisation; weak, inverse, or unreliable predictors are more likely to be included when empirical test construction methods have not been used.**[100]



The evidence base for risk factors in domestic and family violence is almost entirely derived from practice knowledge and research regarding heterosexual intimate partner violence – specifically, intimate partner homicides.[101] Despite the boundaries of this evidence base, most Australian jurisdictions apply their risk assessment tools to other forms of violence, including family violence, child abuse, sexual violence in domestic and family settings, and intimate partner violence in LGBTQIA+ communities. While developing the National Risk Assessment Principles for domestic and family violence, Australia's National Research Organisation for Womens Safety (ANROWS) found that the applicability of current risk factors to diverse population groups such as LGBTQIA+ communities 'remains unclear', and recommended that:

> **tools should be adapted in accordance with emerging knowledge about specific risk factors for diverse communities and as further research determines how well the existing evidence base on risk factors for DFV applies to priority population groups.**[102]

This section of the report is concerned with risk assessment tools for domestic and family violence. The use of sexual violence is absolutely a risk factor in domestic and family violence settings; however, these tools are not intended to predict or respond to the use of sexual violence by strangers or acquaintances. As a result, this section will use the language 'domestic and family violence' to include sexual violence that occurs in domestic and family relationships, but not sexual violence by strangers or acquaintances.

This section does discuss the development of a new needs assessment, which will have application for all victim-survivors of sexual violence.

ANROWS National Risk Assessment Principles

In 2018, ANROWS published National Risk Assessment Principles for domestic and family violence (National Principles). The National Principles aim to provide an 'overarching national understanding of risk and managing risk in the area of domestic and family violence' and 'a guide for jurisdictions in developing, revising or evaluating risk assessment frameworks'. The National Principles set out 9 principles for risk assessment, along with the known evidence base for high risk and other risk factors, and the limitations of that evidence base. In particular, Principle 6 calls for an integrated, systemic response to risk assessment and management, and Principle 7 for a continuum of service delivery, which 'should also involve a broad range of agencies who consider the "whole person" to reduce the risk of compounding survivors' trauma through inadequate or fragmented service responses'.

The National Principles advocate that 'ideally, risk management should occur as part of a collaborative, integrated or multi-agency approach' and that 'workers engaged with adult and child survivors should work collaboratively with other agencies to manage risk and enhance safety, supporting a 'wraparound approach' to service delivery.'

> **A common language is crucial so that services hold a shared understanding of risks to safety, allowing them to respond and manage the safety of adults and children exposed to violence appropriately and consistently. Ideally, professionals will be guided towards a shared understanding of risk and safety by incorporating these key elements into the common evidence-based risk assessment and risk management frameworks that underpin multi-agency or integrated service system responses.**[103]

The Australian government has recently contracted ANROWS to update the National Principles. This work is to form part of work being led by the Department for Social Services, in consultation with states and territories, 'to develop a national model best-practice risk assessment framework'.[104]

National context

In the last decade, there has been substantial effort, both nationally and at state and territory level, to modernise common risk assessment practices for domestic and family violence. In most Australian states and territories, risk assessment and management frameworks (RAMFs) have become central to developing common understandings of risk and risk management practices for domestic and family violence. As a result, the development and use of RAMFs has been a subject of a number of reviews, inquests, taskforces and Royal Commissions across Australia.

While risk assessment is a core component of RAMFs, these frameworks are necessarily made up of more complimentary parts than a single common risk assessment tool. RAMFs are often a key component of promoting accountability across government and non-government sectors, along with shared knowledge and common practices, and clearly defined processes. While every RAMF is different, they share a number of common features, including:

- shared language, definitions and understandings of domestic and family violence
- mandated uptake and use across relevant government and non-government services
- structured tiering of responsibilities by agency or specialisation
- universal risk screening by relevant non-specialist workforces
- graduated risk screening and risk assessment tools
- common risk management tools, including safety plans and referral pathways
- formal information sharing structures
- shared practice guides and resources
- shared training.

Jurisdictions that have developed and introduced RAMFs in the last decade include Western Australia (2016), Victoria (2018), Queensland (2021), the Northern Territory (2020) and the Australian Capital Territory (2022). New South Wales currently uses a common risk assessment tool (2015) but appears to be in the process of developing a RAMF.

Victoria

In 2007 Victoria developed the Common Risk Assessment Framework (CRAF) as the first domestic and family violence risk management framework in Australia.[105] Following the 2014 murder of Luke Batty in Victoria by his father, Victoria underwent a significant period of review and reform, with both a Coronial Inquest and the Victorian Royal Commission into Family Violence. Both the Royal Commission and the Coronial Inquest made recommendations relevant to improving the CRAF, leading to a 2016 review by Monash University.[106]

The first 4 recommendations made by the Victorian Royal Commission related to improving risk assessment and management, with Recommendation 1 setting out that the Victorian government review and implement a revised CRAF in order to:

> **deliver a comprehensive framework that sets minimum standards and roles and responsibilities for screening, risk assessment, risk management, information sharing and referral throughout Victorian agencies.**[107]

The Victorian Royal Commission recommended that the revised framework should incorporate evidence-based risk factors that are specific to children, along with comprehensive practice guidance, and recommended that:

> **The framework should also reflect the needs of the diverse range of family violence victims and perpetrators, among them older people, people with disabilities, and people from Aboriginal and Torres Strait Islander, culturally and linguistically diverse and lesbian, gay, bisexual, transgender and intersex communities.**[108]

In response to the Victorian Royal Commission, Coronial Inquest and Monash Review, the Victorian government developed and introduced the Family Violence Multi-Agency Risk Assessment and Management Framework (MARAM). Since its establishment, MARAM has been seen as a key lever for Victoria's family violence reforms. The development of MARAM included numerous new elements, including the introduction of risk screening by non-specialist agencies and organisations, and a legislative and regulatory framework requiring prescribed agencies to align their practices to MARAM. The reform also included a workforce tiering process which assigned different responsibilities for risk screening, assessment and management to different workers, agencies and organisations depending on their specialisation. MARAM is underpinned by 2 legislated information sharing schemes. It is supported by a wide range of common training, practice guides and resources.

MARAM provides a number of graduated risk assessment and management tools and informs Victoria's multi-agency responses to high-risk family violence matters through statewide Risk Assessment and Management Panels (RAMPs), similar to the FSF in South Australia.[109] MARAM was recommended to this Commission for consideration as a best-practice framework by a number of organisations and workers who are familiar with it. In its submission, Safe and Equal wrote:

> **The development of the MARAM Framework has been a core enabler of the Victorian family violence reforms. It is a family violence, systemwide response that establishes the architecture for shared responsibility and accountability mechanisms for responding to family violence risk across multiple workforces … The establishment of a robust legislated risk assessment and management framework continues to provide unprecedented clarity and consistency for responding to family violence risk, across a range of service systems and associated workforces.**[110]

Western Australia

Western Australia developed the first edition of its Common Risk Assessment and Risk Management Framework (CRARMF) in 2011. The CRARMF was a foundational enabler for the Western Australian government's subsequent implementation of a statewide integrated response model. The CRARMF was evaluated in 2013, with a second edition released in 2016. Funding was allocated in 2024 to produce an updated and contemporised CRARMF, which is scheduled to be released later in 2025. Much like MARAM, the updated CRARMF will include specific risk factors for priority population groups. Also similar to MARAM, the current CRARMF provides for a shared understanding of domestic and family violence and underpins the statewide integrated response model by tiering relevant workforces into mainstream services, legal and statutory services and specialist services.

The CRARMF includes shared principles and sets out common minimum standards and practice requirements for each relevant workforce tier. These minimum standards require all service providers to have an understanding of domestic and family violence, and to either screen for or assess and manage risk, depending on their specialisation. The CRARMF currently includes a risk screening tool and a risk assessment tool, as well as risk management, information sharing and referral tools. Structured information sharing is conducted using a variety of legislative and policy enablers. In addition to the integrated response system, Western Australia operates Multi-Agency Case Management (MACM) Meetings to provide for multi-agency responses to high-risk cases. Like MARAM, the CRARMF is supported by a range of common practice guides and fact sheets. The CRARMF appears to be a more streamlined and user-friendly framework when compared with MARAM.

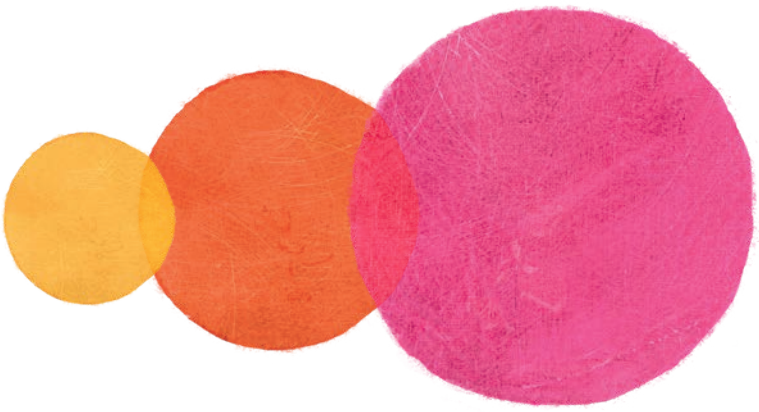
Queensland

Queensland released its first Domestic and Family Violence Common Risk and Safety Framework (CRASF) in 2017 in response to recommendations in the 2015 Not Now, Not Ever report of the Special Taskforce on Domestic and Family Violence. The CRASF was developed in conjunction with ANROWS and was evaluated in 2019.

In 2021, Queensland established the Women's Safety and Justice Taskforce, which was tasked to examine criminalising coercive control in Queensland following the 2020 murder of Hannah Clarke and her 3 children by her ex-partner and their father Rowan Baxter. The taskforce released its first report, Hear Her Voice – Report One, in 2021, in which it recommended:

> **Strengthen the whole-of-system approach to risk assessment and safety planning by developing a whole-of-system risk assessment framework and requiring use of risk assessment processes across all parts of the domestic and family violence service system and justice system that are consistent and aligned with this framework. The framework will recognise and respond to patterns of all forms of domestic and family violence over time within the context of a relationship as a whole. It will require the use of consistent language and concepts to support and enable integrated responses. The framework will include an assessment of the safety and risk of harm for the victims, including children, as well as the risk of a perpetrator continuing to use violence.**[111]

The second version of the CRASF, which was refined following its evaluation, was released in 2021. The CRASF shares similarities with both Victoria's MARAM and Western Australia's CRARMF in that it includes workforce tiering into generalist, specialist and multi-agency streams, and mandated uptake through Queensland's domestic and family violence practice principles, standards and guidance.[112] The CRASF includes an adult and child risk screening tool, a risk assessment tool and a multi-agency risk assessment and management tool for high-risk cases, used by Queensland's High Risk Teams. Each tool has a corresponding risk management checklist with safety plans and referral and information guides. Like MARAM, CRASF includes an additional risk category for 'imminent risk' in addition to high risk, as well as specific risk factors for priority population groups and a legislated information sharing structure.[113] The CRASF is supported by common practice guides, fact sheets, online resources and training, and appears to be both a more modern version of CRARMF (noting an updated version of the CRARMF is due for release in 2025) and a simplified and streamlined version of MARAM.



Northern Territory

The Northern Territory released Phase 1 of its Domestic and Family Violence Risk Assessment and Management Framework (NT RAMF) in 2020. Similar to Queensland's CRASF, the NT RAMF was developed in conjunction with ANROWS and with sector consultation.[114]

The NT RAMF is underpinned by a legislated domestic and family violence information sharing scheme, under which prescribed Information Sharing Entities must align their practices to the NT RAMF, much like in Victoria. The NT RAMF tiers relevant workforces into universal, statutory and specialist streams, and provides a risk screening and risk assessment tool, along with risk management checklists, safety plans and an e-safety tool. It is also supported by common practice guides, practice tools and in-person training. Phase 2 of the NT RAMF is currently in development and will introduce separate screening tools for children and young people, and for people using violence as well as specific risk factors for priority population groups.[115]

The Northern Territory operates its own version of the FSF for multi-agency management of domestic and family violence.

Australian Capital Territory

The Australian Capital Territory released its Domestic and Family Violence Risk Assessment Framework (ACT RAMF) in 2022, following a trial in 2020–2021.[116] Like other RAMFs, the ACT RAMF tiers its workforce into generalist, statutory and specialist streams, and uses a legislative and regulatory framework for formal information sharing. The ACT RAMF supports a risk screening and risk assessment practice guide and a risk management guide with common practice guidelines and fact sheets.[117] The ACT RAMF appears to follow a less prescriptive risk screening and assessment style than some other models, and does not explicitly include specific risk factors for priority population groups.

Current state

In South Australia, the Domestic Violence Risk Assessment tool (DVRA) was developed as a key component of the FSF. The DVRA is described in the Practice Manual for the FSF, developed by South Australia's Office for Women:

> **"The DVRA provides a common understanding of risk across referrers. Professional judgement is a critical contribution to the DVRA, and referrers should include victim's perceptions of risk and apply their professional judgement to a referral rather than rely solely on a risk score. The DVRA provides a consistent way to assess risk across multiple agencies and identify if an individual should be referred to a Family Safety Meeting.**[118]

The DVRA was designed to be 'a practical tool that will assist and inform the type and urgency of responses to a person at risk (and their family) and case planning as well as any decision to make a referral to a Family Safety Meeting (FSM)'.[119] The DVRA, like many risk assessments for domestic and family violence, is designed for use with the person experiencing violence, and is not used to identify a person's risk of using violence. The risk factors and questions within the DVRA 'are not intended to be asked directly but form a guide in talking with a person at risk about their experiences of violence and abuse.'[120]

The DVRA is an actuarial tool that assigns numerical scores to 57 risk factors. High risk factors receive a higher numerical score than other risk factors. The overall numerical scores correspond with 3 risk categories: standard risk (0–25), medium risk (26–44) and high risk (45–170+). A score of 45+ means a person has been assessed as at high risk of serious harm or death without intervention. The numerically determined risk category can be raised or lowered by the practitioner completing the risk assessment using their professional judgement, accounting for the views of the person experiencing the violence about their safety.

The recency of risk factors occurring is a significant component of the DVRA, with high risk factors contributing to the overall score regardless of when they last occurred, and other risk factors only contributing if they occurred within the last 14 days. This means that a person who had experienced none of the high risk factors and all of the 38 other risk factors within the last 14 days would score 85 (high risk). If the same person gave the same response after 14 days had elapsed since the latest incident of violence, they would receive a risk score of 0. This is noteworthy given that risk assessment tools used in some other jurisdictions, such as Victoria, Western Australia, Queensland, the Northern Territory and the Australian Capital Territory, include an assessment of imminency in addition to overall or cumulative risk. This indicates that these risk assessment tools take a much more nuanced approach to assessing both imminency and underlying risk than the DVRA. The Ngaanyatjarra Pitjantjatjara Yankunytjatjara (NPY) Women's Council, which has experience using 3 different risk assessment tools in remote communities, wrote:

> **A key and critical difference between the SA and NT frameworks is that the numerical value assigned to risk in SA is focused on incidents within the last 14 days where the NT framework is based on all past incidents which builds a broader risk profile. In the NT framework a woman may have a high numerical risk value, but her risk may be classed at 'not imminent' because nothing has taken place in the recent timeframe.**[121]

A 2008 evaluation of the FSF revealed that South Australia's DVRA was not considered a 'validated' risk assessment tool.[122] The evaluation found that while some users expressed concerns about the efficacy of the tool, it was ultimately supported as a central feature of the FSF. The evaluation report noted that:

> **Despite some issues being raised, the development of a consistent Risk Assessment Form that represented an agreed understanding of domestic violence across a wide range of agencies, was seen to be a considerable achievement.**[123]

Given that South Australia's DVRA was developed in 2007, and was last revised in 2014, it appears to be the oldest common domestic and family violence risk assessment tool being used in Australia, followed by NSW's DVSAT, which was implemented in 2015.[124] The DVRA does not appear to have been subject to an independent evaluation since it was implemented in 2007. It is worth noting that the DVRA shares a number of similar features with the DVSAT, which, as mentioned, has been independently evaluated as performing little better than chance in predicting repeat and serious offending.[125]

The age of South Australia's DVRA also reveals that it has not been aligned with the National Principles, including the addition of specific risk factors for family violence and priority population groups.

Using the Domestic Violence Risk Assessment tool

The DVRA is used by call takers at the Domestic Violence Crisis Line and workers of the DFVSA to guide their responses and to determine who is eligible for a specialist response. The Commission has established that, as a result of resourcing constraints, the DFVSA has had to narrow its eligibility criteria for specialist crisis responses to adult women who are at high risk of imminent harm and at risk of homelessness, along with accompanying children, excluding adolescent boys.[126]

A person with lived experience wrote:

> **Currently, women under-go a 'risk assessment' that will identify if the risk is a crisis or a risk over a period of time. Currently, the 'risk' for a woman must occur within the last 14 days to be seen as a crisis – then she is eligible for a service. Longer than 14 days, and she is influenced by counsellors to 'stay' with family or friends.**[127]

Women experiencing violence who are not assessed as being at high risk under the DVRA will be referred to the Homelessness Alliances for a response if they are at risk of homelessness, rather than receiving a response from the DFVSA. Women who are assessed as being at high risk under the DVRA but who are not at risk of homelessness may also not receive a response from the DFVSA due to tightening eligibility criteria as a result of resourcing constraints.[128] This use of the DVRA to triage, prioritise and manage workload, while born out of necessity due to chronic under investment in the domestic and family violence sector, is at odds with the National Principles, which set out that 'survivors' safety is the core priority of all risk assessment frameworks and tools'[129] and that 'all DFV should be considered a risk which requires a response.'[130]

The Commission understands almost all male-presenting victim-survivors, no matter the risk score they may receive, will not receive a service from the DFVSA due to eligibility criteria restricting services to adult women who are experiencing domestic and family violence. Male-presenting victim-survivors will also not be eligible for a service from the Homelessness Alliances if they are not experiencing or at risk of experiencing homelessness.[131] This is again inconsistent with the principle that 'all DFV should be considered a risk which requires a response.'[132]

The DVRA is also used to guide SAPOL responses to domestic and family violence. While different risk scores will not make a person ineligible for support from police, especially if a crime has been committed, they may guide the actions police take to manage risk, along with the extent of involvement from specialist family violence investigators.

DVRA scores will also determine who is eligible for a multi-agency response in South Australia. The FSF is currently South Australia's primary approach to multi-agency coordination for domestic and family violence responses. Eligibility for the FSF is limited to people over 18, who are at high risk of intimate partner violence or Aboriginal family violence, where the risk of serious harm is ongoing and/or escalating and requires additional collaborative responses to mitigate the risk.[133] Similarly, while MAPS can elect to review standard and medium risk cases, high-risk domestic and family violence is MAPS' core business. Both the FSF and MAPS will be explored in more detail later in this chapter.

The Commission has received input regarding the DVRA, and how it interacts with and informs responses to domestic, family and sexual violence in South Australia. The Commission heard from people who have been the subject of a risk assessment and from those who use them professionally, that there is a need to modernise South Australia's understanding and assessment of risk. The Commission has not heard any voices advocating for the current DVRA to remain untouched.

The urgent need to update the oldest common risk assessment tool in the country is not lost on the South Australian government:

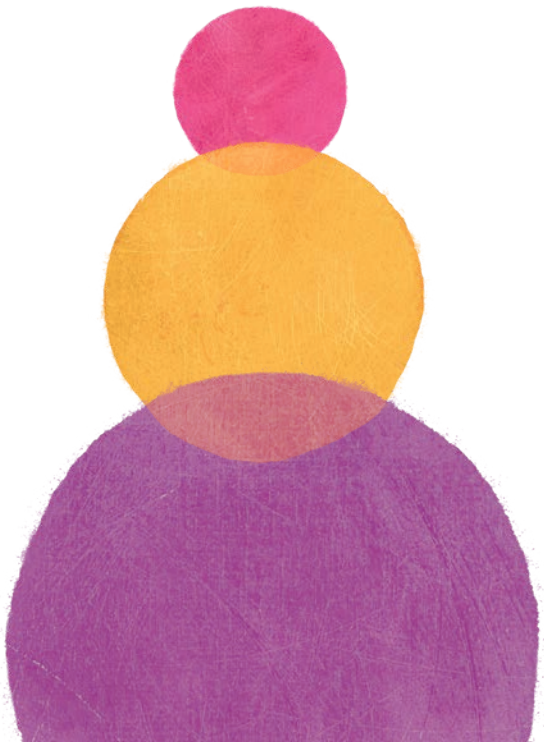
> **The current risk assessment tool, used by police and frontline workers, uses a structured approach used to calculate an overall risk score. The current tool can provide a clear and quantifiable measure of risk but may lead to challenges capturing the nuances of each case. A review of the current risk assessment tool would be timely to ensure it remains contemporary and effectively incorporates the context of relationships to identify coercive control. This review should ensure the tool is comprehensive and aligned with the latest research and best practices. Supporting documents that govern the use of the tool should also be updated to enhance user's understanding and application of the tool.**[134]

Domestic and family violence specialist services call for risk assessment practices that are more attuned to the needs of particular cohorts, including children and young people:

> **Risk assessment tools that accurately capture the risk for children that include child focused questions that can be directly asked to the child and young person. Recognising that children have the capacity to understand their experiences of violence and risk as they have been living in it. Could be involved in their own assessment of risk.**[135]

Embolden has called for an update to the risk assessment tool, so that it can better serve all victim-survivors:

> **develop a standardised national risk assessment that effectively assesses risk for all victim-survivors in a way that is trauma informed and culturally safe, with consideration for Aboriginal people, infants, children and young people, culturally and linguistically diverse people, LGBTIQA+ people, and men experiencing violence.**[136]



The DVRA is not attuned to complex risk

The Commission heard that some practitioners believe the DVRA is overly dependent on static risk factors and fails to add sufficient weight to situational crises, such as suicidal ideation, or to coercive controlling behaviour. WSSSA has developed and uses the separate Coercive Control Risk Assessment in conjunction with DVRA.[137] Other submissions noted that:

> **Existing risk assessment practices are not effective, and action plans for victims in the event of an incident do not protect them – women with such plans have been killed, so they are not effective.**[138]

> **Current risk assessment tools are poorly made, poorly implemented and ineffective at assessing risk based on current research.**[139]

In preparing its second submission on behalf of member organisations, Embolden circulated a survey to the frontline workers and teams of those organisations.[140] Frontline domestic, family and sexual violence workers in South Australia were asked specifically about their experiences using the DVRA and other risk assessment tools. These specialist workers responded that:

- the DVRA is not adequately sensitive to coercive control
- the DVRA is not adequately sensitive to technology-facilitated abuse
- the DVRA is not adequately sensitive to pregnancy and miscarriage
- the DVRA is not adequately sensitive to children and young people
- the incident-based nature of the DVRA, along with the 14-day exclusion, makes it more likely to miss ongoing patterns of abuse and complex risk.[141]

The DVRA does not meet the needs of diverse groups

The Commission has heard that the DVRA does not sufficiently account for family violence, or for the specific risks and vulnerabilities experienced by different population groups including children and young people, older people, people with disability, as well as LGBTQIA+, Aboriginal and CALD communities. As discussed in Chapter 1, each of these population groups can be additionally vulnerable to domestic and family violence. Some of these groups also experience unique forms of violence, such as forced conversion practices for LGBTQIA+ people, dowry abuse for CALD people, inheritance impatience for older people, and carer abuse of people with disability. Desktop research shows that South Australia lags behind Victoria and Queensland, where specific risk factors for priority population groups have been included in their risk assessment and management frameworks, and Western Australia and the Northern Territory, where new assessments with specific risk factors are currently in development.[142]

The results of Embolden's frontline workers survey reinforced the DVRA does not adequately capture risk for children and young people, Aboriginal family violence, CALD people and LGBTQIA+ people. Embolden wrote that:

> **Embolden's survey of frontline DFSV teams demonstrated significant variety across the tools and approaches used to assess the risk of harm for victim-survivors. There is general agreement that risk assessment tools are effective at identifying risk of physical harm in male-female intimate partner relationships, where the male is the perpetrator of violence. However, frontline services surveyed have suggested that many of these tools are less effective in accurately identifying risk outside of these parameters.**[143]

The DVRA is used inconsistently

The Commission has been told that the DVRA is used inconsistently, depending on profession, workplace and geographical location. Much of the input relates to differences in use by police when compared to social workers and domestic and family violence practitioners. In listening sessions, both police and specialist workers have confirmed that, generally speaking, risk assessments completed by police often result in lower risk scores than those completed by social workers and other specialist workers.

Social workers and other domestic and family violence practitioners often attributed this phenomenon to police becoming desensitised to domestic and family violence due to their repeated exposure to more severe instances of violence in the community. This was sometimes described as 'compassion fatigue'.[144] Workers also attributed lower risk scores by police to a lack of trauma-informed training and the system's emphasis on domestic family violence as isolated incidents rather than ongoing behaviour of chronic, patterned abuse. Conversely, police often attributed higher risk scores from social workers and other domestic and family violence practitioners to a lack of understanding and/or training of those practitioners about how to properly use the DVRA, particularly the 14-day window for risk factors. Following the frontline worker survey, Embolden found that:

> **the variety and inconsistent use of tools between various services and agencies leads to varying risk scores and the potential for critical underestimation of risk … In addition to problems with the tools themselves, frontline services surveyed identified key concerns across the use of risk assessments in practice. Concerns included the subjective nature of questions leading to considerable variation in risk scores. Frontline services surveyed attributed divergence in risk scores to: operational approaches within SA Police (SAPOL) whereby officers may complete risk assessments based on victim statements, rather than engaging with victim-survivors directly to work through the questions within the risk assessment; and limited understanding of DFSV across all staff and agencies completing the DVRA, including the nature of DFSV experienced by diverse groups of people.**[145]

The inconsistency of approaches in assessing risk between workers from different agencies and organisations was also a theme found during a 2023 evaluation of MAPS and its processes:

> **[Participants] expressed concerns about what they saw as the lack of a shared understanding of risk, due in part to differences in training, qualifications and domestic violence expertise, and use of assessment tools across settings.**[146]

Desktop research reveals that South Australia's DVRA has very little available in the way of shared practice guides, supporting material and training. The FSF Practice Manual appears to be the only shared resource on assessing risk in South Australia and it contains a single page 'guide for workers conducting risk assessments and referrals' along with half a page on how to apply professional judgement.[147] This can again be contrasted with the approaches in other jurisdictions, which provide several shared practice manuals, guides and fact sheets for workers and organisations.

Some jurisdictions also provide shared training resources to support effective and consistent risk assessment practice.[148]

Calls for a Risk Assessment and Management Framework

The Commission has repeatedly heard that it is time for South Australia to develop and implement its own RAMF, along with risk screening by universal services, drawing from the success of frameworks being used interstate:

> **It is well understood that domestic, family, and sexual violence is deeply interconnected with a range of other risks and concerns. It therefore cannot be effectively addressed in isolation. Tackling domestic, family, and sexual violence requires a collaborative, shared risk-management approach at the service level as well as at the governance level. Establishing a common framework including definitions of risk, shared understandings about presenting behaviours, and adopting common tools are essential steps in ensuring staff have support from the organisation in which they work (i.e., they do not carry the burden of managing risk alone), and in fostering a coherent and effective multidisciplinary, multiagency response.**[149]

> **We recommend that a common set of risk identification, assessment and management practices are developed and embedded in all domestic violence relevant risk policies and practices state-wide. We recommend a common risk assessment framework is created that clearly identifies the presence of DFSV as well as coercive control behaviours in relationships, including in Family Safety Framework assessments.**[150]

> **a common, widely understood and broadly applicable tool by which workers in many settings can identify people who are at risk of experiencing or using violence is a necessary element in increasing the capacity of the service system.**[151]

> **We draw the Commission's attention to the Victorian Multi-Agency Risk Assessment and Management Framework (MARAM) framework, which has established clear responsibilities for the identification and management of risk related to family and domestic violence ... We believe that by adopting a similar approach, South Australia can ensure that engaging with both victim-survivors and persons using violence becomes a whole-of-sector responsibility, and that all practitioners have the capability, capacity and knowledge to do so.**[152]



Future state

It is clear that South Australia must modernise its DVRA.

This provides an opportunity to expand the current risk assessment approach into a statewide framework – one that empowers agencies and professionals to identify and respond to all forms of domestic and family violence with confidence and consistency. A RAMF developed in South Australia can be tailored specifically to its population and service system. It can be aligned with the National Principles, and designed to meet the needs of an increasingly diverse population.

Once considered a leader in responses to domestic and family violence, South Australia now lags behind other jurisdictions, which have made strides in developing comprehensive frameworks for risk screening, assessment and management that foster collective responsibility and shared knowledge. In many cases, these frameworks have been used as a foundation to promote awareness, improve information sharing and support integrated responses to domestic and family violence.

In South Australia, support for consistent workforce understanding and application of the DVRA is minimal. At present, the only shared resource for domestic and family violence risk assessment and management is confined to a few pages in the FSF Practice Manual.

Although some stakeholders support adopting a future national framework or existing frameworks such as MARAM, the Commission's extensive research and consultations make clear: South Australia must neither wait for a national model nor import another jurisdiction's framework. The Commission does not support prioritising a national model over one tailored for South Australia's needs. The lack of clarity regarding the design and relevance of any potential future national framework underscores the need for local leadership.

South Australia's delayed focus on modernising these practices means that the state can learn from frameworks already being used and refined in other jurisdictions – with guidance from ANROWS, Australia's leading body in domestic and family violence research.

South Australia's shared borders with Western Australia and the Northern Territory create real complications for frontline practitioners, especially in remote communities. As the NPY Women's Council has pointed out, inconsistent risk assessment across borders undermines efforts to protect victims and coordinate responses. A culturally safe, consistent approach is essential.

The timing is critical: both the Northern Territory and Western Australia are currently refining their own models. With strong geographic and service links to these states, South Australia must take this opportunity to build coherence, compatibility and collaboration across borders.

Developing a South Australian RAMF is not just about refining existing practices, it is a generational opportunity to build a future focused, evidence based framework that reflects the latest understanding of risk and better meets the needs of all South Australians.

Jurisdictions that have implemented modern RAMFs demonstrate how these tools can transform systems. South Australia can achieve major outcomes, including:

- promoting a consistent, evidence-based understanding of domestic, family and sexual violence in all forms, and how it can impact diverse communities differently
- advancing shared responsibility by embedding risk screening, safety planning and information sharing into relevant universal services
- ensuring clear and consistent information sharing and referral pathways
- prescribing targeted minimum standards for training and professional development, strengthening workforce capacity to respond to children and young people's risk
- improving relevant workforces' capability to identify and respond to domestic and family violence risk experienced by children and young people
- increasing accountability and visibility of perpetrators across government and community services
- embedding integrated, multi-agency responses that escalate appropriately based on risk.

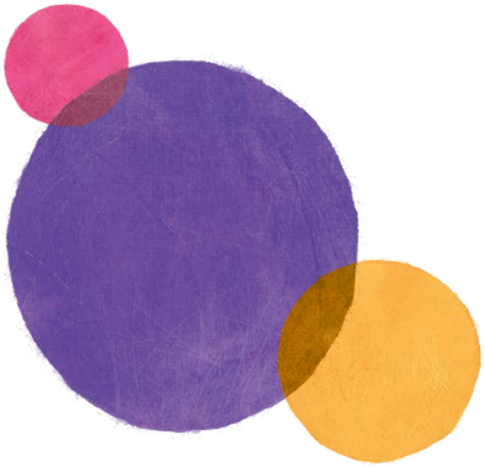
The development of a South Australian RAMF is an important recommendation of this report. It is not only updating existing practice, it is a key part of systemic reform.

A legislative and regulatory framework

The South Australian RAMF should ultimately be enshrined in, and protected by, a legislative and regulatory framework. This framework would serve a dual purpose by requiring prescribed agencies and organisations to meaningfully use the RAMF and participate in multi-agency and integrated responses, while also safeguarding the RAMF into the future.

While enshrining the RAMF in a legislative and regulatory framework is a necessary goal, it is the Commission's view that the development, implementation and first evaluation of the RAMF should occur before the introduction of legislation. This avoids undue delay in the development and implementation of such a crucial reform, and provides the benefit of flexibility in design and adaptation to maximise the RAMF's effectiveness before it is legislated.

In other jurisdictions such as Victoria, Queensland, the Northern Territory and the Australian Capital Territory, prescribed alignment to RAMF is often underpinned or supported by legislated information sharing schemes for domestic, family and sexual violence and child safety. In these models, prescribed Information Sharing Entities must align with their jurisdiction's RAMF. More will be said about information sharing later in this chapter.



Workforce tiering

The South Australian RAMF should set out at least 3 different workforce tiers. Each tier should be designated with:

- minimum training standards
- minimum practice standards
- minimum information sharing standards
- responsibility for one or more risk screening, assessment and management practices.

Development and implementation of the RAMF should include the identification of agencies, organisations and services that regularly come into contact with people experiencing or using violence (including people who may be exiting custody and at risk of experiencing or using violence upon entry back into their community), and which should perform a prescribed role in either risk screening or risk assessment and management. These agencies, organisations and services are to be assigned to a relevant workforce tier and be required to align their practices and policies to that tier's minimum standards and responsibilities. Consideration should be given to the interstate models that tier workforces into:

- universal services / risk screening entities
- legal and statutory services / risk assessment entities
- specialist services / comprehensive risk assessment and management entities.

The Commission supports a workforce tiering model that allows for flexibility within large agencies and organisations. For example, some SAPOL members and SA Health practitioners should be recognised as being domestic, family and sexual violence specialists, with different responsibilities to the rest of their respective workforces.

The Commission also supports a tiering model that requires select agencies and organisations to align their practices and policies to a particular workforce tier, and that supports non-prescribed agencies and organisations to voluntarily align their practices and policies to the RAMF.

It is the Commission's view that, at a minimum, agencies and organisations that currently participate in the FSF and MAPS should become prescribed users of the RAMF.

Accurate, evidence based and relevant

South Australia's RAMF must be accurate, evidence-based and consistent. It must be relevant to all people who may experience domestic and family violence. The RAMF should be aligned to National Principles and evidence-based risk factors, except in circumstances where evidence has progressed since 2018. In particular, the South Australian RAMF must include risk factors specific to the following priority population groups, aligned to existing evidence where available:

- children and young people
- LGBTQIA+ people
- Aboriginal people
- CALD people
- people with disability
- older people.

South Australia's RAMF must also include risk factors that will suitably identify coercive and controlling behaviours, technology-facilitated abuse, strangulation and animal abuse. Overall risk scores should be determined by a structured professional judgement process, giving due regard to the victim-survivor's own assessment of the severity and imminency of risk. Consideration should be given to including the following overall risk categories:

- **no/low risk**
- **at risk** of harm
- **high risk** of serious harm or death
- **imminent risk** of serious harm or death.

Graduated risk screening and risk assessment tools

RAMFs provide a range of graduated risk screening and assessment tools, with different workforce tiers using different tools depending on their role and expertise. Risk screening by universal services is a key component of RAMFs and will likely represent the most significant change to practice in the South Australian context. Risk screening must be a safe, uncomplicated and brief process, and must be supported by sufficient training, practice guidance and workplace support. Consideration should also be given to development of a rapid or intermediate risk assessment tool for first responders and crisis response.

The South Australian RAMF must, at a minimum, include the following tools:

- a risk screening tool for adults
- a risk screening tool for children and young people
- a comprehensive risk assessment tool for adults
- an intermediate or comprehensive risk assessment tool for children and young people
- a risk screening tool for adults at risk of using violence.

Consideration should also be given to the development of the following, based on sector consultation:

- intermediate and/or rapid risk assessment tools for first responders
- an intermediate and/or comprehensive risk assessment tool for adults using violence.

The Commission acknowledges that risk screening and assessment tools for children and young people may overlap with existing child protection mandatory notification requirements. Risk screening and assessment tools for children and young people should be developed with this in mind, providing guidance around when a notification is and is not required and supporting the consistency of information provided in notifications.

Graduated risk management tools

Along with risk screening and assessment tools, the RAMF must also include risk management tools which, again, must be safe, uncomplicated and brief. There can be tension between respecting the agency of a person disclosing risk and the need to safeguard them, and potentially others, from that risk. Not everyone making a disclosure will be ready to be referred to police or a specialist service. Additionally, not everyone will need specialist or police support. Risk management tools overcome this tension by providing clear guidance as to what to do in each circumstance.

The South Australian RAMF must provide an action or safety plan to correspond with each risk screening and assessment tool and adapted for the needs and expertise of the workforce tier that will be using it. Thresholds for referral and information sharing must be clearly articulated. Guidance around referral processes should include a mechanism for feedback to be provided between agencies and organisations to ensure there is transparency about whether risk is being sufficiently managed. Risk management tools should also serve to identify and leverage protective and mitigating factors where possible, noting safety must always be the paramount objective.

Practice guidance

The development of a RAMF must also include development of practice guidance on how to use the different screening, assessment and management tools in a safe, trauma-informed and, where appropriate, strengths-based way. Practice guidance must be fit for purpose for a busy and time-poor workforce; it must be practical, accessible and straightforward.

Practice guidance must be underpinned with a clearly articulated and evidence-based explanation of domestic, family and sexual violence in all of its forms. This explanation must include information about the unique and specific forms of domestic, family and sexual violence that can be experienced by different population groups.

The DVRA is not intended to be conducted as a checklist, but rather as a guide for the types of information the user may want to ask about during a discussion with the person at risk. This narrative style of information gathering is also a necessary process for the use of a RAMF, although the overriding need is to ensure that the person undertaking the screen or assessment does address each of the risk factors included in the relevant RAMF tool.

Obtaining information through conversation and narratives is a skill that needs to be deliberately taught and developed through RAMF-associated training. A further skill, which the Commission has heard is entirely possible when conducting risk assessment and management processes, is the ability to include in the conversation a process to identify the types of things the person at risk has done to create safety for themselves or others. This is not to detract from the overriding need to identify and manage risk, but rather to use the opportunity, where appropriate, to identify the ways the person has worked to achieve safety, such as contacting the service that is conducting the assessment, disclosing the violence to someone else, engaging in behaviours to avoid further control or violence (e.g., compliance with particular 'rules' set by a perpetrator) or taking protective measures in relation to children or young people.

While these types of acts and behaviours will likely be an indicator of the risks that are present, a discussion that empowers a victim-survivor to recognise that they have in fact worked to keep themselves safe, and will now receive support to strengthen that safety, could amount to an empowering moment of agency for that victim-survivor.

Agency for victim-survivors is lacking across the entire domestic, family and sexual violence system – this could be an opportunity to give some agency and empowerment back.

> **"Services should adopt a more compassionate, respectful approach, recognizing the emotional toll of leaving an abusive relationship. A survivor's journey is deeply personal, and the system should be designed to empower them with dignity and autonomy.**[153]

An example of an approach which identified the ways women sought safety is set out in a recent policy brief prepared in relation to the Aboriginal Families Study, a longitudinal mother and child cohort study conducted in partnership with the Aboriginal Health Council of South Australia. A major objective of the study, guided by an Aboriginal Governance Group, was 'to build a stronger understanding of the ways in which connections to family, kinship, community and culture support Aboriginal women and children to stay strong'.[154] The policy brief lists actions the women involved in the study had identified they took to 'protect themselves and stay strong', such as talking to family, taking kids to stay with family or friends, phoning police or talking to an Aboriginal Health worker. The development of practice guidance for a South Australian RAMF should take into account the highly relevant research undertaken by the Aboriginal Families Study team.

Needs assessment

Another opportunity presented by developing a South Australian RAMF is the development of a nation-leading needs assessment tool, which could form part of the comprehensive risk assessment and management process.

The Commission has heard of the need to introduce a process that can work with a victim-survivor to identify both their short-term needs (generally conducted through a risk assessment and management process) and longer-term recovery and healing needs. The development of a needs assessment tool, to be incorporated into the RAMF together with corresponding practice guidance and training on use, is an opportunity to undertake this work with victim-survivors over the course of their interaction with the domestic, family and sexual violence system. This can also have application to victim-survivors of sexual violence occurring outside of a domestic and family relationship.

The concept of a needs assessment tool came about through the Commission's discussions with Djirra,[155] an Aboriginal Family Violence Prevention and Legal Service delivering holistic, culturally safe, specialist family violence support, legal services and case management, alongside cultural and wellbeing workshops and programs in Victoria. Djirra explained that its service model included both risk assessment and management and needs assessment and management. The needs assessment process included a 'legal health check' for all victim-survivors accessing their services – an obvious and sensible approach to be taken by a service that provides legal advice and support as well as crisis support and case management. There is no reason why such an approach could not be embedded throughout a broader range of services that are actively working with a victim-survivor through crisis and into safety.

The development of a needs assessment tool, including a legal health check, should form a critical part of the development of the RAMF. Separate tools should be developed for adult victim-survivors and for children and young people who have experienced domestic, family and sexual violence and are victim-survivors in their own right. The development of both needs assessment tools must be conducted through co-design with people with lived experience, with a specific and separate process to co-design a tool with children and young people. This process must necessarily take into account the very different needs of children and young people across different ages.

Development and implementation of a needs assessment tool must be accompanied by funding and services to meet the needs identified during the needs assessment. The development of a funding model and service referral framework will be further discussed in Chapter 6.



Training

Introducing a RAMF to South Australia is a fundamental step towards collective responsibility and a whole-of-government approach to domestic, family and sexual violence. This will necessitate a change in how some agencies, organisations and services operate. For this reason, introduction of the RAMF must coincide with a rollout of mandatory training for all professionals in each workforce tier. Mandatory training should be tailored to each workforce tier's responsibilities and expertise, and be underpinned with an evidence-based explanation of the dynamics of domestic, family and sexual violence, trauma-informed and strengths-based practices and risk management practices. The mandatory training supporting the RAMF must be at a sufficient dosage to have long-term effect.

The Commission notes that RAMF training must continue to be available on an ongoing basis. Safe and Equal, reflecting on the rollout of MARAM in Victoria, wrote:

> **"The dynamic nature of community services workforces, including new staff entering the workforce, means that it has proven essential to support the MARAM framework with ongoing education and training.**[156]

To that end, each agency, organisation or service responsible for using the RAMF must be supported to embed consistent and quality RAMF training into their workforce's entry and ongoing training requirements. Quality RAMF training materials must also be made available online to support the associated practice guidance and to enable the workforce to carry out self-directed refresher training as needed.

Monitoring, evaluation and accountability

The South Australian RAMF must be supported with a clear process to monitor and evaluate its effectiveness and its impact on users and services, and to make adjustments as required to ensure it operates effectively. Funding for the RAMF must incorporate this need to ensure the framework is operating successfully and to make any reasonable adjustments.

The Government Steward must be the lead agency with oversight of the RAMF, and of the integrated response model (Recommendation 18), once both are in place. The Government Steward must be empowered to monitor the RAMF's effectiveness and impacts, as well as the alignment of each prescribed agency and organisation to its corresponding minimum standards and responsibilities. The Government Steward must be in a position to identify and resolve issues and disputes regarding the operation of the RAMF and the integrated response model as they arise.

Recommendation 14

The South Australian government engage Australia's National Research Organisation for Women's Safety to develop a South Australian Risk Assessment and Management Framework, including each of the elements set out in Figure 2.2, in consultation with relevant government and non-government stakeholders.

Recommendation 15

The South Australian government develop and provide ongoing mandatory training to support the implementation and operation of the South Australian Risk Assessment and Management Framework.

Recommendation 16

The South Australian government resource an evaluation of the South Australian Risk Assessment and Management Framework to inform the development of legislation to support the ongoing operation of the South Australian Risk Assessment and Management Framework.

Figure 2.2: South Australian Risk Assessment and Management Framework

A South Australian Risk Assessment and Management Framework will include:

1. **Creation of at least 3 tiers of responsibility, which set out:**
   a. minimum training standards
   b. minimum practice standards
   c. minimum information sharing standards
   d. responsibility for one or more practices of risk screening, risk assessment and risk management.

2. **Identification of relevant agencies and organisations that must align to a tier of responsibility, along with provision of supporting material for voluntary alignment for non-prescribed organisations.**

3. **Risk factors, risk management tools and practice guidance specifically developed to support particular groups including:**
   a. children and young people
   b. LGBTQIA+ people
   c. Aboriginal people
   d. CALD people
   e. people with disability
   f. older people.

4. **Graduated risk screening and risk assessment tools, along with corresponding safety plans, practice guidance and supporting material, including at a minimum:**
   a. a risk screening tool for adults
   b. a risk screening tool for children and young people
   c. a comprehensive risk assessment tool for adults
   d. an intermediate or comprehensive risk assessment tool for children and young people
   e. a risk screening tool for adults at risk of using violence.

   Consideration should also be given to developing:

   f. an intermediate and/or rapid risk assessment tool for first responders
   g. an intermediate and/or comprehensive risk assessment tool for adults using violence.

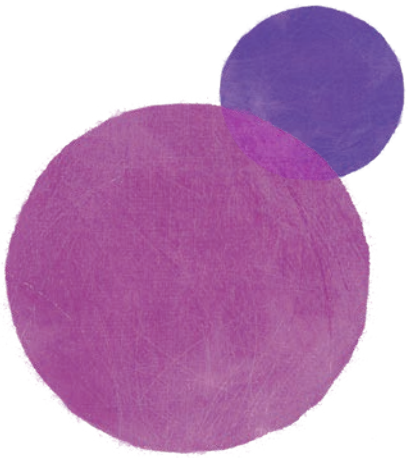
5. **The South Australian Risk Assessment and Management Framework:**
   a. must identify and respond to coercive controlling behaviours, technology-facilitated abuse, strangulation and animal abuse
   b. should facilitate a clear and consistent structured professional judgement model for determining overall risk, giving due regard to the victim-survivor's own assessment of the severity and imminency of risk
   c. must allow for overall risk scores to include an assessment of imminency
   d. must include development and implementation of a needs assessment tool or tools, to provide clarity around specific safety and recovery needs
   e. must be supported by shared practice guidance that:
      i. corresponds with responsibility tiers
      ii. provides a shared definition and understanding of domestic, family and sexual violence in all of its forms
      iii. enables trauma-informed and strength-based approaches to risk screening, assessment and management.

6. **Development of the South Australian Risk Assessment and Management Framework should draw from lessons learned in other jurisdictions, and look for opportunities to align with the tools being developed in Western Australia and the Northern Territory, without impacting negatively on the elements above.**

A statewide framework for responding to harmful sexual behaviours in children and young people

The Commission has heard that South Australia does not have any common definition or assessment tool to identify and assess harmful sexual behaviours being used by children and young people. This is a critical gap and the subject of strong and repeated advocacy from the former Commissioner for Children and Young People.

The Commission was invited to observe a 2-day workshop, convened by the former Commissioner for Children and Young People, involving South Australian government agencies and non-government services on this topic. The Commission heard that across South Australia different agencies use different definitions and assessment processes, and that the options for intervention with a child or young person who is engaging in harmful sexual behaviours are extremely limited. These limited options are further discussed in Chapter 5.



The Royal Commission into Institutional Responses to Child Sexual Abuse (RCIRCSA) identified harmful sexual behaviours as a significant issue. The RCIRCSA devoted an entire volume of its report to this issue, stating that:

> **Contemporary data from the criminal justice system points to an ongoing problem of child sexual abuse by children with harmful sexual behaviours within institutions and in the wider community. We believe that there may be thousands of children harmed by other children's sexual behaviours in Australia each year.**[157]

The RCIRCSA noted that of the survivors who had disclosed sexual abuse by another child or children during the course of the inquiry, 62% were male and 38% were female. Of this group, 86.3% said they were abused by a boy. The RCIRCSA reported that this 'is consistent with research that shows that children with harmful sexual behaviours are overwhelmingly male'.[158]

The lack of a statewide framework for identifying, assessing and responding to harmful sexual behaviours in children and young people is a significant gap.

The Commission heard from Associate Professor Leah Bromfield on Day 9 of public hearings:

> **[harmful sexual behaviours are] a national priority in the National Strategy for Preventing and Responding to Child Sexual Abuse. And so we've seen some responses in some agencies. So, for example, our education system has implemented quite a systemic response to harmful sex, equipping teachers to recognise and respond to harmful sexual behaviours. But all of our departments have acted as islands in relation to responding to harmful sexual behaviours. They're also using a whole lot of different definitions. That might seem like it's not important, but it actually is, because they have different thresholds for when they should report to the police, when they should report to Child Protection. They can't agree on that when you don't have one common definition and one continuum with agreed thresholds and roles and responsibilities for who does what. And we know that when there's confusion it's kids and families that fall through the gaps. We also in South Australia have a very limited treatment response ....That's the really important thing to know about harmful sexual behaviours: treatment is super effective. So if we provide appropriate treatment, for most children those behaviours will entirely extinguish, and they should never be tarnished with a label that they carry into adulthood of a sex offender if they've experience that effective treatment.**[159]

The Western Australian government has developed a statewide framework for understanding and guiding responses to harmful sexual behaviours in children and young people. The framework was developed in partnership with the Australian Centre for Child Protection, Western Australia. The aim of the framework is to:

> **build a better and more cohesive understanding of harmful sexual behaviours (HSB) in children and young people across WA to support practitioners, policy makers and carers to provide responses that are safe, effective and trauma informed.**[160]

South Australia should follow the Western Australian government's lead and develop its own framework in partnership with experts.

The South Australian government advised the Commission that the Department for Child Protection has self-nominated to lead future inter-agency work across government to develop and implement a harmful sexual behaviours framework, and that there are no additional resources allocated to the Department for Child Protection for this work. Given the apparent absence of dedicated resources, and the very recent self-nomination by the Department for Child Protection to lead this work, the Commission invites a renewed consideration of this issue, and the need for funding, as part of the government's response to this report.



Recommendation 17

The South Australian government engage with experts and appropriate sector representatives to develop a South Australian framework for recognising and responding to harmful sexual behaviours in children and young people.

From multi-agency programs to collective responsibility: building an integrated response model

Existing initiatives in South Australia

South Australia has almost 2 decades of experience with multi-agency coordination for the purpose of responding to domestic, family and sexual violence. Generally speaking, the primary goal of multi-agency coordination is to improve information sharing between different government agencies (and sometimes non-government organisations), in order to break down 'silos' of work and record keeping. Multi-agency cooperation is also understood to provide an opportunity to better coordinate responses and service delivery, to develop shared understandings of risk, and to share multidisciplinary skills and expertise.[161]

In many ways, South Australia has been an early adopter when it comes to multi-agency initiatives for domestic, family and sexual violence. South Australia has gained invaluable experience through the work of the FSF, MAPS, the Interagency Code of Practice, the DVDS, the Family Law Information Sharing Program and Multi-Agency Hubs, as well as multi-agency child welfare responses. These programs have led to better outcomes for people experiencing violence and have served to advance the government's knowledge and visibility of domestic, family and sexual violence in South Australia.

Current state

The Family Safety Framework

The FSF is South Australia's primary statewide and multi-agency response to high-risk domestic and family violence, as well as sexual violence in domestic and family settings. The FSF was first introduced in 2007 as a pilot in Holden Hill, the South Coast (Noarlunga) and the Far North (Port Augusta).[162] Following an evaluation in 2008, the FSF was rolled out statewide by late 2013.[163] The 2008 evaluation provides some helpful insight into why the FSF was first introduced.

> **Violence against women and children is a long-standing and complex social problem that had only begun to be addressed in the later decades of the last century. Until the early 1990's, the focus of services engaged to respond to incidents of domestic violence was on accessing safe accommodation. From the 1990's onwards, there has been an increasing focus on the need for agencies to collaborate and coordinate their service responses to domestic violence.**
>
> **A recognition of the importance of working with perpetrators of domestic violence further emphasised the need for collaboration of services and coordination of responses.**[164]

The purpose of the FSF is to ensure that people and families experiencing high-risk domestic and family violence are responded to in a 'more structured and systematic way, through agencies sharing information and taking responsibility for supporting these families to navigate the system of services to help them'.[165] The FSF is underpinned by 2 core components: use of the DVRA and regular Family Safety Meetings (FSMs). FSMs are held fortnightly in 17 different regions across South Australia.

South Australia's Office for Women is responsible for the FSF and provides limited administrative support through the online FSF portal, which was introduced in 2021 to replace paper referrals.[166] SAPOL's family violence investigators are responsible for individual FSMs, for which they receive, assess and triage all referrals, coordinate and chair the meetings and carry out most of the administrative work.[167] Membership of FSMs varies region to region; however, they are typically attended by government representatives responsible for child welfare, housing, health, education and correctional services, as well as by non-government specialist service providers and health services. The localised nature of the FSMs makes the FSF a decentralised rather than centralised service model.

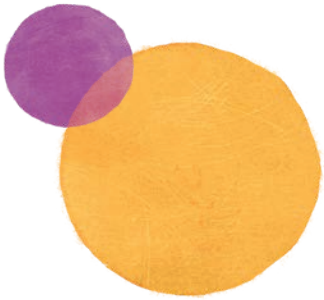
Practitioners working with people experiencing or using violence are able to make referrals to FSMs using the DVRA and the FSF online portal. Eligibility for FSMs is limited to people in South Australia who are over 18 and who are experiencing high-risk domestic violence or family violence. Other considerations are that the risk of serious harm is ongoing and/or escalating, judged as likely to occur soon, and where additional collaborative and informed responses through the FSM are required to mitigate and reduce risk of harm.[168] Given that the FSM sits fortnightly, it is not suitable for crisis responses to domestic, family or sexual violence.

The overall aims of the FSM are set out in the Practice Manual:

- Determine whether the perpetrator poses a significant risk to the person.
- Jointly construct and implement a multi-agency Positive Action Plan that includes risk management, provides professional support and reduces the risk of further harm to the person.
- Support a criminal justice system response to perpetrators.
- Reduce repeat victimisation.
- Reduce re-offending by the perpetrator.
- Improve agency accountability.
- Improve support for agency staff involved in high-risk domestic violence cases.[169]

Members of the FSM set out to achieve these aims by gathering and sharing information in order to gain a more fulsome understanding of risk and safety needs, and then agreeing on a Positive Action Plan – being actions taken by member agencies and organisations to manage risk.

The Commission has received a substantial amount of input about the FSF, largely from its member agencies, organisations and workers. The Commission has observed an FSM and has heard directly from different FSM groups during listening sessions in metropolitan and regional South Australia. The Commission has heard that, for the most part, FSMs are valued by workers, and that well-functioning FSMs are able to achieve improved safety outcomes through local information sharing and coordinated responses.[170] The FSMs are important to building local connections and relationships between different workers, agencies and organisations, even outside of the fortnightly FSM.[171]



Embolden also heard positive feedback about the FSF in responses to its frontline workers survey:

> **Frontline services surveyed generally agreed that information sharing assists with safety and case management. When the Family Safety Framework works well, collaboration between agencies and services provides a wrap-around support network. SAPOL is seen as responsive and supportive and there are localised examples of good relationships between agencies and services that support family safety, particularly in regional areas and metropolitan hubs.**[172]

However, the Commission has heard that the decentralised nature of the FSF means that some FSMs are not operating anywhere near as well as others. Some FSMs do not run regularly, and some have issues with member agencies, not sending representatives.[173] Additionally, the Commission regularly heard that SAPOL's role of receiving, assessing and triaging referrals to the FSF has made police the 'gatekeeper' of what is accepted on the FSM and what is not. The Commission has heard considerable input from specialist services and other practitioners that it can be very difficult, and can require a great deal of ongoing advocacy, to get SAPOL to accept a referral, especially when police have limited information available in their own records about the subjects.[174]

The Commission has heard that the government previously funded Victim Support Services to provide administrative support to the FSF; however, this funding concluded and has not been replaced. As noted previously, the Office for Women is now nominally responsible for the administration of the FSF but has not been resourced to perform this function. The administrative load of the FSF now falls to member agencies and organisations, who are also not funded for FSF participation, with the majority of work carried out by SAPOL's family violence investigators.[175] One worker described SAPOL's family violence investigators as 'under siege' due to unfunded workload such as the FSF competing with their regular duties.[176] The DFVSA spoke to the impacts of the FSF being defunded in their submission:

> **While originally funded with administrative backbone support from Victim Support Services, and with a mandate and expectation for decision-makers to make swift, immediate decisions at meetings, we are concerned that the current FSF process has been diluted, and does not have the impact that was previously felt. This is due to a range of factors which, if addressed, could support FSF to redevelop and renew it's vital role within the system.**[177]

Embolden mentioned issues raised by some frontline workers, who spoke about infrequent and inconsistent attendance by some government agencies, lack of collaboration with non-government organisations, delays between meetings compromising safety, and concerns about referrals and eligibility, with no feedback being provided about rejected referrals, and inconsistency between different FSM sites.[178]

By all appearances, through relying on a decentralised model without strong governance, and by removing funding and administrative capacity from the system, the FSF has become almost entirely reliant on the capacity and goodwill of time-poor workers.



The Multi-Agency Protection Service

MAPS was introduced in South Australia in 2014 following the Coronial Inquest into the murder of Zahra Abrahimzadeh in 2010, and was the first of its kind in Australia. MAPS co-locates representatives from relevant government and non-government organisations in a central location and aims to improve information sharing and coordination for domestic, family and sexual violence responses.

Similar to the FSF, MAPS relies on SAPOL as the lead agency, which is co-located with partner agencies made up of child welfare agencies, the Department for Education, SA Health, the Department for Correctional Services and the SA Housing Authority. WSSSA is the only non-government partner at MAPS and is funded to provide information about specialist service responses.

The aim and purpose of MAPS has drifted over time. When MAPS was introduced in 2014, the government of the day announced that:

> **"MAPS brings together staff from police, corrections, education, health, Housing SA and Families SA in one location to share information and intervene early in domestic violence and child protection matters. The first stage of this service – dealing with domestic violence is now in operation. By co-locating these staff, agencies will be able to share information faster and identify emerging patterns of harm before they escalate so that at-risk families do not slip through the net.**[179]

While the original focus was on early intervention, MAPS has become primarily focused on information sharing for high-risk domestic and family violence, as well as sexual violence in domestic settings. Although the original vision for MAPS may have included an intent for MAPS to intervene directly in domestic and family violence matters, in practice MAPS is only able to make suggestions to practitioners in the field. An expansion of MAPS to also focus on child welfare has not been realised.[180]

Much like the FSF, SAPOL determines which domestic and family violence incidents are reviewed by MAPS, and which are not. MAPS receives the bulk of its referrals directly through police domestic abuse occurrences. While the focus of MAPS is largely on high-risk domestic and family violence, the police triage and review team, which is responsible for selecting the reports to review, can include standard and medium risk police reports at its discretion.[181] MAPS is also nominally able to review domestic and family violence referred by other partner agencies, but it does not have access to the FSF portal. Instead, MAPS relies on the internal processes of each partner agency to flag matters of concern with its MAPS representatives, who then may provide that information to SAPOL's triage team for consideration.[182]

While there have been changes to how MAPS is envisioned and talked about, the core business of MAPS has always been information sharing. Once a domestic, family or sexual violence incident has been selected for 'Mapping', partner agencies are responsible for interrogating their respective information systems and providing relevant information about the people experiencing violence, people using violence, and any involved children. The relevant information from each partner agency is then aggregated into an Information Summary Document, which is the core output at MAPS.

Once the Information Summary Document has been produced, the senior representatives of each partner agency review the information in a Mapping meeting, where they will approve the document for publication and agree on actions for each relevant agency. These actions most commonly involve sharing the Information Summary Document with various workers in the field, and adding alerts and flags to respective government information systems. Actions may also include intervention actions, which tend to involve requesting a worker in the field to consider taking a certain action.[183]

MAPS was formally evaluated in 2023 by the Social Work Innovation Research Living Space of Flinders University (SWIRLS). The evaluation found that 'MAPS is currently productive, has high outputs, and is generally perceived to be fulfilling its purpose'.[184] However, it also identified a number of tensions and challenges as raised by workers from different partner agencies. The evaluation found that:

- the role and purpose of MAPS is not articulated clearly or consistently[185]
- different partner agencies have different views and understandings of risk, due to different training, qualifications and expertise[186]
- MAPS lacks a child welfare focus[187]
- there were divergent views on whether MAPS should have a greater focus on people using violence[188]
- there are tensions with SAPOL acting as the 'gatekeeper' in determining what matters are selected for Mapping, rather than taking a more collaborative approach.[189]

The evaluation found that while MAPS and the FSF share a very similar focus; they ultimately work in parallel rather than in unison. Some workers at MAPS were clear that 'MAPS and FSF don't work well together or, at least, that each works quite separately to the other', and that 'MAPS do not currently (and should) have access to the electronic FSF portal, and secondly, that Family Safety Meetings (FSM) do not make adequate use of the MAPS summary document.'[190]

The evaluation found that there was little to indicate that MAPS was having impact on risk and safety outcomes. The evaluation noted that 'there is little evidence to support the perceived link between MAPS outputs and outcomes (such as concrete improvements to women and children's safety)'.[191] The evaluation concluded that 'envisaging the future of MAPS rests on a revisiting of its fundamental purpose' and, that 'how MAPS should operate in the future is a question that is far from straightforward.'[192]

The Commission learned more about MAPS through a site visit, listening session and observation of a Mapping session; a review of de-identified MAPS Information Summary Reports; and input in submissions. Perhaps most importantly, the Commission has heard from frontline workers about if and how MAPS impacts their work with people experiencing and using violence.

Much like the FSF, MAPS is largely unfunded by the government, with partner agencies each contributing towards staffing and operating costs. Due to resourcing constraints, MAPS has become unable to provide a response to every high-risk incident in South Australia as once envisioned, instead relying on an internally developed triage and prioritisation process to focus on select incidents.[193] The Commission also noted that there is no Aboriginal Community Controlled Organisation or specialist Aboriginal worker at MAPS, despite Aboriginal people being represented in around 40% of Mapped incidents.

The Commission has heard that Information Summary Documents can take weeks or even months to produce. This means that the core product of MAPS is often not produced until weeks after the crisis response from frontline workers has already concluded.[194] The Commission also heard that some partner agencies do not contribute to all Information Summary Documents, due to workload, staffing constraints and, in some instances, not having agency representatives available.[195] The Commission has heard from frontline workers that the significant delay in information sharing often makes the response from MAPS pointless, as they have already shared information and managed risk through local responses and the FSM.[196]

Multi-Agency Hubs

Another example of multi-agency coordination already taking place in South Australia is multi-agency hubs. South Australia currently has 4 multi-agency hubs in operation; the original metropolitan Multi-Agency Hub, the Northern Hub, the Southern Hub and the Umuwa Multi-Agency Facility. These hubs all represent different models which serve different purposes.

The original Multi-Agency Hub co-locates workers from WSSSA and SAPOL, with the aim to improve information sharing and better support women experiencing domestic, family or sexual violence. The Multi-Agency Hub operates using a 'closed-door model', meaning that it supports people through referrals, appointments and outreach rather than accepting walk-in clients. The Multi-Agency Hub supports the delivery of South Australia's Domestic Violence Disclosure Scheme.

The Northern Hub represents an evolution of the original Multi-Agency Hub model. It co-locates workers from WSSSA, SAPOL, the Legal Services Commission and other services, and it can facilitate outreach and visits from relevant services that are not physically co-located.[197] Similar to the Multi-Agency Hub, the Northern Hub operates using a closed-door model, and supports people through referrals, appointments and outreach rather than accepting walk-in clients. During a site visit, the Commission heard several examples of good practice occurring at the Northern Hub.



Workers agreed that the physical co-location of different agencies and organisations was a key element for providing coordinated responses to people experiencing violence, and that better coordinated responses were leading to better safety outcomes. The Commission noted that, much like the FSF, good outcomes were being achieved by first sharing information, and then taking coordinated action based on a shared understanding of risk and safety needs.[198]

The Southern Hub, otherwise known as the Domestic Violence Prevention and Recovery Hub, and The Yellow Gate, is significantly different from South Australia's other multi-agency hubs. The Southern Hub is run by Southern Community Justice Services SA and is co-located with domestic, family and sexual violence services provided by SA Health. The Southern Hub provides health services, legal services, counselling services and group therapeutic programs for women who have experienced domestic, family or sexual violence.[199] While the Southern Hub ostensibly operates as an 'open-door' model, the Commission heard during a site visit that in reality most contact was by referral and appointment.[200] Although the Southern Hub does provide valuable support to women who have experienced violence, the Commission notes that there appears to be some uncertainty about the hub's role and purpose.

Like the Northern Hub, the Southern Hub was implemented as an election commitment by the current state government.[201] Nonetheless, the Commission understands that at least a proportion of the funding for the staffing of both hubs has been drawn from the Australian Government's 500 Workers funding commitment.

The Commission also visited the Multi-Agency Facility, recently built in Umuwa by the South Australian government, in partnership with the Australian government.[202] The Multi-Agency Facility is intended for use as the domestic and family violence and child welfare service hub for the APY Lands. During its site visit, the Commission noted that 'Multi-agency' was a misnomer, given that only SAPOL and the DCP are currently based in the facility.

Office space, facilities and a vulnerable witness interviewing suite have been built at the facility, specifically to accommodate co-location by SA Health's Child Protection Services, but are not being used. The role and service delivery model of Child Protection Services is further discussed in Chapter 4 of this report. Despite this obvious shortcoming, both SAPOL and DCP practitioners told the Commission that they valued their co-location and that they believed the improved information sharing and coordination was leading to better practice and safety outcomes.[203]

The Office for Women oversees 10 'hubs' and 'havens' as part of the Women's Information Service.[204] The Women's Information Service provides general information and support to women for a range of topics, including health and wellbeing, housing and homelessness, money and independence, families and relationships, and domestic, family and sexual violence.[205]

A haven is described as a 'safe local place where women and people of marginalised genders can speak privately to trained volunteers'.[206] Havens appear to be positioned as general information services, similar to the service provided by the Women's Information Service, but also as places to receive information specifically about domestic, family and sexual violence.

This latter positioning presumably justifies the utilisation of the Australian Government's 500 Workers initiative to fund the one staff member available at each haven. Aside from this one staff member, the hubs and havens are reliant on volunteers. The South Australian government submission accurately opines that 'it is not optimal that the existence of the hubs relies on unpaid volunteer labour'.[207] The Commission further queries whether it is optimal for specialist domestic, family and sexual violence frontline workers funded under the 500 Workers initiative to be coordinating volunteers and providing generalist information services rather than being focused on domestic, family and sexual violence service delivery. The Commission acknowledges the critical need for safe physical spaces throughout the state but does query whether the current model, which is reliant on Australian government funding and volunteers, is the most effective one.

Other multi-agency programs in South Australia

South Australia has experience operating successful, smaller-scale multi-agency programs for domestic, family and sexual violence. These include the Domestic Violence Disclosure Scheme and the Family Law Information Sharing Program. The DVDS is discussed in detail in Chapter 4.

The Family Law Information Sharing Program (the Program) is a national initiative aimed at improving coordination and collaboration between the family law, child protection and policing systems to achieve better outcomes for families and children. The Program co-locates officials from policing and child protection agencies at Federal Court registries to enable early information sharing and coordinated risk management for child-related family law proceedings. The Program is funded and overseen by the Australian government Attorney-General's Department, and it makes up part of the National Strategic Framework for Information Sharing between the Family Law and Family Violence and Child Protection Systems.

The Program was introduced as a national pilot in late 2019. Due to the pilot's early success in achieving better safety outcomes for children and families, the Australian government has extended its funding. SAPOL and DCP were early adopters of the Program and have received national recognition for their collaborative approach to information sharing and risk management. A 2022 independent evaluation of the Program found that the South Australian model was robust, highly collaborative and successful.[208] The evaluation concluded that the Program was achieving better safety outcomes for families and children engaged in the family law system.[209]

Multi-agency responses to children and young people

South Australia also uses multi-agency approaches when responding to child welfare concerns. While these practices are not specifically for domestic, family and sexual violence, there is considerable overlap. In 2017, South Australia introduced the Multi-Agency Assessment Unit (MAAU), in response to the Child Protection Systems Royal Commission. The MAAU, modelled on MAPS, was a DCP-led, co-located, multi-agency information sharing program, focusing on children from pre-birth to 2 years of age.[210] There is very little publicly available information regarding the MAAU. In response to the Commission's enquiry, the South Australian government advised that 'the MAAU was a 2 year pilot funded through the then governments response to the Nyland recommendations' and that 'it ceased operation in 2019'.

The Interagency Code of Practice (Interagency Code) provides a framework that applies to all South Australian agencies and organisations involved in investigating and responding to suspected harm to children and young people.[211] The Interagency Code is primarily used by SAPOL, DCP and SA Health, who are responsible for conducting or contributing to investigations of suspected harm or risk of harm to children and young people, both intra-familial and extra-familial. The Interagency Code sets out the different roles and responsibilities of these organisations in making notifications and referrals, gathering evidence and investigating, and conducting different forensic responses.[212]

A key element of the Interagency Code is the 'strategy discussion', which is described as a collaborative discussion about the report or notification. It is 'the platform for each agency to share and discuss all relevant information and coordinate agency response, including what role and actions each agency will take, and in what order'.[213] Much like the FSM, strategy discussions involve each agency sharing information to build a more complete picture of risk, and then agreeing on an action plan to manage risk and safety.

Unlike the FSM, strategy discussions are not held on a regular fortnightly basis; rather they are convened by partner agencies on a needs basis.

Strategy discussions can be convened urgently when there are imminent risks to a child or young person's safety, and/or evidence must be preserved.[214] While DCP, SAPOL and SA Health usually attend strategy discussions, other agencies and organisations can be invited as needed to provide additional information, insight and support.[215]

The Department of Human Services also uses multi-agency meetings to share information and coordinate support for children and young people. In 2019, in response to the South Australian Child Protection Systems Royal Commission, DHS created the Child and Family Support System, aiming to provide earlier intervention and support to children, young people and families in need.[216]

A core component of the Child and Family Support System is the Child and Family Safety Network (CFSN), which is made up of partners from government agencies, non-government organisations and Aboriginal Community Controlled Organisations. The CFSN works collaboratively 'to support partnership and multi-agency responses for the most at-risk children and families within South Australia.'[217]

Like the FSF, the CFSN uses multi-agency meetings for information sharing and developing coordinated support for at-risk children and young people.[218]

The Commission has heard divergent views about CFSN meetings, with some practitioners advocating that they should be merged with FSMs, and others arguing that they are different and should remain separate.

Inputs about multi-agency approaches

The Commission has heard broad support for South Australia to develop a more deliberate, coordinated and capable system for preventing and responding to domestic, family and sexual violence.

People have highlighted that to keep women and children safe requires prosecutor collaboration to be effective:

> **To address the needs of victim-survivors and their children effectively, it is crucial to foster collaborations between government agencies, community service organizations and support networks. Through joint efforts, comprehensive and integrated approaches can be developed, providing holistic and coordinated support that promotes the safety, empowerment and long-term recovery of victim-survivors.**[219]

> **We need a whole-of-government strategic and integrated approach to preventing and responding to DFV, and that means from the top down … The Premier, relevant ministers, government departments and associated agencies, specialist women's services, health, mental health, child protection, the justice system (SAPOL and the Courts Administration Authority) – we all have a responsibility to ensure women and their children are safe from violence, and how we work together to create meaningful and lasting change is crucial to this success. Cross-sector collaboration which supports integration and increasing the capacity of services to coordinate responses across sectors and between services is crucial.**[220]

The importance of ensuring culturally safe approaches to this collaboration was also mentioned:

> **effective collaborative across-agency practice should include assigning a lead agency to discuss concerns with all members of the services involved, undertaking an assessment of the child's immediate risk, compiling an accurate history, involving a social worker and/or Aboriginal cultural adviser, identifying barriers to accessing services, developing a Case Plan, managing interagency relationships, remaining engaged with the family and enacting escalation pathways when needed.**[221]

The Commission has heard from agencies, organisations and workers involved in multi-agency practice and programs that information sharing and coordination are key enablers of better risk management and safety outcomes:

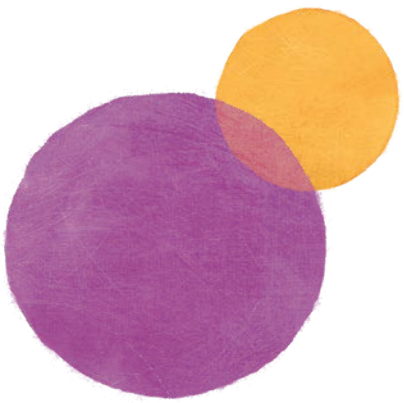
> **The Multi Agency Protection Service (MAPS), Umuwa Multi-Agency Facility (APY Lands), Multi-Agency Hubs, Family Safety Framework, Domestic Violence Disclosure Scheme and the Family Law Information Sharing project together demonstrate the value of collaborative initiatives that encourage information exchange, deliver better assessment of risks, reduce fragmentation and duplication of services and achieve better outcomes for victim-survivors and children in relation to safety, support and legal remedies.**[222]

> **NPYWC sees improved outcomes when there is a strong relationship with the community and working relationships with police, clinics, and other services in community… Collaboration between various agencies, including police, legal services, social services, and health providers, is essential for best practice.**[223]

> **Developing and increasing opportunities for co-location, co-case management and multi-sector response. This includes building on evidence-based models of co-location in South Australia and across other jurisdictions, including between statutory and non-government services (e.g. Women's Safety Services SA (WSSSA) and SAPOL Northern Hub) and across social and community services (e.g. in Havens or regional areas). This includes the capacity to work across sectors and silos, to develop robust ways of co-case managing effectively and with the best outcomes for clients at the heart of the work – ensuring that South Australia maximises the opportunity of the AOD, homelessness, mental health, primary health, DFV and other sectors to work collaboratively at an individual, local, regional and state level.**[224]

The Commission has heard that technology should be leveraged to improve information sharing between agencies, organisations and workers:

> **Embed technologies to support the person/family- centred approach, including data collection, data-sharing in partnership with stakeholders to improve the quality and accuracy of the data and evidence so Victim-survivors do not need to repeat themselves. Other advantages may include offering anonymity and confidentiality.**[225]



The Commission has also heard advocacy to reinvigorate the FSF, by improving its capacity and consistency, and by ensuring active participation by partner agencies:

> **Maximising the use of existing options for response and accountability, including, for example: Reinvigorating Family Safety Framework, to support swift, trauma-informed, multi-sectoral responses for victim-survivors at high risk. This includes ensuring that the intent and opportunity provided by FSF is maintained, including managing administrative and backbone responsibility, accountability and prioritisation for all partners and ensuring decision-makers are active participants.**[226]

> **In Embolden's view, it is timely that the South Australian Government review the Family Safety Framework, in partnership with participating services/systems and people with lived experience.**[227]

Perhaps most importantly, there is strong support for South Australia to develop an integrated response model that provides a coordinated response to incidents of domestic, family and sexual violence across the entire state:

> **There needs to be an integrated service approach for the victim-survivor to receive the support and resources they need with the initial responder acting as an advocate in linking into services and support.**[228]

> **Expand and Strengthen regional DFV crisis services and workforce, inclusive of effective and supported community-based outreach: crisis services must adequately serve all regional areas, not just urban centres. This includes a focus on mobile assertive outreach teams, satellite presences, and a multi-agency, multidisciplinary approach.**[229]

> **An integrated service system with complementary relevant services and processes will enable earlier intervention and provide the mechanism for multiple issues to be addressed in a coordinated way. This will ensure the right service is provided at the right time … Complex issues such as family violence requires a high level of service integration to enable multiple service responses to be activated simultaneously.**[230]

> **The Salvation Army recommends that the South Australian Government invest in an integrated service system that is well-equipped to respond to the intersectional needs of people impacted by family and domestic violence. This can be supported by investment in improving information sharing and risk management processes, the development of a shared training loop, and co-location of services and specialists.**[231]

> **In our call for a Royal Commission, Embolden made clear that the foundation of system reform in South Australia should be the creation of an holistic, integrated and place-based service response, able to meet the diverse needs of women and families across our State. Embolden recommends the planning and development of place-based integrated service models statewide to effectively prevent and respond to domestic and family violence, to be driven through a cross-sector co-design process.**[232]

Future state

While it is commendable that South Australia has adopted collaborative and cooperative approaches to responding to domestic, family and sexual violence, it is clear that greater progress is urgently needed. Although some of the programs outlined in this section have had demonstrable impact, and provide good examples of practice at the national and even international level, others appear to lack clarity of purpose and measurable outcomes. It has also become clear to the Commission that, in the absence of strategic leadership and clear governance, the different multi-agency programs have become fragmented, are failing to meaningfully coordinate, and have become prone to duplication of effort. The irony is not lost on the Commission that these very programs, which have been designed specifically to improve cooperation, are themselves operating in silos.

While efforts to improve communication and information sharing between government agencies were important in the past 2 decades, South Australia must not continue to rest on its laurels after achieving some level of coordination. Governments can no longer congratulate themselves simply for sharing information between different agencies. It is entirely reasonable for the public to expect that government agencies would share information as a matter of course, without cause for celebration, and that this information is used in a timely manner to keep people safe.

By recommending the development and implementation of a South Australian RAMF, the Commission is ensuring collective responsibility for domestic, family and sexual violence. Development of this statewide framework to better identify and respond to risk will bring opportunities to intervene early and disrupt cycles of violence before they can escalate. This, however, will require South Australia to be equipped to provide timely responses to domestic, family and sexual violence once it has been identified. It is time for South Australia to replace its collection of fragmented and siloed multi-agency programs with a deliberate, coordinated, statewide integrated response model.

Integrated responses to domestic, family and sexual violence are not new to Australia. A 2016 meta-analysis by ANROWS found that 'all Australian jurisdictions are developing or have developed some type of integrated response to violence against women'.[233] When addressing what constitutes an integrated response to domestic, family and sexual violence, ANROWS has set out a range of criteria (all of which must be met), including:

- 2 or more agencies / services
- clear coordination protocols for integrated service provision
- funded to respond holistically to people currently experiencing domestic and family violence, or who have left a domestic and family violence situation, and / or who have experienced sexual assault
- programs with a formalised partnership or joint service agreement between agencies
- programs with a formalised statement of shared principles / goals between agencies
- could include 'one-stop shops' for people who have experienced domestic and family violence or sexual assault
- case coordination / management initiatives.[234]

Following a comprehensive review, ANROWS found that there were common benefits to be gained from integrated responses to domestic, family and sexual violence, including:

- a broader range of services that are offered beyond the initial crisis period
- improvement of the professional knowledge base and service-provider relationships
- facilitation of responsive and prompt decision-making
- increased cross-program or agency collaboration on case management
- provision of multiple entry-points for clients to access support.[235]

The Commission has explored models being used in other jurisdictions, with a particular focus on jurisdictions also using a RAMF. These include: Victoria's Orange Door, Alexis Program, information sharing schemes and central information point; Queensland's integrated Service System and High Risk Teams; Western Australia's Family and Domestic Violence Response Teams; and the Northern Territory's expanded Family Safety Framework.

These models all show signs of good practice, the Commission has been careful to consider the applicability of each to the South Australian context. Our state is geographically large, with a relatively small population, and our regional towns and remote communities are often a considerable distance from services. Service providers in South Australia are, for the most part, concentrated in metropolitan areas. South Australia is in a different position to the eastern states in terms of workforce availability, demographics and resources.



An integrated response model

It is the Commission's view that Western Australia's approach to integrated response and service delivery represents the best opportunity for South Australia. Like South Australia, Western Australia is a large geographic area with a smaller population relative to the eastern states, and with truly regional and remote communities to service. Western Australia has gained considerable experience providing integrated, whole-of-government responses to domestic and family violence. As outlined earlier in this chapter, Western Australia rolled out the first edition of the CRARMF in 2011. This provided the foundation for its Family and Domestic Violence Response Team (FDVRT) model, which has been in operation since 2013 and independently reviewed in 2020.[236]

Western Australia is slightly ahead of South Australia in commencing a reform cycle for domestic, family and sexual violence responses and service delivery. Western Australia's reform cycle has been informed by the Family and Domestic Violence Taskforce, which was convened between late 2023 and early 2024, and subsequently provided the Western Australian government with the System Reform Plan.[237] The plan builds on the FDVRTs as the central pillar of Western Australia's integrated responses to domestic, family and sexual violence, and further enhances their ability to respond to and manage risk. Following both the 2020 independent review and the 2024 System Reform Plan, Western Australia is now in the process of implementing an enhanced FDVRT model, expanding its capabilities and operating hours. Given that Western Australia has more than a decade of operational experience with integrated response, there is now a significant opportunity for South Australia to 'leapfrog' the lessons learned elsewhere and to develop its own modern integrated response model.

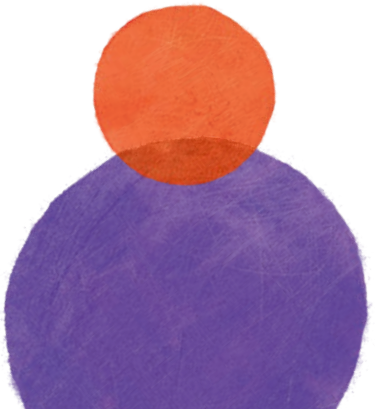
The Commission sought information from the Western Australian Office for Prevention of Family and Domestic Violence about the integrated response model. Western Australia's FDVRT model is a statewide model providing responses to domestic and family violence through local place-based, co-located and multidisciplinary teams. FDVRTs operate in 17 locations across the state, with 9 teams in metropolitan areas and 8, plus satellite, in regional and remote locations. Each FDVRT is made up of a 'core group' of specialists, currently from police, the Department of Communities (child-focused workers) and Coordinated Response Service providers (non-government domestic and family violence specialists).

Referrals to FDVRTs are made through Western Australia Police. Each day, an FDVRT will review every family violence incident report that was recorded in its district in the past 24 hours. Each FDVRT member contributes their agency's relevant information, along with their expertise, to the triage process. Following the daily review of family violence incident reports, each team member will then deliver short-term, timely responses targeted to peoples' specific needs, aiming to intervene early and provide links to services. For example, the child-focused workers will consider and act on the needs of children and young people; the non-government specialist workers will contact people experiencing violence, and perform comprehensive risk assessment, safety planning and referral; and police will actively engage with people using violence.

When the FDVRT needs additional information or support to manage high-risk and complex incidents of domestic and family violence, it can convene a MACM meeting. MACM meetings are similar to FSMs; however, there are 3 key differences. Any agency present or represented at the MACM meeting can be nominated as the lead agency. Rather than being a regular fortnightly meeting, MACM meetings can be convened whenever there is need to address a high-risk incident. Finally, participating agencies are obliged to attend MACM meetings per the minimum standards set out in the CRARMF.[238]

The enhanced FDVRT model, which was developed following the 2020 independent review and the 2024 System Reform Plan, adds additional capabilities to the FDVRT core group. The enhanced FDVRT adds community corrections officers to each team, who are responsible for sharing information about, and engaging with, people under correctional supervision. Western Australia is also trialling the inclusion of intervention workers to engage with people using violence, with workers from Communicare joining 5 FDVRTs.[239] The introduction of intervention workers will allow FDVRTs to undertake risk assessments of people using violence and case management, and consider opportunities for interventions and counselling.[240]

The enhanced FDVRT model adds capacity specifically to work with high-risk families, through Family Safety Coordinators and Family Safety Support Workers employed by the Department of Communities. Two Family Safety Support full-time equivalents have been added to each FDVRT to provide lower-volume, higher-intensity and longer-term responses to families with high complexity and high risk of harm, including those at high risk of child removal. Family Safety Support Workers provide whole-of-family responses to people experiencing violence and people using violence, as well as children and young people. The role is not dissimilar to the Child and Family Safety Services model already underway in the South Australian Department of Human Services, which is further discussed in Chapter 4.



The final, most significant change introduced by the enhanced FDVRT model has been the expansion from normal working days to 7 days a week, 365 days a year. The Commission has heard that this change was made due to poor coverage over weekends and holidays, which also resulted in significant backlogs of family violence incident reports for each team to triage and respond to. In order to overcome workforce challenges in regional and remote locations, particularly with government partners, Western Australia has implemented Centralised Triage Teams (CTTs) to provide 7-day coverage. In addition, the non-government partners providing specialist domestic and family violence services have been funded to operate 7 days a week in their regional locations, expanding their ability to provide crisis accommodation and support over weekends and holidays.

Each CTT comprises police and child welfare workers, who are based in the State Operation Command Centre, and their non-government partners in the districts. The CTTs are intended to become responsible for the triage and assessment of every family violence incident report received by Western Australia Police (there are projected to be more than 63,000 reports in 2025–26). By becoming responsible for all triage and assessment, the CTTs will give capacity back to local FDVRTs to work in their regions.

The FDVRTs are supported by a shared information sharing and records management system. This system allows police to share family violence incident reports, and for each core member to add relevant information from their own information holdings. Access to this system can also be provided to other workers who are engaging with relevant families, so that they have access to contemporary information and, critically, provide a feedback loop about their actions and observations. It is the Commission's understanding that Western Australia is currently in the process of seeking a new and updated information sharing and records management system to better serve this purpose.

It is important to note that Western Australia's integrated response model, delivered through place-based FDVRTs and MACM, has 2 key enablers. First is Western Australia's CRAMF, which sets out minimum standards for risk screening, assessment, management and referrals for all relevant government agencies and non-government organisations. Second is the authorising environment in Western Australia, which is provided by the stewardship of the Office for the Prevention of Family and Domestic Violence. Western Australia's integrated response model is supported by strategic leadership and governance, and includes a well-established process for managing differences of opinion, complaints and operational issues. FDVRT core members operate as equals and are expected to take a unified approach to risk management, each drawing on their own expertise.

By co-locating FDVRTs in each region, Western Australia has leveraged the well-accepted lesson that physical co-location leads to better information sharing, coordination and safety outcomes. Multidisciplinary teams are able to support one another with mixed expertise and experience, raising the capabilities of the entire team. As demonstrated by well-functioning FSMs in South Australia, local and place-based approaches are crucial for building good working relationships and good local knowledge. Information sharing practices are paired with action and outcomes, rather than occurring in a vacuum without any relation to frontline responses.

Small integrated teams are also easier to accommodate, especially in regional settings. In Western Australia, FDVRTs are mostly co-located in police stations and other government buildings. This has allowed Western Australia to avoid investing heavily in physical infrastructure to support integrated responses, as has been the case in Victoria. Instead of Orange Doors, Western Australia has invested in'One Stop Hubs', which bring together domestic and family violence services with other community services, prioritising ease of access for people seeking help and support.

One Stop Hubs have created soft entry-points and reduced barriers for people who are seeking help.[241] An evaluation of the first 2 One Stop Hubs found:

- they were reaching their audience, and providing more people with the information, skills and resources to keep themselves and others safe
- soft entry-points are a particularly useful innovation; they help to build trust and familiarity that allows for better engagement
- connection between services has improved, as hubs are helping existing services to work more effectively together
- strong relationships underpin hub success, and the co-design of hubs has allowed for effective, locally embedded models
- hubs enable cross-service advocacy and allow clients to advocate for services from other organisations
- a creche is more than just a creche; they play an important role in providing effective and accessible services to victim-survivors and their children.[242]

During Day 7 of public hearings, the Commission heard from Ms Debra Zanella, the Chief Executive Officer for Ruah Community Services, about the Ruah Centre for Women and Children, an example of a soft entry-point. It is a 'dedicated and committed service to healing and recovery for women and children who have experienced family and domestic violence'.[243] The centre offers counselling for adult women, child counselling, financial counselling, legal support, support for women navigating their healing and recovery journeys, housing support, tenancy support, mental and physical health support, dental services, and other self-care activities, as well as co-locating research and evaluation within the centre.[244]

Unlike Western Australia, South Australia's Multi-Agency Hubs have not been independently evaluated. When compared with the 4 different hub models being used in South Australia, Western Australia's One Stop Hubs most closely resemble the Domestic Violence Prevention and Recovery Hub or Southern Hub, which provides health, legal and community services to victim-survivors. The Northern and Multi-Agency Hubs more closely resemble co-located FDVRTs; however, they have additional capability for outreach and appointments.

South Australia must develop its own integrated response model to improve responses to domestic, family and sexual violence, especially in regional South Australia. Western Australia's expanded integrated response model represents a mature, evaluated and well-developed model that South Australia should draw heavily from. As well as sharing a border and remote communities, our states share similarities in geographic size, population and remoteness.

The introduction of a new risk assessment and management framework along with a new integrated response model, incorporating a reinvigorated FSF for high-risk families, represents a quantum leap in South Australia's capability to identify and respond to domestic, family and sexual violence. While an integrated response model will require a considerable investment from the South Australian government, the model will go a substantial way in better meeting the needs of people experiencing violence and, crucially, of children and young people. The inclusion of workers with levers to keep the person using violence in view also presents a unique opportunity to begin focusing more on people using violence and holding them accountable. These workers can explain intervention order and bail conditions, can make referrals to intervention programs, and will inject capacity into the system that has not meaningfully existed to date.

The implementation of an integrated response model must include an embedded learning system approach, similar to the approach currently taken by the Child and Family Support System Research Approach within the Department of Human Services.[245] A learning system approach will support the continuous monitoring and evaluation of the new model, ensuring that the model can be adapted and refined through this constant source of input rather than awaiting one evaluation process at the end of a defined number of years.[246]

The development of an integrated response model will also provide more clarity to the role and design of hubs for people experiencing domestic, family and sexual violence. By removing the need to co-locate police and child welfare workers alongside health, legal and community services, people experiencing violence can be afforded safe 'one-stop shops' for healing and recovery, without having to worry about unwanted statutory interventions.

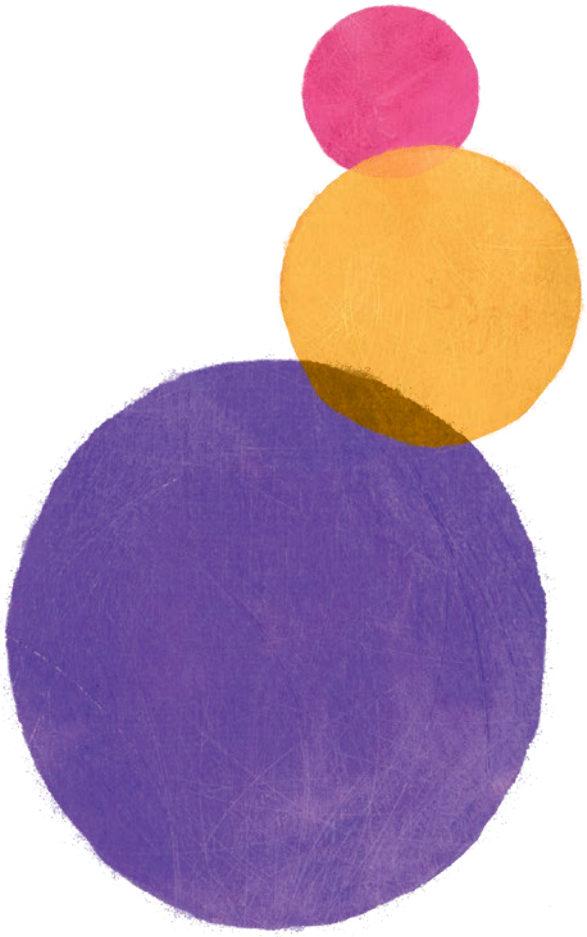
The Terms of Reference require the Commission to have regard to South Australia's social data assets. The Commission is aware that South Australia's Office for Data Analytics has previously developed whole-of-government information aggregation systems, including a system which was used to support the Independent Report of the Review of Child Deaths at Munno Para and Craigmore in 2022.[247] It is the Commission's view that information sharing between government agencies to identify and manage risk of domestic, family and sexual violence could and should be better supported by technological solutions such as these.

In the meantime, the current delivery model for information sharing is MAPS. It was evident to the Commission when visiting MAPS that, despite the valuable efforts of its workers, MAPS was not providing a timely response, and its outcomes and impacts were unclear. It may be that a significant investment in staffing at MAPS could achieve an improvement in the speed of production and distribution of Information Summary Reports. Should this be the government's preferred approach, it is clear that it must be accompanied with stronger governance and direction about purpose, scope and timeframes.[248]

However, it is more likely that the existing model would benefit from a fundamental change in purpose. MAPS may be well placed to work directly in support of the integrated response model, becoming a central triage and information sharing team, at least until the technological solution for information sharing is operationalised.

The Commission has noted that information sharing must correspond with actions that manage risk and improve safety outcomes, as demonstrated at local levels by the FSF, use of the Interagency Code and CFSN meetings, and more broadly by the DVDS and Family Law Information Sharing Program. The Commission recommends that MAPS be reimagined as a central rapid triage team to support the new place-based integrated response teams, or otherwise be reabsorbed into line agencies once a technological information sharing solution becomes available.

The Commission notes, that the authorising environment for South Australia's current information sharing approach is set out in the Information Sharing Guidelines for promoting safety and wellbeing. The Commission heard that the current environment works well and meets the stated purpose to ensure that interagency and multidisciplinary responses are enabled to address issues 'such as child protection, homelessness, mental illness, family violence, drug and alcohol abuse or gambling'.[249] The Commission recognises that South Australia is the only Australian jurisdiction without a Privacy Act, and urges the South Australian government to ensure that the current information sharing environment is protected if the South Australian government does move to enshrine privacy protections in legislation.



Recommendation 18

The South Australian government design, implement and resource a statewide integrated response model incorporating the elements set out in Figure 2.3.

Recommendation 19

The South Australian government resource the Family Safety Framework to provide broader multi-agency responses to high-risk and complex-risk matters. The Family Safety Framework should:

a. be informed by, and included in, South Australia's Risk Assessment and Management Framework
b. require mandatory participation by relevant agencies and organisations, through minimum standards set out in the South Australian Risk Assessment and Management Framework
c. be co-managed by the integrated response teams
d. be resourced to allow for administrative support
e. be expanded to support people aged 16 and over.

Further consideration should be given to:

f. whether Family Safety Meetings should remain fortnightly or be convened on a needs basis, or both
g. whether, and to what extent, Family Safety Meetings and Child and Family Safety Network meetings should be combined.

Recommendation 20

The South Australian government develop, implement and maintain a technological solution for whole-of-government information aggregation and sharing for domestic, family and sexual violence The technological solution must:

a. aggregate relevant information holdings concerning people using and experiencing violence, drawing from government agencies responsible for participating in the integrated response model or using the South Australian Risk Assessment and Management Framework
b. have regard to the current information-sharing product used by the Multi-Agency Protection Service
c. be available statewide in support of the integrated response model among other relevant matters.

Consideration should be given to whether this technological solution could also support South Australia Police with the efficient aggregation of relevant police information for use in information-sharing programs such as the Domestic Violence Disclosure Scheme and Family Law Information Sharing Program. Otherwise, the Commissioner of Police is to conduct a separate scoping study and procurement for that purpose.

Recommendation 21

The South Australian government consider repurposing the Multi-Agency Protection Service to become a central triage and information-sharing team in support of the local integrated response teams. Consideration must be given to the ongoing role of the Multi-Agency Protection Service, if any, once the technological solution for information sharing has been introduced.

Recommendation 22

The South Australian government develop a consistent model for community-based, open-door domestic, family and sexual violence service hubs and explore opportunities to roll out community-based service hubs where they will have impact. The model should:

a. draw from Western Australia's One Stop Hub model, particularly the community-based and soft entry-point design elements
b. provide co-located, non-statutory supports for people experiencing or recovering from violence
c. be repeatable and sustainable, and incorporate measurable impacts and outcomes
d. be applied to any hubs subsequently rolled out in South Australia.

Figure 2.3: South Australian integrated response model

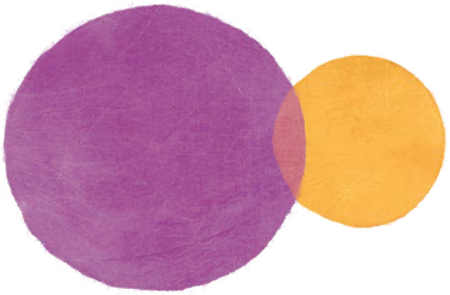
1. **The South Australian integrated response model should:**
    a. use, and be supported by, South Australia's Risk Assessment and Management Framework (Recommendation 14)
    b. draw from Western Australia's enhanced integrated response model
    c. be informed by a rapid review of statewide demand and service availability
    d. co-locate integrated response teams statewide across South Australia, in locations where they can best meet demand and provide effective outreach
    e. include core members of:
        i. specialist police
        ii. child-focused practitioners
        iii. local domestic and family violence specialists
        iv. intervention workers (focused on people using violence, drawn from Department for Correctional Services or government-commissioned behavioural change programs)
        v. intensive support workers (focusing on all people within high risk and high complexity families)
        vi. where available, workers from local domestic, family and sexual violence specialist Aboriginal Community Controlled Organisations
    f. be supported by an information sharing and records management system that will:
        i. allow core members to share, update and aggregate information
        ii. allow core members to grant access to other workers engaging with relevant persons, so that they may view relevant information and provide valuable feedback loops
        iii. be informed by operational experience from Western Australia, including consideration of partnering to acquire a suitable solution
    g. provide a service 7 days a week, 365 days a year, noting a preference for localised response teams over a centralised model if possible
    h. receive, assess and respond to all reports of domestic family and sexual violence in their region of responsibility, including:
        i. reports from police
        ii. referrals from core members
        iii. referrals from other services through the South Australian Risk Assessment and Management Framework
    i. provide meaningful support and referrals for any person experiencing violence
    j. provide brief interventions and referrals for any person using violence
    k. respond effectively to children and young people experiencing violence or using violence
    l. provide low-volume, high-intensity, longer-duration interventions and support to families experiencing complex and high risk
    m. be governed and overseen by the Government Steward.

Funding and compliance

There will never be sufficient funding or emergency accommodation for victims of domestic violence. So what happens is the charities and government services evaluate women on the basis of the most desperate need. As a result, women who are educated, employed (even if she is earning an unsustainable wage) or have the capability of becoming employed, are left to fend for themselves.[250]

In its submission to the Commission, Embolden spoke to the urgent need for much greater investment in domestic, family and sexual violence services in South Australia, not only for frontline responses, but across the service spectrum, including prevention, early intervention, recovery and healing.[251] In particular, Embolden wrote that:

> **South Australia lags significantly behind other jurisdictions in funding for domestic and family violence services on a per capita basis. While South Australia's Royal Commission is a critical opportunity for system reform in our State, the increasing structural deficit in funding for our frontline responses is putting women, children and others experiencing violence at risk right now. It is also having a detrimental impact on the wellbeing of frontline workers across the DFSV sector.**[252]



This was reiterated in the submission from the DFVSA:

> **SA is significantly behind other states' and territories' investment in services, leaving alarming gaps in our ability to meet the needs of the community. Recent analysis of DFV specific funding opportunities included in the Commonwealth's Safe Places Inclusion tender put this into stark contrast, where the only DFV-specific funding for South Australia in FY23-24 noted was $7.3m over 4 years for DFV-CAP/PERP. This stands in stark contrast to, for example, Northern Territory which included $55.1m in their 23-24 budget, including an additional $20m over 2 years to support implementation of their second Action Plan. This lack of state funding has left South Australia behind nationally and risks the existing support system.**[253]

In addition to the funding being inadequate, the Commission was told by service providers that funding models are broken and often do not align with the realities of providing domestic, family and sexual violence support. Services spoke about the impact that short-term funding agreements has on long-term service and workforce stability, and the issues associated with activity-based funding models.[254] Services also identified that activity-based funding fails to reflect the complexity of domestic, family and sexual violence cases, requiring specific interventions without allowing providers to adapt services to the needs of the client.[255]

The Commission consistently heard that the domestic, family and sexual violence system is predominantly focused on crisis response, prioritising service delivery for high-risk incidents and homelessness. Opportunities for prevention and early intervention are being missed by a sector that is stretched and under-resourced. Missed opportunities can in turn lead to more pressure on the sector, as failing to intervene early can result in more families and relationships reaching a crisis point.

> **We could prevent the next generation of women from experiencing violence. But prevention doesn't make headlines.**[256]

> **The eligibility criteria for SA's Domestic Family Violence Safety Alliance (DFVSA) services has narrowed sharply over the past three years; to the point that DFVSA only has capacity to support people in current crisis and assessed as high risk, using the Domestic Violence Risk Assessment (DVRA). This narrow scope results in a widening gap in service availability for those experiencing DFV, forcing homelessness Alliances to respond to an increased number of individuals who are in need of a dedicated DFV response.**[257]

> **In SA, funding is currently tied to homelessness which prevents women who are remaining at home being adequately supported. What is more DFV homelessness services are focused on emergency responses and therefore opportunities for early intervention responses are not possible.**[258]

> **Most services have a set time frame that they are allowed to work with survivors, usually 14 sessions per client. The problem is it takes 14 weeks to build a relationship with a professional and my trauma has taken much longer than 14 weeks. Services need to have a lot more time to be able to work with survivors.**[259]

> **I reached out for help ... and the only support I received was emergency accommodation and access to transitional accommodation. No further support re accessing finance (Centrelink, etc), legal advice or counselling.**[260]

> **Eligibility criteria, meant that when fleeing DV with my mother (14 years old at the time) that she was unable to access numerous resources. We were unable to access multiple resources due to the fact that my mother was not supported by a shelter. There was no recognition that someone could flee DV and not be in a shelter environment. We still required assistance finding a rental and furniture.**[261]

The Commission was also told that domestic, family and sexual violence services are generally only available to women due to limited funding or restrictive funding agreements. In its submission to the Commission, the South Australian Homelessness Alliance noted that the current narrow eligibility criteria for accessing DFVSA services meant that:

> **The DFVSA's eligibility also excludes individuals and their families who choose to stay in a living situation with a perpetrator; the scope to work with male victim-survivors, transgender individuals and those in same-sex relationships experiencing DFV is also limited.**[262]

Similar issues were raised by a respondent to Share With Us:

> **When I contact agencies for help I am told that their funding agreements with government prevent them assisting men. When I have taken this up with Ministers the agencies are untruthful and say they do not discriminate on gender grounds ...Just as vast numbers of male sexual assault victims were revealed by the Royal Commission into institutional sexual abuse, there are large numbers of male victims who will never appear in any data.**[263]

Specialist domestic, family and sexual violence service providers expressed significant frustration with the fragmented nature of government engagement, explaining that the lack of coordination between government agencies can mean that service providers are often asked to provide the same information multiple times to different parts of government.[264]

Similarly, when it comes to reporting and compliance, specialist domestic, family and sexual violence service providers told the Commission that it could be duplicative, burdensome and inefficient. Services identified that domestic, family and sexual violence organisations face overlapping compliance obligations, with multiple funding bodies requiring separate audits, financial acquittals, and service reports – often collecting the same data in different formats.[265] Some reports have to be submitted to multiple government systems, including the Australian Charities and Not-for-Profits Commission, the Homeless2Home (H2H) database, and various state and Australian government funding portals.

In addition to financial and funding-related compliance, services have explained that domestic, family and sexual violence organisations face extensive regulatory requirements that are often unrelated to service delivery. These obligations, while designed to ensure operational integrity, frequently create administrative challenges that disproportionately impact smaller and regional organisations. In addition, service providers consistently reported that compliance frameworks prioritise quantitative data over meaningful client outcomes, creating disconnects between reporting expectations and frontline realities.[266]

Current state

Current funding arrangements

In South Australia, the domestic, family and sexual violence sector receives the majority of its funding through the NASHH, which commenced on 1 July 2024. The Commission notes that while the previous National Housing and Homelessness Agreement specified a number of national priority homelessness cohorts, including women and children affected by domestic and family violence,[267] the NASHH no longer appears to identify domestic and family violence as a national homelessness priority.[268]

The purpose of the NASHH is to help people who are experiencing, or at risk of, homelessness and support the effective operation of Australia's social housing and homelessness services sector. As explained in the South Australian government's submission and during evidence on Day 1 of public hearings, in South Australia, the NASHH funds the statewide DFVSA and the 4 regional Homelessness Alliances (the Alliance model) which represent 75 individual services across South Australia.[269]

The Alliance model in South Australia has been in operation since July 2021. Each of the 5 alliances operate under a governance structure comprising 2 primary leadership bodies: the Alliance Leadership Team and the Alliance Management Team. The South Australian government is represented in both leadership and management forums with the intention of providing strategic oversight and funding distribution, facilitating, coordination and system-wide collaboration, and ensuring policy alignment.[270]



The 8 service delivery partners which make up the DFVSA are the primary providers of domestic violence and Aboriginal family violence crisis support in South Australia:

- Women's Safety Services South Australia (WSSSA)
- Centacare Catholic Community Services
- Centacare Catholic Country SA
- Yarredi Service, Inc
- First Nations Healing (previously known as Nunga Mi:Minar Incorporated)
- Uniting Country South Australia
- Junction Australia
- The Salvation Army.

The DFVSA operates under a 'safety first' response model and primarily provides access to crisis and emergency accommodation and case management for people who are homeless, or at imminent risk of homelessness, due to domestic or family violence. The 18 DFVSA services provided by the 8 service delivery partners support over 4,500 people annually:[271]

- Bramwell House – Adelaide Domestic Violence Crisis Accommodation Service
- Ceduna Regional Domestic Violence and Aboriginal Family Violence Service
- Domestic Violence Crisis Line (DVCL)
- Eastern Adelaide Domestic Violence Service
- Fleurieu and Kangaroo Island Domestic Violence Service
- Limestone Coast Domestic Violence Service
- Migrant Women's Support Program
- Murray Mallee & Adelaide Hills Domestic Violence Service
- Ninko Kurtangga Patpangga Southern Regional Aboriginal Domestic Violence and Family Violence Service
- Northern Adelaide Domestic Violence Service
- Nunga Mi:Minar (now First Nations Healing) – Northern Regional Aboriginal DV and Family Violence Service
- Port Augusta Regional Domestic Violence and Aboriginal Family Violence Service
- Port Lincoln Regional Domestic Violence Service
- Riverland Domestic Violence Service
- Southern Adelaide Domestic Violence Service
- Western Adelaide Domestic Violence Service
- Whyalla Regional Domestic Violence Service
- Yorke and Mid North Domestic Violence Service.

As noted previously, the help provided by the services that make up the DFVSA is increasingly limited to women who are deemed to be at high risk of domestic violence and Aboriginal family violence. The DFVSA explained that:

> **"we continue to see victim-survivors in need now, but are having to make daily decisions about whose needs are most acute, who is in most crisis, and having to refer many to other parts of the system which we know are also under significant pressure (including the broader homelessness sector, who often provide a 'safety net' for those needing to leave situations of violence, particularly for men, those who do not identify as female, or those for whom their experiences of DFV are more historic, but no less a part of their homelessness experience).**[272]

The Alliance model was designed to improve coordination, reduce duplication and create a more integrated service system, with a focus on collaboration and shared decision-making.[273] However, based on considerable feedback from the sector, the Alliance model appears to be more of a failure than a success. Rather than streamlining services, the Commission was told that the Alliance model imposes bureaucratic barriers, locks organisations into a homelessness-focused framework, lacks cultural competence and deprioritises domestic, family and sexual violence–specific responses. The attempt to fit domestic, family and sexual violence into a housing and homeless framework, rather than recognising it as a complex social issue requiring a distinct service response, is a fundamental flaw.[274]

The other significant funding agreement through which the South Australian domestic, family and sexual violence system receives money is the National Partnership on Family, Domestic and Sexual Violence Responses (the National Partnership). According to the South Australian government's submission, the 'vast majority of direct domestic, family and sexual violence funding' comes from the National Partnership.[275]

The Commission understands that a renewed National Partnership Agreement was signed in February 2025. Under the renewed agreement, South Australia will receive an additional $26.109 million from the Australian government between 2025 and 2030. This is matched by a $26.109 million funding commitment by the South Australian government.[276] The funding supports frontline family, domestic and sexual violence services, with specific funding for 500 community workers and innovative perpetrator responses.[277]

Despite National Cabinet describing gender-based violence as a 'national crisis', advice from the Department of Human Services is that the 'new and matched funding allocation for South Australia of $4.995 million per annum (indexed) is smaller than previous agreements. Given the need to continue programs that have been established through previous National Partnership funding, the renewed National Partnership funding will not be adequate for the development of new services. In addition to the commensurate state funding, additional state funding of $2.8 million is required solely to continue existing services'.[278]

In addition to these agreements, the Commission understands that there are a number of other national partnerships that guide and fund broad strategies and programs that intersect with domestic, family and sexual violence, including in legal support (which is discussed further in Chapter 6), public health and child protection.[279] Some of these are referred to in Appendix 21 of the South Australian government submission.

Domestic, family and sexual violence service providers may also receive funding from other varied sources, including private and community donations, fundraising, philanthropic foundations, local government and corporate sponsorships.[280]

Although there are various funding streams for the domestic, family and sexual violence system, there is no clear, publicly available summary of the exact dollar investment from the South Australian government and the Australian government or of the supports and programs that investment actually funds. The Commission was informed in November 2024 that the Commonwealth Department of Social Services was working with state and territory governments to develop a standalone document on investments under the National Plan and that this document would sit as an appendix to the Activities Addendum Update 2024. Despite advice from the Department of Social Services that this document was scheduled to be released before the end of 2024, the document was not publicly available at the time of writing.

The Commission is concerned about the lack of transparency when it comes to the level of funding for domestic, family and sexual violence. Many funding announcements seem to be more 'smoke and mirrors' than substance. The Commission notes that after the 6 September 2024 meeting, National Cabinet announced a $4.7 billion package that 'harnesses important opportunities to work together to prevent violence and support legal services'.[281] What the announcement failed to clearly explain is that a substantial portion of that funding was for the new National Access to Justice Partnership, which is the next 5-year iteration of funding agreements with states and territories for legal assistance services. When questioned by *The Australian* in an article that was published on 7 September 2024, the Commonwealth Attorney-General conceded that only $800 million of the $3.9 billion package is new funding.[282]

The Commission further notes that while the media release from National Cabinet stated that there will be a focus on uplifting legal services responding to gender-based violence, many of the legal assistance services funded under the agreement will not be solely providing domestic, family and sexual violence–related legal assistance. For example, legal aid commissions and Aboriginal legal services provide a wide variety of legal assistance, including legal assistance for people who use violence. At the time of the announcement, several organisations expressed concerns about how the funding would be distributed and whether they would benefit. An SBS article noted that Aboriginal and Torres Strait Islander Legal Services feel 'betrayed' by the announcement as the 'funding guaranteed no new services or representation would be possible, locking the [national] organisation into a perpetual funding crisis'.[283]

Future state

The way the Alliance model operates and the way in which the domestic, family and sexual violence system is funded, is not fit for purpose. It requires significant overhaul.

As outlined, current investment is primarily through homelessness funding under the NASHH and the National Partnership Agreement. This means that the specialist domestic and family violence response, which is predominantly delivered by the DFVSA, is a homelessness response rather than a specialist domestic and family violence response and restricted by strict eligibility criteria. This also means that the 4 Homelessness Alliances are responding to an increasing number of people impacted by domestic, family and sexual violence.[284] Reliance on national funding agreements also means that services often receive short-term funding contracts that are tied to the timeframes under the national agreements, impacting their capacity to plan long-term service approaches and recruit and retain staff.

In its submission to the Commission, the DFVSA explained that contractual obligations regarding eligibility around 'at risk of, or experiencing, homelessness', means that its ability to meet the needs of victim-survivors is significantly constrained.[285] The DFVSA submission goes on to recommend the expansion of domestic and family violence specialist services beyond homelessness responses through:

- specific accommodation responses that cater to the needs of victim-survivors of domestic, family and sexual violence
- funding of specialist domestic and family violence responses for those not at risk of homelessness, but still in need of support.

While the Commission considers homelessness funding an appropriate lever for domestic, family and sexual violence specialist services who provide accommodation or Safe at Home services, discussed further in Chapter 6 it cannot be relied upon to fund the many other services and supports that a person experiencing domestic, family and sexual violence will need to become safe and stay safe. This has resulted in significant service gaps across the system, particularly in prevention, early intervention, and recovery and healing.

These service gaps are acknowledged by the South Australian government, which wrote in its submission that 'current funding gaps limit our long-term ability to reduce and prevent domestic, family and sexual violence and ensure that victim-survivors can return to or achieve positive outcomes after escaping violence'.[286]

The South Australian government was unable to provide a clear and concise overview of all state government investment in the domestic, family and sexual violence system. This appears to be due to the fragmented nature of the system, the reliance on housing and homelessness funding, and the absence of a Government Steward to keep track of the different funding arrangements across government agencies. It is imperative that the South Australian government undertake the rapid expenditure review recommended earlier in this chapter to identify current investment and any gaps or duplication in current services. This review must form the basis of the Implementation Plan and future budget bids to Cabinet for the funding uplift that will be needed to implement the Commission's recommendations.

In addition to greater investment in the domestic, family and sexual violence system as recommended throughout this report, the Commission is firmly of the view that domestic, family and sexual violence funding must be disentangled from homelessness funding and its strict eligibility criteria to ensure that flexible funding is available to address all of the complex and intersecting needs of victim-survivors. The need for flexible support packages is further discussed in Chapter 6.

Underpinning this is the need to address the following concerns identified by services about the operation of the Alliance model:

- Referral pathways are not functioning as intended.
- The H2H system is fundamentally unsuitable for domestic, family and sexual violence services as it fails to capture risk assessments, safety planning, legal interventions or the long-term support needs of victim-survivors.
- The model does not reflect community-led ways of working and does not support appropriate pathways for diverse communities.
- Governance structures do not reflect domestic, family and sexual violence–specific expertise and decision-making.
- Funding arrangements are rigid, short-term and crisis focused.
- The model lacks cultural competence and does not support the growth, coordination or professionalism of the domestic, family and sexual violence workforce.

The Commission understands that the Alliance model is due to be reviewed in the near future. This review presents an opportune time to carefully reconsider the Alliance model and whether it is serving the interests of the domestic, family and sexual violence system and the people it supports.

Finally, the Government Steward must undertake an audit of all current contracting arrangements to remove any duplicative reporting and compliance obligations and ensure that the South Australian government only collects information that will be used to influence policy, funding decisions or sector innovation. This should apply both to state government reporting requirements and any Australian government reporting requirements that are passed on to the sector by the state.

The Commission understands that there must be a level of transparency in how public funds are spent by domestic, family and sexual violence service providers. However, service providers should not have to provide the same information to multiple agencies. Similarly, service providers should not have to collect and provide information that does not get used.

For all future commissioning and contracting arrangements, the South Australian government must commit to alignment with a clear set of model-commissioning, reporting and data-collection principles for the domestic, family and sexual violence sector. These principles (as set out in Figure 2.4) have been developed to respond to the issues raised by the sector throughout the State of the Sector engagement process.

In considering options for reform, the Commission has deliberately chosen to recommend principles rather than prescriptive rules. This reflects an understanding of the complex and varied environments in which commissioning occurs. Different departments operate under distinct legislative frameworks, procurement rules and accountability obligations. In this context, rigid directives are unlikely to achieve the necessary change.

Instead, these principles are intended to serve as minimum standards that can guide commissioning and data arrangements across a range of circumstances. They are designed to be:

- durable, withstanding changes to procurement systems and funding structures
- flexible, enabling application across diverse program areas and agency settings
- purposeful, ensuring that commissioning decisions are aligned with safety, sustainability and impact.

Together, the principles represent a baseline for how government should work with the domestic, family and sexual violence sector – acknowledging the complexity of service delivery, respecting the expertise of specialist providers, and enabling long-term improvements in outcomes for victim-survivors.

The principles are divided into 2 categories: first, commissioning and funding principles to address how services are designed, funded and contracted; second, reporting and data-collection principles to address how performance is measured, compliance managed, and data used.

The principles are intended to support both commissioning agencies and funded organisations in designing arrangements that are fit for purpose, proportionate to risk, and capable of delivering high-quality services sustainably.

Recommendation 23

The South Australian government's review of the Alliance model be informed by the views set out in this report, and by direct engagement with the domestic, family and sexual violence sector.

Recommendation 24

The South Australian government:

a. disentangle funding for domestic, family and sexual violence services from homelessness services and funding streams
b. provide a significant and sustained uplift in funding for the domestic, family and sexual violence sector. This uplift should reflect the long-term service needs of victim-survivors, service stability and workforce development.

Recommendation 25

The South Australian government align all domestic, family and sexual violence service commissioning practices with the model commissioning principles and the model principles for reporting and data collection set out in Figure 2.4.

Recommendation 26

The South Australian government conduct a review of all current contracting arrangements for all non-government domestic, family and sexual violence services to remove any duplicative reporting and compliance obligations.

Figure 2.4: Funding and compliance

Model commissioning principles for the domestic, family and sexual violence sector

These principles describe the minimum standards underpinning any commissioning, funding or data arrangement involving domestic, family and sexual violence services.

1. **Commissioning must be grounded in genuine partnership.**

   The government must treat domestic, family and sexual violence organisations as long-term partners, not vendors or compliance subjects. Co-design, transparency and mutual accountability are fundamental.

2. **Stability is foundational to service quality.**

   All commissioning should favour multi-year agreements (minimum 3 years), with timely renewals and clear continuity arrangements. Stability enables workforce retention, safe planning and community trust.

3. **Commissioning must fully reflect the real cost of delivery.**

   Funding must include all costs associated with lawful and sustainable service delivery, including:

   a. wage growth, inflation and Fair Work rulings
   b. industrial obligations (e.g. WHS, portable long service leave, on-call loadings)
   c. mandatory reporting and quality assurance
   d. infrastructure, IT and operational support
   e. best-practice workforce training and supervision
   f. trauma-informed practices and staff wellbeing measures.

   No lawful or safe operation aspect should be 'absorbed' by services.

4. **Commissioning must be flexible and outcomes focused.**

   Services must have the freedom to respond to changing needs and emerging risks without requiring constant approvals. Contracts should focus on outcomes, not fixed activities or throughput metrics.

5. **Commissioning must prioritise need, not program categories.**

   Funding should follow the actual needs of communities and service users – not pre-defined service silos. This includes prevention, early intervention, recovery, healing, and perpetrator accountability programs.

6. **Data must be collected with purpose and used with care.**

   All reporting requirements must:

   a. be proportionate to risk and contract size
   b. avoid duplication across agencies
   c. focus on outcomes, not outputs
   d. be co-designed with the sector
   e. be funded as part of service delivery
   f. be visible and useful to both government and the service.

   Where data is not used, it should not be collected.

7. **Compliance must be risk based and scaled to capacity.**

   Smaller and specialist services must not face the same compliance burden as large generalist providers. Compliance frameworks should be risk adjusted, and streamlined across funders wherever possible.

8. **Commissioning must elevate, not marginalise, specialist expertise.**

   a. Expertise with domestic, family and sexual violence drives service design and governance.
   b. Aboriginal-led, multicultural, LGBTQIA+ and survivor-led organisations are actively included.
   c. Power is not concentrated in lead agencies at the expense of smaller or specialist partners.

9. **Cultural safety, gender equity and lived experience must underpin all commissioning decisions.**

   Commissioning must:

   a. respect Aboriginal data sovereignty and governance models
   b embed trauma- and violence-informed approaches
   c. include lived experience in system design, not just delivery
   d. fund culturally safe service models, including whole-of-family healing approaches where appropriate.

Model principles for reporting and data collection

To be applied to all commissioned domestic, family and sexual violence programs and services.

1. **Data must serve practice and policy, not bureaucracy.**

   The primary purpose of data collection is to improve service delivery and inform system-level decisions. Reporting requirements must be grounded in real-world relevance, not institutional convenience.

2. **Reporting must focus on outcomes, not just outputs.**

   Contracts should measure what matters – such as changes in safety, wellbeing, recovery and perpetrator accountability. Counting appointments or referrals is not enough.

3. **Data requirements must be co-designed with the sector.**

   Measures, tools and reporting templates must be developed with input from frontline providers, especially small, culturally led and lived experience–based services.

4. **Reporting and compliance must be proportionate to risk and scale.**

   A small, local service should not face the same data burden as a large non-government organisation. Compliance frameworks must be risk based and avoid duplicating effort across contracts.

5. **Reporting systems must be streamlined across funders.**

   Services should never have to report the same information to multiple departments or enter the same data twice. Where possible, 'report once, use many times' should be the norm. The cost of data collection must be funded. Time spent collecting, entering, analysing and interpreting data must be included in budgets. Data roles, training and system access must be funded, not treated as overhead.

6. **Cultural safety and data sovereignty are essential.**

   Aboriginal Community Controlled Organisations must retain sovereignty over their data. All data systems must be trauma-informed and culturally safe for CALD, LGBTQIA+ and other priority cohorts.

7. **If data isn't used, it shouldn't be collected.**

   Where government does not actively analyse or act on a dataset, it should stop requiring its collection. All data collection must have a defined purpose, with a clear feedback loop to services.

8. **Services must have access to their own data.**

   Organisations must be able to see, use and reflect on their own data, including service volume, outcomes and contract performance. Government should provide dashboards or support where possible.

Workforce

At the heart of the response to domestic, family and sexual violence is the specialist workforce: dedicated and compassionate individuals who work directly with victim-survivors and people who use violence. The Commission acknowledges the decades of expertise and knowledge represented in the South Australian domestic, family and sexual violence sector.

The National Plan recognises the importance of building a skilled domestic, family and sexual violence workforce across the domains of prevention, early intervention, response, and recovery and healing, stating that:

> **[w]orkers in the specialist family, domestic and sexual violence sector are often under-recognised and undervalued, and there are few clear career pathways into the sector. Specialist skills are often learned on the job and under immense pressure, and can often result in worker burn out, vicarious trauma and risks to worker safety. Providing access to counselling, supervision, mentoring and de-briefing are some ways to ensure specialist staff stay in the sector. There are additional challenges and barriers to attracting, developing and retaining skilled and qualified staff in regional, rural and remote communities, including the availability of adequate infrastructure and housing, which need to be reflected in funding models.**[287]

The National Plan's First Action Plan 2023–2027 highlights this issue in Action 3:

> **Increase and strengthen the capability of mainstream and specialist workforces to deliver quality services, activities and programs across the four domains, including those that are tailored to respond to the unique experiences of all victim survivors.**[288]

The Aboriginal and Torres Strait Islander Action Plan 2023–2025 addresses the need to '[s]upport Aboriginal and Torres Strait Islander workforce capacity and capability across systems and sectors, recognising intersections with existing systems and reforms' as a short-term priority.[289]

The capacity and capability of the specialist domestic, family and sexual violence workforce has been considered in inquiries, such as the Victorian Royal Commission into Family Violence, the Queensland Women's Safety and Justice Taskforce, the House of Representatives Standing Committee on Social Policy and Legal Affairs, and the Rapid Review.

This section focuses on the specialist workforce and the need to create a strong and sustainable workforce into the future.

The Commission recognises that ending domestic, family and sexual violence is not solely the responsibility of the specialist workforce. As the Commissioner for Domestic, Family and Sexual Violence identified in her first Yearly Report to Parliament, the national specialist workforce is less than 9,000, compared to nearly 80,000 police, over 115,000 medical professionals and nearly 690,000 allied health workers.[290]

Chapter 3 therefore explores the need to make domestic, family and sexual violence visible through greater recognition and awareness in the universal workforce and the community, and through specialist training for those who work in the justice sector, such as police, prosecutors and judicial officers.

Current state

The specialist domestic, family and sexual violence sector in South Australia is diverse and multidisciplinary, providing a broad range of services that support victim-survivors to recognise and escape violence, and hold people who use violence to account. These services include:

- crisis accommodation and refuge services
- case management for victim-survivors and their families
- specialist services for children, including trauma recovery and therapeutic support
- perpetrator intervention and behaviour change programs
- services tailored for Aboriginal, CALD and LGBTQIA+ communities
- legal support for victims, children and people using violence
- recovery and healing programs for victim-survivors
- financial counselling and economic empowerment services
- parenting programs aimed at breaking intergenerational cycles of violence
- education and early intervention programs focused on primary prevention
- workforce training for mainstream services on best practices.

The makeup of the workforce is difficult to identify and define. There are many different organisations operating within the domestic, family and sexual violence sector across prevention, crisis response, legal support and recovery.[291] Most of these organisations are part of the DFVSA or members of Embolden as the peak body. There are a number of small, specialised programs funded across health, legal and social service portfolios that provide domestic, family and sexual violence services, but do not identify as domestic, family and sexual violence service providers.[292]

The diversity of the sector, the current reliance on homelessness-focused service models and the nature of domestic family and sexual violence work has created significant challenges for the domestic, family and sexual violence workforce. These challenges include unstainable workloads due to rising demand and insufficient funding; lack of recognition of specialisation and the true cost of service provision; difficulties with recruitment, particularly in regional and remote locations; lack of funded training and development to build staff capacity; and the unrecognised and unfunded colonial and cultural load that can be placed on Aboriginal and CALD workers. As DFVSA highlighted:

> **“ The pressures of delivering services in the current environment are significantly impacting on the ability of the sector to recruit, train and retain experienced and qualified staff. This is creating significant stresses on an already-stretched sector, where burnout and vicarious trauma are very real. While the recruitment environment looks different in different areas, maintaining and developing a specialist workforce with deep understanding of gender-based violence, risk, trauma and person-centered support requires a considered response. This includes considering the impact of the Social Worker Registration Scheme on the recruitment and retention of staff.[293]**

Recruitment and retention

Recruitment and retention within the domestic, family and sexual violence sector is difficult. Short-term contracts and funding instability create barriers to recruitment and workforce uncertainty, particularly in remote and regional locations. One organisation reported that:

> **[w]e've had 11 one-year extensions for one program. It's unsustainable for staffing. We train staff to work with kids, and they leave because they know they won't have a job.**[294]

The Commission heard that this uncertainty, coupled with the intensity of the domestic, family and sexual violence work, including high caseloads and administrative burdens, can lead to burnout and staff turnover.

In a relatively small sector, workforce poaching is also an issue. Experienced workers can be drawn to government jobs that offer higher salaries, more stable employment and clearer career pathways.

Despite these challenges, some specialist service providers have low staff attrition rates due to strong team culture, strong supervision structures and wellbeing support, and pathways for internal career progression.



Minimum qualifications

Workforce shortages across South Australia and Australia, and the recent trend towards professionalisation of the workforce, present serious impediments to the ability to develop and grow the specialist workforce.

The qualifications and skills required of the domestic, family and sexual violence workforce are of significant concern to the sector. As discussed in Chapter 3, South Australia's domestic, family and sexual violence workforce comes from a variety of backgrounds, some workers possessing higher education or vocational education qualifications, while others gain skills through on-the-job training. The impending commencement of the *Social Workers Registration Act 2021* (SA) has been identified as a potential barrier to workforce entry by the specialist sector, particularly for those with extensive experience but no formal qualifications.[295]

Organisations are frustrated with the process of implementing the Social Workers Registration Act, particularly with what they see as a lack of clarity on who will be captured by the scheme and who will not. Many expressed concern that the scheme could reduce workforce diversity, predominantly impacting Aboriginal and CALD practitioners, as well as those with lived experience.[296]

The Social Workers Registration Act creates a scheme for the registration of social workers. Those who fall within the scope of practice defined by the Social Workers Registration Board must be registered in order to work as a social worker.[297] The Social Workers Registration Board also has responsibility for setting the qualifications and experience which lead to the requirement to register as a social worker and for defining the types of social work services that can only be undertaken by a registered social worker.[298]

In its submission to the Commission, the Social Workers Registration Board discussed the diverse employment practices that exist across the social service sector, noting that the sector can currently employ people in work that is sometimes high risk 'without being suitably qualified, experienced or accountable'.[299] The Social Worker Registration Board further notes that 'much of DFSV work is in the social work scope of practice and may, once defined, fall within the definition of social work services that can only be performed and managed by a registered social worker'.[300]

The Social Workers Registration Act received Royal Assent on 19 December 2021; however, the Act has yet to commence operation. When the Commission commenced its work in July 2024, it was informed that the Social Workers Registration Act would commence on 1 July 2025. That date was extended by the South Australian government in June 2025, passing the Social Workers Registration (Commencement of Act) Amendment Act 2025 (SA) less than 2 weeks before the Act was due to come into operation. The second reading speech explained that:

> **We take this step following the Social Workers Registration Board's lengthy consultation with unions, the AASW, government agencies and community sector organisations, consultation which has highlighted the complexity of social work and workforce issues, the need for multiple registration pathways to recognise qualifications, experience, associated fees and timeframes.**
>
> **Paramount in our thinking around the scheme's later commencement is our desire not to impose a new fee on hardworking South Australians. Following the passage of this bill, our work on this groundbreaking scheme will continue … It is the government's intention for Professor Wendt to continue to lead this work. She will continue to refine the specifics of the scheme until its implementation, particularly around the need for diverse pathways for registration, how best to recognise experience and how best to ensure the work of Aboriginal people who provide social work services is recognised.**[301]

It is the Commission's hope that the issues requiring resolution can be resolved in consultation with those that the scheme will most affect.

The unintended consequences of introducing a registration scheme, or mandatory minimum qualifications as was recommended by the Victorian Royal Commission into Family Violence, are highlighted by Safe and Equal Victoria:

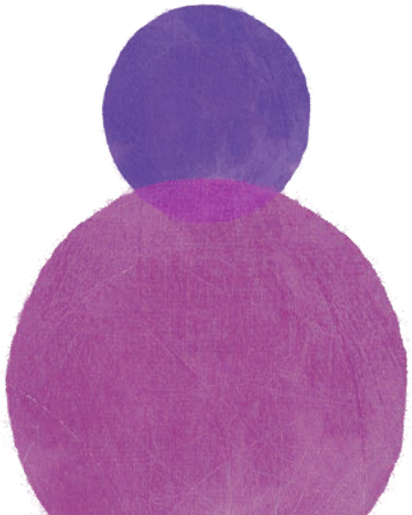
> **A sole focus on qualifications, rather than the skills and knowledge required to undertake the required roles can unnecessarily excluded people from the workforce, particularly people who face structural barriers to engaging in higher education, such as people from migrant and refugee communities, Aboriginal people, and people with a disability and undermine efforts to diversify the workforce to more accurately reflect the range of clients seeking services.**
>
> **Services have also reported that the need to hire people with minimum qualifications, or equivalent, has compounded workforce shortages and made recruitment more challenging. The onus on services to demonstrate that staff have equivalent qualifications has proven time consuming and administratively burdensome. Finally, the financial and time burden of obtaining a university degree (the minimum qualification required) compared to the pay, conditions and job security offered in the family violence sector can impact the attractiveness of working in the sector.**[302]

Specialist service providers also expressed concerns about vocational training qualifications, noting that TAFE programs, while suitable for generalist community service roles, do not generally align with the complex realities of domestic, family and sexual violence work.[303]

Development pathways

While there is an expectation from the community and the government that domestic, family and sexual violence practitioners will have specialist expertise in trauma-informed practice, risk assessment and cultural competency, there is no dedicated funding to support workforce training.[304] Some workers spoke about DV-alert, a nationally recognised training program delivered by Lifeline Australia and funded by the Australian Government Department of Social Services as a key initiative under the National Plan.[305] Although widely used, specialist service providers in South Australia told the Commission that it was largely designed for workers who may occasionally encounter domestic, family and sexual violence rather than those whose primary role is to respond to it.[306]

In the absence of formal structured training pathways, specialist service providers in South Australia have developed their own training models, including through establishing internal Registered Training Organisations to provide the specialised domestic, family and sexual violence training.



Colonial and cultural load

Diversity Council Australia defines cultural load as:

> **the (often invisible) additional workload borne by Aboriginal and Torres Strait Islander people in the workplace, where they are either the only Indigenous person or one of a small number of Indigenous people. This includes, extra Indigenous-related work demands that non-Indigenous colleagues do not have, expectations to educate non-Indigenous colleagues about Aboriginal and Torres Strait Islander people and racism, and expectations to talk on behalf of all Aboriginal and/or Torres Strait Islander people.**[307]

In a 2020 survey of more than 1,033 Aboriginal and Torres Strait Islander workers across Australia, 39% of respondents said they carried a high cultural load. This came in the form of:

- extra work demands (66% reporting having extra Indigenous-related work demands placed upon them)
- expectation to educate others (71% reporting being expected to educate their non-Indigenous colleagues about Aboriginal and Torres Strait Islander people and racism)
- expectation to represent all Indigenous people (69% reported being expected to talk on behalf of all Aboriginal and/or Torres Strait Islander people).[308]

Cultural load can include reviewing teams' work for cultural appropriateness; being expected to share personal stories that relate to culture, history and racism; being asked to deliver a Welcome to Country and/or Acknowledgement of Country; organise and contribute to cultural events when this is not part of the role; or being asked to undertake community engagement or deliver cultural training components when this is not part of the role.[309] It can also include the caring responsibilities and cultural and/or community obligations outside of the workplace that are held by Aboriginal people.[310]

In acknowledging the cultural load that can be carried by Aboriginal workers, the DFVSA told the Commission that:

> **[w]e must invest properly in ACCOs, who often carry a significant cultural load, expectation of cultural leadership and engagement, and significant expectations of staff both within their professional context, but also within a community context. Ensuring that Aboriginal services remain at the forefront of decision-making remains key.**[311]

The Commission was told that some Aboriginal people and organisations prefer to use the term 'colonial load' because their deep and personal knowledge of their culture is not a personal burden – instead, it is the way in which colonial systems rely on this knowledge (without acknowledgment or remuneration) which amounts to a burden being imposed on an Aboriginal person working within that system.

At the frontline workers forum, workers explained that colonial load is regularly being imposed on Aboriginal employees in their workplaces. The imposition of this colonial load can often occur gradually over time, without any real awareness that is it happening. These issues and expectations can lead to an ongoing and cumulative impact on Aboriginal workers which, if not addressed, can lead to harm.

The Commission has also heard that the imposition of cultural load can occur in relation to people from within CALD communities. Some services providers believe that government stakeholders often assume that service provision is best delivered through direct ethnic matching; for example, recruiting a Sudanese worker to support Sudanese clients. This is seen as an oversimplification of the issue, with service providers noting that CALD communities generally value services that offer culturally competent and trauma-informed care, rather than seeking support from someone who shares their ethnicity.

This is particularly important in regional and remote areas where CALD communities can be small and tightly connected, heightening concerns around confidentiality and stigma. Trust will often be stronger when support is provided by professionals who understand the complexities of migration, displacement and cultural expectations, but who do not share direct social or familial ties with the client's community.[312]

The Victorian government refers to the cultural load that bicultural workers can experience and the need for cultural capability for organisations employing bicultural workers in its online bicultural workforce toolkit.[313]

National Sustainable Workforce Roundtable

Similar issues were highlighted in the September 2024 Sustainable Workforce Roundtable in Adelaide, which was co-convened by the Domestic, Family and Sexual Violence Commission and Embolden as part of a series to create a space for national conversations on areas of priority and opportunities to accelerate implementation of the National Plan.

The Summary Report from the Sustainable Workforce Roundtable identified the following key priorities:

- strong support for a national workforce strategy
- recognition of the importance of family violence and sexual assault specialisation and the need for a focus on building these specialist workforces
- recognition of the unique challenges facing ACCOs and their workforce
- building the capability of mainstream service providers is key to improving the capacity of the system to delivering better outcomes
- leadership and professional development are critical to retention in specialist workforces
- more flexible approaches to funding and funding models informed by local knowledge would lead to greater outcomes.[314]

Future state

Current services need to be expanded and new services established in order to better support victim-survivors of domestic, family and sexual violence and to hold the people who use violence accountable. Greater and more flexible funding for the sector, as discussed in the previous section, is critically important. However, throwing money at the domestic, family and sexual violence sector is not enough. There must be investment in the specialist workforce that does this critical work to ensure that when victims survivors seek help, they get the help they need at the time they need it.

Despite the role that the specialist workforce plays in keeping victim-survivors safe and holding people who use violence accountable, there is no national or South Australian domestic, family and sexual violence workforce strategy in place that addresses the recruitment and retention of these workers. Many of the specialist service providers in South Australia called for the development of workforce strategy. Embolden recommended:

> **[d]evelopment and implementation of a dedicated and targeted workforce strategy for the specialist domestic, family and sexual violence services sector in South Australia. An effective workforce strategy will require comprehensive planning to address the broad range of issues currently facing the sector, including social work registration and competition for staff across sectors in the context of current reforms.**[315]

Embolden's recommendation was supported by the South Australian Council of Social Service (SACOSS), which also recommended 'stronger investment in First Nations specialist DFSV services' and a workforce that includes 'staff with lived experience of disability, or disability-specific training'.[316] The DFVSA supported Embolden's recommendation, noting that identification, recruitment and retention of staff was difficult.[317]

Similarly, the South Australian government identified a need for a workforce development strategy and the:

> **continued need to invest in training and development for other frontline workers in the broader human services sector, including those within government service delivery agencies, to ensure that they are equipped to respond to the needs of victim-survivors, to work collaboratively with other service providers including the specialist domestic, family and sexual violence sector, and to inform operational and strategic policy development so their own work results in best practice and effective interventions to prevent, intervene early or respond to domestic, family and sexual violence.**[318]

In its first Yearly Report to Parliament, the national Domestic, Family and Sexual Violence Commission also noted the need for a national workforce strategy, stating that:

> **[w]orkforce capability development needs national leadership, prioritising the specialist domestic, family, and sexual violence workforce. Since addressing domestic, family and sexual violence is a key element of work across many sectors, capability development and integration with these workforces is an opportunity to improve system responses.**[319]

A safe and effective domestic, family and sexual violence system requires a coordinated, sustainable, compassionate, culturally responsive, trauma-informed and inclusive workforce. The South Australian government must develop and fund a statewide workforce strategy that will support the implementation of the recommendations in this report, consistent with the approach taken in other jurisdictions such as Western Australia and the Northern Territory.[320]

The toll of domestic, family and sexual violence work must be recognised in the workforce development strategy through the inclusion of strategies around vicarious trauma training, wellbeing support and supervision structures. The Commission was impressed by the care and consideration among the workforce when dealing with these issues, and of the considerable efforts the sector employs to support its workforce, often against remarkable challenges and odds. The diversity of qualifications and lived experience in the sector must also be recognised and valued, not just formal tertiary qualifications.

Services should be expanded through a measured and phased approach to ensure that the expansion of services and the establishment of new services recommended in this report have an appropriately skilled workforce to support them. The South Australian government must learn from the experiences of Victoria as outlined in Safe and Equal Victoria's submission:

> **"One of the largest sequencing challenges of the Victorian family violence reforms was workforce planning. A significant financial investment was made into frontline specialist family violence services to respond to the increasing demand for family violence support. However, frontline services quickly discovered that the workforce to recruit simply did not exist.**[321]

> **"It is important to have a planned, deliberate, and strategic approach to recruiting, developing, and supporting the specialist workforce across the spectrum of the family violence continuum from primary prevention to recovery to ensure a timely, effective response to victim survivors and a broader system to prevent violence in the first place.**[322]

> **"Governments and services must engage with universities, TAFEs, and professional accreditation bodies in collaborative planning, curriculum design, and workforce strategy development to build a sustainable workforce pipeline that can adequately respond to increasing service demand. Particular attention needs to be given to developing the workforce required to respond to and support children and young people, to provide them with a suitable, tailored response addressing their own needs as victims' survivors, not as an extension of their parents.**
>
> **Workforce planning also needs to integrate ongoing workforce supports such as access to training, clinical supervision, family violence informed EAP services and flexible working options to mitigate the effects of vicarious trauma as well as chronic burnout, as well as strategies to encourage wider participation of men in the specialist family violence workforce.**[323]

Chapter 3 identifies pathways to embed domestic, family and sexual violence content within relevant VET qualifications. There is a need to understand the VET needs of the domestic, family and sexual violence sector, both in terms of pathways into the sector but also pathways to specialise existing workers (whether from within the domestic, family and sexual violence sector or elsewhere) in areas of high need, such as working with children and young people or working with people using violence. The VET system's levers to introduce microcredentials or 'skill sets' should be explored in this context.

Finally, there is a need to address colonial and cultural load through mechanisms relating to managing psychosocial risk.

In South Australia, the *Work Health and Safety Act 2012* (SA) and the *Work Health and Safety Regulations 2012* (SA) set out the laws relating to the health, safety and welfare of people at work. These laws impose duties on employers, referred to as Persons Conducting a Business or Undertaking (PCBUs), to manage risks to both physical and psychological health. The obligations include identifying, assessing and controlling psychosocial hazards.

Psychosocial hazards are hazards that arise from or relate to the design or management of work, the working environment, plant at a workplace, or workplace interactions or behaviours. A model code of practice, titled the Work Health and Safety (Managing Psychosocial Hazards at Work) Code of Practice 2024 (Model Code of Practice), was published by SafeWork Australia in 2022 (and updated in 2024) to provide guidance to PCBUs and regulators on achieving the standards set under work health and safety laws in relation to psychosocial risks.[324]

The current version of the Model Code of Practice identifies 17 psychosocial hazards. Some, such as job demands, low job control, poor support and lack of role clarity are all arguably relevant to the issue of colonial and cultural load.

The legal duties of a PCBU are to identify psychosocial hazards in the workplace, assess the associated risks, implement control measures to eliminate or minimise the risks and then review and maintain the effectiveness of these measures. A PCBU must consult, so far as is reasonably practicable, with the PCBU's workforce in relation to each of these steps.

Compliance with work health and safety laws in South Australia is overseen by SafeWork SA. SafeWork SA can investigate concerns about psychosocial hazards in order to assess the PCBU's compliance with their obligations under the relevant laws. While the Model Code of Practice is not an 'approved' code of practice in South Australia, it provides guidance to PCBUs about their obligations in relation to psychosocial risks.

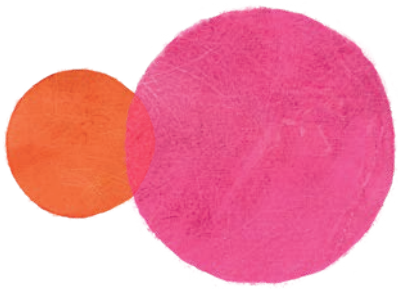
The Commission is of the view that the South Australian government should advocate for the inclusion of an 18th psychosocial risk in the Model Code of Practice relating specifically to the imposition of colonial and cultural load.

If implemented, the psychosocial risk relating to the imposition of colonial and cultural load would require PCBUs to specifically turn their minds to the ways in which their workplaces may impose colonial and cultural load on their workers and develop processes to manage this psychosocial risk. Options could include (among others):

- the development of a structure to remunerate the performance of functions associated with colonial and cultural load
- a review of role descriptions to specifically identify roles that will require the performance of functions associated with colonial and cultural load
- processes to consult with Aboriginal and CALD staff about their willingness to undertake functions associated with colonial and cultural load.

The creation of a specific psychosocial risk on this topic will also empower work health and safety regulators to educate PCBUs about best-practice approaches to this issue and monitor compliance.

The South Australian government, via the Commissioner for Public Sector Employment, should also develop a framework across the public sector for identifying, understanding and managing colonial and cultural load across the public sector workforce. Many of the websites maintained by each Australian jurisdiction's Commissioner for the Public Sector equivalent shows an acknowledgement of the existence of cultural load and the obligation on the public sector to manage this issue appropriately.[325] It does not appear that the South Australian website includes any similar content.



Recommendation 27

The South Australian government develop and implement a 10-year workforce development strategy for the domestic, family and sexual violence sector. The strategy should:

a. identify the domestic, family and sexual violence workforce
b. be developed consistent with the Closing the Gap priority reforms
c. address workforce capability, organisational capability and sector development through foundational training, service governance, recruitment and retention, and collaborative learning
d. build pathways to specialisation, including through micro-credentials and skill-set models.

Recommendation 28

The South Australian government establish a Domestic, Family and Sexual Violence Workforce Fund, informed by the 10-year workforce development strategy and with the purpose of increasing the supply of workers within the domestic, family and sexual violence sector and the specialisation of the workforce.

Recommendation 29

The Minister for Industrial Relations advocate for Safe Work Australia to develop (in partnership with community-led organisations) an 18th psychosocial risk for inclusion in the Work Health and Safety (Managing Psychosocial Hazards at Work) Code of Practice 2024 relating specifically to colonial and cultural load through the Meetings of Workplace Relations Ministers / Work Health and Safety Meeting of Ministers.

Recommendation 30

The Commissioner for Public Sector Employment develop a framework for identifying, understanding and managing colonial and cultural load across the South Australian public sector, aligned to the approach taken in other jurisdictions.

Endnotes

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19 This point has been well articulated by Danielle Elston, Managing Director of Good Government Advisory, in the *Westminster Tradition* podcast about public sector failures and lessons for public administration.

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21 The Commission understands that as of 1 July 2025, Local Service Areas are now known as Regional policing areas.

22 For example, Queensland Police operates a Domestic, Family and Vulnerable Persons Command, Victoria Police's Family Violence Command includes sexual violence and child abuse teams, Tasmania Police operates a Family and Sexual Violence Command, and Northern Territory Police operates a Domestic Violence and Youth Command.

23 For example, Victoria Police employ Family Violence Liaison Officers and Court Liaison Officers; New South Wales Police run a 24/7 Domestic and Family Violence registry with intelligence, legal and psychologist functions and also employ Domestic Violence Liaison Officers; and Western Australia Police embeds Domestic and Family Violence Coordinators at their Communications Centre.

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Chapter 3

Making domestic, family and sexual violence visible

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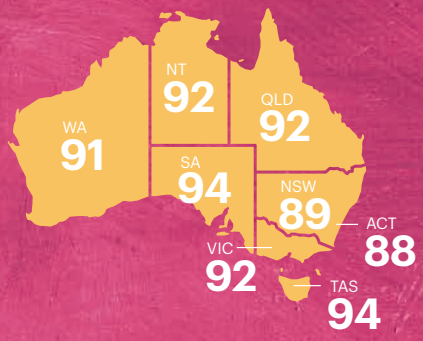
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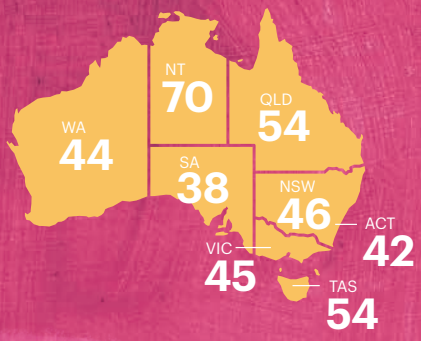
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At a glance

Percentage who agreed that violence against women is a problem in Australia



Percentage who agreed that violence against women is a problem in their suburb or town[a]





1 in 4 women

experience emotional abuse by a cohabiting partner

But only 66%

of Australians recognise that repeatedly criticising a partner to make them feel bad or useless is 'always' domestic violence[b]



1 in 5 women

has experienced sexual violence

But the real prevalence of sexual violence continues to be undermined, when ...

24–34%

view allegations as a way of 'getting back at men' or because they later regret consensual sex[c]



Only 1–10%

of sexual assaults are false allegations, with the vast majority being true[d]



Almost 1 in 5

Australians believe that women are most likely to be sexually assaulted by a stranger

When only 6%

of women experienced sexual violence by a male stranger

While 20%

of women experienced sexual violence by a known male[e]

Introduction

Our communities really need to understand that DFSV is not a 'women's issue' – it is a 'whole of community issue'. People who choose to use violence can also choose NOT to use violence. Education in schools, sporting clubs, workplaces and other community settings where diverse groups of folks gather are so important to help get that message out to the wider community. This will also help break down the shame and stigma which still exists for victims and victim survivors of DFV and in doing so, provide opportunities for disclosure, discussion, meaningful support and change.[1]

Domestic, family and sexual violence thrives in silence. It continues to devastate lives across Australia – not because we don't know it exists, but because awareness has not always translated into meaningful action. The impact of this violence goes far beyond physical harm. It isolates people, silences them, and erodes their safety and dignity. The emotional and psychological toll, which includes shame, guilt and fear of not being believed, often lasts far longer than any visible injuries. This violence occurs everywhere: in every community, across every cultural background, socioeconomic group and age bracket. It happens between intimate partners, within families and kinship networks, among friends and strangers, and in carer relationships and workplaces. Different communities experience and respond to domestic, family and sexual violence in distinct ways, which can be influenced by structural inequalities, cultural norms, gendered expectations and historical injustice.

Too often, domestic, family and sexual violence remains invisible, dismissed as a private matter. Myths and outdated beliefs persist, and while people may understand that violence is wrong, many struggle to confront the fact that it is happening close to home – in their workplaces, neighbourhoods and families.



This lack of understanding is reflected in the 2021 National Community Attitudes towards Violence against Women Survey (NCAS) which found that, although attitudes are gradually shifting, many Australians still do not recognise violence as a problem in their own communities, even though more than 1 in 4 (27%) women in Australia have experienced violence by an intimate partner or family member in their lifetime.[2] South Australian NCAS data indicates that 94% of South Australians agreed that violence against women is a problem in Australia, but only 38% of South Australians agreed it is a problem in their suburb or town.[3] This reveals a dangerous disconnect between awareness and action. This disconnect is not just a statistic – it is a structural barrier to change. It reveals that while people may acknowledge the issue in theory, they struggle to take ownership of the problem where it counts: in their everyday lives and local communities.

Despite this widespread harm – and decades of public awareness campaigns – our systems, institutions and communities have been slow to move from recognition to responsibility. When communities fail to recognise the gendered and intersectional nature of domestic, family and sexual violence, they fail the people living through it. When we ignore or minimise this violence, we create the conditions for it to thrive – leaving victim-survivors without the support they need, and allowing those who use violence to avoid accountability.

A persistent gap remains between what Australians believe about domestic, family and sexual violence and what the evidence shows.

In 2023, ANROWS analysed data from the PSS and the NCAS and found a stark dissonance between public perceptions and the lived reality of violence.[4] Their findings revealed that myths and misinformation continue to shape how Australians understand – and misunderstand – this violence. For example:

- 2 in 5 Australians said men and women are equally likely to perpetrate domestic violence even though 77% of people who have experienced intimate partner violence reported a male perpetrator.
- 1 in 5 women reported experiencing sexual violence, but 24–34% of Australians viewed allegations of sexual violence as 'revenge' or claim that the accuser simply regretted consensual sex,[5] undermining victim-survivors and reinforcing stigma.

The analysis also highlighted dangerous misunderstandings about non-physical abuse, with only 66% of Australians recognising 'that repeatedly criticising a partner to make them feel bad or useless is "always" domestic violence'.[6] This shows how coercive control and emotional abuse are still minimised, despite the deep psychological harm they cause.

This is consistent with what victim-survivors and advocates told the Commission: we need greater public understanding and visibility of all forms of domestic, family and sexual violence – especially the patterns of power, control and manipulation that underpin coercive and non-physical abuse.

> **There needs to be more information / factual information about what rights women and children have in regards to financial control, separation, cohesion etc. Many women do not identify for a long time that this is DV.**[7]

> **One of the greatest challenges I faced was not realising that what I was experiencing was coercive control.**[8]

The Commission has heard that engaging boys and men is not optional – it is essential to prevent domestic, family and sexual violence. Raising awareness among men and boys, particularly through visible and positive male role models who challenge harmful norms and demonstrate respectful models of masculinity, is a critical part of the solution. When men speak up, lead by example, and take responsibility, it sends a powerful message: violence is never acceptable.

This growing recognition is reflected in the National Plan, which highlights the vital role of men and boys in driving cultural change and contributing to a safer, more respectful society for all, stating that:

> **Men and boys play an important role across all parts of society, as people who will work to embed prevention approaches in all settings, not just homes. Men as educators, employers and employees, frontline workers (including police and health care providers), journalists, legal professionals, sports players, parents and carers, citizens and leaders (including faith and community leaders) can champion change, as well as create the conditions that prevent violence, abuse, discrimination and harassment. Similarly, professional development across a range of sectors will better equip men to engage and support victim-survivors when they report violence.**[9]

Urgent action is needed to build the knowledge, confidence and capability of the workforces who are often the first – and sometimes only – point of contact for those experiencing domestic, family and sexual violence. These include police, ambulance and emergency services, health professionals, social workers, lawyers, prosecutors, judicial officers and child protection and family law practitioners.

Through submissions, Share With Us, hearings and consultations, the Commission consistently heard that these frontline and justice system professionals are not always equipped with the training required to recognise signs of domestic, family and sexual violence, respond safely and sensitively, or make timely referrals to specialist services. Without this foundational training, victim-survivors are left without safe pathways to seek support, and violence remains hidden.

Every informed response from a frontline worker challenges the silence that allows violence to thrive. Every skilled intervention increases the visibility of domestic, family and sexual violence – sending a clear message that violence is unacceptable and preventable, and that victim-survivors will be heard and supported.

> **“ Frontline workers such as police, ambulance, firefighters, agency workers, DCP, family law staff including lawyers and magistrates need to be given training to recognise family and domestic violence and how to respond; with the aim of keeping victim survivors (which includes children) safe.**[10]

South Australia’s universal services workforce also plays a central role in the domestic, family and sexual violence system. Their ability to recognise violence in all its forms – including coercive control – and to safely respond or refer people at risk is essential to prevention, protection and justice. This requires targeted, ongoing training that equips them to challenge myths, manage risk, and stop the cycle of harm.

While general awareness of domestic, family and sexual violence is increasing, the evidence is clear: awareness alone is not leading to the shared responsibility and cultural change needed to drive prevention. The frontline and justice system workforce is uniquely placed to bridge this gap – not only by responding effectively, but by helping shift the wider community’s understanding of what violence looks like, and what it takes to end it.

This chapter outlines the urgent need to invest in workforce education as a pathway to prevention, improved support for victim-survivors and stronger community recognition of the issue, because when we train the workforce to see, prevent and respond to violence, we also help communities see it.



The call to action

Violence is a choice, and those who choose to use it can also choose not to. We all have a role to play in challenging the attitudes, behaviours and systems that allow violence to continue.

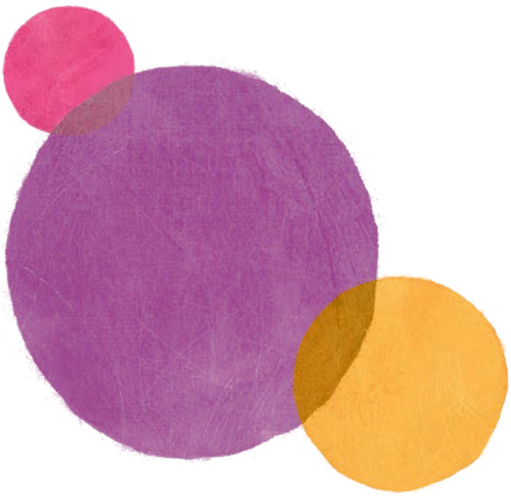
When communities can recognise domestic, family and sexual violence, and understand its gendered and patriarchal roots, they are better equipped to prevent it, intervene early, and respond safely. Awareness is not just a first step; it is the foundation for lasting change.

A lack of awareness prevents people from recognising their own experiences as abuse, deters bystanders from acting, and allows institutions to fail those who need support the most. For awareness to be effective, it must go hand in hand with a strong understanding of the drivers of violence and the shared responsibility to address it. Domestic, family and sexual violence is not a private matter – it is a systemic, societal issue that requires action across governments, workplaces, communities and institutions.

The Commission has identified a clear need for government-led and community-driven strategies to strengthen awareness across all South Australian communities – across all ages, backgrounds and identities. Everyone should be able to recognise behaviours that fall outside of safe, respectful and consensual relationships. When individuals know how to recognise violence, they are more likely to act – to support someone at risk, to seek help themselves, and to hold others accountable. Raising community awareness also supports prevention. This is not just about changing attitudes, but shifting norms, dismantling stigma, and building a culture where violence is visible, unacceptable and preventable.

To make this possible, information must be accessible, inclusive and easy to act on. Awareness strategies must:

- be coordinated across sectors and led with community input
- draw on successful models like saturation messaging campaigns (as outlined in Chapter 7)
- use centralised resources such as a dedicated government website
- be supported by community-led initiatives and culturally safe, locally relevant messaging.



Crucially, these strategies must also focus on South Australia's workforce, particularly those whose professional roles bring them into contact with people experiencing or using violence. There is a clear opportunity to embed domestic, family and sexual violence education across all levels of workforce training – from higher education and vocational programs to ongoing professional development.

Professional regulators, employers and industry leaders must take responsibility for ensuring their sectors understand how violence manifests in their settings, and how to intervene safely and effectively. This includes social workers, healthcare providers, legal professionals, educators, counsellors, community service workers, disability and aged care workers, and many others. Empowering the workforce is empowering the community.

Raising general awareness across the workforce is critical – but not enough. There is an urgent and non-negotiable need to implement specialised, evidence-based education and training for those within the police force and the justice system. The justice system cannot be a place where outdated beliefs are amplified – it must be a system that leads with knowledge, integrity and accountability.

Police, prosecutors and judicial officers hold enormous power in how domestic, family and sexual violence is recognised, understood and addressed. Without extensive, ongoing training, that power can be a mechanism that reinforces harm. This training must do more than tick a box. It must build the capability to:

- identify and manage risk
- understand the complex dynamics of abuse, including coercive control
- recognise and reject myths and misconceptions that continue to undermine victim-survivors and excuse perpetrators.

Domestic, family and sexual violence is not inevitable. It is only invisible when we fail to name it, confront it and act on it. We must stop allowing silence to shield harm. Instead, we must equip our systems, especially the justice system, with the insight and tools to respond effectively and fairly.

Making the invisible visible means building a justice system that listens, believes and protects. It means building a community that shares the responsibility to end violence – and refuses to look away.

Community awareness mechanisms

Current state

The Commission has been told consistently that there is still a significant lack of awareness in the community about how to recognise and respond to domestic, family and sexual violence.

While broad public education on domestic, family and sexual violence is important, the Commission has heard that mainstream public education campaigns often fail to meet the needs of diverse communities. Older people, people with disability children and young people, CALD communities, Aboriginal communities and LGBTQIA+ communities can each experience specific forms of violence that may not be well known or recognised by the public, or by service providers, police and the justice system. These communities are also more likely to experience intersecting forms of discrimination such as racism, homophobia, transphobia, ableism and ageism.

Despite the intersecting vulnerabilities and discrimination faced by some communities, these communities are often under-represented in public education efforts and service-delivery provision. A theme across the inputs the Commission received from these diverse communities is the need for community-led, strengths-based education initiatives, accompanied by appropriate, culturally safe, inclusive and accessible service delivery.

On Day 3 of public hearings, the Commission heard evidence from Mr Jake Battifuoco, General Manager at Power Community, about one such community-led awareness-raising organisation.

Power Community focuses on using sport to advance reconciliation and celebrate cultural diversity in Australian communities, wellbeing and resilience outcomes, education and promotion of respectful and healthy relationships for young men and women, and education for young people on safety in online communities.[11]

> **[T]he unique hook within this particular program is obviously our brand and the players as role models and so it's co-delivered in partnership between PCL staff and also players. And a real key driver behind the messages driving through to these young people is leveraging the players' voices, role models within the community.**[12]

Power Community is also working to bring young women into these initiatives by engaging with women athletes.

The Australian Refugee Association recommended the inclusion of domestic, family and sexual violence information and available support in settlement and welcome packages for new arrivals and increased funding for community education and awareness campaigns.[13]



In some regional listening sessions, the Commission was told of the very clear need for domestic, family and sexual violence information to be made available to seasonal workers.

> **Many have fled regions where their and their families' physical survival has been at risk for generations. They come from places with differing attitudes and responses to domestic and family violence or a complete lack of knowledge about it. Certain behaviours and practices are highly encouraged and supported in their home countries, and these behaviours and practices become ingrained in everyday life. For them, this may seem to be the only way to protect their families, even though some of these behaviours/practices might be problematic in the Australian context or might not be beneficial for their families safety and well-being. It is crucial to create a culturally appropriate and safe environment for newly arrived communities in order to help them navigate through a process of change. This involves unlearning certain behaviours and harmful cultural practices, as well as understanding the impact of these behaviours and practices on women, children, themselves and the community.**[14]

Many written submissions and inputs to the Commission highlighted the need for community-led awareness and education campaigns and programs that focus on the particular needs of the relevant community.

> **Pervasive negative attitudes arising from ableism, discrimination, practices of segregation and congregation, and exclusion result in the 'othering' and devaluing of people with disability and this is one of the drivers that leads to an even greater acceptance of mistreatment of members of the disability community than others.**[15]

> **with family, friends, workplaces and just the general community, there is that lack of awareness that can affect LGBTQ + people. So, they're not always looking out for the signs that that person might be experiencing violence, or if the person is perpetrating violence, they might not recognise it as domestic and family violence again. So because of that there's no interventions, there's no referrals, there's no conversations with people experiencing violence**[16]

> **I think Aboriginal people know how to get messages out into what forums and how to do it. And if you went to local communities, they would say, just come out and yarn with us.**[17]

> **Many older people and those within their community networks may not recognise they are in a situation of DFSV because their expectations and tolerance are shaped by traditional gender roles that they grew up with. Raising awareness in these population cohorts is vital for prevention, along with educating community members to identify signs of DFSV.**[18]

> **While some young people were aware of public awareness campaigns, most felt these were too infrequent, overly generalised, or designed for adults – and that they did not resonate with them or their experiences of violence. Young people interviewed recommended that future campaigns be made visible on platforms that young people actually use, such as Instagram, TikTok, and YouTube; include real stories or scenarios they can relate to; use accessible language and diverse representation; and provide direct links to youth specific services or supports…A number of young victim-survivors spoke to the value of community-wide education campaigns that could reach parents, faith leaders, sporting coaches, and other influential adults, as well as children and young people.**[19]

A common theme from people with lived experience of domestic, family and sexual violence was that family members, workplaces and communities were not always aware that non-physical behaviours could be a type of violence. These submissions told the Commission that the focus on individual acts of physical violence prevented people from recognising that they were experiencing coercive control and that the person using that form of violence was unable (or unwilling) to accept that their behaviour was a form of abuse. This lack of understanding across the community leads to missed opportunities for prevention and early intervention.

> **He was good to the kids, he had a job and provided well and as long as I did things within the lines of his expectations everything was fine. He was just being overprotective. He was jealous because he loved me so much. He was worried he'd lose me because he loved me so much. He knew of all my hardships, so he wanted to protect me from the whole world because he loved me so much. It would be years before I'd even realise it was his way of controlling me.**[20]

> **I am now out of those relationships and recognise what the red flags are that can lead to domestic violence situation. However, at the time I did not recognise the abuse was happening due to my disability which is autism. Many of his friends and family are under his manipulation and have now apologised for not stopping the abuse.**[21]

> **People should learn to talk to others about DV and sexual violence, I regularly went to work with choke marks around my neck and no one said anything to me. It should not be a taboo subject. The violent person should be removed from the home.**[22]

> **All commented on the need for better community understanding of the existence, nature, and origins of domestic, family, and sexual violence in our communities. …Some commented on the need for the community at large to have a better more empathic understanding of the impact of abuse on the victims and how trauma and low self- esteem can be exacerbated by unhelpful/judgmental opinions directed at those living in violent relationships.**[23]

> **To effectively prevent violence, it is crucial that a whole of population approach is taken to educate the entire community. This ensures that individuals within, aligned and beyond the sector are aware of the underlying drivers of violence and able to recognise the various forms of DFSV when they occur. Without this broader understanding, efforts will be inherently ineffective as we try to address a problem that is not fully understood.**[24]

Recognising, preventing, responding to and ultimately ending domestic, family and sexual violence will not be possible without engaging directly with those most at risk of using violence. In November 2024, Our Watch reported new data which revealed that 4 in 5 men surveyed 'want to change the alarming rates of violence against women' but that almost half said they cannot do anything to prevent this violence.[25]

The Commission heard that deficit-focused and homogenising narratives about men and masculinity still exist, but this is changing.

The Rapid Review cautions that framing masculinity through a deficit lens can fail to resonate with many men and boys, and may leave them without clear, affirmative pathways to engage in positive, respectful behaviour.

> **“ Stigma and education in community is hard ... We are still telling people that just because you aren't hitting someone doesn't mean it is ok ... Coming in and shouting and making her feel scared, that is still domestic violence.**[26]

Programs grounded in strength-based messaging create space for boys and men to understand their roles in preventing violence, while also fostering self-worth, emotional literacy and healthy models of masculinity. These approaches demonstrate that engaging men in respectful, positive ways can shift culture and reduce violence.

Examples such as The Man Cave, The Men's Project and She Is Not Your Rehab are actively reshaping how we engage men and boys – not through blame, but through connection, respect and positive identity-building. These efforts demonstrate that men and boys are not the problem to be fixed, but essential parts of the solution.

Positive messaging is already happening and resources to engage men in prevention are increasingly available. The challenge now is to amplify these approaches. The need to engage with boys and men in prevention efforts is discussed further in Chapter 7.

Harmful online environments and technology-facilitated abuse

We must confront how technology and digital spaces intersect with domestic, family and sexual violence, and how they can shape harmful norms. Unregulated online environments can now act as powerful counterforces to in-person prevention efforts, threatening the progress made through education and community engagement. Two separate but related concerns have emerged:

- Some online platforms are increasingly being used to cause harm. Harmful online environments can function as echo chambers of disinformation and serve to reinforce harmful gender stereotypes, myths and misogyny. Some excuse, normalise or even encourage violence.
- Technology and online platforms are also being weaponised to directly facilitate abuse, including surveillance, image-based abuse and technology-facilitated coercive control.

Public awareness of the risks posed by social media, algorithms, influencers and harmful online environments is growing. Much of this attention has focused – rightly – on the experiences of children and young people, and has been accompanied by increasing public discourse about the rise of manosphere and incel subcultures.[27]

It is critical that we not only protect young people from the impacts of these online harms, but also recognise the serious effects on adults, who are regularly exposed to disinformation, discrimination and misogynistic content that fuels violence and division.

Many current prevention efforts focus on educating children and young people about respectful relationships, consent and equality, especially in schools and other in-person environments where learning and social development take place. But these efforts are being undermined by the scale, speed and influence of online platforms, where violent, misogynistic and anti-equality content circulates unchecked.

To prevent domestic, family and sexual violence, we must address harmful online environments as a burgeoning part of the problem. This means stronger regulation, greater accountability for platforms that proliferate harmful content, and digital literacy and awareness initiatives that equip all people, especially young men and boys, with the tools to resist and reject messages of discrimination, bigotry, hate and harm. Regulatory measures are outlined in Chapter 7.

> **"The assumption that young people would organically develop better understandings of and attitudes towards DFSV has not been realised in some areas and young people can hold misinformed understandings of DFSV.**[28]

> **"Despite all contributions there is plenty of evidence that the amount of domestic violence is rising and not reducing, that what we are doing to stop it is not working or is inadequate and that new avenues of social interaction, such as social media, are having a huge and deleterious impact on women in general and on domestic violence in particular.**[29]

Community awareness of the dangers posed by harmful online environments is now more essential than ever. As digital platforms become more embedded in daily life, so too do the risks they present – not just to children and young people, but to adults as well. Digital literacy and awareness is a crucial form of protection, and we must ensure communities are equipped to understand how these environments influence beliefs, behaviours and, ultimately, safety.

Innovative and accessible strategies are needed to improve public understanding of how algorithms and 'recommender systems' work, and how they can drive people into spirals of harmful content. As the eSafety Commissioner has warned, cumulative online exposure to 'the algorithm effect' can lead to dependency, exposure to misleading content, and immersion in echo chambers which may 'encourage or reinforce harmful attitudes, thoughts and behaviours'.[30]

In some instances, people will be led into 'rabbit holes' of conspiracy, disinformation, pseudo-legal beliefs, extremism and radicalisation that have profound adverse effects on their own and other's lives.[31] In these spaces, harmful content is not just consumed – it is amplified and normalised.

One mother shared her harrowing experience of how her teenage son, after escaping violence with her, was drawn into violent online subcultures:

> **"these extremist beliefs were both fed to him by his father but also through his father encouraging and supporting my son's addition to social media and horrific content, gangs, online toxic masculine influencers like Andrew Tate and violent videos... After 14½ years of my trying to instil values, ethics and morals into my son and giving him all the love and care and protection needed from a monster he chose to go live with the monster we escaped, where there are no rules, no bedtime, no phone limits, no limitations on social media, violence, sexist and extreme content, where he can set up accounts on any platform, communicate and hang out with strangers, adults, gangs, taking drugs, alcohol and vaping etc... All whilst in a very confused state of swinging from telling me he is depressed and lonely to wanting to kill his father.**[32]

This is not an isolated case. Online radicalisation, exposure to violence, and the erosion of empathy are real and growing threats. These harms do not just appear in the darkest corners of the web – they are delivered through common platforms, algorithms and influencers, often with no accountability.

And, while we cannot 'switch off' the internet, we can and must build strong, informed communities capable of recognising online harm and pushing back against it.

The Commission heard about how technology is being weaponised by people who use domestic, family and sexual violence. This includes abuse by SMS and email, technology-enabled stalking, account hacking, online financial abuse, impersonation, and sharing degrading or intimate content online. As more devices become networked or cloud-based, and as AI continues to develop, so will the many different types of technology-facilitated abuse continue to evolve. For example, image-based abuse, being the unauthorised sharing of (or threats to share) invasive, private or denigrating images or videos, now includes deepfakes and AI-generated images.[33] Technology-facilitated abuse is no longer emerging – it is entrenched and evolving.

The eSafety Commissioner has found that in cases of domestic, family and sexual violence involving children, more than 1 in 4 (27%) include technology-facilitated abuse such as stalking, monitoring and blocking communication.[34]

We must acknowledge that violence has gone digital, and our prevention, regulation and community awareness and education efforts must evolve to meet that reality.

Many victim-survivors shared their experiences of technology-facilitated abuse with the Commission:

> **"I remember an incident when my ex-husband placed a phone in my handbag to record my conversations with the psychologist, and on another occasion, he concealed a phone beneath the floor mats of my car... He began installing cameras around the residence, including one that would trigger an alarm on his phone whenever I moved my car from the garage or exited through the front door. He started parking his vehicle behind mine to obstruct my ability to leave. He tracked my phone and frequently showed up at locations I visited, such as the gym, which ultimately led me to stop going there.**[35]

> **"[person using violence] has been active on multiple dating sites, claiming to be semi-retired and working as a currency trader, this was a way for him to get women to invest... he is currently talking to 27 women.**[36]

> **"I went to the police station over 5 times with only one report being made and the police did not escalate anything not even when I gave them the stalking 'tile' tag he put in my car that my mechanic found wrapped in plastic. The police just took the item and some notes... The support was zero...**[37]



As technology continues to evolve rapidly, so too must our understanding of the risks it poses. It is essential that all South Australians – especially those in frontline, justice and education sectors – have the knowledge and tools to recognise and respond to technology-facilitated abuse and the broader harms of some online environments.

Raising awareness across the whole community is critical. But awareness alone is not enough – we must also ensure that the systems tasked with responding to domestic, family and sexual violence are equipped to deal with the digital dimensions of that abuse. This includes supporting professionals who engage with both victim-survivors and those using violence, ensuring they can identify signs of technology-facilitated abuse and respond effectively.

Equally, we must invest in the capabilities of educators, parents, and those working with children and young people to help them build digital resilience. These trusted adults play a key role in supporting young people to navigate harmful online environments, recognise early warning signs, and understand the link between online exposure and real-world harm.

South Australia is in a strong position to lead in this space by building on the critical work of the eSafety Commissioner whose research, regulation and education efforts offer valuable guidance on how to address digital threats. Continued support for the eSafety Commissioner's work will be vital to keeping pace with emerging technologies and ensuring our responses are informed, effective and future-focused.

South Australian and national community awareness campaigns

Community awareness campaigns and resources around domestic, family and sexual violence have been used in South Australia and at the national level for some time with varying degrees of success.

In South Australia, community awareness campaigns have recently been run in relation to coercive control. The first phase of the See the Signs campaign ran between March and May 2023 and targeted young people aged 15–24. The campaign was also promoted during the 2023 FIFA Women's World Cup from July to August 2023.

In its submission to the Commission, the South Australian government advised that the campaign achieved the 2 objects that were measured:

- 9,210 visits to the website during the initial campaign period, which was a 168% increase from the previous Break the Cycle campaign
- 1,890,773 social media impressions and 9,600 clicks, and potential media audience reach of over 1.4 million.[38]

Phase 2 of the campaign was delivered by the Legal Services Commission. It was extended to a wider audience (people aged 18–55) and included the development and delivery of culturally appropriate and targeted legal education. According to the South Australian government submission, Phase 2 saw a 19% increase in unprompted community awareness of the term coercive control within the campaign's targeted audience.[39]

The South Australian government also partnered with the Council on the Ageing South Australia (COTA SA) in 2024 to undertake a 12-month research project examining the unique experiences of older women affected by domestic, family and sexual violence.[40] The research project identified 4 key messages which resulted in the development of posters and bus shelter advertising materials to promote these messages in the community, together with a webpage offering a list of family, domestic and sexual violence services and supports.[41]

The Commission heard evidence from Ms Miranda Starke and Ms Rachel Nielsen from COTA SA during Day 9 of public hearings. The Commission heard that the project involved multiple stages over the 12-month period, including a literature review, workshops and interviews with 37 specialised and non-specialised services, a survey of 341 women over 50 years old living in South Australia and interviews with 7 older women who were victim-survivors of family, domestic and sexual violence.[42] The project's report, Family, Domestic and Sexual Violence: Unique Experiences of Older Women in South Australia, was publicly released in May 2025.[43]

At the national level, Stop it at the Start is an Australian government advertising campaign that aims to prevent gender-based violence by influencing change to attitudes and behaviours that support or condone gender-based violence. The campaign has been running since 2016, with the current phase, The Hidden Trends of Disrespect, focused on educating parents and caregivers of young people aged 10–17 years about the new and hidden forms of disrespect young people are engaging with every day online.[44] A key part of this phase is an interactive tool, the Algorithm of Disrespect, which simulates the average young Australian's social media feed to demonstrate to adults the disrespectful content and influences young people are exposed to online.[45]

The Australian government also launched the Consent Can't Wait advertising campaign in May 2024, which aims to reduce the incidence of sexual violence in Australia by improving community understanding and attitudes on consent and respectful relationships.[46] Consent Can't Wait aims to build on the work of the Stop it at the Start campaign to promote positive attitudes and behaviours on respectful relationships and gender equality among young people, by targeting their key adult influencers. Part of the campaign includes a dedicated website with interactive guides, including Misconception Cards, which seek to debunk common myths about consent.

The Australian government funds Our Watch to deliver 2 communications and social marketing campaigns – ME/WE and The Line – that aim to shift attitudes and behaviours that drive violence against women.[47]

In addition to the national advertising campaigns, the Australian government has collaborated with state and territory governments to develop educational resources about coercive control in the context of family and domestic violence, which are available on the Australian government Attorney-General's Department website.[48]

There are many examples of state- and territory-based awareness campaigns. For example, the Western Australian government launched a $5 million, 2-year education campaign to raise awareness of coercive control in September 2024.[49] The campaign was developed in consultation with victim-survivors, stakeholders and advocates and aims to help victim-survivors, perpetrators and the general public recognise the signs of coercive control and its impacts. The latest instalment of the education campaigns Coercion Hurts and A Story That's Not Ours was launched on 5 May 2025.[50] Further resources about coercive control and domestic and family violence are available online at the Western Australian government information hub.[51]

In New South Wales, coercive control was criminalised on 1 July 2024. The period between the passage of the legislation which criminalised coercive control and commencement of the new laws was significant (almost 2 years) to allow for the implementation of a coercive control awareness campaign. The New South Wales government took a phased approach to developing community awareness, with Phase 1 involving the development of a dedicated coercive control website, Phase 2 involving a public awareness campaign and Phase 3 focusing on tailored campaigns for CALD communities. A report on the results of the campaign was published by the New South Wales government in February 2025, and found that the campaign successfully achieved its objective of raising awareness and improving understanding of coercive control, with '1 in 2 people now claiming to have heard of coercive control and understand what it means'.[52] It also found that this 'increased level of understanding is validated by a significant uplift in the proportion of the target audience who can also now correctly identify at least one behavioural aspect (including threats, manipulation or gaslighting) increasing from 21% pre campaign to 33% post campaign'.[53]

Future state

The consistent call for mechanisms to build greater community awareness and understanding of domestic, family and sexual violence must be acted on. The South Australian government has acknowledged the dual need for community awareness campaigns to clearly describe the breadth of behaviours that constitute domestic, family and sexual violence and to be designed to reach diverse communities. The South Australian government's submission stated:

> **While educational activities effectively raise awareness, particularly across service providers and those members of the community who engage with government services through activities such as community events and forums, it can be challenging to reach some members of the community, including those who are isolated, live in regional/rural areas, and Aboriginal and CALD communities.... [C]ommunity education messaging targeting particular communities, such as targeted multicultural responses in local languages, with meaningful opportunities to engage, should be explored.**
>
> **There are differing understandings across the community regarding what constitutes domestic, family and sexual violence. It is important established, or new, prevention initiatives, programs or activities consistently make clear the breadth of what constitutes domestic, family and sexual violence and the circumstances in which it may occur. This includes abuse occurring in family relationships (such as abuse carried out by adult children against their parents) and extended family.**[54]

The Commission understands that, to date, there has been limited investment by the South Australian government in prevention and community awareness activities. Following the approach undertaken by the Office for Women and COTA SA, the government should resource the co-design of statewide community awareness campaigns with Aboriginal, CALD and LGBTQIA+ communities, people with disability, and children and young people. There is also an opportunity to design an awareness campaign with, and for, children and young people under Guardianship 'to equip them with the skills to form healthy and respectful relationships'.[55]

These campaigns should draw on the research project and model used by COTA SA and the Office for Women. Resourcing for the campaigns should include an amount to support evaluation to continue to build the knowledge base of what works in developing community awareness.

The Commission notes that the resourcing of these community-led campaigns should be separate to the resourcing that will be needed to support implementation of the South Australian government's proposal to criminalise coercive control. The South Australian government will need to look to and learn from the experiences of other jurisdictions that have implemented a coercive control offence to ensure that the community and the domestic, family and sexual violence system are ready for when the proposed new criminal offence is commenced.[56]



A focus on community awareness must involve more than one-off advertising campaigns and must go beyond raising awareness to empowering people to prevent violence. As noted in the introduction to this chapter, awareness is crucial to making the invisible visible. Awareness may enable a person experiencing violence to recognise red flags and seek help sooner, resulting in fewer cases reaching crisis levels. It should lead to family, friends or colleagues becoming more informed about how to support people who are experiencing violence. It can also lead to more people calling out and challenging harmful myths and gender norms, which can in turn lead to the cultural and societal shifts that are needed to bring an end to domestic, family and sexual violence.

This was highlighted in a number of submissions:

> **Public education campaigns that encourage members of the community to be alert to the signs of domestic violence, such as the recent South Australian See the Signs campaign, can give family and friends of victims and perpetrators the confidence to recognise domestic violence issues themselves and they can encourage the victim or perpetrator to seek help. Community-wide advertising campaigns need to be supported by more targeted and specific education campaigns.**[57]

> **Well-resourced public education and awareness campaigns would have positive impacts amongst new generations that would alter family dynamics, attitudes and behaviours. The most effective public education campaign must be long term and ongoing. Shifting attitudes and changing behaviours requires consistent and persistent messages delivered in mediums that have a proven track record to reach and influence the community.**[58]

The Commission has heard that it can be difficult to find accessible, inclusive and helpful information about domestic, family and sexual violence, how to seek help, what supports and services are available, how intervention orders operate and the court process.

> **There are to many internet sites that give different information it needs to come form 1 or 2 sources only.**[59]

Early in its inquiry, the Commission conducted a desktop review of available resources in South Australia. The Commission found that the information was unclear and inconsistent, and that resources were scattered across multiple websites.

Some of the information was out of date, with incorrect phone numbers or broken website links.

Similar issues were highlighted in relation to information about sexual violence in the recent Australian Law Reform Commission (ALRC) report Safe, Informed, Supported: Reforming Justice Responses to Sexual Violence (ALRC Report 143).[60] Recommendation 20 of that report was for federal, state and territory police agencies, the Offices of the Directors of Public Prosecutions, and state and territory courts to ensure that online information on processes about sexual offence matters is easy to find, explains the process and the availability of flexible evidence measures, is accessible and available in multiple languages, and is kept up to date.[61]

The South Australian government should develop and resource government-hosted websites, including a website designed specifically with and for children and young people, to operate as reliable and accessible sources of up-to-date information about domestic, family and sexual violence and about the systems that victim-survivors, or people using violence, may need to access and understand.

The websites should be simple to use and available in multiple languages and accessibility formats. The content should include information on the different forms of domestic, family and sexual violence; the pathways to seek help; the services and supports that are available and what they do; an explanation of how intervention orders work and how to apply for them; and an explanation of the criminal justice process. The content of the children and young people–focused website should be co-designed with children and young people to ensure that it is 'consistent, accessible and evidence-informed content tailored specifically for youth audiences'.[62]

> **Almost unanimous among the young people interviewed was the recognition that earlier and more meaningful education on domestic, family, and sexual violence would help young victim-survivors, and that it may lead to earlier help-seeking and more informed risk identification and safety planning among young people.**[63]

The websites should include consideration of a generative AI capacity, informed by the Australian Government's Artificial Intelligence Ethics Principles.[64]

The Commission considers Ask Izzy a good example of how generative AI can be used to find information and support services. Ask Izzy is a free and anonymous national website that connects people in need with support, including housing, a meal, money help, family violence support and counselling. A person seeking information is asked a series of questions to find services relevant to their situation.[65]



Recommendation 31

The South Australian government resource, develop and implement statewide awareness and empowerment campaigns to increase community awareness of the nature and impacts of domestic, family and sexual violence, and empower people to respond to and prevent that violence. The campaigns should be co-designed with Aboriginal, CALD and LGBTQIA+ communities, people with disability, older people, and children and young people (with a specific campaign with and for children under Guardianship), and evaluated to ensure that they are targeted and effective.

Recommendation 32

The South Australian government resource, develop, implement and maintain 2 standalone government websites to provide information for victim-survivors, people supporting victim-survivors and people using violence, with one targeted at, and co-designed with, children and young people. The websites should:

a. contain information that is clear, accessible and available in multiple languages, and includes audio and visual resources
b. provide clear explanations of the nature and impacts of domestic, family and sexual violence, including coercive and controlling behaviour
c. provide information about how to seek help, the services that are available and the supports that they offer
d. provide information on intervention orders, including how to apply for private intervention orders, the conditions that can be imposed on a person using violence, and the process for finalising an order through the courts
e. consider the use of generative AI informed by Australia's Artificial Intelligence Ethics Principles
f. be continuously reviewed to ensure that information and links are up to date.

The development and implementation of the websites should be accompanied by a public marketing and engagement campaign to promote the websites and ensure community-wide awareness of their existence and purpose. Consideration should also be given to the development and availability of accessible and inclusive resources for people who do not have access to the internet.

Workforce awareness mechanisms

Domestic, family and sexual violence is not just a societal issue, it is a workforce responsibility.

Universal services are often the first point of contact for victim-survivors. This might include a doctor noticing unexplained injuries, a teacher observing behavioural changes in a student, a disability support worker or carer recognising signs of coercion, or a lawyer hearing disclosures of abuse. These moments are critically important. They can be the difference between intervention and continued harm, but without workforce awareness and education, opportunities could be missed. Professionals need training, resources and systemic support to recognise and respond effectively and safely to ensure that victim-survivors are seen, heard, believed and supported.

The role of universal services in early intervention was a consistent theme during the Commission's inquiry. An area of particular focus was the potential for health practitioners to play a key role. Lived experience submissions shared accounts of some doctors, psychologists and counsellors changing the course of their lives for the better, in helping them recognise the signs of abuse and seek the help they needed. Others described health practitioners who either did not recognise or minimised the experiences of victim-survivors, in some case convincing victim-survivors to stay in abusive relationships. Trauma-informed education and training to equip healthcare providers with the skills to identify and respond effectively to domestic, family and sexual violence had broad support.

> **"It also requires the GP, as a member of the public and - or the medical professional to identify somebody that could be at risk or to synthesise what they're hearing and listening to when they're meeting with an older person and thinking, Could this be elder abuse? Could this be domestic violence?'**[66]

> **"When asked whether GPs had enquired about the underlying reasons for their mental health distress, panic attacks or other symptoms, young people commented that GPs rarely asked them about family, domestic or sexual violence, and that opportunities for early intervention were often missed.**[67]

The importance of health practitioners being able to recognise and respond to domestic, family and sexual violence was recognised by the Australian Nursing and Midwifery Federation (SA Branch), recommending in its submission that regular, comprehensive, culturally safe and trauma-informed training should be provided throughout a person's career.[68]

The need for greater awareness is also highlighted in a 2022 article in the *Australian Journal of General Practice*, 'Recognising and responding to domestic and family violence in general practice'. The authors note that general practitioners have unique opportunities to identify, assess and respond to domestic and family violence because of the trusting therapeutic relationships they develop with patients.[69]



The opportunity for health practitioners to identify opportunities for intervention with people at risk of using violence has also been raised with the Commission. On Day 10 of public hearings, Associate Professor Zac Seidler spoke about the potential for the health system to create meaningful and strengths-based opportunities for working with boys and men at risk of using violence:

> **There is serious untapped potential in the health system. As a psychologist, whether it's a GP, whether it's a nurse, young men are, you know, at some point in time going to come into contact with the health system. ... but the healthcare system is not attuned to it. There's no trust. There's no safety. There are all of these issues that go on there. But that means that if the health system is something that can be untapped, so can health messaging, which is that, if we know that men who are using violence are unhealthy, then talking about their health and wellbeing - and often the health and wellbeing of their family, which is, at times, important to some of them, is an inroad to connection and intervention as well.**[70]

The Commission acknowledges that the signs of domestic, family and sexual violence can be difficult to recognise, particularly when the abuse is non-physical. Capability building in universal services is critical to ensuring that opportunities to support victim-survivors, or intervene with people using violence, are not missed. By embedding awareness into educational qualifications, regulatory activities and workforce training, we can ensure that the universal services workforce is equipped to recognise and respond to domestic, family and sexual violence, and thereby prevent escalation or even occurrence.

The role of regulators

Current state

In Australia and South Australia, professional regulators play a key role in setting and enforcing standards that ensure competence, ethics and accountability within their respective professions, including through the use of codes of conduct and the mandating or promotion of appropriate professional development and training.

In Australia, the Australian Health Practitioner Regulation Agency (Ahpra) and the National Boards have recognised domestic, family and sexual violence as a critical issue for health professionals, releasing a joint position statement with the Office of the Health Ombudsman (Queensland), the Health Professional Councils Authority (New South Wales) and the Health Care Complaints Commission (New South Wales) that underscores the responsibility for practitioners to recognise and respond to abuse:

> **It is important that health practitioners responding to family violence understand its serious consequences and the barriers to disclosure that victim-survivors can experience. They have a vital role to play in the early detection, support, referral, documentation of incidents, and delivery of specialised treatment for people experiencing family violence.**

> **Health practitioners are often the first point of contact for many people who have experienced or are experiencing family violence. They play an essential role in recognising family violence and in responding sensitively, respectfully, and safely to prevent further harm. This includes referring victim-survivors to specialist services where appropriate. There is a clear public interest in ensuring health practitioners are trusted to identify and respond appropriately to family violence. Their actions can prevent further harm and encourage victim-survivors to seek help. Health practitioners are legally required to report other health practitioners who have behaved in a way that amounts to notifiable conduct and places the public at risk of harm. Health practitioners must also comply with mandatory reporting of known or suspected child abuse and neglect.**[71]

In August 2024, Health Ministers agreed to implement actions proposed by Ahpra to improve healthcare workers' responses to domestic, family and sexual violence. The Commission understands from discussions with Ahpra that the actions being progressed involve the activation of a number of regulatory levers to create an environment of change, including:

- making public statements – the joint position statement about family violence
- providing guidance for practice – developing guidance on the application of the codes of conduct in the context of family violence and considering how codes of conduct could more clearly communicate expectations
- strengthening standards and professional capabilities – developing guidance on the knowledge and skills in family violence expected of health practitioners and prioritising continuing professional development.
- strengthening educational requirements – strengthening professional capabilities in entry-level courses to make explicit the expectation that health practitioners need the skills to be able to recognise and respond to domestic, family and sexual violence
- supporting implementation into practice – developing a resource hub to help build the capacity of the health workforce to have the knowledge and skills required
- building the capacity of the regulator – providing mandatory training for staff and regulatory decision-makers to understand the dynamics of domestic, family and sexual violence and engage with victim-survivors in a trauma-informed way.

There are a range of professional regulators operating in South Australia that could be utilising existing levers to mandate or promote domestic, family and sexual violence awareness within their sector, similar to the approach taken by Ahpra for the health system. These include:

- education system – Teachers Registration Board and Education Standards Board
- disability support system–NDIS Quality and Safeguards Commission
- aged care system–Aged Care Quality and Safety Commission
- legal practitioners– Law Society and Legal Profession Conduct Commissioner (noting that the regulation of the legal profession is curiously split between the Law Society [a membership-based organisation] and the state-government regulator – an arrangement that may not lend itself to robust, effective and consistent regulatory practices)
- social workers–incoming Social Workers Registration Board.

Other regulators operating across the broader workforce, and who could be engaged in increasing awareness and education about domestic, family and sexual violence, include the South Australian Skills Commission, SafeWork SA and ReturnToWorkSA.

The public sector is the largest employer in South Australia, and the Commissioner for Public Sector Employment is tasked with promoting the public sector principles set out in the *Public Sector Act 2009*, (SA) which include recognising the diversity of public needs and responding to public needs.[72] Given what is known about the prevalence and impact of domestic, family and sexual violence, awareness is a key part of the public sector's capability to recognise and respond to public needs.

Future state

The Commission believes that professional regulators can and should play a crucial role in embedding domestic, family and sexual violence awareness into workforce standards and guidelines through existing regulatory levers.

Through mechanisms such as codes of conduct, continuing professional development requirements and accreditation standards, regulators can promote or mandate training and education on recognising and responding to domestic, family and sexual violence.

This ensures that professionals are equipped to identify signs of abuse and respond appropriately, and reinforces the professional's broader ethical obligations to safeguard individuals, meet the needs of the community and uphold public trust. In this way, regulatory levers can become powerful tools for cultural and practical change across sectors.

The Commission considers Ahpra's approach to be good practice. This approach should be adopted by the regulators for all professions and workforces who interact with people experiencing or using violence.[73] The Commission calls on these professional regulators to use their existing regulatory frameworks and powers and determine how best to embed domestic, family and sexual violence awareness in their regulatory activities.

To progress this call to action, the South Australian government, led by the Government Steward, should undertake a review of the scope, powers and functions of all state-based regulators to determine whether any changes could be made to better equip regulators to embed awareness of domestic, family and sexual violence in their regulatory activities (including codes of conduct and ongoing professional development requirements).

The Government Steward should consider other ways to promote domestic, family and sexual violence awareness across a broader range of professionals such as the Responding to Risks of Harm, Abuse and Neglect – Education and Care training, which is a mandatory requirement for anyone working or volunteering with children and young people in education settings in South Australia. Awareness could also be embedded through South Australia's child safe environments scheme, although the Commission notes the effectiveness of such an approach will be hampered by the absence of an independent oversight body in South Australia to monitor and enforce child safe standards as recommended by the Royal Commission into Institutional Responses to Child Sexual Abuse at Recommendation 6.10.

The South Australian and Australian governments should consider the levers available to both governments to embed domestic, family and sexual violence awareness across the aged care and disability sectors. This report has already identified the need to engage the national regulators for those systems (NDIS Quality and Safeguards Commission and the Aged Care Quality and Safety Commission) but there are other potential levers to explore, including the newly established Single Assessment System for aged care, and the implementation of foundational supports (further discussed in Chapter 8). Similarly, increasing awareness across the financial counselling sector should be explored through working with organisations such as the South Australian Financial Counselling Association.[74]

The South Australian government should resource and promote a South Australian community of practice between state and national regulators to facilitate collective learning, knowledge sharing and collaboration around domestic, family and sexual violence.

In relation to the public sector, the Government Steward should collaborate with the Commissioner for Public Sector Employment to identify mechanisms to increase domestic, family and sexual violence awareness across the public sector workforce.

Recommendation 33

Existing South Australian and federal professional regulatory frameworks should be:

a. reviewed by South Australian and federal professional regulators with a view to mandating and/or promoting domestic, family and sexual violence awareness to the people within their regulatory framework (including through codes of conduct and ongoing professional development requirements)
b. reviewed by the South Australian and Australian governments to determine whether any legislative changes could be made to better equip regulators to embed awareness of domestic, family and sexual violence in their regulatory activities.

Recommendation 34

The South Australian government develop and implement a South Australian community of practice to bring together state and federal regulators, including the Australian Health Practitioner Regulation Agency, to facilitate collective learning, knowledge sharing and collaboration about domestic, family and sexual violence.

Recommendation 35

The Commissioner for Public Sector Employment undertake a program of work, including the development of relevant policies and procedures, to increase the public sector's awareness of domestic, family and sexual violence and of the services available to support a person experiencing violence or a person using violence, including the use of domestic, family and sexual violence leave.

The role of higher education and skills providers

The Commission has heard that, in addition to the need for ongoing professional development and training for Australia's existing workforce, there is also a need to embed domestic, family and sexual violence content in relevant qualifications to ensure that graduates are able to recognise and respond to domestic, family and sexual violence, and contribute to its prevention, whether they work in a specialist service, the justice system or in a universal service, such as the health system or the education system.

This was highlighted in Embolden's submission to the Commission, which states:

> **"Earlier intervention in South Australia starts with upskilling universal mainstream services to better understand, identify and respond to domestic, family and sexual violence. Tertiary education programs – across courses in areas including health, law, education and psychology, as well as social work – should include foundational content on DFSV. Course content will then need to be extended and complemented by workforce training that is tailored for the workplace context. Partnership with the specialist DFSV services sector on education and training is essential for the non-specialist workforce to bring a DFSV-informed lens to the work they do.**[75]

Other input reinforces 'sector-wide concern that domestic, family and sexual violence content is lacking in social work, psychology, and nursing degrees, creating gaps in graduates' practical knowledge of trauma-informed care, perpetrator interventions, and intersectional approaches'.[76]

Staff in specialist domestic, family and sexual violence services come from a variety of backgrounds and disciplines, as do those who work in universal services. Australia's workforce possesses a diverse set of higher education and vocational education and training (VET) qualifications, with some workers undertaking on-the-job training rather than obtaining a specific qualification. There is a need to increase awareness of domestic, family and sexual violence across a much broader workforce than those working within specialist domestic, family and sexual violence services. This will require a significant program of work involving the range of pathways into this broader workforce, starting with embedding content in relevant university degrees and VET qualifications.

In South Australia, university course content is shaped by a combination of academic standards, professional capabilities and regulatory requirements. Legislated education and accreditation standards set the bar for graduate capabilities in higher education courses and can include a requirement for core subjects to be taught by all universities – law and legal practice courses are an example of this. Not all education and accreditation standards have a legislated framework; journalism and social work are examples of this.[77]

Accreditation of university courses is overseen by the Tertiary Education Quality and Standards Agency (TEQSA), which is the national accrediting body for higher education in Australia. TEQSA registers higher education providers, accredits qualifications for non-self-accrediting institutions and authorises higher education providers to self-accredit their courses.[78]

Self-accrediting universities, such as the University of Adelaide, Flinders University and the University of South Australia, have the authority to approve their own courses, ensuring they meet the Australian Qualifications Framework standards.[79] Additionally, professional associations may accredit specific courses to ensure they align with industry requirements, particularly in health-related fields and law.

The Commission notes the forthcoming merger of the University of Adelaide and the University of South Australia to form Adelaide University, set to open in January 2026. The content set out in this chapter is based on current state and will need to be reviewed following the commencement of the new Adelaide University.

The Australian Skills Quality Authority (ASQA) is the national regulator for VET providers, overseeing accreditation and compliance for most VET providers in South Australia. VET in South Australia is largely delivered by TAFE SA (South Australia's public VET provider) and registered training organisations. The South Australian Skills Commission regulates the state's apprenticeship and traineeship system and (together with other functions) engages with industry to ensure VET is responsive to industry needs. Recently, the South Australian Skills Commission participated in a pilot to receive delegated authority from ASQA to accredit South Australian–specific VET qualifications.

Although there are numerous higher education and skills qualifications that might lead to a role in the domestic, family and sexual violence sector or the universal services sector, and which would likely benefit from the inclusion of domestic, family and sexual violence content, the Commission has focused its attention on the workforces that most often interact with people experiencing domestic, family and sexual violence. However, the following summary does not capture the complexity of the requirements for the accreditation of university courses.



Current state

Social work

There is a need for social workers to understand domestic, family and sexual violence. The Southern Domestic Violence Action Group stressed the importance of embedding this knowledge in qualifications, as most social workers are likely to work with people experiencing or using domestic, family or sexual violence.[80]

The Australian Association of Social Workers (AASW) is the professional body for social workers in Australia. In order to become a member of the AASW, a person must complete an AASW accredited social work qualification.[81]

In the absence of any national regulatory framework, the AASW produces the Australian Social Work Education and Accreditation Standards (latest update November 2024) which set the principles and criteria for the accreditation of social work programs in Australia, ensuring that graduates meet professional standards.[82] The AASW also produces the Practice Standards 2023 which set out the core attributes the profession expects of entry-level social workers.[83] For example, entry-level social workers should be able to demonstrate that they are able to practise in partnership with Aboriginal people and apply an intersectional lens to their approach to complexities around culture and diversity.[84]

The current regulatory environment for social workers in South Australia will change when the *Social Workers Registration Act 2021* (SA) commences. Pursuant to that Act, one of the functions of the Social Workers Registration Board will be to determine the qualifications and other requirements appropriate for registration under that Act.[85]

The Flinders University Bachelor of Social Work is an AASW-accredited qualification. Prior to 2024, domestic, family and sexual violence was not a core part of the course (although some aspects of the course content touched on the subject).

This changed in 2024 with the introduction of a core unit called 'Violence and Abuse' in the final year of the degree, which aims to develop students' understanding of violence and abuse experienced by individuals, families and groups. The course handbook states that on completion of this topic, students should be able to:

- discuss how power and control is exercised across interpersonal violence and abuse
- examine interpersonal violence and abuse, including child abuse, domestic violence, family violence, sexual abuse and elder abuse
- investigate violence and abuse related problems
- critique violence and abuse using intersectional frameworks
- apply principles of practice for working with people experiencing violence and abuse.[86]

The Bachelor of Social Work currently offered by the University of South Australia is also an AASW-accredited qualification. It offers a similar range of subjects to the Flinders University degree. Although it does not have a subject on violence and abuse, a core subject in the final year of the degree is 'Trauma Informed Practice'. This subject covers intimate partner violence, family and domestic violence, rape and sexual assault, radicalised violence, elder abuse, and other forms of abuse related to disability, gender identity and sexual identity.[87]

Flinders University also offers a Graduate Certificate in Trauma Responsive Practice, which is available as part of postgraduate coursework, either as a standalone Graduate Certificate or as part of a Master of Advanced Social Work. The course has been developed specifically in collaboration with industry partners to build workforce capacity for people who work in organisations or work with people who have experienced trauma.[88] Students undertake the following subjects:

- child counselling and interventions
- trauma and complexity
- family violence, abuse and neglect
- being trauma responsive.

The family violence, abuse and neglect unit seeks to provide students with an understanding of core concepts such as power, control, fear, risk, complexity, intersectionality and colonisation, as well as an in-depth understanding of the policy and legislative framework informing and influencing practice.[89]

Law and legal practice

In South Australia, in order to be eligible for admission to practise law, a person must demonstrate that they are a fit and proper person and that they have complied with the rules of the Supreme Court relating to admission and the rules made by the Legal Practitioners Education and Admission Council (LPEAC) prescribing the qualifications for admission.[90]

The requirements for admission set out in the Rules of the Legal Practitioners Education and Admission Council 2018 (LPEAC Rules) have 2 components: academic requirements and practical requirements.[91] Rule 7 provides that the 'academic requirement for admission is the successful completion of a tertiary academic course in Australia … which, in the opinion of LPEAC, requires a satisfactory level of understanding and knowledge' in the areas referred to in Appendix A of the LPEAC Rules.

All 3 South Australian universities – the University of Adelaide, Flinders University and the University of South Australia – currently offer a law degree that is approved under the LPEAC Rules. This is an undergraduate and generalist degree with specialisation occurring later, either through professional experience or via a postgraduate qualification (or both). To ensure consistency across jurisdictions, there are 11 key subjects, known as the 'Priestley 11', that should be completed in order to meet the requirements of a law degree.[92] These are set out in Appendix A of the LPEAC Rules.

The subjects include criminal law, evidence law, civil procedure, ethics and personal responsibility, constitutional law and property law. Students supplement these compulsory subjects with a range of elective courses that may include comparative law, environmental law, family law, human rights law and international law. Neither the key subjects nor the elective courses currently on offer at the South Australian universities appear to include any specific domestic, family and sexual violence content. It may be that aspects of criminal law and family law subjects include an understanding of domestic, family and sexual violence but it may also be that the content could be expanded on to ensure that graduates understand the current evidence base relating to domestic, family and sexual violence and are equipped to identify and respond to this violence.

Teaching

South Australian teachers must hold university teaching qualifications from an approved university in an area of specialisation or level of schooling before applying to the Teachers Registration Board for registration as a teacher.[93] The Teachers Registration Board is established under the *Teachers Registration and Standards Act 2004* (Teachers Registration Act) and has legislated responsibility for the registration of all teachers in South Australia.

The object of the Teachers Registration Act is 'to establish and maintain a teacher registration system and professional standards for teachers to safeguard the public interest in there being a teaching profession whose members are competent educators and fit and proper persons to have the care of children'.[94]



Minimum accreditation requirements for teaching degrees are set nationally and described in the Accreditation of Initial Teacher Education Programs in Australia: Standards and Procedures.[95] They are designed to ensure that all graduates meet the Australian Professional Standards for Teachers at the graduate career stage.[96]

Accreditation of teaching degrees is undertaken by the relevant regulatory bodies in each state and territory. In South Australia, the Teachers Registration Board is empowered by section 19A of the Teachers Registration Act to accredit teaching degrees. Accredited undergraduate and postgraduate programs in South Australia are taught at Flinders University, the University of South Australia, the University of Adelaide and Tabor College.

The University of South Australia, for example, offers a number of options including a Bachelor of Early Childhood Education, a Bachelor of Early Childhood Education (Honours), a Bachelor of Primary Education (Honours), a Bachelor of Secondary Education (Honours) and several Master programs. In reviewing the course content, the Commission was unable to find any subjects specifically on how to recognise and respond to domestic, family and sexual violence. Some of the electives offered, however, may touch on aspects of domestic, family and sexual violence as they relate to health and relationships education.

In reviewing course content at Flinders University, the Commission noted that one of the majors currently on offer for the Bachelor of Education (Secondary) is women's studies, which includes content that may touch on aspects of domestic, family and sexual violence, but appears unlikely to provide the type of knowledge that would equip a teacher to identify and respond to domestic, family and sexual violence and the types of behaviours that a teacher may experience or notice from a child or young person who is experiencing domestic, family and sexual violence.

Nursing and midwifery

Tertiary qualifications are required to practise as a registered nurse or a midwife in South Australia. Enrolled nurses require a Diploma of Nursing, which is run by TAFE SA. All nurses and midwives are required to be registered with the Nursing and Midwifery Board of Australia.

In order to be registered with the Nursing and Midwifery Board, individuals must hold an approved qualification pursuant to section 53(2) of the Health Practitioner Regulation National Law (the National Law).[97] Approved qualifications are obtained by completing a program of study that has been accredited and approved under sections 48 and 49 of the National Law. Accreditation is undertaken by the accreditation authority for the relevant health profession and the accredited program of study is then approved by the relevant National Board. An accreditation authority can be an external accreditation entity, or it can be an accreditation committee established by the National Board.[98]

The Australian Nursing and Midwifery Accreditation Council is the accreditation authority for nursing and midwifery education providers. It develops accreditation standards for enrolled nurses, registered nurses, midwives and nurse practitioners for approval by the National Board and assesses nursing and midwifery study programs and education providers. In relation to registered nurses, higher education providers must comply with the minimum requirements set out in the Registered Nurse Accreditation Standards 2019.[99] For midwifery programs, higher education providers must comply with the minimum requirements set out in the Midwife Accreditation Standards 2021.[100]

Bachelor of Nursing and Midwifery degrees are currently offered by Flinders University and the University of South Australia (Adelaide University from 2026). The Flinders University Bachelor of Nursing includes some subjects that may touch on aspects of domestic, family and sexual violence, such as 'legal and ethical considerations in nursing' and 'care for people with chronic and complex health needs', but has no specific domestic, family and sexual violence subjects. Similarly, the Flinders University Bachelor of Midwifery may touch on some aspects of domestic, family and sexual violence as part of the coursework, but there are no domestic, family and sexual violence–specific subjects.

Psychology

In order to work as a psychologist in South Australia, a person must be registered with the Psychology Board of Australia and meet the Board's registration standards. Similarly to nurses and other health professions, individuals must hold an approved qualification pursuant to section 53(2) of the National Law to be registered with the Psychology Board.

The Australian Psychology Accreditation Council is the accreditation authority for psychologists. It develops accreditation standards for approval by the Psychology Board and assesses psychology programs and education providers. The current accreditation standards set out 5 standards and the supporting criteria for each standard.[101] The accreditation standards also contain graduate competencies that the Australian Psychology Accreditation Council–accredited programs must enable graduates to achieve. These include foundational competencies, pre-professional competencies, professional competencies and professional competencies for specialised practice, which include clinical neuropsychology, community psychology, educational and developmental psychology and forensic psychology.

Some of the specialised practice areas require graduates to be able to apply advanced psychological knowledge in a number of areas, which may include topics that touch on aspects of domestic, family and sexual violence. For example, in relation to community psychology, graduates should be able to apply advanced psychological knowledge of critical theories including constructionalism, feminism, decolonisation and conflict resolution.[102] However, no specific domestic, family and sexual violence course content was found during the desktop review.

Medicine

Like other health professions, in order to work as a medical practitioner in South Australia, a person must complete an accredited tertiary qualification, be registered with the Medical Board of Australia and meet the relevant registration standards.

The Medical Board of Australia is supported by boards in each state and territory, including South Australia. These boards have delegated powers to make individual registration and notification (complaints) decisions.[103]

The Australian Medical Council has responsibility for accrediting education providers and their program of study for the medical profession. Accreditation standards are set out in the Standards for Assessment and Accreditation of Primary Medical Programs and the Standards for Assessment and Accreditation of Specialist Medical Programs by the Australian Medical Council 2023.[104] Both documents set out the knowledge, skills and behaviours required of graduates from general or specialist medical programs. Neither mention the ability to recognise and respond to domestic, family and sexual violence.

As with nursing and midwifery and psychology degrees, although some subjects may touch on aspects of domestic, family and sexual violence, a desktop review of medical programs offered at the University of Adelaide and Flinders University did not find any course content specific to domestic, family and sexual violence.

Dentistry

The Australian Dental Council is responsible for the accreditation of education and training standards for dental practitioners under the National Registration and Accreditation Scheme. For a dentistry program to be accredited, it must demonstrate that the learning outcomes of the program address the competencies set out in the Australian Dental Council Professional Competencies of the Newly Qualified Dental Practitioner.[105]

At the point of graduation from an Australian Dental Council–accredited program, dental practitioners are expected to demonstrate the understanding, skills and values set out in the professional competencies. The range of competencies are grouped under 6 domains, which represent the broad categories of professional activity and concerns that occur in the practice of dentistry.[106] Domain 2, 'Communication and leadership', sets out 9 competencies that a newly qualified dental practitioner must be able to demonstrate. This includes the ability to 'recognise, assess and respond to domestic and family violence risk, prioritise safety, provide information and refer as required'.[107]

Journalism and communications

Like social workers (subject to the Social Workers Registration Act commencing in South Australia), there is no legislated regulatory framework for journalists. This means that there is no licensing or registration scheme under which journalists can be held accountable for professional misconduct.

As noted above, for those professions which do not have a legislated regulatory framework or oversight body that can determine or influence education and accreditation standards for university courses, legislative oversight of the relevant university courses sits with TEQSA.

There are, however, non-statutory bodies that may influence education standards for journalism and communications degrees. For example, the Journalism Education and Research Association of Australia lists one of its purposes as raising the standard of teaching of journalism and the collection and dissemination of information about journalism education.[108]

A desktop review of the online course content for journalism and communication degrees, which are currently offered by Flinders University and the University of South Australia, has not found any domestic, family and sexual violence–specific course content in these degrees.

Our Watch has also developed a suite of curriculum materials for tertiary institutions in Australia to support teaching of best practice reporting on violence against women. The Our Watch Ossie Award for student journalism encourages students to focus on this issue.

Vocational education and training qualifications

The nationally registered VET package most relevant to the domestic, family and sexual violence system appears to be the 'CHC Community Services' training package. This package includes qualifications in (among other things) community services, youth work, mental health, mental health peer work, alcohol and other drugs, disability support, individual support, aged care support, counselling (including financial counselling), early childhood education and care and school based education support.[109] These qualifications directly relate to the many different workforces that interact every day with people who are, or may be at risk of, experiencing violence and people who are, or may be at risk of, using violence.

Desktop research conducted into the various community services qualifications identified a large number of current and nationally recognised units of competency which specifically relate to domestic and family violence. The topics include recognising and responding to domestic and family violence, working with children affected by domestic and family violence, and working with users of violence to effect change. Some of the available topics specifically refer to particular communities, such as topics on providing domestic and family violence support in Aboriginal and Torres Strait Islander communities and in non-English speaking background communities. Others cover particular types of work, such as making safety plans and managing domestic and family violence screening and risk assessment processes.[110]

The desktop review established that family and domestic violence units of competency appear to be available for inclusion in relevant qualifications. The review also identified that these units are rarely included as core units within the community services qualifications and are also often not included as electives. For example, there does not appear to be any domestic and family violence units of competency included in certificates relating to disability support, ageing support or individual support.

The desktop review established an apparent lack of topics focused on sexual violence within the community services training package. The Commission did identify a standalone accredited course titled '10994NAT Course in Recognising and Responding to Sexual Violence'[111] which appears to be offered by RMIT University.[112] The accredited units within this standalone course do not appear to be available under the community services training stream.

The content of VET qualifications can be influenced at the national level by Jobs and Skills Councils. In South Australia, the Skills Commission has established Industry Skills Councils to perform a similar function, advising the Skills Commission and the South Australian government on skills, training and workforce needs. The Industry Skills Council relevant to the domestic, family and sexual violence sector is the Early Educators, Health, Human Services, Sport and Recreation Industry Skills Council. The Skills Commission has advised the Commission that the membership of this Industry Skills Council does not currently include a representative of the domestic, family or sexual violence sector or from SAACCON. This is an opportunity that could be further explored between the Skills Commission, Embolden and SAACCON.

Future state

Domestic, family and sexual violence is a critical societal issue with profound impacts on individuals, families and communities. Awareness of this violence, the needs of victim-survivors and of safe ways to intervene must be included in the education and training of South Australia's future workforce.

The Commission's desktop review showed that, for the most part, higher education and VET qualifications do not contain sufficient content to equip graduates with the ability to recognise and respond to domestic, family and sexual violence once they enter the workforce.

Universities and VET providers in South Australia could play a pivotal role in equipping future professionals with the knowledge and skills to recognise and respond effectively to domestic, family and sexual violence. The Commission considers the integration of domestic, family and sexual violence content into higher education and VET qualifications to be essential to fostering a generation that can drive change across systems.

This opportunity was recognised in ALRC Report 143 in relation to law graduates, which found that, in relation to sexual violence, 'law schools and practical legal education providers have a critical role in rebuilding the integrity of the response of the criminal justice system to sexual violence. They educate and train the legal practitioners and judicial officers of the future'.[113] The ALRC noted that the Law Admissions Consultative Committee, which comprises legal members from each state and territory and members nominated by the Council of Australian Law Deans, the Australasian Professional Legal Education Council and the Law Council of Australia, has identified a review of legal education and training as a priority area.

Recommendation 17 of ALRC Report 143 recommends that the Law Admissions Consultative Committee ensures that education about myths and misconceptions and trauma-informed and culturally safe responses to sexual violence (as described in Recommendation 11 of the same report) be included in the discussions with a view to this content being embedded in the curricula of law schools and practical legal education providers.[114]

The Commission recognises that there are challenges to embedding an understanding of sexual violence content into university and VET qualifications given the complexity of the regulatory environment, the nature of the content and the need to identify skilled educators to teach that content. These challenges should not stand in the way of change.

The Commission calls on the South Australian government to work with the South Australian university and VET sector (including the Skills Commission and TAFE SA) to identify pathways to embed domestic, family and sexual violence content within relevant higher education and VET qualifications, to ensure that the next generation of social workers, teachers, lawyers, healthcare professionals, journalists, community workers, counsellors, alcohol and other drug workers, youth workers, and disability and aged care support workers (among others) are equipped to recognise and respond to domestic, family and sexual violence.



Recommendation 36

The South Australian government work with the South Australian university and vocational education and training sector (including the Skills Commission and TAFE SA) to identify pathways to embed domestic, family and sexual violence content within relevant higher education and vocational education and training qualifications.

Beyond awareness: justice sector specialisation

The primary role of the justice system in South Australia is to maintain social order, enforce laws and administer justice. Central to this role are SAPOL, the courts (which includes judicial officers and court support staff) and prosecutors.

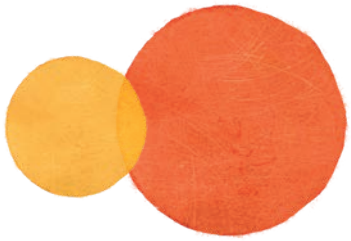
The input the Commission has received about the justice system has been overwhelmingly negative. Victim-survivors have described a system that is unsafe, retraumatising, fragmented and inconsistent. It is failing the very people who seek the protection of the law.[115]

> **Victim-survivors who reported sexual violence to police and engaged with the Court process have told us they lacked agency, choice and support, and were made to feel like they were the ones on trial. Clearly, the justice system is not working for victim-survivors of sexual violence.**[116]



> **I have lost total faith in our police and courts. The courage it takes to leave an abusive relationship is monumental. Having lived through the process, I can say with absolute conviction it is highly flawed. When an abused person has found the courage to reach out for help, but is greeted with suspicion, accusations and indifference, something is very wrong. In short, we have a complete lack of care, responsibility and justice to the victims of domestic violence. At a crucial time when we are scared, confused and velnerable, we are let down, leaving us feeling even more hopeless, abandoned and abused than before, with an understanding that help is not really available or comes at a cost far too high. Even the strongest people would buckle under such pressure, let alone a victim of repeated cruelty and psychological destruction.**[118]

These systemic issues were also identified in the submission from the Legal Services Commission, which noted that lawyers report that existing justice responses to domestic violence can leave both victim-survivors and perpetrators feeling a 'lack of personal agency over their situation, which adversely affects all parties'. The Legal Services Commission called the justice system 'a blunt and ill-equipped instrument to respond to the complexities of domestic violence'.[119]



The focus of the Commission has been the ways in which existing structures and systems should be reformed. On the justice system, the Commission has focused its attention on the mechanisms that are available, or should be available, to make the existing system work better. There has been no shortage of reform to the laws applying to domestic, family and sexual violence or to the processes and procedures associated with intervention orders or criminal prosecutions. The ongoing appetite to improve these laws, procedures and rules is commendable but it appears to the Commission that what is often missed is the corresponding need to educate and train people working within the justice system to ensure that these reforms are translated into real action and result in much-needed cultural change. 'Blunt and ill-equipped' may be an accurate description of the current status quo, but the Commission considers that there should be a real and genuine effort to disrupt this through education and training and cultural change (among other matters further discussed in Chapter 6) rather than recommending an entirely new justice system. After all, a new system is highly likely to involve the same or similar participants.

> **"[Services should not] place anyone in any position of power, be it police, health care or mental health services, lawyers, barristers or judges, unless they have conducted specialised and comprehensive trauma informed training on the topic of family, domestic and sexual violence.**[120]

There is an urgent need for greater understanding and awareness of the evidence base relating to domestic, family and sexual violence generally, but also in 2 specific areas:

- the identification and assessment of risk in the context of domestic, family and sexual violence
- the myths and misconceptions (also known as stereotypes and assumptions) associated with sexual violence and domestic and family violence and the ways in which the justice system can and should guard against the perpetuation of these myths and misconceptions during the conduct of proceedings before the courts.

The need to understand and identify risk regularly arises in the context of the justice system. This applies as much to police (through the issuing of intervention orders and bail decisions) as it does to prosecutors (through their role in intervention order proceedings, bail arguments and sentencing submissions) and to judicial officers (through intervention order proceedings, bail decisions, sentencing and other proceedings such as extended supervision order applications). In Chapter 2 the Commission has identified the need for a statewide Risk Assessment and Management Framework (RAMF). The evidence base used to develop the RAMF could be used to develop education and training materials on how that evidence will apply to decisions that are made in the context of the justice system.

Of particular concern is the input the Commission has received to suggest that police, prosecutors and judicial officers have an inadequate understanding of coercive control and the need to view non-physical forms of abuse as seriously as physical abuse. The Commission has heard of victim-survivors reporting their belief that they would have received a better response from the justice system if only they had a physical injury to evidence the abuse. Non-physical abuse, including coercive control, is a serious form of abuse and often exists alongside, or can be a precursor to, physical violence. The existing evidence base does not appear to be making its way into the justice system in a timely or meaningful way – action is needed to ensure that the justice system is making evidence-based assessments of risk to inform its decisions.

The perpetuation of myths and misconceptions in domestic, family and sexual violence trials is an ongoing issue.

> **Persistent myths and language surrounding sexual violence continue to be significant barriers to reporting. There is widespread misunderstanding about what constitutes a rape, with the belief that it must be a violent attack in a dark alley to be considered rape. Questions such as whether the victim was intoxicated or whether they might be making a false allegation further contribute to this issue. The low reporting rates or often misinterpreted as low prevalence. Additionally, victim-blaming questions, such as why the victim did not fight back, are prevalent. The language and attitudes I encountered while at the DPP were deeply traumatising and hard to believe, had I not experienced it first hand. Despite perceived progress, these myths, harmful language and deeply ingrained beliefs continue to influence society, justice and the legal system.**[121]

Commissioner for Victims' Rights Sarah Quick, in her evidence before the Commission on Day 2 of public hearings, explained that:

> **community attitudes generally, are beginning to change, but that change is very slow with regard to sexual assault. And so problematic myths and stereotypes and misconceptions do still persist, and they do still persist in the face of evidence that easily dispels those myths…[a] commonly held myth is that a victim of a sexual assault or a traumatic incident will be able to provide a clear and consistent and detailed account of the victimisation, and that's really inconsistent with research on human memory and the impact of trauma on memory. The research demonstrates that more often than not, Victims that have experienced a one-off traumatic incident are far more likely to have fragmented and confused memories, memories that lack specific detail.**

> **if they [the myths] are relied on or feature in the criminal justice system … they deeply impact a victim's experience and erode a victim's confidence in the criminal justice system, which further contributes to that reluctance to report… If they feature during the investigation phase, it might mean that certain lines of inquiry aren't pursued. If a victim accepts the false notion that they are to blame, so if they accept one of the myths, then that might actually mean that they're going to stay in an unsafe relationship or unsafe environment. During the trial process, if they feature during a trial and they remain unchallenged during that trial process, then it might mean the judge or the jury are left with misinformation that just creates doubt and ultimately may contribute to an acquittal.**[122]

The importance of education and training for the justice sector has been considered in a number of inquiries and reports over the past 15 years, including the 2010 joint Australian and New South Wales Law Reform Commissions' report Family Violence – A National Legal Response (ALRC Report 114), the Victorian Royal Commission into Family Violence report, the Queensland Women's Safety and Justice Taskforce reports Hear Her Voice, a 2021 report prepared for the Australasian Institute of Judicial Administration (AIJA) entitled Judicial Education in Australia: A Contemporary Overview (the AIJA Report)[123], and a 2024 Australian Institute of Criminology paper on Police Training in Responding to Family, Domestic and Sexual Violence (the AIC Paper).[124]

In ALRC Report 114, education and training were a central theme. A number of recommendations focused on 'education and training for all participants in the various systems dealing with family violence'.[125] In making its recommendations about education and training, the ALRC acknowledged that 'calls for further training are easy to make, but that there are numerous challenges to ensuring that education and training are relevant, useful and have a meaningful impact on behaviour in an ongoing way'.[126] The challenges include the receptiveness of the audience and the persistence of social and cultural norms, adequate resourcing and the need for training to be accessible and to occur on a regular basis.

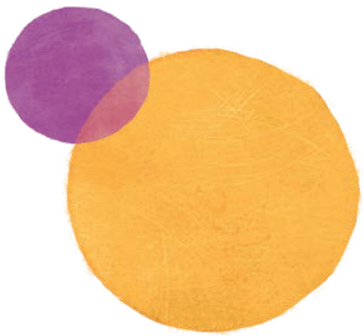
Training and education are also mentioned on multiple occasions in the National Plan, which identifies insufficient training of frontline workers as a key underlying barrier to domestic, family and sexual violence.[127] The National Plan talks about the need for increased specialist and targeted training for police, the judiciary and the legal profession on family, domestic and sexual violence, including coercive control and misidentification, to support a transition to pattern-based responses. It also talks about the need for increased cultural awareness and safety training for frontline police and throughout the justice system to recognise and respond to the interrelated and compounding forms of violence experienced by Aboriginal and Torres Strait Islander women.[128]

The ongoing education of police, prosecutors and judicial officers is crucial. Based on the feedback received during its inquiry, it is clear to the Commission that the education and training undertaken by justice-system professionals is inadequate and under-resourced.

The mandatory nature of any recommended training was also a key consideration for the Commission. The scale of the input received by the Commission about the lack of awareness and understanding of domestic, family and sexual violence within the justice system suggests that the time for relying on voluntary participation in education and training has passed. Victim-survivors and their supporters have clearly articulated the urgent and critical need for the justice system to do better.

> **"In Australia, the criminal 'justice' system is the sole service we have that exists to hold behaviour to account and to impose consequences. It is literally the only tool that we have. The only thing standing between innocent vulnerable safe parents/children and the DFSV perpetrator.**[129]

This section discusses the current education and training requirements across the justice system, leading to a call for the South Australian government to invest in greater training and education for all participants.



South Australia Police

Current state

SAPOL plays a pivotal role in preventing, investigating and prosecuting crime, particularly in the Magistrates Court, and in upholding community safety. SAPOL officers are often the first point of contact for victim-survivors of domestic, family and sexual violence. The quality of this initial police response can be life altering.

When that response lacks sensitivity or trauma-informed practice, it can retraumatise the individual and deter future reporting or engagement with the justice system. Conversely, a respectful and informed approach can foster trust and support safety and justice outcomes.

Submissions from the Legal Services Commission and Embolden underscore the critical need for police to adopt a trauma-informed approach. The Legal Services Commission highlighted that despite substantial investment in education and structural reforms within SAPOL, 'problems persist'. They pointed to international models – such as in Scotland and the United Kingdom – where sustained government investment in police education has led to more effective responses.

> **Better training around dealing with domestic, family and sexual violence situations, which acknowledges that the dynamics at play in these situations is incredibly complex and that sensitivity in the Police approach to these situations is critical.**[130]

Embolden urged SAPOL to review and strengthen its training across all staff to ensure victim-survivors – including children and young people – are responded to in trauma-informed and culturally safe ways.

Submissions from individuals with lived experience, alongside responses to Share With Us, reveal a wide spectrum of interactions with police. While some victim-survivors described compassionate and life-saving responses, others reported feeling dismissed, retraumatised or disbelieved.

> **The SA police were amazing at helping our family and supporting us through a traumatic situation after my ex husband tried to burn the house down with us inside.**[131]

> **My interaction made me feel that I was burdening the police and that they did not care or feel that the abuse that me and my children were being subjected to was worthy of their time.**[132]

> **For most young people interviewed, the police were not perceived as a trusted avenue for disclosure or for protection... For those young people who did report their experience to the police, there was a wide range of responses described – from supportive and respectful to hostile, dismissive, or retraumatising. Specifically, several participants recounted being met with disbelief, judgment or minimisation when they first disclosed their experience of abuse to the police.**[133]

> **There is a systemic belief within the police force that women experiencing domestic violence either don't want to help themselves, or it's too hard to remove them from the situation so there's no point assisting.**[134]



Many submissions acknowledged the quality of SAPOL's family violence investigators, and advocated that all police receive similar trauma-informed training to improve their consistency and service delivery.

> **While I've experienced positive/supportive responses from those in the mental health field and within SAPOL, I just believe I got lucky, the services and systems are in desperate need of more people in the position of power to undergo trauma informed training.**[136]

> **There needs to be increased training for police relating to family violence. Police do an amazing job given the capacity and training they currently have, however additional training in managing family violence incidents, reporting and working with support agencies needs improvement.**[137]

> **Police need MORE training on how to approach, speak to, support & care for victims. Police also need far more support by Prosecutors and Judges for what they, in the most part fight hard for (or arresting/charging offenders at grass roots level) only to be let down by Courts.**[138]

> **All front-line officers such as those who attended on the night of [loved one's] passing, need better training in quickly recognising the need to involve a higher authority where physical or mental abuse, or in extreme cases death, has occurred. We recognise that legislation to criminalise coercive control will soon go before parliament, however for it to be effective, a massive change in the culture of SAPOL needs to be take place.**[139]

The police response to domestic, family and sexual violence is governed by a number of internal policy and procedure documents, including the Domestic Violence Strategy (which is currently under review), standard operating procedures, prosecution practice notes, and General Orders which provide SAPOL employees with instructions to ensure organisational standards are maintained consistent with SAPOL's vision.

The Commission has been told that police officers undertake a range of training to support service delivery in the field of domestic, family and sexual violence. SAPOL's approach to this training includes:

- police recruit and call-centre operator training
- corporate training packages delivered in response to legislative and procedural changes, and to address topical issues and refresh knowledge as the need arises
- specialist training for employees performing domestic, family and sexual violence investigator roles
- specialised domestic family and sexual violence prosecutor training.

Police recruits receive education and training on sex offences and domestic abuse during the Constable Development Program for Cadets and Probationary Constables in Training. This includes education on patrol responses to sex offences and domestic abuse–related offences, police interim intervention orders and breaches of intervention orders, relevant strategies on domestic abuse, risk assessments, investigation management and victim and offender management.

The Commission observed the 5-day Domestic Violence Investigator Course (DVIC) at the SAPOL Academy. Participants on the course are selected because they are currently working in, or interested in working as family violence investigators. The Commission understands that all police officers attached to family violence investigator positions must complete DVIC within a year of appointment to their position.

The course covers a wide variety of issues over the 5 days including:

- the dynamics of abuse
- the DVDS and MAPS
- the Information Sharing Guidelines
- online dating, cybercrime and prevention
- understanding coercive control and stalking
- investigation techniques and prosecution of domestic violence matters
- victim and suspect management
- the CAA Abuse Prevention Program
- migrant assistance programs and Aboriginal specialist services
- intervention orders
- vulnerable victims
- domestic violence and LGBTQIA+
- child abuse reporting.

A separate online Foundation Training program is a prerequisite for members working in family violence investigator roles. New members are expected to complete the program, consisting of 7 modules, within 7 days of commencing in these roles.[140] This course is accessible at any time for police officers who wish to refresh their knowledge. Training is also provided to all police officers about legislation changes and to provide refresher training when a need is identified.

The Detective Training Course and the Investigative Interviewing Techniques Course contain modules on domestic, family and sexual violence; however, there does not appear to be any specific mandated ongoing professional development for police officers once they have completed these courses unless they take on a specialist role.

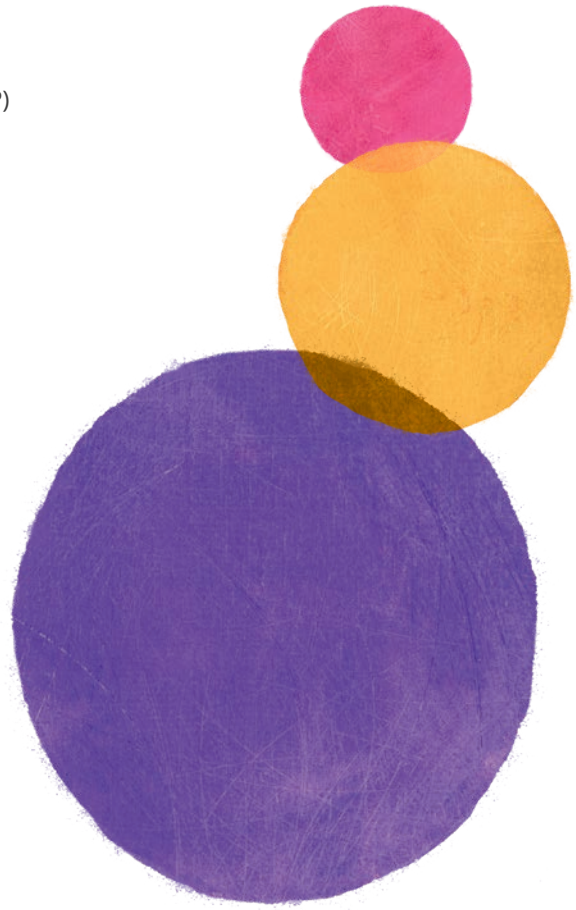
Future state

The Commission acknowledges the efforts of SAPOL so far to educate and train its workforce in the nature and dynamics of domestic, family and sexual violence. However, the current approach is insufficient, particularly given the proposed criminalisation of coercive control and the documented increase in the time spent on domestic abuse incidents by patrol officers who receive limited domestic, family and sexual violence training during their time in the academy.

This view is supported by the input to the Commission and reflected in the AIC Paper referred to earlier, which concluded that 'an evidence-informed understanding of training needs and best practice is critical to effectively empowering police in their work, and improving the safety of victims'.[141] The AIC Paper noted that the increasing number of domestic, family and sexual violence reports, and the corresponding increase in the resources devoted to securing positive outcomes, creates challenges for frontline police.[142] In particular, it noted that research has consistently highlighted the longstanding difficulties in balancing ongoing and refresher training for sworn officers with their operational and administrative duties, and that formal training can still clash with outdated practices in the field and with organisational culture.[143]

Domestic, family and sexual violence training for police officers should be mandatory, consistent and ongoing. Training needs to equip all police officers with the knowledge and skill to respond to domestic, family and sexual violence reports in a trauma-informed way; to understand the complexity of domestic, family and sexual violence and of the behaviours which can form part of coercive control; to understand the very real possibility of misidentification in circumstances involving domestic, family and sexual violence; and to ensure that this knowledge and approach becomes embedded throughout SAPOL so that harmful and dismissive attitudes towards domestic, family and sexual violence are never tolerated. There is a need to ensure that the content of this training is informed by people with lived experience of domestic, family and sexual violence, and that there is appropriate resourcing to not only develop these training materials and courses but to also ensure that police officers are able to be released from their duties to attend this training.

The following recommendations regarding police training must be read in conjunction with Recommendation 40 relating to the development of an operating model between SAPOL and the Office of the Director of Public Prosecutions (ODPP) for the investigation and prosecution of domestic, family and sexual violence offences.



Recommendation 37

The Commissioner of Police develop and implement a comprehensive and ongoing domestic, family and sexual violence training program for all sworn officers and any relevant staff members. This training must:

a. be designed alongside the specialist training program (see Recommendation 38) to ensure consistency with that program's evidence-based and trauma-informed content
b. deepen officers' understanding of the dynamics of domestic, family and sexual violence, its impacts across different communities, and how to recognise it and respond to it accordingly
c. equip officers to identify patterns of coercive control and behaviours of people using violence
d. equip police to provide child-focused responses
e. strengthen the ability to identify the primary aggressor and avoid misidentification
f. be embedded into professional practice through consistent, repetitive delivery
g. be accessible via flexible delivery modes (online and in person) that are designed to be interactive, not procedural
h. be backed by strong, visible leadership and supervision from senior officers.

Recommendation 38

The Commissioner of Police develop and implement an intensive, ongoing training program for family violence investigators and any other workers who require specialist knowledge of domestic, family and sexual violence. This training program is to be designed in collaboration with a suitably qualified provider with demonstrated expertise in developing specialist training, to ensure the program is effective, evidence based and trauma informed, as well as intersectional, inclusive and culturally relevant.

The training program must:

a. be informed by the Lived Experience Advisory Networks and the domestic, family and sexual violence sector
b. provide specialist knowledge regarding the dynamics of domestic, family and sexual violence and how it can present differently in different communities
c. provide practical tools to identify and manage trauma responses
d. address the complexities of coercive control and the different behaviours and tactics of people using violence
e. strengthen the ability to identify the primary aggressor and avoid misidentification
f. build cultural capability
g. strengthen understanding of interagency intersections – particularly with child protection and family law systems
h. equip investigators to provide child-focused responses.

Recommendation 39

The Minister for Police progress amendments to regulation 89 of the *Police Regulations 2014* (SA) to require the Commissioner of Police to report on the nature and scope of all domestic, family and sexual violence–related education and training in the annual report mandated under section 75 of the *Police Act 1998* (SA).

Prosecutors

Current state

The prosecution of criminal offences is undertaken primarily by SAPOL prosecutors in the Magistrates Court and by the ODPP in the higher courts.

Much of the feedback received by the Commission about prosecutors generally, and about the ODPP specifically, was negative. Lived experience accounts spoke about being made to feel as though they were the one on trial or that they were not a credible witness.

> **I was raped on a night out... While my interaction with Police was positive, the justice and DPP is broken. I was victim blamed, traumatised and told I was believed but the case wouldn't be a home run. The justice system has to do better for victims... As a privileged white woman who was the 'perfect witness' I still couldn't get justice. My heart breaks for the women in any minority, they have no chance.**[144]

> **Then the DPP happened. I was requested to attend a proofing meeting and from my very first interaction the narrative shifted dramatically. The onus was now on me to justify my every move, my every breath, account for every minute and remember every detail. The victim blaming language, lack of empathy and general matter of fact interactions will be with me forever.**[145]

They also expressed disappointment in prosecution processes, including having their case dropped without their prior knowledge or consent and receiving poor (or no) communication from prosecutors during the progression of the relevant court matter.

> **He was charged with multiple charges, including strangulation with intent, assault with intent and a rape charge... I received a trial date...however, the DPP dropped all charges... I had medical reports, photos, screenshots of abusive and threatening messages, and still this wasn't enough... No one told me at the DPP that when the charges were dropped, so was my intervention order.**[146]

> **[T]he police prosecutor deemed this case not strong enough to proceed to trial. Since all charges were now going to be dropped, then the court deemed that there was no standing for the restraining order to be kept in place. But the prosecutor did not have the decency to at least inform me that this was happening. A police officer who was handling my case informed me. The police officer warned the prosecutor to not drop the restraining order because my ex-partner actually had a history of domestic violence with multiple women and currently had another outstanding restraining order (this was written in the police report). However, it did not make any difference and all charges and the restraining order were dropped.**[147]

> **About a month before my case was due to go to court, the Department of Public Prosecutions...told me that my case would no longer be taken to court. I'd like to emphasise that I wasn't asked how I would feel it if wasn't taken to court, I was simply told that it would not be. The reasons I was given for this is because my witness' testimony appeared to have changed over time, and because the men being prosecuted all had the same story...Respectfully, no shit. It was a gang rape...a group of men decided to take my power of choice away from me, and then another group of men decided to take my power of choice away from me. I would have liked some more empathy, and consideration, in the process of choosing not to pursue my case.**[148]

> **Just before trial all charges were dropped due to the prosecution having concern about my brain injury and the ex trying to use this against me.... He got away with everything! No charges. No restrictions. No monitoring. No way for me to seek reimbursement for the damages he caused. Left with financial hardship. Unable to keep myself safe or know when he will try again.**[149]

Individuals experienced exacerbation with victim-blaming comments and tactics.

> **The day before he went to court, the prosecutor called that they were not going to go ahead with the court case, that as she was intoxicated the weekend of the assaults they felt the case was not strong enough, apparently photos of bruisers and burns, statements that was the same every time she told the story was not enough. Apparently if you are a drunk you deserve to be assaulted and burnt, told you are useless, told you are crazy and have bipolar, told if you take the children they will hurt you and your parents, keep the children from their mother for 5 weeks, it is okay to be a terrible, abusive, violent, manipulative human if the person you are abusing is intoxicated.**[150]

> **Some of the things said to me by DPP staff during my multiple meetings with them include: 'You didn't ask him to stop or push him off when you woke up, he may have considered that consent'; 'maybe you don't remember consenting'; 'You're very credible, but not reliable, you were too intoxicated'; 'Taking antidepressants and drinking alcohol can cause gaps in memory, again maybe you don't remember consenting'. The manipulation that took place to make me feel I would not win in front of a jury and that they were doing me a favour in not proceeding makes me feel sick when I look back now ...To have to sit in a room and be told 'we all know this happened to you, and for that we are very sorry, but the defence will use all of these things and we don't think it will be beyond a reasonable doubt' was, and still is, soul-destroying as a victim of sexual assault. This narrative perpetuates the social culture that exists of blaming the victim.**[151]

In considering how these issues could be addressed, the Commission undertook desktop research on the approaches taken in other jurisdictions and called evidence from the United Kingdom (UK) Crown Prosecution Service on Day 2 of public hearings.

The Crown Prosecution Service national operating model for the prosecution of adult rape cases (the UK model) is the result of a significant period of work undertaken by the Crown Prosecution Service to transform the criminal justice response to rape and improve the experience of victim-survivors.

Chief Crown Prosecutor Siobhan Blake gave evidence that the impetus for the initial review was a realisation in 2018 that 'there had been a reduction of the number of cases referred to us by the police and then were subsequently charged by us and entering court'.[152] As a result, a joint national action plan between the Crown Prosecution Service and UK police forces was commissioned to work on developing solutions to the problem and a way forward. The Crown Prosecution Service also undertook a piece of work on developing an understanding of myths and misconceptions, particularly in relation to adult rape.[153]

The UK police forces' project, Operation Bluestone, was focused on policing and investigation tactics, together with improving interactions with the Crown Prosecution Service and the approach to victim care. The work was led by a group of academics who were embedded within police forces and tasked with examining policing practice, procedure and culture. The end product was a series of operating models for policing.

The Crown Prosecution Service's parallel project, Operation Soteria, involved the development and implementation of a range of pilot projects on matters such as the provision of early advice to police, ensuring more timely and sensitive communication with victims, subjecting charging decision-making to more scrutiny, and better guidance on balancing the needs of an investigation with the right to privacy in respect of digital or third-party material.[154] The focus of the Crown Prosecution Service was to identify ways to narrow what had by then become known as 'the justice gap' so as to bring more serious sexual offenders to justice.[155]

The key elements of the UK model for the prosecution of adult rape cases are:

- police and the Crown Prosecution Service working together at the outset of the case to build better investigations and reduce delays
- a shift to a suspect-centric approach
- addressing myths and misconceptions through embedding evidence-based research into the publicly available Crown Prosecution Service legal guidance for rape and serious sexual assault prosecutions.[156]

In her evidence, Ms Blake spoke about the importance of training for both police and prosecutors on these key elements, noting that a significant amount of training had been rolled out over the last 2 or 3 years with the intention to constantly refresh content to take into account further development of investigation and prosecution techniques and approaches.[157]

Training in relation to the suspect-centric approach was particularly important, as Ms Blake noted that 'there was tendency to potentially focus on an investigation that looked into the actions and motivations of a complainant rather than focusing on the actions and motivations of a suspect'.[158] To address this, the Crown Prosecution Service developed a set of guidance and training to focus police and prosecutors on the behaviours and actions of a suspect.

Ms Blake provided an example in her evidence:

> **"it was a case where a complainant had been out for the night, she's had a bit to drink, she'd become intoxicated and she'd lost the group of friends she was with. She left the nightclub that she was in, and the defendant had intercepted her as she left the nightclub, offered her some assistance and support in getting home. Subsequently he raped her. Rather than focusing on any of the issues around the complainant or what had happened to the complainant on that evening, in the run up to the evening, the investigative team really focused on what the defendant had been doing during the course of the evening and what came to light was he was sitting in a nightclub for many, many hours on his own, he wasn't drinking or socialising, he was very much silently observing. He then saw this particular lady leave and he then immediately intercepted her. And so the whole focus on the investigation was really to ask the questions, well, why was he there? What was he doing? Who sits in a nightclub for hours and hours and hours drinking water and speaking to nobody?**[159]

The Crown Prosecution Service and UK police announced a partnership approach for domestic and family violence matters in November 2024. The Domestic Abuse Joint Justice Plan commits the Crown Prosecution Service and police to work together at an earlier stage to build strong cases from the outset and get justice for victim-survivors.[160] The prosecution guidance for domestic abuse was also updated by the Crown Prosecution Service in December 2024. It states that domestic abuse cases 'are amongst the highest priority work dealt with in the criminal justice system. The safety of adult and child victims is imperative when prosecuting cases of [domestic abuse]'.[161]

Future state

Trials for domestic, family and sexual violence offences are undoubtedly, even in the best of trauma-informed and safe circumstances, a traumatic experience for a victim-survivor. The adversarial process requires evidence to be tested, which means a victim-survivor's account will be questioned for reliability and truthfulness. The burden of proof is high – the prosecutor must establish the accused committed the offence beyond a reasonable doubt. Experiences of the criminal justice system can be further exacerbated by other intersecting forms of discrimination and historical traumas inflicted by the justice system on Aboriginal people, LGBTQIA+ people, people with disability and CALD people.

Given this context, the Commission acknowledges that, to a degree, some dissatisfaction with prosecutors (and the justice system more broadly) may come from a lack of understanding about the justice system, the application of relevant laws and the role of a prosecutor. However, this cannot explain away all of the feedback received from victim-survivors. Prosecutors have a role to play in improving the system – something must be done.

Cultural change within the justice system will be difficult but should not be delayed because it will be hard. Cultural change is also urgent, because of the need to ensure there is trust in the system charged with the administration of justice, but also because of the proposal to criminalise coercive control, which will lead to a larger number of domestic, family and sexual violence matters being brought before South Australian courts.

Significant improvements are needed in how police and prosecutors work together to investigate and prosecute domestic, family and sexual violence matters. This work must be done in partnership if it is to be effective. There needs to be clarity for police investigators around what should be investigated to tie into what is an effective prosecution strategy for these types of matters. There also needs to be a common understanding of how to address and challenge myths and misconceptions during an investigation and prosecution without inadvertently reinforcing them. This can only be achieved through leadership, cultural shifts and ongoing trauma-informed and evidence-based training.

The Commission found the evidence about the UK model compelling, particularly its shift to a suspect-centric approach, which requires a deliberate focus on a suspect and their behaviours during and prior to the incident rather than the focus being solely on the victim-survivor and their 'believability'. The UK model's work around myths and misconceptions (including their extensive publicly available resources) was also impressive.

The UK model was evidence based, evaluated, and has been implemented in the context of a criminal justice system that is very similar to South Australia's system. The Commission's approaches to the Crown Prosecution Service were met with absolute willingness to share what they had learned, the processes necessary to success and the funding that was required to make the changes that were so urgently needed. The Commission is confident that a joint approach from the South Australian Director of Public Prosecutions and the Commissioner of Police would be met with the same response.

The ODPP and SAPOL should work together in partnership to develop and implement an operating model for the investigation and prosecution of domestic, family and sexual violence matters based on the UK model. The operating model and the development of training materials should be evidence based. There is existing work that can be drawn on and further developed, such as ANROWS' 2021 research report titled 'Chuck her on a lie detector': Investigating Australians' Mistrust in Women's Reports of Sexual Assault,[162] to meet the needs of a South Australian implementation of the UK model. The model should also draw on the evidence base used in the preparation of the RAMF to ensure that police and prosecutors are equipped to identify risk in the context of domestic, family and sexual violence and take the steps available to them to mitigate that risk.

Finally, this work should consider how the model and training will apply to independent barristers briefed by the ODPP.

The development and implementation of this operating model must be supported and resourced by the South Australian government.

An operating model like this, and more specifically the training that would be provided, would also better equip prosecutors when faced with the perpetuation of myths and misconceptions during criminal trials. This is discussed further in the next section.



Recommendation 40

The South Australian government resource the Office of the Director of Public Prosecutions and the Commissioner of Police to collaboratively develop and implement an operating model for the investigation and prosecution of domestic, family and sexual violence offences, based on the United Kingdom Crown Prosecution Service national operating models. The model should:

a. be evidence based, either through reliance on existing evidence or in collaboration with relevant academics and researchers
b. ensure that work conducted in partnership with police occurs as early as possible in an investigation
c. keep in mind the levers available to police and prosecutors to mitigate risk to victim-survivors, including the use of intervention orders and bail conditions
d. focus on a suspect-centric approach to investigation and prosecution
e. be informed by input from the Lived Experience Advisory Networks
f. develop publicly available guidance documents on myths and misconceptions about domestic, family and sexual violence and how to address them
g. require ongoing evidence-based and trauma-informed training for prosecutors and investigators
h. consider how the model and training applies to barristers briefed by the Office of the Director of Public Prosecutions
i. build in reviews of the model to ensure that it is continuously updated to reflect new evidence.

Courts

Current state

The vast majority of South Australian courts and tribunals hear matters that include domestic, family and sexual violence. Intervention order applications and breaches of intervention orders are dealt with in the Magistrates Court or the Youth Court of South Australia, as are most minor indictable criminal matters. The Youth Court also presides over the child protection jurisdiction. Major indictable matters are dealt with in the District Court or the Supreme Court of South Australia. The Coroners Court conducts inquests into reportable deaths, including those resulting from domestic, family and sexual violence.[163] The South Australian Civil and Administrative Tribunal may also hear matters that involve domestic, family and sexual violence such as tenancy and guardianship matters.

Domestic, family and sexual violence also features in many federal courts, and in particular, in the family law jurisdiction. However, the focus of this section is on the levers available to the South Australian government to increase awareness and mandate specialised training across the South Australian justice system.

In South Australia, the administrative functions of the courts are carried out by the CAA and the State Courts Administration Council in accordance with the provisions of the *Courts Administration Act 1993* (SA). Along with the judicial officers who preside over the individual courts, there are a variety of roles within the CAA that support the functioning of the courts and that interact with both victim-survivors and people using violence as they proceed through the criminal justice system. These include Registrars, Sheriff's Officers, court reporters, clerks and registry staff.

Judicial officers in South Australia are appointed to judicial office by the Governor in Executive Council. In practice this means that the appointee is selected by Cabinet on the recommendation of the Attorney-General. The only legislative requirement for appointment as a judicial officer relates to the number of years that a person has been a legal practitioner.[164] There are no other eligibility requirements for appointment as a Judge of the Supreme or District Court, such as a fit and proper person test or education or training requirements, nor is there any formal application or expression-of-interest process.

In the case of magistrates, a slightly more robust appointment process is in place. In addition to the requirement that a person must be a legal practitioner of at least 5 years standing, the *Magistrates Act 1983* (SA) requires the Attorney-General to consult with the Chief Justice and the Chief Magistrate before making a recommendation for appointment. While not a legislative requirement, an expression-of-interest process has been put in place for people who wish to apply for appointment as a magistrate.

Unlike in some other jurisdictions, there are no publicly available processes or frameworks regarding the judicial appointment process.[165] Instead, and as identified in the Commissioner for Equal Opportunity's 2024 Review of Harassment in the South Australian Legal Profession (the Harassment Review), the only formal due diligence conducted in relation to potential appointees to the District and Supreme Courts consists of the appointee submitting to the Attorney-General:

> **"a statutory declaration about their prior conduct in respect of a number of scenarios, including any complaints about inappropriate workplace conduct, formal complaints to the Law Society, EO SA or SABA, and sanctions by the Supreme Court, the LPCC, the Legal Practitioners Disciplinary Tribunal or other professional bodies or associations. It also requires the candidate to address other current or historic matters, whether personal or professional, that may bring the administration of justice into disrepute should they be appointed. The statutory declaration relies on the honesty and integrity of the individual.**[166]

The absence of any appointment framework or process to match a person's abilities and experience against required criteria prevents there being any formal assessment of a person's awareness and understanding of the issues relevant to the work of a judicial officer. This is relevant, because once appointed to judicial office, there is no mandatory requirement for judicial officers to undergo continuing professional development or other education.

In its submission to the Commission, the CAA advised that the most formalised training for judicial officers is delivered by the National Judicial College of Australia (NJCA).[167] The NJCA recommends that each judicial officer should be able to spend at least 5 days each calendar year participating in judicial education and training relating to the judicial officer's responsibilities. It does not specify the content of that training.[168]

The NJCA has developed family violence training for judicial officers with funding from the Australian government. Although this training is not mandatory, the Chief Magistrate strongly encourages all magistrates to attend this training at some point during their tenure.[169] The purpose of the NJCA family violence training is to build understanding and capability within the Australian judiciary around family and domestic violence – including First Nations peoples' experiences of domestic and family violence.[170] The program includes information on the causes, levers and triggers of domestic and family violence, coercive control, and advice on how to use the National Domestic and Family Violence Bench Book (the DFV Bench Book).

The DFV Bench Book is a free digital resource for judicial officers, legal practitioners and frontline staff across Australia that assists in the education and training of judicial officers so as to promote best practice and improve consistency in judicial decision-making and court experiences for victim-survivors in cases involving domestic and family violence.

Additional opportunities for training for judicial officers is outlined in the CAA's submission, together with the following opportunities for CAA staff:

- Sheriff's Officers undertake 2 weeks of training upon commencing their employment. They do not receive domestic, family and sexual violence–specific training, although the in-court support training includes guest speakers from the court Abuse Prevention Programs.
- Staff members of the Abuse Prevention Program attend training on working with men who use violence, provided by non-government organisations such as WSSSA and No to Violence. They may also attend additional domestic, family and sexual violence training delivered by WSSSA.
- Other court staff are currently only provided one online module of training on 'Domestic Violence in the Workplace'. It is internally focused and designed to increase awareness of domestic violence and its impact in the workplace; however, it is not mandatory and currently has a low completion rate across the CAA.[171]

There are gaps in the provision of judicial education across the different South Australian courts. There are also gaps in terms of the training made available to other CAA staff. The Commission understands that there is no specific government resourcing for judicial education, or for CAA staff training and development.



The inputs to the Commission indicate that the gaps in judicial education may be contributing to victim-survivors' poor experiences within the justice system. Victim-survivors and advocates spoke of long delays, victim blaming, retraumatising court processes, unsafe bail agreements or intervention order conditions, and inadequate sentencing. These inputs were profoundly disturbing.

> **I was put on trial not him. If I cried, I was mentally unfit. If I didn't cry, I was a cold-hearted manipulating bitch.... I was belittled and blamed for not protecting my children from him. I was made to carry the guilt and shame. Why did I let him do that to our children?... Not once did anyone ask why [he] strangled his children? If anyone else had done to our children what their father did, they would be in jail right now.**[172]

> **The matter is still in the District Court with ongoing delays caused by the perpetrator. He lies and doesn't turn up to court, the court doesn't take any action with his bail. I am continually retraumatised over and over because of their ridiculous ways of doing things.**[173]

A common feature of statements was that they referred to the impact of court delays and tactics used by defendants, which was not necessarily challenged by the judicial system:

> **I have just spent two weeks watching my [family member] go through a trial due to domestic violence. To watch what she went through on a nine day trial, was absolutely brutal. Everything that has happened seemed to make it look like she was the perpetrator and not the actual victim in this case. It was so heartbreaking to watch someone you love be put through this. These men seem to have all the rights and women have to fight so hard just to survive. There [were multiple] charges and he was only found guilty on one!!! He is now out on bail. They say he will go to jail, but I do not want my [loved one] to be the next statistic to be added to yet another female hurt or killed.**[174]

> **[Her] husband strangled her and was removed from the home in handcuffs. The police had enough evidence to convict the abusive husband, however, the judge said, 'I'll dismiss this case. You are from a good suburb and your career would be adversely affected by a guilty verdict (of aggravated assault)' and let the perpetrator go free. The judge also said 'I would have hated to know what would have happened if your daughter had not come out and interrupted you.' Please note the judge's language in this, demonstrating that he prioritises a man's career over the lives and safety of women and children.**[175]

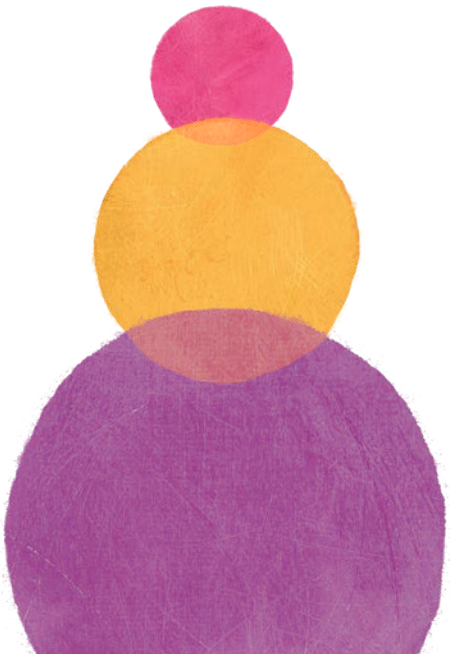
> **There needs to be a reasonable timeline for the process to go through court and not be continually delayed by the perpetrator. It is almost two years since my ex-husband was first arrested for aggravated assault and the process continues to drag on in court 'because he has a right to a fair trial'. What about the rights of the victim to a safe life? There needs to be consequences for a perpetrator not following the direction of the magistrate. My ex-husband was told three times to bring a lawyer with him, each time delaying the process again by 6 – 8 weeks, but there was never any consequence for not obeying this order from the magistrate.**[176]

> **On one occasion the Magistrate/ Judge... questioned if she was imagining things and suggested to her - 'things aren't that bad'.** [177]

> **The courts released my ex husband on bail to an address that was only a 2 minute walk from my house and I was left in fear that he would return. The court system was so hard and I was made to feel like I was lying about what happened while going through the process... the crime which had the biggest maximum sentence was for property damage not the 3 attempts to kill me. This left me feeling completely worthless and like my life was worth less than the mobile phone he smashed and the holes in the walls he made.**[178]

To further assess the prevalence of these experiences across the justice system, the Commission summonsed transcripts from randomly selected criminal trials in which the accused person was charged with an offence of rape (or offences including rape) and which were completed between July 2022 and June 2024. Of the 20 transcripts provided under summons, all 20 of the victims were female and all 20 of the defendants were male. Fifteen of those transcripts were reviewed against the list of sexual assault myths prepared by the UK's Crown Prosecution Service, as part of their extensive review of sexual offence prosecutions.[179] The transcripts were not reviewed to investigate a particular matter or attribute blame, but to determine common themes in the approaches taken in trials for sexual offences. It is acknowledged that this review was conducted in relation to a small sample of trials and was not exhaustive.

The transcript review demonstrated that sexual violence myths and misconceptions continue to be perpetuated in South Australian rape trials.



In the cross-examination of victim-survivors, many common themes were raised:

- the victim-survivor's behaviour after an alleged rape, both immediately (if you were raped you would have left straight away) and, when the sexual violence was in the context of a relationship, longer term (if the rape had really occurred you would not have remained in the relationship)
- behaviour that might indicate a victim-survivor was happy in a relationship (e.g. posing in a photograph), and a suggestion that the alleged sexual violence must therefore have not occurred
- failure to complain or failure to disclose an entire account when reporting the matter to authorities, suggesting that means the account is untrue
- mental health and medication, with a suggestion that it affects the victim-survivor's credibility or reliability
- cross-examination about inconsistences in the victim-survivor's account, and a suggestion that it meant that the allegations were untrue or that the victim-survivor's account was unreliable occurred in most of the trials that were reviewed.

Several of the trials reviewed involved sexual offending in the context of a relationship where other violence was also used. The questioning of these victim-survivors also presented some common themes:

- If the relationship was violent, you would not have remained in it.
- If the person was violent, you would not have married them or had their children.
- If the person was violent, you would not have engaged in consensual sexual activity with them.
- The appearance of happiness in a relationship (e.g. family photos, telling the person using violence that she loved him) must mean that it was not a violent one.

The Commission's review identified that often the prosecutor did not object to cross-examination about these topics and the trial judge did not intervene. In the reviewed trials, no expert evidence was led to explain the research and evidence which has enabled these concepts to be recognised as myths.[180] Instead, prosecutors attempted to explain the behaviour of the victim-survivor and the suggestions made by defence counsel about that behaviour when addressing the jury at the end of the trial. At this point, the suggestions had already been made and the victim-survivor had already been subjected to the questions, despite there being an evidence base which establishes the unreliability of these suggestions. In addition, while prosecutors did often attempt to address these myths and misconceptions, it was apparent that they may not have been equipped with the expertise or skills to be effective or accurate in those attempts. A recommendation for an ODPP / SAPOL operating model which would include prosecutor training about myths and misconceptions is addressed in the previous section.

Future state

None of the reports and inquiries referred to earlier recommend mandatory training for judicial officers, despite almost all acknowledging the need for education and training on domestic, family and sexual violence and almost always recommending mandatory training for police and legal practitioners.

This stands in contrast to the view consistently shared with the Commission across the domestic, family and sexual violence sector and from the justice-system participants that mandatory training should be considered. The Commission considers education of judicial officers essential to ensure informed decisions and to hold people using violence accountable. Too many of the stories heard by the Commission about the justice system were negative. These negative experiences often resulted in retraumatisation of the victim-survivor. Many also involved misunderstanding of risk, and lack of accountability for the person using violence.

Despite encouraging signs in some courts, such as the Youth Court's ongoing education program and the regular Family Violence List Forums in the Magistrates Court, the Commission understands that the current approach to judicial education is unfunded and relies on allowances being made from within the CAA's budget. This can be contrasted with approaches in other jurisdictions, such as in Victoria, where a government-funded Judicial College is tasked with developing and providing education and training to Victoria's judicial officers and tribunal members.

Whether it is a lack of investment by government that has resulted in education and training gaps, or a lack of confidence in the impact of increased investment given the limited levers to assure attendance that has prevented further investment, these gaps need to be remedied.

The Commission has identified a readily available mechanism that can be used to establish a mandatory training program for South Australian judicial officers.

Under the South Australian *Judicial Conduct Commissioner Act 2015 (*SA) (JCC Act), the Judicial Conduct Commissioner has the power to investigate complaints against judicial officers to enhance public confidence in, and protect the integrity and impartiality of, the judicial system. Section 36(2)(a) of the JCC Act provides that the regulations may confer functions on the Judicial Conduct Commissioner relating to the education and training of judicial officers. This regulation is explicitly permitted to be general in application. Section 36(4) states that, before conferring a function on the Judicial Conduct Commissioner under section 36(2)(a), the Attorney-General must first consult with the Chief Justice. Once a function is conferred under section 36(2)(a), the Judicial Conduct Commissioner must consult with the Chief Justice, Chief Judge and Chief Magistrate in the exercise of the conferred function. Heads of jurisdiction already have separate statutory responsibilities for promoting the training, education and professional development of judicial officers.[181]

Sections 36(2)(a) and 36(4) of the JCC Act evidence a clear intention on behalf of the South Australian Parliament to create a framework whereby judicial officer engagement in education and training could be mandated and monitored by the Judicial Conduct Commissioner or the heads of jurisdiction. This is a regulatory lever that, consistent with the approach discussed above in the 'Workforce awareness mechanisms' section, should be used as an effective way to embed awareness across the judicial officer workforce.

The development of an education and training framework under section 36(2)(a) of the JCC Act would require resourcing, both in terms of funding the capacity for the Judicial Conduct Commissioner to undertake the development and implementation of the framework, but also in terms of resourcing the development and delivery of the education and training itself. The Commission understands that funding for judicial education and training has long been called for in South Australia. There is an opportunity to tie funding to a framework that could, among other things, report on the uptake of education and training opportunities and embed evaluation into the impact of education and training. The framework could also provide for input from the Lived Experience Advisory Networks (discussed in Chapter 2) consistent with the approach recommended in relation to police training and the joint investigation and prosecution model between SAPOL and the ODPP.

It is the Commission's view that resources for the development and delivery of training are best placed with the CAA. While attendance at NJCA courses will still undoubtedly form a part of a JCC Act education and training framework, there is a need for training to be developed and delivered at a local level to allow for it to be available at regular intervals and not require the time out of court for judicial officers to travel interstate for education and training opportunities.

Opposition to mandatory judicial education and training has been raised with the Commission. This opposition is primarily grounded in a concern that mandated education and training will somehow offend the principle of judicial independence. The Commission disagrees with this categorisation because training would not relate to the conduct of particular matters and points to the JCC Act as an indication of the intent of Parliament that judicial officers are, like any other workforce, expected to avail themselves of evidence-based education and training at regular intervals throughout their career.

The Commission understands that training for court staff is limited. Regular training for court staff on recognising and responding to domestic, family and sexual violence is important as they will spend significant time interacting with people attending court. This is acknowledged in the CAA submission:

> **Accessible and regular training for volunteers, court staff and registrar services staff on recognising and responding to DFSV would deliver an increased awareness in how to identify DFSV, and what to do if an alleged victim or alleged perpetrator of violence presents and asks for assistance. This would improve the court experience and access to justice for DFSV court users.**[182]

Resourcing for the CAA will have the added benefit of creating capacity to develop and deliver education and training to other court staff who regularly interact with victim-survivors and people using violence.

In addition to the development of a mandatory training framework, the South Australian government should consider the establishment of a formal process for the appointment of judicial officers in South Australia which includes a requirement regarding the appointee's domestic, family and sexual violence knowledge (among other criteria relevant to the role of a judicial officer).

In the recent Harassment Review, the Commissioner for Equal Opportunity found that bullying, discrimination and harassment remain prevalent in the legal profession, and made 14 recommendations for cultural change across the profession and individual workplaces. Recommendations 10 and 11 relate to the appointments of judicial officers and Senior Counsel.

There is not a transparent appointment process for judicial officers in South Australia.[183] In Queensland, judicial appointments are made on the basis of merit and must be conducted in accordance with the Protocol for Judicial Appointments (the Protocol) .[184]

Applications are made by submitting an expression of interest that must include a 2-page statement addressing the AIJA suggested criteria for judicial appointment set out in the Protocol. The criteria include demonstrated commitment to impartiality, integrity and inclusivity, and demonstrated ability to provide effective leadership. The application form also requires candidates to disclose personal information including conflicts of interest, whether they have any disclosable criminal convictions or are the subject of pending charges, and whether they have ever been the subject of a complaint to a professional body in Australia.[185]

Applications are considered by a Judicial Appointment Advisory Panel (the Panel) whose role is to provide the Attorney-General with a shortlist of suitable candidates. The membership of the Panel is selected by the Attorney-General and includes legal members and community members.[186] Upon receipt of the Panel's shortlist, the Attorney-General consults with the relevant heads of jurisdiction and other appropriate stakeholders.[187]

The Harassment Review recommended that the Attorney-General, in consultation with the Chief Justice, develop and publish a protocol, determination or framework with clear criteria for the appointment of all judicial officers.[188] The Commission supports this approach and recommends that the Attorney-General implement Recommendation 10 of the Harassment Review, but with the added criteria of domestic, family and sexual violence legal practice experience or awareness. The purpose of including this criteria is not to prevent someone without experience from being appointed, but to identify any knowledge gaps that can be remedied through judicial education and training.

Recommendation 11 from the Harassment Review, which addresses the appointment process for Senior Counsel, is also relevant given 'many who are appointed to judicial office are Senior Counsel'.[189] The Harassment Review recommended consideration 'to the process of appointment for Senior Counsel … to ensure that there is a thorough assessment of a candidate's character and previous conduct'.[190] The Commission supports this approach and recommends the Chief Justice implement Recommendation 11 of the Harassment Review.

Recommendation 41

The South Australian government resource the Courts Administration Authority to develop and implement regular and consistent education and training on the nature and dynamics of domestic, family and sexual violence, along with any changes to law and practice, for all judicial officers and court staff as appropriate. Education and training programs should:

a. be tailored to the audience and their particular role within the courts
b. be trauma informed, evidence based and culturally appropriate
c. recognise the intersectionality of domestic, family and sexual violence
d. include a focus on:
    i. the identification and assessment of risk, taking into account the evidence base used in the development of the South Australian Risk Assessment and Management Framework
    ii. coercive control and ongoing patterns of abuse and how to recognise and respond to it within the context of court proceedings
    iii. domestic, family and sexual violence myths and misconceptions
    iv. people using violence and identification of the primary aggressor
e. be flexible and accessible and include online modules, as well as in-person training
f. require interaction and critical thinking, as opposed to a tick-box exercise
g. be supported by ongoing supervision and leadership by heads of jurisdiction and senior judicial officers.

Recommendation 42

The South Australian government, through the Attorney-General:

a. progress regulations, in consultation with the Chief Justice, to confer the development and implementation, and subsequent monitoring, of a mandatory judicial education and training framework on the Judicial Conduct Commissioner pursuant to section 36 of the *Judicial Conduct Commissioner Act 2015* (SA)
b. resource the Judicial Conduct Commissioner to develop the framework in consultation with the heads of jurisdiction.

Recommendation 43

The Attorney-General implement Recommendation 10 of Equal Opportunity SA's 2024 Review of Harassment in the South Australian Legal Profession to develop and publish a protocol, determination or framework with clear criteria for the appointment of all judicial officers, including domestic, family and sexual violence legal practice experience or awareness.

Recommendation 44

The Chief Justice implement Recommendation 11 of Equal Opportunity SA's 2024 Review of Harassment in the South Australian Legal Profession to amend the appointment criteria for Senior Counsel.

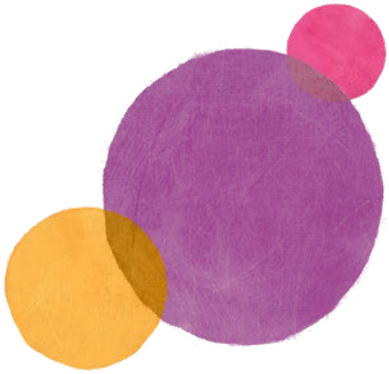
Locally led inductions

Through listening sessions in regional areas, the Commission heard that locally driven and locally informed approaches work best. In some of the regions, the Commission was invited to attend informal and formal gatherings of non-government organisations, which sometimes included government service providers. These gatherings were used to share information and collaborate on domestic, family and sexual violence prevention activities and service responses in the region. On some occasions, the meeting attended by the Commission was the first time some of the government service providers had met with the non-government meeting participants.

The Commission heard that many staff in government services may only work in a regional or remote area for a short period of time before moving to a different location or role. This can hamper efforts to build collaboration between the local community and government services. It can also mean that important local information gets missed. For example, the Commission was told of an incident where a person who had used violence was bailed to an address known locally as being designated for victim-survivors.[191]

It is clear to the Commission that the non-government services working in regional areas possess a body of local knowledge that should be shared with government services by way of local induction programs for newly arrived government employees.

Locally led inductions will foster genuine connection and understanding between government employees and the local community. Inductions will provide opportunities for government employees to understand the local area and community, and to navigate local services and networks. Locally led inductions should include Aboriginal Community Controlled Organisations to ensure that all government employees are informed of the Aboriginal-led services and programs in the area, and any other information these organisations consider relevant to ensuring government service providers are able to provide culturally safe services to the Aboriginal people and families residing in the local area.



Recommendation 45

The South Australian government design and implement a model to fund the development of local induction programs by local domestic, family and sexual violence service providers, to be provided at semi-regular intervals throughout the year to all new frontline government employees to a region.

Endnotes

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Chapter 4

Safe and effective help seeking and crisis response

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At a glance

Of the estimated 737,000 women who had experienced sexual assault by a male in the last 10 years, more than

2 in 5 (44%)
did not seek advice or support[a]





36,800 calls
to SA Domestic Violence Crisis Line (DVCL) in 2024

100 calls
'fielded every day', by DVCL

1 in 4 calls
went unanswered[b]

92%
of women who experienced sexual assault by a male did not report the most recent incident to police in 2021–22



34%
felt they could deal with it themselves

33%
didn't regard the incident as a serious offence

31%
felt ashamed or embarrassed[c]



1 in 6 (17.1%)
female victim-survivor respondents to Share With Us listed that they experienced 10 or more barriers to seeking support[d]

Introduction

Reaching out for help is a deeply personal and often difficult decision. In South Australia, there are multiple pathways into the domestic, family and sexual violence support system. People experiencing violence may disclose to family or friends, connect with community or health services, or access more formal support through police, crisis helplines, legal and advocacy organisations, or specialist housing and violence services. Yet, the pathways are not equally accessible to everyone.

People who use or are at risk of using violence face significant gaps in support systems. The Commission heard that their first interaction with support is rarely voluntary – it is often through mandatory programs imposed by the justice system. Opportunities for self-referral or community-based referrals, such as through GPs or counsellors, are scarce and underdeveloped.

Children and young people experiencing violence face even greater challenges. The Commission learned that for children and young people, help-seeking pathways are nearly non-existent. Young people who use violence also face barriers, with the limited intervention options almost exclusively tied to the youth justice system. The availability of intervention options is also limited by inadequate funding.

Help seeking and the way services respond – can be pivotal. It influences whether a person experiencing violence finds safety, and whether someone using violence gets the support needed to stop. But seeking help is rarely straightforward. Individuals must often navigate complex webs of emotional, physical, cultural and systemic barriers. And for those who use violence, the lack of accessible and voluntary intervention services means support may remain entirely out of reach.

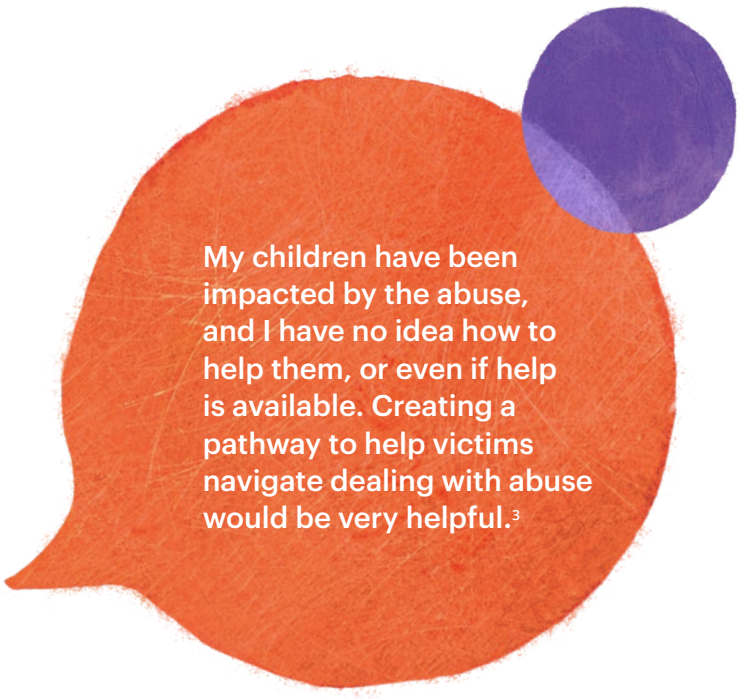
The Commission consistently heard that seeking help for domestic, family and sexual violence in South Australia is often a daunting and exhausting process. Help seekers are often met with a system that is fragmented, inconsistent and hard to navigate.

People described encountering a maze of siloed government and non-government services, where supports are disjointed and difficult to access. For some, disability or language barriers made it even harder to find or reach the right service. Others struggled simply to know where to begin.

Worse still, many spoke of harmful experiences with services – being met not with care, but with racism, ageism, homophobia, disbelief and indifference. These experiences not only delay support, they deepen trauma and erode trust in systems meant to protect.

> **Women like me are forced to remain in abusive relationships long after we decide we want to leave because we don't know how to plan and implement our escape. For some women, the financial hardships after they leave the relationship are so significant, they return to their abuser out of desperation due to lack of housing security, the welfare of their children etc. In these situations, abusers become more controlling and the ability to escape again is significantly reduced.**[1]

> **Navigating and getting support to leave and make a better life for myself and more importantly my child, has been and is the most complex thing I have ever done. I am educated, have money, contacts and support of friends and family and yet I have struggled to get help at the most desperate times. I was homeless for 2 weeks with a [child] and told I have too many assets to qualify for emergency housing. This left me alone, shocked and confused as to where to go and what to do next. I was happy to pay for housing, but I still needed someone to help me navigate and find the housing, protect my child and navigate what next.**[2]

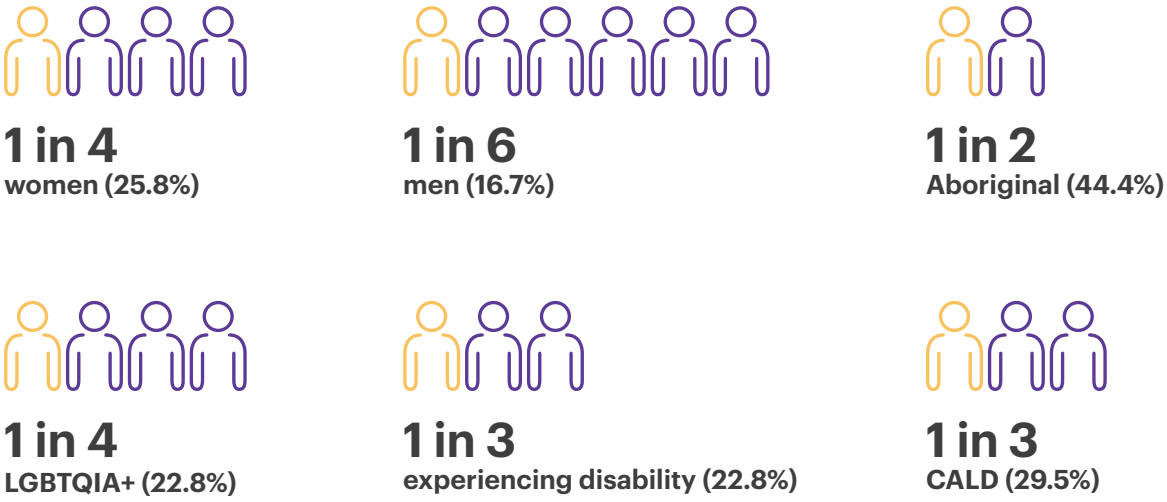


The Commission heard that people experiencing violence are often forced to seek help from multiple sources. As a result, survivors are frequently required to retell their stories – again and again – to different services and providers. This retraumatising repetition stands in stark contrast to what a trauma-informed response should look like.

Insights from Share With Us revealed the scale of this issue: over half of all respondents who had sought help had contacted 4 or more services. Almost 1 in 4 reached out to 7 or more services. Despite the scale of the need, many people reported that they never accessed specialist domestic, family and sexual violence services at all. Instead, they turned to those they trusted most – family, friends, neighbours – or sought general counselling or psychological support. This trend emerged strongly across Share With Us and is echoed in data from the Personal Safety Survey (PSS) which showed that people were more than twice as likely to seek advice or support from a friend or family member (45%) than from police (21%)[4] or a counsellor or support worker (20%).[5] This highlights an urgent need to strengthen community awareness and capability so that these early disclosures can lead to meaningful support and connection with services.

According to ABS partner violence data, women who had experienced violence from a current partner were even less likely to tell someone compared to those who had experienced violence from a previous partner (68% compared with 85%).[6] The most frequently cited reasons for not seeking help included feeling that they could handle it on their own and believing the violence was not serious enough.[7]

Figure 4.1: Proportion of victim-survivors contacting 7 or more supports, by demographic subgroup



> **Accessible counselling or psychological support from the start would have helped me understand the signs and effects of coercive control, empowering me to take protective steps sooner.... Early psychological support is essential not only for recovery but also for recognising and addressing abuse patterns in their early stages.**[8]

The PSS showed a troubling reality that around 1 in 2 women (45%) who had experienced physical and/or sexual violence from a current partner did not seek advice or support about the violence. For previous partner violence, 2 in 5 women (37%) and 2 in 5 men (39%) did not seek advice or support.

The PSS also collected data about recent incidents of sexual assault. Of the estimated 737,000 women who had experienced sexual assault by a male in the last 10 years, more than 2 in 5 (44%) did not seek advice or support.[9]

This underscores the importance of meeting help-seeking moments with safety, trust and connection – no matter where or to whom the first disclosure is made.

The Commission heard there are many different reasons why a person may choose to not seek help. These operate on many levels, including community- and systems-level barriers, reflecting the complex nature of help seeking in a domestic, family and sexual violence context.

The Commission was also told that a person's first experience with the domestic, family and sexual violence system colours all future interactions. A response that is meaningful, supportive and trauma informed encourages people to continue their help-seeking journey. A response that is uninformed and unsupportive will discourage people from seeking any further help.

> **The first response is critical, and a failing on any level can and will likely result in impacting the individual from seeking support in the future. When a person furst approached and asked for support, that person may not have another opportunity to ask for help. Should this not be met, the individual will be unlikely to request services and support again in the future.**[10]

> **South Australia needs to develop a service system that enables the provision of appropriate support at the right time and the right place for victim-survivors in line with their needs, when and where they choose to seek support, and in a way that meets their needs.**[11]

A 2022 report titled Powerful Interventions: Improving the Use and Enforcement of Intervention Orders as a Tool to Address Family and Domestic Violence in South Australia (Powerful Interventions Report) commented on the need for workers, organisations and systems to 'get the first response right':

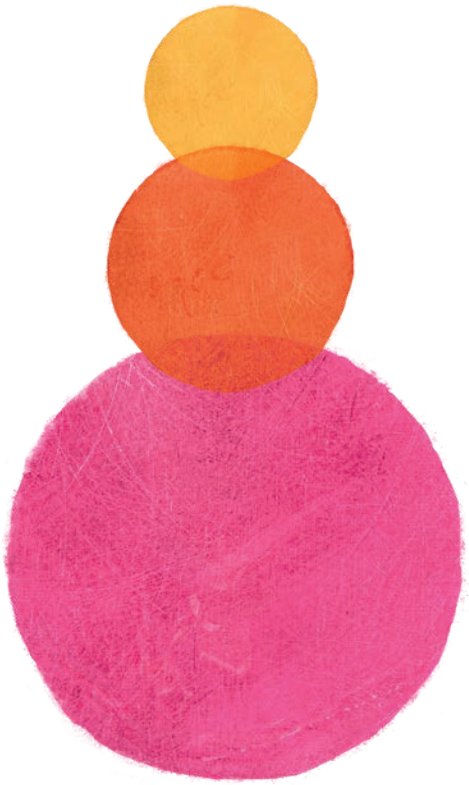
> **Some police officers, lawyers, court officials and other service providers are responding with care and knowledge, empowering women. But not everyone gets the first response right. Invest in training that unpacks what 'trauma informed' care really means in practice so that every front-line worker (police officer, registrar, lawyer, social worker) can respond safely, thoughtful and effectively every time.**[12]

Training and specialisation are identified in Chapter 3 as important levers for achieving better and more consistent responses across the South Australian workforce, but there is need for corresponding systemic reform to embed trauma-informed approaches across the domestic, family and sexual violence system. This approach must operate at the systems level and also at the organisational level. Phoenix Australia, the National Centre of Excellence in Posttraumatic Mental Health, writes that:

> **At the organisational level, being trauma-informed means that all aspects of service delivery are guided by consideration of the potential trauma history of those who engage with the service. Becoming more trauma-informed involves all members of the organisation, and an evaluation of all practices and policies through a trauma-focused lens. Embedding trauma-informed care principles throughout an organisation also helps it to respond effectively when individual service users and communities are impacted by major events such as disasters.**[13]

Understanding both the barriers and the current pathways to help seeking is essential to improving the accessibility and effectiveness of service systems for people experiencing and using domestic, family and sexual violence.

This chapter looks at the barriers to help seeking and sets out a summary of the current pathways available to people experiencing violence and people using violence who seek help. The summary is a lengthy but necessary inclusion to lead into the identification of the systemic changes the Commission is calling for.



Barriers to help seeking

All victim and victim-survivors have heard 'why don't you just leave?'. The broader community needs to learn the reasons we don't 'just leave' and how they can provide support around this. Systemic change will only happen with the meaningful input and consultation with DFSV victims and victim survivors.[14]

Every victim-survivor of domestic, family and sexual violence has heard the question: 'Why don't you just leave?' This question reveals a fundamental misunderstanding of the complexity of abuse and the barriers to escape.

The broader community needs to understand why leaving is not easy or possible – and how we can provide real, sustained support that empowers victim-survivors to find safety on their own terms.

True systemic change will not come from assumptions. It will only be possible through genuine listening, meaningful consultation, and policy and legislative change shaped by the voices and lived experience of domestic, family and sexual violence victim-survivors.

Support services are essential for safety and recovery, but the Commission consistently heard that people experiencing violence often face overlapping and compounding barriers that prevent them from accessing help. These barriers – rooted in race, gender, age, sexuality, disability and socioeconomic status – reflect people's unique identities and lived experiences. They intersect in ways that can isolate survivors and push them further from support, safety and justice.

To address these inequities, an intersectional lens is vital. Only by understanding how these overlapping identities shape access and outcomes can systems begin to dismantle the structural disadvantages many victim-survivors face.

The current system continues to fall short. It is often designed with one type of victim in mind: a cisgender, heterosexual woman who wants to leave the person using violence and who is willing to set aside cultural, family or community ties to do so. Systems assume she will prioritise immediate departure and align with mainstream service expectations.

This narrow model excludes those who do not fit the mould. It disregards survivors whose circumstances, values or safety strategies look different. And worse – it can result in women being labelled as 'service resistant' simply because they do not, or cannot, meet the systems' rigid expectations.

If we are to create real change, systems must expand their definition of who needs help, what safety looks like and what safety means, and what respectful, accessible support means.

The Commission heard that in South Australia, domestic, family and sexual violence services are overwhelmingly designed for women – often operating as women-only spaces or delivered through faith-based organisations. This narrow service profile has created deep accessibility gaps.

As a result, LGBTQIA+ communities, CALD communities, Aboriginal people, children and young people, and men who experience violence face a system that does not recognise or respond to their needs.

The Commission heard that services are often inaccessible for people with disability.

Equity in support cannot exist when entire groups are overlooked. To build a truly inclusive system, we must acknowledge who is being left out, and redesign services that meet the realities of all survivors.

> **"Please help women like me from overseas. We almost know nothing especially where to seek help. There are lots of women out there are suffering from DV but cannot escape the trap.**[15]

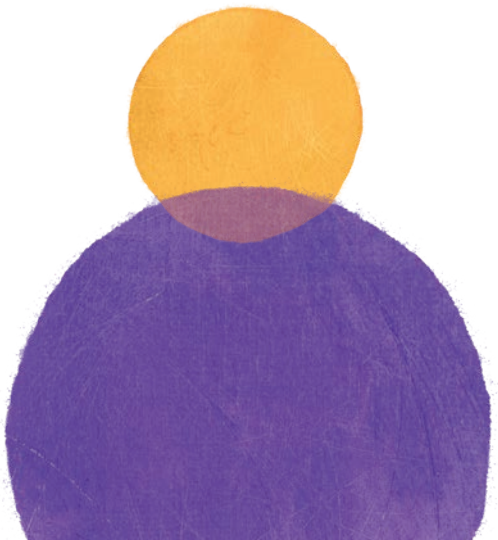
> **"[T]here is one newly developed service that is offered that provides counselling support, but that's only once a person has made a decision to leave the violent relationship, not whilst they're still contemplating whether or not they do want to leave. So that was newly funded, but other than that there aren't any other specialist LGBTIQA+ services available. [That service is solely] for people who are experiencing violence, which again is another limitation, because there are many situations that we're seeing, again within our current client cohort, where there are people that are victim survivors and also will use violence.**[16]

One of the examples most commonly provided to the Commission about when service eligibility criteria led to unsafe outcomes was the criteria preventing young males who were experiencing domestic, family and sexual violence alongside their mother from accessing emergency accommodation. This issue is further discussed in Chapter 6.

The Commission was also told of a general lack of service options for any unaccompanied child or young person who needed help in relation to their experience of domestic, family and sexual violence.

> **“ It is common for us to have difficulties accessing support services for our clients when they are under the age of 18 as services often default to DCP support rather than DV support. It has been our experience that, despite incredible cases of life threatening DV, that clients are advised there is nothing that can be done due to not being 18.**

For many communities, particularly those that have endured historical and ongoing systemic injustice, deep mistrust of government agencies is a major barrier to seeking help. The Commission heard that this mistrust is especially strong in Aboriginal communities, where the legacies of colonisation, systemic racism and discrimination continue to shape lived experiences.



This mistrust isn't unfounded – it's born of experience. Aboriginal women told the Commission that one of the most powerful deterrents to seeking help is the very real fear that their children will be taken from them if they engage with services. This fear is compounded by other systemic risks: being blamed for the violence, being misidentified as the person using violence, or simply not being believed.

The Aboriginal Legal Rights Movement[17] shared examples of police arresting Aboriginal women who had reported family violence – an experience echoed in the submission from the NPY Women's Council.[18]

When systems punish those who ask for help, they do more than fail – they retraumatise. Building trust must begin with acknowledging these truths and designing responses that centre safety, justice and healing for Aboriginal women and their communities.

> **“ Women must carefully weigh the decision to approach formal systems for support against long-term consideration of risk. A woman who reports DFSV can lose agency over her story and what services she engages with. For example, a woman that calls police due to immediate safety concerns can be pressured to make a formal police statement and is then engaged in a 2–3-year court process in addition to child protection agencies being notified and investigating the family.[19]**

The National Network of Incarcerated and Formerly Incarcerated Women and Girls also raised this issue, stating that '[w]e have witnessed incidents where the police have recriminalised the victim-survivor and treated her like the perpetrator or primary aggressor, and in turn named as respondents on family violence intervention orders'.[20]

Similar issues can arise for CALD women, with the Commission being told that the potential involvement of child protection can operate as a barrier to seeking help.

For LGBTQIA+ communities, the Commission heard that the history of criminalisation, discrimination and violence perpetrated by police, together with the focus of the current system on violence against women by male intimate partners, create significant barriers to seeking and accessing help. The Commission was told that these systemic barriers have led to LGBTQIA+ people feeling 'invisible' to the current service system because 'most professional DFSV supports are tailored to the needs of cisgender, heterosexual clients'.[21]

Male victim-survivor respondents to Share With Us described a stark absence of services and support, regardless of whether the person using violence was male or female. They spoke not just of being harmed, but of being erased by systems not built for them. One respondent noted that:

> **"There are many support services offered to women suffering from domestic violence, but none in Adelaide from 2015 to present day, offered to men, that have been abused by their partners…I called the victims of domestic violence support line in Adelaide in 2023 and told them what happened, the lady on the phone laughed and said, 'this is a service for women only' and I asked where can I go? And she said, 'she did not know, perhaps speak with your doctor?'**[22]

Other issues that are also present across many different types of service systems give rise to other barriers to access, including a lack of accessible options for people with disability and a general lack of services in regional and remote areas of South Australia. Victim-survivors with disability face unique challenges, including a lack of accessible accommodation or specialised services tailored to their needs. Language barriers can further exacerbate communication with, and navigation of, support services.

> **"There has been a long-standing issue whereby refuges and crisis accommodation services can be inaccessible for people with disability. In these situations, people with disability are sometimes placed in emergency settings such as hotels/motels. These settings can be unsuitable for many reasons, including financial pressure on services for people to exit quickly, mobility barriers, inability to accommodate families or pets, sensory barriers and more.**[23]

Accessibility challenges are also common in regional and remote areas. For example, regional and remote communities may lack counselling or legal services, or nearby emergency accommodation. Often referred to as the 'postcode lottery', many specialist service providers are concentrated in metropolitan areas. The lack of service providers can be compounded by the unique dynamics of small communities, which can make seeking support privately or discreetly much more difficult.

Another significant barrier to help seeking operating across all people from all different communities and backgrounds is the social stigma often attached to domestic, family and sexual violence. People experiencing violence can fear judgement or ostracisation from their families, friends and communities, particularly in environments where traditional values might discourage external intervention in private matters. For example, the Commission heard that in LGBTQIA+ communities, 'the fear, isolation, homophobia or transphobia in the wider community can contribute to a survivor staying with the person perpetrating violence against them'.[24] For Aboriginal communities, NPY Women's Council noted that a victim-survivor's engagement with services can result in increased safety concerns due to the risk of retribution from the family of the person using violence.[25] For people experiencing intersecting forms of discrimination or vulnerability, these barriers can operate to make the person feel as though their experiences will never be understood.

> **I have never felt safe to speak about the abuse that I have endured throughout my life as a First Nations person who is also queer. I still feel ashamed to be a victim, and it causes me a lot of pain in my day-to-day life. I doubt anyone will ever be able to support me, because I fear I'll never be truly understood. I am a lost cause, and more often than not, I feel hopeless about my situation.**[26]

Similar issues were raised in relation to CALD communities, with the Australian Refugee Association noting that 'the stigma around help seeking can be especially prevalent among migrant and refugee communities, often rooted in cultural norms that prioritise family honour, discourage revealing personal problems, and perpetuate shame around issues like domestic violence'.[27]

Psychological and emotional barriers can also prevent people from help seeking. The Commission was told that people experiencing violence often struggle with feelings of embarrassment, guilt, fear, shame, and even denial that what they are experiencing is domestic, family or sexual violence.

> **I was worried that by disclosing anything to anyone, I was putting myself at further risk of ruining my life. It's been 10 years since I managed to get out of the relationship, and I am still concerned about repercussions or what my ex might do.**[28]

> **Personally, for me I didn't want to believe it was happening to me. I could see it clear as day happening to other people close to me, but I played a part in my own delusion that no way could it be me. I didn't want to be a victim; I didn't want my life to change – which I knew it would if I acknowledged the situation and it did change once I accepted it.**[29]



> **When people ask why I didn't I leave, it's because I felt like I was the problem, I was the 'crazy' one and I felt lucky to be loved by someone so wonderful when I was such a mess. It was not to do with finances, children, or threats of physical violence as is commonly suggested; I was an active participant in public screaming matches; It was entirely a psychological warfare on my own self-perception and my grasp on reality.**[30]

> **Despite progress, a significant stigma still surrounds being a victim of sexual violence. As a sole parent in my forties, I experienced feelings of shame, humiliation, and a sense of having let others down. I questioned how I could have found myself in such a situation. Working in a corporate environment, I faced further challenges when some of my peers advised me not to speak openly or publicly, warning that it could 'ruin my career'. Through extensive therapy, I have managed to come to terms with some of these emotions, but it still took immense courage to come forward. Unfortunately many others, for various reasons, do not, and continue to suffer in silence.**[31]

A recent study by the Social Relationships and Communities Research Group at the University of South Australia into the state of sexual violence in South Australia (the Sexual Violence Study) found that:

> **[f]eelings of shame and embarrassment were identified as one of the most significant barriers to reporting and help-seeking. While shame is often reported in literature as an individual-level barrier, it is intricately entangled with broader socio-cultural barriers. Many respondents discussed shame in relation to victim-blaming that trigger and validate self blame.**[32]

Men experiencing domestic, family and sexual violence can face shame and ridicule, as well as disbelief, driven by rigid societal expectations around masculinity and a lack of acknowledgement that men can also experience violence. Furthermore, dominant masculine norms that equate masculinity with strength and stoicism can discourage men from reporting abuse or seeking help.

> **Everybody says about female abuse which I feel for- there are very bad men out there, but when it comes to male abuse no one listens or believe us. We are the quiet ones that protect our kids from the abuse.**[33]

In their submission to the Commission and during their evidence on Day 9 of public hearings, COTA SA explained that older people often experience a great deal of shame and guilt associated with experiencing any form of abuse. COTA SA further explained that there is an additional layer of guilt where the person using violence is their adult child, and a reluctance to seek help and support for fear of negative consequences for the adult child.[34]

In regional and remote communities, the lack of privacy in small communities can exacerbate feelings of shame and embarrassment. For example, one respondent to Share With Us noted that:

> **I lived in a small community that thrived on small village ethos of gossip and blame. I had a reasonably high profile job at the time and was so ashamed that anyone would find out that I was a total failure. Still feel the shame. Did not know of any services that were available and would have been too ashamed to access them. In my experience there is no such thing as confidentiality amongst the so-called professionals in this town so would not have trusted the services had they been available.**[35]

The Commission also heard about how the limited response options presented to those who do seek help can lead to people deciding not to seek help in the first place. During its listening phase, the Commission consistently heard that Aboriginal people may not seek help because they do not want the response to require them to leave, or for the person using violence to be incarcerated. Similarly, the Australian Refugee Association noted:

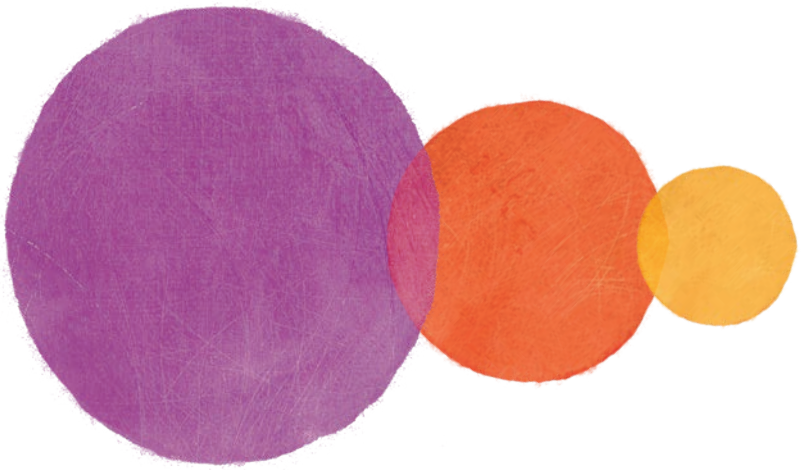
> **The lack of support for men creates barriers for women in accessing services for DFV because they want their husbands and partners to receive support. As a result, women only seek services when their situations reach crisis point.**[36]

People experiencing violence may also fear retaliation – such as physical harm or escalation of violence – to themselves as well as others, including children and pets, if they attempt to seek help. In her evidence to the Commission on Day 9 of public hearings, Ms Jennifer Howard from Safe Pets Safe Families explained that pets can be used in coercive control and that the lack of pet-friendly crisis accommodation can stop people from leaving a violent relationship because they do not want to leave their pets behind.[37]

Respondents to the Sexual Violence Study spoke about fear of retaliation, 'drawing attention to the unequal power relations that create a sense of disempowerment and hopelessness'.[38]

Retaliation can also take the form of legal repercussions against the victim-survivor or accusations of mutual abuse. For example, migrant women dependent on their partners for visa status may fear deportation and loss of custody over children if they report their experience of domestic, family and sexual violence. Older people, especially older women, may fear abandonment or loss of financial stability if they expose violence within familial contexts.

> **As an immigrant, it was extremely difficult to leave a domestic violence relationship with my non-Australian partner. I often received no answers or was told 'no' due to my visa status. It took me two years and a lot of violence before I was finally able to flee. I sought help from various organizations—Migration Services, the DV Crisis Line, 1800Respect, and Red Cross—but it wasn't until I found someone willing to think outside the box, despite my non-Australian status, that I finally received assistance, including shelter.**[39]



Economic factors can also severely limit a person's ability to seek help. Many people experiencing violence depend on the person using violence for financial stability, particularly when financial abuse or control has been an ongoing feature of the abusive relationship. This creates significant barriers to leaving and accessing independent support. The Commission heard stories of people escaping violence, only to return to their abusive partner because they could not find suitable housing or stable employment. The high costs of professional services, such as legal assistance and counselling or childcare, and the lack of affordable accommodation options, further exacerbates financial difficulties. This can particularly impact on people with disability who may have fewer employment opportunities and heightened reliance on the person using violence.

> **"I have experienced financial abuse, I believe I am in approximately $80,000 debt, which stretches back before I left him in 2014. He has pressured me into taking out loans, credit cards, fines (which has resulted in me losing my license).**[40]

> **"The perpetrator's refusal to pay child support compounded our hardship. Financial abuse is often invisible, but it is a powerful tool used by perpetrators to maintain control and limit a survivor's independence.**[41]

The Commission found that persistent gaps in the help-seeking system are made worse by the lack of clear, accessible information about how to get support, what services exist, and who they're for. This confusion is the result of fragmented leadership and a lack of coordinated, government-led stewardship of the domestic, family and sexual violence sector.

For people in crisis, especially those facing intersecting forms of discrimination or disadvantage, this system is a maze – one that's nearly impossible to navigate. Survivors are forced to piece together support from disconnected services, often without knowing whether they qualify or will be believed. The impact is most acute for those in greatest need.

The Commission also heard that even when survivors meet strict eligibility criteria, the system often still fails them. The Domestic Violence Crisis Line (DVCL), the primary statewide non-government crisis response for women and their children, is only able to respond to around 70% of incoming calls.[42] The consequences are profound, both for those whose calls are unanswered and the DVCL's overstretched workforce.

This lack of capacity has further discouraged investment in proven services like the DVDS, which remains underutilised because services cannot safely accommodate higher demand.

As one survivor told the Commission:

> **"Despite seeking help from various services, I often felt let down and inadequately supported by the courts, police, and support services. The system was difficult to navigate, and it lacked trauma-informed, person-centered, and recovery-oriented approaches. My needs were never adequately met, highlighting the critical need for more integrated and compassionate support systems.**[43]

Current pathways for help seeking

There is no single accessible pathway for seeking help for domestic, family and sexual violence in South Australia.

Help seeking may occur through direct and formalised pathways such as contacting a crisis helpline, specialist domestic, family and sexual violence service or homelessness service; making an application to the DVDS; making a report to police or child protection; seeking an intervention order; lodging family law proceedings; or seeking legal assistance.

Help seeking can also occur through informal or indirect pathways such as family, friends and neighbours, the health or education system, or through other community supports, such as faith-based organisations, community or sporting organisations.

The following section outlines the main pathways for help seeking in South Australia. This is important background to understanding the challenges within the current system and to set the context for the Commission's recommendations for improving the accessibility and effectiveness of support systems for people experiencing and using, or at risk of using, domestic, family and sexual violence.

People experiencing violence

South Australia Police

There are a few different pathways available for people seeking police assistance or advice, either for themselves or for a person they are concerned about. These different pathways are based primarily on the urgency of the request. The Triple Zero (000) phone line is for life-threatening or time-critical situations when a response from one or more emergency services is required. Calls to Triple Zero that require urgent police attendance will generally result in a response from the nearest available frontline patrol.

When someone needs a police response that is not time critical, they can call the Police Assistance Line on 131 444 or attend a police station to make an in-person report. Depending on the circumstances, the Police Assistance Line will either request that a frontline patrol travel to the caller's location or will ask the caller to attend a police station to make a report. SAPOL's website also provides phone numbers of local family violence investigation sections for people wanting to seek advice about their options.

A final pathway for seeking police assistance or advice is by referral from another agency or organisation. This may occur informally through locally established relationships between police and services, or it may occur formally by way of a FSF referral or Interagency Strategy Discussion for children and young people.[44]

According to SAPOL, on average, police are attending over 100 domestic and family abuse incidents a day.[45] In the 2023–24 financial year, domestic and family abuse offences rose by 16%, from 11,013 to 12,844 incidents.[46]

The peak period for reports of domestic and family abuse is between 4pm and 10pm when, on average, 38% of calls for police assistance are received.[47] Table 4.1 displays this data from the South Australia Computer Aided Dispatch (SACAD) system, which shows the demand across the day of the week and time of day. The highlighted cross-section indicates the heaviest demand period for SAPOL response.

Figure 4.2: Domestic abuse–related events recorded by the South Australia Computer Aided Dispatch system, 2023–2024

Hour	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Total
12:00 am								
1:00 am								
2:00 am								
3:00 am								
4:00 am								
5:00 am								
6:00 am								
7:00 am								
8:00 am								
9:00 am								
10:00 am								
11:00 am								
12:00 pm								
1:00 pm								
2:00 pm								
3:00 pm								
4:00 pm								
5:00 pm								
6:00 pm								
7:00 pm								
8:00 pm								
9:00 pm								
10:00 pm								
11:00 pm								
Total								

Crisis helplines

Domestic Violence Crisis Line

The DVCL provides a statewide crisis response to people experiencing domestic and family violence. The Commission understands that this phone line is positioned as a central point for South Australians to access domestic violence services, and acts as the 'front door' to specialist domestic and family violence services across the state. The crisis line provides intake, risk assessment and immediate safety management planning for victim-survivors. The Commission understands that the crisis line also operates as a gateway to emergency accommodation in South Australia.

The DVCL is managed by WSSSA. It changed from a Monday to Friday 9am to 5pm service to a 24/7 telephone service in 2018.

In the first 14 months of data reporting after the DVCL transitioned to a 24/7 response, the DVCL averaged almost 1,200 calls per month with an answer rate of around 57%. By 2022, the average calls per month for the DVCL reached almost 1,900, with an average call answer rate of 71%. In 2023, the DVCL averaged over 2,600 calls per month, with 79% of calls answered on average.[48]

In the 2023–24 financial year, the DVCL received 25,444 calls.[49] Evidence from Ms Maria Hagias, CEO of WSSSA, during Day 1 of public hearings, was that the DVCL was on track to receive 35,000 calls in 2024. This was an underestimation according to an article in *The Advertiser* on 19 June 2025, which reported that the DVCL received 36,800 calls in 2024. The article further stated that the DVCL is now 'fielding 100 calls every day', with 1 in 4 calls going unanswered.[50]

1800RESPECT

1800RESPECT is the national counselling, information and support service for people affected by domestic, family and sexual violence. It is delivered by Telstra Health with the support of specialist organisations on behalf of the Australian government. Contact can be made via phone call, text, online chat or video call on a 24/7 basis.

Over the last 3 financial years (2021 to 2024), 1800RESPECT answered 57,856 contacts from South Australia. On average, this is around 7% of the total contacts answered nationally.[51]

1800RESPECT provides counselling, information and referrals to people experiencing domestic, family and sexual violence. If further support is required, and if a local service can be contacted, 1800RESPECT counsellors can provide callers with a warm referral to a local specialist service. Counsellors can also provide the caller with the contact details of local services.

1800RESPECT offers a free national online database of local and national domestic, family and sexual violence specialist services. The service directory is updated regularly and is also used by the 1800RESPECT counsellors when identifying a warm referral point or providing service contact details to callers. 1800RESPECT has also developed 2 phone applications: the Daisy app which provides information about support services in the user's local area and the Sunny app which has been developed for people with disability.

Domestic Violence Disclosure Scheme

The DVDS was introduced in South Australia in 2018. It provides an avenue for a person who may be at risk of domestic violence to receive information about their partner or former partner, to help make an informed decision about the future of that relationship for themselves and any children that might be involved.[52] Applicants must be aged 17 years or over, live in South Australia and hold safety concerns about their partner or former partner (the subject). A request for information can also be made by a person who is concerned about the welfare of someone they know. The DVDS is available to South Australians of any gender or sexual identity.

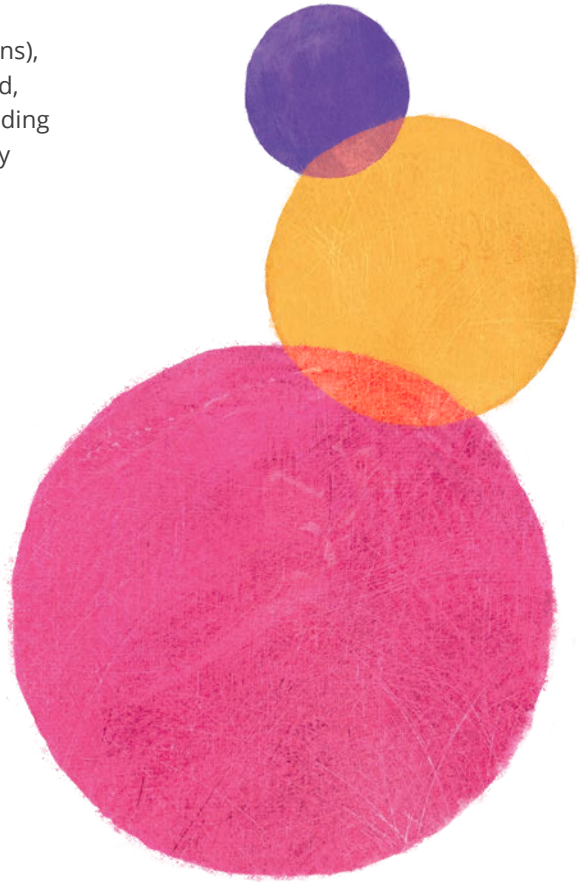
Once an application is received, police will assess the application and the persons involved and determine whether the application will be screened in or out for a disclosure.

If the application is screened in, police will compile a summary of relevant information about the subject partner or ex-partner. Information which may be disclosed can include convictions for relevant offences (including interstate convictions), relevant reports made to police and charges laid, current and historical intervention orders (including interstate orders) and other information held by police that may be relevant to the safety of the person at risk.

A disclosure meeting will take place between SAPOL, a support worker from the contracted non-government service and the person at risk. The police officer will provide the information and the support worker will assist the person at risk with referrals and information. Prior to the disclosure, the person at risk is asked to sign a form agreeing not to distribute or publish the information further.

If a matter is screened out as not being eligible, a support worker will still contact the person at risk and attempt to link them with supports.

South Australia's DVDS will be discussed in more detail later in this chapter.



Specialist domestic, family and sexual violence services

There are a range of specialist domestic, family and sexual violence services offered in South Australia for people who are experiencing violence and need help and support. Domestic and family violence services are primarily provided by the 8 service delivery partners that make up the DFVSA (see Chapter 2), and sexual violence services are primarily provided by Yarrow Place. There are many other service providers funded by governments to provide domestic, family and sexual violence services, and some service providers who are not funded for this specific purpose but still provide these services.

Other organisations providing domestic, family and sexual violence services in South Australia include:

- Relationships Australia SA (RASA) supports people to improve the quality of their relationships through a range of programs. Its services are designed to reduce the risk to individual and family safety and strengthen protective factors, enabling improved wellbeing and social cohesion. According to an audit of case files in 2024, 55% of cases involved clients seriously affected by domestic and family violence and 39% of cases involved parents expressing significant safety concerns about their children.[53]
- The Zahra Foundation provides trauma-informed and violence-informed group programs and one-on-one support to help women break free from financial dependence and abuse. Between July 2024 and January 2025, Zahra supported 479 individuals, with the majority aged 36–45 years.[54]
- KWY provides Aboriginal people, families and communities with cultural and support services to build positive change, reaching over 1,700 people a year. They accept self-referrals and referrals from organisations and run a range of programs with a focus on family, domestic and sexual violence, including interventions for people using violence.[55]
- The NPY Women's Council is an Aboriginal Corporation that advocates for Anangu in the NPY region and is a major provider of human services for the NPY Lands. The NPY Women's Council Domestic and Family Violence Service works with families to overcome cycles of violence and to live safe and happy lives. The NPY Women's Council accepts referrals for women living on NPY Lands who have experienced the impacts of violence from an intimate partner or family member, or other forms of lateral violence.[56]
- The Coober Pedy Homelessness and Domestic and Aboriginal Family Violence Service assists people who are at risk of homelessness as well as providing domestic and family violence support. It assists families, single adults, young people and couples with needs assessments, crisis intervention, information, advocacy and counselling.[57]
- For those experiencing sexual violence, Yarrow Place provides a 24-hour crisis response service for people aged 16 and above for recent rape or sexual assault (this can include medical care, forensic medical examinations, counselling and advocacy). Yarrow Place also provides other services including follow-up medical care, ongoing counselling for recent and past assaults, and group programs. It is the only sexual assault–specific service in South Australia.[58]
- The Commission understands that some South Australian universities also offer support specifically for sexual violence. For example, the University of Adelaide has a dedicated sexual violence counsellor who can offer support and practical advice to a person who has experienced sexual violence. The University of South Australia also offers specialist counselling support for sexual violence.[59]

Housing and homelessness services

People who are experiencing homelessness, or are at imminent risk of homelessness, whether as a result of domestic, family and sexual violence or other reasons, can seek help from homelessness services in South Australia.

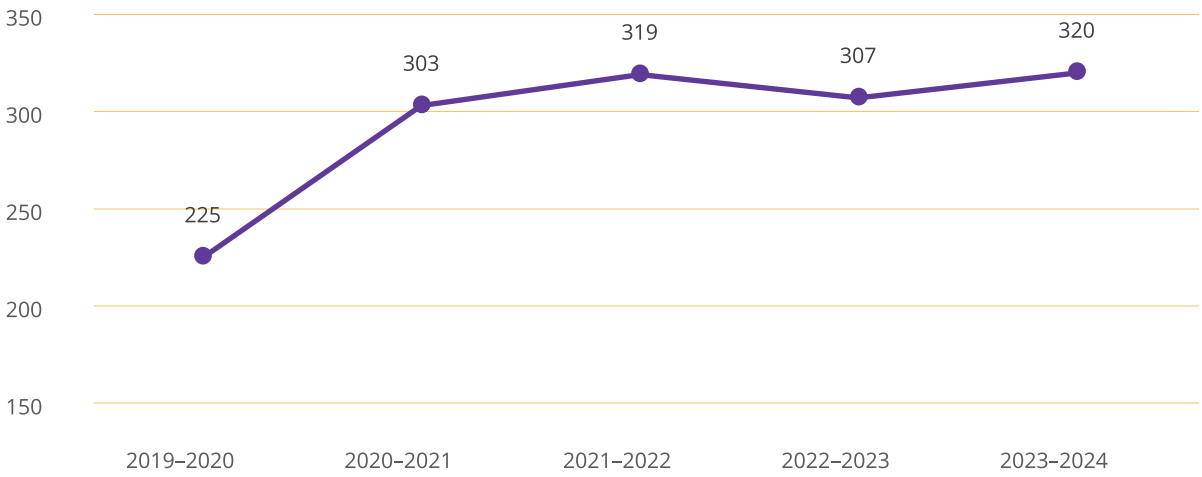
There are 4 Homelessness Alliances in South Australia that represent approximately 20 non-government organisations across the state, including regional and remote South Australia. These 4 Alliances support approximately 15,000 people every year, a high proportion of whom experience domestic and family violence as a causal and/or contributing factor to their homelessness experience.[60] The Homelessness Alliances operate under the 'Housing First' principle, which means that safe and permanent housing (not crisis or transitional housing) is the priority for people experiencing homelessness.

Homeless Connect SA is a 24/7 statewide telephone service for anyone experiencing homelessness in South Australia. It is not an accommodation provider; instead, its role is to connect a person with relevant services and information and, working in collaboration with the DFVSA and the 4 Homelessness Alliances, can refer a person to services for accommodation, support and, in some circumstances, emergency accommodation.

Courts and legal services

People experiencing domestic, family or sexual violence may seek help from the courts in several ways. This can include making an application to the court for a private intervention order, either on their own or with legal assistance; making an application to SACAT for tenancy orders; or lodging family law proceedings in the Family Court.

Figure 4.3: Private intervention order applications over the last 5 years, South Australia



There is a range of options available for legal assistance for people who are experiencing violence.

The Legal Services Commission runs the statewide Legal Helpline which is available Monday to Friday 9am to 4:30pm. The Legal Helpline is available for preliminary information, general advice and referrals. The advice is usually restricted to a client's basic legal rights and obligations about a particular situation.

The Legal Services Commission also offers free legal advice appointments on a range of legal matters including domestic and family violence matters, child protection matters, intervention orders, and family law and child support.[61]

The Legal Helpline responds to thousands of calls each year from South Australians identifying as being at risk of domestic, family and sexual violence (making up around 30% of all advice appointments annually).[62]

South Australian community legal centres also provide free legal advice, assistance and referrals. The services provided include general legal advice on minor criminal matters, civil matters, family law and family violence.

Other organisations and services provide legal services to particular client groups.

The Women's Domestic Violence Court Assistance Service (WDVCAS) (delivered by the Legal Services Commission) provides specialised legal assistance for women in South Australia affected by domestic and family violence. Free assistance is available for intervention order applications, variations or revocations in the Magistrates Court, ending tenancies and relevant SACAT applications, and liaising with police to report breaches of intervention orders and other domestic and family violence issues.[63] In financial year 2022–23, the WDVCAS assisted just under 1,000 people.[64]

The Women's Legal Service provides free legal services and assistance to South Australian women. Support services include community workers, family advocates and financial counsellors. Relevant programs include a Legal Information Line (operating Monday, Tuesday, Thursday and Friday 10am to 4pm), the InDIGO program operating in the southern suburbs of Adelaide, and the Family Law and Family Violence Program.

The Family Violence Legal Service Aboriginal Corporation (FVLSAC) is a free community legal service assisting Aboriginal people experiencing family violence or sexual assault in South Australia. Along with legal advice and representation, FVLSAC offers a range of client-support services, including information about family violence, legal options and court processes, support when reporting crimes to police, assistance accessing counselling and referrals to local support services.

The Aboriginal Legal Rights Movement (ALRM) provides a range of legal services for Aboriginal people in South Australia, including advice and representation in relation to family law issues and care and protection proceedings when children are removed from families.

A person experiencing violence can also choose to, or may need to if they are not eligible for other legal services, seek legal advice from a private legal practitioner.

Adult Safeguarding Unit

Any adult person who suspects they, or someone they know, is being abused or mistreated can contact the Adult Safeguarding Unit for free, confidential advice, information or support or to make a report. Contact can be made through the helpline, which is available Monday to Friday, 9am to 4pm, through email or through the online form.

The Adult Safeguarding Unit may investigate allegations of abuse (separate to a criminal investigation) and will work with vulnerable people to determine the most appropriate safeguarding actions to take.

Child protection

Where there are concerns that a child or young person is, or may be, at risk of harm, a report can be made to the Child Abuse Report Line. The report line is open 24 hours a day, 7 days a week.

The Department for Child Protection (DCP) has an after-hours support line for urgent matters requiring DCP support. Services can include linking consumers with the DVCL and Homeless Connect SA and advocating for the provision of services. In emergency situations, DCP staff can assist with financial support to meet basic needs such as food, transport or emergency accommodation.

Children and young people

In South Australia, there are no help seeking pathways specifically for children and young people who are experiencing domestic, family or sexual violence. Help seeking pathways, such as Triple Zero, the Police Assistance Line, 1800RESPECT, Lifeline and Homeless Connect SA can be used by children and young people. There are some mental health related helplines and services that are available specifically for children and young people, including Kids Helpline, Youth Beyond Blue and eheadspace. In addition to providing online and phone support for mental health, Headspace operate several Headspace Centres in metropolitan and regional South Australia.[65] In their submission, yourtown, who are responsible for the Kids Helpline, write that in 2023-24, Kids Helpline responded to nearly 118,000 contacts from children and young people across Australia, including 4,047 crisis responses for children and young people at imminent risk of harm.[66] The interests of children and young people in South Australia are represented by the Commissioner for Children and Young People, the Commissioner for Aboriginal Children and Young People, and the Guardian for Children and Young People.

Victims of crime

Anyone who has been a victim of a crime, including people who have experienced domestic, family and sexual violence where the behaviour constitutes a criminal offence, can seek help from the Commissioner for Victims' Rights. Assistance can include advice, information and support, as well as help to deal with the physical, emotional and financial impact of the crime. This can include financial payments for supports such as counselling, essential items, relocation, security upgrades and medical or dental treatment to address physical injuries.

Advocacy, community and health services

There are many community services who may interact with a person who is experiencing domestic, family and sexual violence and who may receive a first disclosure of that violence or who may be in a position to recognise the clear signs of violence. These can include:

- GPs, hospitals or other health services such as allied health services or dentists
- the South Australian government's Women's Information Service and its network of Safety Hubs and Havens across South Australia
- education services, including early education and care services, schools and higher education or VET providers
- counsellors, including relationship counsellors and financial counsellors
- tenancy rights services such as RentRight SA
- disability rights and advocacy services.

The Commission also understands that help and support may be sought from family, friends, neighbours, work colleagues, faith leaders and community groups such as sporting clubs or other interest-based groups.

People using violence

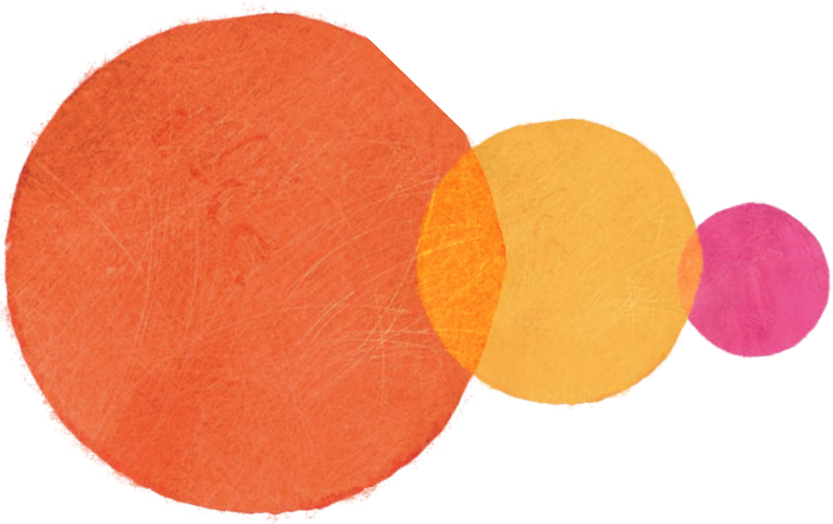
Accountability of those who use violence, including through participation in behavioural change programs, is essential to an effective domestic, family and sexual violence response.

The overwhelming majority of people using violence are men. Help seeking opportunities for people using, or at risk of using, domestic, family and sexual violence, are mostly limited to heterosexual men. Early engagement with men and timely access to programs improves outcomes, and highlights the need for access to help seeking pathways.

Where there is recognition that their behaviour is a problem, a person can voluntarily seek help through counselling or support programs. These can include:

- the national Men's Referral Service, which offers counselling, information and referrals to local services 24 hours a day, 7 days a week
- MensLine Australia, which offers free counselling and support 24 hours a day, 7 days a week, as well as family and domestic violence behaviour change programs
- Don't Become That Man, which offers counselling, interventions and accommodation support for men who are concerned about their behaviour. The contact centre is available from 2pm to 7pm Monday to Friday
- men's behaviour change programs offered by KWY, such as My Journey, a culturally appropriate behaviour change program for men who use violence against women and children, or the Wuinparrinthi program, a culturally appropriate youth prevention program for Aboriginal male adolescents aged 14–18 years who have displayed violent behaviour or are identified as being inclined towards violent behaviour
- relationship counselling and support through RASA or other organisations
- substance abuse or mental health support programs.

For many people who use violence, participation in an intervention program is more often a result of a condition imposed by a court rather than voluntary referrals. RASA and KWY run the Magistrates Court's mandated abuse prevention programs: Reset2Respect and My Journey. The Department of Correctional Services also runs intervention programs for sentenced prisoners. Further detail on these programs is set out in Chapter 5.



The call to action

When someone is ready to seek help for domestic, family or sexual violence – whether as a victim-survivor or someone using violence – how the system responds can shape everything that follows. A safe, informed and compassionate response can be the turning point toward safety and recovery. A poor response can reinforce trauma or drive people away for good.

> **[H]ow victim-survivors are treated by different parts of the systems they engage with is the most significant factor in their lived experience of FDSV. How someone is treated by a law enforcement officer or healthcare professional will be part of their experience of FDSV, which means it can be continuation of the trauma or it can be a counterforce to that trauma.**[67]

To create a system that truly supports those experiencing or using violence, help-seeking pathways must be safe, accessible, culturally responsive, trauma informed and confidential. People must be able to seek help without fear of being exposed, judged or punished.

This calls for a major shift – from a fragmented, crisis-driven system to one that guarantees a consistent, coordinated and survivor-centred response for every South Australian who reaches out for support.

A central, inclusive entry-point for information and help – regardless of a person's literacy, language, digital access or communication needs – is required. The system must also address known barriers like the child protection response, health responses for adults and children and young people, and expand options for anonymous or safer reporting to police.

Government services addressing sexual and family violence must be available statewide and backed by evidence of what works. Programs like the DVDS – proven effective – must be scaled up, not sidelined by underinvestment.

Those who use, or are at risk of using violence, also require help seeking options. Intervention programs must follow best-practice principles and be grounded in the safety of victim-survivors. Anything less risks perpetuating the very harm these systems are meant to prevent. These issues are discussed in Chapter 5.

An accessible, safe and inclusive entry-point

The Commission has heard that, in many cases, the decision to seek help is in no way an easy one. When that moment occurs, it is critical that the help-seeking process is simple, safe, accessible and inclusive. It is arguable that none of those elements are present within the current South Australian system in relation to people who are experiencing domestic, family or sexual violence.

Current state

A search online for information about where to seek help for domestic, family and sexual violence in South Australia provides many results across a range of government and non-government websites.

As at the date of preparing the Commission's report, the South Australian government's landing page for domestic violence and sexual assault (via the sa.gov.au domain) was inadequate. The link to Yarrow Place was out of date, there was no information specifically directed at Aboriginal people or people with disability, and the only information under the heading 'men' related to phone lines and services for men using violence.[68]

One of the options included on the South Australian government's landing page is the government's Women's Information Service. A review of the information provided on the 'I need help with domestic violence and abuse' section of the Women's Information Service website directs the help seeker to police, 1800RESPECT, Nunga Mi:Minar (now First Nations Healing), the DVDS or tenancy advice support. Inexplicably, the DVCL only appeared under the entry for Nunga Mi:Minar.

Another section of the Women's Information Service website titled 'Find my nearest domestic violence service'[69] provides a more comprehensive list of services under headings titled 'Statewide', 'Adelaide city and suburbs', 'Regional South Australia', 'Metro' and 'Regional' but navigation across these categories is left to the help seeker. There is no logical explanation as to why 'Adelaide city and suburbs' is any different to 'Metro' or how 'Regional South Australia' is any different to 'Regional'. Once a heading is selected, the help seeker is greeted with a long list of specialist and non-specialist domestic, family and sexual violence services ranging from the DVCL, to family counselling services, to GP clinics.

A similar model is provided to a help seeker accessing the 1800RESPECT website, but with the ability to limit services by reference to the particular need (e.g. 'domestic/family violence', 'sexual violence' or 'legal') and by the help seeker's state or territory, and eventually by suburb or postcode.

Unfortunately, even after narrowing by suburb, a help seeker will still be met with a list of over 100 services for the 'domestic/family violence' category. Even a search against Kingscote, located on Kangaroo Island, resulted in 130 entries being returned. A search for 'sexual violence' services resulted in over 79 services. Yarrow Place first appears well past the halfway point of this list and is preceded by services such as a Medicare Mental Health Centre, financial counsellors, homelessness services and the Family Court.



This is not a reflection on those responsible for maintaining the South Australian government websites, or for compiling the 1800RESPECT services directory. The Commission recognises funding and resources are limited and there is a need to include as many services as possible to ensure there is choice for victim-survivors. What the Commission does seek to illustrate by setting out this information is that help seeking, already a difficult process, is made almost impossible by the lack of a clearly identified central entry-point for any person who is experiencing violence in South Australia and who is seeking information online about who to speak to or where to go.

As noted above in the 'Current pathways for help seeking' section, people experiencing domestic, family and sexual violence can also seek help through phonelines such as 1800RESPECT, the DVCL or Yarrow Place. The Commission understands that callers to 1800RESPECT may receive an offer to connect the help seeker with a service in South Australia that can meet the help seeker's needs. Services are searched for using largely the same service directory as appears on the website, which may create difficulty for the 1800RESPECT employee given the large number of services listed.

Callers to the DVCL will receive the benefit of more specialised South Australian knowledge, but the Commission has also heard of the increasing restrictions around the types of responses that can be provided from the DVCL given funding limitations and the application of eligibility criteria. While the DVCL operates as the statewide entry-point for people seeking help and support for domestic violence, due to restrictions associated with the current funding levers and availability of services to refer to, 'the response is limited around services that are able to be provided to men and children'.[70] The Commission understands that the practical effect of this is that a call from a person other than a woman experiencing intimate partner violence may be answered, but the caller may not receive a referral to a service that can meet their crisis needs.

Yarrow Place operates as a statewide entry-point for any person aged 16 and above who has experienced sexual violence. The Commission understands that the service response for children and young people under the age of 16 is provided by CPS. The adequacy, and statewide availability, of this response for South Australian children and young people is further discussed below in the section titled 'Health responses to violence'.

The overall lack of help-seeking options for children and young people who are experiencing domestic or family violence is identified in the Silence and Inaction Report and in other inputs to the Commission:

> **Young people described encountering a support system that was often inaccessible, disjointed, and difficult to navigate without adult intervention. Key systemic failures identified across the interviews included … A lack of clear entry points for young people seeking support within schools, health services, and community organisations.**[71]

> **To prevent family and domestic violence SA should… make sure people know where they can go for help. posters - not only on the internet.**[72]

> **To prevent family and domestic violence SA should… Have more safe places for us to go for help. Young people find it hard to talk to people about this.**[73]

It is perhaps of little surprise that over half of all respondents to Share With Us told the Commission that they contacted 4 or more supports when seeking help or support for domestic, family and sexual violence and that almost a quarter of respondents contacted 7 or more supports. Help seeking is not simple or accessible in South Australia – this needs to change.

Fragmented records management, data collection and information sharing has also been identified as a challenge. Currently, the DFVSA relies on the Homeless2Home (H2H) records management system to capture data on its crisis responses to domestic and family violence. For obvious reasons, H2H, a system developed for homelessness, is not meeting the needs of specialist domestic and family violence service providers. Speaking to this issue, the DFVSA wrote:

> **As the primary crisis DFV services in the state, our current data capture mechanisms [the Homeless2Home system] is not designed to capture domestic or family violence information, and so lacks the ability to capture simple, but vital data, around incidence and prevalence of domestic and family violence – including the types of violence that clients experience, their risks and impact of service interventions.**[74]

To overcome this issue, the DFVSA calls for the development of a data system 'which provides timely, accurate and meaningful data related to the experiences of victim-survivors, links between systems and services and, importantly, outcomes and impacts'. The Commission is also aware of the Serial Offender Database, which is currently maintained for use by DFVSA members.

Future state

Dr Chelsea Tobin, CEO of Safe Steps, provided evidence to the Commission during Day 9 of public hearings. Safe Steps is Victoria's only 24/7, 365-days-a-year crisis service for 'anyone who is scared to go home'.[75] Services provided by Safe Steps include (among other things) a 24/7 crisis centre (with call, webchat and email options), a family violence accommodation register, and crisis accommodation, mostly through their sanctuary model as an alternative to motel accommodation.

In her evidence, Dr Tobin emphasised that Safe Steps is focused on how they make the first moment of help seeking really matter. She stated that 90% of the calls that Safe Steps receives are from victim-survivors and stressed the importance of Safe Steps' response to that help seeking.

> **"We have two core functions or capabilities. One is help-seeking, so how do we make help-seeking more accessible, more helpful, more relevant? And then within that help-seeking moment, how do we really understand risk of what could happen next as protective factors? And then the second core function we have is once somebody seeks help, how do we make sure that we are evidence-informed in what really is an effective intervention for them and that will change the trajectory.**[76]

Dr Tobin spoke to the many different measures implemented by Safe Steps to ensure the service is accessible and inclusive for all Victorians. These measures have included developing an accessible website, proactive outreach to communities and cohorts (particularly those that are seen as unrepresented in the service system), implementation of disability action plans, development of memorandums of understanding with LGBTQIA+ service providers for referrals, Rainbow Tick accreditation, and significant, ongoing training and professional development to ensure that when somebody seeks help they receive a culturally responsive and safe response from Safe Steps.

Chapter 3 outlined the critical need for 2 standalone government websites to provide clear, accessible information on domestic, family and sexual violence – one specifically designed with and for children and young people. Even more urgently, South Australia must establish a single crisis and information central point, modelled on Victoria's Safe Steps.

This new entry-point service must be visible, inclusive, trauma informed, and accessible to anyone experiencing domestic, family or sexual violence. It must be clearly promoted on government websites so people in crisis aren't left searching in the dark for where to turn.

To meet this vision, the entry-point service must operate around the clock as a centralised phone and digital support line. It should use the many different accessible mechanisms already used by 1800RESPECT and identify even more. It should not just respond – it must actively identify and develop help-seeking pathways, especially for children, young people, and others who face systemic barriers to support.

Given the deep distrust many communities feel toward government-run services, this crucial function should be delivered by a non-government organisation. The service must be equipped to provide advice and support from staff trained in trauma-informed care and the state's risk assessment and management framework. These staff must not only respond but also guide – connecting people to the right support, at the right time.

To succeed, this service will need strong, trusted relationships with existing domestic, family and sexual violence service providers across South Australia, including ACCO-led services and other government and non-government organisations. The domestic, family and sexual violence sector has demonstrated its expertise and ability to work collaboratively. The combination of innovative practices in other jurisdictions and South Australian local knowledge and leadership will ensure an effective central entry-point service.

While the Commission considered whether this new entry-point should replace Yarrow Place's 24-hour sexual violence response service, it found such a move unnecessary – and potentially disruptive. Yarrow Place is a trusted service, and the Commission recommends a collaborative model, where the new entry-point and Yarrow Place work in close partnership to support referrals and innovate new pathways to safety. This should operate on an 'every door is the right door' concept, as championed by WSSSA.

Establishing this entry-point will also require deep engagement with the broader support network across the state. Submissions identified many places where people currently seek informal support – Women's Information Service Havens and Hubs, local council community centres and libraries, and community-run initiatives. These are powerful points of connection that must be part of the new system.

Local government has a critical role to play – not only in helping identify services and spaces to partner with the new entry-point, but also in promoting its existence throughout South Australia's extensive community networks.

The South Australian government and local governments must support the central entry-point service to identify the many different trusted community spaces across South Australia. People should be able to access information and support in the places they already visit in their own community – as one community-centre provider described it, 'for some people in my community, asking them to drive 15 minutes to the next suburb may as well be asking them to drive to the moon'. It is integral that the people working in trusted community spaces know of, and how to connect to, the central entry-point service.

The implementation of a central entry-point will necessitate the development of a fit-for-purpose records management and information sharing system for domestic, family and sexual violence services. This system must be able to securely store and share relevant information regarding both clients and people using violence between relevant services and referral points. This information should include case notes and risk and needs assessment results in order to ensure clients can receive a suitable service without having to continually retell their story to each service provider.

This is not just a recommendation – it is a blueprint for transforming a fragmented, crisis-driven system into a coordinated, compassionate one. For too long, help has been hard to find. South Australians deserve better.



Recommendation 46

The South Australian government fund the establishment and ongoing operation of a non-government central entry-point crisis and information service for any person experiencing domestic, family or sexual violence in South Australia. The service is to:

a. operate as an all-hours centralised phone and web-based service, incorporating (at a minimum) the accessible communication mechanisms used by 1800RESPECT
b. provide crisis response, including risk assessment and referral to services across a network of South Australian domestic, family and sexual violence organisations
c. develop innovative help seeking pathways for children and young people via a co-design process with children and young people
d. identify the places and spaces across South Australia where people may seek help for domestic, family and sexual violence and work to develop awareness of the central entry-point service within those places and spaces
e. develop a close working relationship with Yarrow Place, with guidelines on referrals between the 2 services.

Recommendation 47

The South Australian government procure and maintain a fit-for-purpose domestic, family and sexual violence records management and information sharing system suitable for use by the central entry-point service as well as the organisations that it refers to. Procurement of the system must be informed by input from members of the Domestic and Family Violence Safety Alliance regarding the limitations of the Homeless2Home system currently in use. This system must, wherever possible:

a. securely record, store and share information and documentation relevant to domestic, family and sexual violence, including but not limited to a narrative of events, case notes, risk assessment results, needs assessment results and safety plans
b. record and share relevant information regarding both people experiencing and people using violence between relevant organisations and referral points
c. record consistent locational and demographic information
d. be integrated with the accommodation register (see Recommendation 104)
e. be integrated with the technological solution for whole-of-government information sharing (see Recommendation 20)
f. be integrated with the linked-data dashboard (see Recommendation 3)
g. replace the function currently served by the Serial Offender Database.

Consideration should be given to the suitability of this records management and information sharing system to support the secure and efficient administration of the Domestic Violence Disclosure Scheme.

Help seeking and the child protection system

The Commission acknowledges the many South Australian Royal Commissions and inquiries on the child protection system to date, including:

- 'Our best investment: a state plan to protect and advance the interests of children', Child Protection Review, The Hon Robyn Layton QC, 2003
- 'Children in State Care Commission of Inquiry', Allegations of Sexual Abuse and Death from Criminal Conduct, The Hon E.P. Mullighan QC, Commissioner, 2008
- 'The life they deserve: Child Protection Systems Royal Commission Report', The Hon Margaret Nyland AM, Commissioner, 2016
- 'Final Report of the South Australian Dual Involved Project: Children and Young People in South Australia's Child Protection and Youth Justice Systems', Guardian for Children and Young People, 2022
- 'Trust in Culture: A Review of Child Protection in South Australia', Kate Alexander, 2022
- 'Report of the Independent Inquiry into Foster and Kinship Care', Government of South Australia, 2022
- 'Independent Report of the Review of Child Deaths at Munno Para and Craigmore', Government of South Australia, 2022
- 'BDO review into DCP complaints process', BDO, 2024
- 'Evaluation of SA Family Group Conferencing Final Report', Australian Centre for Child Protection, 2024
- 'Audit Report: Review of practice, removal of infants, Department for Child Protection', Professor Katina D'Onise AM, 2024.

The Commission also acknowledges the former Commissioner for Aboriginal Children and Young People's report, Holding on to Our Future, and her engagement with, and input into, the Commission.[77] The South Australian government response to Holding on to Our Future was tabled in Parliament on 28 November 2024. In that response, the government agreed to support 24 recommendations, consider a further 4 recommendations, and did not support 4 recommendations. It is the Commission's understanding that implementation of the recommendations from Holding on to Our Future remains incomplete.

The Commission also understands that a Child Protection Subcommittee involving South Australian government and ACCO representatives has been formed pursuant to a commitment in the Closing the Gap: South Australia's Implementation Plan 2024–2026 (SA Closing the Gap Implementation Plan). SAACCON has advised the Commission that this subcommittee has held its inaugural meeting and will be responsible for overseeing the implementation of actions under Outcome 12 in the SA Closing the Gap Implementation Plan, including actions such as the decision-making tool relevant to child removals.

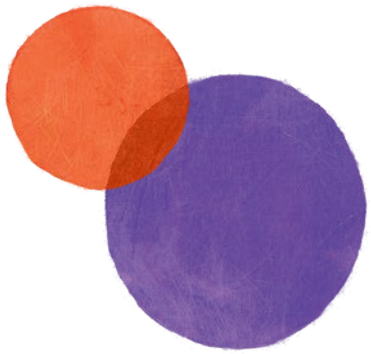
The Commission's Terms of Reference do not call for an inquiry into the child protection system. Despite this, the Commission has received many inputs calling for a system-wide reform of the child protection system.

> **I would say that we have to stop reforming the Child Protection system that we have. We've built it on the wrong foundations. So we actually need to go back to our underpinning assumptions.**[78]

> **[W]hat we hear loud and clear … is we're operating a crisis driven and unsustainable system. … We continue to see disproportionately worse outcomes for Aboriginal families and children. We must acknowledge this is related to a history of dispossession of land, disconnection from culture, stolen generations and the ongoing systemic racism and systems that entrench intergenerational disadvantage. There are challenges unique to rural and rural communities. … And of course we really need to take the time to talk and listen to all of these different groups, including our multicultural communities that make up the Australian community. And we need to be able to also think about newly arrived families and those from refugee backgrounds. So I guess with all of those things that we know … over a thousand conversations it was loud and clear the current system's not working for children. It's not working for young people. It's not working for families. So we need to do things differently and Thriving Families is an opportunity to do chart a different way forward.**[79]

While acknowledging this call to action to the South Australian government to invest in and progress transformational reform to the child protection system, the Commission has focused its attention on identifying mechanisms to create safer pathways for help seeking.

> **I think we should cut through the research and technical language here and talk about love, because actually it's really, really important that kids experience love. It's one of the most protective things we have as humans, to experience love, to be cared for, to have someone to go back to. So where a child loves and is loved by a parent, then we need to do everything we can to support that family unit to remain safely together. Recognising for some parents that will mean extensive support to make that happen.**[80]



Current state

The Commission has consistently heard that fear of interaction with, or action by, the child protection system can prevent someone from seeking help in relation to domestic family and sexual violence. This fear was highlighted in many listening sessions and submissions to the Commission:

> **In our experience... It can be difficult for victims to report the perpetrator's behaviour... victims may not trust the authorities or support services. There is often a fear that victims will not be believed or taken seriously by these services. Victims may also be fearful of intervention by the Department for Child Protection if there are children involved. They may be afraid that their children will be removed because they are at risk.**[81]

Under the South Australian *Children and Young People (Safety) Act 2017* (CPYS Act 2017), a mandatory child protection report is to be made if a mandatory notifier forms a suspicion on reasonable grounds that a child or young person is at 'risk'. This reporting threshold includes harm that a child or young person experiences as a consequence of sexual, physical, mental or emotional abuse or neglect. In 2022, almost half of all screened in child protection notifications – or more than 16,500 cases – involved domestic, family or sexual violence.[82]

Following receipt of a report, where the Department for Child Protection assesses that the report meets the criteria for a child protection response, a recommendation to the relevant Department for Child Protection Office will be made about the action to be taken.

At the time of writing, the new *Children and Young People (Safety and Support) Act 2025* (SA) (CYPSS Act 2025) has been passed but has not commenced. When operational, this legislates under section 76 that a prescribed person must report suspicion on reasonable grounds that a child or young person is 'at risk of significant harm'. The CYPSS Act 2025 will also expand the definition of harm to include exposure to domestic violence, under section 4(1).

In South Australia, concerns about the safety and wellbeing of a child or young person can also lead to a response from the Child and Family Support System (CFSS) which is coordinated by the Department of Human Services. The CFSS is a combined system of services and supports delivered by government, non-government organisations and ACCOs for South Australian children and families.[83] There are many services and supports within the CFSS that are designed to respond to the different needs of children and families. This includes Intensive Family Services (IFS), which provides high-intensity case management and therapeutic intervention where there are high- to very high–level child safety concerns. Referrals to CFSS IFS are received from the Department for Child Protection (80%), the Department for Education schools and children's centres (12%), SA Health hospitals with birthing services (5%) and MAPS (3%).[84]

The Commission was told that in 2022–23, 74% of all referrals to the CFSS IFS reported current or past domestic, family or sexual violence concerns at the time of referral.[85] CFSS has developed a Responding to Domestic and Family Violence Practice Guide for CFSS practitioners.

The Early Intervention Research and Data team within the Department of Human Services is working in partnership with BetterStart to evaluate outcomes for children and families who have been engaged with IFS within the CFSS. The Commission understands that analysis to date has focused on understanding the association between engagement with IFS and the subsequent rate of Out of Home Care avoidance. The Commission is advised that 95.4% of families referred and engaged in IFS did not experience an episode of Out of Home Care over a 12-month follow-up period from the date of initial referral.[86] BetterStart's evaluation will conduct a causal analysis based on IFS data, which will assess the effectiveness of IFS in preserving families relative to other responses.

While evaluation is ongoing, the early signs appear to suggest that the provision of intensive supports to families who are experiencing domestic, family and sexual violence may allow for outcomes other than child removal. CFSS data shows that in 2022–23, of the families receiving IFS with current domestic and/or family violence concerns, 65% of families were recorded as having achieved an adequate level of safety and stability at the end of the service period (6–9 months on average).[87]

The Commission was told that CFSS is only able to provide a service to around 36% of the referrals that they receive due to capacity constraints. CFSS also spoke about capacity limitations in their ability to deliver services in regional and remote areas, and, particularly, that they have no service footprint for intensive family support in the APY Lands.[88]

The need to intervene earlier and to identify the supports a family may need to stay safe has been a consistent theme throughout the Commission.

> **Removal of children … is not the answer. Intervention and intensive support is what is needed. Royal Commission recommendations needs to highlight that funding needs to be put towards early intervention services, that go into ACTIVE DFV situations, by skilled partitioners.**[89]

An immediate measure the South Australian government could take to link parents experiencing domestic, family and sexual violence with the types of services which could create safety and prevent child removal is the scaling up of the CFSS. The Commission is of the view that a further investment in the CFSS, with a priority investment in expanding regional service delivery and establishing a presence in the APY Lands, would allow for more families who are the subject of child protection reports to receive intensive supports and potentially avoid child removal.

In addition to this recommendation, the Commission considers there is another mechanism that should be considered by the South Australian government in an effort to ensure that the the South Australian child protection system is no longer perceived as a barrier to help seeking.

In their submission to the Yoorrook Justice Commission, the first formal truth-telling process into historical and ongoing injustices experienced by First Peoples in Victoria, Djirra recommended the urgent establishment of a mandatory Aboriginal and Torres Strait Islander child protection notification and referral system. The proposed system would ensure that, upon a child protection notification being received for an Aboriginal and/or Torres Strait Islander woman, the mother would be immediately referred to Djirra and informed of the importance of obtaining independent legal advice.[90]

Yoorrook, in its report, considered the systemic injustices within the child protection system, and heard 'that one way to improve compliance with laws and policy was to provide free early legal help for Aboriginal families through a notification system'.[91] Yoorrook agreed that a notification system would benefit Aboriginal families, 'many of whom struggle to navigate the complexity of the child protection system – particularly given the intersections between risk of child protection involvement and homelessness, family violence and other areas of disadvantage', and that any new notification mechanism should be designed, delivered, monitored and evaluated by First Peoples, consistent with the rights to self-determination.

Yoorrook recommended that whenever the Victorian Department of Families, Fairness and Housing receives a pre-birth report regarding a pregnant Aboriginal woman, or a child protection report is substantiated regarding an Aboriginal child, then, subject to the consent of the person to whom the report relates, the department must automatically notify a Victorian Aboriginal legal service provider so that the child's parents and/or primary caregiver are offered legal help and, where appropriate, non-legal advocacy.[92]

Although the Victorian government supported the above recommendation in principle in its response to the Yoorrook report and recommendations in April 2024, the Commission was unable to find any publicly available information on the implementation status for this recommendation.[93]

In its submission to the Commission, the South Australian Aboriginal Community Controlled Organisation Network advocated for a national child protection notification and referral system to be established.[94]

The Commission has identified another interstate model which seeks to link parents who are the subject of a pre-birth child protection report with legal services. In Western Australia, the Department of Communities will consider convening a pre-birth 'signs of safety' meeting with parents who are the subject of a pre-birth report where there are concerns for an unborn baby's safety after birth. This may include where drug or alcohol use is occurring, or family violence is present.[95] Free legal advice and representation for both parents is available at the signs of safety meetings from services such as Legal Aid WA, Aboriginal Family Legal Services, Aboriginal Legal Service of WA, Women's Legal Service WA, Mental Health Law Centre (Ruah), Community Legal Centres, and Family Violence Prevention Legal Services. It appears from the Commission's desktop research that the onus is on the parents to organise their own free legal representation, meaning there is no mandated referral process from child protection to a legal advice provider.

In South Australia, a model is already underway to link pregnant Aboriginal women with services, including legal services. The 'Corka Bubs' program, recently studied by the Aboriginal Communities and Families Health Research Alliance at the South Australian Health and Medical Research Institute, connects pregnant Aboriginal women experiencing stress or problems with the use of alcohol or cannabis during pregnancy with a co-designed care package providing accessible pathways to support services.

The Aboriginal Communities and Families Health Research Alliance studied the feasibility and accessibility of the Corka Bubs program, noting that:

> **"[t]here is consistent evidence that persistent social stressors are detrimental to the health and wellbeing of Aboriginal and Torres Strait Islander children and families, and that social health issues are not adequately addressed by existing service models during pregnancy. In South Australia, the Aboriginal Families Study has identified the need to strengthen the capacity of antenatal care services to support women and families experiencing a range of social health issues, including drug and alcohol problems, family violence, housing insecurity, legal problems and impacts on wellbeing.**[96]

The co-designed care package involved a suite of services embedded within antenatal care, which included: access to a counsellor, support from staff from Drug and Alcohol Services South Australia (DASSA) and support from staff of the ALRM to address family legal issues. Aboriginal women were eligible to participate in the Corka Bubs program if they were enrolled at the Women's and Children's Hospital Ngangkita Ngartu service (Aboriginal Family Birthing Program) or at the Lyell McEwin Hospital Northern Aboriginal Birthing program. The services involved in the program were co-located and offered at no cost, and appointments with the services were offered on a flexible basis and often on the same day as routine antenatal care appointments.

The Policy Brief produced in relation to the study found that almost all participants felt well supported by the program and would recommend the Corka Bubs program to other Aboriginal women, and participants strongly supported continuation of the Corka Bubs program.[97] The Policy Brief concluded that there is an urgent need for hospitals and community services to work together to act on the findings and ensure better outcomes for Aboriginal and Torres Strait Islander mothers and babies.[98]

The need for early identification and assertive intervention for domestic and family violence in high-risk pregnancies was identified in the written submission of the Child Death and Serious Injury Review Committee. The submission noted that:

> **Consideration could be given to co-locating family support or domestic and family violence services with pregnancy and birthing services in community locations which are considered to be culturally safe for Aboriginal women.**

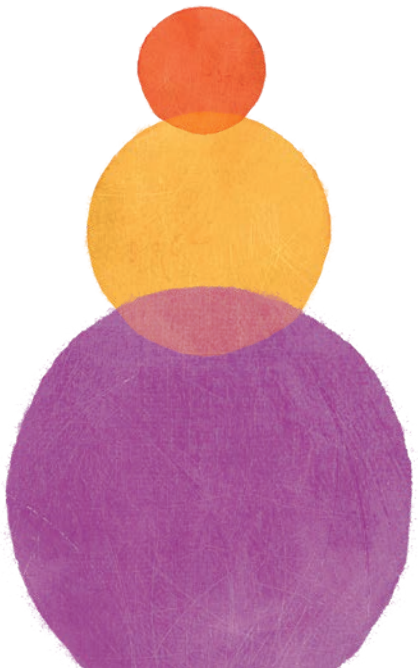
> **When an unborn child of concern notification is made to child protection services, an early response to connect pregnant women to family support and/or domestic and family violence services is warranted even if the threshold for action by child protection services is not reached.**[99]

A further mechanism for embedding legal advice services in a hospital setting which is already available in South Australia is a Health/Justice partnership, such as that operating between the Legal Services Commission and the Women's and Children's Hospital.[100] In its submission to the Commission, the Legal Services Commission identified the potential for hospital check-ups during pregnancy or with unwell children as potential opportunity to link a person who is experiencing domestic, family and sexual violence with a legal adviser.[101]

Future state

To ensure service delivery across South Australia, the South Australian government should provide additional resources to the CFSS, with a particular focus on regional and remote areas, including in the APY Lands, to allow for more families who are the subject of child protection reports to receive intensive supports and potentially avoid the removal of children.

The Commission is of the view that the South Australian government should fund the pilot of a child protection notification system in relation to pre-birth reports that builds on the model already underway in the Corka Bubs program. The system's referral pathways should include both pre-birth child protection reports and referrals from the intended birthing hospital. The pilot should embed an evaluation framework to inform the expansion of the system statewide, including a second phase that would allow child protection reports other than pre-birth reports to be captured under the statewide system.



Recommendation 48

The South Australian government provide additional resources to Child and Family Support Services in the Department of Human Services to expand statewide service availability, with a particular focus on regional and remote areas of South Australia.

Recommendation 49

The South Australian government resource a pilot of a child protection notification system for pre-birth reports that builds on the existing Corka Bubs program. The pilot should:

a. be run in a regional area
b. include referral pathways for both pre-birth child protection reports and referrals from the intended birthing hospital
c. provide wraparound supports including family violence support services, family violence legal support services (such as Family Violence Legal Services Aboriginal Corporation and Aboriginal Legal Rights Movement) and Aboriginal drug and alcohol services.

Police responses to violence

Reporting domestic, family and sexual violence to police

It has become increasingly understood that domestic, family and sexual violence is significantly under-reported to police. As discussed earlier in this chapter, data from the PSS shows that people experiencing domestic, family or sexual violence are more likely to seek support and advice from informal sources such as friends or family, and from trusted professionals such as healthcare providers, than formal sources such as police.

National surveys like the PSS and the National Student Safety Survey (NSSS) reveal that sexual violence is occurring at much higher rates than is formally reported. The ABS found that around 1 in 7 (14%) Australians over the age of 18 are estimated to have experienced sexual assault and/or threats since the age of 15.[102] Adult women are far more likely to have experienced sexual violence than adult men (22% compared with 6.1%).[103] For women aged over 18 who have experienced sexual violence by a male, the ABS found that police were contacted in less than 1 in 10 (8%) instances, with the majority of victim-survivors (92%) choosing not to contact police.[104] The ABS found that while over half (57%) of women who experienced sexual assault by a male told somebody, they were more likely to seek support from an informal source (46%) than a formal source (27%).[105] Common reasons women provided for not contacting police for sexual violence included feeling ashamed or embarrassed, and thinking that police either could not or would not do anything about it.[106]

This significant rate of under-reporting of sexual violence in Australia is supported by the NSSS, which found that while almost 1 in 3 (31%) university students had experienced sexual assault,[107] less than 2% had reported to police, and less than 1% had reported to a specialist sexual assault service.[108]

A recent systematic review for the *Trauma, Violence, & Abuse* journal found that that boys and men also dramatically under-report experiences of sexual violence, finding that 'boys and men are less likely to disclose to social supports, police, and mental health practitioners, relative to girls and women' and that boys and men delay disclosure of sexual trauma for 'upwards of 15–20 years on average'.[109] These high rates of under-reporting for both females and males are significant given the ACMS found that more than 1 in 3 girls (37%) and almost 1 in 5 (19%) boys experienced child sexual abuse.[110]

Data shows that sexual violence reports to police have increased over the past decade, with a 2022 ABS media release stating that the number of police recorded sexual violence victim-survivors had increased by 13% in 2021, the 10th annual rise in a row.[111] Similarly, the Australian Institute of Health and Welfare found that between 2010 and 2018 the rates of sexual assault recorded by police rose by more than 30%, noting that it was unclear whether this reflected an increase in prevalence or an increased propensity to report sexual violence to police.[112] Despite these increases, the overall rate of reporting sexual violence to police remains alarmingly low, especially given the criminal justice system is one of the few mechanisms able to hold people using sexual violence to account.

As mentioned in the 'Barriers to help seeking' section of this chapter, some population groups experience additional barriers to disclosing experiences of domestic, family and sexual violence. These can exist for a variety of reasons, including experiences of, or fear of experiencing, discrimination based on racial identity, sexuality, gender identity, disability or age, as well as previous negative experiences with police in South Australia or abroad. These existing barriers are only amplified when it comes to physically attending a police station, which, when combined with uniformed police, can be imposing and intimidating environments.

Current state

Seeking help or advice from police

Earlier in this chapter, the pathways for people seeking assistance or advice from police were discussed. These pathways include contacting Triple Zero for an emergency response, contacting the Police Assistance Line for a response that is not time critical, or physically attending a police station to seek help or advice or make a report.

If police do attend following a call for urgent or non-urgent assistance, they will generally take steps to manage any immediate risks to safety, and then seek to gain an understanding of what has happened or is alleged to have happened. If police have reason to believe that an offence may have been committed, they will generally take additional steps at the scene, which may include gathering and preserving evidence, taking statements, managing risks, issuing police interim intervention orders and arresting or reporting the suspect(s). If police don't have reason to believe an offence has been committed, they may still take steps to manage risks using other methods, such as issuing a trespass warning, making a mental health detention order, or by advocating for a person or persons to leave and stay elsewhere for a period of time.

These police pathways will most likely involve help seekers first speaking with frontline 'general duties' police officers. Most frontline police officers are generalists, as their work involves responding to a broad range of emergencies, incidents and activities. While frontline police officers do receive some training on domestic, family and sexual violence, and have policies and supervisors to guide the actions they take, they are not specialists in responding to domestic, family and sexual violence. This means that the 2 most common pathways for people experiencing domestic, family or sexual violence to seek assistance or advice from police will generally involve initial contact with a generalist rather than specialist police officer.

A third and less common pathway to engaging with police is through referral from an external worker or agency. This is particularly relevant for people who have experienced sexual violence, given that they may have first sought help from Yarrow Place or another health service. Health responses for people who have experienced sexual violence are discussed later in this chapter, where it is set out how Yarrow Place and other health services may assist with the collection of forensic evidence, provide information about legal rights, and facilitate referrals to police when requested.



Inconsistent frontline police responses

The Commission received substantial input about police responses to domestic, family and sexual violence in South Australia. This input has come from a range of sources, including victim-survivors, people who have supported someone experiencing violence, and people using violence, as well as a variety of other frontline workers, agencies and organisations. Accounts of police responses to domestic, family and sexual violence in South Australia have varied, ranging from extremely positive to extremely negative. This inconsistency in experiences with police is important. It is broadly understood that a person's first experience with frontline workers when disclosing domestic, family and sexual violence is pivotal. If the person experiencing violence feels heard, believed and supported, they are more likely to trust the system going forward. If they feel ignored, disbelieved or rejected, they may never trust the response system again. Members of South Australia's Lived Experience Leadership and Advocacy Network spoke to this in their submission:

> **Members agreed that how victim-survivors are treated by different parts of the systems they engage with is the most significant factor in their lived experience of FDSV. How someone is treated by a law enforcement officer or healthcare professional will be part of their experience of FDSV, which means it can be continuation of the trauma or it can be a counterforce to that trauma. Every person who will interact with victim-survivors must be trained in trauma-informed practice or otherwise be considered a risk to exacerbating that trauma, even if it is in the days, weeks, months, years, and decades following that trauma.**[113]

Some South Australians spoke about how they were immediately believed and supported by police:

> **I literally started to cry when the SAPOL officer read the information I had provided him and looked at me without any explanation and said I'm sorry you're going through this, this is not ok- this is very clearly not about your children it's about his control of you, its coercion and control and it's not ok.**[114]

> **I had an experience with domestic violence. I want it to be known that the South Australian police officers who helped me were absolutely fantastic...There was also the officer who first took my statement in person... a female officer ...She was important as the initial step to take was difficult and upsetting for me. For all the reports and times that the offences are not handled well, I am so grateful that I was assisted, taken seriously, supported, and the police did their work with care towards me and my family. I am so grateful for their service, and I am aware that their work in this area is so difficult.**[115]

Others spoke about SAPOL taking action that saved their lives:

> **Once I finally reported, the person at SAPOL that took action literally saved my life that day. The way he responded and understood my needs to protect my children and the confidentiality it required with [us] both being police members was outstanding. If he responded any other way, I would have withdrew the complaint to protect my children.**[116]

> **The police saved my life 10yrs ago when I called them because I thought he was going to kill me.**[117]

Unfortunately, this exemplary service from frontline police officers is not always the experience of people reporting or disclosing domestic, family and sexual violence. The Commission has heard that some South Australians encountered disbelief, minimisation and even rudeness when reporting violence to police. These inadequate responses to disclosures of violence and safety concerns can result in South Australians losing trust in police and doubting their willingness to keep people safe. In some cases, poor early experiences of police can result in such a degradation of trust that people will simply cease reporting crimes or seeking help from police, even when their safety is in danger:

> **With intervention order issued I was repeatedly told to report every breach as soon as possible. When I went to report breaches I was treated like I was wasting their time. I was told to 'try another station, we're busy' after being told that, I stopped reporting breaches, and that would look like he had suddenly started behaving.**[118]

> **The victim in this matter was my husband. He approached SAPOL numerous times to seek help and intervention and was treated so badly as he is male. He was even laughed at and told to go away for wasting SAPOL time.**[119]

These inconsistent responses from frontline patrols and front-counter police officers were sometimes informally referred to as 'police lucky dip' or 'front-counter lucky dip'. A person with lived experienced who was interviewed for the Powerful Interventions research project in South Australia stated:

> **It's a lotto to see whether you are interacting with a police officer who understands domestic violence or not.**[120]

Inputs to the Commission suggest that experiences with family violence investigators were more consistently positive, and less prone to the lucky dip phenomenon encountered with generalist police. For example, one person supporting their daughter with domestic violence observed the difference between generalist and specialist police:

> **On several occasions [the person experiencing violence] had cause to approach the South Australian police, from the initial reporting of the domestic violence, through arranging for a police presence to collect some essential belongings such as clothes and toys, to establishing ownership of her car for insurance purposes, which the violent partner had written off in a road accident. The responses varied depending on whether the police officer had domestic violence training or not. On the one hand the police officers with domestic violence training where empathetic, helpful and supportive. Those with obviously no domestic violence training were evasive, off hand and unwilling to get involved in what they said was a 'domestic issue' and a 'civil matter'.**[121]

People who reported sexual violence to police, the vast majority of whom were women, experienced a range of responses from police. These experiences ranged from excellent to terrible. Even those who reported a positive experience still felt they were subsequently failed by the broader justice system:

> **I was sexually assaulted and raped... The support services and police were great - the court system is appalling.**[122]

> **My perpetrator was arrested and charged within 12 hours of reporting and my interactions with SA Police were very trauma informed and positive.**[123]

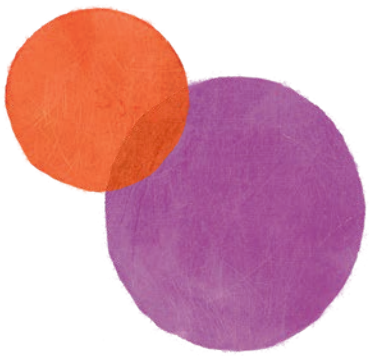
While these positive reflections on the role of police were encouraging, other submissions were confronting:

> **The female police officer who heard my report was the one who asked me if I '... was aware that [the abuse] was classified as rape?' As I began to cry, she exited the room, returning shortly with two detectives. The report quickly became an interrogation where I, the victim, was being asked to provide evidentiary support of my assault. Intimidating questioning surrounding my 'failure to promptly report' the assault began. In accordance with SAPOL's uneducated views on how victims 'should' behave; if incident/incidents are not immediately reported with a plethora of evidence, 'apparently' the next plausible explanation driving victims to report is pure fabrication.**[124]

> **[I was] gang raped by my ex partner and his friends. I reported this to Police and was told I needed to seriously consider the effect my report would have on the lives of the men who had harmed me as they were 'good men' in the community. I did not proceed with charges as I was utterly defeated by the reaction from SAPOL.... The men who did this to me have continued with their lives seemingly unaffected....As the victim of the assault, I felt that I was not even considered, it was just the perpetrators and the effect on them.**[125]

Share With Us results provided valuable insights into South Australians' experience of seeking assistance or advice from SAPOL for domestic, family and sexual violence. Of the 838 responses to the survey that answered questions about experiences with police, more than half (55%; n=356 of 647) of the respondents with lived experience, and more than 2 in 3 (69%; n=132 of 191) support people reported that they contacted SAPOL for support. Of people who were experiencing violence who sought help from police, less than 2 in 5 (37%) reported that their needs were met. For comparison, under half (43%) of people experiencing violence reported that specialist services met their needs, and under half (45%) of people experiencing violence reported that legal services met their needs.

Share With Us responses revealed that LGBTQIA+ people and men experiencing violence were less likely to receive any form of intervention or support from SAPOL when compared to the general population.



Issues reporting at police stations

It is clear that the first point of contact in a police station can affect a victim's entire experience. Input to the Commission revealed that reporting or seeking advice about domestic, family and sexual violence at the front counter of a police station could be intimidating, embarrassing and sometimes retraumatising. This was partly due to the need to speak through a safety screen or in a public waiting room, sometimes in front of other members of the public, and occasionally with a volunteer or unsworn staff member rather than with a police officer.

> **I went to [a] Police Station several times to report my concerns... The waiting room had three people: two females in a cubicle on the right-hand side and a male waiting about two meters from me. The female police officer then called my name loudly and rudely. As I approached the desk, her body language was intimidating. She asked in a rude, apathetic, and aggressive manner, 'WHAT ARE YOU HERE FOR?' I replied timidly, 'I need to make a statement.' The officer continued in the same tone, 'WHAT SORT OF STATEMENT?' I answered, 'DV.' The officer asked, 'WHY DO YOU WANT TO MAKE A STATEMENT?' At this point, I started crying and shaking, feeling deeply intimidated, distressed, embarrassed, and judged. I felt like a criminal. When I quietly told the officer that she was rude, she rolled her eyes and flapped her arms. I then walked out... I will not be returning to the police station, as I did not receive the respect and support, I needed during this traumatic time.**[126]

Additional challenges for regional and remote communities

The Commission heard that the variety of barriers which deter some people from seeking help or advice for domestic, family or sexual violence at police stations are even more significant for people living in regional and remote communities. These barriers can become almost insurmountable when physical distance, access to transport and the intricacies of living and working in small communities are encountered:

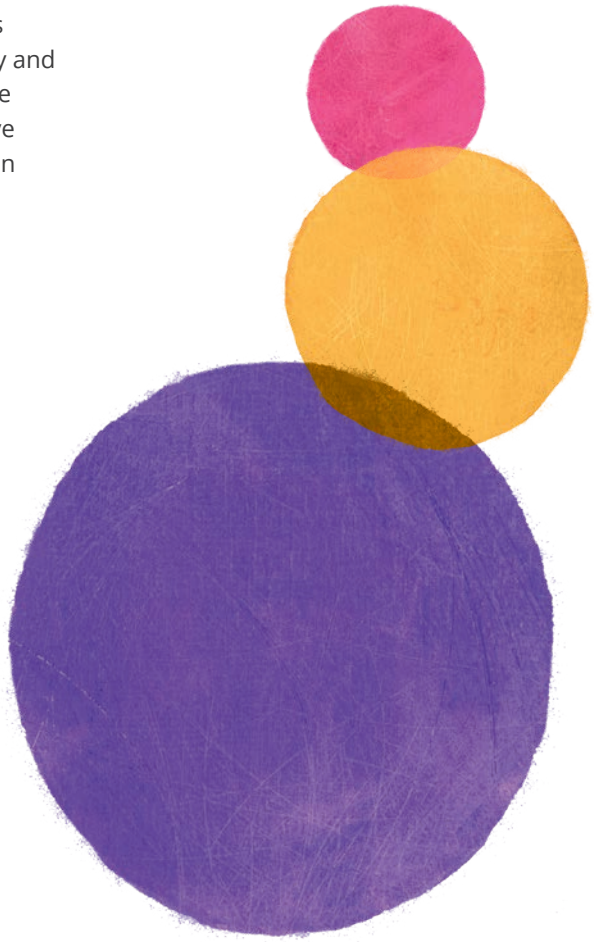
> **I live and work, and my children live and attend school, in a very small community. There is no locally based domestic violence specific police officer at our local police station, and the police officers who do work at the station I also work professionally with when policing and health care overlap. This meant that for many years I did not feel comfortable to go and report episodes of physical violence among people that I knew professionally, and in a small community where my husband is perceived publicly to be a good and decent man.**[127]

Non-government organisations providing specialist domestic and family violence services spoke about the additional difficulties in seeking help or advice from police in regional and remote South Australia:

> **If victims-survivors do decide to address their experience of DFSV, they are often forced to stand in a queue at their local police station in an open area describing the abuse through a plastic barrier in front of the other people in the station's waiting room. In regional and remote locations, this can be particularly confronting, especially if the SAPOL officer/s and the victim-survivor are known to one another.**[128]

During listening sessions, police officers recognised that this practice of taking reports at the front counter was less than ideal. Police explained that the practice was generally a result of staffing limitations (not having any additional police available in the station to facilitate a private discussion) or physical limitations (not having private rooms available for use), or a combination of both. Some police officers acknowledged that taking reports at the front counter, often in the presence of members of the public and offenders checking in for bail, was neither private nor trauma informed, but noted that, at present, there were no better solutions available.

While the Commission acknowledges that individual police officers regularly do the best they can with the resources they have available to them, the current process is not fit for purpose. People experiencing violence who are not in immediate crisis are routinely directed to attend their local police station to make a report. It should not be a matter of chance whether a victim-survivor encounters a helpful or unhelpful response. Even in circumstances where a police officer responds with empathy and professionalism, people experiencing violence may still be required to hold a deeply sensitive and private discussion through a safety screen and in front of strangers.



Alternative reporting options for domestic, family and sexual violence

Future state

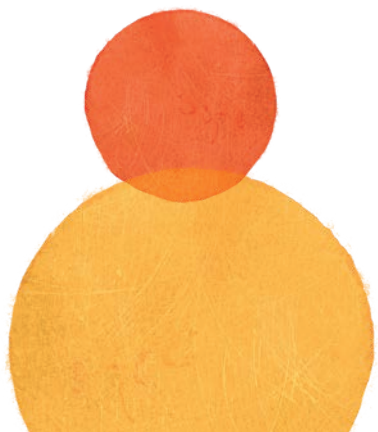
In Chapter 3, the Commission has recommended improved training for generalist and specialist police to be able to better recognise and respond to domestic, family and sexual violence in an effective and trauma-informed manner. Workforce training alone is not sufficient to ensure the improvements that victim-survivors require in order to safely and confidently report this violence. Addressing current limitations in the ability to report requires deliberate effort, investment and cultural change.

There has been a strong and consistent call for better help-seeking pathways for people experiencing violence, including the need to meet people 'where they are'.

Not every disclosure to police, whether through an emergency call or front-counter presentation, can be responded to by specialist family violence investigators. Part of the solution to this lies in better training for all police officers, but another part lies with the need to develop alternative pathways to seek a police response.

The Commission notes that other Australian police agencies have taken steps to improve the pathways available for people experiencing violence to seek help and advice from police. In Victoria, the Family Violence Response Model was developed following the Victorian Royal Commission into Family Violence, along with several Coronial Inquiries. It 'was developed to improve police responses to victims of family violence'.[129] The model reformed how Victoria Police responded to family violence incidents, introducing and defining a variety of specialised family violence roles. These include dedicated Family Violence Investigators, Liaison Officers, Court Liaison Officers, Analysts and Training Officers. To improve help-seeking pathways, the model introduced the Family Violence Liaison Officer role, which is performed by a supervisor located at all 24-hour police stations. The Liaison Officer is to 'ensure a consistent high quality and coordinated response to family violence' in their station and/or Police Service Area. To achieve this, they 'provide quality assurance by monitoring and reviewing Family Violence Reports', and 'monitor and coordinate investigations by responding police officers to investigate family violence incidents that have not been taken over by [Family Violence Investigators]'.'[130]

The Victorian model sets out that some family violence reports may be completed over the telephone; however, in circumstances where an offence against the person or property may have occurred, police attendance to the scene will be arranged.[131] This policy position indicates that while victim-survivors who choose to attend a police station to make a report are still able to do so, calls to the Victorian Police Assistance Line will more often result in police being despatched to meet the reporting person, or in an initial report being facilitated over the phone.



In Queensland, people experiencing violence can contact police for non-urgent help or advice in a number of ways. In addition to the Police Assistance Line, Queensland Police provide an online form that allows people to request contact from police by a preferred contact method, along with SMS messaging for deaf people, hearing impaired people and people who may find this type of communication more accessible. Additionally, in 2021 and 2022, the Queensland government trialled co-locating domestic violence specialists in police stations, aiming to support victim-survivors, provide connection to services and improve the quality of police responses to domestic and family violence.[132] An evaluation of the trial found that the domestic violence specialists provided victim-survivors with valued support, including by assisting people experiencing violence with making statements to police.[133] The evaluation also found that the co-location of domestic violence specialists at police stations had the potential to:

> **influence police practice more than abstract workshops or online training. Police also learnt about the importance of emotional support, empathy, trauma informed practices, and the value of social work skills, along with and referral options.**[134]

In 2025, following the positive evaluation of the trial, the Queensland government committed an additional $24 million towards rolling out co-located domestic and family violence support workers in police stations across Queensland.[135]

Frontline and front-counter police responses to domestic, family and sexual violence can and must improve. There will always be a need for physical police responses to incidents, and there will be an ongoing need for police stations to provide safe and appropriate pathways for victim-survivors to seek help and advice. The Commission recommends changes through a range of approaches, including changes to SAPOL's organisational structure, the development of a statewide Risk Assessment and Management Framework (RAMF) and a new integrated response model (Chapter 2). This must be accompanied by an improvement in the quality and frequency of police training as outlined in Chapter 3.

These changes alone are not sufficient to overcome the barriers that some people experience when seeking help or advice from police. In order to improve the accessibility and availability of help-seeking and reporting pathways for people experiencing domestic, family and sexual violence, alternative reporting options should be made available. Submissions also called for more trauma-informed responses, and alternative reporting options being made available:

> **for rural and remote areas there needs to be an option for reporting that enables safety for the person reporting the abuse. This would ideally mean that you could ring in to a service where your report would be believed, and then someone previously unknown to you and the perpetrator could then travel to you to take your statement.**[136]

> **The SA Government should provide a central online reporting system, with an anonymous identification number to enable victim/survivors to be able to record their experiences of DFV without fear of the information being accessed or lost. Information should remain anonymous unless victim/survivors activate a request to link it with their identity. This gives the victim/survivor control over what they report and when and may result in increased reporting. This should allow for text messages, photos and videos to be uploaded.**[137]

> **Embolden recommends that SAPOL's current review includes consideration of... alternative reporting options for victim-survivors, such as online reporting.**[138]

SAPOL also recognises that the provision of alternative help-seeking and reporting pathways presents a valuable opportunity to overcome some of the barriers experienced by South Australians, writing:

> **One area of innovation is the development and implementation of digital tools that can provide anonymous, discreet, and easily accessible ways to report domestic abuse and access services. Mobile apps, online chat systems, and text-based reporting platforms could be invaluable in reaching individuals who may feel unsafe making a phone call or visiting a service provider in person. These tools should be designed with accessibility in mind, offering multilingual support, compatibility with assistive technology for individuals with disabilities, and privacy features that allow for secure and confidential reporting. Additionally, ensuring these platforms are available in rural and remote areas, where access to traditional support services may be limited, is key to extending their reach and effectiveness.**[139]

Advancements in technology can improve the accessibility and availability of help-seeking and reporting pathways for people experiencing domestic, family and sexual violence. Alternative reporting options, such as online, video call, and text-based reporting present opportunities for people experiencing violence to seek help and advice from police in more private, secure, accessible and trauma-informed ways.

Good examples of alternative reporting options already exist in similar jurisdictions. One example is Kent Police's development of a Rapid Video Response for domestic and family violence in the United Kingdom. Rapid Video Response is a virtual policing response that is available to people experiencing domestic and family violence. Victim-survivors may participate in a live video call, during which they can make a report, complete a risk assessment and receive safeguarding advice.[140] An evaluation of the Rapid Video Response trial found that non-urgent response times improved dramatically, the arrest rate doubled, the resolution time for cases improved, and victim-survivor satisfaction and trust increased, when compared with business-as-usual responses.[141] The evaluation also found that one-third (32%) of people experiencing violence who opted to participate in Rapid Video Response had a disability or mental health condition, and more than 1 in 7 (15%) identified as being racially diverse.[142]

SAPOL would benefit from the development and implementation of alternative pathways for South Australians seeking help or advice for domestic, family and sexual violence. With proper consideration given to the design and implementation, technology-facilitated alternative pathways will enable SAPOL to reduce barriers to reporting and significantly improve accessibility, especially for people with disability and people living in regional and remote locations. Technology-facilitated alternative pathways also present an opportunity to improve the consistent provision of trauma-informed police responses to people who have experienced violence. The Commission notes that alternative reporting options must only be used when it is safe to do so, and must be provided to people experiencing violence as an option without replacing other alternatives such as non-urgent police attendance, or reporting at police stations.

Alternative and anonymous reporting for sexual violence

Sexual violence is under reported, and yet there have been minimal attempts to address the barriers to reporting sexual violence in South Australia. In contrast, other Australian jurisdictions have provided alternative reporting options for sexual violence for years. These include:

- Queensland's Alternative Reporting Option (ARO), which may have been available as early as 2009[143]
- Victoria's SARA was run privately by the South Eastern Centre Against Sexual Assault (NGO). It appears SARA was discontinued due to a lack of resources, with calls for Victoria to adopt New South Wales' model[144]
- New South Wales' Sexual Assault Reporting Option (SARO), which has been available since 2012[145]
- the Australian Capital Territory's online portal for non-recent sexual assault, which has been available since 2020[146]
- Western Australia's Safe2Say platform, which was launched in 2023.[147]

Alternative reporting for sexual assault usually takes the form of an informal, self-administered survey, often available online. While approaches vary between different jurisdictions, these reporting options generally allow the reporting person to remain anonymous if they wish to, while still providing details of what has happened to them.[148] Reports are often administered by or provided to police to support intelligence gathering and crime mapping and not to initiate unwanted criminal justice responses.[149] Research shows that 'anonymous reporting tools or platforms are important mechanisms for gathering intelligence, reducing crime rates, increasing reporting and connecting victim-survivors to support services'.[150]

On Day 7 of public hearings, Professor Georgina Heydon explained that victim-survivors valued alternative reporting options for a range of reasons:

> **"for some victim-survivors the purpose is to make a record of what happened before they forget and when they're still uncertain about what they might do next if anything. For some victim-survivors the purpose is to alert some authority to the actions of a person who's used violence. Often times victim-survivors will say that this is in the hope that it might protect others. For some victim-survivors the purpose is very much to seek support, so through this avenue they're hoping to get some support from support services.**[151]

Professor Heydon stated that police and support services can benefit from the use of alternative reporting options, often as a pathway into building trust, offering support, and even encouraging formal reporting through specialist police:

> **"From the perspective of support services the purpose might be somewhat therapeutic, so it might be seeking to provide the victim-survivor with a sense of closure by filing this albeit unofficial report with police. It might also be to make a record which might form the basis of future therapeutic options, and again it might be to support a victim-survivor who's uncertain about what they want to do so it's holding that record. For police, the purpose is to encourage people to perhaps come forward and make a formal complaint... for police also, it's a really important way to gather information about how such crimes are perpetrated.**[152]

Professor Heydon has found that police in other Australian jurisdictions have used alternative reporting options for sexual violence to reduce barriers and improve their initial responses to people wanting to disclose sexual violence, stating that police:

> **try and from the very beginning direct people towards a specialist response in policing rather than having people go through whoever happens to be on the front desk that that day and that's always a problem in policing, and I'm sure it's not just in relation to sexual violence and domestic and family violence but other types of specialised crime - that when someone comes in with these, you know, very high stakes crimes that they still have to deal with whoever's on the front desk, which is not to, you know, denigrate the worker, but those people are generalists, they're not specialists. So yes, it's a filtering, I guess, internally it allows that report to go to the right place as it were.**[153]

Professor Heydon also revealed that South Australian victim-survivors had indicated that they would like to have access to alternative reporting options:

> **victim-survivors are very much in favour of having just more options, just anything that provides them with more options. The key things that people want are more options for reporting, more pathways to support as well as keeping their options open in terms of whether or not they might make a formal complaint in the future... So I think that when we talk to people in South Australia, what we know is that yes, this could be very helpful. It could help to reach a more diverse range of victim-survivors, but it's not a panacea, and it mustn't be put in place of, you know, other forms of outreach.**[154]

The Commission has also heard support for the introduction of an alternative reporting pathway for sexual violence in submissions, including from Embolden:

> **Embolden's key recommendations to improve justice responses to sexual violence are... Development and implementation of 24/7 anonymous reporting mechanisms for sexual violence in SA, leveraging the experience of other jurisdictions and supporting national harmonisation of anonymous reporting.**[155]

The Australian Psychological Society:

> **We also support the NSW SARO approach as an alternative to speaking directly with a police officer.**[156]

And from the South Australian government, which wrote in its submission:

> **Both New South Wales and Queensland Police allow for anonymous reporting of sexual assault by victim-survivors. This allows police to receive information that can help investigations and may assist in reducing repeat offending, however, the victim-survivor does not have to go through the CJS for the information to be shared. In South Australia, Crime Stoppers provides the function to report anonymously. Pathways for anonymous reporting are essential to make it easier for victim-survivors to report without fear of retaliation or stigma. Ongoing investment in research to understand reporting barriers is also needed to design supportive solutions.**[157]

It is the Commission's view that given what is known about the under-reporting of sexual violence to police, there is a pressing need to develop and introduce an alternative pathway to report sexual violence in South Australia. This alternative reporting pathway will serve to provide victim-survivors with more options to disclose and seek support for sexual violence on their own terms.

Recommendation 50

The South Australian government resource the Commissioner of Police to develop and implement an alternative help-seeking pathway(s) for people experiencing domestic, family and sexual violence. The help-seeking pathway(s) should:

a. not be used in circumstances where a physical police response may be required to ensure safety
b. be optional and require informed consent from the user
c. be available statewide
d. provide consistent, quality and trauma-informed responses to people experiencing domestic, family and sexual violence
e. be staffed by employees who have received suitable training on the dynamics of domestic, family and sexual violence, and trauma-informed approaches
f. take steps to improve accessibility for the following priority population groups:
    i. young people
    ii. Aboriginal people
    iii. CALD people
    iv. LGBTQIA+ people
    v. people with disability
    vi. older people
    vii. people living in regional and remote communities
g. be integrated with the South Australian Risk Assessment and Management Framework and integrated response model as needed.

Recommendation 51

The South Australian government, in consultation with SA Health (Yarrow Place) and South Australia Police, develop, implement and resource an alternative and optionally anonymous reporting pathway for people who have experienced sexual violence in South Australia. The pathway should allow the reporting person to choose whether the report is provided to Yarrow Place and/or South Australia Police and allow the reporting person to indicate whether they would like to be contacted, and if so, how.

Recommendation 52

The Commissioner of Police and SA Health (Yarrow Place) develop a Memorandum of Understanding on the use of information derived from the alternative and optionally anonymous reporting pathway for sexual violence (see Recommendation 51), including consideration of how each agency will best engage with and support the reporting person should they choose to be contacted, and how de-identified data on prevalence and occurrence will be learned from and reported on.

Health responses to violence

Sexual violence was an important area of focus for the Commission. The Terms of Reference did not limit the Commission's focus to sexual violence occurring within domestic and family relationships only, meaning that the Commission's focus necessarily extended to instances of 'stranger' and non-familial rape and sexual assault.

The Commission received submissions from people with lived experiences of sexual violence in both familial and non-familial settings. One of the key areas identified for the Commission's attention was the health response to sexual violence in South Australia. This issue was the subject of Day 2 of public hearings, along with the justice response to sexual violence.

The Commission heard how important a trauma-informed and accessible health response to sexual violence is for both adults and children and young people. As discussed earlier in this chapter, Yarrow Place provides a health response to sexual violence for those aged 16 years and above. Where the person is under 16 years of age, the sexual violence response is provided by Child Protection Services.

This section looks at the current health-led responses to violence and how they can be improved to ensure that every help-seeking moment is an effective and safe one.

Gaps in health responses

Current state

Health response to adults

It was clear from all the input that the Commission received that the health response to sexual violence in South Australia varies significantly based on geographic location. In many of the regions visited, the Commission was told that local doctors and other health staff are either not trained or are unwilling to provide a healthcare response or to perform forensic examinations for people who have experienced sexual violence.

> **[C]urrently in Port Lincoln there is no sexual assault crisis clinicians or supports. Victim survivors are transported to Whyalla or even Adelaide for a forensic examination and there is no option for 'Just in Case' kits.**[158]

This was recognised in the South Australian government submission which stated:

> **The South Australian Government is also aware that forensic responses are no longer available on site in Mount Gambier, as well as having limited options in Port Lincoln. It means that those living in these regional and remote areas must travel at a time when they have already experienced significant trauma.**[159]

A basic healthcare response for a person who has experienced sexual violence may include emergency contraception, health checks for sexually transmitted diseases, screening for domestic and family violence risk or suicide risk and checking for evidence of strangulation.[160] Delays in this basic healthcare response can have a range of health implications for the person who has experienced violence, particularly where strangulation is involved. Evidence shows that strangulation can affect a person's long-term health, even where there is no visible physical injury and the person remains conscious. For example, strangulation could cause brain injury, memory loss, vision changes, injury to the larynx and mental health issues.[161]

At Yarrow Place, along with assessing a person's psychological safety, counselling options will also be explored. In that way, a therapeutic response is provided as part of the initial health response to a person who has experienced sexual violence.[162]

Forensic medical examinations are undertaken after a rape or sexual assault has occurred to collect evidence that can verify the type of sexual assault that occurred, support the victim-survivor's explanation of what has taken place and help identify the offender. A forensic medical examination is most useful within 72 hours of the rape or sexual assault; however, it can be undertaken up to 10 days after the assault. During the examination, the doctor or nurse will collect evidence such as swabs and clothing and document any injuries. Blood and urine may also be collected if there is a need to identify whether drugs or alcohol were used in the assault.[163]

A forensic medical examination may be undertaken after, or in anticipation of, a report to police for the purposes of taking legal action. The anticipatory examination is known as a 'just in case' forensic medical examination and can be undertaken while a person decides whether to ask police to investigate the complaint. The procedure is largely the same for both examinations; however, there are restrictions placed on how much clothing is collected during a 'just in case' forensic medical examination due to storage limitations. For example, underwear is often collected, but other clothing is only collected if it is of evidentiary value.

In South Australia, evidence collected via a 'just in case' forensic medical examination will be stored securely by Yarrow Place for 12 months (or longer by request) from the date of collection. Evidence transferred to police is stored by police or Forensic Science SA according to their guidelines. Although 'just in case' examinations are offered in every state and territory in Australia, the length of time in which evidence is stored varies. In the Australian Capital Territory and New South Wales, evidence is stored for a minimum of 3 months. In the Northern Territory and Western Australia, evidence is stored for 6 months. Queensland is similar to South Australia in that evidence is stored for 12 months.

Forensic medical examinations are not specialist health procedures and can be undertaken by any registered doctor or nurse in accordance with section 24 of the *Criminal Law (Forensic Procedures) Act 2007* (SA) and regulation 8 of the *Criminal Law (Forensic Procedures) Regulations 2022* (SA). Although there is no statutory requirement for additional training to be undertaken before a doctor or nurse can conduct a forensic examination, the Commission heard that training is generally preferred to ensure that the person conducts the forensic examination in a trauma-informed way and understands the requirements associated with the collection of forensic evidence for use in a criminal justice process.[164]

In Adelaide, forensic medical examinations are undertaken by Yarrow Place by doctors and nurses known as 'forensic consultants'. As explained by Ms Katrina Dee, Director of Health and Recovery Trauma Safety Services (HaRTSS) for the Women's and Children's Health Network (WCHN) in South Australia, during her evidence on Day 2 of public hearings, forensic consultants possess additional expertise to not only undertake the forensic examination but to also provide an opinion on what the collected evidence might mean.[165]

The Commission heard that the intended statewide approach for forensic examinations is a 'hub and spoke' model, whereby 4 general hospitals in Berri, Mount Gambier, Port Lincoln and Whyalla operate as the hubs for the surrounding smaller hospitals and regional areas.[166] The model relies on there being staff within, or connected to, the relevant Local Health Network who are willing to undertake forensic examinations. Under this model, Yarrow Place is responsible for providing, where possible, training to doctors and nurses in regional areas as well as telephone support.

The Commission heard of multiple cases where people who have experienced sexual violence have had to travel long distances to a metropolitan location to undergo an examination because of the inability of the relevant Local Health Network under the hub and spoke model to perform the procedure. Examples given to the Commission included victim-survivors being transported by police, being transported by a family member or friend or having to travel by bus or ferry.[167] The evidentiary needs associated with a forensic examination will mean a victim-survivor will be asked not to shower or change from the clothes they were assaulted in until the forensic examination is performed. In some cases, the victim-survivor will be asked not to eat or drink until the examination is performed.[168] This is an appalling situation that has persisted for years in South Australia. It needs to be addressed without delay.

> **For instance, if you are a victim of sexual violence in Mount Gambier, a forensic examination often has to occur in Adelaide. For some, this has meant a bus ride in the same clothes to be examined. A shower is many more hours away. This is more than a service gap – it is a trauma gap. Care and consideration for victims of sexual violence in regional South Australia is secondary.**[169]

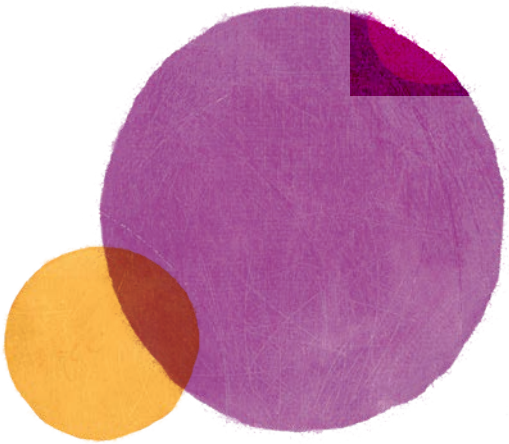
The Commission is aware of an incident in Robe in January 2020 in which a 17-year-old girl had no choice but to make a round trip to Adelaide following an alleged sexual assault. This was because the 2 nurses qualified to undertake forensic examinations in Mount Gambier were both on leave at the time of the incident. An ABC article noted that Mount Gambier Hospital had committed to doubling the number of staff able to carry out forensic examinations.[170] During the Commission's visit to Mount Gambier Hospital, the Limestone Coast Local Health Network advised that it had been over 12 months since there had been a staff member trained in the collection of forensic evidence. It would appear the commitment given in 2020 did not eventuate, or if it did, was not sustained.

During Day 2 of public hearings, the Commission heard that the 'hub and spoke' model has not been operating as intended for some time. Ms Dee explained that despite attempts to reinvigorate the intended approach, the number of victims travelling to Adelaide has not decreased.[171] In seeking to understand the persistent failure of regional Local Health Networks to provide forensic examinations, the Commission heard that there are a number of perceived barriers such as inconsistency in approach across the different Local Health Networks, lack of procedures in place, lack of staff or lack of support for staff to undertake the training, out-of-date forensic evidence collection kits, worry about having to go to court and give evidence, and a lack of confidence in performing the procedure.[172]

The Commission was advised that, as at October 2024 only 8 health practitioners are available to conduct forensic medical examinations in regional areas. Four of these practitioners are in the Flinders and Upper North Local Health Network (Whyalla and Port Augusta). There are no practitioners available in the Barossa Hills Fleurieu Local Health Network or the Limestone Coast Local Health Network.[173]

In terms of data on the number of forensic examinations undertaken in each Local Health Network, SA Health was unable to supply this information. The Commission was advised that this was because each region currently has its own process for documenting health information, leading to an inconsistency in recording and capturing the number of forensic examinations relating to domestic, family and sexual violence.[174]

The only data that the Commission was able to access came from Yarrow Place. Between January 2023 and July 2024 (inclusive), Yarrow Place completed 33 forensic examinations, 32 'just in case' examinations and 8 health checks (medical care and safety planning) where the relevant regional Local Health Network was unable to provide the procedure or service. Two forensic examinations were commenced but not completed due to consumer consent changing.



The Commission also heard that Cedar Health Service (Cedar Health), which is part of the WCHN, provides free specialised health care to any person who is over the age of 16 years and has been subjected to high-risk domestic and family violence within the last 12 months. Services include medical care, health checks, health and safety assessments, health planning and referral, counselling, Aboriginal clinical healthcare and culturally sensitive group programs. Victim-survivors can call Cedar Health to speak to speak to a nurse or social worker Monday to Friday between 9am and 5pm or visit the drop-in clinic at Port Adelaide on Tuesdays from 9am to 12:30pm.

In its submission, the South Australian government told the Commission that Cedar Health 'has recently begun providing domestic family and sexual violence health responses to all South Australians', providing 'an example of a mainstream service striving to provide appropriate responses across genders'. The Commission understands, however, that this service is based in Metropolitan Adelaide and is not currently available across the state. This is acknowledged by the South Australian government, with its submission recommending:

> **[t]o support timely and effective trauma and specialist responses for victim-survivors across the state, increasing the reach of the consumer facing Cedar health team would be beneficial. For example, locating Cedar domestic, family and sexual violence healthcare providers in Emergency Departments across the state, including in regional areas, would ensure consistent and safe responses for victim-survivors from a healthcare approach (clinical and social work therapeutic response).**[175]

Medicare eligibility

Access to appropriate and trauma-informed health care is a necessity for all victim-survivors of violence. This can include emergency responses from paramedics and hospitals, medium- and long-term physical and mental health support, and recovery. Yet, the Commission has heard that ineligibility for Medicare can be a barrier to access.

Medicare is Australia's taxpayer-funded universal healthcare insurance scheme. Medicare ensures access to a wide range of health and hospital services, either at no or low cost.[176] To be eligible for Medicare, a person must be an Australian or New Zealand citizen, an Australian permanent resident (or have applied for permanent residency), a temporary resident covered by a Ministerial Order, or a citizen of an Australian external territory.[177] People in Australia with the means to do so may also pay for private health insurance.

While Medicare is a safety net for Australians, victim-survivors who are not citizens or permanent residents are often not eligible for free or subsidised health care. This may act as an additional barrier to accessing health care for some victim-survivors.

The Commission sought information from SA Health as to whether a person without access to Medicare would be charged for a health assessment and forensic medical examination following a sexual assault in South Australia. SA Health responded:

> **In line with the Gazette of the South Australian Government, people not eligible for Medicare, who do not have private health insurance, are charged a fee for public health services. However, the fee may be waived by the CEO of the LHN and SAAS. Patients seeking assistance due to financial hardship will be required to complete a SA Health Financial Assessment Form.**[178]

The Commission notes that a significant proportion of those affected by these criteria are from CALD backgrounds and include newly arrived immigrants, some on temporary protection visas who already experience a range of barriers including language and isolation.

This process requires remedy. It is not appropriate for victim-survivors of sexual assault to pay for these services, regardless of whether or not they can seek reimbursement or a waiver. Given health assessments and forensic medical examinations are vital in the circumstances and have health and justice outcome implications, such fees should be waived in all circumstances.

Strangulation

Strangulation is a particularly dangerous act. The term strangulation is often used as a catch-all for a variety of acts which cause a person's breathing to be restricted or to stop, and which can also restrict blood flow to the head and brain. These acts include strangulation, choking, suffocating and pressure on the neck or face. Strangulation can be used as a deliberate act of violence against victim-survivors; however, it is also used by some people in the context of consensual sexual activity. Whether used consensually or as an act of violence, strangulation can have very serious consequences.

The reasons are twofold. Firstly, strangulation can have extremely serious and even fatal health effects. Non-fatal strangulation can result in significant injuries, such as acquired brain injury, strokes, seizures or blood clots.

Acts of strangulation that are initially not fatal can still lead to death or serious injury hours, weeks or even months after the incident, sometimes with little to no warning.[179] Strangulation can also cause serious injury or death very quickly – one study found that loss of consciousness occurred within 4–10 seconds, possible seizure within 14 seconds, and incontinence within 15–30 seconds.[180]

Strangulation can be terrifying. Non-fatal strangulation patients have reported that they felt a sense of imminent death, or an inability to move or signal to protect themselves.[181] As a result, strangulation can lead to psychological injury. This includes damage to self-esteem, impaired decision-making and PTSD.[182] Signs of strangulation can be difficult for first responders to identify, as this violence does not always leave physical signs such as bruising. Studies involving non-fatal strangulation patients have revealed that there were no visible physical injuries in half of all cases.[183]

The second reason strangulation is a particularly dangerous act is that the use of non-fatal strangulation as an act of domestic violence is a significant evidence-based risk factor for future lethality. Research shows that strangulation in the domestic violence context increases the risk of future homicide by almost 7.5 times.[184] Strangulation may be used as a covert way of exerting control and intimidation in instances of domestic violence, sexual assault and child abuse.[185]

Research has indicated that consensual strangulation has become prevalent among younger Australians. In 2024, a survey of 4,702 Australians aged 18–35 revealed that 57% of participants had been strangled in a sexual context. This included 61% of women, 43% of men, and 79% of trans or gender-diverse respondents.[186] Half (51%) of participants reported ever strangling a partner, including 40% of women, 59% of men, and 74% of trans or gender-diverse respondents.[187] The study also revealed that pornography was the most common avenue for people first hearing about choking during sex (35%), and concluded that 'sexual strangulation has become a mainstream sexual behavior that is commonly seen in media such as pornography and movies and discussed among friends'.[188] The study found that strangulation during sex is largely viewed positively despite the safety risks, indicating the need for developing strong sexual health education around consent and the risk of strangulation during sex.[189]

The dangerous nature of both consensual and non-consensual strangulation has been recognised in South Australia, and is reflected in government responses and policies. Non-consensual strangulation has been specifically criminalised as the offence of 'choking, suffocation or strangulation in a domestic setting' under Section 20A of the *Criminal Law Consolidation Act 1935* (SA).[190]

The seriousness of strangulation is reflected in health and education policy. In the school setting, strangulation is sometimes discussed as part of the relationship and sexuality curriculum.[191] In health settings, WCHN has developed assessment guidelines for non-fatal strangulation in the context of alleged assault,[192] along with a fact sheet for service providers.[193] The Australian Government's Primary Health Network (PHN) has also developed pathways and resources to aid South Australian clinicians to better identify and respond to non-lethal strangulation.

Brain injury

There are also well-evidenced links between physical acts of domestic and family violence and brain injury. Following the Victorian Family Violence Royal Commission, Brain Injury Australia led a study that analysed the prevalence of brain injuries in domestic and family violence–related hospital presentations over a 10-year period in Victoria. The study found that, of victim-survivors hospitalised for domestic and family violence, around 40% had sustained a brain injury. It also found that 31% of hospital presentations for domestic and family violence involved children and young people under the age of 15, of whom 25% had sustained a brain injury.[194] The study also indicated that the rate of brain injury was disproportionately high among people using violence, with research revealing around 60% of male perpetrators of intimate partner violence had previously sustained a brain injury, which was double the rate found in matched community samples.[195]

Health response to children and young people

While not accurately defined as a help-seeking mechanism, forensic medical examinations and associated health responses are also undertaken in connection with disclosures regarding child abuse and neglect. This health response is provided by the CPS operating within SA Health.[196]

SA Health has 3 dedicated CPS. They are tertiary services that provide specialist trauma-informed assessments and therapeutic interventions for children and young people who have been harmed or where there are suspicions of harm. They are aimed at providing services for children when abuse or neglect has already happened.[197]

The 3 CPS are based in the Northern Adelaide Local Health Network (NALHN), the Southern Adelaide Local Health Network (SALHN)[198] and the Women's and Children's Health Network (WCHN). While the services have similar functions, each CPS is governed separately and operates independently under the Local Health Network where it is based.[199]

The core services provided by CPS include: consultancy and liaison services (including the provision of expert health advice to the DCP, SAPOL, the Department of Human Services and other SA Health staff); forensic medical services (such as interviews conducted by CPS psychosocial clinicians to elicit information for the purpose of criminal proceedings and forensic assessments to collect evidence for use in criminal proceedings); assessments such as parenting capacity assessments, and therapy and support for children and young people.[200]

While each of the CPS provides similar services, there are differences in the services available and how they operate.[201] Until recently, there was no approved statewide model of care for any of those services. In addition, each CPS has been resourced differently, and it appears that an analysis of need has never been undertaken.[202]

The Commission was advised that the WCHN CPS has recently reconfigured to establish a specialist Paediatric Forensic Medical Service (PFMS) to work alongside the WCHN CPS. The PFMS undertakes the forensic medical assessments and provides consultation and education to other professionals.[203] At SAHLN and NAHLN CPS, forensic medical assessments are provided by general and community paediatricians with additional training, skills and experience in the evaluation and management of children and young people with suspected abuse and neglect.[204] The Commission did not receive any input which suggested that the latter model delivers insufficient quality in service delivery.[205]

The Commission received input which suggested that CPS, particularly forensic medical services, are characterised as 'low volume high speciality' services.[206] This categorisation appears to be inconsistent with what is known about the prevalence of child abuse and neglect, with the 2023 ACMS indicating that 61% of young Australians reported experiencing one or more forms of abuse or neglect, and 1 in 4 experiencing 3 to 5 types of abuse or neglect.[207] Given these figures, a continued approach to the provision of these services as 'low volume' should be reviewed. While it is recognised that there will be a concentration of specialisation among a few health practitioners who are required for the most complex cases, this should not prevent the upskilling of more practitioners given the likely unmet need across the community.

Evidence received shows there is a lack of consistency across the different CPS regarding the age or circumstances of the children and young people who are eligible. There is also a lack of service delivery in regional and remote locations. Practitioners in areas outside of metropolitan Adelaide can, if they are concerned about the presentation of a child or young person, contact a CPS for advice but if a child or young person requires a forensic assessment, they must often travel to Adelaide. Similarly, while some Local Health Networks provide therapeutic support to children and young people, there is no guaranteed or consistent service offered.[208]

The Commission heard evidence that clinicians from the WCHN CPS travel to some regional areas to provide forensic psychosocial assessments, and clinicians from SALHN travel to Mount Gambier to provide some services. However, the frequency of those visits depends on capacity of the CPS clinicians and the location, including available facilities, and there can often be delay before the assessment occurs.[209]

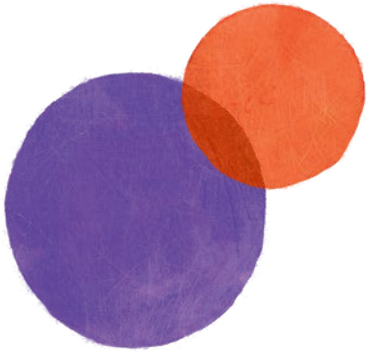
The APY Lands fall under the WCHN catchment, and WCHN has a model of care which defines the way that CPS (and other) services are delivered on the APY Lands. The Commission heard that this model of care has been in place since 2023 and is now being reviewed to understand the needs of the community and the service delivery by CPS. In response to an information request, SA Health advised the Commission that dedicated funding for CPS delivery to the APY Lands ceased in 2019. The response indicated that all 37 contacts relating to CPS delivery on the APY Lands in the 2024–25 financial year were conducted via telehealth – the inference being that there has been no in-person service delivery by the CPS on the APY Lands at all between July 2024 and May 2025.[210]

The current approach does not provide consistent or equal CPS for children and young people across South Australia. This appears to be a feature of the provision of South Australian government health services – as noted above, the same issue arises in relation to forensic medical examinations.

While resourcing is undoubtably a relevant factor in determining statewide service delivery, the Commission also heard that some inconsistencies are due to philosophical differences between staff in relation to the provision of medical services and who is qualified to deliver them. When ZED Management Consulting was engaged in 2020 to develop a single statewide model of care for CPS in South Australia, it determined that it was not possible to do so at that time given the different governance across the services, the service differences and the different priorities in each CPS.[211]

These differences must be overcome so that children and young people across South Australia have equal access to tertiary CPS services.

The Commission also heard there is a service gap for young people aged between 16 and 18 who fall between the eligibility criteria of CPS, CAMHS and Yarrow Place.



Improvements to health responses

Future state

Health response to adults

The South Australian government submission acknowledges the need to change the way in which the current system is operating, stating:

> **It is important to be able to access health care close to home. This is inclusive of domestic violence injury documentation/ assessment as well as forensic and health care responses post sexual assault. Best practice would include partnering with Aboriginal Community Controlled Organisations (ACCOs) to train workers to provide this response in some communities. It is recognised that currently when people are having to travel to Adelaide, sexual assault is not included as a transport reason in the Patient Assistance Transport Scheme (PATS) provided by SA Health. As a result, there is a significant impact on police when required to bring a victim-survivor to Adelaide for a forensic examination because they are unable to access that service in their local area. There is further impost on the victim-survivor with accommodation and other related costs being paid out of pocket.**[212]

The lack of access in regional and remote areas to forensic medical examinations for people who have experienced sexual assault is extremely concerning, as is the lack of availability of 'just in case' forensic examinations. Not only does this prolong what is an extremely traumatic experience, it can hinder access to the criminal justice system as well as to counselling and other therapeutic supports.

The need to make forensic medical examinations more accessible was also considered in ALRC Report 143. Although the ALRC was unable to consider the issue in any detail due to time constraints, it noted the issues raised by submissions, including the need for gender-appropriate staff and the need for access to examinations without being required to report to police, and suggested that these issues would be important to governments to consider in improving justice responses to sexual violence.[213]

It is of grave concern that some regional hospitals are not providing even a basic health response to people who have experienced sexual violence. Data provided by Yarrow Place showed that Yarrow Place performed 8 health checks over an 18-month period where the relevant Local Health Network was unable to provide even the basic health service, which includes screening for risk, emergency contraception and checking for signs of strangulation.

The perceived barriers to the provision of these services in regional areas identified during the evidence of Ms Debbie Martin, Executive Director, Rural Support Service, SA Health, are noted, but it is clear from the example set by the Flinders and Upper North Local Health Network that it is entirely possible, and practical, to have staff trained in the conduct of forensic examinations and health responses to sexual violence if there is strong leadership and a culture that supports staff to undergo the relevant training. The Commission is of the view that the provision of these services is a health issue and should be core business for all Local Health Networks.

The characterisation of these types of services as 'highly specialised' appears to be creating a cultural barrier within some Local Health Networks to the provision of what are basic and necessary health responses to victim-survivors of sexual violence.

The Commission also notes the evidence provided by the Rural Support Service during Day 2 of public hearings on a proposed new model of care for regional responses to sexual assault. This evidence included that the model of care is uncosted and potentially reliant on the ability to repurpose funding from the Commonwealth, and further reliant on the ability to recruit and train practitioners to staff a sexual assault response team within each Local Health Network. The Commission does not consider the implementation of this new model of care to be a feasible or timely solution to the current service crisis. In response to an enquiry about progress on the model of care, SA Health advised the Commission that the project was a 'local project' that had yet to go through any formal consultation with SA Health.[214]

The Commission does, however, agree with the evidence that an uplift in governance is needed.[215] The lack of consistent procedures across Local Health Networks around the conduct of forensic medical examinations demonstrates a clear gap that would benefit from the development of a model of care which embeds forensic health responses to sexual violence within the core business of Local Health Networks and clearly sets out education, training and staffing requirements for these areas.

Local Health Networks should also be equipped to provide 'just in case' forensic medical examinations. This is consistent with the findings of the Victorian Law Reform Commission in its 2021 report Improving the Justice System Response to Sexual Offences.[216] That report found that there is an urgent need to invest in more access to forensic medical examinations in Victoria, especially in regional and remote areas and for children and young people, and that there should be more access to 'just in case' examinations which do not require reporting to police.[217]

Consideration should be given to the use of self-collection kits in the South Australian model of care. In other jurisdictions, such as Western Australia and New South Wales, victims of sexual assault have the option of using early evidence kits to self-collect evidence where a doctor or appropriately trained nurse or midwife is not available to conduct a full forensic medical examination. The NSW Health Guideline on Early Evidence Collection notes that 'providing a timely medical and forensic response to sexual assault may be particularly challenging in regional and remote areas. Using an early evidence kit, patients can self-collect forensic and toxicology samples while waiting for the examination or before transfer between facilities. This reduces the risk of losing time-sensitive evidence, and allows the patient to eat, drink and use the bathroom with less risk of washing away evidence.'[218] The Commission understands that such kits are currently not available in South Australia, although consideration is being given to their use.[219]

Finally, the Commission heard from a registered midwife who noted that there are an increasing number of midwives who are midwife only (i.e. not a registered nurse), with many working in remote areas. It was suggested that regulation 8(1)(a) of the *Criminal Law (Forensic Procedures) Regulations 2022* (SA) be amended to allow registered midwives to conduct forensic medical examinations as currently only registered nurses can undertake forensic examinations (along with medical practitioners, pursuant to section 24[1] of the *Criminal Law (Forensic Procedures) Act 2007*).[220] Although based on input from one individual, the Commission considers that the proposed amendment is entirely sensible and should be explored by the Attorney-General in consultation with SA Health.

Medicare eligibility

Healthcare responses for people who have experienced sexual violence are an essential service. Not only do they provide emergency contraception, check for sexually transmitted diseases, screen for suicide risk and determine whether strangulation was involved, they provide a vital evidence collection function for those who may want a justice response. Cost should not present a barrier for people who are not eligible for Medicare to access this essential health care response. To that end, it is the Commission's view that SA Health must waive any fees associated with initial health responses to sexual violence involving victim-survivors without access to Medicare.

Strangulation

The Commission acknowledges that WCHN has developed assessment guidelines for non-fatal strangulation in the context of alleged assault, along with a resource for service providers. Given the health risk of strangulation, be it consensual or non-consensual, and the fact that there are often no physical signs, it is critical that healthcare providers are equipped to confidently screen for and respond to strangulation.



Health response to children and young people

Since the ZED Management Consulting report was delivered, the role of the Chief Child Protection Officer was established, along with a policy unit tasked with developing a CPS model of care. That model was finalised in December 2024 (CPS Model of Care).[221] As at the date of preparing this report, the CPS Model of Care was still not published as a public document.

The CPS Model of Care was developed as a statewide model. It acknowledges that there are 3 separate CPS but aims to align their service functions under a single model. The CPS Model of Care does not require that all services are the same, only that their core functions are the same, so that any child or young person across the state has access to the same services. SA Health explains that the CPS Model of Care seeks to ensure that the needs of children in regional South Australia are considered and that it provides safe and culturally appropriate responses for Aboriginal children and young people.[222] KWY was engaged to work with the CPS to achieve this purpose.[223]

While finalisation of the CPS Model of Care does seem to be an achievement given the observations made by ZED Management Consulting, a real achievement will be actual and timely implementation. According to the evidence from SA Health on Day 5 of public hearings, the 3 Local Health Networks within which the 3 CPS operated were working towards developing a memorandum of agreement or similar about how they would work together to achieve consistency.[224] The CPS Model of Care does not contain detail about how and when it will be implemented or how it will be resourced – it is aspirational in its terms and concerningly lacking in any real timeframes or accountability mechanisms.[225]

It is essential that children and young people across South Australia receive equal access to tertiary health services, including forensic medical assessments, forensic psychosocial assessments and therapeutic care.

As the issues with the statewide reach of the CPS appear to be longstanding, the Commission recommends that the CPS Model of Care be published alongside an implementation plan with identified implementation timeframes. In addition to this, the Commission considers that the Implementation and Impact Monitor (discussed in Chapter 2) should be specifically tasked with monitoring the implementation of the CPS Model of Care and have the capacity to publicly report on any barriers to implementation.

The Model of Care aims to increase 'the reach and service capability for regional South Australia' and indicates that 'Senior CPS and regional LHN staff will provide services in Community on remote lands in partnership with agency partners, Community and Aboriginal Community Controlled Health Organisations (ACCHO) and Aboriginal Community Controlled Organisations'.[226] There is also a commitment to providing culturally safe services for Aboriginal children. These stated aims are important but do not specifically address the service gaps existing in remote South Australia and, in particular, on the APY Lands. It is essential that children and young people receive the CPS health response to experiences of domestic, family and sexual violence in their communities.[227]

Recommendation 53

SA Health develop, resource and implement a statewide model of care relating to the availability and conduct of forensic medical examinations across South Australia that includes minimum standards around:

a. trauma-informed training and education for staff
b. the level of supervision and support provided to staff
c. relevant oversight and governance
d. the provision of basic health checks, including checking for signs of strangulation
e. the provision of forensic medical examinations
f. the provision of 'just in case' examinations and the storage of collected evidence
g. the use of self-collection kits.

Recommendation 54

SA Health ensure timely access to forensic medical examinations, 'just in case' examinations and health checks for all victims of sexual violence in regional areas through investment in:

a. training and support for staff
b. additional outreach and telephone support from Yarrow Place
c. appropriate storage facilities for evidence collected from 'just in case' examinations.

Recommendation 55

The Attorney-General, in consultation with the Minister for Health and Wellbeing, consider progressing amendments to regulation 8(1)(a) of the *Criminal Law (Forensic Procedures) Regulations 2022* (SA) to broaden the scope of who may conduct forensic medical examinations to include registered midwives.

Recommendation 56

SA Health cease charging victim-survivors who do not have access to Medicare for health responses to sexual violence, including health assessments, forensic medical examinations and 'just in case' examinations.

Recommendation 57

SA Health review its practices, policies and procedures to ensure that paramedics and other relevant healthcare providers are consistently and confidently screening for and responding to instances of non-fatal strangulation among all young people and adults.

Recommendation 58

SA Health publish the CPS Model of Care together with timeframes for implementation.

In implementing the Model of Care, SA Health must ensure that a CPS health response will be provided to children and young people in all regional and remote areas throughout South Australia.

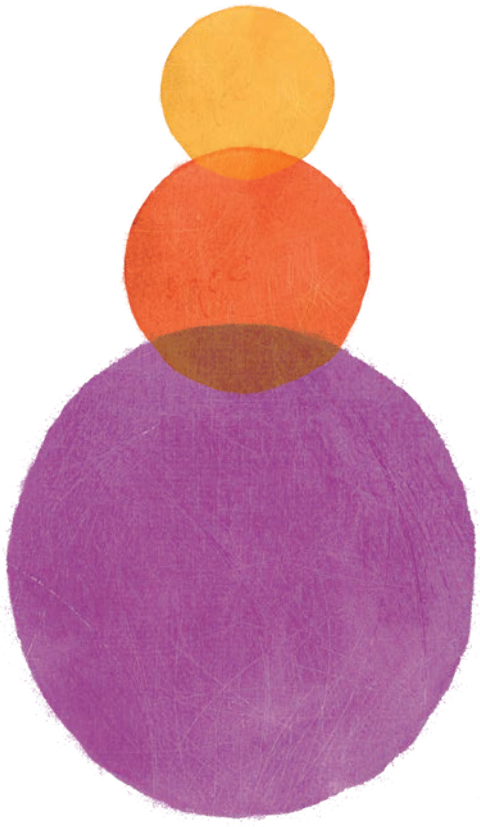
The Domestic Violence Disclosure Scheme

An innovative model

South Australia is the only Australian jurisdiction operating a DVDS. It has been delivered in partnership between police and specialist support services. It is an example of South Australian innovation and leadership, with a range of information highlighting its importance and success.

The concept of domestic violence disclosure schemes originated in England and Wales in 2014. Often referred to as 'Clare's Law', disclosure schemes were first introduced following a domestic violence murder in 2009, committed by a man with a history of violence who met the victim on an internet dating site.[228] Variations of domestic violence disclosure schemes have since been adopted in Scotland, Ireland, Canada, New Zealand and Australia. In the Australian context, New South Wales piloted a limited disclosure scheme in 2016, but it was formally abandoned in 2019. In a 2024 study, Professor Kate Fitz-Gibbon noted there were variations in the models being adopted, finding that in England and Wales the disclosure schemes are police-led.[229]

The information provided during a disclosure varies by jurisdiction, with some schemes only providing the person at risk with details about the subject's convictions, and others providing broader information about convictions, arrests and allegations, not only regarding domestic, family and sexual violence but also including other reports relevant to the person at risk's safety.[230]



Current state

In South Australia, the DVDS was introduced in 2018, and is delivered in partnership between SAPOL's Family and Domestic Violence Section (FDVS) and WSSSA. The DVDS is assisted by other members of the DFVSA in regional areas, being Centacare's Limestone Coast DV Service, Yarredi Services, and Uniting Country SA's Domestic and Aboriginal Family Violence Service. The DVDS operates as a prevention and early intervention initiative and is not a suitable pathway for somebody who needs immediate or urgent help.

To be eligible to make an application to the DVDS, the person at risk does not need to have experienced violence but must hold genuine safety concerns about the subject of the application, based on their behaviour or other information. In the case of applications regarding former partners, the person at risk must have ongoing contact (e.g. co-parenting) to be eligible for a disclosure. The DVDS is available to people of any gender and sexual identity.[231]

As noted under the 'Current pathways for help seeking' section in this chapter, if an application is screened in and the person at risk agrees to a disclosure, an appointment will be made for a meeting with a police officer and specialist support worker. During that meeting, police will inform the person at risk about the subject's relevant police history, and the support worker will then assist with referrals and information.

In instances where SAPOL does not have any relevant police history to disclose, the meeting may still proceed, to ensure that the person at risk is still able to speak with specialists, receive support and discuss their concerns.[232] During Day 7 of public hearings, Chief Inspector Kellie Watkins, Officer in Charge of SAPOL's FDVS, and Ms Mergho Ray, Manager of Integrated Programs at WSSSA, provided evidence about the scheme and its effectiveness. Chief Inspector Watkins provided some detail of what information may be included in a disclosure:

> **"So if the eligibility criteria is met, we'd be looking to disclose information around convictions for relevant offences or reports for relevant offences. So that could include a physical or sexual assault, breaches of intervention orders, property damages, history of the person's intervention order history, so whatever current or previous intervention orders that may have expired. Information that if the applicant has children, any offending of concern that relates to children. We can also disclose general information around mental health concerns or drug and alcohol abuse if generally they are linked to any of those types of offences or behaviour that would put the person at risk. And it's important to mention that the material provided is de-identified, and it's a summarised version of the facts.... It's also a really strong supportive scheme for children in relation to these relationships where we'll also be looking at whether the subject of the request has any history around any child abuse matters or child sexual abuse in particular and if that's the case, then that would be relevant for disclosure.**[233]

Ms Ray provided detail about the role of the specialist support worker during the disclosure:

> **People are at times quite shocked with hearing the history of violence that they might not yet have experienced themselves but understand that there certainly is a potential for that to occur. So we'll unpack that... really the decision as to what they do with that information is completely up to them, you know, we're not aiming at particular outcomes there, you know, that people have their own agency to make their own choices about their relationships, but we certainly will provide safety around that. So if someone is intending to go back into that relationship, we'll talk about some of the warning signs that they can be alert to, have some safety around them if they are wishing to separate from that relationship, we'll absolutely put safety around how you separate safely and what is really good about the scheme is that it makes visible the patterns of behaviour... If there is really high risk, we will absolutely do the common risk assessment tool and make referrals into the family safety framework. We'll put Safe At Home around there for extra home security and any personal protection apps that can keep them safe during that process and their kids as well for that matter.**[234]

Chief Inspector Watkins and Ms Ray also spoke about some of the benefits and impacts of South Australia's DVDS. Chief Inspector Watkins spoke about survey results received by WSSSA, along with a recent Independent Review, both of which indicated that the DVDS has been performing remarkably successfully:

> **98 per cent of those individuals that completed the survey found that the disclosure scheme was helpful in making decisions about personal safety, and so when you consider that against the objectives of the scheme, I say that that is definitely a measure of success. Along with that, 99 per cent of those people were satisfied with police and also the support services, and then also the growth that the scheme has had since 2018 has been over 200 per cent. Again, another indicator that the public see value in what we deliver in this scheme.**[235]

Ms Ray added:

> **60 per cent of the people accessing this scheme have never ever been in connection with a specialised domestic and family violence service, and so that means that we are reaching quite different population groups across South Australia than what generally would access our services, and at the time of application 85 per cent are not connected as such. The other thing that is I think really successful of the scheme is that regardless of eligibility, everyone receives a service from the domestic and family violence specialists... So whether or not you get your disclosure or not, that means that there's a lot of opportunity for provision of information, education around early warning signs, high-risk indicators, where you could access resources, do safety with people, provide safety management strategies around that, assess risk, because risk can sit in the ineligible applications as well.**[236]

Ms Ray noted that the DVDS was successful in building and restoring victim-survivors' trust in police, particularly as it reached people earlier and those not engaged with police or specialist services.

> **The other thing and I hate to say it, but there is a general at times mistrust of police either because of having tried to report or finding that responses haven't been as to what they were expecting, and what this scheme absolutely provides, is because it is held you know many a time certainly with disclosures in a safe environment, there is a reconnection and a renewed confidence in police because the officers who are providing the disclosures are au fait with domestic and family violence, so they understand and so there is that renewed confidence which is absolutely important for future reporting that people do feel they can report. So that is a really big success. It is a safety-first approach.**[237]

Ms Ray spoke about how the model is so unique and effective.

> **[T]here is a really strong collaboration between SAPOL and the domestic violence services. It is robust. It is very respectful. We absolutely respect each other's roles and responsibilities within the scheme and that makes for really good partnership in that… it's very victim-centred, and so the approach is about a trauma, domestic and family violence informed approach. It's in collaboration, so a lot of the disclosure schemes across the globe are just purely run by police, and it would miss the more trauma informed approach within that.**[238]

An Independent Review of the DVDS conducted by Dr Katerina Hadjimatheou of the University of Essex, UK, and Dr Kate Seymour of Flinders University, was published in December 2024. The review included an analysis of feedback from 269 clients who had used the DVDS, in which it found:

> **the overwhelming majority of clients found the DVDS very helpful in their decision-making around their own and their children's safety and around their safety with respect to a current or former partner… Clients reported very high satisfaction rates on all aspects of the service.**[239]

The Independent Review compared South Australia's DVDS with models operating in the UK, Canada, New Zealand and Malta. The authors found that 'South Australia's DVDS is unique globally in four distinct ways', including its 'victim-centred, trauma-informed approach', its provision of 'specialist support for every case', its 'coordinated partnership approach' and that 'systematic monitoring of the process and impact of the DVDS [enables] ongoing review and improvement to the service'.[240]

The review found that the uptake of South Australia's DVDS was equal to that of England and Wales as the highest in any jurisdiction, which was 'especially noteworthy given that the SA DVDS has been in operation for 4 years less'.[241] The review found that South Australia's DVDS compared favourably with the models used in England and Wales:

> **Client satisfaction with South Australia's DVDS is far higher than in England and Wales... An anonymous survey for people who have applied for or received a disclosure in England and Wales... found that 64% were 'satisfied' (32%) or 'very satisfied' (32%) with the service they received from police, compared to 99% in South Australia. Additionally, 20% of respondents in England and Wales reported being 'very unsatisfied' with the service they received from police officers, compared to zero in South Australia. It is also notable that satisfaction with both the DFVS professionals and SAPOL in the SA DVDS is far higher than that reported for domestic abuse specialist services in general in England and Wales. In 2022 national research reported that 85% of clients of Independent Domestic Violence Advocates (IDVA) in England and Wales were satisfied with the service they received. This contrasts with over 99% satisfaction amongst South Australian DVDS clients.**[242]

The review concluded the DVDS was a good practice model internationally:

> **[T]he South Australian DVDS service is supporting people at risk to a higher standard than generalist IDVA services elsewhere. There are therefore strong grounds on which to explore the South Australian DVDS as a model of good practice for other jurisdictions reviewing existing schemes or indeed introducing new ones.**[243]



Challenges and limitations

It is clear that South Australia's DVDS is an excellent model which lacks sufficient investment. The success of the DVDS has resulted in a significant increase in demand, which is putting pressure on the small workforce responsible for the scheme. The increase in demand for the DVDS is well set out in the Independent Review, which found that:

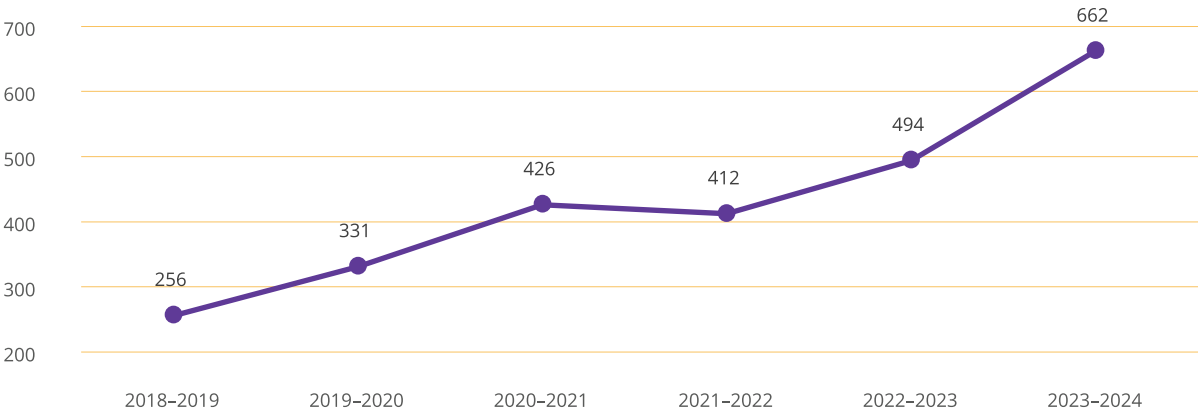
> **The DVDS is promoted through word of mouth and the DFVS's contacts, as well as paid-for Facebook posts twice a year. Despite this modest public awareness activity, demand for disclosures has risen significantly year-on-year and over 200% since its launch.**[244]

Figure 4.4 below highlights the increase in the use of the DVDS since it commenced in 2018.

Despite the significant increase in demand for the DVDS, there has not been a corresponding increase in government resources or funding to the non-government organisation partners. When asked if SAPOL received any government resourcing to administer and deliver the scheme, Chief Inspector Watkins replied:

> **No. Since 2018, South Australia Police has not received any funding, and the [Police] Commissioner has had to find resources within the existing budget, and subsequent to that no funding has been provided, and just of note, with the steady growth in the scheme and the current environment surrounding police demand, it's seen the time frames for the processing of a disclosure move from, on average, 14 days to now 21. And without the investment of any other resources and the growth trajectory of this of the scheme, I can only see that those time frames will continue to extend out.**[245]

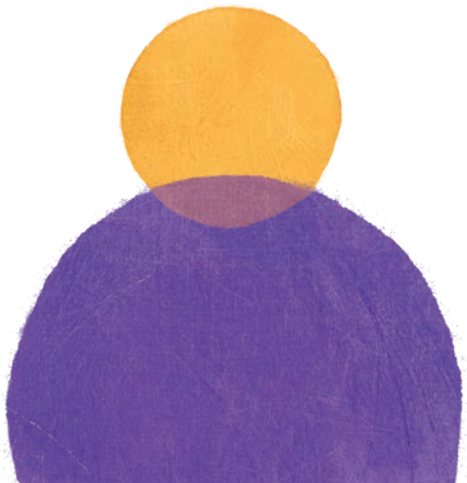
Figure 4.4: Number of users of the South Australian Domestic Violence Disclosure Scheme, 2018–2024



Ms Ray advised that the non-government partners of the DVDS receive some funding for the scheme from South Australia's Office for Women, amounting to 3.2 full-time equivalents statewide.[246] The Commission heard that both SAPOL and WSSSA were occasionally reluctant to advertise the scheme in South Australia because they were working at capacity:

> **[W]e don't have a huge amount of funding to advertise... the reality is we're running pretty much at capacity at the moment, so if we do do a lot of advertising then we are going to be pedalling flat out.**[247]

> **I think the concern in relation to advertising is that even in the absence of advertising, we've had a 200 per cent increase in the scheme and as I had already mentioned, the processing time is starting to extend out and part of the value of the scheme is actually being able to respond to people at that time, so when we receive an application, it's actually really important to be able to address that quickly. There is a risk that in this process [appearing at a public hearing], for example, that we may have an increase in applications that would see that time extend out, as I mentioned.**[248]



The Independent Review found the lack of resources affected the operation of the scheme and that the demand was not matched by a resourcing increase which has then resulted in pressure on the operation of the scheme.

> **Applications to the DVDS have risen more than 200% in 6 years... Yet SAPOL have received no budget to manage the scheme and the annual budget for the [domestic and family violence services] has remained flat. This is contributing to a rise in delays to the processing of police applications. It is also creating pressure on DFV specialists to process disclosures faster, which almost all practitioners interviewed for this study flagged as a challenge to their ability to maintain the quality of service they provide. This poses a potential risk to a model which is delivering improved safety and support successfully and which is clearly of great value to people at risk of domestic and family violence. If pressure on resources leads disclosures to be made over the phone rather than in person, this would risk decentring victim preferences and undermining the quality of support provided in the disclosure meeting.**[249]

The Independent Review also found that the ability to provide valued face-to-face disclosures was being heavily impacted, particularly in regional locations:

> **In-depth interviews with DFVS professionals revealed a strong consensus that in-person disclosure meetings were more effective than teleconferencing meetings in terms of safety and empowerment of [persons at risk]... However, in-person meetings are not always possible, even when [persons at risk] request them, due to resource constraints and geographical distances. There is no dedicated budget for travel to disclosure meetings.**[250]

Future state

The DV counsellor [who] connected to the SAPOL disclosure scheme was superior in all aspects …I cannot speak about her skills more highly. There should be a whole multidisciplinary team supporting this role with multiple staff to prevent burnout.[251]

It is clear that WSSSA and SAPOL, along with their regional non-government partners at Centacare, Yarredi Services and Uniting Country SA, should be commended for their development and delivery of a DVDS that has been recognised as 'good practice globally'.[252] South Australia's DVDS is a success as a result of the hard work and close collaboration of a few individual specialist workers and police officers. It is crucial to ensure that South Australia's development of a world-leading disclosure scheme is not jeopardised as a result of ongoing lack of government investment.

The public hearing sessions and the Independent Review reveal that investment would improve the reach, efficiency and effectiveness of the DVDS.

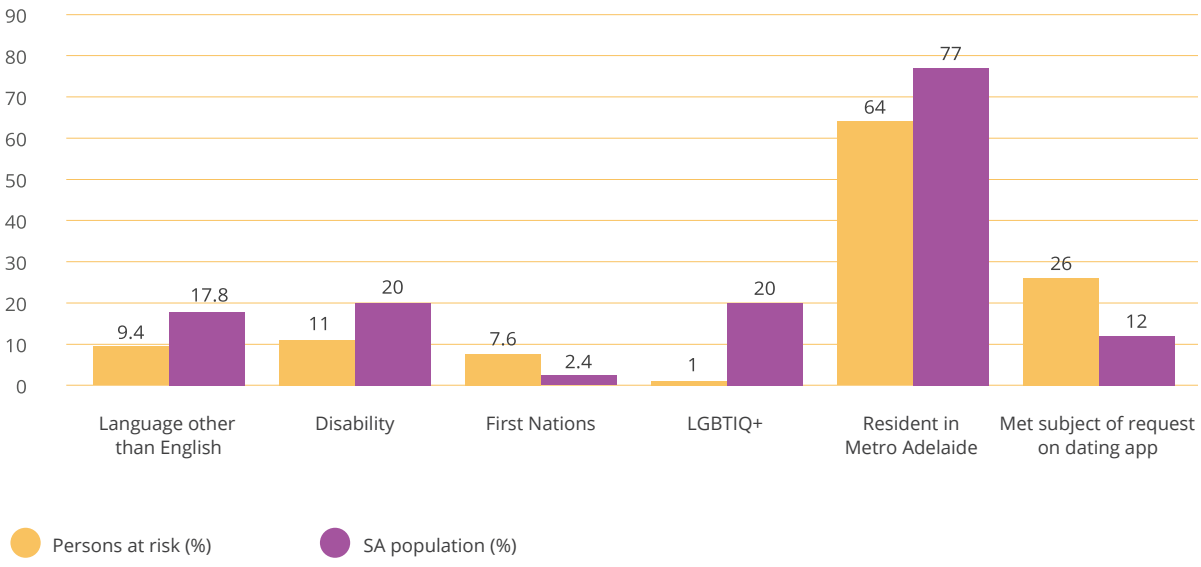
Chief Inspector Watkins indicated that there was an opportunity to improve the efficiency of the scheme through the introduction of a technological solution for information sharing and record management:

> **Opportunities for efficiencies with the scheme would be one avenue. We currently run a very manual information sharing system because the scheme's never been funded for a platform or a portal to share the information. Data control and security, another significant issue, a platform would assist in taking some of the manual aspects of that out and creating efficiency and capacity for the individuals currently working in the scheme, but then also greater resourcing that would be fantastic also… There is scanning, emailing, manual written assessment of these documents. So when we overlay that manual process to a modern technology based environment, it is very manual in the way that we are undertaking the information sharing.**[253]

Chief Inspector Watkins also spoke about the process of police preparing the disclosure script as 'an involved and time-consuming process at times', indicating that there may be efficiencies to be found with a technological solution focused on the aggregation of relevant police information.[254] The Commission notes that scoping for a technological solution that will allow SAPOL to automate or otherwise improve the process of aggregating relevant police information would be of significant benefit to other multi-agency responses to domestic, family and sexual violence, such as the FSF, the Family Law Information Sharing Program, and the Integrated Response Model explored in Chapter 2.

There are opportunities to expand the reach and the scope of the DVDS in order to provide prevention and early intervention opportunities to more South Australians. The Independent Review included an analysis of who is using the DVDS, compared with the broader demographics of the South Australian population. The review found that 96% of applicants are female, just over 3% are male, and less than 0.5% are transgender or non-binary.[255] The review also found that Aboriginal people, and people who met the subject on a dating application were over-represented among clients, and that other population groups such as CALD, LGBTQIA+ and those with disability are under-represented.[256]

Figure 4.5: Demographics of South Australian Domestic Violence Disclosure Scheme persons at risk

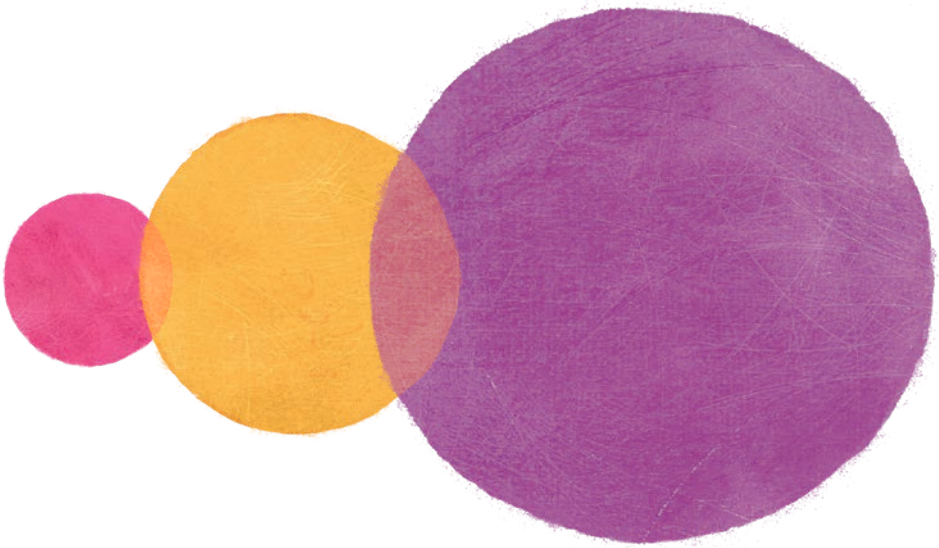


The under-representation of LGBTQIA+ people, CALD people and people with disability among DVDS users shows that more can and should be done to improve the accessibility of the scheme. The use of the scheme by Aboriginal peoples indicates a need to consider the provision of Aboriginal-led supports under the DVDS.

The Independent Review found that there are additional challenges in delivering disclosures in regional and remote South Australia, writing that:

> **Regional and remote service providers face different challenges. There are fewer experienced DFV Practitioners than in metropolitan areas. This is due to historic underfunding of core DFV services in regional South Australia, creating a gap in 'feeder' programs for staff development and expansion of knowledge. Regional service providers demand expertise and knowledge in specialists working on the DVDS. They achieve this by self-funding the significant resources to upskill and train their specialists as well as providing ongoing professional development.**[257]

Given the preference for face-to-face disclosures over online or phone disclosures, both SAPOL and WSSSA rely on outreach from local family violence investigators and specialist support workers to deliver disclosures in regional South Australia.[258] This means that in regional areas, the workers responsible for delivering disclosures often do not operate with DVDS as part of their core business. This highlights the need for an investment into shared training resources for practitioners delivering disclosures to ensure consistency.



Recommendation 59

The South Australian government provide an increase in ongoing funding to the Domestic Violence Disclosure Scheme, with a view to further enhancing the scheme's statewide accessibility and reach through:

a. the introduction of additional service delivery partners, aimed at improving accessibility and inclusivity for all applicants, including:
    i. young people
    ii. LGBTQIA+ people
    iii. Aboriginal people
    iv. CALD people
    v. people with disability
    vi. male victim-survivors
b. ongoing additional loading to regional and remote service delivery partners to facilitate travel for face-to-face meetings where practicable
c. improvements to the Domestic Violence Disclosure Scheme's online application portal, with a view to:
    i. improving accessibility for people who speak other languages
    ii. improving accessibility for people with disability
    iii. moving the application portal from South Australia Police's website to the government's central domestic, family and sexual violence website (see Recommendation 32).

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Figures endnotes

Figure 4.1: Proportion of victim-survivors contacting 7 or more supports, by demographic subgroup. Share With Us.

Figure 4.2: Domestic abuse–related events recorded by the South Australia Computer Aided Dispatch system, 2023–2024. Information request: SAPOL, May 2025.

Figure 4.3: Private intervention order applications over the last 5 years, South Australia. Courts Administration Authority. *Intervention Order Statistics*. https://www.courts.sa.gov.au/publications/statistics

Figure 4.4: Number of users of the South Australian Domestic Violence Disclosure Scheme, 2018–2024. Hadjimatheou, K,. & Seymour, K. (2024). *The South Australian Domestic Violence Disclosure Scheme 2018-2024: An Independent Review.* Other. University of Essex/Flinders University. https://repository.essex.ac.uk/39915

Figure 4.5: Demographics of South Australian Domestic Violence Disclosure Scheme persons at risk. Data drawn from: Hadjimatheou, K,. & Seymour, K. (2024). *The South Australian Domestic Violence Disclosure Scheme 2018-2024: An Independent Review,* p 11. https://repository.essex.ac.uk/39915/1/Independent%20Review%20of%20the%20South%20Australian%20DVDS%202018-2024.pdf

Chapter 5

The use of violence

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At a glance

People using domestic violence

by gender identity – national



75% male

25% female[a]

Sexual violence



96%

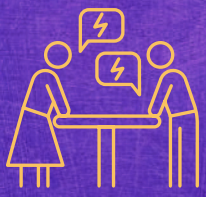
of female victim-survivors reported a male offender



49%

of male victim-survivors reported a female offender[b]

Intimate partner violence



1 in 3 men

self-reported having used a form of intimate partner violence

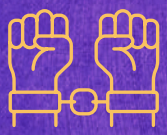
1 in 4 men

self-reported both using and experiencing intimate partner violence

1 in 10 men

self-reported only using intimate partner violence[c]

Pathways to homicide for male intimate partner homicide offenders



40% persistent and disorderly

33% fixated threat

11% acute stress[d]

Intimate partner homicide



3 in 4

intimate partner homicide offenders had at least one emotional, mental or physical health condition[e]

Adolescent family violence



9 out of 10

young people who had used violence in the home also experienced child abuse[f]

Introduction

A major and recurring theme across many inputs to the Commission has been the need for a much sharper focus on the people using violence and causing harm in South Australia. We cannot end domestic, family and sexual violence without understanding who is using it, why they use it and then intervening effectively to disrupt and prevent this violence from occurring and reoccurring.

The Commission has heard broad support for a greater emphasis on accountability, both for people using violence and for the systems responsible for people who use violence:

> **'The burden of evidence lies with the victim' is a line I have heard time and time again. And I believe it. Accountability for abuse certainly doesn't lie with the perpetrator; and it is never the responsibility of the law.**[1]

> **Nothing will change with domestic violence statistics until we can engage men and encourage them to change. I am not sure what the answers are but women and children cannot carry the burden.**[2]

> **I believe the systems that are supposed to protect us and hold perpetrators accountable have actually enabled my abuser to continue his behaviour for 8 years.**[3]

Violence against women is not just a personal issue – it is national crisis. The majority of people who choose to use violence are men. Real change means holding men accountable and actively working to shift male behaviors to prevent violence before it happens.

> **Violence against women is described as an epidemic, a national emergency. Research and statistics show that the vast majority of perpetrators of this violence are men. Men must be held accountable and action taken to change men's behaviour if there is to be any chance of stopping this violence.**[4]

While accountability matters, so does support. There must be accessible and inclusive support pathways.

> **We know that the majority of people who use violence are men, spanning all cultures, classes, and communities. This is not a marginal issue – it's a systemic one. And if we are to achieve real and lasting change, we must shift our focus to include men not just as subjects of punitive intervention, but as active participants in the solution. Men must be supported to recognise their behaviours, to take responsibility, and crucially, to be given access to appropriate pathways to change.**[5]

> **In relation to a perpetrator, holding them accountable for their use of violence but also making genuine effort to engage them in a way to address the underlying issues leading to that use of violence (whether that relates to cultural issues, drug or alcohol abuse issues, mental health issues, educational issues, general disadvantage, or acute situational stress).**[6]

No to Violence, drawing on their expertise with men using violence, advocates that the South Australian government must be responsible for developing a web of accountability:

> **Ensuring people using violence are held accountable for the harm that they have caused requires systems and services work well independently and with each other. Jurisdictions are embedding a shared responsibility for motivating behaviour change and accountability within family violence policy architecture – referred to as the web of accountability. These strategic plans make it clear that holding people using violence accountable requires that mainstream services, specialist family violence services and all parts of government systems recognise their role in responding to people using violence. Government is the steward of this system. Responsibility for ensuring systems function well rests with government.**[7]

People who use violence must also be visible. Chapter 1 speaks at length about prevalence data, and Chapter 3 about the need to make the use of domestic, family and sexual violence visible.

> **Domestic and sexual violence is framed often in ways that make the perpetrator disappear, as if the victim or survivor were attacked by an unseen force. This framing is evident in media accounts, community views and even in the violence prevention field itself.**[8]

It is entirely understandable that victim-survivors have been centred in domestic, family and sexual violence discourse for many years. It has been a hard-won battle to recognise this violence as a broad social problem, and as the responsibility of governments, rather than a private issue which occurs behind closed doors. It is also understandable that a sector which has for so long made do with scant resources and insecure funding in the face of crushing demand would be reluctant for attention to be diverted to the people responsible for so much harm. And yet, if we truly want to end domestic, family and sexual violence, there must be a sharp and sustained focus on those responsible for it.

> **Domestic, family, and sexual violence are, fundamentally problems of perpetration. Every act of violence involves a perpetrator and a victim, and it is time to increase our attention on perpetrators and perpetration. Perpetration, ultimately, is the problem we must solve if we are to end domestic, family, and sexual violence.**[9]

There is an increasing recognition of the need to focus on people who use violence. The Commission has heard many voices asking variations of the same question – 'my life had to change, why didn't theirs?'

> **Only on one occasion was he charged. He was found guilty … and received a 6-month good behaviour bond for one order breach. I cannot help but grieve over the fact that the perpetrator of my abuse finally got a criminal conviction for one breach of an intervention order, but never had any investigation of, or charges laid in relation to threatening to kill me, threatening to kill (and actually killing my pets), and for a number of physical assaults … 'The burden of evidence lies with the victim' is a line I have heard time and time again. And I believe it. Accountability for abuse certainly doesn't lie with the perpetrator; and it is never the responsibility of the law.**[10]

This sentiment is also strongly reflected in the statement from victim-survivors included in the National Plan:

> **Abuse and violence is a problem for victims, but it is not the victims' problem. Genuine change begins with a willingness to listen. We must stop protecting perpetrators with our silence, and through inaction. We must be willing to sit in discomfort. It is time to be brave.**[11]

The justice system remains a central pillar to holding people who have used violence to account, deterring their use of violence through sanctions, and setting clear expectations for what constitutes acceptable behaviour.

This chapter, like much of the report, shines a critical light on the experiences of children and young people. Their voices are essential, not only because they are often victims of domestic and family violence, but because some who go on to use violence have also experienced abuse, neglect or trauma in their own childhoods. Understanding these overlapping experiences is vital to creating responses that are both compassionate and effective. For this reason, the chapter explores both the use of violence by children and young people, and the violence they experience, side by side. It outlines the need for programs that are trauma informed, developmentally appropriate, and sensitive to the complexity of children and young people's lives. It also considers how we can better protect young people from harm in the first place, with solutions grounded in care, not punishment.

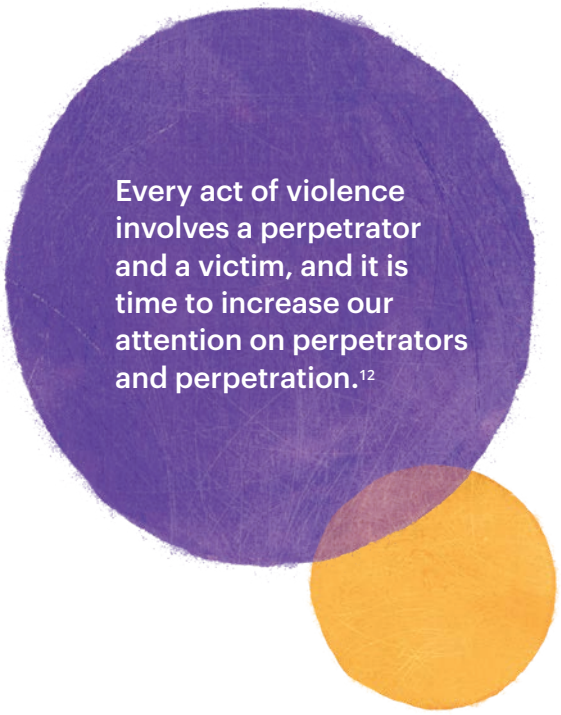
Along with the criminal justice system, a common element in responses to people using violence are intervention programs. This is because effective intervention programs provide a rare opportunity to meet all 3 goals at once. To achieve these 3 goals, intervention programs must be well designed, well resourced, available when needed and relevant to the people who need them

Violence in South Australia is not only carried out by individuals. Government and private sector systems and services enable and perpetuate harm. Systems, professions and policies can be weaponised against victim-survivors.

Finally, media narratives and reporting practices can reinforce harm. The responsibility of the media in either perpetuating or disrupting violence through the stories it tells is discussed in this chapter.



Why do people choose to use violence?



There has been a significant and growing body of research on domestic, family and sexual violence in Australia – particularly focused on the experiences of victim-survivors, the majority of whom are women and children. There has been comparatively less academic attention on understanding the people who use violence, their behaviours and effective strategies for intervention. As a result, our understanding of perpetration, beyond broad patterns of male violence, is still emerging.

For example, national population-level surveys, such as the PSS and ACMS, which are so regularly cited in this report, tell us about who has experienced violence, and in what form, but tell us much less about who caused that harm and why. We know that 1 in 4 (27%) women and 1 in 8 (12%) men have experienced violence from a family member or intimate partner since the age of 15,[13] but we do not know how many Australians are responsible for that violence. The available data does not allow us to determine whether the number of people using violence is the same as the number of people experiencing violence, or whether a smaller number of people using violence are responsible for harming a greater number of victim-survivors.

Fortunately, there has been a growing recognition of the need to better understand the use of violence in recent years. This recognition has led to the publication of 4 key resources that explore the use of violence in Australia. In 2022, Professor Michael Flood, survivor advocate Ms Lula Dembele and colleagues published Who Uses Domestic, Family and Sexual Violence, How, and Why? The State of Knowledge Report on Violence Perpetration (the State of Knowledge Report).[14] In the same year, ANROWS published the Pathways to Intimate Partner Homicide project report,[15] along with the Adolescent Family Violence in Australia study.[16] Very recently, in 2025, the Australian Longitudinal Study on Male Health, Ten to Men, released a research insight titled The Use of Intimate Partner Violence Among Australian Men.[17] Recognising the pressing need to understand more about the use of violence, ANROWS has also launched the 2023–2027 'People who use domestic, family and sexual violence' research program, with several important studies now underway.[18]

The State of Knowledge Report sought to answer the question 'Who uses domestic, family and sexual violence, how, and why?'[19] In answering that question, the report is careful to emphasise that '[m]ost perpetration happens without ever coming to the attention of police or legal systems' and that, as a result, efforts to reduce and prevent perpetration, and to hold perpetrators accountable, must also occur outside of the constraints of the criminal justice system.[20]

On the question of who uses violence, the State of Knowledge Report reinforces that victimisation and justice data shows that most violence is perpetrated by men. National victimisation data shows that three-quarters (75%) of domestic violence perpetrators were male, and one-quarter (25%) were female. Perpetrators of sexual violence are even more likely to be male; this was the case for almost all female victims of sexual violence (96%), as well as just under half of male victims of sexual assault (44%).[21]

The State of Knowledge Report goes on to consider the causes of violence perpetration through common violence risk factors. The presence of individual and overlapping risk factors serves to 'increase the likelihood of perpetration and victimisation'.[22] It is important to note that the presence of any individual risk factors increases the likelihood of, but does not inevitably lead to, the use of violence. The report sets out that '[t]here is considerable diversity among perpetrators and in perpetration. Different types of perpetrators and perpetration have different risk factors'.[23]

When it comes to intimate partner violence against women, the report finds that '[o]ne of the most consistent risk factors for violence perpetration documented in the scholarship is childhood exposure to domestic and family violence' and that '[t]here are also associations between intergenerational exposure to violence and the perpetration of sexual violence'.[24]

The State of Knowledge Report also explores the range of common violence risk factors at the individual, relationship, community and society levels. Some of the more prevalent risk factors at the individual level included adverse childhood experiences, poor mental health and substance abuse, and at the societal level, gender inequality and social norms that emphasise men's control over women.

The State of Knowledge Report examines how the use of violence can change over time – and, importantly, how it can stop. Some people move away from violence because their circumstances change. This is referred to 'external desistance' of violence, and can be caused by entering into a stable relationship, becoming a parent, finding steady work, or distancing themselves from harmful influences and peers.[25]

Others make more intentional, personal changes. This is referred to as 'internal desistance', and is often driven by self-motivated change, which can be shaped by factors such as successful therapeutic interventions, identity transformation and maturation.[26]

Sometimes desistance is brought about because of consequences from the criminal justice system, such as criminal charges, court orders and threats of further legal action.[27]

Ultimately, change is possible – but it often requires the right mix of support, accountability and opportunity.

The most common form of domestic and family violence homicides are male-perpetrated intimate partner homicide, hence the focus of The Pathways to Intimate Partner Homicide Project. The Australian Institute of Criminology (AIC) found that there was:

> **a critical need to examine the sequence of events, interactions and relationship dynamics preceding and coinciding with the male-perpetrated homicide of a female intimate partner, in order to inform prevention and intervention initiatives.**[28]

To help fill a gap in what we know, the AIC studied 199 cases of men who killed their female partner between 2007 and 2018.[29] Of the 199 offenders:

- just over half (55%) were born in Australia
- 1 in 4 (26%) was Aboriginal and/or Torres Strait Islander
- the average age was 41.

Among the women who were killed:

- more than two-thirds (68%) were born in Australia
- 1 in 4 (24%) was Aboriginal and/or Torres Strait Islander
- the average age was 39.[30]

The AIC identified 3 primary offender cohorts and 'pathways to homicide', based on patterns in their behaviour and background. These are:

- the 'persistent and disorderly' cohort
- the 'fixated threat' cohort
- the 'deterioration/acute stressor' cohort.[31]

These findings help build a clearer picture of the warning signs and risk factors associated with intimate partner homicides.

Of the 3 pathways to homicide, the persistent and disorderly pathway was the most common, accounting for 40% of offenders. Offenders in the persistent and disorderly pathway had complex histories of trauma and abuse, along with co-occurring mental, emotional and physical health problems, as well as significant histories of violence towards intimate partners and other people. Offenders who were Aboriginal and/or Torres Strait Islander were more likely to be in this cohort than the others. The project found that persistent and disorderly offenders were in relationships that featured ongoing intimate partner violence and frequent criminal justice system contact, but separation was relatively rare. The project found that, in many cases, the lethal use of violence was similar to previously reported instances of violence, and that lethality often eventuated due to 'co-occurring individual-level and situational-specific vulnerabilities, such as heavy alcohol use or the absence of capable guardians to stop the offender'.[32]

The fixated threat pathway to homicide was the second most common pathway, constituting one-third (33%) of all offenders. The fixated threat pathway reinforces emerging practice knowledge that coercive and controlling behaviours are a significant risk factor for lethality. The project found that offenders in this cohort were 'typically middle-class men who were well respected in their communities and had low levels of contact with the criminal justice system', and that 'despite being jealous, controlling and abusive in their relationships, [these] offenders were relatively functional in other domains of their life'. The intimate partner violence used by fixated threat offenders was often characterised by controlling, stalking and monitoring behaviours, which escalated if the victim was perceived to withdraw from or leave the relationship. The use of violence among this cohort was often a means to re-establish control over the victim and other domains of life, for which the offender blamed the victim for their loss of control. Fixated threat offenders were found to be the most likely to conceal the homicide and plead not guilty.[33]

The deterioration/acute stressor pathway was the least common pathway, accounting for 1 in 10 (11%) of the sample. Offenders in this cohort tended to be older and have significant emotional, mental and physical health problems and tended not to be Aboriginal or Torres Strait Islander. The project found that this cohort demonstrated either low levels or an absence of aggression or violence, meaning that criminal justice system contact was rare. The deterioration/acute stressor cohort was often in long-term, stable and non-abusive relationships with the victims until the onset or exacerbation of a significant life stressor or stressors. The fatal incident for the deterioration/acute stressor cohort was typically not planned or intended, rather 'an argument would occur which, coupled with the offender's impaired emotional regulation skills, resulted in a nearly instantaneous decision to harm the victim'.[34] Offenders in this cohort were likely to seek help for the victim, demonstrate remorse and plead guilty to their offending.[35]

The project identified 5 key themes that were 'important in explaining the occurrence of [intimate partner homicide], regardless of the offender classification'.[36] The first of these key themes was the offender's emotional, mental and physical health problems. The project found that almost 3 in 4 (73%) of the sample were described as having at least one emotional, mental or physical health condition, which included long-term health conditions (19%), cognitive impairment (17%), mental health problems (43%) and alcohol and other drug problems (54%). Nearly half (42%) of offenders had a history of 2 or more co-occurring problems.[37]

The second key theme among offenders was their experiences of trauma. More than half (55%) of the sample had experienced traumatic life events, such as abuse and neglect, war and conflict, homelessness, incarceration, and the death of significant family members. One-third (32%) of intimate partner homicide offenders had experienced abuse and neglect as a child or young person.[38]

The third key theme was separation. At the time of lethal violence, the offender and victim were separated in one-third (32%) of cases. In these cases, offenders typically began or escalated their use of violence following separation (68%), and four-fifths (80%) of the homicides occurred within a year of separation, with more than half (56%) occurring within 3 months.[39]

The fourth key theme among offenders was hegemonic masculinity and traditional gender norms. The project found that although information about adherence to traditional gender norms was missing for the majority of cases, there were some instances where offenders had 'voiced opinions or behaved in ways which demonstrated that they endorsed traditional gender norms' (17%).[40] The project highlights that 'it is crucial to recognise that Australia is still a patriarchal society that prioritises the interests of men over women in various domains'.[41] It goes on to note that while 'the vast majority of men in Australia will never perpetrate violence against their partners, and only a tiny minority will kill them', it remains important to 'look at individual specific risk factors that may illustrate why these men killed their partners'.[42]

The fifth and final theme related to challenges linked to pre- and post-migration experiences. Of the 61 offenders who were born overseas, 47 were born in locations where English was not the primary language. A smaller group (13%) had experienced displacement from their birth country due to war, conflict or risk of persecution. The report found that '[i]n many cases involving a CALD offender, changes in the power dynamics within the relationship post-migration was a key component of the pathway to [intimate partner homicide]' and that an important factor was 'disparity between the victim and offender regarding their acculturation in Australia, and one partner being dependent on the other for their residency in Australia'.[43]

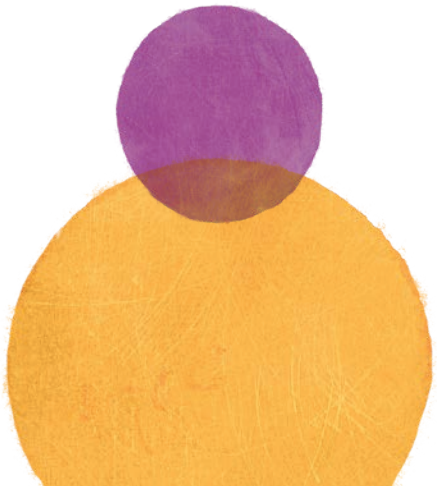
By identifying the 3 key pathways to homicide – along with 5 major themes that cut across them – the project has revealed clear opportunities to disrupt trajectories towards homicide.

The most common pathway to violence, the persistent and disorderly cohort, was also the most visible. Individuals in this cohort often had high levels of contact with statutory services, including the criminal justice system, and demonstrated the most criminogenic needs.[44] The project wrote that '[e]ncouragingly, the evidence base regarding "what works" in responding to this cohort of offenders is relatively strong'. This included early intervention and the provision of targeted, integrated and timely support, in order to address 'contextual and situational risk factors for violence such as comorbidity and alcohol use.'[45] The project suggested that '[t]his can be achieved through the provision of perpetrator interventions that are integrated with [alcohol and other drug] and mental health services'.[46] The ability for South Australia to act on this finding is discussed later in this chapter.

The second most common pathway, the fixated threat cohort, is less visible to police and the justice system. A major barrier to individuals' identification is their use of primarily non-physical violence. For this cohort, the authors recommended investment in training for frontline workers to identify coercive control, and to treat it seriously when it is identified. Innovative responses such as intelligence-led policing, delivered through partnerships with the family law, mental health and domestic violence sectors, represents 'a promising avenue for stopping this type of offender and in turn protecting high-risk victims and their families'.[47] Investments in training have been discussed in Chapter 3.

The least common pathway, the deterioration/acute stressor cohort, is the most difficult to identify, due to the absence of established risk factors prior to the change in life-course. The project found that, given a defining characteristic of this cohort was individuals' experience of acute mental, emotional and physical health problems, healthcare professionals were well placed to identify risk and intervene early.[48] The Commission has referred to the need to increase awareness of domestic, family and sexual violence across the healthcare workforce in Chapter 3.

The 2022 ANROWS Adolescent Family Violence in Australia study is a national study of the prevalence, history of childhood victimisation and impacts of adolescent family violence.[49] The report found that one-fifth (20%) of the 5,021 young people who participated in the survey reported that they had ever used violence against a family member. This included 23% of participants assigned female at birth, along with 14% assigned male. The most common forms of self-reported abuse were verbal abuse (15%), physical violence (10%) and emotional abuse (5%). Of the young people who reported that they had used violence in the home, almost half (45%) reported that they used violence at least on a monthly basis. The average age of the onset of violence in the home was found to be 11 years.[50]



When exploring the co-occurrence of child abuse and perpetration of adolescent family violence, the report found that '[c]onsistent with other research, there appeared to be a high level of overlap between experiences of child abuse and use of violence against family members among young people'.[51] Almost half (46%) of the young people who had experienced child abuse self-reported that they also used violence in the home. Even more significantly, 'a staggering' 89% of young people who had used violence in the home had experienced child abuse. This was consistent for both females (90%) and males (86%). In other words, 9 out of 10 young people who had used violence in the home had also experienced child abuse.[52]

After controlling for a range of factors, the report found that young people who had both witnessed violence between other family members and also been subjected to abuse were 9.2 times more likely to use violence in the home than respondents who had not experienced any child abuse. The report found that the high level of overlap between the use of violence and the experience of child abuse could be partially attributed to the use of retaliatory violence and self-defence.[53] When asked why they had used violence, many young people responded that they wanted to 'punish family members who had abused them, and to defend themselves from actual or anticipated violence'.[54] This was supported by data which revealed that 93% of young people whose siblings had been violent towards them, and 68% of young people whose mothers had been violent towards them, had used violence against these family members in turn. This decreased when it came to fathers (54%), step-parents and foster carers (29%), and grandparents (26%).[55]

Ten to Men is an Australian Longitudinal Study on Male Health. In 2025, Ten to Men published Insights #3, The Use of Intimate Partner Violence among Australian Men.[56] The study examines men's self-reported use of and experience of intimate partner violence, using 2 'waves' of longitudinal data from 2013–14 and 2022 in order to investigate factors that impacted the likelihood of starting to use violence. The study found that in 2013–14, almost a quarter (24%) of men aged between 18 and 57 self-reported that they had ever used a form of intimate partner violence as an adult. By 2022, this had increased to around 1 in 3 (35%) men, or an additional 11% of men who used violence between 2013–14 and 2022.[57] The most common form of violence used was emotional abuse (32% in 2022), followed by physical violence (9% in 2022) and sexual violence (2% in 2013–14).[58] The study also asked participants about their experience of intimate partner violence. Notably, the study found that in 2022, one-quarter (25%) of men reported using and experiencing violence, while only 1 in 10 (10%) reported using violence but never experiencing it.[59] This study is discussed further in Chapter 7.

Accountability, responsibility, and keeping people in view

The increased academic focus on people using violence corresponds with the growing recognition that it is not possible to end domestic, family or sexual violence without a stronger and more deliberate focus on the people responsible for using it. To that end, 3 overarching goals have emerged when it comes to people using violence: holding them accountable for their use of violence; supporting them to take responsibility for, and end their use of violence; and keeping people using violence 'in view'. These 3 goals are each reflected in the First Action Plan (2023–2027) of the National Plan, in which Action 5 calls on governments to:

> **[s]trengthen systems and services to better hold people who choose to use violence to account, and provide opportunities to support people who have used violence, or are at risk of using violence, to change their behaviours, with the aim of protecting the safety and wellbeing of current and potential victim-survivors.**[60]

The First Action Plan sets out that:

> **[i]t is the role and responsibility of a wide range of services and agencies to keep people who use violence in view, directly or indirectly, to address the risk posed and scaffold pathways toward non-violence. We will work to support individuals to change their behaviour by providing effective early engagement, referral pathways and evidence-based treatment programs.**[61]

The justice system is one of the few levers society has to hold people accountable for using violence – to interrupt harmful behaviour and create opportunities for change. But justice responses alone are not enough. Systems must work effectively and be supported by broader efforts that give people using violence meaningful chances to take responsibility, even outside the justice system.

Despite its importance, the concept of accountability – and how it differs from responsibility – is still poorly understood. ANROWS highlighted this gap in its 2020 literature review on perpetrator accountability, noting:

> **It became evident to the researchers that a vast majority of papers did not provide a definition of perpetrator accountability or critically engage with this concept. Rather, accountability was predominantly described or listed as the "intent" of DFV interventions, with no further consideration of what this intent involved.**[62]

Recognising how often these ideas were overlooked, ANROWS used its 2020 report, Improved Accountability: The Role of Perpetrator Intervention Systems (Improved Accountability Report), to clearly explain what accountability and responsibility mean, and how they must work together to drive real change.

The Improved Accountability Report explained that accountability is mostly externally applied, and takes the form of 'actions that impose obligations on individuals and organisations'.[63] It found that accountability is layered, because accountability should apply both to people using violence and to the systems and workers who are responsible for identifying and responding to that violence.[64] In the context of the justice systems, accountability levers include criminal justice outcomes such as arrests, convictions and penalties; civil law outcomes such as intervention orders; and family law outcomes affecting property settlement and child custody. Compulsory attendance at intervention or behavioural change programs is also considered as an opportunity to hold someone externally accountable.[65]

Responsibility is described by the Improved Accountability Report as an internal process, occurring 'when an individual takes responsibility for, and ownership of, their actions and attitudes'.[66] Responsibility involves the person using violence acknowledging that they have caused harm, and then taking deliberate steps 'to form a mature and sustainable intention to make consistent non-violent choices in the future'.[67]

The Improved Accountability Report notes that accountability and responsibility do not often co-occur despite the regular mention of both in policy documents. People using violence can be held to account by an external accountability mechanism without ever taking responsibility. Demonstrating responsibility is also not fixed in time; some people may take partial responsibility before later attributing blame elsewhere.[68]

The project lead for the Improved Accountability Report, Professor Donna Chung, gave evidence about what makes interventions effective on Day 4 of Public Hearings. Professor Chung gave a succinct explanation of the dual concepts of accountability and responsibility:

> **"From the work that I've done, what I would argue is that accountability is very much an external body, whatever form that might take, holding somebody to account for their actions and behaviours which have crossed some sort of community sanction or legally sanctioned line in a sense, versus responsibility which is very much as an individual that I recognise and acknowledge the abuses that I've undertaken and that I also acknowledge the consequences of my actions as well. So it's a highly individualised concept in that sense and so you can then hold somebody potentially accountable through whatever forms of systems without them ever taking individual responsibility for their actions.**[69]

The third goal of holding people 'in view' refers to the need to keep people using violence visible. At the societal and community levels, this can involve ensuring that policy, language and media identifies people using violence as the cause of the harm, rather than focusing only on responses to the person experiencing the violence. Keeping people who use violence in view is also crucial for the safety of victim-survivors. In general terms, this role falls mostly to the criminal justice system through arrest, remand, imprisonment and correctional supervision. Another mechanism identified in the Improved Accountability Report is well-designed intervention and behavioural change programs with corresponding victim-survivor contact and support programs.[70]

Professor Chung also spoke about the concept of a 'web of accountability'. Originally a model used in public service and governance structures, the web of accountability has been adapted to conceptualise effective responses to people using violence.[71] The web of accountability is a whole-of-system approach, in which every agency and organisation that comes into contact with people who are using violence becomes responsible for identifying and responding to that risk as early as possible. Universal service providers such as those described in Chapter 3 actively identify risk and share information, no longer ignoring disclosures and obvious risk signals as 'not being part of their job'.[72]

The Victorian government has adopted a web of accountability as central to its goal of 'developing a system-wide approach to keeping perpetrators accountable, connected and responsible for stopping their violence'.[73] Victoria's Family Violence Reform Rolling Action Plan 2020–2023 notes that:

> **"Every time a person who uses violence interacts with the service system, there is an opportunity to affect behaviour change and intervene. Behaviour change is more likely to happen when the government, the broader service system, community and society are working together to prevent violence happening and intervene early when it does.**[74]

An increased focus on people using violence also featured in Queensland. An objective under the Queensland government's Strategy to Strengthen Responses to People Who Use Domestic and Family Violence – 2024 to 2028[75] is:

> **To guide a whole-of-systems and community response that brings persons using, or at risk of using, violence into greater focus in Queensland and provides them with increased opportunities to change their behaviours.**[76]

The Western Australian government has also called for 'more investment in perpetrator responses' and:

> **A strategic and planned approach to strengthening perpetrator intervention through a dedicated perpetrator response framework, clear practice standards, and regular review or evaluation of existing interventions. Implementation to make sure that responses are proportionate to imminence, threat and level of risk identified. To also give consideration to the unique risks and needs of different perpetrator cohorts including adolescents using violence and perpetrators who are carers, guardians or administrators in relation to their victim-survivor.**[77]

Queensland, Victoria and Western Australia share 3 key enablers that allow their states to build systems that better identify and respond to people using violence. First, each jurisdiction introduced universal risk screening through the use of risk assessment and management frameworks. Second, each jurisdiction adopted a version of an integrated response model. Third, each jurisdiction invested in intervention and behaviour change programs, to both hold people using violence accountable, and at the same time provide them with the opportunity and tools to take responsibility for and to end their use of violence.[78] This report has already called on the South Australian government to implement the first 2 key enablers – this chapter will include a focus on the third.



The call to action

The drivers of domestic, family and sexual violence are discussed in Chapter 7. There is no escaping the fact that these forms of violence are heavily gendered, with the majority of violence being perpetrated by men.

While it is absolutely appropriate to centre the experiences of victim-survivors in domestic, family and sexual violence responses, it is important to focus on those responsible for the violence, including how and why and what can be done to change behaviours and systems.

The safety of victim-survivors must be at the heart of South Australia's response to family and domestic violence. Intervention orders are a crucial protection tool: they not only help ensure the safety of those at risk, but also enforce accountability for those who use violence. However, without sufficient resources, their effectiveness is compromised. Conflicting parenting and family violence orders place children and caregivers at risk.

Enhancing the effectiveness of the intervention order system will require support for both victim-survivors and people using violence to understand the intervention order process and the consequences of breaches, as well as referrals to vital support services.

Abuse does not only occur through direct violence. It can also be perpetrated by those who knowingly assist or enable the abuse of others. The creation of a facilitation of abuse offence is an important tool to hold accountable those who enable or organise abuse on behalf of others, and to promote public awareness that this behaviour is criminal and will not be tolerated.

The use of 'good character' evidence can perpetuate harmful myths that people with positive reputations are less likely to use violence. It obscures accountability, especially when abuse occurs behind closed doors and silences victims, who are less likely to be believed when the accused is seen as respectable. There is a need to conduct a comprehensive review into how good character evidence is used in sentencing and trials for domestic, family and sexual violence.

Intervention and behaviour change programs play a critical role in addressing violence by holding individuals accountable, monitoring their actions, and providing them with the tools to take responsibility and change. However, these programs must be part of a broader, coordinated web of accountability.

South Australia has a unique opportunity to lead by example and create a robust, coordinated system to prevent and respond to domestic, family and sexual violence. A safer future depends on building a web of accountability: a system in which those who use violence are held accountable and those at risk are supported through accessible, effective services.

A serious service delivery gap remains for people on remand for domestic and family violence offences. Many of these individuals are released without completing any form of intervention due to short sentences or time served. This gap must be closed by developing remand-specific intervention programs, and ensuring continuity of support upon release.

South Australia must strengthen regulatory systems to ensure that regulators can hold professionals accountable for domestic, family and sexual violence. Regulators must use every available lever – licensing, registration and public accountability – to send a clear message that those who use violence will face consequences.

Children and young people are not only vulnerable to violence, they can also be harmed by, or involved in, harmful behaviours themselves. This is a critical area of need. The Commission has identified the need for a statewide framework to understand and respond to harmful sexual behaviours in children and young people, along with greater investment in programs for young people who use violence.

Despite growing evidence of its harm and international commitments to criminalise it, corporal punishment remains legal (to some extent) in South Australia and across all Australian jurisdictions. This double standard in our laws undermines efforts to end domestic, family and sexual violence. Children and young people have made their voices clear: violence in any form must not be tolerated.

Systems that are meant to protect should never cause harm. Yet, countless victim-survivors have spoken out about systems abuse, particularly within the family law system, and how it can devastate a person's health, financial security and legal standing. It can lead to false allegations, the denial of justice, and long-term disadvantage, including loss of employment opportunities and social connections. This must change.

Responding to the use of violence by adults

Accountability through the justice system

The following sections set out an explanation of the way in which the current intervention order system and the criminal justice system operate in South Australia.

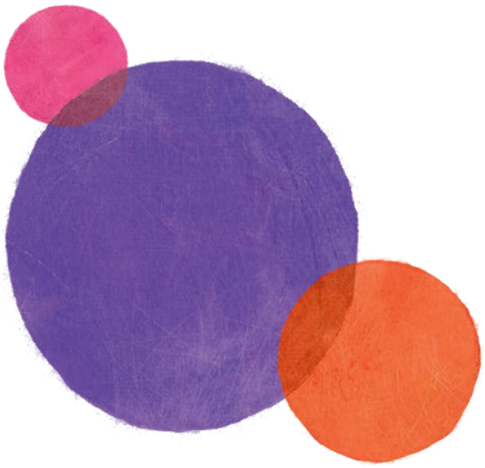
This background is necessary because, for the most part, the challenges experienced with the justice system are not due to a lack of laws, processes or procedures, but rather are due to a lack of investment in the system and its participants, particularly in relation to the intervention order system since its commencement in 2011.

The intervention order system

In an effort to provide protection against domestic, family and sexual violence, and prevent further harm, the legal system in South Australia offers a civil justice mechanism known as an intervention order. Similar mechanisms are available in other Australian jurisdictions. This is in addition to the criminal justice response which makes certain behaviours a criminal offence.

The process of obtaining and issuing interim and final intervention orders is set out in the Intervention Orders Act. An interim intervention order may be issued by SAPOL or by the Magistrates Court if it is reasonable to suspect that a person (the respondent) will, without intervention, commit an act of abuse against another person and the issuing of the order is appropriate in the circumstances.[79]

The grounds for issuing an intervention order are anticipatory. This is because the law allows action to be taken if there is a risk that abuse might occur. There does not need to be proof that violence or abuse has already taken place.



What is an act of abuse?

Abuse is broadly defined in the Intervention Orders Act to include physical, sexual, emotional, psychological or economic abuse.[80] It does not necessarily need to amount to a criminal offence. An act is an 'act of abuse' if it results in or is intended to result in:

- physical injury
- emotional or psychological harm
- an unreasonable and non-consensual denial of financial, social or personal autonomy
- damage to property.

Examples are given in the Intervention Orders Act of what might constitute an act of abuse against a person (the protected person) resulting in emotional or psychological abuse and unreasonable and non-consensual denial of financial, social or personal autonomy. These examples include behaviour that would be considered to be coercive control, such as unlawfully depriving a person of their liberty; causing harm to, or the death of, an animal; sending offensive material to the person; keeping the person under surveillance, threatening to withdraw care, denying the person financial autonomy; and preventing the person from seeking or keeping employment.

Abuse is considered domestic abuse if it is committed against someone the person has or had a relationship with. For the purposes of an Intervention Order, the term 'relationship' is defined broadly. It includes common family relationships – such as partners, parents and children – but also covers other relationships, such as Aboriginal kinship relationships and people in a caring role. This includes carers as recognised under the *Carers Recognition Act 2005* (SA).

Issue of interim intervention order

If the respondent is present before a police officer or in custody, a police interim intervention order (PIIO) may be issued. The PIIO comes into force as soon as it is served on the respondent, thereby giving the protected person immediate protection without the need to go to the Magistrates Court. The PIIO acts as a summons, requiring the respondent to appear so the Magistrates Court can decide if the PIIO should be confirmed (with or without variations) or revoked.[81]

If police do not issue a PIIO, an applicant, an applicant's representative or the police may apply to the Magistrates Court for an interim intervention order (known as a section 20 application).[82] The hearing of this application will be held *ex parte*; that is, without the respondent being present. If an interim intervention order is made by the Magistrates Court, it will only come into effect once it has been served on the respondent by police or in some other manner authorised by the Magistrates Court. The interim intervention order will also act as a summons for the respondent to appear before the Magistrates Court for the purposes of determining the application for a final intervention order.[83]

In considering whether an order is appropriate in the circumstances, police and the Magistrates Court must recognise and take into account the principles for intervention against abuse set out in section 10 of the Intervention Orders Act. These include:

- abuse occurs in all areas of society, regardless of socioeconomic status, health, age, culture, gender, sexuality, ability, ethnicity or religion
- abuse may involve overt or subtle exploitation of power imbalances and may consist of isolated incidents or patterns of behaviour
- it is of primary importance to prevent abuse and to prevent children from being exposed to the effects of abuse.

The applicant for an interim intervention order must inform the Magistrates Court of any relevant Family Law Act or child protection order of which they are aware.[84] The purpose is to allow for the Magistrates Court to consider these other orders and either tailor the conditions of the intervention order to be consistent with the other orders, or, in the case of any Family Law Act orders of a kind referred to in section 68R of the Family Law Act (i.e. parenting orders), resolve any inconsistency by exercising its power under that section to vary, discharge or suspend the Family Law Act order.

The Intervention Orders Act makes it clear that an intervention order may be issued for the protection of a person even if that person is not an applicant for the order and the application is not made on their behalf.[85]

Conditions of an intervention order

An intervention order can include any form of restraint that is needed to protect a person from abuse. For example, an order may prohibit the respondent from being on, or near, the protected person's home or workplace, or from approaching within a specified distance of the protected person. It may also prohibit the respondent from contacting, harassing, threatening or intimidating the protected person. The intervention order can also require the respondent to do certain things; for example, to surrender specified weapons or articles, return property to the protected person, or undertake drug and alcohol testing.

An intervention order can also require the respondent to be assessed for, or to undertake, an appropriate intervention or behavioural change program. The Courts Administration Authority (CAA) presently funds Relationships Australia South Australia (RASA) and KWY to deliver a men's behavioural change program, which can be mandated under the conditions of an intervention order.[86] The RASA and KWY programs are known as the Courts Administration Authority's 'Abuse Prevention Programs'.

Final intervention orders

The Magistrates Court has 3 options at a hearing for a final intervention order. It can confirm the interim intervention order (whether issued by the police or the Magistrates Court); it can issue an intervention order in substitution for the interim intervention order with new conditions; or it can dismiss the application and revoke the interim intervention order.

The Magistrates Court may also choose to make a problem gambling order or a tenancy order. A problem gambling order means that the respondent is subject to a problem gambling family protection order under the *Problem Gambling Orders Act 2004* (SA). The order can require the respondent to attend counselling, or bar them from attending gaming venues, among other conditions.

A tenancy order can be used to help victims of abuse leave home safely or stay in their home by assigning the respondent's interest in the tenancy agreement to a specified person or persons with the landlord's consent. It can only be issued by the Magistrates Court if:

- the final intervention order prohibits the respondent from being on premises in which a protected person resides
- the respondent and protected person previously resided together on the premises
- the premises are subject to a tenancy agreement to which the respondent is a party.[87]

Intervention orders in South Australia are unique in that they have no end date. This means that the order does not have an expiry date and will continue to operate, subject to any variation by the Magistrates Court, until revoked. This is an important protection that places the burden on the respondent to prove why an intervention order is no longer necessary.

Another important protection, applying only in relation to a final intervention order, prohibits a respondent from applying for a variation or revocation of a final intervention order until at least 12 months have passed from the making of the final order.[88]

Consequences of breaching an intervention order

Breaching a condition of an intervention order is a criminal offence with significant penalties attached. For example, a first offence, or an offence that does not involve physical violence, or the threat of physical violence, attracts a penalty of up to 3 years imprisonment or up to 5 years if the offence is committed in the presence of a child. For subsequent breaches, or breaches involving physical violence or the threat of physical violence, the maximum penalty increases to 7 years imprisonment or 10 years if the offence is committed in the presence of a child.

The Intervention Orders Act exempts a protected person from liability for aiding, abetting, counselling or procuring a breach of an intervention order, subject to some specific exemptions relating to the safety of other people.[89] This ensures that the criminal law cannot be used against a protected person, even if the protected person was perceived to be complicit in the breach of the order.

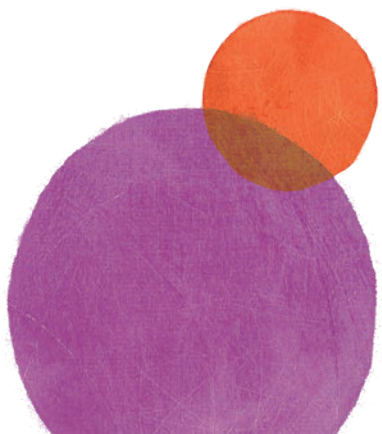
A decade of reform

A number of legislative amendments have been made to the Intervention Orders Act over the past 10 years to improve the protections offered and create greater accountability for people who use violence.

For example, in 2015, the Intervention Orders Act was amended by the *Intervention Orders (Prevention of Abuse) (Miscellaneous) Amendment Act 2015* (SA) to give greater powers to the Magistrates Court, including providing that the rules of evidence do not apply if the applicant is a police officer. The reforms also made it clear that the Magistrates Court, when finalising an interim intervention order, must make inquiries about the existence of any relevant Family Law Act order, and consider how any inconsistency between that order and the intervention order should be resolved. The purpose was to encourage the Magistrates Court to exercise the power in section 68R of the Family Law Act and remove the need for a protected person to commence new Family Court proceedings to vary a parenting order when inconsistent orders were made.[90]

In 2017, the *Intervention Orders (Prevention of Abuse) (Recognition of National Domestic Violence Orders) Amendment Act 2017* (SA) amended the Intervention Orders Act to provide for the automatic recognition and enforcement in South Australia of domestic and family violence orders issued in any state or territory (known as the National Domestic Violence Order Scheme [NDVOS]). The provisions reflect the following principles:

- A domestic violence order made anywhere in Australia, or a New Zealand domestic violence order registered anywhere in Australia, is nationally recognisable and enforceable.
- A domestic violence order that is nationally recognised can be amended in any jurisdiction, but only by a court.
- If a domestic violence order made in one jurisdiction is in force, a new order can (if necessary) be made in another jurisdiction, but only by a court.
- The latest order in time prevails.



In 2018, the Intervention Orders Act was amended by the *Statutes Amendment (Domestic Violence) Act 2018* (SA). The amendments included expanding the list of examples of emotional and psychological harm in section 8(4) to include forced marriage, threatening to distribute invasive images without consent, and preventing a person from entering that person's primary place of residence. The amendments also increased the penalties for offenders who repeatedly breach intervention order conditions or where a breach involves physical violence or the threat of physical violence.

Penalties were further increased in 2021 by the *Statutes Amendment (Intervention Orders and Penalties) Act 2021* (SA). The increases reclassified some offences to major indictable matters, but still allowed for all offences to be prosecuted and sentenced in the Magistrates Court, unless the Magistrates Court determined that a penalty of more than 5 years imprisonment should be imposed.

An independent review of the Intervention Orders Act was undertaken in 2016 by the University of South Australia and Uniting Communities. The Powerful Interventions Report was informed by engagement with people with lived experience and made a number of findings.

During the course of the Commission's inquiry, the House of Representatives Standing Committee on Social Policy and Legal Affairs released its report into Family Violence Orders in February 2025. The report (the FVO Report) made 11 recommendations about the use of family violence orders across state and territory borders.[91]

The Family Violence Court

The South Australian Family Violence Court (FV Court) is established under Rule 14.6 of the Joint Criminal Rules 2022 to hear matters connected to domestic and family violence in the Magistrates Court. This includes intervention order proceedings, as well as summary or minor indictable criminal charges relating to the offending that resulted in the intervention order.

The FV Court sits in the Adelaide, Port Adelaide, Elizabeth, Christies Beach, Murray Bridge, Mount Gambier, Port Augusta and Whyalla magistrates courts. In metropolitan and suburban locations, the FV Court is generally presided over by magistrates with specialised knowledge and interest in domestic and family violence matters. In regional locations, the FV Court is presided over by the resident magistrate for that region.

Domestic and family violence matters will remain with the FV Court from inception until the matter is listed for trial to maintain awareness of the complainant's safety needs and the defendant's behaviours.[92] Matters resolved in the FV Court by way of a guilty plea or consent to a final intervention order will be finalised in the FV Court through sentencing or the making of the final intervention order. Criminal trials and intervention order contested hearings are heard in the Magistrates Court general list.

All major indictable charges are heard in a specific Magistrates Court list, known as the Committal List, until they are committed to the District or Supreme Court for trial or sentence. As a result, they are not heard in the FV Court.[93]

The FV Court may refer any defendant appearing before it for an Abuse Prevention Program assessment by mandating referral in the conditions of an intervention order or bail agreement.

The criminal justice system

When a person is charged with a criminal offence by SAPOL, the matter is referred to either SAPOL or the ODPP as the prosecuting authority. As already outlined in Chapter 1, summary and minor indictable offences are generally prosecuted in the Magistrates Court by police prosecutors. Major indictable offences are dealt with in the District Court or the Supreme Court and are prosecuted by the ODPP.

It can take some time for a matter to proceed through the criminal justice process. The Australian Government Productivity Commission's Report on Government Services records that for South Australia in 2023–2024, in the District Court only 58.5% of criminal cases were finalised within 12 months and 86% were finalised within 24 months. In the South Australian Magistrates Courts, 54.9% of criminal cases were finalised within 6 months and 80% were finalised within 12 months. These statistics include matters proceeding by way of a guilty plea or a trial.[94] A further discussion about the impact of court delays on victim-survivors is included in Chapter 6.

The court process can be a confusing and distressing process for victim-survivors, particularly when they are required to give evidence in court and are subject to cross-examination by the defence.

Several measures are in place in South Australia to protect victim-survivors during a criminal trial. For example:

- Special arrangements may be put in place for the giving of evidence.[95] These include:
  - giving evidence from outside the court by closed-circuit television
  - the use of screens or partitions
  - allowing the witness to be accompanied by a relative or friend, or by a canine court companion, for emotional support
  - extra time and breaks
  - closing the court to the public[96]
  - allowing a witness with complex communication needs to give evidence using communication assistance such as a communication partner or device.[97]
- In some circumstances the court may order that a witness give evidence (including cross-examination) at a pre-trial special hearing. This evidence is recorded and played during the trial.[98]
- The court may also allow for recorded interviews of children under 14 years of age or people with a cognitive impairment to be used as evidence of the witness instead of the witness giving evidence-in-chief at a trial or pre-trial special hearing.[99] In proceedings for a domestic violence offence, the court may allow a recording of a complainant's evidence made by a police officer to be used as evidence.[100] Witnesses must, however, be available for cross-examination, albeit only with the permission of the judge.[101]

A further protection applying in prosecutions for serious offences against the person and failing to comply with an intervention order (among others) is that an unrepresented defendant may not personally cross-examine the alleged victim of the offence.[102] Similarly, in proceedings relating to an intervention order application, any cross-examination of a person alleged to be the victim or potential victim of domestic abuse, or a child who might be exposed to an act of abuse, must only be conducted by a legal practitioner or pre-approved by the court.[103]

If a defendant pleads not guilty to a criminal charge, the matter will proceed to a trial in the relevant court. A criminal trial consists of the prosecutor presenting the evidence that is relevant to proving the guilt of the defendant beyond reasonable doubt. The defendant through their legal representative may test that evidence and may present their own evidence. At the end of the evidence, the prosecutor and the defendant's legal representative will give a closing address and then the decision-maker (the judicial officer or the jury) will decide whether the person is guilty or not guilty.

If a defendant is found not guilty, the defendant is acquitted and the matter comes to an end.

If a defendant is found guilty, or has entered a guilty plea, the matter will proceed to sentencing.

The criminal justice process also includes specific pathways for defendants who assert a mental impairment, set out in Part 8A of the *Criminal Law Consolidation Act 1935* (SA) and section 30 of the *Sentencing Act 2017* (SA).

Under South Australian law, criminal offences carry a maximum penalty for each offence. The maximum penalty may be a term of imprisonment or a fine, or both.

At a sentencing hearing, the prosecutor and the defendant's legal representative will make submissions to the magistrate or judge about the matters that should be taken into account when determining penalty. The victim of the criminal offence, or any other person who has suffered injury, loss or damage resulting from the offence (e.g. family or friends of a victim), is also entitled to provide the court with a Victim Impact Statement.[104]

The Commissioner for Victims' Rights or the prosecutor may also provide the court with a Community Impact Statement. This can include a statement about the effect of the offence on the community generally, or on any particular sections of the community.[105]

The court is required to consider the general principles of sentencing set out in subsection 10(1) of the Sentencing Act when determining sentence. The court must also consider a variety of sentencing factors, including the seriousness of the offending and its impact on any victim, as well as the defendant's character, general background and offending history, and their likelihood of reoffending.[106] A discussion about the use of good character evidence in the sentencing process is included in this chapter.



Accountability through the justice system

The intervention order system

Current state

Intervention orders have the potential to play a critical role as a safety mechanism for people experiencing domestic, family and sexual violence and as an accountability mechanism for people who use violence. The Commission repeatedly heard that this potential is not being realised.

Many people explained that intervention orders could be an effective safety tool but, despite the significant penalties associated with breaching an order, they are not providing the desired protections or effectively holding the person using violence to account.

> **X & Y were both shocked to discover that their protective intervention orders were immediately overturned by the Family Law Court. They realised that the Family Law Court did not value their safety at all, and was prepared to risk their lives and wellbeing and their children's safety and wellbeing in order to provide the abusive father with unsupervised access to their children.**[107]

> **After ex had a siege with police holding (my children) at gunpoint, we each had a police intervention order against him. Family court (granted) weekly unsupervised (visits) for both kids with their dad.**[108]

> **The magistrates also removed my children from the intervention order even though he had continually abused me in front of the children, assaulted the eldest child and the children being present when he last assaulted me and advised it to be referred to the family court.**[109]

The Commission heard of the high number of intervention orders issued against people who live on the APY Lands, and the perceived ineffectiveness of those orders. A number of factors contribute to this ineffectiveness, including a lack of housing and other services to allow for a non-contact order to be made, and a lack of awareness and understanding of the impact of an intervention order and the consequences associated with a breach. This latter issue was often mentioned as an issue arising for many other intervention order matters too, not just those relating to people living on the APY Lands.

Other issues raised in submissions, Share With Us and listening sessions included:

- a lack of police assistance if a breach of an intervention order does not involve the commission of a criminal offence other than the breach itself
- inadequate sentences for breaching intervention orders, particularly when the breach did not involve the respondent's use of physical violence against the protected person
- the delay in obtaining final intervention orders
- the expense associated with obtaining a private intervention order.

> **Perpetrators can constantly breach intervention orders without repercussions and most often get away with putting their hands on you in the first place meanwhile the survivors are on edge all the time and some like me have no place of their own.**[110]

> **SAPOL does a wonderful job arresting him and bringing matters to court however our court system is broken. A man constantly breaches intervention orders WHILE WEARING AN ANKLE BRACELET! and the court continuously lets him out with no consequences and then we as a society are shocked and horrified when a woman is murdered by a man ... there is no deterrent for men like this to stop abuse.**[111]

> **Past research has documented the inadequate way family and domestic violence victims have been treated by some government officials, including some magistrates who do not perceive breaches of domestic violence orders as serious matters and some police officers who apply inconsistent responses to domestic violence orders application and contravention depending on the personal characteristics of the perpetrators or victims.**[112]

The Commission also heard of the challenges for courts and police, including the increase in the number of intervention orders being issued and applied for, inappropriate or unsafe court facilities, and the significant and often unmet demand for legal assistance.

In acknowledgement of the important role that intervention orders can play in keeping people safe from domestic, family and sexual violence, and holding people using violence to account, the Commission devoted a public hearing to this topic.

The Commission heard evidence on Day 6 of public hearings about the circumstances that will give rise to a PIIO and was told that SAPOL policy required the commission of a criminal offence (e.g. an assault) or the threat of a criminal offence for SAPOL to consider issuing a PIIO.[113] Between July 2023 and June 2024, there were 3,481 domestic abuse–related PIIOs issued by police – an increase of 991 applications from the previous year.[114] In addition, between July 2023 and June 2024, there were 168 section 20 applications by police to the Magistrates Court for an interim intervention order.[115] The same policy applies for these applications.

In circumstances where SAPOL does not issue a PIIO or apply for an interim intervention order, a person seeking protection from domestic, family or sexual violence must make a private application to the Magistrates Court under section 20. Assistance with this process can be sought from the Women's Domestic Violence Court Assistance Service if the person seeking the order identifies as a woman. Assistance can also be sought from community legal centres such as the Family Violence Legal Service Aboriginal Corporation (SA). Between July 2023 and June 2024, the Magistrates Court received 320 of these applications for an interim intervention order.[116]

The Commission was told that, on average, it takes about 200 days for an intervention order to be finalised.[117] Many reasons are put forward to explain the delay, such as there being negotiations between the parties about conditions, or because a respondent has not obtained legal advice or representation.[118] A significant delay may also occur if an intervention order proceeding is listed to 'travel' with a criminal offence proceeding, resulting in the intervention order proceeding awaiting the outcome of the criminal proceedings.[119]

Other matters canvassed during the public hearing included:

- the reluctance by magistrates to use section 68R of the Family Law Act to vary, suspend or discharge parenting orders so that they are not inconsistent with an intervention order[120]
- the need for magistrates and police to develop greater awareness and understanding of domestic, family and sexual violence (this issue has been discussed in Chapter 3)[121]
- a constant perpetuation of the misconception that intervention order breaches that do not involve the use of physical violence are less serious than breaches that do involve the use of physical violence[122]
- it is harder for Aboriginal women to be granted an intervention order relative to non-Aboriginal women, and Aboriginal women are more likely to be the subject of reciprocal orders, often due to misidentification of the primary aggressor.[123]

Future state

The intervention order system is an integral part of South Australia's web of accountability. The purpose of the system is to create safety for people experiencing domestic, family and sexual violence and to provide an external accountability mechanism for people using this violence.

The Commission repeatedly heard that the current approach is inconsistent, and that cultural change is needed if intervention orders are to be an effective safety tool. The Commission has also heard that the operation of intervention orders as a gateway into the criminal justice system has a disproportionate impact on Aboriginal people when the system is not operating effectively.

As discussed in Chapter 2, there is a clear opportunity with the proposed criminalisation of coercive control to negotiate a new settlement of roles and responsibilities within the intervention order system, particularly in relation to the circumstances that give rise to the issuing of a PIIO. As noted by Professor Heather Douglas in her evidence to the Commission, understanding domestic and family violence as coercive control, which includes both physical and non-physical behaviours, will help police and courts to better evaluate when an intervention order is needed and to assess the seriousness of breaches.[124]



Education and awareness

Chapter 3 discussed the need for investment in mandatory education and training for police, prosecutors, judicial officers and court staff. This education and training must also include information about the risks of misidentification, particularly when coercive control is a factor. On Day 6 of public hearings, Professor Douglas gave evidence that she spoke with a number of Aboriginal women:

> **who were clearly misidentified by police, which led to outcomes such as a protection order being made against them when they used a knife to defend themselves against a strangulation, for example. They were charged with assault, and they were locked up overnight and got a protection order made against them. All of this went away in the following days when they got legal advice, but it's a pretty traumatic set of circumstances to be placed in.**[125]

This was echoed by Ms Mary Leaker, General Manager, Embolden in her evidence:

> **I can share that we are certainly also hearing that Aboriginal women are more likely to be subject of reciprocal orders. Professor Douglas touched on misidentification, but I'd like to be really clear that from the perspective of our sector, the misidentification of Aboriginal women, you know, as the person using violence and abuse rather than the person most in need of protection is of really significant concern.**

> **We know that that's consistent with research and advocacy nationally. Professor Douglas spoke about her research. That was also a finding of an Australian Human Rights Commission report, the Women's Voices report in 2020.**[126]

It is crucially important that all police, prosecutors and judicial officers receive training on this issue and that this training translates into practice.

Information and support

On Day 6 of public hearings, the Commission heard evidence from Ms Coleiro of the WDVCAS that the provision of information about an intervention order and the process can be empowering for a protected person as it can provide a level of autonomy over the relevant circumstances.[127]

The Commission also heard from Embolden that respondents to an intervention order need to have a clear understanding of the order's terms to promote compliance.[128] Ms Coleiro also stressed the importance of this, particularly given that 'we know that from the reports from police that the women are actually more at risk one to two weeks after the respondent has received that order because of their response and how they view the interim intervention order'. Ms Coleiro explained that, in her view, a lack of understanding of the order and the process can itself cause a reaction from the respondent which might contribute to this increased risk.[129]

Section 17 of the Intervention Orders Act requires the issuing authority (police or the Magistrates Court) to ensure that the respondent and protected person understand:

- the terms and effect of an intervention order, including that the order acts as a summons
- if relevant, the effect of section 16 (inconsistent Family Law or child protection orders)
- that a protected person cannot give permission for an order to be breached by the respondent.

Despite this, the Commission has heard and observed that the current approach to explaining an intervention order is inconsistent and largely depends on the individual police officer or magistrate. Similar concerns were raised in the Powerful Interventions Report which found:

> **"Good quality information about Intervention Orders has been produced but is not always available to victim survivors. In addition, not all information accurately explains the realities of the process of applying for an Intervention Order, and the consequences for the protected persons if an Intervention Order is issued and potentially breached.**[130]

The Commission observed a number of FV Courts in metropolitan Magistrates Courts. It was apparent that the FV Court is a fast-paced and pressurised environment with a high workload, and does not provide the ideal circumstances for non-legal participants (private applicants, respondents, protected persons and their supporters) to understand all that has occurred and the impact of the outcome. The Commission observed respondents who appeared anxious and agitated and some who barely engaged with the process at all. If written information was made available, it is questionable whether that additional information was any better absorbed.

The Commission believes there is a role for support workers located within, or otherwise connected to, FV Courts and regional courts which do not have a FV Court list. Support workers could assist protected persons and respondents with information about the intervention order process and the consequences of a breach, together with providing information about and referrals to other support services. Such an approach could be modelled on the Specialist Family Violence Courts in Victoria, which have specially trained family violence applicant and respondent practitioners who provide non-legal advice and support.[131]

There is also a need to ensure that written information about the intervention order process, together with the content of the intervention order itself, is clear, simple and accessible and aligns with the requirements set out in section 17 of the Intervention Orders Act. In addition, SAPOL and the Chief Magistrate should turn their mind to whether there is a need to set out in police General Orders and court practice notes the language that should be used when explaining these issues to a respondent. Alternatively, an amendment could be made to the Intervention Orders Act to take the approach set out in section 110 of the *Domestic and Family Violence Prevention Act 2012* (Qld) which requires a verbal explanation to include the purpose and effect of the order, the type of behaviour that constitutes domestic violence, the consequences of contravening a condition, and the right of the respondent to obtain legal advice before attending court.

Recommendation 60

The South Australian government resource the Courts Administration Authority to establish a support worker service connected to the Family Violence Court (and regional courts that do not have a Family Violence Court) to provide non-legal advice and support to parties to an intervention order:

a. The role description should not be limited by mandatory qualification requirements; however, on appointment, support workers should be required to undertake appropriate domestic, family and sexual violence training.
b. Support workers should be available to provide information during Family Violence Court sittings and to provide follow-up contact where appropriate to ensure that the terms and effect of the intervention order are understood.
c. A service model for the APY Lands should be developed and implemented.

Recommendation 61

The Courts Administration Authority and South Australia Police develop and implement a model to deliver consistent, clear and accessible information to protected persons and respondents about the terms and effect of an intervention order as required by section 17 of the *Intervention Orders (Prevention of Abuse) Act 2009* (SA). The model should either be:

a. set out in South Australia Police General Orders and court practice notes, or
b. prescribed in the *Intervention Orders (Prevention of Abuse) Act 2009* (SA), consistent with the approach taken in section 110 of the *Domestic and Family Violence Prevention Act 2012* (Qld).

Intervention order conditions

Intervention orders can include different types of conditions. Most are either basic or no-contact conditions:

- A basic order usually includes a condition that the person using violence must not harass, threaten or intimidate the protected person, whether directly or indirectly.
- A no-contact order goes further, preventing any contact with the protected person, including approaching them, or attending specific places.[132]

Vacate orders: a critical gap

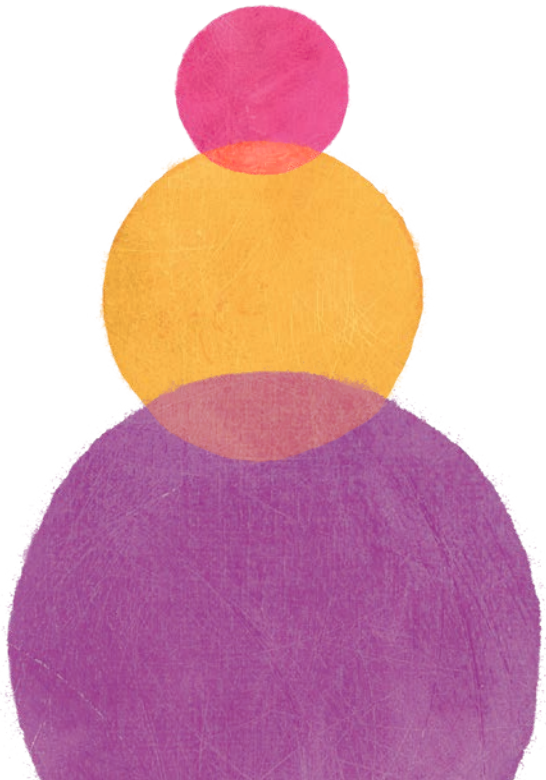
One of the most important protections available is a vacate condition, which requires the person using violence to leave the family home. This is particularly important when the person experiencing abuse wants to remain safely in their home environment.

At present, an interim order may include a vacate condition, but this can be removed through negotiations or by decision of the court, even when safety concerns remain.

A significant problem arises if further violence occurs, especially emotional abuse or controlling behaviour that does not meet the threshold for a separate criminal offence. In such cases, police cannot amend the order to include a new vacate condition. Such a variation can only be made by the Magistrates Court. This process creates delays and puts the protected person at continued risk.

The Commission recommends a change to the law that would allow SAPOL to issue a short-term vacate order at any point, regardless of what is currently in place. This would serve as a circuit breaker, giving immediate safety and time for a more permanent decision to be made by the court.

Such a change would allow the person at risk to remain in their home, and ensure that the person using violence is removed quickly when safety demands it.



Recommendation 62

The Attorney-General, in consultation with the Commissioner of Police, explore amendments to the *Intervention Orders (Prevention of Abuse) Act 2009* (SA) to create a time-limited vacate order.

Tailored conditions

Professor Douglas discussed the need to consider intervention orders as inherently flexible tools to take each individual's circumstances into account when preparing conditions to create safety between the respondent and the protected person.[133] This flexibility has not translated into operational reality due to the large volume of intervention orders that are progressing through FV Courts and other courts. This volume, and the limited time and resources available to further disperse this volume across more prosecutors and magistrates, means there is often little time to adequately consider the individual circumstances of each case and prepare appropriately tailored conditions. The default position is to rely on a list of standard conditions included on SAPOL and court forms (e.g. see Appendix G).

This approach can have detrimental impacts, particularly for those living in regional and remote areas or those from communities with particular cultural expectations. Professor Douglas spoke about how difficult it can be to implement no-contact orders in remote communities with limited essential services and small geographic areas. There is a need to carefully consider what information and detail is needed to prepare a no-contact condition that can be successfully followed. This issue was also discussed in the Powerful Interventions Report which noted that if 'standard conditions are used without careful consideration, this can give rise to breaches of the order'.[134]

The time currently available in the intervention order system to consider the circumstances of each individual matter and prepare conditions specifically directed at creating safety for the protected person is inadequate.

The Victorian Royal Commission into Family Violence recognised the need for time and capacity to consider family violence matters in all courts. Recommendation 68 tasked the Magistrates Court of Victoria with (among other matters) capping lists of family violence matters at a level that allows magistrates sufficient time to hear each matter.[135]

When attempting to better understand the resources made available to the current system when the Intervention Orders Act was implemented, the Commission sought copies of the relevant cabinet submissions. The documents were provided to the Commission under the *Freedom of Information Act 1991* and pursuant to Department of Premier and Cabinet Circular PC031, "Disclosure of Cabinet documents 10 years or older".

The cabinet submission relating to the drafting of the new Act stated that:

> **"The resources required for this proposal will not be significantly greater than those already required to enforce the current scheme of civil restraint for domestic violence.**
>
> **The proposal may result in a slight increase in applications for domestic violence restraining orders and in prosecutions for breach of these orders to the Magistrates Courts, but this will not make a substantial demand on resources nor have substantial staffing implications.**[136]

These statements were largely repeated in the second cabinet submission, but with the note that some additional resources would be needed for SAPOL to establish new procedures and for training, and for the costs associated with an increase of referrals of respondents to intervention programs.[137]

This position on resourcing was updated in 2010. Cabinet was advised that an executive Steering Committee had determined there were significant unfunded costs that presented as a risk to implementation of the Intervention Orders Act. The cabinet note records that a budget submission for $35.277 million over four years had been considered in 2010, and that only $7.785 million over four years was approved. The note suggests the assumptions underlying the $35.277 million figure were an expectation that 3,000 intervention order applications would be considered each year.[138] The Commission identified in Chapter 1 that in 2023-24 there were 3,969 domestic and family violence related intervention order lodgements.[139]

It is important to note this information is from a point in time, and there may have been further investments in the intervention order system since then. What this information does highlight, is the need to ensure that significant reforms to the domestic, family and sexual violence systems are appropriately costed and then funded. This has particular relevance as the South Australian government works towards implementation of the criminalisation of coercive control.

Other inputs received by the Commission, including insights from FV Courts, submissions and listening sessions, make it clear: the intervention order system is underfunded.

In Chapter 2, the Commission recommended the South Australian government convene a working group of all relevant government agencies and services to negotiate a new settlement of roles and responsibilities across the criminal justice and intervention order systems, in light of the proposed implementation of the Coercive Control Bill. This settlement must be accompanied by the resourcing required to give effect to it.

However, this future-focused approach will not fix the immediate lack of capacity within the current intervention order system.

In the meantime, the Commission recommends that government task the same working group with identifying the resources needed to ease pressure on FV Courts and regional Magistrates Courts. This must include setting an agreed benchmark for how many matters should be heard per day, based on the practices of other Australian jurisdictions, and the need for every intervention order application to be considered carefully and thoroughly by all parties to the application and the magistrate.



Recommendation 63

The South Australian government task the working group (see Recommendation 6) with identifying the resources needed to reduce the maximum number of intervention order proceedings considered by a Family Violence Court or regional Magistrates Court to an agreed benchmark per sitting day.

Children on intervention orders

The effectiveness of an intervention order as a safety mechanism to protect against the perpetration of domestic, family and sexual violence is further hindered by an apparent reluctance to include or keep children and young people as protected persons due to a perception that this approach crosses into family law matters.

Section 10 of the Intervention Orders Act clearly states that one of the principles of the Act is that 'it is of primary importance to prevent abuse and to prevent children from being exposed to the effects of abuse'. The Commission heard evidence about the long-lasting impacts of exposure to, and experiences of, domestic, family and sexual violence on children and young people.

> **[U]nderstanding that early relationship with a caregiver, it shapes how we are going to make emotional bonds with others in the future, among many other things, including brain development. But interruptions to that, which is what domestic violence does, severely impacts this. This is where we see kids with anxiety, avoidance, trust issues, regulation issues. So that really is how domestic violence, in the sense of what we see with the kids that we are working with, has an impact, not just on the relationship, it's on all of their relationships. It's every facet of their life education. So what we're trying to do is create a home environment where there is a focus, a resolute focus on the children's psychological and emotional well being that creates a safe environment for all.**[140]

As noted by Embolden in its submission:

> **The expectation that children must maintain a relationship with a person using violence is evidence of widespread lack of understanding of children's experiences of domestic and family violence, which consistently puts children and young people at risk of continued harm. This is evidenced in the safety risks that result from Family Court orders prevailing over intervention order.**[141]

Use of Family Law Act powers

Part of the solution to this issue lies in the education and training of magistrates (discussed in general terms in Chapter 3), particularly around the paramountcy of children's safety and around the use of section 68R of the Family Law Act (described earlier). However, education and training may not be enough. If a magistrate imposes an intervention order prohibiting contact with a child or young person, and there is a family law order already in existence that allows for contact between the respondent and that child or young person, the magistrate should be using the power set out in section 68R of the Family Law Act to suspend or vary that Family Court order. It is entirely unsatisfactory to defer this process to the family law jurisdiction given the entire purpose of the intervention order system is to create safety when there is an urgent need to do so.[142]

The Commission's position is consistent with the views of the House of Representatives Standing Committee on Social Policy and Legal Affairs in the recent FVO Report:

> **Parenting orders that are inconsistent with FVOs can put victim-survivors and children at risk. The state and territory courts should be amending parenting orders that are inconsistent with FVOs to prioritise the safety of children and their caregivers. There are already resources and training to build the capacity of state and territory courts to vary parenting orders under section 68R of the Act, yet courts remain reluctant to step into the shoes of the family law courts.**[143]

This point was also made in Single Mother Families Australia's submission to the Commission:

> **In instances where a conflict arises between the parenting orders and intervention orders, the safety of the children must be prioritised including the referral to 68R of the Family Law Act (1975).**[144]

The 2015 amendments to the Intervention Orders Act, described earlier, have not had the intended effect of encouraging use of section 68R of the Family Law Act. The CAA advised the Commission that, since 2021, only 3 orders have been made under section 68R: 2 in financial year 2021–2022 and 1 in financial year 2023–2024.[145]

The Commission supports the recommendation in the FVO Report for amendments to state and territory legislation to require courts making or varying a family violence intervention order to consider varying parenting orders to prioritise the safety of victim-survivors and children, and to notify the court that made the original parenting order if the parenting order is varied.[146] The Commission recommends the Attorney-General consider how the existing provision in section 23(1a) of the Intervention Orders Act can be amended to implement the FVO Report recommendation.

The CAA should also consider whether intervention order application forms should explicitly identify the ability for the Magistrates Court to amend some Family Court orders, consistent with recommendation 3 of the FVO Report.

Any legislative changes should be accompanied by education and training on the application of section 68R. The Commission understands that the National Domestic and Family Violence Bench Book provides a summary of section 68R as well as some guidance on the use of the provision. The Commission is also aware that the Family Violence court training program, which is run by the National Judicial College of Australia (NJCA) and is co-funded by the Australian, state and territory governments, includes training on the application of section 68R.[147] According to information provided by the CAA, 31 judicial officers (28 from the Magistrates Court and 3 from the Youth Court) and 1 judicial registrar have attended at least one session of this training since 1 July 2020. Training on this issue should be incorporated into the mandatory education and training framework recommended in Chapter 3.

Recommendation 64

The Attorney-General explore amendments to the *Intervention Orders (Prevention of Abuse) Act 2009* (SA) to further strengthen section 23(1a).

Recommendation 65

The Courts Administration Authority consider changes to intervention order application forms to include an option to apply for changes to parenting orders, consistent with recommendation 3 of the Family Violence Orders Report.

Recommendation 66

The mandatory judicial education and training framework (see Recommendation 42) include training on the use of section 68R of the *Family Law Act 1975* (Cth).

Rebuttable presumption

There is also a need to consider levers to ensure children and young people are included on intervention orders, and not just when an intervention order comes before a magistrate. SAPOL prosecutors have an important role to play by including children and young people on intervention orders and advocating more consistently for the inclusion, or continued inclusion, of children on final intervention orders. This should be supported by amendments to any relevant General Orders or Prosecution Practice Notes.

The Intervention Orders Act should be amended to include a rebuttable presumption that children should be included on intervention orders. In Victoria, section 53AA of the *Family Violence Protection Act 2008* (Vic) provides a rebuttable presumption that, if an applicant for a family violence intervention order has a child who has experienced family violence, that child should be included in the applicant's family violence intervention order or be protected by their own order.[148] A similar provision should be adopted in South Australia.

The Commission is aware that the Victorian Law Reform Commission is currently looking at family violence intervention orders and how they apply to children and young people. This is in response to community concerns that 'the courts are taking varying approaches to what happens to a child who is protected under a family violence intervention order when they turn 18, including whether they will continue to be protected by an order, or whether the order is made to expire on their 18th birthday'.[149] Stage 2 of the project will consider how children are given a voice and the ability to participate in intervention court processes.[150] The outcomes of this project should be considered as part of any reform of the Intervention Orders Act to ensure that the voice and agency of children and young people is respected as part of the intervention order process.



Recommendation 67

South Australia Police amend its General Orders and Prosecution Practice Notes to ensure that the safety of children, and their inclusion on intervention orders, is a priority for police and police prosecutors.

Recommendation 68

The Attorney-General progress amendments to the *Intervention Orders (Prevention of Abuse) Act 2009* (SA) to include a rebuttable presumption that children should be included on intervention orders.

Intervention orders and accountability

Intervention orders are a vital form of external accountability. For some people using violence, being brought to court over an intervention order might be the first time someone in authority – beyond police – tells them clearly that their behaviour is unsafe and unacceptable. This can be a critical moment, and one that must be taken seriously and handled effectively.[151]

However, the Commission has heard that this accountability is often weakened in practice. Two common circumstances/issues stand out.

1. Misuse of the court process

In some cases, people use the intervention order system to continue exerting control over the protected person. One way this happens is through delay tactics, for example, by firing their lawyer or failing to engage one at all, which can result in repeated adjournments. This tactic can be used to prolong the legal process and maintain contact with the victim.

These kinds of delays, when allowed to continue, can result in the legal system being a tool of further abuse, rather than protection.

2. So-called 'minor' or 'technical' breaches

Another form of abuse involves repeated breaches of intervention orders that are often labelled as 'technical', such as trying to make indirect contact, or driving past the protected person's home or workplace. While these actions may not involve physical violence, they are deeply connected to patterns of coercive control. In the context of domestic, family and sexual violence, they are rarely 'minor'. These breaches are often used to continue the abuse under the radar, maintaining fear and power over the victim.

> **When police or the courts fail to act on breaches, no matter how small they may appear, it sends a dangerous message: that there will be no consequences. This can embolden the person using violence and could even lead to more serious harm.**[152]

In her evidence to the Commission, Ms Coleiro described how conditions in intervention orders, even those intended to support parenting, can be misused to cause further harm. For example, a protected person may have a no-contact order that allows limited communication about children. This exception can be exploited by the person using violence, who may send multiple messages each day containing the word 'child', to maintain unwanted contact.

Ms Coleiro explained the impact of this clearly:

> **So if that goes to be reported to police, it's seen as, well, it's to do with the children. It's fine, don't worry about it. But for her, every time that phone dings, it provides a response within her, that trauma response. And so she's still living on those eggshells daily. So I think in that sort of situation, the violence can still remain.**[153]

This kind of behaviour is not harmless: it is coercive control. Breaches like this must be treated just as seriously as breaches involving physical violence.

Police, prosecutors and judicial officers urgently need better training and education to understand how coercive control works, and how to identify it in the context of intervention order breaches. This is a key recommendation in Chapter 3.

Additionally, the Commission highlights the need for immediate investment in the intervention order system. Improving capacity will allow:

- prosecutors to gather all relevant information about the breach, and
- magistrates to properly assess the context and decide on the most appropriate response.

This is essential to ensure the Intervention Orders Act is used as it was intended: to protect against all forms of abuse, not just physical violence.

Personal protection injunctions

As discussed above, the intersection between the family law system and the intervention order system can mean that people experiencing violence are caught between 2 court systems: state and federal. The significant financial and emotional burden of navigating both systems was a consistent theme during the Commission's inquiry.

One of the issues that has been raised with the Commission and was the subject of recommendation 8 in the FVO Report is the use of federal personal protection injunctions.[154]

All states and territories have legislation that provides for the issue of civil protection orders that are criminally enforceable. In the federal jurisdiction, the Family Court can make personal protection injunctions (PPIs) under sections 68B and 114 of the Family Law Act, but these orders are not criminally enforceable and the application process can be complex. State and territory police are authorised under the Family Law Act to arrest someone if they believe on reasonable grounds that the person has breached a PPI. However, this power is rarely used and the only way to enforce a PPI is for the person experiencing violence to file an application in the Family Court seeking a further order about the breach.[155]

The criminalisation of PPI breaches has been the subject of ongoing discussion for several years. The 2010 ALRC Report 114 recommended the existing framework for protection orders be amended to provide that a breach of such orders is a criminal offence, as did the Victorian Royal Commission into Family Violence.[156] The FVO Report noted that the former Australian government 'proposed measures to criminalise breaches of PPIs in 2017, but this did not proceed' due to concerns raised about how PPIs would be enforced.[157]

These injunctions can be made by the Family Court for the protection of a person, including in circumstances of family violence. Conditions can include protection from physical violence or harassment, or the exclusion of a person from particular places, such as the family home.[158]

The issue of criminalisation of PPIs appears to have remained on the national agenda as part of the Council of Attorneys-General meetings. At the 29 November 2019 meeting, participants agreed in principle that family law PPIs will be recognised on the National Domestic Violence Order Scheme (NDVOS) and enforced by state and territory police, once Commonwealth criminal offences for breach of these injunctions commence.[159]

In March 2021, the then Australian government introduced the Family Law Amendment (Federal Family Violence Orders) Bill 2021 (Cth) to establish new federal family violence orders which, if breached, would be criminally enforceable. The bill set out the categories of persons who would be eligible to apply for a federal family violence order and the matters that the court must consider when making an order. The bill also proposed state and territory police authority to enforce breaches of federal family violence orders. The Commission understands that despite the Senate Legal and Constitutional Affairs Legislation Committee recommending that the Senate pass the bill subject to further safeguards and considerations of enforceability, the bill lapsed at the dissolution of Parliament on 11 April 2022 and has not been reintroduced at the time of writing.

The FVO Report considered both criminalisation of PPIs and the establishment of federal family violence orders and recommended that 'the Australian government amend section 114AB of the Family Law Act to ensure that the family law courts are empowered to make personal protection injunctions (PPIs) where necessary to protect victim-survivors and children' and that the Australian government 'work with the states and territories to resolve enforceability issues and consider developing amendments to the Act that criminalise breaches of PPIs'.[160] In making this recommendation, the FVO Report stated that 'although PPIs are currently ineffective and largely unenforceable … [t]here are concerns about the workability, enforceability and accessibility of proposals to introduce federal FVOs'.[161]

The Commission supports any work at the federal and state level to reduce complexity for victim-survivors. However, the Commission's preference is that the previous work on federal family violence orders be continued.[162] This would result in a standalone federal family violence order, rather than a PPI which currently forms part of the broader conditions of a family law order, that could be enforced by state and territory police under the NDVOS. This is consistent with the conclusions of the Senate Legal and Constitutional Affairs Legislation Committee, which, in recommending the passage of the bill subject to safeguards and further consideration, stated that:

> **"It is critical that reform such as that proposed in the bill is correctly implemented; the safety of victims, including children, demands it, as does the efficient and just functioning of the family law system. However, it is also important that this bill is passed so that those affected by family violence can benefit as soon as possible from the FFVO regime.**[163]

The Commission recommends that the South Australian government work with the Australian Government to reinvigorate the work of the National Personal Protection Injunction Working Group and the Family Law Amendment (Federal Family Violence Orders) Bill 2021, subject to further consultation and consideration of the issues raised by the Senate Legal and Constitutional Affairs Legislation Committee.

Recommendation 69

The South Australian government work with the Australian government to reinvigorate the work of the National Personal Protection Injunction Working Group on federal family violence orders through the Standing Council of Attorneys-General.

The criminal justice system

The criminal justice system is another external accountability mechanism for people who use domestic, family and sexual violence. As outlined in Chapter 3, the input the Commission received about the criminal justice system was overwhelmingly negative.

> **I have been engaged in a criminal court case against the individual who sexually abused me in my teen years. It has been five years since his arrest and nearly two years since the conclusion of the court proceedings, yet I still await a definitive resolution. The prolonged wait is as distressing as the original incident, and it represents an extraordinarily burdensome experience. I was offered the use of the Police Court dog (generally available for children) as I did not have any support, although the dog could not attend the evidence room with me (I have evidence through CCTV).**[164]

> **The legal system needs to be far tougher on perpetrators, not letting them out on bail and much tougher penalties for breaching AVOs, whether it be prison, ankle tracking etc … It seems that the victim needs to make all the changes and loses out while the perpetrator can carry on as normal. How is that a punishment for the perpetrator?**[165]

> **There needs to be Truth in sentencing. Magistrates & Judges need to all provide sentences that befit the crime, perpetrators past record or behaviour and for the legislative punishment. Too many offenders get less sentences for same/similar crimes against women and children. It needs to be uniformed.**[166]

Many of the recommendations in this report are aimed at improving how the justice system as a whole responds to domestic, family and sexual violence. This section is focused on new legislative levers to improve community education and awareness, behavioural change, and deterrence.



Jury directions and consent

As outlined in Chapter 3, deeply ingrained societal myths and misconceptions about domestic, family and sexual violence have a significant impact on community awareness and understanding of that violence.

Chapter 3 discusses the work conducted by ANROWS in 2023 that compared data from the PSS and the NCAS, which demonstrated the persistent perpetuation of myths and misconceptions about domestic, family and sexual violence.[167] Chapter 3 also discusses the Commission's review of 15 rape trial transcripts, which confirmed that myths and misconceptions about domestic, family and sexual violence continue to be perpetuated in the criminal justice system.

Chapter 3 addresses the need for education and training for those working in the justice system (police, prosecutors and the judiciary) to achieve cultural change, including in relation to the perpetuation of myths and misconceptions in criminal investigations and trials for domestic, family and sexual violence offences. It also addresses the need for improvements in how police and prosecutors work together and develop a common understanding of how to address and challenge myths and misconceptions during an investigation and prosecution without inadvertently reinforcing them.

Aligned to these issues is the need to ensure that the laws relating to consent and jury directions also prevent the perpetuation of myths and misconceptions.

> **"I would like the state of South Australia to recognise, by law, that freezing is just as valid a response as fight or flight when being assaulted and is actually designed by our nervous system to keep us safe in the moment.**[168]

This need has been recognised in recent inquiries, including the Victorian Law Reform Commission (VLRC) inquiry into Improving the Response of the Justice System to Sexual Offences, the Queensland Women's Safety and Justice Taskforce Hear Her Voice inquiry, and ALRC Report 143.[169] Each of these inquiries made recommendations about changes to consent provisions and jury directions.

Reform to consent provisions and jury directions was recently considered by the South Australian government in a review of legislation relating to consent to sexual activity (the SA Consent Review). The SA Consent Review sought feedback between December 2023 and February 2024 on several key issues including the adoption of an affirmative consent model, changes to the list of circumstances in which a person is taken not to be consenting to sexual activity, jury directions and image-based sexual offences.[170] The South Australian government has advised the Commission that it is currently considering the feedback received from this consultation.[171]

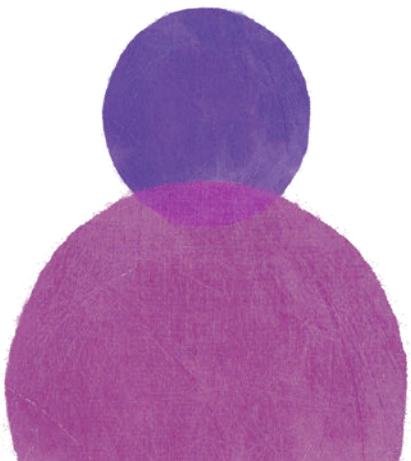
Current state

Jury directions

Members of the community play an important role in the criminal justice system through their participation in jury trials. According to the CAA website:

> **Trial by jury is when twelve ordinary members of the community selected by a ballot conducted in open court sit in judgement of the evidence presented in a trial … The system of trial by jury depends on the broadest possible cross section of the community bringing their life's experiences to bear on the law. The task of the jury in a trial is to judge the facts presented in evidence. The Judge presiding over the trial will direct any jury as to the law and will impose any penalty upon persons convicted after a verdict has been given.**[172]

One of the concerns with jury trials is that members of the community bring with them their own, often deeply held, internal biases and beliefs about gender, sex, consent and sexual violence. As outlined in Chapter 3, these can be based on a range of myths and misconceptions such as 'if the relationship was violent you would have left' or 'you didn't tell him to stop', and can influence a juror's views about the credibility and reliability of the complainant's evidence.



One of the ways to guard against this is through the use of jury directions. Jury directions are a tool used by judges to help jurors understand the law before they decide on a verdict. This is particularly important in trials for sexual violence offences where a jury must decide whether the prosecution has proven beyond reasonable doubt that the complainant did not consent to the sexual activity. Jury directions can be used to help challenge common myths and misconceptions that might influence how jurors make decisions.

Some jurisdictions have developed jury directions to address myths and misconceptions through their common law. For example, in the UK there is a body of law relating to 'counterintuitive directions', designed to allow a judge to address myths and misconceptions in relation to sexual offending. These principles have also been followed in cases in New Zealand.[173] In South Australia, the law around these directions is based primarily in legislation.

Jury directions specific to consent in sexual offences are set out in section 34N of the *Evidence Act 1929* (SA). That section provides that where a lack of consent is in issue, the judge must direct the jury that:

- there is no normal or typical response to non-consensual activity
- non-consensual activity can occur in many different circumstances and is not always perpetrated by a stranger in a public area
- non-consensual sexual activity can occur between different kinds of people, including people who know each other or people who are married or are in an established relationship with one another
- the presence or absence of emotion or distress does not necessarily mean that a person is not telling the truth
- it should not be assumed that a person consented to sexual activity because the person wore particular clothing or had a particular appearance, consumed alcohol or drugs, or was present in a particular location.

Several past inquiries, referred to earlier, have recommended improving these directions.

The VLRC reported that these directions have helped in Victoria, but also pointed out that they do not go far enough. Many false beliefs still influence how juries think about sexual offence cases.[174] The VLRC has recommended further changes to strengthen and expand the direction given to juries.[175]

Hear Her Voice – Report Two spoke about how jury directions 'addressing misconceptions about sexual offending would help to counter out-dated and prejudicial values and beliefs about sexual assault and consent'[176] and recommended that amendments be progressed to address a range of misconceptions about sexual violence.[177]

ALRC Report 143 acknowledged the work to date by Australian states and territories to counter juror bias and incorrect beliefs, but found that further work was needed and that a national approach should be adopted to the 'identification and formulation of relevant jury directions'.[178] The ALRC made 2 recommendations – that the Council of Attorneys-General produce a model bill containing judicial directions to address myths and misconceptions in sexual offence trials, and that a National Judicial Bench Book be developed to support and complement the model bill.[179]

The ALRC considered a model bill to be the most appropriate approach as it would 'encourage the national adoption of a consistent and comprehensive range of jury directions addressing common myths and misconceptions about sexual violence'. It would also 'enable all jurisdictions to benefit from sharing practices, resources, and expertise'.[180]

The SA Consent Review noted that 'there is potential to further expand on the list of jury directions in section 34N of the Evidence Act'.[181] It considered the 2022 changes to the *Jury Directions Act 2015* (Vic) in response to the VLRC recommendations and noted that 3 of the new Victorian directions are not currently included in section 34N of the Evidence Act:

- a direction to address misconceptions about behaviour which is perceived to be flirtatious or sexual[182]
- expanding the list of circumstances where non-consensual activity may take place to include a consumer of sexual content or services and the worker providing the content or services (i.e. the sex industry), and people of the same or different sexual orientations and gender identities
- a direction to address misconceptions about counterintuitive behaviours, such as maintaining a relationship or communication with the perpetrator after non-consensual activity.[183]

Jury directions on myths and misconceptions relevant to domestic and family violence are not currently captured under the Evidence Act – the law only relates to trials of sexual violence offences.[184]

Hear Her Voice – Report One looked at this issue and recommended that:

> **"The Attorney-General and Minister for Justice, Minister for Women and Minister for the Prevention of Domestic and Family Violence immediately progress amendments to the *Evidence Act 1977* modelled on sections 38, 39C-39F of the *Evidence Act 1906 (WA)* to provide for jury directions to be made in proceedings for domestic violence related offences and where domestic violence has been raised in evidence during a trial to address stereotypes and misconceptions about family violence.**
>
> **"This will enable juries to be better informed and able to consider the evidence that has been raised during the trial.**[185]

This recommendation was based on concerns raised during the Taskforce's inquiry about the 'extent to which juries will understand the nature of domestic violence offending, particularly where it constitutes an offence of coercive control'.[186] These concerns included that jurors may not understand the nature of coercive control and that jurors may hold the inaccurate belief that the victim-survivor would have left if they were telling the truth about the domestic violence.[187]

Sections 39C to 39G of the *Evidence Act 1906* (WA) contain jury directions that are designed to proactively address common stereotypes, myths and misconceptions that jurors may have about family violence.[188] The rationale for including these sections was set out in the Explanatory Memorandum to the Family Violence Legislation Reform Bill 2019 (WA):

> **"Research demonstrates that the nature and dynamics of family violence are not well understood in the community. For example, many members of the community do not understand how the dynamics of family violence may impact on the behaviour of victims of family violence, such as why a victim of family violence may remain in an abusive relationship. Consequently, these victims, and any action they may take in self-defence, are often perceived to be irrational or unreasonable. However, research has found that it is not uncommon for victims of family violence to remain in abusive relationships for a variety of reasons, including fear of retaliatory violence, concern for children, lack of finances and/or lack of alternative accommodation.**[189]

Section 39C relates to jury directions for criminal proceedings in which self-defence in response to family violence is an issue (similar to provisions already set out in section 34Y of the Evidence Act), but section 39D relates to any criminal proceedings where family violence is an issue. If requested to issue a direction, by either party, both sections 39C and 39D require the trial judge to give the requested direction unless there are good reasons for not doing so.[190]

Section 39F sets out a long list of additional matters that the trial judge may include in a direction requested under sections 39C or 39D. These include:

- that family violence:
  - is not limited to physical abuse and may include sexual abuse, psychological abuse or financial abuse
  - may amount to violence against a person even though it is immediately directed at another person
  - may consist of a single act or it may consist of separate acts that form part of a pattern of behaviour
- that experience shows that:
  - people may react differently to family violence and there is no typical, proper or normal response
  - it is not uncommon for a person who has been subjected to family violence to stay with an abusive partner, or to leave and then return to the partner
- that behaviour, or patterns of behaviour, that may constitute family violence may include (but are not limited to):
  - placing or keeping a person in a dependent or subordinate relationship
  - isolating a person from family, friends or other sources of support
  - depriving or restricting a person's freedom of movement or action.[191]

In response to the Queensland Women's Safety and Justice Taskforce's recommendations, amendments to the *Evidence Act 1977* (Qld) were made in 2023 and 2024 to insert new jury directions about domestic relationships and domestic violence.[192]

Consent

All Australian jurisdictions have moved away from models that presume consent unless the complainant verbally or physically resists, to more 'positive' models of consent such as communicative models of consent or affirmative models of consent.[193]

In South Australia, a person commits an offence of rape if they engage, or continue to engage, in the relevant act with a person who does not consent or who has withdrawn consent, and the offender knows or is recklessly indifferent to the fact that the person does not consent or has withdrawn consent.[194] Section 47 of the Criminal Law Consolidation Act provides that a failure to take 'reasonable steps' to determine whether a person is consenting can be relevant to an assessment of recklessness.[195]

Consent is defined in section 46 of the Criminal Law Consolidation Act. A person consents to sexual activity if there is 'free and voluntary agreement to the sexual activity'.[196] Section 46(3) lists the circumstances in which a person is taken not to freely and voluntarily agree to sexual activity. These circumstances include where:

- the person agrees to the sexual activity due to force or a threat of force
- the person is unlawfully detained
- the person is asleep or unconscious
- the person is intoxicated to the point of being incapable of freely and voluntarily consenting
- the person is affected by a physical, mental or intellectual condition or impairment such that the person is incapable of freely and voluntarily agreeing
- the person is unable to understand, or is mistaken about, the nature of the activity
- the person is under a mistaken belief as to the identity of the person
- the person agrees because of a misrepresentation as to the use of a condom.[197]

The SA Consent Review considered 2 aspects of the current law – affirmative consent models and the list of circumstances in which there is no consent.

An affirmative consent model requires agreement to sexual activity to be actively sought and communicated on an ongoing basis. A version of this model operates in New South Wales, the Australian Capital Territory, Queensland, Victoria and Tasmania.[198] The adoption of an affirmative consent model by the first 4 listed jurisdictions is relatively recent: 2022 (ACT and NSW), 2023 (Victoria) and 2024 (Queensland).[199]

All other jurisdictions have consulted on the adoption of an affirmative consent model, with the Law Reform Commission of Western Australia and the Northern Territory Law Reform Commission both recommending that an affirmative consent model be adopted.[200] As noted above, the South Australian government is currently considering the feedback from the SA Consent Review.

ALRC Report 143 noted 'considerable differences between models of consent nationally' and stated that 'harmonisation around an affirmative model of consent is the most viable option, given the current direction of reform across jurisdictions'.[201] The ALRC stopped short of recommending immediate action on national harmonisation and instead called for an evaluation of the reforms adopted in each jurisdiction within 5 years of the reforms commencing to identify a best-practice model of affirmative consent.[202] The ALRC recommended the evaluations be provided to the Standing Council of Attorneys-General to consider the adoption of a nationally harmonised model of affirmative consent.[203]

An affirmative consent model places responsibility on the person who initiates the sexual activity to determine whether the other person is consenting, and 'aims to recognise the common "freeze response" to trauma, in instances where the complainant could not physically do or say anything to express that they do not consent'.[204]

Currently in South Australia, the lack of physical or verbal resistance by a complainant is dealt with by way of jury direction under section 34N of the Evidence Act rather than forming part of the consent definition in section 46 of the Criminal Law Consolidation Act. The SA Consent Review has asked whether the definition of consent in South Australia should 'include a positive obligation to obtain consent, consistent with an affirmative model of consent'.[205]

The SA Consent Review has also sought feedback on changes to the list of circumstances in which a person is taken not to consent to sexual activity, and identified potential inclusions from other jurisdictions that are not currently included in the South Australian provision.

Future state

Amendments to the definition of consent in the Criminal Law Consolidation Act and the insertion of broader jury directions in the Evidence Act are consistent with the call to action set out in Chapter 3 regarding the need to guard against the perpetuation of myths and misconceptions during criminal trials.

The South Australian government has already consulted on potential changes through the SA Consent Review. The feedback from this consultation should inform the drafting of the amendments.

In addition to the proposals set out in the SA Consent Review, the Evidence Act should be amended to include jury directions specific to domestic and family violence. It is clear to the Commission that myths and misconceptions about domestic and family violence are still being perpetuated during trials, and there is a need to guard against this both through the levers set out in Chapter 3 and through appropriate jury directions. These amendments should be modelled on the approach taken in Western Australia and Queensland.

The Commission acknowledges recommendation 21 of ALRC Report 143 for the drafting of a national model bill. Even if this recommendation was agreed by jurisdictions and put on the Standing Council of Attorneys-General agenda, the drafting and passage of any model legislation would likely take a significant amount of time. The South Australian Attorney-General could consider supporting this proposal when more information is available, but in the meantime must proceed with amendments to the relevant South Australian legislation.



Recommendation 70

The Attorney-General progress amendments to:

a. section 46 of the *Criminal Law Consolidation Act 1935* (SA) to expand the list of circumstances in which a person is taken not to consent to sexual activity. The amendments should take into account the feedback received from the SA Consent Review.

b. the *Evidence Act 1929* (SA) to:

   i. expand the list of jury directions in section 34N to include directions about other common myths and misconceptions. The amendments should take into account the feedback received from the SA Consent Review.

   ii. provide for jury directions to be made in proceedings for domestic and family violence–related offences to address myths and misconceptions about domestic and family violence. The jury directions should be modelled on the *Evidence Act 1906* (WA).

Facilitation of abuse offence

Current state

> **There needs to be legislation implemented that prevents the family of the offender from harassing the victims. The continual harassment from their family regarding police and children matters needs to be addressed by the criminal and family court. There also needs to be legislation that holds these individuals accountable for not intervening when they witness abuse. I would receive multiple messages telling me how I have wrecked his life for him being charged for assault, for having an intervention order in place. Being told that the abuse me and my children suffer is not as bad as the abuse she had suffered by his father and him.**[206]

The Commission heard that domestic, family and sexual violence can be facilitated by family members and friends of the person using violence, or through the use of private investigators and surveillance devices, particularly where there may be an intervention order in place against the person using violence.

For example, the Australian Refugee Association noted that there can be 'immediate negative repercussions and social pressure from the community and extended family members for women who separate from their husbands. Religious and community leaders often visit the homes of these women and convince them to stay with their husbands.'[207] The Australian Refugee Association also stated that it had 'encountered cases where the primary abusers were the extended family members of the husband and have worked with young women who were confined to their homes by their fathers and brothers'.[208]

Other submissions wrote that:

> **She had received a number of threatening phone calls from [his] friends and family, urging her to drop the IVO or she would be forced to relinquish custody.**[209]

> **Relatives found out that [she] had contacted the police and were very angry. They came to the house and verbally abused her … [she] has received repeated phone calls from [him] and his family members, threatening to kill her if she did not return to be with him. She believes that they may know where she lives and does not feel safe.**[210]

> **He would threaten to kill himself when I would try to leave and recruited his mother into the harassment, he tried to harm himself when I attempted to leave, and his mother screamed at me blaming me and my children.**[211]

Hear Her Voice – Report One recommended comprehensive legislative reform to address coercive control in Queensland, including 'a facilitation offence to stop third parties from committing acts of abuse against victims on a perpetrator's behalf when there is a [domestic violence order] in place'.[212] The Queensland Women's Safety and Justice Taskforce made this recommendation to address what victim-survivors had told the Taskforce 'about their distress at being subjected to abuse not only by their perpetrator but also by the family and friends of the perpetrator and others hired to locate and monitor them'.[213]

On 26 May 2025, coercive control became a criminal offence in Queensland. The enabling legislation inserted a new facilitation offence into the *Domestic and Family Violence Protection Act 2012* (Qld) to make it an offence to engage in domestic violence behaviour or associated domestic violence to aid the respondent in their abuse of the victim-survivor.[214] The offence has a maximum penalty of 120 penalty units or 3 years imprisonment. If a person derives a benefit from engaging in the domestic violence behaviour, such as a private investigator, the penalty increases to a fine of 240 penalty units or imprisonment for 5 years.[215] Related amendments were made to the *Security Providers Act 1993* (Qld) to achieve:

> **the policy objective of implementing recommendation 77 … which is to include a conviction for the new facilitation offence in the DFVP Act (recommendation 75) as a 'disqualifying offence' for a private investigator's licence.**[216]

The enabling legislation also amended section 56 of the *Domestic and Family Violence Protection Act 2012* (Qld) to add a standard condition on protection orders and police protection notices to prohibit a respondent from organising, encouraging, asking, telling, forcing or engaging another person to do something that, if done by the respondent, would be domestic violence against the protected person.[217]

In South Australia, the Intervention Orders Act provides that the conditions of an intervention order can prohibit the respondent from engaging in certain behaviours, and can prohibit the respondent from causing or allowing another person to engage in the prohibited behaviours.[218] Facilitation-type behaviours may also be captured under the Criminal Law Consolidation Act whereby a person who aids, abets, counsels or procures the commission of a criminal offence is liable to be prosecuted and punished as a principal offender.[219]

Future state

The introduction of a new criminal offence can be a lever to promote education and awareness of the behaviour and a message that it will not be tolerated. This rationale was justifiably relied on when a standalone offence of strangulation in a domestic relationship was introduced, and has equal application to the creation of a new facilitation of abuse offence.

A facilitation of abuse offence should be included in the Intervention Orders Act, aligned with the model used in Queensland. The offence will serve the dual role of holding those who are prepared to perpetuate abuse on behalf of others to account, and will also allow for the collection of data about the prevalence of this conduct. As is the case with the Queensland offence, the new South Australian offence should be limited to adults to ensure that children and young people are not inadvertently criminalised due to coercion from parents or family members.

Consideration should also be given to amendments to the *Security and Investigation Industry Act 1995* (SA) to allow for a conviction for the new facilitation of abuse offence to disqualify a person from holding an investigation agent's licence.

There is broader range of professionals who could, through their conduct, facilitate a breach of an intervention order. Page 457 sets out one account of what is described as 'over a hundred' emails being sent by a respondent's lawyer, in what the victim-survivor perceived to be an attempt to circumvent a no-contact intervention order. Regulators for all professions should make sure their profession is aware of the new offence, and of the way a professional's work and conduct could be used by a person using violence to breach the conditions and overall intent of an intervention order.

Recommendation 71

The Attorney-General progress amendments to the *Intervention Orders (Prevention of Abuse) Act 2009* (SA) to introduce an offence of facilitating a breach of a domestic violence order on behalf of the respondent to the intervention order. The new offence should be limited to adults to ensure that children and young people are not inadvertently criminalised due to coercion from parents or family members.

Consideration should also be given to amendments to the S*ecurity and Investigation Industry Act 1995* (SA) to make it clear that a conviction for this offence would disqualify a person from holding an investigation agent's licence.

Good character evidence

The final reform relating to the criminal justice system relates to what is known as 'good character evidence'.

Current state

A person charged with a criminal offence, including a domestic family or sexual violence offence, may use evidence of their good character in a trial for that offence.[220] 'Good character' commonly includes evidence that the person has no prior criminal convictions or no prior involvement with police, or evidence given by another person which effectively amounts to a character reference.

At trial, good character evidence can be taken into account when considering the likelihood of the defendant committing the offence. Good character evidence may also be taken into account when assessing the defendant's credibility. In a trial by jury, the judge will direct that the jury can rely on the evidence in these ways, but may also remind the jury that people do commit crimes for the first time and that evidence of previous good character cannot prevail against evidence of guilt that they find to be convincing.[221]

A person may also use evidence of their good character when being sentenced for a criminal offence. Section 11(1) of the Sentencing Act allows for 'the defendant's character, general background and offending history' to be considered by the sentencing court when considering sentence.[222] This can include information in favour of the accused ('good character') or against them. The exception to this rule is set out in section 11(4) of the Sentencing Act, which provides that a sentencing court may not have regard to any good character or lack of previous convictions of the defendant if the defendant is being sentenced for a child sex offence (as defined) and the court is satisfied that the defendant's alleged good character or lack of previous convictions was of assistance to the defendant in the commission of the offence.[223]

While there is common-law support for the proposition that prior good character is of little significance where offenders used that good character to engage in their crimes, the legislation only specifically excludes its consideration in relation to sexual offending against children.[224]

The use of good character evidence in sentencing has received attention in recent times. The New South Wales Sentencing Council is conducting a review of the use of good character evidence in sentencing proceedings, and has been asked to consider the experience of victim-survivors when evidence of good character is admitted. [225]

The review was commenced against a background of public dissatisfaction with the laws, including the 'Your Reference Ain't Relevant' campaign. The campaign seeks to remove consideration of a lack of criminal history and the provision of good character references during sentencing for all child sexual offences, and generated a petition that attracted 4,340 signatures. It has been launched across most jurisdictions of Australia.[226]

In ALRC Report 143, the ALRC explained that it 'received submissions that the law on character evidence – which in some situations allows for consideration, in sentencing, of the "good character" of the person who has been convicted of a sexual violence offence – is problematic'.[227] One reason for this observation was the inconsistency across different jurisdictions in Australia. However, the ALRC also noted the campaigns to further limit using good character evidence, both in sentencing for child sexual abuse cases (to remove the need for the alleged good character to be of assistance in the commission of the offence) and more broadly in sentencing for any sexual offence cases.[228]

In its submission to the ALRC, Rape and Sexual Assault Research and Advocacy (RASARA) explained:

> **Many rape and sexual assault offenders possess behavioural characteristics which align with courts' understanding of "good character". Employment, family and community engagement are mechanisms that perpetrators can use to commit offences, but more importantly, which are usually maintained during and despite their offending – therefore offering no logical proof of good character, let alone speaking to prospects of rehabilitation or recidivism.**
>
> **Compounding these considerations is the impact of good character evidence on survivors, whose credibility is undermined and weaponised during the offender's trial … A community can hardly be said to denounce rape or sexual assault if their support is tendered as evidence in support of the person who committed those offences.**[229]

The Commission received similar input during its inquiry:

> **Victim-survivors and advocates are calling for good character references to be abolished for convicted sex offenders – stating it's a harmful myth that good character can coexist with such crimes. For them, these serve to minimise the impact of the offending and undermine their trauma experiences and the resultant harm.**[230]

> **Character references in court – I don't know why this is still a practice. It's already hard enough when people blindly side with the abuser, but to allow this kind of 'popularity contest' into a court room?**[231]

The ALRC did not make recommendations relating to good character evidence at sentencing in its Report 143, instead concluding that the outcome of the NSW Sentencing Council review should inform any further reform.[232]

The use of good character evidence in sentencing has received less attention in cases involving domestic and family violence, but the concerns are just as relevant. The NSW Sentencing Council is reviewing how good character evidence is used in domestic violence cases. Its consultation paper explores the significant harms caused by domestic and family violence, and the rates of reporting, and outlines possible options for reform.[233]

Submissions received by the NSW Sentencing Council drew comparisons between domestic violence and child sexual offences. In particular, a submission from Women's Safety NSW noted:

> **It is also the case that perpetrators of domestic and family violence often present as "good guys" and positive contributors to the community even whilst perpetrating violence and abuse behind closed doors at home. This can in fact serve as a barrier for women and children seeking safety and support as friends, family members and community may not believe them when they disclose the violence and abuse they are experiencing.**[234]



Future state

The argument that someone of good character is less likely to commit offences involving either sexual or domestic and family violence has the potential to perpetuate common myths and misconceptions about the nature of these types of offences and who commits them. The argument is particularly problematic when it is the good character of a person that has allowed the offending to go undetected.

It is essential that current laws reflect updated research and evidence about the nature of domestic, family and sexual violence and the people who use that violence. Accordingly, the Commission recommends the South Australian Attorney-General conduct a review of good character evidence in sentencing.

In making this recommendation, the Commission notes that the laws surrounding good (and bad) character have a long history at both common law and in legislation. There is further complexity because different legal principles may apply to different types of 'good character' evidence.[235]

The review currently being undertaken by the NSW Sentencing Council appears to be extensive and is considering several options for reform.[236] For that reason, the Commission agrees with the approach of the ALRC and recommends that the outcome of the Sentencing Council review should inform any review and subsequent reform in South Australia.

While the use of good character evidence at sentencing has been given consideration in recent times, there appears to be little (if any) consideration of the use of this kind of evidence at trial. As is explored in Chapter 3, evidence that is relied on to establish something that is now known to be a myth or misconception can have significant impacts on a criminal trial, victim-survivors and the community more generally. It is now known that many people do not report domestic, family or sexual violence, and people who appear to the public to have 'good character' may be using that violence behind closed doors.

The Commission further recommends that the review of the use of good character evidence include consideration of the use of good character evidence at trials for domestic, family and sexual violence offences.

Recommendation 72

The Attorney-General undertake a review of how character evidence is being used in sentencing and at trial for domestic, family and sexual violence offences, with a view to ensuring that the laws reflect current research and evidence about the nature of domestic, family and sexual violence and the people who use that violence. The review should take into account any recommendations of the NSW Sentencing Council in its review of the law relating to the use of good character evidence in sentencing proceedings.

Accountability and responsibility through intervention programs

Intervention programs and behaviour change programs present a rare opportunity to simultaneously meet the 3 goals for people using violence: holding them accountable, keeping them in view, and affording them opportunities to take responsibility for and end their use of violence. To achieve these goals, intervention programs must exist as one component of a broader system, or web, of accountability.

There are many different intervention and behaviour change programs available across Australia, using a wide range of approaches and methodologies. However, not all programs have the same level of evidence behind them, and their outcomes can vary. This variation has led to ongoing debate about the overall effectiveness of such programs and whether they are achieving the intended impact.[237]

The need for a better evidence base for these programs was identified during the Rapid Review. The Expert Panel made recommendations around improving prevention through learning and data, as well as improving prevention through responses, including:

> **the Commonwealth and state and territory governments to take targeted efforts to address the significant gaps in responses to people who use violence. This should include … improving the national evidence base, quality, capability and supply of men's behaviour change programs, including through a focus on continuous improvement.**[238]

While there is a recognised knowledge gap regarding the use of violence and the efficacy of behaviour change programs, national standards and existing research are available to support evidence-based program design, and effective monitoring and evaluation. The National Outcome Standards for Perpetrator Interventions (NOSPI) were endorsed by the Council of Australian Governments in 2015 and provide 6 headline standards to guide perpetrator interventions and measure their outcomes. They are:

- women and their children's safety is the core priority of all perpetrator interventions
- perpetrators get the right interventions at the right time
- perpetrators face justice and legal consequences when they commit violence
- perpetrators participate in programs and services that change their violent behaviours and attitudes
- perpetrator interventions are driven by credible evidence to continuously improve
- people working in perpetrator intervention systems are skilled in responding to the dynamics and impacts of domestic, family and sexual violence.[239]

Along with the NOSPI, there is research available to support good program design and logic, along with how best to evaluate and improve existing programs.[240] While there is variation in the approaches adopted in different intervention programs, some programs do use evidence-based methodologies for their program design. These include psychological and psychosocial models, such as cognitive behavioural therapy and motivational approaches, along with intersectional approaches that address substance misuse and other risk factors.[241]

There are 3 main pathways that may lead to engagement in an intervention program for people at risk of, or currently using, violence:

1. help-seeking behaviour – engaging with services on their own initiative
2. referral into programs – voluntarily engaging with programs following a referral
3. intervention and correctional programs – participation mandated by courts or corrections.[242]

Although court-mandated and correctional intervention programs may support better completion rates than voluntary programs, it is important to remember that many people using violence do not come to the attention of the criminal justice system. This means that voluntary programs in the community that address the use of violence, along with programs that support people with family relationships, parenting capacity, mental health, substance misuse and problem gambling, all represent crucial early intervention opportunities.

Current state

The Commission has heard a great deal of advocacy specifically for the introduction of more intervention programs:

> **I believe the focus equally needs to be on the perpetrator … There is funding for victims to access counselling I believe this should equally for the perpetrator, mandatory and ordered by the courts. If a person is arrested and denied court bail whilst on remand the perpetrator is ordered to complete intervention by way of intense therapy/ counselling relative to their circumstances i.e. drugs or alcohol, violence.**[243]

> **Programs for perpetrators are difficult to find, many services state they are delivering domestic violence intervention however they are more catering for generalised anger management … Victim services are essential however so are perpetrator services – without a high level of investment in such services and programs being readily available and accessible to perpetrators there is not really much hope for addressing the issue.**[244]

> **Once the woman leaves the relationship, another women will present in a relationship with the same man displaying the same behaviours. Her leaving DV has taught him nothing, and he will continue to impact many victims … Locking him up does nothing as prison counselling is not mandated … There needs to be rehabilitation for perps. Or once they get let out the cycle will just continue.**[245]



This call to action has also been clearly made by agencies and services that work with people experiencing violence:

> **There must be greater availability of and access to early intervention and behaviour change programs. People who use violence, or are concerned about their behaviour, and are motivated to change must be supported. They must be encouraged to address harmful behaviours in a preventative rather than a punitive context. It is critical that a range of supports, and early intervention programs are readily available. Public education campaigns must include information about such.**[246]

> **We strongly advocate for increased government investment in new programs and trials to develop effective prevention, early intervention and post-violence interventions. A continuum of intervention options must also include outreach programs, including support and case management, and therapeutic counselling whilst in, and when exiting, prison. We also highlight the need for post-intervention services which change the trajectory of risk of persons using violence in the long term, complementing multiple intervention modalities with intensive, integrated, and ongoing case management and support.**[247]

> **There is a requirement for more mandates for perpetrators through the courts to attend DFSV Education, parenting education programs, drug, and alcohol counselling etc. This should include accountability consequences if they do not attend. Again, structural funding adjustment is a prerequisite, and such programs need to be developed and based on best-practice evidence.**[248]

> **Intervention programs that are integrated and multidimensional and trauma informed must be accessible for health care providers to refer people. These programs should ensure confidentiality and be culturally tailored and sensitive.**[249]

> **Expand Intervention Services for Perpetrators. Strengthen and expand the service system (in community and correctional settings) to ensure accessible, effective interventions for individuals known to use violence. This includes people (mostly men) who are subject to domestic violence Intervention Orders, those who are on bail charged with domestic, family and sexual violence offences, those who have been subject to police attendance related to domestic, family, and sexual violence, self-identified individuals seeking help, and those referred for support. Tailored interventions are required to address intergenerational trauma, current co-morbidities and behaviours associated with violence, ensuring long-term behavioural change, including recovery from childhood trauma.**[250]

> **The specialist sector knows that we cannot arrest our way out of violence against women and girls. While perpetrator accountability through the criminal justice system is important, our responses to men using violence must have a broader focus to genuinely meet the needs of victim-survivors and prevent future violence.**[251]

> **If a man is hurting – if he's carrying trauma, shame, or disconnection – it affects everything within his life. And sometimes, that pain comes out as violence. Not because he's evil – but because he's unwell, unhealed, and unsupported.**[252]

The Commission often heard that some victim-survivors don't want to leave their relationship or sever ties with family members, they just want the violence to stop. For this reason, intervention and behaviour change programs can be an important pathway to safety. While people experiencing violence will want and should have access to a range of outcomes, including criminal justice outcomes, alternatives to criminalisation and incarceration can be particularly important for some individuals and communities. This can be true particularly for Aboriginal communities, which are disproportionately impacted by domestic, family and sexual violence and are over-represented in the criminal justice system, and for some people experiencing family or carer violence. In its submission, the Family Violence Legal Service Aboriginal Corporation South Australia wrote:

> **It is important to recognize that some women do not want to leave their partners; sometimes, all that is needed is a safe space where they can stay temporarily until tensions subside. However, current family violence services often require victim-survivors to commit to leaving their partners in order to access housing and other supports. Empowering victim-survivors by providing them with choices rather than imposing requirements is crucial.**[253]

The Aged Rights Advocacy Service (ARAS) wrote in their submission that:

> **ARAS has commonly found that the victims of abuse of an older person want the abuse to stop, but not necessarily for a perpetrator to face criminal sanctions. A perpetrator might be the sole carer for the victim in their home, and if they are taken away there will be consequences for the victim, including isolation or a need to move into residential care.**[254]

These issues are also referred to by those who advocated for the Commission to consider diversionary options for people charged with domestic and family violence offences.

> **Consideration must be given to the limitations of the criminal justice system in addressing the needs of people experiencing domestic, family and/or sexual violence. We believe that victim survivors should have the choice, agency and support to pursue justice outcomes aligned with their needs and beliefs, whether that be criminal prosecution and/or other restorative justice options.**[255]

> **Justice responses should also seek to accommodate the different needs and interests of victim-survivors and employ, where appropriate and safe to do so, different forms of accountability for perpetrators. These might include community sanctions and restorative processes, alongside legal sanction, and perpetrator intervention.**[256]

The introduction of a diversionary program for domestic and family violence was supported by the South Australian government, which wrote:

> **Diversionary programs could address domestic abuse in a way that focuses on early intervention and rehabilitation. These programs aim to reduce recidivism, address underlying issues such as substance abuse or mental health problems and promote safety of the victim-survivor and accountability of the perpetrator. They can include counselling and therapy, education programs, substance abuse treatment, support services for the perpetrator as well as monitoring and compliance to ensure the perpetrator adheres to any programs requirements and is making progress in their rehabilitation efforts. Engagement with these diversionary programs can be the outcome of restorative justice.**[257]

The Commission received input from people attending intervention programs in South Australia. Men participating in one of the CAA's Abuse Prevention Programs (APPs) spoke about its positive impact on their lives and relationships.[258] A group of men on remand who were voluntarily participating in a pilot program focused on domestic and family violence and substance use expressed that the program was helpful, and that they would benefit from similar support in the community.[259] Men participating in the Family Violence Intervention Program in Mobilong Prison spoke about the lack of available programs for domestic and family violence, particularly while on remand or serving short sentences. One participant advised that he was in prison for a seventh time, and that this was his first opportunity to undergo the program.[260]

Inputs were also received about the need for different programs beyond those directed at men who use violence in intimate partner relationships. The CAA identified in its submission that intervention programs are needed for a greater diversity of South Australians:

> **Access to the APP is limited to men who are perpetrating violence against a current or former female partner. There is no mandated programming provided to people perpetrating violence in LGBTIQA+ relationships. SA GBTQ (Gay, Bisexual, Trans and Queer) men and non-binary/gender diverse people currently have limited access to an online MBCP offered by Thorne Harbour, which is voluntary in nature. Further, there are no mandated programs available targeted at women perpetrating DFSV against other women, men and non-binary people in an intimate partner context. There are also no mandated programs targeted at men or women who are perpetrating violence against children or other family members, but not a current or former intimate partner.**[261]

Thorne Harbour Health, a LGBTQIA+ community controlled organisation that delivers intervention programs in Victoria wrote that:

> **Men's behaviour change programs can be inaccessible to, and inappropriate for gay, bisexual, queer and transgender men who use violence. They are also unlikely to understand, or address, unique factors and dynamics that existing in GBQT+ men's intimate relationships. More healthy relationships programs generally are needed; however, these need to be inclusive of LGBTQIA+ relationships, and recognise homophobia as a factor in shaping rigid gender norms which drives DFSV.**[262]

Finally, a related issue to engagement in intervention programs is the lack of supported accommodation for people using violence:

> **It is essential to develop a range of perpetrator-focused approaches in regional and rural locations to effectively break the cycle of abuse. This includes creating crisis housing for perpetrators to ensure the immediate safety of women and children while allowing interventions to address the underlying issues driving violent behaviour. Effective perpetrator interventions must take a holistic view of the family, recognizing the role of trauma and other contributing factors in men's use of violence. Tailored, targeted interventions that address the specific needs and circumstances of men in these communities are critical to effectively safeguard women and children while working toward long-term change.**[263]

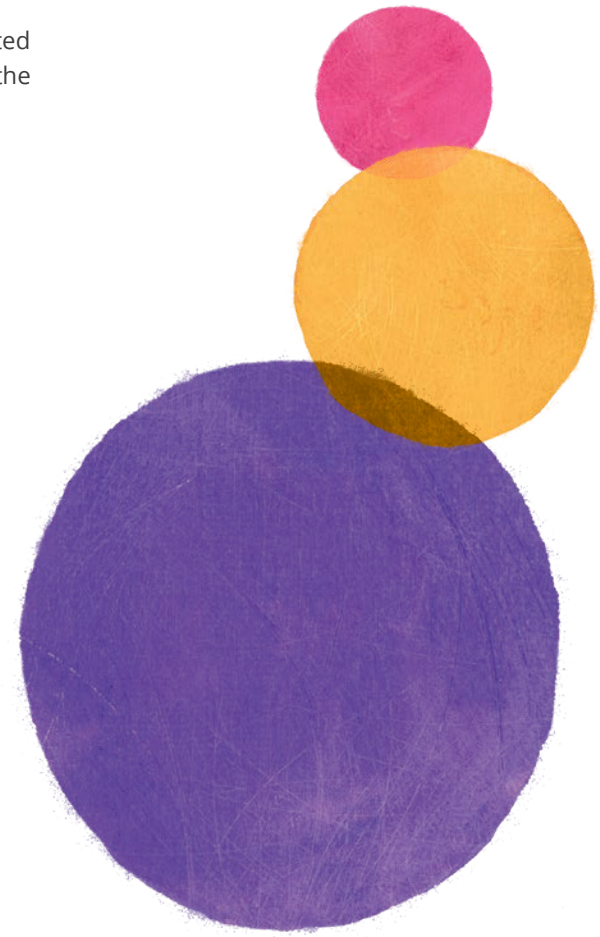
> **Expand, fund and equitably distribute perpetrator accommodation options through a culturally responsive wellness centre approach.**[264]

> **A best practice model would remove the man who uses violence from the home or community as needed, rather than the victim-survivor. Men who use violence should be referred to men's accommodation services and to men's services that offer counselling both face to face, over the phone or both.**[265]

The need for accommodation options for people using violence was recognised by the South Australian government in its submission:

> **With greater restrictions on access to bail, there is an increased need for more alternative bail accommodation options for people who have had allegations made against them. Such bail accommodation requires inbuilt mental health and culturally appropriate support services, including safe, non-judgemental programs focused on education and rehabilitation to address the underlying stressors that contribute to domestic, family and sexual violence and encourage the development of insight into healthy relationship behaviours. This is needed to prevent incarceration rates that continue to be at high levels (particularly for Aboriginal people). There is also a need to establish a dedicated bail accommodation service for women.**[266]

The current state for each of these issues – availability of intervention programs, supported accommodation and diversionary models in the sections that follows.



The current state of intervention programs and diversionary schemes

Mandated intervention programs

In South Australia, a number of existing intervention, behaviour change and correctional programs are available for people using domestic, family and sexual violence. Most of the existing programs and services are almost exclusively focused on men's behaviour change in the context of intimate partner violence, which is unsurprising given that men are much more likely to perpetrate intimate partner violence. Currently, South Australia's government-funded intervention programs are tied to the legal and criminal justice systems. These include the CAA's APP, as well as programs for people in custody or under the supervision of the Department for Correctional Services (DCS), who have been sentenced for serious domestic violence and sexual violence offences. Given these programs are tied to legal and justice systems, participation can be mandated, and non-participation can result in penalties, such as a monetary fine, or be reflected in decisions regarding sentencing or parole.

Mandatory intervention programs, linked to the criminal justice system, present a clear opportunity to achieve the 3 goals of accountability, responsibility and visibility for people who have used violence. While voluntary and socially mandated programs are important, especially for people who have not come into contact with the criminal justice system, they generally rely on the person using violence to sustain their interest and participation. This can result in high attrition and non-completion rates, especially if the 'social mandate' falls away. Court-mandated programs, on the other hand, can enjoy high completion rates, particularly (and not unexpectedly) in correctional facilities, but must contend with some participants being less motivated to attend for genuine reasons.[267]

The Abuse Prevention Program

The APP is a key component of South Australia's FV Court. It was first established in 2011 to coincide with the commencement of the Intervention Orders Act. The APP provides a range of intervention programs targeting male defendants of domestic violence intervention orders, and men on bail for offences relating to intimate partner violence. The APP has changed significantly since it was first established, most recently 'in line with changes to best practice and new considerations for domestic violence responses, including coercive control'.[268]

A crucial feature of the APP is the Women's Safety Contact Program, which is run in tandem to the men's programs, to provide safety and support to current and former partners of the men participating in the APP. The Women's Safety Contact Program is currently contracted to and run by WSSSA.

The APP as it currently operates relies on both CAA staff and NGO providers. Magistrates presiding over FV Courts may use their discretion to refer a defendant for an assessment to determine whether they may benefit from participation in the APP. The assessments are completed by APP case managers, employed by the CAA and embedded in FV Courts. Participants who are assessed as eligible for participation in the APP are then referred to one of a number of programs run by KWY or RASA, the core of these being RASA's Reset2Respect, and KWY's My Journey.

Both RASA and KWY deliver a range of programs to suit different needs, mostly relying on group settings, but also including one-on-one counselling for people with language barriers or complex needs, and condensed intensive courses for Aboriginal men in regional settings.[269]

The Commission heard evidence from Mr Jonathon Main, Executive Manager of Trauma, Resilience and Wellbeing Services at RASA, on Day 4 of public hearings, about Reset2Respect and its focus on helping men understand their behaviour and 'the attitudes and values that contribute to violence'. Participants explore:

> **what are the values and ethics around what it means for them to be a man. How do they reconcile notions they've grown up with about needing to be in control, for example, people needing to be the provider, needing to solve problems, you know, the sorts of things that commonly are constructed as gender-required stereotypical roles for men, and recognising that actually relationships are different to that, and for them to realise that those ideas actually haven't got them to a level of intimacy and loving and caring that they have wanted, and in fact what they've noticed is that they're now at a point where they're invariably have separated or at risk of separation, their children are scared of them. So, helping men get in touch with their values and ethics around who they are and how that might be different from the values and ethics of the parents they grew up with or the fathering they may have experienced as a child.**[270]



The APP is not a diversionary program in that participation is not directly attached to criminal offending and sentencing outcomes. Instead, participation in the APP is mandated as a condition of a defendant's intervention order or bail agreement. A breach of the condition to attend for assessment and participate in a program can result in a monetary fine or a sentence of imprisonment. Referral into the APP is not an admission of guilt for any substantive offences associated with the intervention order or bail, and magistrates may consider completion of the APP favourably when sentencing. Mandatory participation in the APP is contingent on the intervention order or bail agreement remaining in place – if the order and/or charges are withdrawn, the defendant is no longer obliged to complete the program.

A 2025 review of the APP provides valuable data about referral rates and participation rates, as well as demographic information about participants. The initial findings report found that between 1 November 2021 and 30 June 2024, magistrates referred under half (45%) of all eligible intervention order defendants for assessment. The vast majority of referrals made (82%) were from magistrates in metropolitan courts.[271]

There were 2,157 referrals to the APP, of which 1,271 (59%) participants were recommended for a program. Of the 919 participants who attended at least one session, 491 (53%) completed the program. This means that of the 2,157 men initially referred for an assessment by a magistrate, 23% completed a program, and of the 1,271 men who were assessed as suitable, 39% completed a program.[272]

The initial findings report shows that the APP participants had intersectional and sometimes complex needs. Among participants, 66% identified as Australian, 11% as Aboriginal and 19% as from a non-English speaking background.[273] Participants had lower levels of non-school qualifications (21%) when compared to the broader population (63%), and were less likely to be employed (56%) than the broader population (71%).[274] One or more mental health issues were reported by 35% of participants, and 66% reported using at least one type of substance on a casual, monthly, weekly or daily basis, most commonly alcohol, cannabis and methamphetamine.[275]

The 2025 review process included stakeholder interviews, in which stakeholders 'demonstrated a very positive view of the operation and impact of the APP'.[276] On the high attrition rate, the report found that:

> **Although participants can continue in the program after they no longer have a bail condition or intervention order to attend, most will withdraw, resulting in a lost opportunity for education on domestic abuse and strategies to improve relationships. The support provided to protected persons by WSSSA is also finalised when the defendant is no longer on the program.**[277]

The APP stakeholders made several suggestions for improvements, including expanding eligibility to other forms of domestic and family violence, introducing programs for women and LGBTQIA+ people who use violence, specialist training for magistrates presiding over the FV Court, and trialling a specialist Aboriginal family violence list.[278]

The 2025 review of the APP also included an analysis of the outcomes of the associated programs, by comparing reoffending rates (recidivism) with sample groups who were not referred to the APP, who were terminated from the APP, and who were referred and did not commence the APP. The analysis limited the offences of interest for reoffending to domestic, family and sexual violence offences.[279] The analysis showed excellent results, revealing that participants who completed the program had the highest reduction in the number of offences post program – a reduction of 70% as opposed to 35% for the comparison group. The group that was referred to the APP but did not commence was the only group to demonstrate an increase in offending, which rose by 2%.[280] The review found that:

> **The difference in change scores between program completers and the comparison group was statistically significant, suggesting that completion of the program has a greater impact on reoffending levels compared to an intervention order alone.**[281]

The Commission has heard, and the review of the APP has confirmed, that the program faces 3 specific challenges that have impacted the program's overall effectiveness. The first challenge has been resourcing constraints – particularly for the CAA's APP case managers. The demand has led to backlogs and delays in conducting crucial suitability assessments. Demand has also led to program sessions being full, particularly for RASA's Reset2Respect.[282]

The second challenge is inconsistency in referrals to the APP depending on individual magistrates. This finding is supported by the review, which has found that only 45% of eligible intervention order matters are referred to the APP, and that only 18% of APP referrals are from regional courts.[283]

The third challenge is the attrition rate of the APP. The review shows that of the 2,157 men initially referred for an assessment by a magistrate during the review period, 23% completed a program, and of the 1,271 men who were assessed as suitable, 39% completed a program.[284] This significant attrition rate has been attributed to 2 main factors: delays in the assessment process due to resourcing constraints, and participation falling away if the intervention order or bail conditions were withdrawn.[285] Importantly, if a defendant ceases their participation in the APP, the parallel partner contact program also falls away, potentially leaving the victim-survivor without support in a time of elevated risk. The Commission notes that, at present, there is neither a clear incentive for a person to complete the APP, nor a significant penalty for not completing the APP.

Despite these 3 challenges, it is clear that the APP is well valued by the CAA, magistrates and program providers. The demonstrated impact on recidivism is considerable, and indicates that the APP is a model that can be scaled up and built upon to achieve good results for more South Australians.

Department for Correctional Services programs

DCS runs a number of programs relevant to people who have used domestic, family and sexual violence who are under their custody or supervision. These include the Domestic and Family Violence Intervention Program (DFVIP), the Aboriginal Men's Family Violence Program (AMFVP), the Sexual Behaviours Clinic (SBC), the Violence Prevention Program (VPP), and the Cross Borders Family Violence Intervention (Cross Borders) Program. DCS has identified that many participants in their generalist violence programs have also perpetrated domestic and family violence. They are currently revising all of their violence programs in recognition of this. DCS partners with WSSSA and KWY to offer support and safety planning to current and former partners of men participating in DCS programs, as part of a Safety, Accountability and Respect Through Integration model. Most of the DCS rehabilitation programs are delivered by their Rehabilitation Programs Branch, with all clinical staff being degree qualified. DCS uses evidence-based tools, such as NOSPI, the Risk, Needs and Responsivity (RNR) framework, cognitive behavioural therapy and desistance theory, for program design and delivery.[286]

Eligibility to undertake the above programs is determined by a risk of reoffending assessment tool, which is applied to all serious offenders, and individuals with prison sentences of at least 12 months. Clients with risk scores above certain thresholds are then further screened for program eligibility using evidence-based tools. Offenders are also screened for a number of other eligibility factors, for example, cognitive function, literacy and willingness. While there is supporting evidence for the programs developed and run by DCS being of good quality and design, the Commission notes that they are only available to a small number of people who have used domestic, family and sexual violence.

Of particular relevance is the requirement to have a sentence of greater than 12 months before being screened for program eligibility. Many convictions for domestic and family violence result in short (or no) custodial sentences, and offenders are often released on 'time served' meaning the time they have already served in custody while on remand.[287] There is a significant gap in programs for people on remand for domestic, family and sexual violence offending.

The Cross Borders Program is a tri-state program delivered in collaboration between South Australia, Western Australia and the Northern Territory. DCS is the lead agency for the program. The Cross Borders Program was first developed in 2007 for implementation in the NPY Lands, which span the borders of the 3 participating jurisdictions. The Cross Borders Program was developed based on learnings from a successful program being delivered in the Northern Territory and has been continuously improved and updated since 2007.[288]

This program has been designed to be culturally relevant and culturally safe, and accessible to people from remote communities for whom English is not a first language. The Cross Borders Program is delivered in correctional facilities, in communities and on the APY and NPY lands. A 2019 evaluation of the Cross Borders Program found that:

> **"it can be concluded that participants reoffended at a lower rate following involvement in the program. Additionally, participants who attended the program and subsequently reoffended committed fewer violent offences when compared to the period prior to the program.**[289]

There was broad support for this and for the program being more available in the Far North and remote communities.[290] When engaging directly with the Director of the Cross Borders Program, the Commission heard that they were being supported to take a flexible approach, and to deliver culturally appropriate programs with reach into remote communities. The Commission heard that it would be possible to scale up the program, and by doing so extend its availability to more people who are using violence, and also its ability to conduct education and awareness activities in remote communities.[291]

Voluntary intervention programs

Outside of the intervention and behaviour change programs tied to the legal and justice systems, a number of voluntary behaviour change programs are available for people, mostly men, using domestic and family violence in South Australia. As noted earlier, while attendance at these programs is nominally voluntary, participation is often 'socially mandated', through threat of separation, family pressure, or due to the involvement of child protection and family law systems.

RASA offers a number of related programs other than Reset2Respect. RASA's Specialist Family Violence Service provides counselling and support for families who are experiencing violence, and assist people who are struggling with anger or violence in their relationships. The service is available to families, individuals and children, and is inclusive of people in same-sex relationships.[292] RASA also delivers a variety of parenting programs and family interventions, including through the Department of Human Services' (DHS) Child and Family Support System and Intensive Family Services, many of which overlap with families experiencing domestic, family and sexual violence.

Like RASA, KWY offers voluntary intervention programs outside of APP's referral into My Journey. KWY is an ACCO that specialises in delivering culturally relevant and culturally safe family support and domestic and family violence programs, both for people using violence and those experiencing violence. My Journey is a co-designed and culturally appropriate behaviour change program for men that employs a narrative framework and a holistic family intervention response model.[293]

OARS Community Transitions (OARS CT) runs the 'Don't Become That Man' program. The program includes a helpline (operating between 2pm and 7pm Monday to Friday), individual interventions for self-referral and service referral, and crisis accommodation.[294] A variety of behaviour change, family and parenting programs are also advertised by Anglicare SA, Uniting Communities, Uniting Country SA and Baptist Care.[295]

In addition to the phoneline offered by OARS CT, 2 national hotline services are available to men at risk of or using violence.

No to Violence (an NGO not based in SA) run the Men's Referral Service, a national 24/7 hotline for men seeking to change their behaviours. The Men's Referral Service includes the Brief Intervention Service, a flexible, multisession service to provide counselling support and referral options to assist men who have used violence to get further support. The service focuses on telephone support for men who are on a waiting list for behaviour change programs or unable to access support.[296]

MensLine Australia is a national 24/7 hotline providing free telephone and online counselling. MensLine offers the Changing for Good Violence Prevention Program, along with a Post-Men's Behaviour Change Program providing post-program support for men who have completed a program in the past 12 months.[297]

The variety of voluntary intervention and behaviour change programs available in South Australia is promising; however, they are largely fragmented and disconnected from mandated programs (aside from the programs offered by RASA and KWY). The programs range from free to paid services and there is little to no publicly available information to reveal how regularly these programs are available, or their wait times, costs or frequency of use. Finding an online list of behaviour change programs available in SA is challenging, with only No to Violence providing a reasonably comprehensive list on its Men's Referral Service website. Consistent with the inputs to the Commission, desktop research reveals few to no voluntary programs available specifically for women, CALD people and LGBTQIA+ people who want or need help with their use of violence.



Supported accommodation for people using violence

Another reasonably recent development has been the introduction of accommodation options specifically for people using violence. Accommodation for people using violence represents an opportunity to advance the goals of accountability, visibility and responsibility, while also keeping victim-survivors in their homes should they wish to stay there. This ensures that victim-survivors can continue with their normal routine in a familiar environment instead of being directed into crisis accommodation.

Without these options, people using violence who are excluded from their home due to intervention order conditions, bail conditions or tenancy orders may end up homeless. This can increase the risk of reoffending, and can place additional pressure on victim-survivors to allow people using violence back into their homes. During Day 1 of public hearings, Ms Louise Kelly, Deputy CEO of OARS CT, spoke about the strengths of accommodation options for people using violence, stating:

> **I think really key for us is that while the person that's using violence is our client and is the direct recipient of the service, it's actually the victim survivor's needs that drive their eligibility and guide the access to that accommodation. So one of the main benefits is that assuming it's safe to do so, women and children can remain in their own home, they can remain in their local community, school and access to their services and not needing to live in motel accommodation and uproot their lives. It also creates a sense of accountability because the person that's actually creating the harm is needing to shift. They are needing to address that behaviour, recognise and take responsibility for that, and also have that opportunity to change and the belief that change can happen and have those opportunities available.**[298]

A small amount of accommodation is available to people using domestic, family and sexual violence in South Australia. In her evidence, Ms Kelly set out that OARS CT is running a Domestic and Family Violence Perpetrator Response pilot program, which involves 9 crisis accommodation properties for people using violence. The properties are available for one month, with OARS CT developing a pathway from the crisis accommodation into share accommodation, which includes intervention and treatment programs for men using violence.

Support for more accommodation options for people using violence was evident in submissions from DFVSA and Homelessness Alliance members. St Vincent de Paul Society wrote that they have experience accommodating people using violence as a homelessness provider, and that:

> **The current system does not provide adequate support to these men to address the root causes of their violent behaviour or to rebuild respectful relationships with their victims and future partners. Without targeted interventions, this population remains at substantial risk of reoffending, perpetuating the cycle of violence … A considerable proportion of the individuals we support, both survivor-victims and perpetrators, have histories of substance abuse or mental health disorders.**[299]

Accommodation for people using violence was also discussed during listening sessions with service providers who work in the Far North and on the APY Lands. The Commission heard that home detention bail is not supported on the APY Lands. This means that the options for Aboriginal men who are charged with domestic, family or sexual violence are simple bail agreements, home detention bail away from the APY Lands or incarceration. There are no supported bail facilities on the APY Lands that would allow for someone on bail to remain connected with country, culture and community. The Commission heard that appropriate accommodation for people using violence on the APY Lands, if implemented properly, may improve safety in the community.[300]

The South Australian government appears to agree that an investment in more accommodation options for people using violence would be of benefit. In their submission, the South Australian government wrote:

> **More needs to be done to ensure that it is the perpetrator of violence that leaves the family home, rather than the victim-survivor(s) whenever it is safe to do so. The current Domestic and Family Violence Crisis Perpetrator Response Pilot program allows for nine beds in South Australia, with few options available in regional areas. Any increase in the beds available must be accompanied by expansion of therapeutic services available to perpetrators to ensure part of the removal from the home is assistance with behaviour change.**[301]

Diversionary schemes

South Australia delivers several problem-solving courts and diversionary programs for criminal offending caused by social and public health issues. It does not run any diversionary programs for domestic, family and sexual violence.

Court-based diversionary schemes have become a common feature in Australian courts in recent decades, as part of a gradual shift away from a strictly punitive criminal justice system to a more rehabilitative one. Criminal justice diversionary schemes are generally made available for offending that is related to social and public health issues, such as ill-mental health, substance dependence and (more recently) gambling addictions. Diversions often aim to simultaneously hold offenders accountable for their behaviour, address their underlying 'criminogenic needs', and at the same time provide an opportunity for the offender to avoid a more serious outcome such as incarceration.

Diversionary schemes tend to require the offender to complete a therapeutic program or programs while under supervision of the justice system while the criminal matter is adjourned in court. Successful completion of a diversionary program will divert the offender away from deeper contact with the criminal justice system by discharging the court matter without a finding of guilt or recording a conviction. Failure to satisfactorily complete the program generally results in the court matter proceeding to a criminal trial.

Criminal justice diversionary schemes are often a key feature of specialist courts. Specialist courts have their origin in drug courts, which were established following a wave of public support for 'therapeutic jurisprudence', described as 'an approach to criminal justice which seeks to use the court process to enhance and support the possibilities for the treatment of offenders'.[302] Public support for this more therapeutic approach to criminal justice has been aided by the perception that drug courts are 'both "tough" and "effective" in terms of saving money and reducing crime', as well as growing acceptance that 'courts are not providing an effective response to crime in sending offenders to prison'.[303] Drug courts have become known as a type of 'problem-solving court', which apply therapeutic jurisprudence principles to address the underlying causes of crime such as mental health and addiction.[304]

Domestic and family violence is increasingly being accepted as a social and public health issue, rather than strictly a criminal justice issue. The complexity of this violence has been recognised with the establishment of specialist domestic and family violence courts and court lists in most Australian jurisdictions, including in South Australia. Court-based diversionary schemes for domestic and family violence–related offending are emerging in Australia. Victoria has experience running a court-based diversionary scheme that includes domestic and family violence offending; the Australian Capital Territory runs a restorative justice service for domestic and family violence; and Queensland is currently developing a domestic and family violence–specific diversionary program.

The Victorian Criminal Justice Diversion Program (CJDP) has operated statewide since 2001. The CJDP is a court-based pre-plea diversion program, primarily but not exclusively aimed at first-time offenders in the Magistrates' Court of Victoria.[305] The CJDP is available for a variety of offences against the person, as well as property, traffic and drug-related offences, and includes offending in the context of family violence. From mid-2015 to mid-2021, 17% of CJDP cases (n=31,076) involved family violence–related offending.[306] The CJDP involves adjourning a criminal proceeding for up to 12 months while the defendant completes a diversion plan, which can involve good behaviour bonds, participating in relevant treatment or programs, apologising to the victim, paying compensation, and/or donating to charity. To be eligible for the CJDP, the defendant must acknowledge responsibility for the offending; however, this acknowledgement cannot be used as evidence against them should the diversion fail and the matter return to court. Successful completion of the diversion plan results in the criminal charges being dismissed with no finding of guilt. The CJDP has maintained consistently high successful completion rates; currently 93% of diversion plans are successfully completed.[307]

An independent analysis of the CJDP found that in a 5-year period following an outcome, 'people receiving diversion plans were almost half as likely to reoffend (21.3%) as those receiving other court outcomes (40.2%)'.[308] In relation to domestic and family violence offences specifically, the report found that:

> **reoffending rates also remained lower for people who received a diversion plan in cases with and without a family violence flag. For instance, about one-quarter of men who received a diversion plan in family violence cases went on to reoffend (24.1%), whereas that figure more than doubled (to 55.1%) for men who received other court outcomes in family violence cases.**[309]

It is important to note that these results cannot be compared with the recidivism results of the APP. The review of the CJDP used a 5-year observation period, compared with the APP review's median 531-day observation period, and the CJDP analysis included all subsequent offending, rather than domestic, family and sexual violence offences only.

While the CJDP is largely aimed at first-time offenders, the cohort with the highest rate of prior offending was men in family violence cases – almost 47% had received another court outcome in the previous 5 years.[310] Assault was the most common offence type for family violence–related diversions (36%), followed by breaches of intervention orders (25%).[311]

A diversionary scheme for domestic and family violence also features in the recommendations of Queensland's Women's Safety and Justice Taskforce. Hear Her Voice – Report One recommended that the Queensland government:

> **design, establish and adequately resource a state-wide network of perpetrator intervention programs. The network of programs will recognise that intervening to change perpetrator behaviour is essential to keeping victims safe from violence.**[312]

The recommended network of programs is to incorporate a public health approach, and supplement existing parenting and family support programs, provide accessible early intervention programs for men who identify their own problematic behaviour, provide a court-based domestic and family violence diversionary scheme, provide programs for young people using violence, and provide targeted intensive programs for people charged or convicted of domestic and family violence offences, including on remand. The recommendation includes a cycle of trialling, testing and evaluating approaches to build the evidence base and effectiveness of the various programs.[313]

Hear Her Voice – Report One also found that 'there is a need to support a path for diversion into perpetrator programs before the criminal justice system response is engaged', and recommended that the government 'create a new court based domestic violence perpetrator diversion scheme'.[314] Like other diversionary schemes, successful completion of the intervention program will divert the accused away from having a conviction recorded. Implementation of Queensland's diversionary scheme is in progress.

Consideration of diversionary approaches also featured in the Findings of the 2024 NT Inquest. Coroner Elisabeth Armitage noted a 'radical' proposal from the families of Ms Yunupiŋu and Ngeygo Ragurrk that applications for the Northern Territory equivalent of an intervention order 'should be able to be referred for alternative dispute resolution (ADR), with the consent of the person in need of protection, when it is appropriate and safe to do so'.[315] The Coroner considered it appropriate that the NT government consider this proposal.[316]

The future state of intervention programs and diversionary schemes

Intervention programs

One of the key themes throughout this report is the need to build a cohesive system for responding to domestic, family and sexual violence in South Australia, complete with strong and enduring leadership from government to develop a web of accountability.

One part of a web of accountability is a cohesive approach to, and investment in, intervention programs. For these programs to operate successfully, they must be evidence based, coordinated and part of a broader strategy to respond to people using violence. To be effective, they will need to be supported by clear minimum standards and operate as part of a Community of Practice.



Recommendation 73

The South Australian government, in collaboration with the Department for Correctional Services and the Courts Administration Authority, develop minimum standards to apply to any government-funded intervention or behaviour change program for domestic, family and sexual violence. The minimum standards are to:

a. align with the current (and any future) National Outcome Standards for Perpetrator Interventions
b. ensure that intervention programs are evidence based, using effective psychological and/or psychosocial approaches
c. ensure that intervention programs are trauma informed and take an intersectional approach
d. ensure that all intervention programs are relevant, inclusive, accessible and culturally safe
e. ensure that intervention programs correspond with partner contact programs.

Recommendation 74

The South Australian government provide ongoing resourcing and support for a Community of Practice for services and workers providing intervention programs for people using domestic, family and sexual violence.

Scaling up intervention programs

To sustain an enduring focus on people using violence, and afford them with opportunities to reduce and end their use of violence, South Australia must provide a network of effective and coordinated intervention programs, suitable for a broader diversity of people using violence.

South Australia is fortunate to have a number of government and non-government organisations already providing quality intervention programs, being Reset2Respect, My Journey and the Cross Border Program, as well as programs delivered by DCS's Rehabilitation Programs Branch. The Commission supports these programs being scaled up, enhanced and made more broadly available.

In relation to the APP specifically, the Commission agrees with the APP stakeholders that the program should be further resourced and expanded to meet a greater diversity of needs, including LGBTQIA+ people using violence, heterosexual women using violence and people using family violence. The Commission notes that adding more overall capacity to the APP will likely reduce its attrition rate, especially if the CAA's APP case management team is scaled up to sit in more court locations and to conduct more timely assessments.

Adjustments to the APP program should take into account the challenges identified in the 2025 review process.

Another significant service delivery gap in the availability of intervention programs in South Australia is programs for people on remand for domestic and family violence offences. Given that domestic and family violence offences have high withdrawal rates, and that sentences for people convicted for these offences are often so short that offenders are released for time served, this is a considerable service gap. The Commission supports the call for the development and introduction of an intervention program for people on remand for domestic and family violence offences. It is the Commission's view that DCS's Rehabilitation Programs Branch is well placed to develop and implement this program, should they be resourced to do so. Resourcing should also extend to people who exit remand but remain under the supervision of Community Corrections, either through continuation of the on-remand program or supervised referral into the APP.

Recommendation 75

The South Australian government scale up the Abuse Prevention Program and provide it with ongoing resourcing to sufficiently meet statewide demand, including for out-of-hours programs and greater capacity to conduct timely assessment. The expanded program should:

a. include interventions targeted at:
    i. LGBTQIA+ people using violence
    ii. women using violence, including Aboriginal women using violence
b. provide funding for associated partner contact programs
c. include pre-program readiness work to ensure participants have clear expectations and are prepared to engage constructively
d. address the challenges identified in the Abuse Prevention Program evaluation report.

Recommendation 76

The South Australian government scale up the Cross Borders Program and provide it with ongoing resourcing to sufficiently and sustainably meet statewide demand. The expanded Cross Borders Program should include culturally appropriate programs suitable for Aboriginal women using violence.

Recommendation 77

The South Australian government provide ongoing resourcing to the Department for Correctional Services to develop and implement an intervention program or programs for people on remand for domestic and family violence offences. The funding is to include programs for people exiting remand into the supervision of Community Corrections.

Recommendation 78

The South Australian government provide ongoing resourcing for the Courts Administration Authority and the Department for Correctional Services to adopt a continuous improvement model for all domestic, family and sexual violence programs, ensuring that the programs are evaluated for impact and outcomes, monitored for demand, and adjusted to ensure successful operation.

Accommodation for people using violence

Supported accommodation for people using violence is a significant opportunity to hold people using violence to account by putting the onus on them to leave the home; it is a way to ensure visibility, responsibility and behavioural change. It also means families will be able to stay in their homes with less disruption to their lives, if they choose to do so.

Supported accommodation for people using violence also presents an opportunity to better manage intersecting criminogenic needs, in addition to attendance at intervention programs specifically for domestic, family and sexual violence. Accommodation can be accompanied by support and referrals for mental health, trauma counselling, substance misuse, problem gambling and disability assessments where relevant.

The Commission has heard advocacy for the development of safe accommodation options for people on the APY Lands. The Commission was told that people experiencing violence are most often the ones removed from the APY Lands, generally to Alice Springs, away from protective factors such as connection to country, culture and community. Inputs received by the Commission have included suggestions of both safe housing for people experiencing violence and supported housing for people using violence. There may be an opportunity to explore the feasibility of accommodation for people using violence, leveraging electronic monitoring and government-employed staff from DCS. The Commission notes the complexity involved in providing safe and secure accommodation options on the APY Lands and acknowledges that this will require careful consideration by government, in consultation with APY Lands communities.



Recommendation 79

As part of the statewide domestic, family and sexual violence accommodation audit (see Recommendation 103), the South Australian government ascertain:

a. the current availability of accommodation for people using violence in each region
b. the potential demand for accommodation for a diversity of people using violence in each region
c. the availability of a suitable workforce to support people using violence
d. the availability of referral pathways for people using violence.

Recommendation 80

The South Australian government include accommodation for people using violence as part of the statewide domestic, family and sexual violence accommodation register (see Recommendation 104), ensuring that it is carefully delineated and physically separated from accommodation for people experiencing violence.

Recommendation 81

The South Australian government invest in supported accommodation for people using violence, as part of the 10-year domestic, family and sexual violence accommodation investment plan (see Recommendation 105). The supported accommodation for people using violence must:

a. provide sufficient support for, and oversight of, people using violence
b. provide and/or have referral pathways into programs to address violence, trauma, mental health, substance misuse and problem gambling
c. include provision of supported accommodation for Aboriginal people using violence that is culturally relevant and culturally safe, and preferably delivered by, or in partnership with, an Aboriginal Community Controlled Organisation(s).

Recommendation 82

The South Australian government conduct a scoping and feasibility study for the development of a supported accommodation site or sites for people using violence on the APY Lands, and commit to implementing the most feasible approach. The study is to:

a. be conducted in consultation with relevant stakeholders living and working on the APY Lands
b. be conducted with input from the Department for Correctional Services and Cross Borders Program
c. be carried out in conjunction with the scoping and feasibility study for accommodation for people experiencing violence (see Recommendation 108)
d. identify a clear pathway forward for increased safety on the APY Lands through the development of supported accommodation for people using violence and/or accommodation for people experiencing violence.

Development of a domestic and family violence diversionary scheme

The Commission agrees with the South Australian government's assessment that a diversionary scheme for adult domestic and family violence offenders represents an important opportunity for both people using violence and those experiencing violence. For people using violence, a well-designed diversionary scheme has the potential to meet the 3 goals of accountability, visibility and responsibility, and may have a tangible impact on reducing and preventing future violence. A diversionary scheme could give the victim-survivor more agency, more choice, and a pathway for those who want the violence to stop without a criminal sanction.

The enhanced APP provides an excellent foundation for a future diversionary scheme for domestic and family violence. The enhanced APP will already have in place the necessary elements of referral, assessment, program readiness work and a suite of different programs for people using violence. Introduction of a diversionary scheme has the potential to test an alternative use for the APP, while also incorporating other approaches to address risk factors such as ill-mental health, substance misuse and problem gambling.

A diversionary scheme for domestic and family violence also presents an opportunity to provide victim-survivors with more agency. Diversionary schemes can incorporate elements of restorative practice in their design, as demonstrated by Victoria's CJDP. By considering the victim-survivor's view on whether the defendant should be diverted and, if so, what conditions may be set, court-based diversionary schemes can offer restorative practice principles while also meeting the state's need for a suitable justice outcome for the defendant.

A South Australian domestic and family violence diversion would be well positioned in the Magistrates Court's FV Court, which deals with the majority of domestic and family violence offences and intervention order matters in South Australia. Any scheme must include a corresponding partner contact program to provide support to the victim-survivor, and clear mechanisms to ensure the victim-survivor's safety through the use of bail agreements, intervention order conditions and a good behaviour bond that extends well past successful completion of the diversion.

Recommendation 83

The South Australian government develop and pilot a domestic and family violence diversionary scheme in at least one metropolitan and one regional Family Violence Court, leveraging the enhanced Abuse Prevention Program (Recommendation 75) as a foundation for the scheme. The pilot scheme is to:

a. be referred into at the magistrate's discretion, subject to the view and needs of the victim-survivor
b. require the person using violence to accept responsibility for their behaviours (not amounting to an admission of guilt should the diversion be unsuccessful and the matter returned for trial)
c. be available to a diversity of people using violence, leveraging the enhanced Abuse Prevention Program
d. refer suitable participants into a relevant Abuse Prevention Program (with suitability determined by factors including readiness and any co-occurring needs)
e. include referral pathways for co-occurring needs such as mental health, substance misuse and problem gambling where relevant
f. involve suspension of relevant charges during the course of the diversion
g. include joint progress reports to the court provided by both the intervention program provider and contact program provider, along with a periodic check-in with the magistrate
h. be supported by relevant bail agreements and intervention order conditions through the duration of the diversion
i. allow defendants who have successfully completed the diversion to avoid conviction for the substantive offending, otherwise return defendants who have not completed the diversion to court for trial
j. require a minimum 12-month good behaviour bond following successful completion of the diversionary scheme.

Accountability through professional regulators

Current state

One reality about domestic, family and sexual violence that is not always widely understood is that it is used by people from all educational and cultural backgrounds, professions and socioeconomic status. While these acts of violence are heavily gendered, with the overwhelming majority of people using violence being men, the use of violence is not restricted to any particular role or status.

People who use violence can be community leaders, faith leaders, legal practitioners, educators, or those working in professions that are meant to protect others, such as carers, disability support workers, health practitioners and police.

The Pathways to Intimate Partner Homicide report found that fixated threat offenders, despite being jealous, controlling and abusive in their relationships, were 'typically functional or successful in public-facing domains of their life' with many owning their own business or employed in well-respected industries. The study further noted that some offenders 'were also described as being upstanding members of the community'.[317] Examples provided by the study included:

> **The offender in Case 187 was employed as a real estate agent, and the offender in Case 129 was a geologist working in the mining industry. Also, a number of FT offenders, including those in Cases 190, 90, 162 and 200, were described as self-employed and/or running their own businesses. Further, some FT offenders were described as "upstanding" members of their local community. For example, the offender in Case 30 volunteered with local agencies to support migrants and refugees to settle within the community.[318]**

The Commission heard that people who use violence often manipulate systems and relationships to maintain power and control over a person. When those people hold positions of trust or authority, the harm caused can be amplified and extremely difficult to report. The Commission also heard that there can be particular barriers to help seeking where the person using violence is a police officer, given the role of police in upholding the safety of the community.

> **My FDV situation was with a Police Officer, I reluctantly had to make a police report to access (support) ... I was advised by the Senior Constable ... that my information would be locked down and no one could access the report except within their office. Sometime later ... my ex-husband was made aware of my Police Report (by another member of the Police Force) ... I lodged a complaint and was advised that there was nothing (they) could do.[319]**

> **[I supported] a female police officer with a male police officer partner ... who was perpetrating severe and prolonged physical, emotional, psychological, social and financial abuse. Their profession made it impossible for her to seek help from SA Police, specialist family violence services, child protection, private counselling and therapy or legal advice ... without serious personal consequences.[320]**

> **Some police officers are reported as themselves being perpetrators in DFSV; this may on occasion be due to them developing work-related PTSD, which has its own incidence of DFSV but which is not being openly acknowledged, and it is possible to develop PTSD without being aware of it and to continue to work. Police also have a known masculinity culture that may be prejudicial. Self-investigation and self-regulation by police forces and poor independent oversight, regulation and discipline are affecting DFSV responses, and also need to be changed.[321]**

As discussed in Chapter 3, regulators can play an important role in enhancing the ability of professionals to recognise and respond to domestic, family and sexual violence. Regulators also play a critical role in safeguarding the public, particularly in industries where individuals are entrusted with care and safeguarding responsibilities, such as education, aged care, disability support, health care, policing and the law.

Regulatory levers like 'fit and proper person' tests, professional registration schemes and licensing frameworks could be powerful tools for holding people who use violence accountable. These levers allow regulators to assess whether a person is suitable to hold a position of trust and authority, or signal industry standards that prioritise safety and accountability. They also allow for regulators to take action against a person who has engaged in inappropriate conduct, including personal conduct that did not occur in the course of undertaking their professional duties.

What makes a person 'fit and proper' varies across industries but usually includes consideration of criminal convictions, intervention orders, violation of codes of conduct, bankruptcies, mental illnesses, substance abuse, and fraud and tax offences. Fit and proper person tests apply when a person seeks a licence or registration from the regulator, which can sometimes rely on a person 'self-reporting' any conduct that might impact their ability to work in the industry. Regulators may also require the provision of a national police check, a Working With Children Check or an NDIS worker check.

Once a person is licensed or registered, the fit and proper test is generally part of the standard employed by regulators to discipline practitioners.

For example, a legal practitioner can be the subject of disciplinary proceedings for unsatisfactory professional conduct or professional misconduct. The latter includes not only conduct occurring in connection with the practice of law, but conduct occurring in a personal capacity that would, if established, justify a finding that the practitioner is not a fit and proper person to practise the profession of law.[322] Investigations into unsatisfactory professional conduct and professional misconduct are conducted by the Legal Profession Conduct Commissioner who can take a number of actions in response, including requiring the legal practitioner to undertake training, education or counselling, or imposing conditions on the practitioner's practising certificate. The Legal Profession Conduct Commissioner may also, with the practitioner's consent, order the legal practitioner to submit to a medical examination or receive counselling or treatment for substance abuse, or suspend the practitioner's practising certificate for a period of up to 3 months for unsatisfactory professional conduct and up to 6 months for professional misconduct.[323] Longer periods of suspension can be imposed by the Legal Practitioners Disciplinary Tribunal.[324]



The Supreme Court has the power to amend, suspend or cancel a practising certificate if a practitioner is no longer considered to be a fit and proper person to hold the certificate.[325]

A desktop review of the Legal Profession Conduct Commissioner website does not reveal any content specific to domestic, family and sexual violence recognition and awareness. However, it does contain information about inappropriate personal conduct, including sexual harassment, discrimination and workplace bullying, and how it can be reported to the Legal Profession Conduct Commissioner.[326] Reports can be made by telephone or email, or through the new online tool Speak Safely, which enables users to identify themselves or to remain anonymous throughout the reporting process.

Teachers in South Australia must be registered with the Teachers Registration Board. To qualify, applicants need recognised teaching qualifications, must consent to a national police check conducted by the Board, and must be assessed as a fit and proper person.[327] According to the Board's website, a teacher must be 'honest, competent, knowledgeable, skilful, and of good character'.[328]

As part of their registration, teachers are required to notify the Board if any of the following occur:

- they are charged with a specified criminal offence
- they resign or are dismissed due to allegations of unprofessional conduct
- they lose their Working with Children Check
- they are involved in improper conduct relating to a child.[329]

Complaints about a teacher's conduct can be investigated by the registrar and referred to the Board for disciplinary action. The Board states its disciplinary processes aim to 'safeguard the public interest' by ensuring teachers are competent and are fit and proper persons to care for children.[330] If a teacher is found guilty of unprofessional conduct, or is deemed unfit to hold registration, the Board may:

- impose conditions on their registration
- suspend their registration
- cancel their registration altogether.[331]

The registrar also has authority to suspend or alter a teacher's registration if the teacher has been charged with a prescribed offence (including violence, sexual or indecent behaviour, dishonesty, or cruelty to animals),[332] or is reasonably believed to pose an unacceptable risk to children.[333]

Similarly to the Legal Profession Conduct Commissioner, a desktop review of the website for the Teachers Registration Board does not reveal any content about domestic, family and sexual violence awareness.

Health practitioners in South Australia are registered by Ahpra and the National Boards. As outlined in Chapter 3, Ahpra is undertaking a significant program of work to build the capacity of the health workforce to recognise and respond to domestic, family and sexual violence. Part of this approach is making clear to all health practitioners that domestic, family and sexual violence is unacceptable and that using violence could lead to regulatory action for registered health practitioners.

The Joint Position Statement on Family Violence by Regulators of Health Practitioners makes it clear that 'family violence is a public health issue' and that there will be 'consequences for health practitioners who are perpetrators of family violence'. It further states that:

> **Family violence perpetrated by a health practitioner is highly relevant to a practitioner's suitability to practise and to provide safe healthcare. Health practitioners should be aware that perpetrating family violence – no matter where the violence took place – is serious conduct that adversely impacts the trust and confidence the public place in them. When health practitioners who perpetrate family violence come to the attention of regulators, the consequences for practitioners may include conditions on their registration, suspension, cancellation, or refusal of registration.**

> **Health practitioners who perpetrate family violence may not be equipped to respond to family violence issues they come across in their professional lives. They may be biased, or may be perceived as being biased, when they are supporting or treating victim-survivors or perpetrators. They might normalise or minimise the abusive behaviour. They might not practise to the standard expected if they cannot manage or identify signs of family violence. It is both a safety and a public interest issue for regulators to take action to ensure that victim-survivors are not discouraged from accessing health services.**[334]

Numerous other regulators have similar roles to the regulators outlined above. These include the Skills Commission, Consumer and Business Services, and the Social Workers Registration Board (once operational). As outlined in Chapter 3, the Judicial Conduct Commissioner also has powers to deal with inappropriate conduct by judicial officers.

The regulator for police conduct in South Australia is the Office for Public Integrity, although SAPOL retains primary responsibility for managing complaints about police through its Internal Investigations Section (IIS).

SAPOL has a Code of Conduct with which all police officers, community constables, police cadets and police security officers must comply.[335] The Code requires SAPOL members to act with honesty and integrity, act in accordance with SAPOL policies and procedures, avoid conflicts of interest and not behave in a manner that reflects adversely on SAPOL or is prejudicial to good order and discipline in SAPOL (among other things).[336]

A breach of the Code may result in disciplinary action being taken, in accordance with the *Police Complaints and Discipline Act 2016* (SA). These breaches are dealt with, and investigations into the conduct of police officers are carried out by the IIS of SAPOL.[337] All complaints about the conduct of a police officer will be referred to the IIS for assessment. Complaints made directly to the Office for Public Integrity are also referred to the IIS for assessment.[338]

Some breaches may be dealt with by way of 'management resolution', which aims to avoid formal disciplinary proceedings and deal with the matter by 'educating and improving the future conduct of' the officer concerned, while others will proceed to formal investigation and a hearing before the Police Disciplinary Tribunal.[339] If there has been a breach of discipline, or if an officer is found guilty of a criminal offence, the Commissioner of Police may take a range of actions in relation to the officer, including termination, suspension or transfer.[340] Officers may also be suspended from their appointment pending investigation of a breach of discipline or if they are charged with a criminal offence. The decision to suspend is at the discretion of the Commissioner of Police.[341]

The Commissioner of Police publishes on the SAPOL website outcomes of disciplinary action taken against members 'in order to increase transparency and strengthen public trust in the disciplinary system'. The information is de-identified.[342]

The Office for Public Integrity has oversight over the handling of complaints and reports by the IIS. The Office may give the IIS directions in relation to a complaint or report, reassess complaints or reports assessed by the IIS and refer matters to the Independent Commission Against Corruption when appropriate.[343] In practical terms, the Office for Public Integrity reviews all assessments made by the IIS and monitors IIS investigations as they progress.[344]

While SAPOL has a heavily regulated framework for handling complaints and disciplinary proceedings, and clear (albeit discretionary) avenues to take action when officers are found to have committed a criminal offence or a breach of discipline, there are complexities when a criminal investigation involves allegations against a police officer. The Commission heard that these complexities are further compounded by the power dynamics that are common in the context of domestic, family and sexual violence.

SAPOL has internal operating policy and procedures which address circumstances when allegations of family and domestic violence are made against (and by) a police officer. While there are policies and guidelines for the management of SAPOL employees who may be affected by family and domestic violence, the policies provide limited guidance in terms of reporting and investigation of domestic and family violence involving police officers. This is a significant procedural gap.

Generally speaking, reports of domestic or family violence made against police officers are responded to in the same way as other reports, and are referred to the local family violence investigators for follow-up and investigation. There is also a requirement to avoid conflicts of interest, which are managed by the allocation of investigations. There are confidentiality provisions which permit the restriction of information within SAPOL systems in certain circumstances. A report of an alleged breach of the Code of Conduct will also be made, which triggers IIS involvement in relation to any disciplinary aspect of the matter. A criminal investigation will take priority over disciplinary matters.

Victim-survivor concerns about reporting domestic, family or sexual violence by a police officer to SAPOL are understandable, particularly given the overall absence of clear and accessible information about the way in which these investigations will be conducted and the role of the Office for Public Integrity in providing overall oversight over police officer conduct. Investigations about domestic, family and sexual violence offences do need to be conducted by specialist investigators, but there are difficulties with proposing an entirely separate investigation agency or unit to investigate police officers for these types of offences. What appears to be needed is clarity and confidence for victim-survivors about safeguards in the way reports of this type will be received and investigated by police – and a feeling of safety in the way a person can make such a report.

Future state

Consistent with the findings and recommendations in Chapter 3, the approach adopted by Ahpra is good practice. Professional regulators should be using existing regulatory levers such as fit and proper person tests, professional registration schemes and licensing frameworks to hold professionals who use violence accountable. In addition, regulators should be using their public presence to make it clear to both members of the community and members of the profession that there will be consequences for people using violence who come to the attention of the regulator.

To progress this call to action, the South Australian government should undertake a review of all state-based regulators and their existing investigatory powers, together with their powers to cancel, suspend or impose conditions on a person's registration or licence.

The Community of Practice referred to in Recommendation 34 should be tasked with identifying opportunities to promote across regulators' relevant stakeholder networks the capacity for regulators to receive complaints about a person using domestic, family and sexual violence and to take action against that person.

In relation to police officers who use violence, the Commissioner of Police should conduct a review of SAPOL's domestic, family and sexual violence governance and policies, in relation to both reporting mechanisms and responses, when it is alleged that the person using violence is a police officer. The review should:

- identify a new and separate pathway for reporting these matters to SAPOL
- specifically address the procedures relating to confidentiality and allocation of investigations and intervention order applications, to ensure they provide the necessary safeguards for victim-survivors and avoid conflicts of interest and compromises to the integrity of matters
- examine the development of a standalone protocol for these matters relating to reporting, administration (including allocation and confidentiality), investigation and victim-survivor management
- address how the public could, within the limitations of the privacy of SAPOL's internal procedures, be provided with sufficient information to provide assurance that these procedures are in place. This includes information that if people are unsatisfied with police conduct (including how reports and investigations are managed) they can make a report to the Office for Public Integrity.
- address education to police officers about these matters and any new procedures
- address the collection of information to enable the identification of patterns and systemic issues.

The review should be provided to the Implementation and Impact Monitor, and implementation of the review's recommendations be included within the scope of the Implementation and Impact Monitor's functions as set out in Chapter 2.



Recommendation 84

The South Australian government undertake a review of state-based regulators' disciplinary powers, including investigatory powers, fit and proper person tests and other disciplinary levers, and make any amendments necessary to create the authorising and operating environment for regulators to replicate the Australian Health Practitioner Regulation Agency's approach.

Recommendation 85

The Community of Practice (see Recommendation 34) be tasked with identifying opportunities to promote across the regulator's relevant stakeholder network, the capacity for regulators to receive complaints about a person using domestic, family and sexual violence and to take action against that person.

Recommendation 86

The Commissioner of Police conduct a review of South Australia Police's domestic, family and sexual violence governance and policies, in relation to both reporting mechanisms and responses when it is alleged that the person using violence is a police officer. The review should:

a. identify a new and separate pathway for reporting these matters to South Australia Police (this could be considered in conjunction with the alternative help-seeking pathway(s) in Recommendation 50)
b. specifically address the procedures relating to confidentiality and allocation of investigations and intervention order applications to ensure they provide the necessary safeguards for victim-survivors, and avoid conflicts of interest and compromises to the integrity of matters
c. examine the development of a standalone protocol for these matters relating to reporting, administration (including allocation and confidentiality), investigation and victim-survivor management
d. address how the public could, within the limitations of the privacy of South Australia Police's internal procedures, be provided with sufficient information to provide assurance that these procedures are in place. This includes information that if people are unsatisfied with police conduct (including how reports and investigations are managed) they can make a report to the Office for Public Integrity.
e. address education to police officers about these matters and any new procedures
f. address the collection of information to enable the identification of patterns and systemic issues.

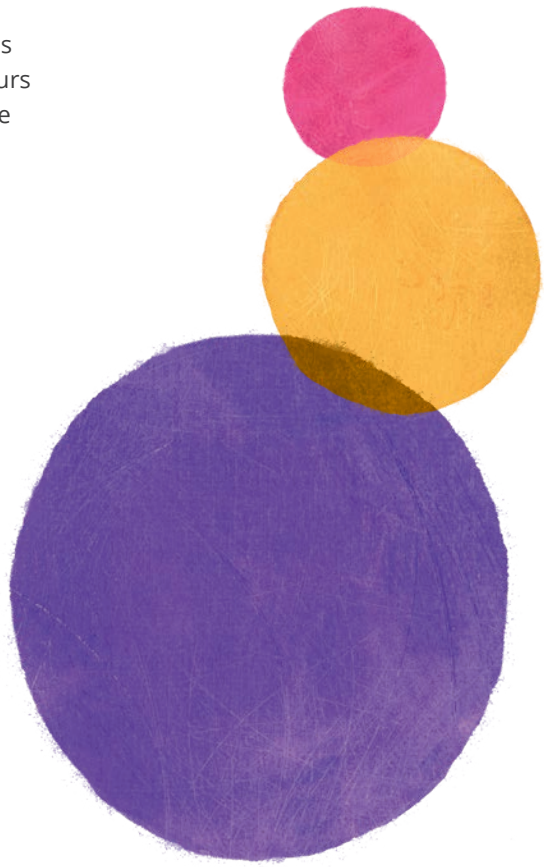
The review should be provided to the Implementation and Impact Monitor, and implementation of the review's recommendations be included within the scope of the Implementation and Impact Monitor's functions.

Responding to the use of violence by children and young people

Investment in intervention programs for children and young people

The Commission heard there are limited interventions available for children and young people who use violence or display harmful sexual behaviours in South Australia.[345]

The National Plan to End Violence Against Women and Children 2022–2032 recognises that, to date, early intervention activities have focused primarily on intimate partner violence and less has been done to address other forms of violence. There is a gap in understanding what works to address violent behaviours and harmful sexual behaviours used by children and young people. Appropriate interventions for children and young people are needed to stop harm from escalating and continuing into adult relationships.[346]



Current state

The use of violence by children and young people

For children and young people who use violence, the Commission heard about 2 available services during Day 4 of public hearings: the Kinship, Improving relationships, No violence, Developing skills (KIND) program and the Wuinparrinthi program offered by KWY. The Commission was also told that:

> **there's a young father's worker at Metropolitan Youth Health who will work with young dads who use violence in relationships. Outside of that, we don't have referral points for our young people.**[347]

The Wuinparrinthi program is run by KWY in metropolitan Adelaide and is available for adolescent Aboriginal males aged 14–18 who have displayed violent behaviour or are identified as being inclined towards violent behaviour. Referrals can be made by government departments, youth and community centres, the Youth Court, non-government organisations, family, community, self-referral and internally through KWY. The program runs for 6 months with the aim of mitigating the risk of violent behaviour through awareness and education about positive relationships, coercive control, anger management and positive choices.[348]

The KIND program is run through Youth Justice in DHS.[349] According to the South Australian government submission, it is a whole-of-family approach, working with both perpetrators and victim-survivors, that 'aims to provide a tailored intervention to young people and their families or other support networks, to reduce their use of relationship violence and increase connectedness and strength within their relationships'.[350]

> **We're really mindful that we're working with adolescents and young people. And we don't call ourselves a perpetrator program. We don't use that word because, I guess, we're working with young people with emerging behaviours as opposed to people with entrenched behaviours.**[351]

The Commission heard evidence from Kate Melvin, Senior Family Violence Clinician and supervisor of the KIND program, on Day 4 of public hearings. Ms Melvin explained that there are a number of eligibility restrictions to be accepted into the KIND program. The KIND program is only available to young people aged 10–18, or over 18 if the crime was committed before they turned 18, who have engagement with youth justice or the courts, with a pattern of violence (not a one-off incident).[352] It is a voluntary program, unless a young person is mandated through family conferencing or the Youth Court.[353] Referrals can also be made from workers in Kurlana Tapa (Youth Justice Centre) for young people detained (sentenced or on remand) in the centre, or from case managers within DHS's Community Youth Justice.[354]

Ms Melvin explained the KIND program is available to young people of any gender or cultural background. When working with CALD clients, KIND uses cultural consultation and interpreters, or external services who are already engaged with the young person.[355] KIND and KWY have co-worked some cases, and at other times KIND has referred young Aboriginal people they are working with into KWY.[356]

Although KIND is a statewide service, it is based in metropolitan Adelaide. For regional clients, this means that KIND will:

> **engage them alongside the case managers who are normally engaged through Youth Justice, and they support the young person's engagement over Teams or over the phone. Teams is a better option for young people, but it's not always viable … it is much more difficult to … engage therapeutically when we're based here [in Adelaide].**[357]

Ms Melvin gave evidence about the capacity of the KIND program. She stated that she began working with KIND in February 2021 as the only clinician, before funding was received for 2 more clinicians in September 2022 and then a mentor in 2025.[358]

> **I think we've always run a wait list. That's why two clinicians came on board in September 2022, because there was a significant wait list. So at the moment, we have five on our wait list. That's pretty average. I guess KIND is a really flexible intervention. So there's nine modules that we work through, but it's done in an individual, flexible way, which sits alongside adolescent development and the needs of the young people and the family. So even though it's nine modules, that can take, you know, I've got a young person I've worked with for nearly two years, just because you're working with really complex young people a lot of the time. KIND also works with family or with the partner of the person, so the victim in the violence. So taking that into account as well, it can be a longer intervention. So again, that impacts our capacity to pick up young people. So although we don't turn young people away, we certainly have people who sit on a wait list for some time. We try to redirect to other services but there aren't really any other adolescent services for young people who use violence in relationships.**[359]

The KIND program is funded through the National Partnership on Family, Domestic and Sexual Violence Responses 2021–2030 (National Partnership) on a short-term basis.[360] The program does not have any long-term funding.

The South Australian government submission states that the 'KIND program has demonstrated effectiveness by showing positive changes for participants through decreased expressions of violence, increased adoption of anger management and self-regulation strategies, and increased family cohesion'.[361] The KIND program has been trialled in Queensland, and evaluated in partnership with Griffith University, although this evaluation does not appear to be publicly available at the time of writing.[362]

When asked about the effectiveness of the program, Ms Melvin said:

> **we have just had an evaluation by Griffith University that just finished two weeks ago and that's cross-jurisdiction, so that's the two services in Queensland who have been delivering KIND for a few years as well and ourselves. It was a small sample group but it has come back with, yeah, I guess positive changes around how young people express their anger and the ability to control and regulate as well. So within that, the way that that was measured was through assessments that we do for young people at the beginning of intervention, at the end of intervention, and then three months after. There, yeah, a few different assessments, psychological assessments that we use, which measure that sort of change for young people, view of self, self-regulation, state trait anger, and then actual use of violence within relationships as well.**
>
> **[P]art of the evaluation was also phone interviews, so I believe 27 people participated in that where, yeah, that, I guess, feedback which was all really positive and young people were able to talk about self-regulation, so that was a consistent message that that was one of the most beneficial parts of KIND. But we, as clinicians as well, that's the best feedback that we get is when young people and families are reporting you know like things are so much better now or yeah just you know I guess for some families that recognition that things are not perfect but that there's been great improvements and people are feeling safer within that family as well.**[363]

Harmful sexual behaviours

There are limited intervention options for children and young people using harmful sexual behaviours in South Australia.

The Royal Commission into Institutional Responses to Child Sexual Abuse (RCIRCSA) defined 'children with harmful sexual behaviours' as 'children and young people under 18 years old who have sexual behaviours that are outside the range typically accepted as within the norm for their age and level of development'.[364] These include behaviours 'that are problematic to the child's own development, as well as those that are coercive, sexually aggressive or predatory towards others'.[365] RCIRCSA found that children with harmful sexual behaviours are often victims or survivors themselves, and may have been affected by one or more adverse childhood experiences such as sexual, physical and emotional abuse; neglect; exposure to family violence; or exposure to and use of pornography.[366]

In 2024 the South Australian Commissioner for Children and Young People published a policy position titled The Need for a System Response to Harmful Sexual Behaviours in Children, which was referenced in their submission to this Commission.[367] The policy position writes that harmful sexual behaviour is a taboo subject, leading to mixed and sometimes stigmatising responses from parents, teachers and service providers. It further states that 'there are vulnerable groups of children in South Australia that are falling through the cracks and not getting the services and support they need', including children in state care, under the age of criminal responsibility, Aboriginal children, CALD children, and those living in regional and remote areas.[368] The Commissioner for Children and Young People said that while SA Health's Child and Adolescent Mental Health Service does offer some support for harmful sexual behaviours, the service is largely constrained to metropolitan areas and has an under-representation of Aboriginal children.[369]

The prevalence and impact of harmful sexual behaviours was discussed at length by Professor Bromfield on Day 5 of public hearings:

> **systemic reviews put the incidence of harmful sexual behaviours at about 30 to 60 per cent of all child sexual abuse and in the Australian Child Maltreatment Study, approximately half of all the child sexual abuse reported by young Australians was actually caused by another child or young person with harmful sexual behaviours. It's the fastest growing form of child sexual abuse in Australia. It occurs in homes, it occurs within families, it's also been identified in the Royal Commission into Institutional Responses to Child Sexual Abuse and the Tasmanian Commission of Inquiry … as the most prevalent form of child sexual abuse in contemporary institutional contexts.**[370]

> **[O]ne of the common pathways is what we call the child sexual abuse pathway, and particularly for young children, we'll see them emulating their own experience so copying. They'll re-enact the child sexual abuse that they experienced. Those children need to be seen as victims and their harmful sexual behaviours need to be understood in that context. There is a pornography pathway that I'm really, really worried about. So more and more children are being exposed to more and more pornography in online contexts. And the pornography that they're being exposed to, the level of violence in that pornography is increasing … What they're seeing is really explicit sexual content and some of it is really outside of what we would consider, you know, normal sexual, healthy sexual relationships for children. But our kids are absorbing this as normal. … And so that's a pathway to children displaying harmful sexual behaviours, and it's part of it because they're being socialised.**[371]

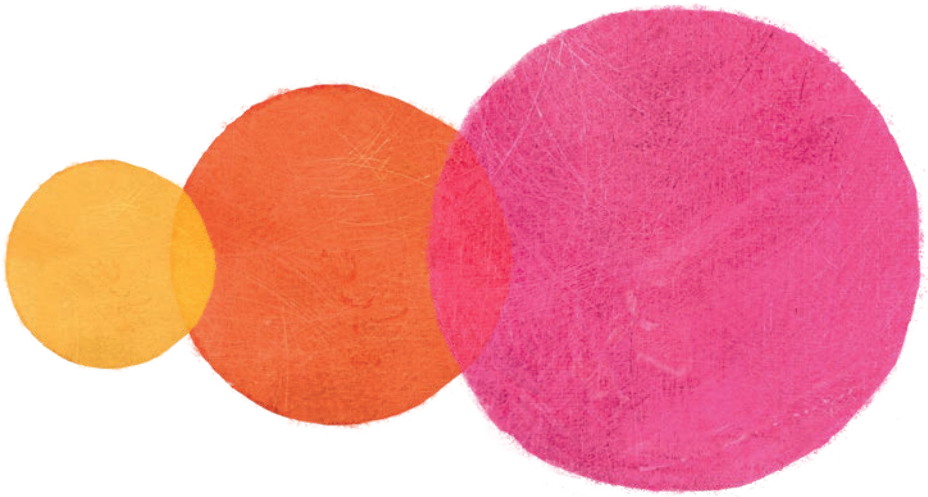
> **The other pathway is what we call the FDV, the Family Domestic Violence pathway. So in households of children who display harmful sexual behaviours, they are disproportionately more likely to have experienced family and domestic violence. And in terms of the mechanism for that, you think about how family and domestic violence and harmful sexual behaviours can both manifest in a form of sexual entitlement towards women or girls. If that co-occurs in a sexualised environment where there's hyper masculinity, then I'm really quite concerned about that pathway in terms of growing our kids to display sexual behaviours endemic in gendered violence.**[372]

The National Strategy to Prevent and Respond to Child Sexual Abuse 2021–2030 recognised the need to address harmful sexual behaviours in the First National Action Plan. The strategy recognises that state and territory governments 'have an important role in providing services to children with harmful sexual behaviours, such as youth justice and therapeutic services'.[373]

The Commission heard that in South Australia, responses to harmful sexual behaviours have not been coordinated, and treatment responses are limited.

> **[W]e have one FTE for children 12 and under who are displaying harmful sexual behaviours only available in the Central Adelaide [Local] Health Network, the [Women's and] Children's Health Network, and we have two FTE for responding to harmful sexual behaviours in [CAMHS] … as the fastest growing form of child sexual abuse in Australia … we've got three FTE within our state.**[374]

The Commission also heard that treatment and prevention are critical for children and young people displaying harmful sexual behaviours and that treatment is effective. For most children displaying harmful sexual behaviours, those behaviours will 'entirely extinguish' with appropriate treatment.[375]



Future state

The Commission has already recommended, in Chapter 2, the development and implementation of a statewide framework for understanding and responding to harmful sexual behaviours in children and young people. There is a corresponding need for urgent investment in programs to address harmful sexual behaviours in children and young people. There is also a need for urgent investment in programs to address the use of domestic and family violence by children and young people.

The South Australian government acknowledged the need for early intervention programs for young people at risk of using or experiencing violence:

> **Wider adoption of early intervention programs for young people at risk of experiencing or using domestic, family and sexual violence, similar to the KIND program delivered by Youth Justice … would support young people and the family and community around the young person to respond to domestic, family and sexual violence.**[376]

Both the South Australian government in its submission and Ms Melvin in her evidence on Day 4 of public hearings supported expanding the KIND program, which is currently limited to youth justice settings:

> **The KIND program is funded through the National Partnership on a short-term basis and is currently offered only to young people in youth justice settings. The KIND team receives multiple referrals and enquiries for young people outside of Youth Justice who could benefit from the program, especially from DfE and DCP. An expansion of the KIND program would allow children and young people to receive KIND intervention prior to engagement with Youth Justice. This would benefit the youth justice and child protection systems, enhance collaboration across departments, and allow for early intervention to occur for children and young people using violence and their families.**[377]

There is also a strong need for regional access and better capacity:

> **I know Port Augusta is desperately asking for, you know, kind of intervention around adolescent family violence at the moment, that's really hard for us to take on say a full caseload in a regional area, it would be much better to have clinicians based regionally.**[378]

Referrals are also coming from schools, child protection and police:

> **[W]e receive multiple requests with referrals for young people, especially from education, Department for Child Protection, and also directly from SAPOL, where they're attending houses where there's adolescent family violence, but it's not getting to the Court stage. We don't have capacity to pick up those referrals. But I guess that would be true early intervention, because at the moment we're working in that youth justice space, which is early intervention in many ways, but also to be able to go in when we're hearing from schools that parents are raising these things would be beneficial.**[379]

The KIND program should receive additional and ongoing investment to allow it to be scaled up, including in regional and remote South Australia, with sufficient staffing to increase the capacity of the program and to allow for continuing partnerships with ACCOs such as KWY.

The South Australian government should also invest in scaling up interventions for harmful sexual behaviours through the establishment of a service that sits alongside KIND in DHS, and involving the transfer of the existing (and under-resourced) harmful sexual behaviour programs from SA Health to DHS.

Recommendation 87

The South Australian government provide additional ongoing resourcing to expand the KIND program to increase current capacity and referral intakes and ensure that it is available in regional and remote South Australia. Consideration should be given to using partnership models with Aboriginal Community Controlled Organisations.

Recommendation 88

The South Australian government resource and establish a statewide service for harmful sexual behaviour interventions that sits alongside KIND in the Department of Human Services. Existing programs and relevant resourcing within SA Health should be transferred to this new service.

The use of violence against children and young people

Repeal of the reasonable chastisement defence

The Commission had a clear focus on the voices and rights of children and young people throughout its inquiry. These voices consistently called out the double standard invoked when it comes to corporal punishment or reasonable chastisement of children as against the widespread condemnation of the use of violence by adults against other adults.

> **The cause of domestic violence is generational. In past generations, the practise of smacking children was accepted as 'normal'. Unfortunately it is a habit that breeds violence, and creates a scenario of being hit, hitting another or observing violence in the home, conditions the mind to believe that its okay.**[380]



Corporal punishment is not an effective tool for setting boundaries around a child's behaviour. A 2023 paper in the *Australian and New Zealand Journal of Public Health* found that:

> **[t]here is an extensive evidence base that corporal punishment is associated with a range of adverse outcomes. A recent meta-analysis examining data for over 160,000 children found all effects were negative, with corporal punishment associated with child internalising and externalising behaviour problems, child mental health problems, low moral internalisation, negative parent–child relationship, child aggression, child antisocial behaviour, impaired cognitive ability, low self-esteem, mental health problems, antisocial behaviour in later adulthood, and a range of other adverse outcomes.**[382]

The Australian Institute of Family Studies supports that corporal punishment is not effective, writing 'there is good evidence to suggest that physical punishment does not reduce defiant or aggressive behaviour nor does it promote long-term positive behaviour in children'.[383]

Research also indicates that corporal punishment can become a gateway to more serious acts of child abuse, meaning that 'parents often increase the severity of corporal punishment over time to gain the same level of compliance'.[384]

The 2023 paper in the *Australian and New Zealand Journal of Public Health* explored the links between experiences of corporal punishment as a child and the use of or experience of domestic, family and sexual violence as an adult:

> **Experiencing corporal punishment in childhood has also been found to be associated with increased risk of acting aggressively or being a victim of violence in future intimate relationships, as well as using physical discipline in later parenting. These outcomes further perpetuate a cycle where force is used in relationships.**[385]

The Royal Australasian College of Physicians (RACP) Position Statement makes the same findings on the adverse outcomes of corporal punishment, and explores the links with domestic, family and sexual violence. It states that 'physical punishment sends a message that aggressive behaviour is the solution to conflict', and 'physical punishment of children is more likely to occur in families where there is aggression or violence between the parents'.[386]

The use of corporal punishment is permitted under South Australian law, and in the laws of all other Australian jurisdictions. Australia is an outlier in this regard, with over 65 countries having outlawed the practice and another 27 that have expressed a commitment to doing so.[387] While some will argue, despite all evidence to the contrary, that corporal punishment is a relatively harmless tool for parents to use when needed, the Commission heard how domestic and family violence is consistently and persistently used against children and young people in this state under the pretence of it being 'discipline'.

This pretence must not be allowed to remain. The use of violence within any family relationship must be unlawful – South Australia's children and young people are desperate for this to be so.

Current state

Physical punishment of children, also known as corporal punishment, involves the use of (or threat of) physical force to cause pain to a child, aiming to correct or control their behaviour. The RACP writes that corporal punishment normally consists of 'hitting children with the hand or an implement such as a wooden spoon or belt, but may also include kicking, shaking, biting or forcing a child to stay in uncomfortable positions'.[388]

Australian laws concerning corporal punishment have been reasonably consistent since Federation. Corporal punishment of children by parents remains legal in every jurisdiction in Australia and is generally constrained to force that is deemed 'reasonable in the circumstances'.[389] There has been consistent national progress in prohibiting the use of corporal punishment in other settings where it was previously applied liberally, such as education settings and residential care, with corporal punishment now only legal for parents.[390]

The prevalence of corporal punishment varies in research. The ACMS found that almost 6 in 10 young people (58.4%) reported experiences of corporal punishment in childhood.[391] Research also indicates that use of corporal punishment may be decreasing in Australia. One study found that while 80% of participants had experienced corporal punishment as a child, 51% reported they had used corporal punishment on their own child.[392] The 2021 ACMS also revealed that 3 in 4 Australians (73.6%) do not believe that corporal punishment is necessary.[393]

A shift in community attitudes is reflected in moves by other jurisdictions to prohibit the use of corporal punishment.

The first 3 countries to ban all corporal punishment were Sweden (1979), Finland (1983) and Norway (1987).[394] Since then, progress towards banning corporal punishment has been championed under the United Nations Convention on the Rights of the Child (UNCRC), which was ratified by Australia in 1990.[395] The UNCRC sets out that children should not be subjected to any form of violence, be it from parents or guardians or at school.[396]

When Sweden banned corporal punishment in 1979, it undertook a significant public health campaign about the pending legislative change, why corporal punishment wasn't effective, and what parenting techniques should be used as an alternative.[397] Research shows that, while historically corporal punishment was normal in Sweden, the prohibition and public health campaign resulted in a change in public attitudes. In 1956, 53% of the population were supportive of the use of physical punishment, which dropped to just 11% in 1996 and has remained stable since.[398] In a study published in 2000, 86% of Swedish children reported they had never experienced physical punishment.[399]

New Zealand was the first English-speaking country to prohibit corporal punishment in 2007, following a 2-decade public health campaign.[400] Opponents to the legislative change in New Zealand were concerned that children would become out of control and that good parents would be criminalised for smacking their children; however, both of these fears proved to be unfounded.[401] In the 3 years following the legislative change, no parents were prosecuted for smacking, 9 were prosecuted for minor acts of physical discipline, and there was an overall reduction in incidents of child assault.[402] RACP make the same findings, writing that:

> **[t]he 2007 law allowed police to use their discretion not to prosecute parents who physically punish their children, if they consider that the assault is trivial. Police monitoring of their implementation of the law indicates that very few cases of minor "smacking" are prosecuted. Where parents do come to the attention of police, they are increasingly being referred to other agencies for information and support in regard to managing their children. This is clearly a beneficial outcome for the child and their parents.**[403]

Similar to Sweden, New Zealand experienced a significant decline in supportive attitudes to corporal punishment following a public health campaign and legislative change, with 89% of parents supportive of corporal punishment in 1981 compared with 19% in 2018.[404] Ireland, Scotland and Wales followed New Zealand as English-speaking jurisdictions to ban corporal punishment.[405]

Repeal of the reasonable chastisement defence, or domestic discipline defence as it is called in Queensland, is currently under consideration by the Queensland Law Reform Commission (QLRC) as part of its review of particular criminal defences.

Section 280 of the *Criminal Code Act 1899* (Qld) provides that it is lawful for a parent or a person in the place of a parent, or for a schoolteacher, to use, by way of correction, discipline, management or control, towards a child or pupil, under the person's care such force as is reasonable under the circumstances. This provides a complete defence to an offence involving the use of force, such as common assault.

The QLRC consultation paper, which was released on 20 February 2025, seeks feedback on 2 options for reform of the defence of domestic discipline. Option 1 is to repeal the defence and introduce diversion and other support measures. Option 2 is to amend the defence; for example, by limiting the scope of the defence or the purposes for which it may be used or providing legislative guidance around the concept of reasonableness.[406] The Commission notes that the QLRC is not due to present its final report and recommendations to the Queensland government until December 2025.

In South Australia, assault is a criminal offence under Section 20 of the Criminal Law Consolidation Act. Any assault against a child under the age of 12, or a child who the offender is or was in a relationship with (including family relationships) is considered an aggravated offence under Section 5AA of the same Act. Pursuant to section 20(2), any conduct that would be 'generally accepted in the community as normal incidents of social interaction or community life cannot amount to an assault'.[407]

'Reasonable chastisement' is a common-law legal defence applicable in South Australia that permits a parent to administer moderate and reasonable physical punishment to their child for the purpose of correcting behaviour or punishing wrongdoing.[408] The reasonable chastisement defence relies on the use of force being not motivated by rage, malice or personal gratification, and that the punishment be reasonable for a child's age, size and health.[409] Being a common-law defence, what is considered to be reasonable chastisement is based on and will evolve with case law over time. Police investigating allegations of assault against a child by their parent must consider whether the act may fall within a threshold of reasonable chastisement, with the onus for determining whether or not physical violence against children meets a criminal threshold left to police investigators' individual judgement.

The South Australian Commissioner for Children and Young People recommended the Commission '[r]ecognise the impacts of physical punishment on children and young people and repeal the legal defence of reasonable chastisement'.[410] Another submission called for corporal punishment to be a crime:

> **In a civilized society it should be a crime to assault children. This includes hitting or slapping in anyway, no exceptions ... Make corporal punishment of children a crime. The use of violence as a tool of discipline is the practice of lazy, difunctional parenting. No excuses. No exceptions. Children should not have to live their lives in fear of their parents.**[411]

Most importantly, the Commission has heard directly from South Australian children and young people – through postcards the Commissioner for Children and Young People developed for the Commission, the Missing Voices: Physical Punishment Experiences as Described by Primary School Children publication (Missing Voices Report) and the Silence and Inaction Report.

In response to questions about when they feel safe, some of the children who wrote to the Commission using the postcards stated:

> **no-one is yelling/hitting/threatning people. (12yo girl)**

> **physical contact is limited. (14yo non-binary)**

> **I lived somwere I dont need to worry about getting hurt and my things getting broken and its not my fault and if I had someone who could change this. (11yo girl)**

> **there wasnt as much violence and shouting. (14yo girl)**

> **people didn't punch me in the face. (11yo boy)**

In the Missing Voices Report, in response to the question 'What do you want grownups to know?', children wrote:

> **that just because we are young does not give them a right to hurt us and to let them know we have voices too. (9yo girl)**

> **that being frustrated is ok but hitting your child/kid is not. (10yo girl)**

> **that hurting kids isnt the way to parent you need to talk to them about it. (10yo girl)**

In response to the question 'What could make things better?', children wrote:

> **parents don't slap children. (10yo boy)**

> **giving kids smacks was illegal. (9yo boy)**

> **my parents stop hitting me when they get mad at me. (9yo girl)**[412]

The minimisation or justification of some forms of abuse by adults as 'parental discipline' was a recurring theme for young people in the Silence and Inaction Report.[413] Physical punishment, including beatings, slaps or threats, was often presented as acceptable parenting behaviour as a way of 'correcting behaviour' or 'teaching respect' and was often reinforced by religious, generational or cultural norms. This made it difficult for the young people interviewed to determine 'whether what they experienced "counted" as abuse'.[414] Young people stated:

> **From how, like, my parents were brought up and how other family members were brought up around me, hitting your kids wasn't really, like, a bad thing … it just happened so many times, and I sort of saw the patterns in the cycle. (Fern)**

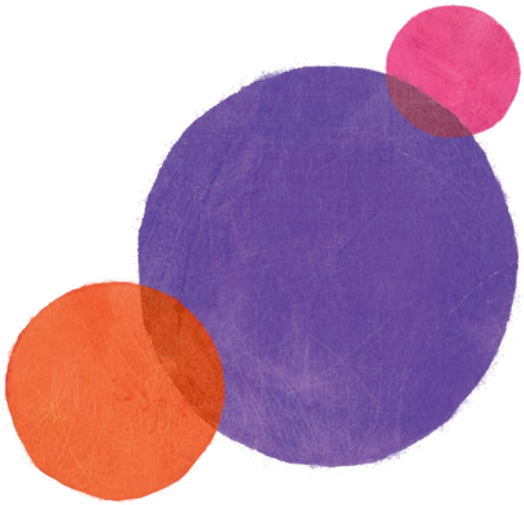
> **Its not just kids who need to learn – adults need to unlearn the stuff they were taught too. (David)**

> **They might be thinking that it's disciplining the child for what he did that was bad, but then what they're actually doing [is] beyond, they're going beyond discipline. (Chris)**

> **[Parents] will say, it's a form of discipline. They didn't really see it as something that could be traumatising. So I feel that listening and believing would have been a way to actually try as much as possible to investigate, to get to know and to meet the person involved and see how it could be stopped. But that really didn't happen. And it's so sad. (Mike)**[415]

The Silence and Inaction Report also revealed that experiences of abuse could be 'minimised or dismissed by extended family, caregivers or other adults within their community who 'explained it away' as necessary or appropriate acts of discipline'.[416]

> **These findings highlight the importance of engaging families and communities in reframing understandings of discipline, particularly through culturally responsive, trauma-informed education. These experiences reflect broader findings across the dataset about the normalisation of violence in some households and the need for early intervention that engages not only children and young people but also their caregivers. Where cultural or intergenerational norms perpetuate harmful behaviours, targeted education and whole-of-community engagement will be critical to shifting attitudes and protecting children's safety.**[417]



Future state

Children and young people in South Australia have told the Commission that violence against children and young people in all its forms should not be tolerated if we are to end domestic, family and sexual violence. Part of the solution to ending violence is to address the double standard in society that prohibits violence against adults and yet allows the use of physical violence by parents and caregivers to discipline children.

As outlined earlier, despite Australia being a signatory to the UNCRC, and South Australia referring to it in section 5 of the *Children and Young People (Oversight and Advocacy Bodies) Act 2016* (SA), corporal punishment by parents is still legal in South Australia and all other jurisdictions in Australia.[418] This position has been an area of concern for the United Nations and the United Nations Committee on the Rights of the Child (UN Committee), most recently highlighted during the combined fifth and sixth periodic reports of Australia which advised the UN Committee that while corporal punishment is not accepted as a social norm in Australia, the law in Australia does not explicitly outlaw corporal punishment in all settings.[419]

In its concluding observations, the UN Committee reiterated its previous recommendations on corporal punishment and urged Australia to:

- explicitly prohibit corporal punishment in law in all settings, including in the home, in public and private schools, in detention centres and in alternative care settings, and to repeal the legal defence of 'reasonable chastisement'
- develop awareness-raising and education campaigns that promote positive and alternative forms of discipline and that underscore the adverse consequences of corporal punishment.[420]

Similar recommendations have been made by the United Nations Committee Against Torture, most recently in 2022 in its concluding observations on the sixth report.[421]

The reasonable chastisement defence is inconsistent with societal standards and Australia's international obligations. Children and young people should have the same protection from assaults under the law as adults.

The Commission recognises a repeal of this defence is not a simple undertaking and there may be strong support in some parts of the community for retaining the defence. One argument against repeal could be, as put forward in New Zealand, that it could lead to parents being prosecuted for use of minimal physical force. As discussed above, this fear was addressed in New Zealand through a legislative discretion for police not to prosecute parents if they consider that the assault is trivial.[422] Other jurisdictions, such as Scotland and Wales, have explicitly banned corporal punishment in all settings and have not reported significantly increased rates of prosecution for minor incidents such as smacking. In the first year of the ban in Wales, the Welsh government confirmed that fewer than 5 people had been referred to the Crown Prosecution Service for the offence.[423]

Any repeal of the reasonable chastisement defence must be supported by a statewide parenting education campaign for existing parents and for new parents. There is no shortage of resources regarding parenting without the use of physical discipline, and on parenting generally. Recent examples include the *Seen* documentary produced by Parent TV;[424] podcasts such as Pop Culture Parenting[425] or Good Enough Dad;[426] the many books and resources produced by parenting experts such as Maggie Dent, Lael Stone, Professor Selena Bartlett and Dr Vanessa Lapointe; online resources such as the Raising Children Network;[427] and programs such as the Circle of Security[428] and Hand in Hand Parenting.[429] There is also no shortage of levers for government to use to deliver education and awareness information to parents.

The Government Steward, in collaboration with the Office for Early Childhood Development, should be tasked with developing a coordinated, evidence-based approach to parenting education across South Australia to inform the repeal of the reasonable chastisement defence.

Recommendation 89

The Attorney-General ban the use of corporal punishment by parents and caregivers by progressing amendments to the *Criminal Law Consolidation Act 1935* (SA) to repeal the defence of reasonable chastisement.

Recommendation 90

The South Australian government undertake a public awareness and education campaign about the effect of the repeal of the reasonable chastisement defence and alternatives to physical punishment prior to commencing any legislative change.

Recommendation 91

The Government Steward, in collaboration with the Office for Early Childhood Development, develop a coordinated, evidence-based approach to parenting education across South Australia to inform the repeal of the reasonable chastisement defence.

Systems-enabled violence

Systems abuse

He learnt how to play the Courts. You see a Federal Family Court was supposed to protect my children and I was supposed to be protected by a State Magistrate Court and the South Australian Police. Although we were a family our protection came under two different Court systems. These two Courts never communicated with each other. The Family Court granted Access when there were five Orders Of Restraint taken out against him. So no one ever saw the whole true picture of our lives which were filled with his ongoing abuse and control. With no one to stop him his abuse and control over us became emboldened. The Court systems lessened our ability to protect ourselves against him as he became more and more powerful and ruthless.[430]

The weaponisation of federal and state systems to perpetrate domestic and family violence featured in many of the inputs received by the Commission.

As explained by Professor Silke Meyer in her evidence on Day 8 of public hearings, systems abuse occurs when 'the person using violence is using or misusing systems that are generally set up to support other victim survivors or maybe families more holistically, to their advantage and the victim survivors' disadvantage'.[431] Professor Meyer spoke about some of the ways in which state and federal systems can be used to continue the abuse, including weaponising shared parental responsibility by refusing to give consent for a child to access therapeutic care.[432]

The Safe and Together Institute, in its paper How Domestic Violence Perpetrators Manipulate Systems, separates systems abuse into 2 categories: government, and private professionals and agencies, including mental health, legal professionals and faith institutions.[433] Government entities are considered to have the most profound impact on victim-survivors 'due to their legal authority to arrest, monitor, incarcerate, remove children from parents, and determine child custody and access'.[434] The paper provides a number of examples of how the different systems can be manipulated by people who use violence; for example, calling child protection systems and making false allegations of child neglect or abuse against the victim-survivor or entrapping the victim-survivor in illegal behaviours and then threatening to use those against the victim-survivor to have children removed.[435] Other examples include calling the police and making allegations against the victim-survivor, coercing victim-survivors into committing crimes and painting the victim-survivor as the person using violence.[436]

A clear theme that emerged from input to the Commission was how coercive control and manipulation is allowed to continue through systems abuse. This included abuse of financial systems, legal systems, immigration systems, the NDIS and aged care systems, child protection systems and medical systems. For example, the Legal Services Commission spoke about 'exit trafficking', where a person on a temporary visa leaves the country because of deception or threats and then cannot return because the person using violence has taken steps to have their visa cancelled.[437] The Commission heard how banking systems can be used to send threatening messages within banking transactions in the 'reference' or 'descriptor' fields.[438]

The Women's Legal Service spoke about the misuse of defamation laws:

> **Defamation laws in other states have been changed to ensure that men are not able to progress with defamation claims for being identified as perpetrators of DFSV; this is not the case in South Australia. The perpetrator can, has and is, using the district court in a claim of defamation against a victim.**[439]

Other submissions to the Commission wrote that:

> **She lost her house and was forced to hand over half of her superannuation because he hid all his assets.**[440]

> **Banks when providing couples with documents (legally binding) need to be able to meet and discuss with each signatory privately/separately to ensure each know 100% what they are getting into and understand all the terms and conditions so financial abuse stops. they need to ask direct questions about whether financial abuse is happening. So do schools. Banks need to take requests seriously with this regard. My experience with the bank has been appalling.**[441]

Custody rights can also give rise to systems abuse.

> **As LGBTQIA+ families often take a greater diversity of forms compared to heterosexual families, parents/guardians can often have different legal rights to a child. This can be leveraged by someone using violence within the justice system to further victimise their partner.**[442]

> **He has also undermined other medical treatments for the children, but we still have shared medical responsibility which he uses to control and undermine my attempts to keep our children healthy and safe.**[443]

The immigration system was also raised.

> **[A]nother unique element around coercive control or restriction of freedom is using visa status, and access to visas, is a common theme that is used … The concern around if you, or the threat being made, if you go and seek help or do this, that's going to put your visa under threat.**[444]

As were occurrences of elder abuse.

> **Psychological abuse usually accompanies all forms of abuse, including financial. For example, forcing someone to sign a legal document such as an Enduring Power of Attorney when they are in hospital by threatening to put them into a nursing home.**[445]

Although many systems, both state and federal, can be used to perpetrate further abuse, overwhelmingly the Commission heard that the family law system was the worst offender.

> **Within the family law system what is intended to be focussed on the best interests of the child tends to place parents in adversarial settings. Where there are imbalances of power operating, and/or abuse has and/or is continuing to occur, the most vulnerable parties are open to pressuring and continued abuse. For many male perpetrators the family law system inflames already dangerous concepts regarding male privilege, gendered entitlement and women and children.**[446]

> **The current legislation in the Family Courts allows perpetrators to consistently breach procedures with no consequence. The family court process allows victims/survivors of domestic abuse to be re-victimised through the use of the court systems – the very thing which is meant to protect them.**[447]

Share With Us responses about the family law system were linked with comments about the financial burden on the victim-survivor and how the court system can be used as another tool for the person using violence to exert coercive control. Respondents told the Commission that histories of domestic violence, especially financial abuse and control, were routinely not taken into consideration by the court. Responses conveyed that the current system allowed people who use violence to manipulate and draw out the court proceedings, sometimes causing the victim-survivor to settle for less or 'give up' due to the inability to continue to meet the cost of litigation. The ability to access and afford legal counsel was repeatedly raised, especially for those who had joint assets/finances or had assets/finances in their own name which were being controlled by the person using violence.

> **My ex-husband uses the Family Court to financially control and abuse me, refusing to allow the sale of assets, depriving me of resources to manage debts he helped create … Despite his incarceration, he actively seeks to minimise my financial stability, using shared resources to fund his legal defence in both family and criminal cases. This ongoing financial abuse is exacerbated by the family court system's seeming disregard for the impact of his actions on our safety and well-being.**[448]

> **My abusive ex-husband used it to continue the financial abuse of the relationship by refusing to provide the financial disclosure ordered by the Court … all whilst dissipating the assets of the marriage and our joint business in full view of the courts. The system had no penalties for this behaviour which shifted the onus unfairly back onto me to incur ever increasing massive legal costs in a futile attempt to uphold my rights!**[449]

> **Once my ex-husband was charged for aggravated assault against me, he filed for family matters in the federal circuit court where he began his systematic abuse of myself. As he was no longer able to contact me due to the intervention order he resorted to having his lawyer email my lawyer consistently with accusations throughout our proceedings he filed up to 20 affidavits and had over a hundred emails which came at a cost to me to have my lawyer receive and send onto me.**[450]



There are a number of other federal and state systems that can be used to further perpetrate domestic, family and sexual violence. These include:

- the immigration system through threats of deportation or visa cancellation
- banking and financial systems through control of accounts, coercing the victim-survivor into shared debts or fraudulently putting debts in their name
- NDIS and aged care systems through controlling access to funding or aged care pensions, withholding supports, forcing people into care or misusing guardianship or powers of attorney
- criminal and civil justice systems, including civil and administrative tribunals, through cross-applications, bail variations, delays due to plea negotiations, vexatious complaints over property or housing
- mental health and healthcare systems through accusations of mental instability, refusing to agree to mental health support for a child or subpoenaing medical records.

Current state

Systems abuse was a focus of the Rapid Review, which recommended immediate audits of key systems by Commonwealth, state and territory governments, particularly those 'where significant harm is occurring, such as family law, child support, taxation and immigration systems', which should 'be informed by safety by design principles, given their effectiveness in other important areas of recent reform'.[451]

In making its recommendations, the Rapid Review referenced work currently underway by the eSafety Commissioner and the technology sector to implement safety-by-design principles in that sector, and work to embed safety by design in other systems, such as banking systems and utilities.[452]

The Safety by Design Framework and Principles developed by the eSafety Commissioner are applicable to systems beyond those operating in the technology sector. The framework is underpinned by 3 principles, which provide guidance on how to take a proactive and consistent approach to user safety.

Principle 1: Service provider responsibility

The burden of safety should never fall solely upon the service user. Every attempt must be made to ensure that online harms are understood, assessed and addressed in the design and provision of online platforms and services.

Principle 2: User empowerment and autonomy

The dignity of users is of central importance.Products and services should align with the best interests of users.

Principle 3: Transparency and accountability

Transparency and accountability are hallmarks of a robust approach to safety. They not only provide assurances that platforms and services are operating according to their published safety objectives, but also assist in educating and empowering users about steps they can take to address safety concerns.[453]

Catherine Fitzpatrick, Founder and Director of Flequity Ventures, has authored Designed to Disrupt discussion papers 'that examine the banking and general insurance industries and how these sectors could reimagine their products and services for financial safety'.[454] The most recent report in the Designed to Disrupt series is about essential services, employing safety-by-design concepts to recommend changes to the essential services industry.[455]

Safety-by-design principles are a sound basis on which to conduct an audit of existing systems, programs, products and services. They should also be considered (and it appears in some cases are actively being considered) by the regulators of systems and services such as the banking system, superannuation system and insurance system.

The Australian government, in response to recommendation 16 of the Rapid Review, announced an audit of key Australian government systems to identify opportunities to stop systems abuse on 6 September 2024.[456] The Department of the Prime Minister and Cabinet website states that the audit is underway with an initial focus on child support, social security and tax systems and how these systems are able to be strengthened to improve safety for victims and survivors and prevent further abuse.[457]

Family law system

Family law proceedings in Australia take place in courts exercising jurisdiction under the Family Law Act. In most cases, this is the role of the Family Court, with the exception of the Family Court of Western Australia, which is a unique state-based court employing both state and federal powers. Proceedings in the Family Court are civil matters which can be categorised into child-related (i.e. parenting orders) and non-child related (i.e. division of property) proceedings.

As a general rule, applications for orders are made to the Family Court. However, proceedings for a parenting order could theoretically be instituted in the South Australian Magistrates Court as a result of federal jurisdiction being vested in the courts of summary jurisdiction in each state and territory, by virtue of section 69J of the Family Law Act. The capacity for state courts to hear and determine parenting proceedings is, however, limited by section 69N which provides that, where the respondent seeks an order different from that sought in the application, the state or territory court must seek the consent of all parties to the determination of the application by the court. If consent is not given, the proceedings must be transferred to the Family Court.

The Family Law Act recognises that parents engaged in the family law system may be affected by a range of interrelated issues such as family violence, drug and alcohol abuse, and mental health issues which can affect the capacity of parents to make decisions about parenting arrangements and about the safety of themselves and their children. It may also affect decisions made about the division of property.[458]

Section 4AB of the Family Law Act defines family violence as 'violent, threatening or other behaviour by a person that coerces or controls a member of the person's family or causes the family member to be fearful'. Examples of behaviour that may constitute family violence include physical and sexual assault, psychological and emotional abuse, stalking, property damage, unreasonable denial of financial autonomy, unlawful deprivation of liberty and intentionally causing death or injury to an animal.

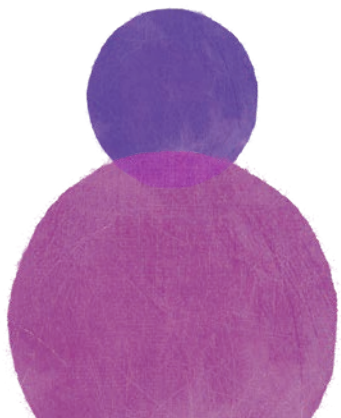
The Family Law Act was recently amended on 6 May 2024 to expand the definitions of 'relative' and 'member of the family' to include Aboriginal and Torres Strait Islander concepts of family (including but not limited to any kinship systems of that culture).

Subsections 4AB(3) and (4) of the Family Law Act provide that a child may be regarded as having been exposed to family violence if the child has seen or heard family violence or otherwise experienced the effects of family violence. Examples of situations where a child has been exposed to family violence include overhearing threats of death or personal injury, seeing or hearing an assault, and being present when police and/or ambulance officers attend an incident.

The Family Court has obligations under the Family Law Act which require it to take prompt action in relation to allegations of child abuse or family violence in parenting matters.[459]

Parties who are seeking parenting orders or consent orders must file a 'Notice of child abuse, family violence or risk' with their application. The Notice form seeks to ensure that families and their children receive appropriate and targeted early intervention and assistance and ensures that the Family Court can comply with its obligations under sections 67Z and 67ZBA of the Family Law Act to report allegations of, or a risk of, child abuse or family violence, to child welfare authorities.

The family law system has significant intersections with people using and experiencing domestic, family and sexual violence, as well as with children subject to safety and wellbeing concerns.[460] This is unsurprising, given that the system has been designed to divert most people away from legal proceedings and into mediation. Families who do proceed to litigation are made up of those deemed unsuitable for or exempt from mediation or dispute resolution due to child abuse and/or family violence concerns, and those who have been unable to come to an agreement in mediation.



The prevalence and severity of these intersections is measured by analysis of Notice forms filed with each application to the Family Court. Data presented in the Family Court's 2023–24 Annual Report evidences the complexity present in child-related matters before the court:

- 73% of matters alleged that a child had been abused or was at risk of child abuse
- 83% of matters alleged that a party had experienced family violence
- 77% of matters alleged that a child had experienced family violence
- 55% of matters alleged that drug, alcohol or substance misuse by a party had caused harm to a child or posed a risk of harm to a child
- 61% of matters alleged that mental health issues of a party had caused harm to a child or posed a risk of harm to a child[461]
- 91% of matters had 1 or more [of the above] risks
- 70% of parenting cases allege 4 or more [of the above] risks.[462]

The family law system in Australia has been subject to repeated and sustained criticism and calls for reform in the past 2 decades.

In 2017 the Australian government tasked the ALRC to conduct a review, and in 2019 the ALRC published 60 recommendations in its final report Family Law for the Future – an Inquiry into the Family Law System.[463] During the inquiry, the ALRC reviewed 13 previous enquiries and 31 reports into systematic issues in family law, 38 of which had been handed down in the past 20 years.[464] The 60 recommendations made by the ALRC were met with mixed responses from the previous Australian government. Recommendation 1, that the government establish Family Courts in all states and territories, harmonise them with child protection and family violence jurisdictions, and ultimately abolish federal Family Courts, was rejected outright.[465] Key recommendations that aimed to repeal and replace the presumption of shared parenting rights were also rejected or only partially accepted, while other recommendations around improved information sharing were accepted but only partially realised.[466]

The tensions between a presumption of equal parenting rights and the safety of children have been central to ideological debates affecting the family law system. The Family Law Act sets out factors that must be considered by judicial officers when determining parenting arrangements. These factors have been subject to a number of changes, reflecting different governmental priorities over time. Amendments in 1996 introduced the principle that children have the right to know and be cared for by both of their parents, and a right to regularly spend time and communicate with both parents. In 2006, following further pressure from father's groups, the *Family Law Amendment (Shared Parental Responsibility) Act 2006* (Cth) was introduced, which solidified the presumption of equal shared parental responsibility.[467] Recommendations in the 2019 ALRC inquiry sought to repeal the presumption of equal shared parental responsibility and instead introduce factors promoting the child's best interest; however, in the 2021 government response to the ALRC inquiry, the previous Australian government signalled reluctance to do so.[468] This position was reversed in 2023 following the change of government and the introduction of the *Family Law Amendment Act 2023* (Cth), which largely adopted the relevant ALRC recommendations.

Despite the initially mixed response to the ALRC recommendations, the family law system has undergone significant reform since 2019. Before 2021 there were 2 separate federal courts which both heard family law matters – the Federal Circuit Court and the Family Court of Australia. Both courts had different entry-points, rules, forms and procedures, and while the Federal Circuit Court primarily dealt with more volume and the Family Court primarily dealt with more complexity, an applicant could file an application to either court. In 2021 the courts were merged into the Federal Circuit and Family Court of Australia, including a superior court for complex family law matters (Division 1) and an intermediate court with broader federal jurisdiction (Division 2). The merger came with a harmonisation of rules and forms, a central entry-point for applicants, and a significant uplift in judicial officers and case management practices, including in the way it managed family violence and child safety.[469] Since 2019 there has also been legislative and structural changes in the way the court manages safety and risk, including the National Strategic Framework for Information Sharing between the Family Law and Family Violence and Child Protection Systems and the Lighthouse Project.

Ban on personal cross-examination in family law proceedings

A specific issue that was raised with the Commission was how section 102NA of the Family Law Act can be used to perpetrate systems abuse and benefit the person who is using domestic, family and sexual violence.[470]

Section 102NA bans personal cross-examination in family law proceedings in certain circumstances where allegations of family violence have been raised, such as where there is a final family violence order in place or either party has been convicted of, or charged with, an offence involving violence or a threat of violence to the other party.[471]

The ban applies automatically if one of the listed circumstances is met or the court may exercise its discretion to ban personal cross-examination even if the list of circumstances does not apply.

When the ban applies, section 102NA provides that 'the cross-examination must be conducted by a legal practitioner acting on behalf of the examining party'.[472] Where the party is not represented by a legal practitioner, they can apply for legal aid under the Violence and Cross Examination of Parties Scheme (the section 102NA scheme). The section 102NA scheme is administered in South Australia by the Legal Services Commission. The Legal Services Commission's fact sheet states that:

> **"[l]egal representation under the Scheme will be available for the hearing (generally the final hearing), including preparing for that hearing and for late-stage legally-assisted family dispute resolution, if appropriate. Access to the Scheme is not means or merits tested, but parties may be asked to contribute to the cost of the legal representation depending on their ability to pay and their circumstances. Conditions will apply to legal representation under the Scheme and ongoing representation is not automatic.**[473]

The purpose of the section 102NA scheme when it was introduced in 2019 was to minimise victim-survivors of domestic, family and sexual violence being exposed to further abuse. However, the Commission has heard that this section is being abused, with examples provided of parties sacking lawyers and getting new lawyers via the section 102NA scheme as a delay tactic to continue the abuse of the victim-survivor and subject them to further legal costs.

Concerns about the potential misuse of the section 102NA scheme were explored in research conducted by ANROWS in 2020 (the 2020 ANROWS Report).[474] The 2020 ANROWS Report noted that '[s]ome of the professionals and judges expressed concern that some SRLs [self-represented litigants] may take advantage of the scheme to obtain free legal representation'.[475] This included a case where the self-represented litigant 'appeared to use the scheme to seek further delays to the hearing' and an 'alleged perpetrator' who sacked his privately funded lawyers as soon as he found out he could get free representation through the section 102NA scheme.[476]

Section 102NA was also reviewed in 2021 in accordance with section 102NC of the Family Law Act (the section 102NA Review).[477] The section 102NA Review noted that several submissions and interviewees expressed concerns about the potential for misuse of the scheme. For example:

> **If, for example, a perpetrator becomes unrepresented shortly before or at a final hearing, that may be due to an intention to cause problems or to the withdrawal of the practitioner for ethical or other reasons. There was some acceptance that there would be manipulation or misuse of the Scheme but that cannot be avoided.**[478]

> **Judges, legal aid commissions and practitioners consider it is a misuse of the Scheme for parties who can clearly afford to pay private legal practitioners to obtain legal assistance at public expense. The review was told about property cases where one or both assisted parties were in dispute over assets worth millions of dollars. While this outcome is permitted once a cross-examination ban has been imposed, it offends their sense of fairness. It is regarded as unacceptable and morally wrong for public money to be spent on those Scheme cases when deserving applicants miss out on standard grants of legal aid in other family law proceedings.**[479]

This was reflected in the Women's Legal Services Australia submission to the section 102NA Review, which wrote that:

> **[s]ince the introduction of the Scheme we have heard anecdotally of cases where both parties were initially legally represented and then following a determination that the ban on cross-examination applied, the wealthy male party sacks his legal representative so as to be eligible for legal representation funded by Legal Aid … Further, women raised with WLSA prior to the introduction of the Scheme, the tactic of male ex-partners choosing to self-represent against their legally represented ex-partner and then bombarding the woman's legal representative with unnecessary and often irrelevant correspondence, driving up legal costs – another form of systems abuse.**[480]

The section 102NA Review considered potential amendments to the scheme, including means testing, excluding property cases altogether, or excluding only high-value asset property cases, but ultimately did not recommend any such amendments, noting that any changes would apply to both parties. Instead, the section 102NA Review recommended that 'the government recognise that providing Scheme legal assistance to some parties in high value asset pool property only cases is seen as an inappropriate use of scarce public funds (and often described as a misuse of the Scheme) but is permitted under the present arrangements'.[481]

The Australian government's response to this recommendation stated that:

> **[t]he Government notes that financial abuse is a common form of family violence, and it would be unreasonable to assume that family violence victims have the means to access private representation simply because they are party to a high value asset pool property only case. Legal assistance to unrepresented parties where the ban applies – regardless of the value of the asset pool involved – is necessary to protect all victims from the trauma of direct cross-examination.**[482]

Essential services providers

The Essential Services Commission of South Australia (Essential Services Commission) raised another specific issue with the Commission regarding the way in which essential services providers can be exploited to abuse and control victim-survivors, causing them psychological and financial stress.[483] This can take the form of a perpetrator opening accounts in a victim-survivor's name without their knowledge and running up debts or attempting to access personal information such as new addresses held by essential services.

The Essential Services Commission identified that an amendment to the *Essential Services Commission Act 2002* (SA) to explicitly specify their role in developing consumer protections for domestic, family and sexual violence victim-survivors would ensure it has the legal power to impose obligations on essential services to enhance victim-survivor safety and information security.

The Essential Services Commission is currently working with water and energy retailers and family violence experts to develop safe and effective support for consumers impacted by family violence. Under the SA Water Regulatory Determination 2024 (the 2024 Determination) and the Water Retail Code – Major Retailers (SA Water Code), SA Water is required to enhance existing consumer protection by providing additional protections for tenants, customers experiencing payment difficulties and customers affected by family violence.[484] The family violence protections are being progressively implemented from 1 July 2024, with full implementation required by 1 January 2026. The full effects of the determination won't be apparent until the changes are operationalised.

The 2024 Determination has been informed by the work undertaken by the Essential Services Commission of Victoria following Victoria's Royal Commission into Family Violence, which considered the necessity of household utilities such as water, gas, electricity and communication devices, and the ability of perpetrators to use control over these essential services as a form of economic abuse.[485]

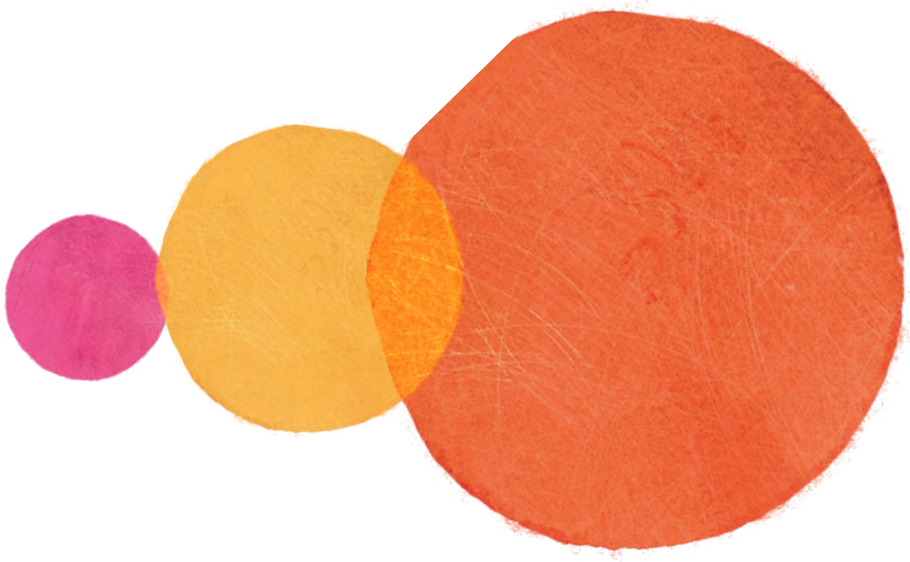
Victoria first implemented protections for customers experiencing domestic, family and sexual violence in 2018, with the Australian Energy Regulator and Western Australia's Economic Regulation Authority following suit. A review of the implementation of the family violence provisions in Victoria found that, 'overall, customers have benefitted from family violence protections' and that the provisions 'remain appropriate and set a consistent minimum standard of protection for all customers and encourage businesses to develop their own flexible responses to meet individual customer needs'.[486]

The Victorian review also found that, while no significant changes were needed, there was an opportunity to improve the approach taken by businesses in 4 key areas: learning and collaboration; increasing access to support; setting clear expectations; and understanding impact. The review nominated 8 actions to address the identified areas of improvement, including increased awareness of support available to customers experiencing family violence, development of reporting requirements that strengthen water business obligations to self-report non-compliance, and review and formalisation of monitoring and reporting on the family violence provisions.[487]

In Western Australia, the Water Services Code of Practice (Family Violence) 2020 (the Family Violence Code) came into effect on 8 December 2020. Codes of practice may be made by the Minister under section 26 of the *Water Services Act 2012* (WA). Failure to comply with a code of practice may result in a fine.

The Family Violence Code prescribes minimum requirements for water services providers to support their residential customers who have been affected by family violence. For example, a water services provider must have a family violence policy that sets out a number of matters, including the training to be provided to employees to enable them to appropriately respond to customers affected by family violence, the information to be provided to customers about external support services, security of information and processes to avoid repeat disclosures.[488]

Along with the Family Violence Code, the Western Australian Department of Water and Environmental Regulation has published a guideline: Guidance for Water Service Providers in Addressing Family Violence. This document makes it clear that addressing family violence involves a whole-of-community approach and includes information to assist water services providers to develop and implement family violence policies in accordance with the Family Violence Code.[489]



Future state

Systems abuse, particularly in the family law system, is enabling further harm to victim-survivors. Many described these abuses as equally or more damaging than physical violence.

As highlighted by the Australian Institute for Health and Welfare:

> **Systems abuse can adversely affect a victim-survivor's health, wellbeing, finances and social connections. It can result in a victim-survivor being unprotected or falsely charged as a perpetrator and undermines legal systems.**[490]

Despite its prevalence, many forms of systems abuse are not criminalised, limiting the ability of the domestic, family and sexual violence sector to respond or intervene. While future coercive control laws may cover more serious forms, urgent action is needed now. Both South Australian and Australian governments must act immediately to prevent and address systems abuse.

The Commission welcomes the Australian government's audit of federal systems but raises the following concerns:

- The audit appears limited in scope – focusing only on child support, tax and social security systems. It omits the family law system, despite its central role in systems abuse.
- Only $200,000 was allocated for this national audit in the 2024–25 budget – insufficient to address the complexity and scale of the issue.

The Commission urges the Australian government to:

- ensure audits cover all systems that can be used to cause harm, especially the family law system
- provide independent oversight and sufficient resourcing
- empower the Domestic, Family and Sexual Violence Commissioner to lead the audit of the family law system, supported by the Lived Experience Advisory Council.

Practitioners raised significant concerns about misuse of section 102NA of the Family Law Act. While the Commission was not able to examine the issue in depth within the scope of its inquiry, there was compelling evidence that perpetrators are using the provision to delay or manipulate proceedings, causing further harm.

The audit of the family law system should:

- investigate how section 102NA is being used
- explore ways to prevent misuse without compromising fairness or victim-survivors' access to justice.

The role of states in preventing abuse

The South Australian government must also play a leadership role. The Government Steward should coordinate a full audit of state systems and services, identifying gaps and vulnerabilities where abuse may occur.

This should be supported by legislative reform. The Commission recommends an amendment to the Essential Services Commission Act to clearly set out the Essential Services Commission's role in developing consumer protections for victim-survivors of domestic, family and sexual violence.[491]

Recommendation 92

The South Australian government advocate for the Australian government to progress the audit of Australian government child support, social security and tax systems.

The Australian government task and resource the national Commissioner for Domestic, Family and Sexual Violence with an independent audit of the family law system to identify and address the potential for systems abuse, including the use of section 102NA of the *Family Law Act 1975* (Cth).

Recommendation 93

The South Australian government undertake an audit of South Australian systems and services to identify and address the potential for systems abuse and safety breaches.

Recommendation 94

The Treasurer progress amendments to the *Essential Services Commission Act 2002* (SA) to clearly set out the Essential Services Commission's role in developing and ensuring consumer protections for domestic, family and sexual violence victim-survivors.

The role of media

The National Plan states that the media has a critical role in shaping how the community thinks and talks about violence against women.

> **Currently, there is limited evidence-based education for journalists on the drivers of violence or how to safely and ethically report it, either as part of their formal qualifications or on the job. News reports often reinforce community attitudes that condone or tolerate violence. However, the media can also work in a positive way to raise awareness of support services for victim-survivors and provide supportive messaging about holding those who choose to use violence accountable.**[492]

The power of the media to set the public agenda and to influence public thinking is well understood. 'Agenda-setting theory' finds that the media sets public agendas by first choosing which issues the public should think about by prioritising certain topics, and then guides how people think about those issues by how it frames its reporting.[493] This means that while how the media reports on issues remains important, the media's ability to set the public agenda stems mostly from its ability to determine what issues it covers, and what issues it ignores. 'Issue salience' refers to the prominence and/or importance of a particular issue to the public; the more frequently the media covers an issue, the more salient it becomes to the public, even when it may not have been prior to frequent media coverage (a commonly used example is immigration).[494]

The theory also sets out that some sources become gatekeepers of public agenda setting, including inter-media agenda setting by dominant media groups and their editors, as well as high-profile individuals and office holders, and influential lobby and interest groups.[495] This background is important in the Australian context, which has one of the highest media ownership concentrations in the world.[496]

In this context, the media's role in shaping public understanding of domestic, family and sexual violence is twofold, with:

- agenda-setting – deciding whether to report on the issue at all
- framing – choosing how to report on the issue, including the language and perspectives used.

When done well, consistent and accurate reporting can raise awareness, maintain public engagement, and drive social change. But when done poorly, media reporting can cause real harm – by normalising violence, minimising abuse and blaming victims.

Greater volume of media reporting on domestic, family and sexual violence is important – but equally important is the quality and framing of that coverage. Sensationalist or careless reporting can distort public understanding and reinforce harmful attitudes. Good reporting, by contrast, can expand public awareness of what constitutes violence and how it can be addressed.

Research examining media reporting on domestic, family and sexual violence in Australia affirms the important role that the media has in both agenda setting and framing the public discourse. A 2016 ANROWS research study titled Media Representation of Violence Against Women and their Children found that:

- the media acted in myriad ways to perpetuate ambiguity and ambivalence concerning the definition, the dynamics and the harms of family violence and sexual assault
- how people were represented and the word choices used to describe them contributed to minimising the harms of rape and domestic violence
- some news stories were presented in a sensationalist manner and others were not
- the angles or aspects of the stories pursued in news items pointed to editorial judgements about relevance or perceived news value.[497]

The research paper Perpetration, Victimhood, and Blame: Australian Newspaper Representations of Domestic Violence, 2000–2020 details a study in which articles on domestic, family and sexual violence from 23 newspapers across each state and territory over a period of 20 years were analysed.[498] The researchers found that the media in all Australian states and territories were likely to:

- frame domestic violence as an individual event rather than a systemic problem[499]
- focus disproportionally on acts of physical violence and particularly homicides
- frame domestic violence as a problem specific to certain cultures and beliefs
- frame perpetrators as being victims of their circumstances, of good character or one of a few 'bad apples'. [500]

The research paper concluded that:

> **[a]lthough an improvement over more recent years has been noted in the literature, more attention must be paid by journalists to ensure they do not represent the social problem of domestic violence as a series of individualized, isolated events … this article has emphasized the importance of increased effectiveness within newspaper reporting on domestic violence by Australian journalists and editors. Dedicating space within articles to place individual cases of domestic violence within the broader social context is crucial in communicating the systemic nature of such violence to the general public … Editors can help in this regard, by providing space, time, and word counts that will allow for more effective representation of this key social issue.**[501]

In short, contextualising individual incidents within the broader issue of gender-based violence is essential for helping the public understand the systemic nature of the problem. Without this, reporting risks misleading the audience and minimising the scale of the issue.



Current state

In an attempt to address inconsistent and sometimes harmful media reporting on domestic, family and sexual violence, a number of jurisdictions and advocacy bodies have recognised the need to develop media reporting guidelines for best-practice reporting on domestic, family and sexual violence.

The Special Taskforce on Domestic and Family Violence in Queensland published its report Not Now, Not Ever: Putting an End to Domestic and Family Violence in Queensland in 2015.[502] The report challenged the media industry to 'depict domestic and family violence in ways that create a better understanding of the nature of the problem, as well as ways to best respond to either prevent or intervene',[503] and ultimately recommended that the government develop 'a media guide to assist news and current affairs programs when reporting on domestic and family violence incidents in Queensland'.[504]

In the subsequent 2021 inquiry by the Queensland Women's Safety and Justice Taskforce, it was established that 'problematic media reporting of domestic and family violence is continuing' and that the media industry has 'a responsibility to minimise the potential harm to future victims while remaining independent and robust in their public interest reporting and raising community awareness'.[505] Hear Her Voice – Report One made 2 specific recommendations about the media:

- the Queensland government review the Domestic and Family Violence Media Guide
- the Queensland government advocate nationally for consistent media standards that operate similarly to those for reporting on suicide. The standards should include a trauma-informed approach that mitigates risks associated with reporting on and interviewing domestic and family violence victims and their families.[506]

Queensland's Domestic and Family Violence Media Guide was launched in 2017 and updated in 2023. It is publicly available via a government website.[507]

A number of other domestic, family and sexual violence media guides have been developed by advocacy bodies around Australia, including the sector-developed guides for ACT media reporting on domestic and sexual violence against women and children (2014),[508] Our Watch's national media reporting guidelines (2019) and subsequent Guide for Media Reporting on Violence against Transgender and Gender Diverse Communities (2024),[509] and the Australian Press Council's Advisory Guideline on Family and Domestic Violence Reporting (2024).[510] In 2024, Western Australia released its own Family and Domestic Violence Media and Reporting Guidelines, developed by the Office for Prevention of Family and Domestic Violence, drawing from Our Watch's guidelines.[511]

While the different guides do vary in content and approach, particularly in how they either include or exclude different cohorts who experience domestic, family and sexual violence, there are throughlines in their recommendations for media reporting. These include emphasising safety as the first priority, clearly naming what is occurring as domestic, family and sexual violence, keeping people who use violence in view, and not excusing, minimising or blaming the victim-survivor for what has occurred.

The Rapid Review found that the media has a significant role to play in the prevention of domestic, family and sexual violence and called for the development and adoption of national reporting standards.[512] In its report, the Rapid Review wrote:

> **certain industries, such as alcohol, gambling, media and technology, are particularly well positioned to prevent and reduce domestic, family and sexual violence. This is in part because these same industries too often function as the foundation for, or means of, the escalation of abuse … the Review recommends that governments establish and embed national standards for media reporting on gender-based violence to prevent the perpetuation of harmful narratives that can escalate risk.**[513]

The challenges faced by media organisations reporting on domestic, family and sexual violence without nationally consistent standards is well summarised in the Australian Press Council's guide, which writes that:

> **[r]eporting of family violence is already heavily regulated and restricted by (often inconsistent) State, Territory and Commonwealth laws. Media organisations are subject to at least 40 different laws in this area, the breach of which may amount to an offence or contempt of court, or open up potential liability for damages under defamation law.**[514]

Media reporting on domestic, family and sexual violence in South Australia has caused harm to many individuals, particularly those directly affected. The Commission received submissions from people who shared how media coverage added to their trauma or misrepresented their experiences.

One mother, whose 16-year-old daughter was murdered by her ex-partner, described how invasive and unethical media behaviour intensified her grief:

> **After my daughter's death the press 'story bombed' the media with falsifications. When I took this up with the police, I was told they were trying to 'flush the family out' in order that they could get a story. One TV station managed to get my number and phoned and asked for an interview, when I declined they said to me 'you'd better not be giving an interview to another station'. This was within days of her death. Some restrictions around the media's reporting and approaching families would be welcome.**[515]

Others highlighted how the media can distort public understanding by misrepresenting the nature and prevalence of domestic and sexual violence. This often includes downplaying abuse or framing perpetrators as sympathetic figures.

> **Even the Media['s] … portrayal of men who murder women, "he was a family man" … it needs to end.**[516]

> **[A]ll women have the right to be depicted fairly and without discrimination within the media industry and by the media … fair, non-discriminatory and appropriate standard of language, imagery, perception and portrayal be adhered to.**[517]

> **The right to privacy and not allowing the media to cast aspersions on the character of either party, good or bad.**[518]

Advocates and community members also raised concerns about the media's language choices, which can inadvertently minimise the severity of violence:

> **Concerns have been raised by NCWSA members that the continued use of the term 'domestic violence' in the media may diminish the impact of the severity of this type of violence e.g. "the incident was domestic in nature. There is no risk to the public.**[519]

Some submissions pointed out that media coverage tends to focus more on sexual violence committed by strangers, which can distort public understanding and increase stigma for survivors of abuse by someone they know.

> **Sexual offences perpetrated by a stranger are more likely to receive media attention as police will use the media strategically to seek the public's assistance in identifying the perpetrator. Sexual offences perpetrated by strangers are also more likely to proceed through court once an offender can be identified, and these cases will likewise attract more media coverage than offences prosecuted where victim and offender are known to each other. This can unfortunately create a misunderstanding on the part of the public, who may perceive that sexual offences committed by strangers are more prevalent and more impactful, however it is more confusing and distressing to be harmed by people who are supposed to love and care for you than it is to be harmed by a stranger.**[520]

One submission described how misleading media portrayals led a woman to misinterpret her own experience of abuse:

> **[She] lived in DV for ten years, having no idea that this is what she was living in ... The media had represented it as a low socioeconomic male in a blue singlet giving a woman a black eye. This hadn't been her experience, so she just figured she was in a diffcult marriage that required more effort on her part to make her husband happy.**[521]

These stories and observations underscore the urgency for media reform, improved training and national standards that centre the experiences of victim-survivors, promote accuracy and avoid further harm.

Future state

While the media plays an important role in forming and framing public attitudes about domestic, family and sexual violence, that role is not always well met by media outlets. To maintain domestic, family and sexual violence as a salient public issue, more frequent and consistent reporting is needed. To ensure the public is well informed on domestic, family and sexual violence as a systemic public issue, accurate and consistent media framing is required.

> **The Media ... needs to be called out ... There needs to be mandatory reporting standards for cases of domestic violence particularly those that have resulted in murder. I cannot emphasis this enough ... I think of what we hear on the radio, what my daughter hears on the radio or reads on social media and the way these things are reported is simply not good enough.**[522]

There are no nationally agreed standards for media reporting on domestic, family and sexual violence in place, and the Australian government's progress on accepting and implementing the Rapid Review's recommendations is not clear. The recommendations made by Queensland's Women's Safety and Justice Taskforce and the Rapid Review calling for nationally consistent media reporting standards appear eminently sensible.

The Australian Press Council has developed 2 Specific Standards on the coverage of suicide and contacting patients (people in hospital and residential care facilities). Both Specific Standards have been developed through extensive consultation. The Specific Standards on Coverage of Suicide were developed in consultation with the print and electronic media, mental health professionals and service providers who offer support to those at risk of suicide.[523]

Both of the Specific Standards are binding on all publications subject to the Press Council's jurisdiction, and all publisher members of the Press Council have made a legally binding commitment to these Standards.[524] The Press Council will consider complaints about material published in print or digital form by publishers which are 'constituent bodies' of the council (most Australian newspapers and magazines, and their associated digital outlets, are constituent bodies), and may consider complaints about material published by other publishers; however, those publishers are not under a legal obligation to cooperate with the Press Council.[525]

In addition, there is a need to review the Press Councils Statement of General Principles and Statement of Privacy Principles to reflect concerns regarding reporting on domestic and family violence. These include ensuring language avoids reinforcing harmful stereotypes, reporting responsibility on marginalized groups to avoid traumatisation, explicitly recognising gender-based violence as a high risk privacy context, and recognising that social media magnifies privacy risks of reporting.

While national media guidelines already exist, developed by Our Watch in conjunction with the domestic, family and sexual violence sector, state and territory governments and relevant media stakeholders - they are not legally binding or enforceable.

The Commission recommends that a national standard should be developed in consultation with print and electronic media, stakeholders including Our Watch, and domestic, family and sexual violence providers, on the responsible reporting of domestic, family and sexual violence by media. This standard should be enforceable and legally binding.

The Commission has also received input on media reporting on the content of Victim Impact Statements from the Commissioner for Victims' Rights.

The *Victims of Crime Act 2001* (SA) establishes that a victim is to be informed of their right to have the impact of the offence (any injury, loss or damage suffered as a result of the offence) considered by the sentencing court, and the manner in which the court may use the material provided in the course of the victim exercising that right. The Commission notes that reforms passed the South Australian Parliament in November 2024 to ensure that victims are able to describe the impact of the crime in their own words without risk of being edited, and that victims will be advised of their rights to tender a statement.[526]

If read out in court, a Victim Impact Statement can be reported on in the media.[527] Even if not read out in court, after sentencing a Victim Impact Statement becomes part of the official court file. Any member of the public or media can request to read a court file after a court case has concluded. Further, if a judge speaks about a Victim Impact Statement during sentencing, their comments will be made available to the media, and written sentencing remarks can be downloaded from the CAA website.[528]

The legislation is silent on informing a victim of the potential use of their statement by the media, though the Sentencing Act does allow for the victim to request that the court considers their Victim Impact Statement without it being read aloud to the court. The Evidence Act also allows the court to make a suppression order where the court is satisfied that doing so would prevent 'undue hardship to an alleged victim of crime'.[529] It is not clear to the Commission whether victims are consistently informed about the option of applying for a suppression order when considering making a Victim Impact Statement.

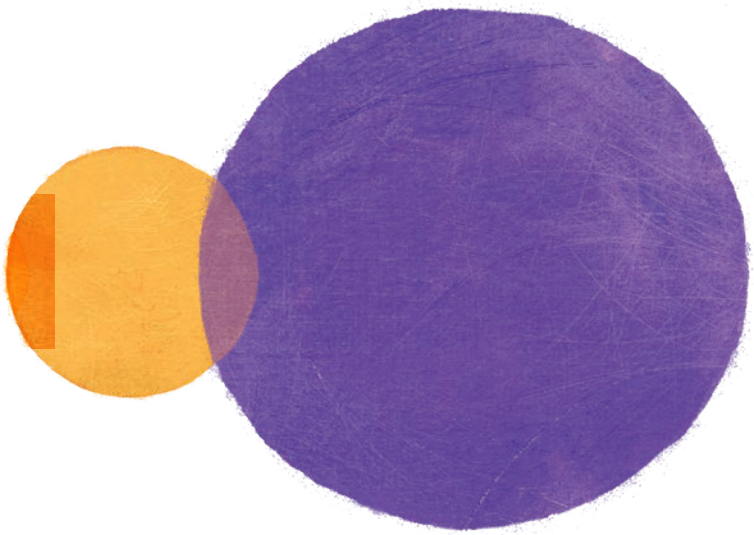
The Attorney-General's Department consulted on proposed changes to the use of Victim Impact Statements in 2023. In their submission to this consultation process, the Law Society of South Australia supported a proposal put forward in a discussion paper:

> **Alternatively, to avoid the need for the use of suppression orders and to strengthen the ability for VIS [Victim Impact Statement] content to be kept private when tendered, read aloud, or referred to in sentencing by a sentencing court, a presumption against the publication of VIS content could be inserted in legislation, providing that any VIS content received by a sentencing court can only be published with the permission of the Court; and such permission will not be granted unless the maker of the VIS consents.**[530]

This proposal was not adopted.

The Commission is aware of concerns that media access to a Victim Impact Statement, without a victim's knowledge or consent, works against a victim having agency over their own story. Fear for their personal safety, or of how the victim may be portrayed in the media, may impact their choice in what they say in their Victim Impact Statement, if they choose to exercise their right to make a statement at all. There is also a possibility that by Victim Impact Statements being available to the public on request, a defendant may access and/or publish a copy of a Victim Impact Statement, which may be used as a way of continuing the abuse.

The Commission recommends that the South Australian government consult with the Commissioner for Victims' Rights, the Lived Experience Advisory Network's and the media about reforms to require a victim-survivor's consent before the existence of, or contents of, their Victim Impact Statement can be reported on, published, produced or reproduced.



Recommendation 95

The national Commission for Domestic, Family and Sexual Violence work with the Australian government to develop a national standard for responsible media reporting on domestic, family and sexual violence. The national standard should be legally enforceable and binding and should be developed in consultation with print and electronic media; domestic, family and sexual violence service providers; and other relevant stakeholders.

Recommendation 96

The Attorney-General progress amendments to the *Victims of Crime Act 2001* (SA) in consultation with the Commissioner for Victims' Rights, the Lived Experience Advisory Networks and media to require a victim-survivor's consent before the contents of their Victim Impact Statement can be reported on, published, produced or reproduced.

Endnotes

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3 Share With Us.
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Chapter 6

Supporting victim-survivors

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Each time [the children] went that different black feeling came back. It became familiar. It would get so thick and big that I could not breathe. It was like a black blanket. When they came home I thought I could see little children black blankets neatly tucked around their tired and harmed little minds and bodies. Still no one listened. No one cared about black blankets, big or small ...

After more than thirty years of speaking with professional people I finally had met someone who knew about blankets. She did not want to just speak to me and my blanket. She knew how smart we were at talking. She wanted to crawl under it with me. Amazed the blanket rebelled and wound tighter around me. She did not give up. She gently fought her way under my blanket. She sat with me. Only my children had done this. She said different words to me that at first I did not understand. My blanket was quiet. I did not have to find words. I just had to feel. For the first time in many, many years I felt safe. A connection was made between my mind and body. For the first time ever, someone else witnessed, understood and acknowledged my pain ...

My body traced its story of pain and grief. I was amazed. We spoke about blanket makers, stealers of self and wreckers of happiness. I could feel my blanket gradually and quietly separate from me. Over time body tears filled with shame, blame, pain, grief and helplessness slowly loosened the cruel and manipulative weaving of many. I also saw my own weaving that was often done with weighted feet and rocking backwards. In time the blackness faded into weightless threads of light until it slowly gently floated away. And then it was gone. I was amazed how this had happened. I was now able to continue to heal properly.

Body lighter. Shoulders straighter. Feet weightless. I am invisible no more. I want to live. I am older. I now clearly see and understand this very thin, sad, brave, tired, frightened, confused young woman. So alone. So ashamed. So responsible for everyone. No one to help her. She was the only one who had tried relentlessly over so many years to keep her children alive and safe. She just wanted the abuse to stop. When she had failed she blamed herself. I feel so sorry for her. I now know about blame, shame and responsibility. She was so kind and brave and strong. All she wanted was for her children to be loved, safe and happy. She also had just wanted to be loved, safe and happy.[1]

Introduction

From the creation of the first women's shelters and refuges in the 1970s to the establishment of the Domestic and Family Violence Safety Alliance (DFVSA) in 2021, women-led organisations and victim-survivors have played a central role in driving responses to domestic, family and sexual violence.

Their advocacy has helped shift public perception, transforming domestic violence from a 'private matter' into a deeply gendered, public health issue requiring urgent societal attention.

In South Australia, organisations led by women, along with community, faith-based groups, Aboriginal Community Controlled Organisations (ACCO) and agencies like Yarrow Place, have worked tirelessly to keep women and children safe.

These groups have developed creative and collaborative solutions, even in the face of chronic underfunding, to meet growing demand for support services.

South Australia's strengths-based, crisis-focused system is effective in helping women escape violence. It has supported women and their children to leave unsafe environments, often at moments of extreme danger. The system provides critical services such as accommodation, specialist support, and assistance navigating financial insecurity, legal proceedings, intervention orders and counselling. For many women and children, this has been a lifeline, delivering safety despite an ongoing lack of government investment and leadership.

This system, and those who built and sustained it, must be recognised for their impact. They have made South Australia a safer place for many victim-survivors. Now is the time to invest in and strengthen this system, so it can meet the needs of even more women, children and other victim-survivors.

Chapter 6 is for victim-survivors. This chapter outlines a blueprint to better support them, especially children and young people.

The Commission heard that the trauma caused by domestic, family and sexual violence is deep and long-lasting. While South Australia's crisis response system has protected many women in moments of danger, it is often unable to offer the medium- and long-term support needed for genuine recovery. Over time, the system has come to treat leaving a violent relationship as the only 'vaccine' for abuse when, in fact, long-term investment and support are needed to prevent ongoing harm.

The Commission heard repeatedly that chronic underfunding has forced service providers to make heartbreaking decisions, having to prioritise support for women facing the most imminent risk of harm and of homelessness.

Distressingly, the Commission learned children and young people are all but invisible in the current system. The enduring myth of childhood resilience, that young people will simply 'bounce back', can shape policy and service design. This is demonstrably false, especially in the context of domestic, family and sexual violence, which can have lasting, devastating impacts on a child's life trajectory.

> **"You will not change anything if you don't seek the voice of children who have experienced DFV by being in a household or in an environment that was beyond their control. Children are victims in their own right! You need to acknowledge this in the Royal Commission recommendations.**[2]

The call to action

Victim-survivors of domestic, family and sexual violence need more than just safety: they need long-term, trauma-informed recovery. Services must be resourced to move beyond immediate crisis responses and to offer holistic, empowering support. This includes access to legal assistance, therapeutic supports, housing, education and culturally safe services that reflect the diverse experiences of victim-survivors, including children and young people.

Chapter 2 recommended embedding a needs assessment tool within the risk assessment process. The activation of this approach must be supported by flexible funding models to support the needs assessment and to provide longer-term case management for victim-survivors.

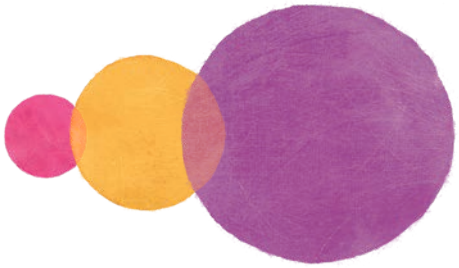
Activation also requires the development of a statewide referral network to support the needs assessment and reduce the burden on victim-survivors navigating fragmented systems, especially in regional and remote areas.

New services should be procured to fill gaps identified through co-design with people with lived experience, particularly children and young people, and funding must increase to meet demand. Additionally, equitable access to therapeutic services across South Australia, particularly in regional and remote areas, remains a critical and unmet need. No matter where they live or what barriers they face, all victim-survivors deserve timely, culturally safe and trauma-informed care to heal.

Safe, stable and accessible accommodation is a cornerstone of an effective response to domestic and family violence. Yet, too many victim-survivors in South Australia are still being housed in motels and caravan parks due to the lack of appropriate crisis and transitional housing. This is particularly inadequate for women with children, people with disability and people with complex needs. Purchased accommodation must be phased out and replaced with purpose-built, trauma-informed and supported housing options tailored to the needs of all victim-survivors.

A statewide audit of existing domestic and family violence accommodation must be a priority to identify gaps in accessibility, safety, condition, demand and suitability, particularly in regional and remote areas. This must include an assessment of the ability to accommodate people with disability and/or who have pets.

South Australia needs a bold and fully funded investment strategy to address the short-, medium- and long-term demand for crisis and transitional housing. This should focus on infrastructure for underserved areas, including the APY Lands, and increase supported options for particular groups, including unaccompanied young people, people with disability and LGBTQIA+ victim-survivors. Crucially, the strategy should also embed ring-fenced funding for ACCOs to ensure culturally appropriate service delivery, especially where services are currently unavailable.



Ensuring long-term access to safe housing is not only about meeting basic needs; it is about giving victim-survivors the security and support they need to leave violent situations and rebuild their lives with confidence and dignity.

As South Australia works to strengthen its response to domestic, family and sexual violence, all services must be equipped to meet the diverse and intersecting needs of victim-survivors. This means government investment in building the cultural safety, accessibility and inclusivity of the sector through the development of robust accreditation frameworks.

To support this transformation, the South Australian government must also fund the establishment of dedicated roles to meet the needs of victim-survivors with disability and LGBTQIA+ victim-survivors.

The justice system must be a place of safety, not further harm, for victim-survivors of domestic, family and sexual violence. South Australia must invest in trauma-informed, culturally safe court environments. This includes developing separate and secure vulnerable witness suites, ideally located outside court buildings, where people can give evidence without fear, intimidation or retraumatisation.

The South Australian government must also commit to establishing minimum safety standards for all court buildings, guided by the voices of victim-survivors and the Commissioner for Victims' Rights. This requires a dedicated infrastructure fund and a 10-year capital works plan to upgrade facilities, especially in suburban and regional locations where court environments remain inadequate.

Victim-survivors must be informed, empowered participants in the justice system, not passive recipients of delayed or inaccessible updates. The Courts Administrative Authority (CAA) needs to be resourced to establish a dedicated, reliable, accessible and timely information mechanism. Moreover, reforms must be introduced to close the current gaps in bail application procedures.

Victim-survivors navigating the criminal justice system often feel overwhelmed, sidelined and unsupported. To address this, the government should fund a professionally facilitated peer-support pilot program. This program would offer critical emotional support, build confidence and promote agency. In parallel, the state must review and improve the existing witness intermediary scheme, ensuring consistent and equitable access to communication partners for those with complex needs, especially children and young people.

In addition, trial delays continue to compound the trauma of victim-survivors, prolonging uncertainty and distress. The success of the Criminal Priority Programme offers a proven path forward, and South Australia must explore its expansion to include major indictable domestic, family and sexual violence cases, along with the proposed new offence of coercive control.

Victim-survivors deserve nothing less.

Meeting the needs of victim-survivors

The response to domestic, family and sexual violence in South Australia is crisis driven and unreasonably restricted by rigid funding models. Existing funding and service-delivery models, for the most part, restrict eligibility for non-government crisis response services to adult women who are at high risk of intimate partner violence and at risk of homelessness, with other victim-survivors receiving little to no support. A similar issue applies to those who are experiencing sexual violence outside of a domestic or family relationship. There is almost no capacity within the current system to work with victim-survivors to identify their medium- to longer-term needs.

The South Australian government accepts this, stating that:

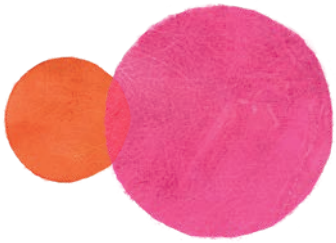
> **[w]here there are healing and recovery responses, they are likely to be for a limited time with very little ongoing or long-term support provided through mainstream services. Eligibility for these services can also be limited due to the limited number of services available which means only those people with high needs are likely to receive the service. Leaving people who are seen as less vulnerable to provide for their own ongoing healing which is a significant barrier for those people who do not have the financial capacity to pay.**[3]

> **It is acknowledged that the existing specialist domestic, family and sexual violence service responses prioritise women and their children leaving relationships and are not funded to provide a response in the home when the perpetrator is still an active member of the household … A connected service system responds to the needs of people in contemplative and recovery phases from domestic, family and sexual violence as there are many victim-survivors who do not access the established crisis response in the state and are seeking support whilst continuing the relationship or seeking to explore alternative options.**[4]

In June 2024, the national Domestic, Family and Sexual Violence Commission and the Australian Domestic, Family and Sexual Violence Recovery Alliance co-hosted the inaugural Domestic, Family and Sexual Violence Recovery and Healing National Roundtable. This roundtable informed the first Action Plan for the National Plan's 'recovery and healing' pillar.[5]

The roundtable's summary report sets out urgent recommendations to improve recovery support for victim-survivors, focusing on areas like mental health and wellbeing, safe housing, economic security, access to justice, and support for children and young people.[6] Key recommendations included:

- building the capacity of service providers and facilitators to deliver flexible, person-centred support tailored to victim-survivors' needs
- creating a 'no wrong door' system to ensure that survivors can get help regardless of where they are in their recovery journey or who they approach for support



- ensuring continuity of support for victim-survivors beyond initial housing
- increasing awareness and education about financial abuse and building financial literacy
- involving children and young people in the design of support systems to ensure their needs and voices are heard and met.[7]

Healing and recovery cannot be achieved through short-term fixes. It requires identifying the unique recovery needs of each victim-survivor, and then the pathways to meet those needs, with services walking alongside victim-survivors.

The recovery and healing of a victim-survivor is not linear – the pillars of early intervention, response, and recovery and healing are a useful framework for governments but are not a realistic description of every victim-survivor's experience. Some victim-survivors may start their recovery and healing process, only to later return to crisis or require early intervention. This underscores the need for a service system that is flexible, adaptive, and responsive throughout a person's entire recovery journey.

Professor Silke Meyer gave evidence on Day 8 of public hearings on the topic of recovery and healing. Professor Meyer explained that a lack of recovery and healing support undermines a victim-survivor's ability to achieve long-term safety and reach 'their full potential, whether that's professionally, whether that's in their parenting capacity, whether that's as a community member or a family member more broadly'.[8]

Current state

Holistic care

Victim-survivors, service providers, advocates, academics, and the South Australian government all stressed the importance of building a holistic, long-term recovery and healing system. Submissions consistently called for a wide range of accessible, wraparound services, spanning community support, health and mental health care, legal services, housing, employment, financial counselling, and wellbeing services. These are essential not only for immediate safety but to support victim-survivors in rebuilding their lives.

> **"True recovery and healing require a holistic, sustained commitment to addressing both immediate safety and long-term wellbeing. By centering victim-survivors' voices, integrating comprehensive support systems, and addressing systemic shortcomings, South Australia can forge a path that not only meets the universal needs of victim-victim-survivors but also empowers them to reclaim their lives with dignity and resilience.**[9]

> **"There's such a huge lack of options for women like my friend who has gone through dv but is now viewed as 'safe'. DV doesn't just end because a person has left. My friend will deal with the trauma and memories of her horrific experience as well as the loneliness and pain she felt once she actually reached out for help. And she has not been able to heal because she didn't get support for long enough. She has told me that she feels like she was dumped as soon as she [had a] 'housing option'.**[10]

Survivors need ongoing, connected services that address multiple dimensions of recovery at the right time:

> **Connect young women to integrated, holistic services that address their multifaceted needs, such as health and mental health care, safe and affordable housing, legal assistance, parenting support, financial aid, and practical or material support.**[11]

> **South Australia needs to develop a service system that enables the provision of appropriate support at the right time and the right place for victim-survivors that is culturally appropriate in line with their needs, when and where they choose to seek support, and in a way that meets their needs.**[12]

The DFVSA advocates for this approach, urging the state to build an integrated and flexible system that reflects the real-life, non-linear experiences of victim-survivors:

> **DFVSA strongly advocates for a holistic system which … embeds holistic victim-survivor responses into all frontline services state-wide, noting that victim-survivors' experiences are not linear, and require a more fluid and person-centered response to meet their needs. Currently, eligibility and funding criteria mean that many victim-survivors are not eligible for supports due to not being at risk 'enough', not at risk of homelessness or living in an area that is not part of specific pilot programs. South Australia owes each victim-survivor the right to equitable support, which includes place-based, funded and inclusive support options across the state. This includes access to crisis, transitional, supportive and long-term accommodation, meaningful access to earlier intervention, crisis and recovery and healing options and localised options for therapeutic and long-term support across life domains.**[13]

This includes expanded eligibility for all forms of accommodation and long-term supports.

> **Services require the flexibility to meet clients where they are at, and address needs in a holistic manner. This means having the ability to assist clients with related challenges or barriers that are often considered 'out of scope' in current government and philanthropic contracts.**[14]

Recovery and healing supports are not optional add-ons – they are foundational for long-term safety and stability.

> **Recovery and healing supports are critical in supporting people impacted by violence to live free from violence in the future. Our current service responses are crisis-driven and often short-term, which leaves people without the holistic supports they need to rebuild their lives over time after experiencing violence.**[15]

> **we're not just talking about the physical recovery in terms of medical support needs around chronic illnesses, injuries and the impacts of domestic family and sexual violence and the emotional recovery needs, but also creating opportunities when we recognise the financial impacts, often through social isolation, controlling mechanisms, financial abuse and financial control.**[16]

Victim-survivors from Aboriginal communities repeatedly highlighted the need for culturally grounded healing approaches:

> **It's well known that for Aboriginal and Torres Strait Islander people we have a holistic view of health and well-being and that also includes the way in which we might overcome family violence and heal from it. These services need to be holistic, not just you have to go to one service or the other service, and you don't meet the criteria for that one, you can't go to this one. We need things that are holistic that can address all of the complex and nuanced needs that we have.**[17]

The South Australian government's submission acknowledged the need for holistic service responses:

> **The South Australian Government is committed to building holistic service responses to support recovery and healing for families and individuals … Support services should be easy to navigate and centred around the consumer's needs. The services should be, whenever realistic, available to the person near their home.**[18]

This is welcomed but will only become meaningful if this commitment is accompanied by significant and ongoing funding.

Service providers reaffirmed the need for funding to allow their workforce to 'walk alongside' victim-survivors, navigating access to services well beyond the immediate crisis response. The Commission heard how a lack of ongoing case management and navigation support leads to victim-survivors having to retell their story to numerous service providers to determine whether they are even eligible for the service. There is a clear need to develop a South Australian referral network for the services that a victim-survivor will need to achieve long-term safety, and recovery and healing.

The Family Violence Legal Service Aboriginal Corporation South Australia (FVLSAC) reflected on the need for a flexible approach to identifying the types of services different victim-survivors may need to recover and heal, emphasising the need for a 'non-judgemental approach that recognises and respects the cultural considerations of Aboriginal and Torres Strait Islander peoples':

> **Programs must be tailored to the specific needs of Aboriginal and Torres Strait Islander people, with an emphasis on the importance of 'sit down' time – informal gatherings where women can learn from others with lived experiences. Weekly or fortnightly programs that offer a safe space for cultural learning and sharing, without the pressure to participate before they are ready, can be particularly effective.**[19]

Professor Bronwyn Carlson and Dr Terri Farrelly gave evidence on Day 9 of public hearings about their research project An Exploration of Aboriginal and Torres Strait Islander Healing Programs that Respond to Domestic and Family Violence and Sexual Assault. Professor Carlson and Dr Farrelly highlighted the need for holistic services.

> **[T]he holistic nature of indigenous-specific sort of approaches to care is what removes that risk of slipping in between the gaps. As soon as you have to go to other services, that creates a gap that you can fall through. Indigenous approaches tend to sort of remove, there's not silo-ed approaches to care. Everything's being looked after as one holistic service. So you know that helps improve continuity of care.**[20]

They also highlighted the need for long-term support, stating:

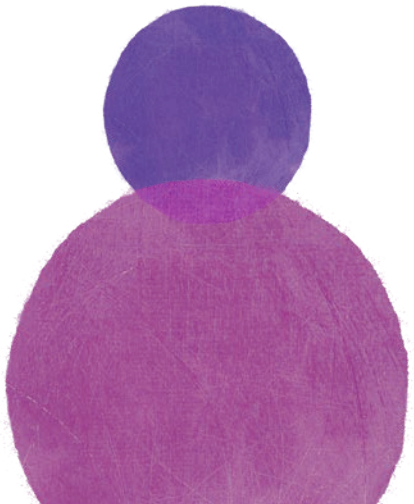
> **We can't plan anything long-term in this space because funding generally comes in short-term cycles. And it often is reliant on whatever is the focus point of the day. And healing, sometimes people have this opinion that they funded something, or it's been funded, and so that is done. Well, healing doesn't actually operate that way. It's not something that there's an end point to, really. You can't say, 'Well, I've healed that client' when we're talking about really complex and systemic violence, so it's yes, you can't tick a box saying it right that one's done this three-week program, they've been awarded the healed stamp and everything's going to be hunky-dory yeah, it doesn't quite work that way when there are really complex issues involved.**[21]

In the Silence and Inaction Report, the young people interviewed noted that recovery is not linear, with victim-survivors often 'moving in and out of periods of progress and recovery'.[22] For young people, genuine long-term healing requires stability, validation and practical support, including:

- affordable, trauma-informed mental health care
- stable relationships with trusted adults who offered consistent emotional support
- educational opportunities, including support to re-engage in school or alternative learning environments
- peer-led support and healing models
- culturally safe services.[23]

The way some specific services have expanded from singular-focus to holistic models was highlighted through the evidence of GOGO Foundation and Safe Pets Safe Families. The Commission heard how these small organisations, often funded on short-term grant funding cycles and largely relying on philanthropy and fundraising, found themselves providing services beyond their intended scope because of the clear need for holistic service delivery for victim-survivors.

Some of the particular needs identified to the Commission during its inquiry are expanded upon in the following sections.



Legal needs

Access to legal support is a critical component of healing and recovery for victim-survivors. Navigating the legal system is often complex, with different laws and jurisdictions involved in family violence cases, including family law, criminal law, intervention orders, child protection, tenancy, immigration and welfare rights.

This complexity is compounded when these legal systems are used by the person using violence to further abuse the victim-survivor, often by manipulating processes to continue exerting control.

Victim-survivors need access to trauma-informed, skilled legal practitioners who can work across these systems, identify misuse and intervene effectively.

> **"Access to legal support at multiple stages of a victim-survivor's journey is a critical early intervention, response and recovery strategy that can greatly minimise the long-term effects of family violence. It is critical that funding for these services is included in any family violence reforms to make the system more family violence informed and build in mechanisms to identify cases of misidentification as quickly as possible.**[24]

Many victim-survivors reported that they only accessed legal help by chance, and that the services they needed were not clearly promoted:

> **"It was only by luck that someone referred me to the Women's Legal Services who were fantastic. They helped me get myself and more importantly, my son out of a [un] safe relationship with the help of a civil intervention order when SAPOL refused to help. This service was not promoted by SAPOL which would have been hugely helpful.**[25]

> **"Accessible legal support and clear guidance are critical in domestic violence cases. Had I received this, I could have been more empowered to make safe choices for myself and my daughter.**[26]

The South Australian government acknowledged the importance of expanding access to legal services for victim-survivors:

> **Improving access to legal services for victim-survivors experiencing domestic, family and sexual violence is needed, including support to seek advice in relation to migration, housing, social security, victims of crime compensation, child support and family law matters, along with appropriate orders in the Family Court (in relation to parenting and property entitlements on separation), the Magistrates Court (in relation to IOs and debt recovery) and in the South Australian Civil and Administrative Tribunal (SACAT) (in relation to tenancy matters).**[27]

In South Australia, victim-survivors can access legal support through a range of services, including private legal practitioners, community legal services and the Legal Services Commission.

The Legal Services Commission plays a key role in supporting victim-survivors and is involved in the following programs:

- Women's Domestic Violence Court Assistance Service
- the purpose-built northern Domestic Violence Unit and associated Health Justice Partnerships with major South Australian hospital networks
- the Family Advocacy and Support Service in the Family Court, which provides duty lawyer and social support services to court users.

Many of the legal services available to victim-survivors were funded under the National Legal Assistance Partnership which ended on 30 June 2025. The replacement federal funding agreement, the National Access to Justice Partnership (NAJP), commenced on 1 July 2025. Over 5 years, the NAJP aims 'to contribute to integrated, efficient, effective and appropriate legal assistance services which are focussed on improving outcomes and keeping the justice system accessible for people experiencing vulnerability and financial disadvantage, within available resources'.[28] The NAJP recognises the Commonwealth priorities of family law matters; combating gender-based violence against women and children (particularly Aboriginal and Torres Strait Islander women and children); alleviating cost-of-living pressures such as employment, welfare, housing and financial disputes; and Closing the Gap and reducing incarceration rates for Aboriginal and Torres Strait Islander adults and youth.

The NAJP specifies the following legal services in South Australia under the Commonwealth priorities:

- Women's Legal Service SA
- Family Violence Legal Service Aboriginal Corporation
- NPY Women's Council Family Violence Prevention and Legal Service
- Legal Services Commission of South Australia
- Aboriginal Legal Rights Movement.

While Women's Legal Service SA, the Legal Services Commission and the Aboriginal Legal Rights Movement all provide statewide services, there is no statewide ACCO service for victim-survivors of domestic, family and sexual violence.

There are also limited legal services available to children and young people. Desktop research identified 2 youth-specific legal services in South Australia:

- the Youth Legal Service, a specialist unit within the Legal Services Commission that provides legal advice to young people who are involved in criminal cases in the Youth Court[29]
- the Youth Law Centre run by Uniting Communities, which provides free legal advice, court representation and legal information for young people across a broad range of practice areas including 'family law and family violence'.[30]

It seems there may be limited statewide availability of free, youth-focused legal advice services.

Financial needs

Economic abuse is one of the most powerful tools used to trap victim-survivors in violent relationships. This was a common theme throughout the Commission's inquiry, with many submissions highlighting how financial control, dependence, and lack of resources prevented victim-survivors from leaving or rebuilding their lives.

The Zahra Foundation, which provides trauma-informed services to help victim-survivors achieve financial independence, captured this issue:

> **Women experiencing domestic and family violence often face severe financial barriers that trap them in abusive relationships. Economic empowerment is crucial to breaking the cycle of abuse and ensuring long-term safety.**[31]

In other words, when women (and, indeed, any victim-survivor) do not have access to money, employment or financial literacy, they are often forced to stay with an abuser because the alternative of poverty and potential homelessness feels even more dangerous.

Many victim-survivors shared personal stories about these issues:

> [My finances] were tied up in … a trust that he controlled, and then, once I thought I had that sorted out, I was told I would be over the asset limit because when I left the family home … that would become my asset. [Due to this I was unable to qualify] for legal aid … I was trapped in the relationship for another 4 years.[32]

> **I, myself was subjected to financial abuse via him increasing our debts without my knowledge and coercing me to take out further loans. I tried to seek help from the banks who claim to support people experiencing financial abuse and offer funding to help people escape domestic violence, but all they did was make an amendment to our loans to prevent him redrawing from the loan without my authority, however, they subsequently allowed him to close a joint savings account we had without notifying me or obtaining my authority.**[33]

> **Women like me are forced to remain in abusive relationships long after we decide we want to leave because we don't know how to plan and implement our escape. For some women, the financial hardships after they leave the relationship are so significant, they return to their abuser out of desperation due to lack of housing security, the welfare of their children etc. In these situations, abusers become more controlling and the ability to escape again is significantly reduced.**[34]

> **The fear of not being able to do it on my own, or to afford anything I needed was a big barrier. It was a horrible place to be in and the financial and emotional state it left me in was completely ravished, desolate, traumatised and broken. As I mentioned above, I still have moments of traumatised grieving due to the loss.**[35]

Victim-survivors will often face additional barriers like unemployment or underemployment, due to the controls imposed by the person using violence or other reasons such as disability, chronic illness or caregiving responsibilities. Many victim-survivors, even after leaving, are unable to earn a sustainable income.

The Rapid Review cited 2016 ABS data which showed that nearly half of single mothers who left violent relationships were living on government benefits and in poverty.[36]

The GOGO Foundation is another South Australian organisation working to change that reality. Its Inclusive Work Program supports women and non-binary people who have intersecting needs and experience – including childhood trauma, housing stress and substance use – with practical pathways to employment and empowerment.

Founder Sarah Gun explained the Foundation's approach during Day 8 of public hearings:

> **The GOGO Foundation is a charity with a mission to support society's most vulnerable women and non-binary people with the skills, the tools and the community to increase their social and economic participation. This includes improving their well-being but also where it's desirable to remove barriers to employment and to support women into safe sustainable employment for the long term.**[37]

And their results speak for themselves:

> **The good news is that within six months of completing the program, 60 per cent of the women are in safe, sustainable and suitable employment for their needs … We know that not every woman starts where she intends to finish but that – getting that first job is critical and now what – we know that the women know what safe work looks like now … And many women graduate straight from our program. You know, they finish on a Friday and quite literally will start work on the following week and these are in growth industries, really importantly they're in banking and finance, they're in the care economy, in transport.**[38]

In addition to job placements, the program offers formal qualifications that count toward a Certificate II in Community Services, empowering participants to build lasting skills.

Therapeutic needs

Another common and persistent theme was the need for ongoing access to trauma-informed therapeutic supports for victim-survivors, and the current lack of capacity and unaffordability of these supports. For children and young people, the Commission heard that therapeutic supports are almost non-existent, and in regional and remote areas are often coupled with a deeply unhelpful expectation on the part of public providers that families travel to Adelaide to receive a service.

While various mental health services appear to be available on paper, the reality – according to submissions – is that access is inconsistent, bureaucratic, unaffordable or simply inaccessible.

> **There was and is no help. I had a mental health care plan to see a psychologist. The waitlist was longer than the plan timeframe. I waited over 18 months for a psych, only to see someone whose service was not professional by any means … there is a whole population of people, children and adults who were let down by the systems and continue to be let down due to lack of follow up care particularly around trauma and mental health.**[39]

Even where services exist, they are often under resourced or fragmented, requiring victim-survivors to navigate multiple confusing processes just to get help. Several victim-survivors reported being let down by the public mental health system, which lacked the capacity to follow through or provide consistent support.

> **My husband got lost in the men's mental health public service- his assigned counsellor had resigned and no one got back to him with a new contact. A lot of support programs did not have capacity to take us on – the public system was inundated and lacks resources or trained people. I could not find suitable support in the private sector.**[40]

> **Currently, the main way to access mental health support is in person or over the phone ... None of the support services provide mental health support via webchat. If you have a disability, are in a share house (which young people often are), living with the perpetrator, or working full time, then these mental health services are often inaccessible. For example, after I reached out to a sexual violence webchat and indicated that I would have trouble speaking with someone over the phone or in person, the response I received was that 'that sounds difficult' then 'I'm going to end the chat now, please call as soon as you can'.**[41]

A key challenge for victim-survivors was the prohibitive costs of access to psychologists.

> **I have cancelled or rescheduled multiple psychologist appointments because I couldn't afford them. I know that EMDR is useful for my recovery from PTSD (which was a result of sexual violence) but currently I can't afford it and it is negatively affecting my health, work, and relationships.**[42]

> **DV survivors should be eligible for more financial assistance to attend psychologists, I could not afford to continue to see mine, however, would benefit greatly from this. It is so important that you find a therapist who you feel comfortable with, and in my case the cheaper or free ones I saw through my work were not very relatable. My children also benefit greatly from their counselling, however at $110 a session with no rebate, I am not able to let them attend as often as they need.**[43]

> **There needs to be a SIGNIFICANT amount more funding to get more mental health services / psychologist out there for to assist both sides, but also get the cost down to access psychological services for survivors (i spend $600 a month on psychologists / psychiatrists a month out of my own pocket to help me overcome the trauma of what was done to me).**[44]

> **Mental health support is prohibitively expensive. Recovery shouldn't depend on your bank balance but it feels like that is the deciding factor in your quality of life after experiencing sexual violence. Evidence based treatments to address trauma such as EMDR are often not provided by free services. CBT is often the only treatment provided but can do more harm than good following traumatic experiences and has limited effectiveness when working with neurodivergent populations.**[45]

The emotional consequences of failures are profound:

> **The one thing that I would like to see for victims is free counselling to assist with gaining that control back, being able to find yourself again. I now lack confidence in every aspect of my life and I'm not sure that will ever change**[46]

Despite the existence of a 24/7 response framework, funding constraints and rising demand limit services to crisis intervention. Many victim-survivors described a severe lack of accessible, appropriate and culturally safe therapeutic services for children, Aboriginal people, and those living in regional or remote areas.

> **I am concerned about the long term effects of children who have witnessed and been involved in abusive relationships. Many of these children need ongoing psychological help to be able to recognise the perpetrator's damaging behaviour, to maintain good mental health and so that they don't continue the cycle of abuse. Unfortunately child psychologists are in short supply and so often the children cannot get the help they so desperately need.**[47]

> **I was in a relationship,my male partners mental health declined, and he became violent, abusive and controlling. There were no mental health services available to meet his needs due to being Aboriginal.**[48]

> **More accessible Aboriginal Health services in urban areas to be able to train their staff properly … including cultural ways. The last thing I wanted to do was go and sit alone in a room with a man to talk about what had happened. It made me sick to my stomach and I never went back for help.**[49]



> **I did seek professional counselling for my daughter who was experiencing symptoms of PTSD … There are limited counselling services in regional areas. The only one available under a mental health plan that we could access in a timely manner did not appear to have the skills to help my daughter manage the trauma.**[51]

> **My mother has had mental health issues since she was a child due to sexual abuse inflicted on her by her father. Due to living in a country area there are never any government funded professionals available. She has had one phone call over the phone and nothing more. [We need] more services like these readily available.**[52]

During the Commission's listening phase, which included visiting many of South Australia's regional areas and speaking with local community members and frontline workers, the Commission identified 2 common themes: there are very few mental health services available to adults in regional and remote areas, and there are even fewer (often no) services for children and young people. Regrettably, inadequate health services for children and young people and inadequate health services in regional and remote areas are recurring themes in this report (see Chapter 4).

An example of the absence of community mental health supports was encountered in Coober Pedy, where the Commission heard from several local service providers that there were no local mental health services available. In clarifying this service gap, SA Health advised the Commission that the Eyre and Far North Local Health Network's Community Mental Health Service has a visiting psychiatry resource available, 'in line with demand'.[53]

SA Health further advised that the Community Mental Health Team, based at the Port Lincoln Hospital, can send a registered mental health nurse to visit Coober Pedy for 3 days each month. Emergency, crisis and inpatient presentations for mental health are managed by the Coober Pedy hospital, with telehealth assessments provided by a service operating from Glenside.[54] On the ground in Coober Pedy, this patchwork of mental health service provision in the region is seen as 'a key barrier to the prevention and healing of community from DFV incidents'.[55]

The service gap for mental health care was even more acute for children and young people. The Commission received input about challenges with the Child and Adolescent Mental Health Services (CAMHS) service delivery model, including long waitlists, strict eligibility criteria and an over-reliance on clinical hospital settings for service delivery at the expense of providing outreach services. The level of frustration with CAMHS from some non-government providers was palpable. The service gap for young people aged between 16 and 18 identified in Chapter 4 also applies to SA Health mental health services.

In Coober Pedy, SA Health advised that CAMHS coverage was delivered by the team in Port Augusta by telehealth, along with 'a fly in fly out model arranged and provided at a frequency that is determined by the consumers' clinical needs'.[56] A recent report commissioned by the National Indigenous Australians Agency (NIAA) on the strengths and gaps in Coober Pedy's domestic and family violence service system response (Coober Pedy Report) articulated the issues with this model, noting that it required families to travel to 'big cities for the first time to assist their

children, without supports to assist with travel, accommodation, or navigating the city and its services'.[57] One service provider interviewed for the report said that:

> **[t]here's no Youth Mental Health Services at all … probably, 80% of the kids who attend that school have at least some level of trauma in their backgrounds.**[58]

When visiting the APY Lands, the Commission heard that since the Women's and Children's Health Network ceased its permanent presence on the lands in 2021, it had introduced a fortnightly fly-in-fly-out model for CAMHS. SA Health advised that the new model involves a dedicated team conducting 5-day visits (including travel) each fortnight, and then support by telehealth on the alternate fortnight.[59]

The Commission heard that, in practice, this generally amounts to a physical presence of a little over 2 days each fortnight. [60]

The impact of this service-delivery approach was again commented on in the Coober Pedy Report, with one service commenting on the need for improved service provision from SA Health:

> **APY lands is very much serviced by none of [the Department of] Health [for DFV]. There's a lot of other funding that comes from territory, from Northern Territory Government, South Australian government, that goes into NPY Women's Council, which is the predominant service for that greater area of the APY lands. And I think with that, you don't necessarily get South Australian allied health services that go out to the APY lands [for DFV].**[61]

The delivery of SA Health mental health services in regional and remote South Australia was considered in the 2023 Review of Rural Mental Health Services in South Australia (the Rural Mental Health Review), prepared for the South Australian government following a Coronial Inquest into the preventable death of Theo Papageorgiou.[62]

The Rural Mental Health Review identified that successive governments had neglected and failed to take responsibility for rural health,[63] that a lack of leadership and support from SA Health left rural networks in 'an invidious situation',[64] that there was a lack of transparent and accountable governance structures,[65] and that the review team was 'surprised and dismayed' by the lack of available documentation.[66] The review also found that 4 years after the Independent Commission Against Corruption tabled its Troubling Ambiguity: Governance in SA Health report, SA Health appeared 'to have not gone to the "trouble" to address the major governance, expenditure and accountability concerns highlighted in this extraordinary report', noting that 'these troubling systemic ambiguities also negatively impact on rural mental health services'.[67]

On CAMHS, the review found that most CAMHS clinicians live and work in Adelaide, and that '[c]onsequently, regional LHNs have no agency, governance, funding or operational determination to ensure that remote communities obtain the service that best meets local need'.[68] On the need to reform CAMHS to ensure children and young people in regional and remote areas had access in their town and not only by driving to Adelaide, the review team wrote:

> **The review team were made aware of the challenges for WCHN staff in providing services for geographically remote communities however note that system and service design results in rural communities and service users being perpetually at the end of a lifeline in terms of visibility, need and resource allocation. Similar circumstances in other jurisdictions have undergone reform to separate service purchaser, provider and user to ensure accountability and effective utilisation of resources for the intended community and need. We strongly suggest SA Health must seek to separate service purchasing and provision functions with respect to state-wide CAMHS services. Regional LHNs and the WCHN must then undertake service agreements for the provision of CAMHS within rural South Australia.**

> **More specifically, the review team were made aware of the removal of resident CAMHS clinicians from remote APY communities who face distinct and complex challenges in terms of accessing culturally safe and specialised services. The temptation to centralise specialist staff is a common response for health services, however ensuring a compliment of resident staff in communities, supported by centralised highly specialised professionals is a preferred, if not essential, health service posture. We strongly suggest reversing these decisions and ensure a small, but well supported resident CAMHS workforce remains in these remote communities.**[69]

The review team made 30 recommendations regarding governance, workforce and service enhancement.[70] In September 2023, SA Health published a response to the review, in which it stated that it had accepted and was progressing 11 recommendations, accepted 12 recommendations 'in principle', and had 'noted' a further 7 recommendations.[71]

The Intensive Therapeutic Care Program and My Place (both provided by the Women's and Children's Health Network, with My Place including collaboration with the Department of Human Services) work with young people aged between 12 and 25 and who are under Guardianship.[72] These programs provide health care to a vulnerable cohort of children and young people, who may have experienced domestic, family and sexual violence both before and after coming under Guardianship and who may be at continuing risk of experiencing violence.[73] Both programs work with children and young people in metropolitan Adelaide.

The South Australian government has 'recognised the importance of expanding evidence-based models (such as the My Place Program) … to provide flexible, intensive, outreach support to young people'.[74] The Commission was advised both programs are effective, but that waiting lists and geographic barriers prevent either program from having the reach and impact they could have for the children and young people who need them.

Home security needs

Later in this chapter, the Commission addresses the urgent need for more accessible and inclusive accommodation options for victim-survivors, including children and young people. While alternative accommodation options will always be needed, there is also a need to provide support to victim-survivors who want to, and are able to, remain in their own home safely.

> **Another aspect that felt deeply unfair was that my children and I were the ones forced to leave our home, while he was allowed to stay. Leaving meant facing enormous upheaval – not just finding safe shelter, but also losing a familiar environment and facing financial instability. Having to leave put an additional burden on my children and me, disrupting their schooling and creating further emotional strain during an already traumatic time. In cases of domestic violence, it is unjust for the victims-survivors to be the one uprooted, particularly when the home environment is a shared one. I urge consideration of policies that prioritise the safety and stability of victim-survivors, allowing them to remain in their home whenever possible.**[75]

> **Women and mothers and children should not be displaced from the family home. I think there should be more … placement of the man out of the home and the home should be made safe. I think you should help them change locks.**[76]

In South Australia, there are some supports available to improve the safety and security of victim-survivors who are able to stay in their homes. This comes in the form of 3 separate programs: Safe at Home, Safer in the Home, and home security assistance from the Commissioner for Victims' Rights.

The Safe at Home program is delivered through the DFVSA. Safe at Home provides tailored safety packages to enhance the home safety and security of victim-survivors. The program involves assistance from a specialist worker who will identify risks and develop a safety plan. Safe at Home is available to women at high risk of intimate partner violence or Aboriginal family violence.[77]

Safer in the Home is a Commonwealth program delivered through the Salvation Army. The program funds a range of basic security upgrades for the homes of women who have experienced domestic or family violence and who are at low to medium risk.[78]

The South Australian Commissioner for Victims' Rights is sometimes able to assist people with home security. To be eligible, a person must be a victim of crime, and not eligible for security through any other program.[79]

The DFVSA advised in its submission that Safe at Home was intended to 'provide equitable access to security upgrades to all women and children, regardless of risk level'.[80] The DFVSA wrote that changes at both the state and national level altered how Safe at Home functions, leading to eligibility being limited to women at high risk, with women at low to medium risk being referred to Safer in the Home.[81]

The DFVSA advocated for a 'no wrong door' approach between Safe at Home and Safer in the Home to ensure no victim-survivor 'fall[s] through the cracks', with better responsiveness and coordination from the SA Housing Trust.[82]

The DFVSA also advocated for more funding for specialist workers and to expand eligibility to women at low to medium risk, as well as to LGBTQIA+ and male victim-survivors.

A further issue identified in many different inputs is that the $1,500 budget cap is no longer adequate, particularly in regional and remote areas where costs of safety audits and upgrades are higher.[83]

Flexible funding model

Current funding models do not adequately provide for services to work with a victim-survivor to identify their longer-term safety and recovery and healing needs. Nor do they provide funding for specialist workers to undertake active referrals to the services and programs that may be able to provide for those needs. The ongoing emphasis on crisis limits focus to the end of each crisis, and the sheer demand for the services provided by the non-government sector often means workers must immediately move to the next crisis once 'safety' from the first is achieved. This is demoralising for the workforce and their employers, who want every victim-survivor to achieve long-term safety and to thrive. It is an entirely inadequate response to a victim-survivor, who deserves far more than a short-term crisis response.

> **"The reliance on crisis response supports and a homelessness lens also contributes to gaps in delivering services under all domestic, family and sexual violence four domains identified in this submission, especially in recovery and healing.**[84]

> **"DFSV funding must enable the sector to flexibly meet diverse needs across the community. Our current funding arrangements and service responses are not fit for purpose in meeting the diverse circumstances of South Australian women and families. Funding for the specialist DFSV sector must enable services to meet women and families where they are and respond to what they need in a flexible way.**[85]

Chapter 2 has identified the issues associated with activity-based funding. Under activity-based funding models, service providers are funded for each intervention, such as a counselling session or a bed in crisis accommodation. Needs-based funding is inherently more flexible, allowing resources to be allocated based on client needs and community demand for domestic, family and sexual violence services.[86] The South Australian sector has overwhelmingly advocated for a shift to needs-based funding.



> **With need-based funding, we can put the money where it's needed – whether that's intensive case management, safety planning, or support for children. We're not stuck choosing between funding streams thatdon't match real-world needs.**[88]

The Commission's recommendations regarding the need for new and ongoing South Australian government funding in the domestic, family and sexual violence sector are set out in Chapter 2. There is an opportunity to apply flexible funding models when distributing this funding.

An approach to flexible funding is already underway in Victoria, known as 'Flexible Support Packages'. The Commission has been told by Victorian domestic, family and sexual violence non-government services about the 'transformational' impact this flexible funding approach has had on the way services work with, and meet the diverse needs of, victim-survivors.

Safe and Equal in Victoria spoke about the 'significant and positive' impact that increased funding for client brokerage has had, allowing the 'service system to tailor support to individual client need'.[89] Flexible Support Packages can support longer-term recovery needs by providing assistance with 'bond and rent, uniforms or other requirements needed to keep children in school or social activities, funds to continue or engage in study or even start-up expenses involved with establishing a home business'.[90]

According to the program guidelines, Flexible Support Packages:

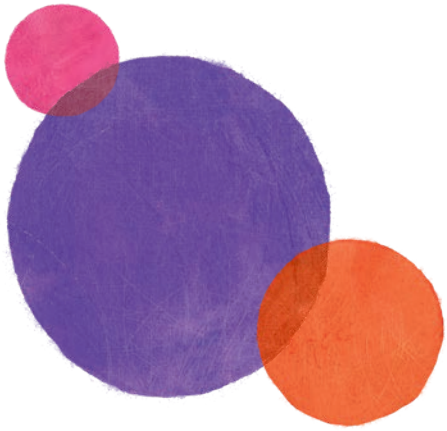
> **aim to deliver personalised and holistic responses to assist adult and child victim-survivors experiencing family violence to transition from crisis, and establish long-term sustainable arrangements to improve their safety, wellbeing and independence in recovery from family violence.**
>
> **Individualised packages provide flexible brokerage to victim-survivors to purchase a range of tailored and practical supports based on their case management/support plan. This may include counselling, wellbeing, education, employment, financial counselling, transport, housing stability, financial security, and other practical or material needs.**[91]

Certain organisations in Victoria have been designated as 'Flexible Support Package Providers' (FSP Providers).[92] Victim-survivors, through their case manager, may choose which FSP Provider to apply to, guided by the 'suitability of the service to the cultural safety and identify of the victim survivor' and the location of the victim-survivor. The program requires 'an intersectional, person-centred approach' to identifying the most appropriate service for the victim-survivor.

The list of FSP Providers includes local specialist family violence services, ACCOs, and 2 'statewide targeted family violence support services' for CALD communities and LGBTQIA+ communities.[93]

Goods and services identified as potentially eligible under the program guidelines include support for physical and mental health and wellbeing, suitable and stable housing, participation in learning and education, workforce participation, financial security, legal and court costs, and support for social engagement and connection with culture and identity.[94] The maximum amount that can be provided in one flexible support period is no more than $10,000, with the average package amount being $3,400. Where a family or individual 're-presents after a support period has been closed this will be considered a new support period and a new package can be provided based on risk and need'.[95]

Another version of flexible funding is provided by the Australian government through the Leaving Violence Program. The program commenced on 1 July 2025 and provides eligible victim-survivors with up to $5,000 in financial support, including up to $1,500 in cash, with the remaining funds in goods and services. Victim-survivors of any gender, sexuality or visa status may apply for the payment, but eligibility is limited to victim-survivors of intimate partner violence who are over the age of 18 and have either changed living arrangements in the past 12 weeks because of the intimate partner violence or plan to change living arrangements.[96]



Future state

Every service supporting victim-survivors of domestic, family and sexual violence should be designed around the holistic care of the individual. This includes meeting physical, emotional, developmental and legal needs, not just in times of crisis, but throughout a lifelong journey of healing. The goal must be more than safety. It must be empowerment, fostering recovery, resilience and wellbeing, and breaking the intergenerational cycles of trauma, victimhood and violence.

> **"All targeted services should focus on the holistic care of individuals, including physical, emotional, and developmental and legal safety. The goal is to ensure that support is not only protective but also empowering; fostering recovery, resilience, and long-term well-being to interrupt intergenerational cycles of victimhood and patterns of perpetration.**[97]

Responding to immediate crises, such as seeking an intervention order or securing emergency accommodation, is vital. But this cannot be where support ends.

A victim-survivor's needs do not vanish just because they are 'safe'.

As acknowledged in Chapter 1, the long-term, far-reaching impacts of domestic, family and sexual violence are impacts that span physical injuries, mental health deterioration, financial insecurity, job loss, homelessness, substance misuse, child removal, and even self-harm or suicide.

Supporting recovery from this harm demands a system that is ongoing, inclusive and comprehensive.

Safety, recovery and healing needs may be more immediate, such as legal help to commence family law proceedings or seek a private intervention order, security upgrades to the family home, safety audits to check for surveillance devices, or financial assistance for food, childcare, medical expenses, car repairs, petrol, moving expenses, rental bonds, utility expenses or rent. Other needs may be longer term such as therapeutic supports, peer support, job training, further education, financial counselling, and wellbeing courses.

This is emphasised in the National Plan, which states:

> **[r]ecovery is an essential component of the holistic approach under the National Plan as it recognises that victim-survivors need additional, often lifelong, supports to recover and heal from trauma and the physical, mental, emotional and economic impacts of violence.**[98]

To be effective, services must be tailored to the individual, recognising age, cultural background, religious beliefs, and lived experiences. Intersectional approaches are non-negotiable, especially for children and young people in 'their own right' and those at the intersections of multiple forms of discrimination. This is also recognised in the National Plan:

> **Recovery services must be tailored to the needs of victim-survivors … They must also be sensitive to the age and circumstance of the victim-survivor and their cultural and religious needs. An intersectional approach is required to support recovery efforts that cater to the diverse needs of victim-survivors, including children, who face multiple and intersecting forms of discrimination. When victim-survivors are not supported to recover, they are at higher risk of being subjected to continued harm, experiencing poorer health and well-being, and being targeted by another perpetrator.**

> **Trauma-informed and person-centred approaches are needed to address barriers to recovery and healing and to minimise the possibility that victim-survivors will be re-traumatised and harmed when using services and systems.**[99]

Needs assessment: the recovery and healing pathway

Chapter 2 discussed the opportunity for the South Australian RAMF to embed a needs assessment tool within a comprehensive risk assessment (Recommendation 14). Acceptance of this recommendation must occur if South Australia is to move beyond its current focus on crisis to addressing victim-survivors' recovery and healing needs.

Implementation of Recommendation 14 must be funded. The Commission recommends this occur through a flexible funding model aligned with Victoria's Flexible Funding Packages. In addition, specialist non-government domestic, family and sexual violence organisations must receive funding to conduct needs assessment and to provide case management support to victim-survivors.

In designing the flexible funding model, it should not be overlooked that some victim-survivors may need more intensive support than flexible funding alone can provide. The flexible funding model is not intended to replace, or reduce eligibility for, the existing funding available for housing outcomes or safety at home outcomes. It is also not a replacement for the national Leaving Violence Program, which provides crucial financial support to victim-survivors of intimate partner violence.

Implementation of Recommendation 14 must be accompanied by the development of a statewide referral network of the services and programs that can meet the diverse needs of victim-survivors. Legal services must be included within this network, noting the specific reference in Chapter 2 to the inclusion of a 'legal health check' within each needs assessment. The commencement of the NJAP in 2025, with its focus on combating violence against women and children, provides the South Australian government with the opportunity to address existing gaps in legal service provision, such as the absence of Aboriginal Family Violence Prevention and Legal Services in some areas of South Australia and the very limited number of legal services for children and young people.

Statewide referral networks

The purpose of the statewide referral network is to set out a directory of available services and programs that are available to meet the diverse needs of victim-survivors, together with eligibility criteria, cost, waiting lists and other relevant matters. Offering clear pathways for additional supports and warm referrals lessens the burden on victim-survivors at a time when they are extremely vulnerable, and ensures that they are receiving the right service at the right time. A formalised referral network will also enable a consistent approach across domestic, family and sexual violence service providers, reducing reliance on corporate knowledge or informal networks. This is particularly important in regional and remote locations where staff can often change.

The scope of the statewide referral network should include services and programs in the areas identified in this chapter, including financial needs, employment and further education pathways home security, and therapeutic and other health and disability needs.

The development of the statewide referral network for adult victim-survivors should be led by the Government Steward in collaboration with other government agencies (which can identify the services provided by or funded by government) and the domestic, family and sexual violence sector. Input about the types of services that should be included within the statewide referral network should be sought from the adult Lived Experience Advisory Network (Recommendation 11). Once underway, demand for the services identified through the statewide referral network must be monitored by the Government Steward to ensure that any uplift in demand is met with an uplift in funding.

The work to create a statewide referral network for children and young people will be more difficult because of the lack of available services, and because of the limited work so far undertaken with children and young people to understand their recovery and healing needs. The Silence and Inaction Report calls for a child- and youth-centred recovery system in South Australia that offers culturally safe and trauma-informed flexible supports beyond crisis, along with clear, accessible pathways to healing.

> **the experiences and views of the children and young people interviewed point to a simple truth: young people experiencing domestic, family, and sexual violence know what they need despite largely never having received it themselves.**
>
> **They want to feel safe.**
>
> **They want to be believed.**
>
> **They want age-appropriate supports that are accessible and designed with the needs of children and young people front of mind. And they want systems to work for them – not against them.**
>
> **Meeting those needs will require not just policy and systems change, but a fundamental cultural shift: one that centres the voices of children and young people, invests in creating an entire system that meets their needs, and treats every disclosure of violence as an opportunity for transformative support.**[100]

The Child and Young Person Lived Experience Advisory Network should be engaged to identify the services and programs to be included in a 'child- and youth-centred recovery system', and to co-design any services or programs identified through that process that do not already exist.

A related issue, and one which must be addressed before a child- and youth-focused recovery system can be activated, is the operation of parental consent in the context of service provision to children and young people. In South Australia, a person who reaches 18 years of age is said to have reached the age of majority, being the age at which a person obtains adult status as a citizen with full legal capacity. At common law, it is recognised that as a child matures they become capable of making their own decisions and parental consent is not required when a child fully understands the nature and significance of what is proposed. This is understood as being 'Gillick competent' and is most commonly applied in the context of the provision of medical treatment.[101]

The application of the Gillick competency test has been codified in South Australian law under the *Consent to Medical Treatment and Palliative Care Act 1995* (SA) (Consent Act). The Consent Act provides that a child of or over 16 years of age can consent to their own medical treatment.[102] A child 15 years or younger may consent to their own medical treatment in circumstances where their medical practitioner is satisfied that the child fully understands the nature, consequences and risks of the treatment and the treatment is in the best interests of the child. This must be supported by a secondary medical opinion.[103]

In circumstances where a child cannot consent to their own medical treatment, by reason of age or capacity, consent of one parent is generally sufficient unless there is a court order for joint decision-making about these matters.[104] The Consent Act includes a dispute resolution procedure when consensus cannot be reached between a medical practitioner and parents, whereby the medical practitioner can apply to the Public Advocate for assistance in resolving the matter.[105]

These laws apply only in relation to medical treatment. For the purposes of the Consent Act, medical treatment is defined as:

> **"medical treatment means the provision by a medical practitioner of physical, surgical or psychological therapy to a person (including the provision of such therapy for the purposes of preventing disease, restoring or replacing bodily function in the face of disease or injury or improving comfort and quality of life) and includes the prescription or supply of drugs.**[106]

While many recovery and healing services may fall within the definition of 'medical treatment', many will not. The South Australian government must consider, in partnership with the Child and Young Person Lived Experience Advisory Network and youth advocacy organisations (such as Youth Law Australia and the Youth Affairs Council of SA), whether law reform is needed on this issue. There is a need to ensure that children and young people can access recovery and healing services when they need them, and, when appropriate, in the absence of parental consent. The Silence and Inaction Report spoke of children and young people who are unsafe in their own homes – the laws relating to parental consent should not be the barrier preventing these children and young people from accessing help, and from receiving the supports they need to become safe.

SA Health service delivery

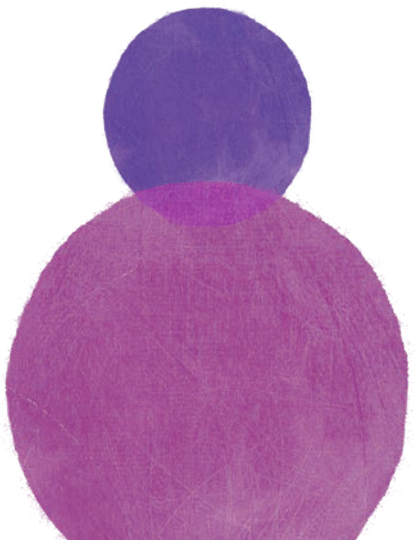
The process to develop and implement statewide referral frameworks will likely expose the significant gaps in mental health support in regional and remote areas of South Australia. The Rural Mental Health Review has already set out recommendations to improve access to mental health services in regional and remote areas. Implementation of the Rural Mental Health Review's recommendations should form part of the South Australian government's Implementation Plan in response to this report, given the clear link between mental health service provision and recovery and healing from domestic, family and sexual violence.

While the Rural Mental Health Review did make findings about the availability of CAMHS in regional and remote locations, and provided suggestions to improve equity of access for all South Australian children and young people, CAMHS did not feature specifically in the recommendations. Recommendations to address the gap experienced by young people aged 16 to 18 were also not included. To that end, a review of children and young peoples' equitable access to mental health support in South Australia should be undertaken. This must be accompanied by a meaningful commitment from SA Health to prioritise these health responses to children and young people in South Australia, no matter where in the state they live.

A further review should be undertaken into the availability and accessibility of the Intensive Therapeutic Care Program and My Place. The South Australian government should either invite the Guardian for Children and Young People to lead the review or consult with the Guardian on the most appropriate person to do so.

Safe at Home

Ensuring that people can remain safely in their own home and stay closely connected to their support networks, including friends, family and schools, can help victim-survivors with their recovery and healing journey. The current service gaps between the Safe at Home and Safer in the Home programs and the need for better responsiveness and coordination from the SA Housing Trust must be reviewed and addressed, along with being given a corresponding funding uplift to ensure that the Safe at Home program is available to a broader range of victim-survivors, including women at low to medium risk, LGBTQIA+ people and men.



Recommendation 97

The South Australian government develop and implement a flexible funding model for the operationalisation of the needs assessment and management components of the South Australian Risk Assessment and Management Framework. The model must:

a. fund the case management work to be undertaken by domestic, family and sexual violence organisations when connecting a victim-survivor with services to meet the needs identified during the needs assessment process
b. allow for flexible use to meet each victim-survivor's individual needs
c. operate separately to funding already available within the domestic, family and sexual violence system for housing outcomes and via the Leaving Violence Program
d. provide a loading for services and victim-survivors located in regional and remote areas in recognition of the increased costs of service provision in those areas.

Recommendation 98

The South Australian government develop, implement and maintain an adult victim-survivor statewide referral network and a child and young person statewide referral network that:

a. is co-designed with the Lived Experience Advisory Networks
b. prioritises the identification of, and referral pathways to, services.

Recommendation 99

The South Australian government fund the establishment and/or commissioning of services identified during the co-design processes (see Recommendation 98) that are not currently available.

Recommendation 100

The South Australian government, in partnership with the Child and Young Person Lived Experience Advisory Network, consider the need for law reform to remove parental consent as a barrier to seeking help and accessing services for children and young people. The parental consent review must include an examination of children and young people's access to statutory and legal services, health services, homelessness services and domestic, family and sexual violence services. The review should consider the applicability of the Gillick competency test as a means to overcome these and other relevant barriers, including in circumstances where unprotective parents and guardians are restricting access to crisis and support services.

Recommendation 101

The South Australian government commission a review of the statewide availability and accessibility of the Child and Adolescent Mental Health Service, the Youth Mental Health Service, the Intensive Therapeutic Care program, My Place and other domestic, family and sexual violence health services. The review is to:

a. Examine eligibility criteria, referral pathways, wait times and unmet need across South Australia, with a particular focus on children and young people living in regional and remote locations and all children under Guardianship;
b. Identify the system gaps experienced by 15 to 18 year olds requiring access to youth mental health services and domestic, family and sexual violence health services;
c. Consider whether the current fly-in-fly-out model is meeting the needs of children and young people on the APY lands and other remote areas of South Australia;
d. Make recommendations aimed at improving statewide access to mental health supports and domestic, family and sexual violence health services for all South Australian children and young people up to 18 years of age.

The review's recommendations are to inform a concerted effort by SA Health to improve statewide access to the identified health supports for children and young people who have experienced domestic, family or sexual violence, with oversight provided by the Implementation and Impact Monitor.

Recommendation 102

The South Australian government review the Safe at Home and Safer in the Home programs, with a view to streamlining and finding efficiencies. Following the review, the South Australian government provide a funding uplift to the Safe at Home program, with a view to:

a. increasing eligibility to include medium to high-risk domestic and family violence, inclusive of LGBTQIA+ people and male victim-survivors
b. providing short-term case management and referral to aid victim-survivors in their ongoing recovery journey
c. increasing the program's capacity to identify and respond to technology-facilitated abuse
d. providing an additional loading to regional and remote areas in recognition of increased cost and complexity.

Accommodation and housing

Existing housing supports for adult victim-survivors

Domestic, family and sexual violence can lead to housing insecurity and the risk of homelessness. When leaving an unsafe relationship, victim-survivors will often need to leave their home, at least initially, sometimes suddenly and with few possessions. While some victim-survivors may be able to stay with family and friends, and some may have the means to rent or buy another home, other victim-survivors will not have the social or economic means to find housing. It is unacceptable that escaping violence can mean homelessness, yet this risk persists and is a well-recognised barrier to help seeking and a commonly cited reason for a victim-survivor returning to an unsafe relationship.

There are 2 broad categories of government-funded accommodation for people experiencing violence: crisis or emergency accommodation, which is available on short notice for people fleeing violence into homelessness; and transitional accommodation, which is available for people experiencing violence who require housing support while they seek longer-term accommodation such as a private rental or social housing.

In South Australia, specialty crisis and transitional accommodation for people experiencing violence is managed by the DFVSA. Underinvestment in South Australia's domestic and family violence sector, compounded by an undersupply of specialist accommodation and pressure on the housing and rental markets, has resulted in dependency on motels and caravan parks for emergency accommodation. While used out of necessity, it is broadly recognised that motels and caravan parks are not in any way an ideal setting for women and children escaping violence.

Core and cluster accommodation facilities, attached to specialist supports, have been recognised as best practice for domestic and family violence emergency and transitional accommodation. While these facilities exist in South Australia, the housing, rent and cost-of-living crises have made it much more difficult for people experiencing violence to move through and ultimately out of emergency and transitional accommodation, as it has become increasingly difficult to secure a private rental.

People using violence can also experience housing instability and homelessness for a variety of reasons. Housing options for people using violence has been discussed in Chapter 5.

Current state

The Commission has received many inputs about housing and accommodation for victim-survivors. The housing, rental and cost-of-living crises have had a profound impact on the way crisis and transitional housing pathways once operated. There is a need for greater investment in this vital safety infrastructure.

Responses to Share With Us reveal that many South Australians who sought help with accommodation did not have their needs met. More than half of respondents who chose to answer confirmed that they did seek help from a specialist service (53% n=456). Of those respondents, almost half sought help leaving a relationship or household (46%), more than 1 in 3 (35%) sought help with emergency accommodation, and 1 in 4 (25%) sought help finding longer-term housing. Another 1 in 3 (33%) sought help making their home safer.

The South Australian government's reliance on the National Agreement on Social Housing and Homelessness (NASHH) as the primary funding source for the domestic, family and sexual violence non-government sector has meant that case management work associated with domestic, family and sexual violence is funded by homelessness funding. This has reduced available funding for homelessness outcomes, but has also been insufficient to meet the demand for domestic, family and sexual violence services.

The Commission has also heard that demand for crisis and transitional accommodation for victim-survivors has been outpacing investment and supply.

The South Australian government appears to agree with the need for investment in more crisis and transitional housing stock, writing in its submission that 'a substantial increase in the supply of new housing for victim-survivors is required to increase confidence in, and experiences of, the systems' capacity to deliver prompt, safe, secure, and long-term housing pathways.'[107]

Purchased emergency accommodation

The Commission has heard that the lack of crisis and transitional accommodation has resulted in an over-reliance on 'purchased accommodation', being the use of motel rooms and caravan parks to house victim-survivors. In explaining this issue, and the additional challenges experienced by regional service providers, the DFVSA wrote:

> **many regional areas are not adequately resourced to meet the community's needs, so responses to DFV are inadequate. For example, in the Fleurieu Peninsula, despite the high prevalence of people experiencing DFV, there are no crisis accommodation options specifically for victim-survivors. The lack of DFV-specific crisis accommodation forces the individuals into the homelessness system, where homelessness service providers are forced to rely on privately owned and operated hotel/motel/caravan park options, which are difficult to secure during peak tourist periods. Even when these options are available, victim-survivors and their families face spending months in crisis accommodation as there is no DFV-specific transitional housing pathways out of crisis accommodation. The lack of safe options for victim-survivors often means they are faced with the difficult decision to leave their community and subsequently their support networks behind to receive adequate support.**[108]

Securing purchased accommodation is extremely challenging in regional South Australia. For example, Uniting Country SA explained that:

> **[v]ery few emergency accommodation options exist, including hotels, motels and caravan parks. This is particularly relevant in popular tourist destinations where occupancy rates are high, or there are limited options. Often venues are unwilling to take our clients due to poor experiences in the past.**[109]

Centacare Catholic Country SA provided an example that in Ceduna, they do not have a single motel willing to accommodate people experiencing domestic, family and sexual violence, and that ongoing delays in the SA Housing Trust repairing and maintaining properties 'prolongs victim-survivors finding safe accommodation'.[110]

While motels and caravan parks may be better than no accommodation options at all, it is very clear these options are not in any way suitable for victim-survivors. On this issue, the St Vincent de Paul Society wrote that:

> **Vinnies Women's Crisis Centre (VWCC) is currently funded under the 'motel model,' which places victim-survivors in temporary motel, caravan park accommodation when beds cannot be found in other accommodation. Research consistently shows that this model is not conducive to recovery. The current 'motel model' does not allow for essential wraparound services that victim-survivors need, such as trauma-informed case management, legal support, and a sense of community … We are also currently providing food and emergency relief assistance to victim-survivors, who have been accommodated in motels and caravan parks throughout metropolitan Adelaide via our local volunteers. Our volunteers are often responding to request for assistance and visiting the same companions on a weekly basis due to the expensive and lack of food options or cooking facilities at motels and caravan parks.**[111]



Victim-survivors wrote about their experiences in motel rooms in Share With Us responses:

> **And one of the things that I want to make really clear that … needs to be changed is going into motels … That has got to stop. I mean, you have high end drug dealers and … organised crime going on in hotel rooms … these girls who are leaving DV are getting put into these motels … some of them are the most dingiest, dodgiest. I mean, it's scary … my daughter and I have had experiences where we've had beds piled up against the door and just trying to keep ourselves safe.**[112]

> **I have currently been living in 2 motels … My experience with the staff running both motels has been horrible. I have been made to feel worthless, ostracised, and treated like a burden. The staff have no understanding of trauma and have no empathy of what government funded guests are going through and are feeling. I have felt degraded, resentment, and unwanted. The attitude of staff is enough to make a dv victim leave and just go back to the abuser. The shame and judgement are something that add another layer of pain and shame to victims.**[113]

Safe Steps, Victoria's family violence crisis line provider, wrote about encountering similar issues with purchased accommodation in Victoria, noting that 'people with multiple intersecting needs are more often placed in purchased accommodation and stay there longer than other clients', and that remaining in purchased accommodation 'can exacerbate isolation, feelings of hopelessness and trauma which may result in mental health decline.'[114] Safe Steps noted that, while purchased accommodation is more likely to be used for people with complex needs, those people's needs are less likely to be met in purchased accommodation, due to language barriers, poor accessibility and isolation from culture and community.[115]

> **There needs to be more stability particularly in the most acute phase of when women leave violent/abusive relationships (entering emergency accommodation) as they are frequently placed in unsafe environments such as budget motels with very little security and high concentration of other people experiencing social barriers such as drug use, criminal behaviour, mental health challenges and financial hardship. In my experience as a social worker, shelter-based accommodation (that appears like community housing [ie fully/semi-detached properties with full amenities]) provides the most security and stability, particularly for women with children and from Aboriginal, Torres Strait Islander and CALD backgrounds.**[116]

The Commission heard that some victim-survivors are expected to stay in purchased accommodation for extended durations, while having to meet the 'mutual obligations' required by homelessness providers. During Day 1 of public hearings, Ms Hagias stated that:

> **there are real challenges around the mutual obligation when women and children are coming into and going into motel accommodation. Necessarily, they might not have finances at that point. Even if they do, these types of accommodation are not set up for cooking or facilities that could support them to purchase food and cook. So a lot of food costs money because they're ordering takeaway in order to feed their families and their children. And then alongside that, and let's remember, there's trauma, there's a whole lot of stuff that's going on, and then we're putting pressure on them around some mutual obligation stuff.**[117]

A person with lived experience of crisis accommodation spoke about their experience of moving through crisis and transitional accommodation in their submission, writing that:

> **[w]omen and their children are placed into motel accommodation in 'safe locations' that most perpetrators are actually very aware of believe it or not so you are always on edge. You are required to speak with your domestic violence support worker every day, self fund some part of the accommodation and also are required to send through 10 or more rentals a week that you have applied for and gone to the open inspections for. Failure to do this could result in the termination of your safe accomodation. If your lucky enough you might secure a short-term rental and be able to move into a place with your children but again you are required to speak to your support worker every week, have face to face meetings every week and also again send through 10 or more rentals you have applied for and viewed.**[118]

In summarising their experience with the current domestic and family violence system, the same person wrote:

> **[o]nce you have made the hard decision to seek help it becomes the most loneliest and isolated experiences I have ever had to go through in my life. Survivors are made to constantly jump through hoops and follow rules just to be able to receive help and support while the perpetrators continue to live their lives without a care in the world.**[119]

The housing crisis

The Commission has heard that the cost-of-living, housing and rental crises have had a significant impact on the provision of accommodation to victim-survivors. For many victim-survivors, and particularly for victim-survivors with intersecting needs, it is no longer financially possible to move from crisis accommodation to transitional accommodation, and then to a private rental. Rental availability and affordability is a barrier to people exiting from the government-funded accommodation system. On Day 1 of public hearings,Toward Home Alliance senior manager Shaya Nettle stated that:

> **there's general consensus that the housing crisis, it's never been quite this severe. And the primary reason for that, outside of the declining social housing stock that we've seen in every state, including South Australia, it's because the private rental market is no longer available for so many of the families that we support.**[120]

Submissions also speak about the impact of these crises on domestic and family violence accommodation and service delivery, with the St Vincent de Paul Society writing that:

> **[w]e have a number of victim-survivors, who have been staying in our crisis accommodation for up to 6 months, with little hope of securing long term housing ... Unfortunately, we are aware that several women, children, and pets who stay in dangerous situations due to the lack of availability of appropriate, safe and secure crisis and transitional accommodation.**[121]

The DFVSA submission noted the problems were likely to become worse, pointing to the rising costs of private rentals in traditionally affordable communities that now price single-income families out of the market altogether.[122]

For many victim-survivors, the pathway to safety is blocked by a broken housing system. Housing insecurity is not just a barrier: it is a crisis. Decades of underinvestment in public housing, combined with rental unaffordability, long waiting lists, and delayed maintenance, have created a 'perfect storm' that leaves many with nowhere to turn.

> **I had no place to go and weeks later I'm still homeless sleeping in my car. The police have not found him yet so there is no restraining order yet. I feel extremely unsafe and I hate that I asked for help to get away from him, I hate that I was kicked out and I hate being homeless.**[123]

This is not an isolated experience. Across the state, victim-survivors, especially women in remote and regional communities, are unable to leave violent partners simply because they have no safe housing options available.

> **Country women are at high risk particularly those involved in farming of DV. A severe lack of housing/ rental crisis in country areas makes it difficult for women to leave as they literally have no where else to go. This is what prevented me from leaving as my partner knew I had no where to go and there were no emergency housing or even being able to find a rental house to go to as I lived on a farm at the time.**[124]

When a woman's only choice is to stay or face homelessness, the system is not protecting her, it is endangering her. Some victim-survivors face insurmountable waitlists, even when they are classified as high priority:

> **I need a stable home for my son and I, and its stressful not knowing how to get into community housing. My worker cannot advocate for me and the places I apply for don't have anything available. Even [though] I'm on category 1 on housing trust it could still take 5 years to get a home. I would like more housing provided for people who have escaped DV.**[125]

Frontline workers also see the toll this takes:

> **Accommodation costs need to be within the reach of all people, the families I support cannot obtain private rentals anywhere because they are on Centrelink payments. I have one lady who has applied for over 60 rentals and cannot even get a viewing and has had no offers whatso ever for a rental property, this leads to anxiety, frustration and depression. People give up trying to leave and then the cycle continues.**[126]

The private rental market is simply out of reach for many, especially those on low incomes. Yet, public housing is scarce and emergency housing is only a short-term fix.

Even when temporary housing is provided, it is often inadequate or even unsafe:

> **Unfortunately for me the transitional accommodation through another agency was substandard (no hot water or shower head, unclean and needed maintenance work on security screen doors and windows), so I terminated and vacated the property within days of signing the lease. This accommodation was located 200kms away from my usual place of residence, where I knew no one. The agency has since apologised but the situation should not have occurred in the first instance. Nor have they offered any further accommodation, hence the return to my partner.**[127]

And even after escaping violence, victim-survivors are left without a long-term plan:

> **There is not enough help available to find ongoing housing for victims. Emergency housing is great but then it is a battle to find somewhere when your emergency housing finishes. The private market is too expensive for what these people can afford and public housing is not available when needed. The waiting list is crazy.**[128]

We cannot allow victim-survivors to fall through the cracks of an overloaded housing system. Housing is not a luxury – it is a fundamental building block of recovery, healing and dignity.

It is time to treat housing as a non-negotiable right for every victim-survivor.

The experience of Aboriginal people and Aboriginal Community Controlled Organisations

The Commission has heard that there are not sufficient specialist supports available to Aboriginal victim-survivors, particularly in regional and remote communities. It is crucial that Aboriginal victim-survivors have choice in the service that they access, but in many regional and remote areas there is no ACCO domestic, family and sexual violence service available. ACCO services are best placed to provide culturally safe and appropriate responses to domestic, family and sexual violence. Addressing this topic on Day 1 of public hearings, Ms Olive Bennell, CEO of First Nations Healing (formally Nunga Mi:Minar), stated:

> **In terms of looking at supporting families who are experiencing domestic violence, we can't look at a Western family model. So we have to look at an extended and kinship model. So our model really is based around the social emotional wellbeing of the total family, including the extended family. And we work with the family on what their priorities are, which is a bit different to the homelessness agenda and the DV agenda, where you've got a package of information and a package of funding, and that's what you offer. We actually sit and our vision is to walk alongside our families in their journey of healing, because we're talking about intergenerational trauma, we're not just talking about DV. and we talk to families about what behaviours do you want to see change within your family and what is it that you want for yourself and your children to be safe, healthy and have good well-being. So the model is very different because it's more of a narrative approach to begin with.**[129]

When asked about the effect of receiving a mainstream response for Aboriginal people who have experienced domestic, family and sexual violence, Ms Bennell responded:

> **In the main, I think that they disengage. And then there's the element of response that says they're service resistant. And for me, that says to me that whatever service they're getting is not the appropriate service for them. I don't think anybody wants to be service resistant. They're just not getting their needs met. In terms of the alliance, the alliance is quite strong in its wanting to understand. and deliver more appropriate service responses to our people, but without Aboriginal staff working in them, that can't occur, because we are a different kind of people to mainstream. We have different needs and different family connections, and it can't be delivered in a Western family structure. It just doesn't work.**[130]

First Nations Healing is the only ACCO in the specialist DFVSA, operating 6 houses in Adelaide together with providing holistic support for Aboriginal women and their families.[131]

Writing about the experience of Aboriginal women living in remote communities in South Australia, the NPY Women's Council stated:

> **A major issue is the lack of infrastructure in remote communities ... Currently, the only substantial option for women to lower their risk is to leave the community temporarily or for the perpetrator to be incarcerated. A woman leaving her community is only ever a short-term solution as the community is integral to the women's family and country ... Women who leave their remote communities for immediate safety concerns then face the barrier of not meeting the entry requirements to metropolitan safe houses because their risk is no longer immediate as the user of violence is remote. Women balance the safety risks of being homeless in a metropolitan area against their current unsafe living arrangement that is close to family networks.**[132]

The NPY Women's Council pointed out the complete lack of crisis accommodation on the APY Lands, stating that women on the APY Lands speak about 'remote safe houses [as] a key mechanism to increasing safety and acting as a circuit breaker.'[133]

Submissions from other members of the DFVSA and Homelessness Alliances wrote in support of more funding for ACCO services. Embolden supported this call, writing that '[f]unding of DFSV services must increase the proportion of funding directed to Aboriginal Community Controlled Organisations and promote Aboriginal self-determination.'[134]

Another ACCO providing domestic, family and sexual violence services in South Australia is KWY. On Day 9 of public hearings, Mr Craig Rigney, CEO of KWY, explained that:

> **when we talk about Aboriginal-led decision-making or the research, globally, it really highlights the point that First Nations responses are best done by First Nations peoples. And in South Australia, in particular, we have two specific Aboriginal and Torres Strait Islander organisations, being Aboriginal community-controlled organisations in this space … I think the need for an Aboriginal and Torres Strait Islander specific response is most definitely required here. That's not to say that all Aboriginal and Torres Strait Islander people are going to want to access that, but I think the choice needs to be given, And we know, anecdotally speaking and through the other work that we do do in the community, that there is absolutely a need, directly and indirectly, for those families, children – the voices of children and, of course, women and men to be able to access and have multiple access points.**[135]

Pets and animals

Animal abuse can be a form of domestic and family violence. Share With Us revealed that threats to harm, or acts of harm to pets and animals, was a barrier to help seeking for more than 15% of respondents.

> **Pets need to be recognised as family. More people may leave unsafe situations if there was somewhere for their pets to go.**[136]

Accommodation providers commonly prohibit pets, especially so in the case of purchased accommodation such as motels. This prohibition is a significant barrier to leaving violence.

Lucy's Project, a national charity aiming to improve the safety and wellbeing of people and animals impacted by domestic and family violence, explained that:

> **[r]esearch indicates that people impacted by DFSV commonly 'view their companion animals as members of their family'. Crucially, when an individual is unable to take an animal with them or ensure their safety, concern for the animal's wellbeing may become a barrier to help seeking or leaving a violent partner. Indeed, concern for the wellbeing of an animal may contribute to a person's decision to return to a violent partner after a period of separation. Nobody should ever be compelled to make a choice between their own safety and the safety of animal family members. Further, women and children impacted by DFSV should not be expected to surrender animals to access support, such as accommodation services.**[137]

A decision to leave a pet behind is a traumatic experience for victim-survivors. Lucy's Project pointed to research which shows:

> **[w]hen faced with a potential loss or separation from an animal, an individual can experience 'considerable distress'. Forced separation from an animal, such as that endured by people impacted by DFSV, 'may lead to feelings of intense grief, guilt and trauma, and a decline in psychosocial functioning'.**[138]

During Day 9 of public hearings, Ms Jennifer Howard, founder of Safe Pets Safe Families, spoke about her own experience:

> **I experienced domestic violence myself, and at the time I had two young children and two dogs and I had to leave my – the house that I was renting, and I went into a domestic violence shelter and I couldn't take my dogs with me, and I tried searching for all sorts of solutions and I couldn't find any solutions, and it – it really affected me badly … when I was out of my DV relationship and I had stable housing again, and at the time I didn't have any pets of my own, so I just offered my services [to domestic violence shelters] … I literally got a phone call the next week, and it literally started as simple as that. Like, we just started a community around basically fostering pets, and – yes, and then it just grew so quickly and I didn't really know what the need was.**[139]

The ability to provide victim-survivors with volunteer foster carers for their animals reduces a significant barrier:

> **We get lots of inquiries and if we almost can't instantly take their pets, or if they can't find pet-friendly accommodation, then they refuse to leave … so many people just – they worry about their pets that much, that their pet's safety is more important than their own.**[140]

The safe placement of pets is also important to reducing opportunities for ongoing abuse and coercive control:

> **[M]any clients of ours that – say they might have successfully escaped but without their animal, and if the animal is still at the address, the perpetrator can send threatening messages and things like that, that if they don't return home, this is what's going to happen to their animal, and so that – a lot of the times, that's what draws people back to the house … a pet is a part of the family and, yes, so, yes, I guess people find that as a tool, an easy tool to use to control people.**[141]

Safe Pets Safe Families has grown to meet unmet need in South Australia by providing a network of foster carers, volunteer caseworkers, a pet food bank and free and affordable veterinary services.[142] Safe Pets Safe Families is developing the Youth and Pets Project, a program for 5–8-year-olds who have witnessed domestic violence and animal abuse, which provides both healing and recovery to children, while also safeguarding against animal abuse behaviours learned from people using violence.[143] Safe Pets Safe Families has also entered into a partnership with Purina (the pet food company) to deliver the Purina Purple Leash Project. This project involves engaging with existing domestic and family violence shelters and assisting them to become pet friendly, through physical alterations, training and policy changes.

> **[I]t's a program that I guess is a long time coming. It's a pet food company that – that is supplying funding for us to be able to do this, and, like, I'm a little bit disappointed that it hasn't been done before this, and then it has taken a pet food company.**[144]

Ms Howard advised that while the Purple Leash Project was an important initiative, there will always be demand for a multi-layered approach to pets, including foster care, veterinary care and food support, so long as purchased accommodation remains in use for victim-survivors.[145]

Safe Pets Safe Families receives no government funding for supporting human and animal victim-survivors of domestic, family and sexual violence. Instead, it provides support for victim-survivors and their pets through volunteers, pro-bono work, donations from pet stores and community members, fundraising and philanthropy.[146]

Eligibility criteria and discrimination

Chapter 2 identified how the combination of underinvestment and rising demand has resulted in narrow eligibility for DFVSA services. The DFVSA wrote that it is:

> **having to make daily decisions about whose needs are most acute, who is in most crisis, and having to refer many to other parts of the system which we know are also under significant pressure (including the broader homelessness sector, who often provide a 'safety net' for those needing to leave situations of violence, particularly for men, those who do not identify as female, or those for whom their experiences of DFV are more historic, but no less a part of their homelessness experience).**[147]

Describing the effects of this, Junction Australia wrote that it is 'a perverse outcome, with eligibility and screening practices in place to stem the tide of demand as opposed to [being] responsive to risk and need of people experiencing violence.'[148]

People experiencing violence who are not adult women experiencing intimate partner violence are largely excluded from the specialist services and accommodation options provided by the DFVSA. LGBTQIA+ people, as well as men experiencing domestic or family violence and women experiencing family violence other than intimate partner violence, will, in all likelihood, not receive a specialist domestic or sexual violence service.

Tight eligibility criteria may drive this exclusion, but the Commission has also heard that LGBTQIA+ people have experienced direct and indirect discrimination from domestic, family and sexual violence services. ColourFull Abilities, which provides disability support to LGBTQIA+ people in South Australia, wrote that:

> **oftentimes crisis housing support is primarily set up for and mainly populated by women from heteronormative abuse cycles. These are important services, but they do not cater for genderqueer/gender non-conformant/non-binary individuals, as well as trans men or women; all of who are at risk of being affected by additional stigmas and discrimination, directly or indirectly from service providers (who don't always know how to provide safe spaces for them) and/or from the other service users (who may unintentionally cause harm).**[149]

Thorne Harbour Health also wrote about the discrimination the LGBTQIA+ community can experience when seeking help for domestic, family and sexual violence:

> **Some mainstream family violence services will often overtly discriminate against trans and gender diverse people, refusing to refer them to refuges or place them in hotels where other victim-survivors are staying. One trans female client of Thorne Harbour Health has been told by mainstream family violence services that 'we don't help people like you,' and been referred to a men's service.**[150]



On Day 1 of public hearings, Homelessness Alliance senior manager Shaya Nettle noted that LGBTQIA+ people experience homelessness at disproportionate rates in South Australia, and may not have good experiences of homelessness services:

> **[W]hat we're finding, particularly in the crisis accommodation or homelessness context, is that most of the crisis accommodations, they're either for men or they're for women, with again unintentionally so little capacity to accommodate what safety looks and feels like and is appropriate for transgender people … we know that approximately 30% of the LGBTQIA+ community and transgender people experience homelessness through their lifetime. Currently the mainstream services are not well equipped to deal with that.**[151]

People with disability can also be excluded from accessing crisis and transitional accommodation managed by the DFVSA. On Day 1 of public hearings, when asked about the availability of accommodation for people with disability, Ms Di Pinto responded:

> **I believe across our core and cluster sites that there is, there are some spaces where that is certainly an option, but when we're looking at motel-style accommodation then that certainly is not always available and then creates a barrier essentially, so someone may not then leave their home where they have all of the things that they may need for that disability, they would certainly not be coming into crisis accommodation where they don't have it available, that it's available. It's a big barrier.**[152]

Children and young people

There is a dearth of specialist service and accommodation options suitable for children and young people. The Commission has heard there is no specialist accommodation for children and young people experiencing domestic, family and sexual violence, that adolescent male victim-survivors can be excluded from DFVSA accommodation options even when accompanied by their mothers, and that safety and support services specifically designed for children and young people are few and far between.

> **Young people are adversely affected by experiences of DFV due to systems not accommodating larger families, as well as 'unaccompanied' children and young people. In particular, adolescent males accompanying a family member fleeing DFV often won't be accommodated in DFV gender-specific crisis accommodation and as a result, end up in the homelessness system … Despite the high prevalence of experiences of DFV for LGBTQIA+ young people, a majority of crisis accommodation options in SA are not suitable or inclusive of trans or gender diverse people.**[153]

On Day 1 of public hearings, these system gaps were described in the evidence of Ms Nicole Chaplin, CEO of St John's Youth Services and the provider of South Australia's only Youth Foyer:

> **[A]bsolutely we see that, where we see young people, quite often the young men, it's the older adolescent sons that actually cannot be housed with mum and the younger siblings. But even that doesn't come out from that young person for quite a while, but they can't be housed with mum and younger children because of their age and their gender. We certainly have seen it over the years. And I suppose the other implication is young people, whether they be young women or young men, if they're under the age of 18, that's a struggle for services as well, adult services and domestic violence services, to actually have young people in accommodation when they're under 18. There's a real hesitancy around the legal matters of having someone under 18.**[154]

Adolescent male victim-survivors

The exclusion of adolescent male victim-survivors from domestic, family and sexual violence services and accommodation is a known issue and a barrier that can cause harm. Mothers fleeing violence are often forced to make impossible decisions about their children's safety. One victim-survivor wrote:

> **I picked up my sons, put them in the car, rang a crisis centre [shelter] and was advised that I could go there immediately with 2 of my sons but my eldest was 14 and he could not go there. This was horrific, no way would I let any of my sons out of my sight. We ... slept in the car.**[155]

This story is not unique. Excluding adolescent boys from crisis accommodation both separates them from their families and prevents them from accessing specialist support. On Day 1 of public hearings, Alliance Senior Manager Ms Fuchs explained the devastating consequences:

> **I think when we're talking about youth and domestic violence in the context of crisis accommodation where young males are unable to stay, I think it would be a real struggle for a family or a mother and younger siblings. [F]aced with that choice, do I keep myself and my younger family safe in crisis accommodation and yet my son is unable to be with me ...and so having that choice that maybe they stay in the family home with the perpetrator and ... the level of risk for that young man, you know, is also really a high presence and a high level of risk there for them as well.**[156]

This is a system that forces separation, and one that can shift risk onto young people. Children and young people, and in this instance, adolescent boys, must be recognised as victim-survivors in their own right, and services must evolve to support whole families.

On Day 1 of public hearings, Homelessness Alliance senior manager Ms Alice Worrall described how this practice occurs in the Riverlands, Murraylands, Fleurieu, Kangaroo Island and Limestone Coast:

> **It's certainly an experience in the country south region of male adolescent children not being accepted in the core and cluster style domestic violence accommodation.**[157]

In regional and remote areas where there is an absence of youth homelessness services, adolescent boys can be separated from their families and become homeless:

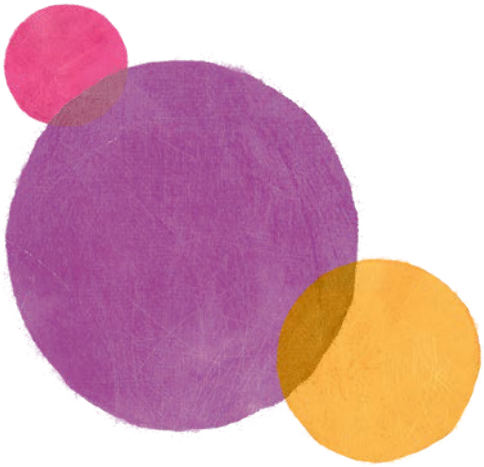
> **A layer of complexity in a regional perspective such as Country South is there isn't any youth-specific crisis accommodation available within our homelessness services. So that young person then faces I guess couch surfing. It's very hard for someone under 18 to secure an independent tenancy so you know they face that or being disconnected from their community altogether and having to travel into a metro or another regional area to be able to access suitable safe accommodation.**[158]

This broken system forces adolescent boys to find refuge in unsafe or unstable environments, staying with friends, relying on strangers, or returning to the very person using violence at a time of heightened risk.

The trauma for these young people is severe.

> **I had to leave my older son at the house because I couldn't let him know what I was doing. He wasn't allowed to stay with me in the shelter because he was 17/18yo. He ended up staying with friends. He wasn't allowed in to see me at the shelter for visits even.**[159]

The Commission has heard evidence of there being an ability to house male victim-survivors within specialist domestic, family and sexual violence accommodation. Dr Tobin, speaking about Victoria's Safe Steps Sanctuary accommodation model, referred to the recent intake of a cisgendered man and his children.[160] Inclusive approaches are possible with well-designed systems, supports and appropriate physical infrastructure.



Unaccompanied children and young people

Unaccompanied young people – of whatever gender – seeking safety from domestic, family and sexual violence are also unable to access DFVSA accommodation. DFVSA services are not funded or equipped to accommodate unaccompanied children or young people, resulting in these victim-survivors seeking support from the generalist homelessness sector.

The Silence and Inaction Report explores the experiences of young South Australian victim-survivors with homelessness, finding that:

> **For young people escaping violence without a protective parent, housing was often one of the most immediate and critical needs, and yet throughout the interviews it was consistently described as one of the hardest forms of support to access. Young victim-survivors who left home due to domestic, family or sexual violence often recounted doing so without the support of a protective parent, child protection services, or a guardian, placing them in the category of 'unaccompanied minors'. Recent national research indicates that unaccompanied minors in Australia who experience domestic, family, and sexual violence are often overlooked by the very support services and systems that purport to protect them and support their safety needs.**[161]

Several South Australian young people are quoted in the Silence and Inaction Report speaking about their experiences of homelessness after escaping violence:

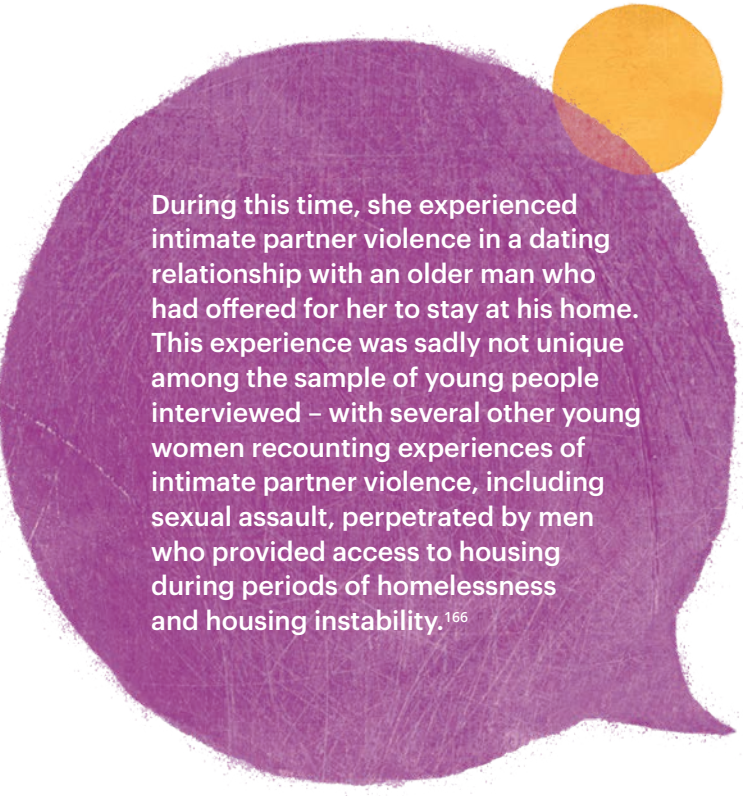
> **We didn't have any access to the shelters or anything. They [police] gave us absolutely nothing. I was sleeping on my sister's best friend's couch for, like, two months.**[162]

> **I went homeless and then got a ride up here [to Adelaide] ... Couch surfing all through town ... Floors, meth house ... because we have nowhere else to go.**[163]

> **Even just to get into places … I waited a year and a half. And it only – it took me getting jumped for them to do anything … I needed to stay at the train station.**[164]

> **They could have done more with regards to housing. Like, I don't know whether they could have housed me, but they could have helped with that, rather than literally, kind of being like, well, you're 16, figure it out kind of thing.**[165]

These young people, who found themselves ineligible for support for both their homelessness and their experiences of domestic, family and sexual violence due to their age, described how they were forced to seek shelter in unsafe places, such as paddocks and train stations.



The Silence and Inaction Report found that unaccompanied young people fleeing domestic, family and sexual violence without a safe parent found it very difficult to access housing services. The report collated some recommendations and suggestions from the young South Australians who had faced homelessness after escaping violence, including to:

- improve coordination between police, child protection, housing and family violence services, so that young people are not left to navigate systems on their own
- ensure housing services are equipped to support young people with complex needs, including those experiencing trauma, mental health issues or disability
- increase the availability of long-term, safe placements that do not require ongoing contact with abusive caregivers
- embed wraparound supports in youth housing, including access to mental health care, education, life skills and cultural connection.[167]

> **I think maybe perhaps there should be some temporary accommodations for kids or children that are facing violence, sexual violence, family issues, temporarily … because most of times when something like that happen, most kids do not have a place to stay. I don't have a house … So, making accommodation where that is going to be safe for them will be very, very important.**[168]

The state of youth homelessness in South Australia was recently illuminated in the 2024 Child Homelessness Snapshot published by Homelessness Australia.[169] The Snapshot found that in 2022–23 in South Australia, 2,306 children and young people presented alone to a homelessness service, along with 3,277 who presented as part of a family.[170] Of those children and young people who presented to a homelessness service, 1,530, or 27%, remained homeless at their last reported contact with the service.[171] Aboriginal children and young people make up one-quarter of homeless children and young people in South Australia.[172]

The Snapshot notes that children and young people can become homeless for a variety of reasons, including 'experiencing violence and/or abuse in the family home, family dysfunction and breakdown, and family rejection as a result of homophobia and transphobia.'[173] The Snapshot finds that children and young people have been frequently 'failed by state/territory child protection systems, justice systems and mental health services before becoming homeless', and that '[t]he harm and trauma children experience after losing their homes has a lasting impact throughout their lives.'[174]

Most of South Australia's youth homelessness services can only be accessed by young people once they are 15 or 16 years old.[175] On Day 1 of public hearings when speaking about supporting young people experiencing domestic and family violence, Homelessness Alliance senior manager Ms Orla Matthews stated:

> **what we see in our region is we are responding to the needs of young people who otherwise wouldn't be supported by other parts of the system, so domestic and family violence just being one component of that … We see, I think, the percentage of young people who identify violence in the broad sense as an issue is extremely high. It's over 80%.**[176]

During Day 1 of public hearings, Ms Chaplin explained that many young people who come into contact with youth homelessness services do not readily disclose violence, but rather present as needing somewhere to stay due to other issues.[177]

Ms Chaplin explained that this phenomenon of young people under-reporting their experiences made the general youth homelessness goal of reunification with families complicated:

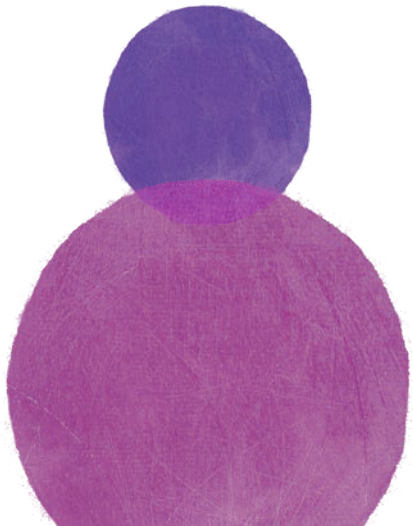
> **[T]hey don't walk into our service and say, I've just walked out because my family home is violent. It's, you know, because I think there's certainly shame and embarrassment, but also threats from their family not to give up those secrets. So it takes quite a while to build relationship for us to actually uncover the real reason … So we always explore, and as we're exploring that, quite often the safety issues they have with their family, whether that be a mum, a dad, or even another sibling … And we have about a 30% of our young people do return home, so they're returning home to somewhere safe, but that other percentage, that leaves a big percentage that it's not safe for them to return home.**[178]

Ms Chaplin described the South Australian Youth Foyer as a transitional accommodation option for young people aged 16 to 21 who are at risk of, or experiencing, homelessness that provides 23 individual apartments to young people, along with wraparound support to keep them safe and help to achieve their goals:

> **We kind of make a deal with young people. We go, okay, are you ready to engage in education, employment, training and community? And it's about them deciding what that looks like. So whether that be high school, TAFE, university, working part-time, casually, full-time, for the South Australian Foyer it's all those options. They go, okay, if you're ready to do that, we're ready to support you by providing you accommodation, but also providing you with the wraparound services to motivate, coach you to live that life of greatness that I talked about earlier. And it's on each individual young person's wants.**[179]

Speaking about the outcomes for young people achieved with the support of the Youth Foyer model, Ms Chaplin advised that a national evaluation revealed that 80% of Foyer residents exit into safe and stable housing, 65% gain secure employment, and the residents are 60% less likely to be involved in the criminal justice system.[180] The evaluation also found that for every dollar spent on a Youth Foyer, $6 are saved ($3 for federal governments and $3 for state governments).[181] When speaking about the impact of Youth Foyers, Ms Chaplin stated that Foyers:

> **stop [young people] actually entering that chronic homelessness cycle as well. Because I do worry about that, and that's from our experience running the shelters, that young people quite often can get, they think it's what they deserve, and no young person, well no person deserves homelessness, but never mind a young person with their whole future ahead of them, they do not deserve that cycle of homelessness.**[182]



Services for accompanied children

Adverse childhood experiences, including experiences of both domestic, family and sexual violence and homelessness, have been found to lead to the use of and experience of violence in adulthood, along with the development of maladaptive coping mechanisms and significant mental and physical health problems.[183] While it seems logical to prioritise the safeguarding of children and young people who are experiencing domestic, family and sexual violence, the systemic response to these victim-survivors has largely relied on the child or young person accompanying an adult victim-survivor (in the vast majority of cases, their mother), the use of the child protection system or the child becoming old enough to enter the homelessness system unaccompanied.

In circumstances where a child or young person can accompany their mother into DFVSA accommodation, the Commission has heard there are very few child-focused or child-specific supports available to these children and young people. This appears to be, once again, a symptom of the lack of investment in the sector and the rising demand for the sector's services.

Share With Us asked victim-survivors and their supporters whether their children were provided with any additional or separate help or support: 4 out of 5 (85%) victim-survivors replied 'no', with supporters mostly answering 'no' (60%) or 'don't know' (17%). Several victim-survivors also reflected about the lack of support for children and young people:

> **I used the services of [a specialist domestic and family violence service] ... I do feel like the service they offered me was great however as I look back now, I realise ... there was no offer of assistance to my children.**[184]

> **My kids have not been offered any assistance and have spent the last few years living in poverty. I have had to advocated for them to get counselling which was initially refused by a few organisations.**[185]

On Day 10 of public hearings, Ms Leaker told the Commission that Embolden has advocated for dedicated children's workers within specialist domestic, family and sexual violence services:

> **it's that recognition that children and young people are victim-survivors of domestic and family violence in their own right and have their own specific needs as victim-survivors … because we also know that many people experiencing domestic and family violence may not come into contact with specialist systems as well. I think there's a broader question about the support that children and young people are receiving and how domestic and family violence informed those supports and services.**[186]

The South Australian government recognises that there is a service gap for children and young people, stating that:

> **There is only one dedicated DFSV service for children as victim-survivors in their own right – Safe and Well Kids (SAWK) – and most services that address issues of domestic, family and sexual violence are secondary in nature, meaning that a child or young person needs to be engaged in another part of the system (for example, youth justice or child protection) to be able to access appropriate supports that address their experience as victim-survivors.**[187]

The Commission explored the impact of domestic, family and sexual violence on children and young people and the significant system gaps for children and young people during Day 5 of public hearings. Ms Sarah Decrea, Executive Manager of Children's Services and Ms Chloe Henderson, Manager of Children's Services Partnerships at RASA, provided evidence about South Australia's single dedicated domestic, family and sexual violence service for children – Safe and Well Kids – and a second youth program delivered by RASA called Together4Kids.

Safe and Well Kids was created in 2021 in partnership with WSSSA, the Legal Services Commission and RASA, and funded year to year by the Office for Women.[188] The program works with children and young people aged 0–17 years experiencing domestic and family violence.[189] The intent of the program is 'to improve their and their mother/caregiver's safety and wellbeing' and to 'ensure adult-focused support is mindful of children's needs (as a priority) to be safely cared for within that family'.[190]

Referrals to the Safe and Well Kids program are through WSSSA. The model involves WSSSA providing case management, the Legal Services Commission providing free legal advice to mothers and RASA providing 'the therapeutic intensive work with mothers and children'.[191]

Together4Kids works with children 0–12 years of age, with referrals through homelessness services. The program is described as 'offering 1:1 counselling, group work, and family therapy, to re-engage in trusting relationships, regulate emotions, develop pro-social behaviours, and build resilience.'[192]

Ms Decrea described both programs as unique:

> **I think both of those services are quite unique and I'm pretty sure they are, the only services in South Australia that see children in their own right. So in those two services, children are the primary clients, so the child itself is the client and that's who the case plans and that's who the therapeutic plans are based around is around the children. And so they are two very unique services in the space.**[193]

Reflecting on her own lived experience as a child in a domestic violence shelter, Ms Decrea spoke about how adult-centric approaches can be experienced by children:

> **[M]y whole experience was a lot of people were talking to my mum and a lot of people were coming to me as professionals kind of going, you know, 'You need to stop behaving like that because you're really stressing your mum out.' That started to get in the way of my mum and my own relationship because I started to become resentful. You know, because as a child, I'm like, 'Well, what about me?' And no one was listening to me.**[194]

Another service working with children and young people alongside parents is KWY. KWY provides Stronger, Safer Families Outreach Hubs covering the Adelaide Northern, Western and Southern Metropolitan area and the Riverland region.[195] The Hubs are a culturally focused service to address and reduce family violence and improve the safety of Aboriginal women and children in the home. KWY men's workers, women's workers and children's workers work with each family member to support their individual and collective needs.[196] Listening sessions identified the model as a culturally appropriate and trusted approach to embedding children's voices and needs within broader discussions about family safety.

The Commission was also informed of a project to develop a practice framework for child-centred practice in the context of domestic and family violence women's shelters. The project, funded by the Channel 7 Children's Research Foundation, was undertaken by Dr Carmela Bastian, Dr Ali Elder and Professor Sarah Wendt of Flinders University in consultation with an Advisory Committee with representation from some DFVSA services. At the time of writing, the practice framework was not finalised.

The Commission also understands that Bramwell House, operated by the Salvation Army, delivers a therapeutic program for victim-survivors of all ages, including children and young people. The model includes children specialists working directly with children and young people to provide them intervention and practical support in their own right.

Children and young people in purchased accommodation

Purchased accommodation does not meet any victim-survivor's overall needs particularly well; it can be especially unsuitable for children and young people. Motels lack cooking facilities, activity areas and outdoor play areas – making them a cloistered and unpleasant environment, especially for longer stays.

> **At the motel, it wasn't the safest place for me and my 4-year old daughter. It made me feel anxious and caused a whole lot more anxiety.**[197]

In her evidence, Ms Nettle spoke about how long stays in motels with children led to families returning to the person using violence:

> **So I heard an example just recently where a mother and her two children who had been experiencing domestic and family violence, we were supporting them in a motel accommodation for six months. In that time we were supporting them to explore all of their exit pathways of which in her mind, in the mother's mind, private rental was the most realistic one. After that period of six months she made a decision to return to the perpetrator because she didn't believe she would be able to secure a private rental property on her own.**[198]

Tenancy law

A final issue identified to the Commission and relevant to accommodation and housing is the operation of South Australia's tenancy laws.

The *Residential Tenancies Act 1995* (SA) includes some protections for people experiencing violence who are renting their home in South Australia. Amendments to the Act which commenced on 1 July 2024 allow a tenant to terminate their tenancy immediately (or at a specified future date) in certain circumstances involving domestic violence.[199]

Where there is a domestic or family violence–related intervention order for the protection of a tenant, or a 'domestic associate'[200] of a tenant who normally or regularly resides at the premises, the tenant may terminate their lease by providing notice to their landlord, along with a copy of the relevant intervention order.[201]

If an intervention order is not in place, a tenant may terminate a lease if they provide a report from a professional setting out the reasons why the professional is of the opinion that there are circumstances of domestic abuse.[202]

Victim-survivors who need to vacate a leased property to enter crisis accommodation can also terminate their tenancy with a minimum of 7 days' notice to the landlord.[203]

A person protected by an intervention order may also alter any lock without permission of their landlord, but must provide evidence of the order, along with a key, to the landlord or agent.[204]

In addition to these urgent procedures, the Residential Tenancies Act still contains longer-standing provisions which allow a victim-survivor to apply to SACAT to make changes to their tenancy agreement when a person who resides at the premises has an intervention order in force against them or has committed abuse against them.[205] An application may also be made by a landlord.[206] SACAT may make a range of orders, including to:

- remove the person using violence from the tenancy agreement
- allow the victim-survivor to leave the property and terminate their responsibility
- stop a landlord from 'blacklisting' the victim-survivor due to damage caused by the person using violence
- determine how a bond will be refunded.[207]

When these applications are made, the landlord, tenant or co-tenant and the protected person (if not the applicant) are all parties to the application and various criteria must be established.[208] For example, if a victim-survivor applies to SACAT to remove the person using violence from the tenancy agreement, the Tribunal will consider whether the victim-survivor can continue to meet their obligations such as rental payments.[209]

The Commission has heard that these applications can often lead to complex and lengthy hearings before SACAT. The Commission understands that despite these difficulties, these applications to SACAT are often the only option for those where the person using violence is a co-tenant on the lease agreement.

The purpose of the 2024 amendments was to create notionally faster and simpler processes for victim-survivors. This aim may have been achieved for some victim-survivors, but many are left in the same position. The legislation itself is also complex and the publicly available information on the relevant government websites is not particularly clear.[210]

Housing and homelessness

Future state

Secure, appropriate housing is not just a shelter, it is a foundation for recovery. For victim-survivors escaping domestic, family and sexual violence, a safe place to live is often the difference between freedom and entrapment. Yet, today, the system remains fragmented and under-resourced, with funding structures that continue to conflate homelessness services with the distinct and specialised needs of victim-survivors.

While it is important to acknowledge that not every victim-survivor is at risk of homelessness, accommodation for people leaving violence will remain a key component of specialist responses to domestic and family violence in South Australia.

South Australia has made important progress by adopting core and cluster accommodation, a model that combines independent, private units with co-located support services. This approach offers dignity, safety and access to trauma-informed care. It avoids the risk, stigma and retraumatisation associated with communal shelters. South Australia was a national leader in adopting this model.[211] But there is a clear mismatch between its potential and its current reach. In regional and remote areas especially, availability is dangerously limited.

In the absence of sufficient crisis and transitional housing stock, the DFVSA has leaned heavily on motels and caravan parks. These environments are often unsafe and unsuitable, particularly for children and young people, families and people with complex and intersecting needs. Motels and caravan parks can be particularly inaccessible for victim-survivors with disability.

Reliance on purchased accommodation has increased in recent years: the combination of a shortage of public housing and a housing affordability crisis means people can remain in these unsafe spaces for months, unable to secure stable long-term housing. As a result, victim-survivors either return to violent relationships or face prolonged trauma in precarious accommodation, both of which undermine recovery and safety.

The members of the DFVSA have provided timely and critical support to many South Australians experiencing domestic, family and sexual violence despite all of the challenges, constraints and pressures described in this chapter. These members, together with the inclusion of a broader range of ACCOs and community-led services, must be supported to move towards a more coordinated, accessible and inclusive model of domestic and family violence crisis response.

A coordinated, accessible and inclusive model will necessitate an evolution of the current specialist sector. Supporting this transformation will require:

- establishing a Government Steward
- disentangling homelessness funding from domestic and family violence service provision
- a sustained uplift in state government funding.

This future state is also reliant on the development of an accessible and inclusive central entry-point into the domestic and family violence system, not unlike that provided by Safe Steps in Victoria. While the specialist sector must be decoupled from homelessness funding, the central entry-point service must provide pathways into accommodation options for all victim-survivors. This entry-point is discussed in Chapter 4.

Further consultation is needed with DFVSA members regarding the current eligibility criteria and options to reform current exclusions, with a particular focus on male adolescent victim-survivors and LGBTQIA+ people. The current status quo cannot remain. The Government Steward must lead this consultation and identify a pathway to ensure that all victim-survivors can access accommodation when it becomes a safety need.

South Australia must move away from reliance on purchased accommodation by investing in more housing stock, but must first analyse the accessibility and usage of current stock to make informed choices about where new stock should be built. The Government Steward, in partnership with the new central entry-point service, must lead a statewide audit of existing properties, examining their accessibility, state of repair, demand and occupation rates, and their capacity to safely house pets. It is important that this audit identify disability accessibility limitations across current housing stock, and for this reason, the terms on which the audit is conducted must be developed with an organisation with expertise in the accessibility and safety needs of people with disability.

This statewide audit should inform the development of a register of all domestic and family violence accommodation in South Australia, to support accommodation sharing between specialist services, improve transparency around usage and eligibility criteria, and inform data-driven assessments of supply and demand. Safe Steps has developed a statewide application for this purpose, named the Family Violence Accommodation Register.[212]

With a statewide audit completed, the South Australian government must develop an investment strategy, accompanied by a suitable infrastructure investment fund, to address the short-, medium- and long-term need for additional crisis and transitional housing for domestic, family and sexual violence. The investment strategy must prioritise regional locations that do not have any specialist housing available, and must also prioritise investment in supported crisis and transitional accommodation for unaccompanied young people experiencing violence, such as Youth Foyers. Any new construction of domestic and family violence accommodation should ensure that it is accessible for people with disability and for pets.

The 10-year ambition for the investment strategy should be the complete phasing out of the use of purchased accommodation for victim-survivors of domestic, family and sexual violence.

A further goal of the investment strategy should be the identification of ring-fenced funding for ACCOs to provide specialist domestic and family violence services and accommodation, particularly in regional areas where ACCO-led services are currently unavailable.

The Commission has already noted in Chapter 5 the opportunity to increase accommodation options for people using violence. This need should be incorporated into the investment strategy.

The Commission has heard advocacy for the development of safe accommodation options for people on the APY Lands, with inputs supporting safe housing for people experiencing violence and supported housing for people using violence. This suggestion was also included in the findings of the Inquest into the death of Kunmanara May, published in 2024. The South Australian government should commission a feasibility study of the establishment of accommodation options for people experiencing violence on the APY Lands, and/or accommodation options for people who use violence on the APY Lands, with a commitment to implementing the most appropriate approach following this study. The Commission acknowledges the complexity involved in providing safe and secure accommodation options on the APY Lands and acknowledges that this will require careful consideration by government in consultation with APY Lands communities.



The Commission notes the South Australian government's support for such an approach:

> **Low vacancy rates and the high costs of private rental properties can present substantial barriers to women escaping domestic, family and sexual violence accessing private rental accommodation. Additionally, low vacancy rates across the public housing system and high demand for public housing assistance has resulted in a high level of unmet demand for public housing for those escaping domestic, family and sexual violence ...**
>
> **Accordingly, increasing the supply of housing for victim-survivors is necessary to ensure women are supported to seek and promptly receive the housing and support services they need to permanently leave an abusive relationship. A substantial increase in the supply of new housing for victim-survivors is required to increase confidence in, and experiences of, the systems' capacity to deliver prompt, safe, secure, and long-term housing pathways.**[213]

Children and young people who have experienced domestic, family and sexual violence must be recognised not as 'accompanying minors' or 'secondary victims', but as victim-survivors in their own right, with their own safety needs, experiences of trauma, and recovery pathways.

The South Australian government must urgently review options to ensure that all children and young people presenting to domestic, family and sexual violence services and accommodation receive a response in their own right.

This review needs to identify how best to provide responses to children and young people now. South Australia already has promising models that can be expanded or adapted. These include:

- expansion of the Safe and Well Kids program
- implementation of new service-delivery models, such as those used in KWY's Stronger, Safer Families Outreach Hubs, Bramwell House, or contemplated in the work forming the development of the child-centred practice in domestic and family violence women's shelters framework
- referrals to government service providers who operate with a child-focused and family-focused approach, such as the Child and Family Support System operating within DHS.

Finally, recent amendments to the Residential Tenancies Act appear to provide a simpler process for some, but not all victim-survivors who are navigating tenancy issues relating to the violence they are experiencing. Such reforms are only truly effective if they are accessible to all – both by eligibility and in practical terms. The application of the Residential Tenancies Act amendments to those living with the person using violence should be considered. In addition, the process for exercising tenancy rights must be clearly and publicly explained on a centralised, user-friendly government website.

It may also be timely for the Minister for Consumer and Business Affairs to conduct a formal review of the 2024 tenancy reforms. This review should assess what impact the changes have had, and where further improvements are needed – particularly to protect children whose safety depends on timely and supported relocation.

Recommendation 103

The South Australian government conduct a statewide audit of crisis, emergency and transitional accommodation available for all people experiencing domestic and family violence. The terms of the audit are to be developed in consultation with an organisation with expertise in infrastructure accessibility for people with disability and the audit is to ascertain:

a. the quantity of accommodation options in each region
b. the type, size, style and condition of the accommodation
c. the accessibility and safety features of the accommodation
d. any eligibility criteria operating in relation to the accommodation
e. the suitability of the existing accommodation for pets
f. the availability and use of purchased accommodation in each region.

Recommendation 104

The South Australian government develop, implement and maintain a statewide domestic, family and sexual violence accommodation register, aimed at maximising the use of suitable accommodation statewide.

Recommendation 105

The South Australian government develop and implement a 10-year domestic and family violence accommodation investment plan with a corresponding investment fund. The plan is to include short-, medium- and long-term investment goals, including to:

a. in the short term:
    i. maintain any properties that are vacant due to lack of repairs
    ii. install accessibility features for properties that can accommodate people with disability with modification
    iii. identify opportunities to provide safe, inclusive accommodation options to adolescent boys and LGBTQIA+ people
    iv. install modifications to make suitable properties pet friendly
    v. invest in supported crisis and transitional accommodation for unaccompanied young people experiencing violence
    vi. begin the purchase or construction of additional housing stock in priority regions identified in the audit as having inadequate coverage
b. in the medium term:
    i. complete the purchase or construction of additional housing stock in priority regions identified in the audit as having inadequate coverage
    ii. begin the purchase or construction of accommodation for people using violence, in regions identified in the audit as having the greatest feasibility
    iii. ensure that domestic, family and sexual violence accommodation is made available for a broader diversity of South Australians
c. in the long term:
    i. purchase, build and maintain accommodation for people experiencing domestic, family or sexual violence, to meet statewide demand, with the phasing out of the use of purchased accommodation
    ii. purchase, build and maintain accommodation for people using violence in strategic locations across South Australia, integrated with services that deliver intervention and support programs.

Recommendation 106

The South Australian government to prioritise specialist Aboriginal Community Controlled Organisations' delivery of specialist domestic, family and sexual violence services and accommodation in relevant regional and remote locations, while ensuring that all South Australians remain eligible for services and accommodation in their regions.

Recommendation 107

The South Australian government review homelessness mutual obligations for people experiencing violence, with a view to waiving or reducing these obligations for people experiencing violence until they are out of their acute crisis phase.

Recommendation 108

The South Australian government conduct a scoping and feasibility study for the development of a supported accommodation site or sites for people experiencing violence on the APY Lands, and commit to implementing the most appropriate approach identified. The scoping and feasibility study is to:

a. be conducted in consultation with relevant stakeholders living and working on the APY Lands
b. be carried out in conjunction with the scoping and feasibility study for accommodation for people using violence (see Recommendation 82)
c. identify a clear pathway forward for increased safety on the APY Lands, through the development of supported accommodation for people experiencing violence and/or accommodation for people using violence.

Recommendation 109

The South Australian government:

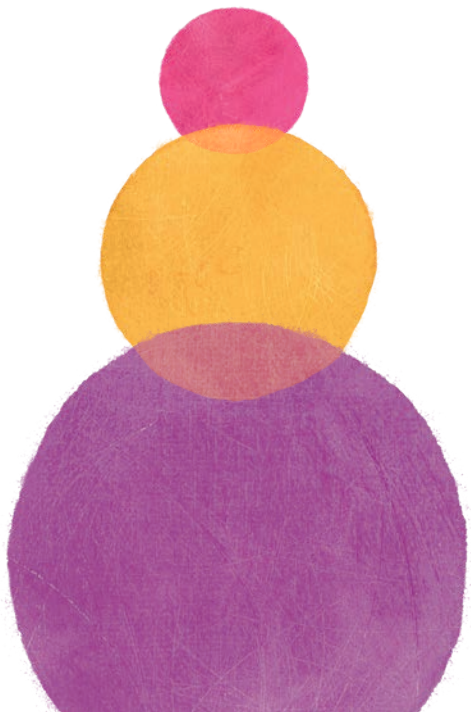
a. conduct a review of available service delivery models to provide all children and young people presenting to the Domestic and Family Violence Safety Alliance services with a response in their own right
b. fund the implementation of the most appropriate service delivery model identified in the review.

Recommendation 110

The Minister for Consumer and Business Affairs undertake a review of the domestic abuse provisions within the *Residential Tenancies Act 1995* (SA), in consultation with domestic, family and sexual violence services and the Lived Experience Advisory Networks, to determine whether they provide appropriate protection and support for people experiencing violence.

Accessible, inclusive and culturally safe services

The Commission has already identified the need for all specialist domestic, family and sexual violence services to be inclusive, accessible and culturally safe. One pathway to promote inclusivity, accessibility, cultural safety and domestic, family and sexual violence awareness is the development of a statewide accreditation framework for specialist and universal services.



Current state

The call for accessible and safe services was a consistent input to the Commission.

> **Provide easy access to DV services/legal; mental services and housing – Funding, specialized services – sexual orientation, cultural need (first nations; disability) Services that are culturally-responsive and acknowledge individual difference that embed cultural and holistic perspective into their practice.**[214]

> **10 years ago I left a ... lesbian relationship. There was no specialised counselling then and there is still no Lesbian DV counsellors in S.A. There is a booklet (called) Towards a Safe Place LGBTIQA+ DV through Catalyst Foundation Website and has training to go with it. I personally feel all DV services need this training.**[215]

> **And legal support is hit-and-miss. My first lawyer blatantly referred my Aboriginality as a 'not pertinent' to my case in the first hearing, and I felt I was ridiculed behind closed doors by her. I changed lawyers who thankfully had taken my case more seriously.**[216]

> **Most of the time, I had to navigate the system by myself and was often rejected by services that said the best option was to return to my home country, as I wouldn't be able to get help here. This was incredibly disappointing, especially after living in Australia for six years and having a baby born here. I truly hope the system changes, that shelter becomes accessible even for international students, and that trauma-informed practices are more widely implemented.**[217]

> **Counselling doesn't seem to be available for victims with intellectual disability … Easy Read resources need to be available and when listing support services, it needs to be clear what they can do … Police, courts and FDSV providers should participate in disability inclusive training. When reporting, the first person (who took the report) or someone who can communicate with a person with intellectual disability should respond within 24 hours not 3+ days.**[218]

Cultural safety, inclusivity and accessibility are crucial elements of a safe and accessible service system. Victim-survivors should have choice and agency about where to go to seek help, and must have confidence that their preferred service will provide culturally safe, inclusive and accessible services.

In relation to cultural safety for Aboriginal people, the National Plan identifies the need for 'mechanisms and genuine partnerships to make sure mainstream services embed cultural safety at their core and meet the needs of Aboriginal and Torres Strait Islander people'.[219]

The Victorian Royal Commission into Family Violence recommended funding agreements for mainstream family violence organisations incorporate a requirement for services to conduct cultural safety reviews and develop action plans in all areas of operations, governance, workforce and relationships with the community, with necessary investment in Aboriginal service providers to support this.[220] In response to this recommendation, and to ensure a consistent approach across all government-funded health and human services organisations, Family Safety Victoria adopted the Department of Families, Fairness and Housing's Aboriginal and Torres Strait Islander Cultural Safety Framework.[221] Approximately $17.7 million was allocated through the 2017–18 Victorian State Budget to build and support the workforce, including investment for the Strengthening Cultural Safety of Family Violence Services project.[222]

In 2019, the Aboriginal and Torres Strait Islander Cultural Safety Framework was launched, and in 2020 the Victorian government engaged the Victorian Aboriginal Child Care Agency to deliver the Strengthening Cultural Safety of Family Violence Services project.[223] The project involved ACCOs undertaking cultural safety reviews, developing action plans and delivering training aligned to the Cultural Safety Framework to develop key standards and measures to help individuals and organisations track their growth. Through the project, Aboriginal Cultural Safety Advisor positions were created for 2 years within Aboriginal organisations across Victoria, providing advice to non-ACCOs on taking action to embed cultural safety for Aboriginal employees working within the Victorian health, human and community services sector, and Aboriginal clients accessing services within those sectors.[224] The Strengthening Cultural Safety of Family Violence Services Assessment Tool was also developed to support the project and the Cultural Safety Framework.

In South Australia, developing the cultural safety and cultural competency of non-ACCO services is largely reliant on service-driven approaches to the delivery of training across their workforce.

There is also a need to ensure cultural safety across specialist and universal services for people from CALD communities and backgrounds. The Australian Refugee Association recommended 'cultural awareness training within the context of FDV for mainstream FDV services, delivered by specialist migrant and refugee agencies to enable culturally safe practice, including questioning and access to support in language'.[225] AMES Australia recommended funding for 'specialist multicultural and ethno-specific services commensurate to community needs is necessary until capacity for true intersectional service provision is reached in mainstream services'.[226]

Other inputs echoed these needs:

> **The lack of culturally sensitive support services only compounds these difficulties, as many mainstream services may not fully understand or address the specific cultural and social pressures that CALD women face, leading to inadequate support and further marginalization.**[227]

> **[There were] stories of others in that community that had sought support and the services that were available were not culturally sensitive, not appropriate, and it was considered better to be back in the domestic environment, even though that would expose them to abuse, rather than be in that unacceptable of a environment. And so that experience of disclosing and not having your concerns validated, not being supported, could be a major barrier to ever disclosing again.**[228]

> **[H]aving someone to have information of culturally appropriate and culturally informed when working as a front-line or support provider or service provider. We had a discussion with different communities. They were sharing concerns regarding the assessments of some service providers by saying, there's a question in some service providers. We are not criticising someone, but we are emphasising on cultural understanding and cultural-informed sessions for those of you who are working as a front-line worker or service providers.**[229]

The South Australian government has developed a South Australian Multicultural Charter to provide guidance to South Australian government agencies, organisations, institutions, businesses and communities and be a foundation for all South Australian service-delivery, policy and program development. The Multicultural Charter was shaped by community consultation, and developed in collaboration with leading multicultural organisations and the Commissioners for Public Sector Employment, Equal Opportunity and Aboriginal Engagement.[230] The Multicultural Charter does not amount to an accreditation process.

Domestic, family and sexual violence services must also be inclusive for LGBTQIA+ victim-survivors.

> **[F]amily, domestic and sexual violence is a significant issue experienced by LGBTIQ people yet engagement with support services following family violence is quite low among our communities which indicates that there are barriers in accessing services. And just briefly some of these barriers include ... A lack of recognition or understanding of family, domestic and sexual violence experiences of LGBTIQ people in the family violence sector, in services, and then poor service access experiences, so being turned away from services, experiencing further harm when trying to access services from staff or from other service users. Additionally, LGBTIQ people experiencing family violence commonly experience, or negative experience with police or justice services. And all of this is generally as a result of not having been consulted or included in policy and strategy relating to family, domestic and sexual violence.**[231]

Rainbow Tick was created by Rainbow Health Australia in 2013 to improve service responses for LGBTQIA+ people, in response to research that found that LGBTQIA+ people 'would like to access a service that is accredited to be LGBTIQ+ inclusive'.[232] It focuses on system change for all aspects of an organisation's operations and functions to meet the needs of LGBTQIA+ staff and service users. Rainbow Health Australia also offers How2, a program for health and human services organisations looking to embed LGBTQIA+ inclusion in their practices and procedures.[233]

Rainbow Tick accreditation requires independent assessment. Accreditation runs over 3 years, and is an ongoing process with a midcycle review. The Commission heard evidence from Jami Jones, Director of Rainbow Health Australia, on Day 7 of public hearings about the process:

> **[I]t can take, I would say, anything from a minimum of six months preparation to really two years for an organisation to thoroughly review their systems and processes and to be ready to be assessed for Rainbow Tick accreditation.**[234]

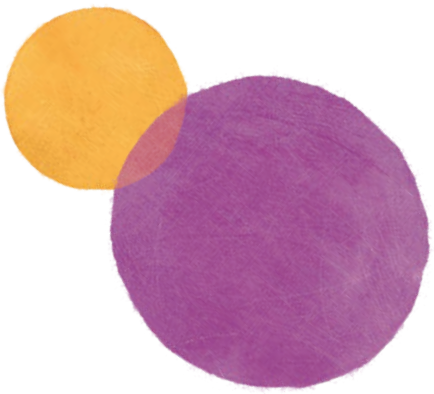
> **[T]he cost depends, as you would imagine, on the size and the complexity of an organisation … for most of the organisations that currently have Rainbow Tick accreditation by far the majority, the assessment cost for those organisations is between say $12,000 and $25,000.**[235]

The Victorian Royal Commission into Family Violence recommended the Victorian government require all funded family violence services to achieve Rainbow Tick accreditation, and an evaluation to determine whether all family violence services are suitably responsive to and inclusive of LGBTQIA+ people.[236]

The response to the Rainbow Tick accreditation recommendation included supporting service providers from each of the 17 Department of Families, Fairness and Housing areas to undertake the accreditation process. Through the 2016–17 Victorian State Budget, the government funded 20 specialist family violence services to undertake Rainbow Tick accreditation, including 6 Aboriginal family violence services.

Family Safety Victoria also funded a statewide LGBTIQ+ Inclusion Advisor position to support the first tranche of family violence services to complete the accreditation, and a statewide Aboriginal Rainbow Tick Project Worker position to support the Aboriginal organisations undertaking the accreditation.[237]

In South Australia, SHINE SA offers the How2 Inclusion Training as both a support for organisations to achieve the Rainbow Tick accreditation or as training for any organisation seeking to become more inclusive for LGBTQIA+ clients and staff.[238] In its submission, SHINE SA recommended investment in innovative and evidence-based programs that support primary care services to respond to domestic, family and sexual violence, and the integration of LGBTQIA+ inclusive and culturally safe practices within specialist services and across the frontline workforce to better support LGBTQIA+ clients and those with intersectional experiences.[239]



In addition to recommending that all funded family violence services undertake inclusivity accreditation, the Victorian Royal Commission acknowledged that the unmet need of LGBTQIA+ victim-survivors had to be addressed in the short term. This resulted in 2 recommendations:

- providing funding and other resources to support LGBTQIA+ services and communities
- ensuring accommodation and service providers can not discriminate against LGBTQIA+ people.[240]

Following the Victorian Royal Commission, the Victorian government invested $4 million from 2016 to develop comprehensive specialist services specifically for LGBTQIA+ Victorians experiencing or at risk of experiencing family violence.[241]

In South Australia, there has been an absence of support services specifically for LGBTQIA+ people experiencing domestic, family and sexual violence. This is a significant gap. LGBTQIA+ communities also experience additional barriers to seeking help, which has included experiences of discrimination from existing South Australian service providers.

In Victoria, barriers faced by LGBTQIA+ communities have been addressed through the provision of ongoing funding for specialist LGBTQIA+ community-controlled organisations. These organisations play an important role in both providing direct, inclusive and relevant support to victim-survivors, and in advocating for LGBTQIA+ victim-survivors' rights with mainstream government agencies and non-government services.

> **Thorne Harbour Health recognises the value and significance of the term "community-controlled" for Aboriginal peoples of Australia. THH shares with Aboriginal organisations a belief that services for LGBTQIA+ people are most effective and impactful when they are designed and delivered by organisations that are governed by, led by and accountable to LGBTQIA+ people and communities.**[242]

The Commission acknowledges that in 2024, the Office for Women provided funding via the Australian Government's 500 community workers initiative to employ LGBTQIA+ specialist domestic and family violence workers. This has resulted in Thorne Harbour Health and Shine SA each employing one specialist worker in South Australia. While the introduction of these workers is an important milestone, the investment has been too little, and too late, to have a meaningful impact on improving service delivery to some of South Australia's most marginalised communities.

The current lack of focus on providing services which are accessible to people with disability was highlighted in written submissions from the Office of the South Australian Public Advocate, the Disability Rights Advocacy Service and Purple Orange.

In 2023, the Office of the Public Advocate released a report titled Domestic Family Violence and Exploitation: Findings of the Office of the Public Advocate. The report stated that:

> **OPA clients who are experiencing or who have experienced sexual assault and/ or DFSV need to be provided with trauma-responsive care. Otherwise the risk is that the health impacts will be exacerbated and/ or client safety will be compromised. Where possible the OPA approves the engagement of service providers who specialise in trauma-informed practice and have specialised training and experience However, there is a need for more services with this experience and skill set.**[243]

In its submission, the Disability Rights Advocacy Service referred to the complexity of navigating systems, the lack of access to services and police, and the need for more integrated supports.[244] The Disability Rights Advocacy Service recommended mechanisms to ensure that people with disability can seek help with getting to appointments, making reports to police and connecting with primary or allied health, counselling and housing services.[245]

Purple Orange recommended a number of reforms with a focus on increasing accessibility, disability inclusion, collaboration and connectedness across service systems. The recommendations included embedding co-design with people with disability at all levels of service system reform and regular training for staff within specialist domestic, family and sexual violence services and services for people using violence on disability-related topics.[246]

In Victoria, Safe Steps delivers the Statewide Disability and Family Violence Crisis Response Initiative.[247] The initiative aims to build capacity across the family violence sector to better support victim-survivors with disability.[248]

> **[W]e run the statewide disability initiative … and that provides three things. So, one, we administer brokerage, which is funds to support clients with specific needs associated with their disability, when they've fled violence. So that might be physical aids, sensory toys, support workers whilst they're in crisis accommodation. We also provide secondary consultations to the rest of the State, to practitioners where they have a client with family violence so they can call Safe Steps 24/7 and we provide that secondary disability expertise, and that gets really high use from practitioners across the State, and we provide a role in educating both the family violence sector, the disability sector and the health sector on what disability abuse might look like, how it might show up and how those services can get support through Safe Steps.**[249]

Safe Steps' specialist Family Violence Disability Liaison Officers offer secondary consults for practitioners in both family violence specialist services and non-specialist family violence services who are supporting victim-survivors with disability. This includes capacity-building sessions on how best to support people with disability experiencing family violence, safety planning considerations and how to access family violence services and supports.[250] The Initiative also offers information sessions and presentations on disability and disability-based family violence for organisations, including information on the prevalence of violence against people with disability, specific risk factors and forms of violence perpetrated against people with disability, NDIS safety planning considerations, and services available to victim-survivors with disability.[251] Safe Steps' capacity-building sessions are available to any organisation interested in better supporting child and adult victim-survivors with disability and can be tailored to the developmental needs of the organisation and its workforce.[252]

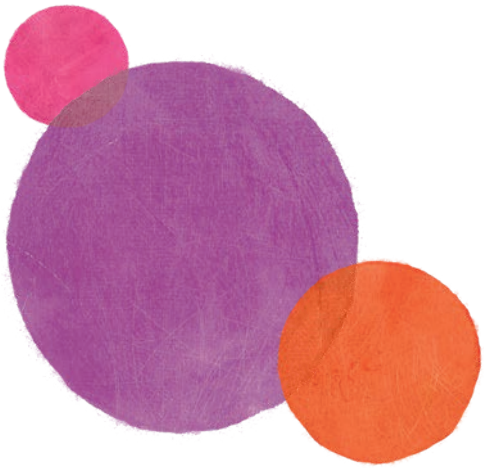
The Commission also heard evidence from the South Australian Adult Safeguarding Unit (ASU) during Day 9 of public hearings.[253] The ASU was established in 2019 under the *Ageing and Adult Safeguarding Act 1995* (SA) to respond to concerns of abuse in relation to adults vulnerable to abuse aged 65 years and over, and 50 years and over for Aboriginal and Torres Strait Islander people. The remit of the ASU was expanded on 1 October 2020 to include adults living with disability and further expanded on 1 October 2022 to respond to reports of abuse or mistreatment of any adult who may be vulnerable. Its primary functions are to provide confidential advice and support, assess and respond to reports of suspected or actual abuse and educate the community about their role and the safeguarding of vulnerable adults more generally.[254]

The Chief Adult Safeguarding Practitioner from the ASU, Belinda Lake, spoke about system gaps for people with disability in South Australia.

These gaps include the lack of holistic support or long-term case management to support someone with disability across all of their life domains and the fact domestic, family and sexual violence services are not designed for people with disability.[255]

The need for people with disability to be able to exercise autonomy and access services and systems on an equal basis with others was highlighted in Volume 6 of the Final Report of the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability (the Disability Royal Commission).

> **“ Autonomy is a person's right and freedom to make decisions, control their life and exercise choice. People with disability can only access environments, facilities, services, products and information if they are able to use and interact with them in a way that responds to their needs.**[256]



Future state

The path forward is clear: if the recommendations in this report are implemented with fidelity and urgency, South Australia will see a dramatic uplift in awareness of, demand for, and access to domestic, family and sexual violence services across the state.

These services must be able to meet the diverse and intersecting needs of everyone: victim-survivors and people using violence alike. That means recognising the complexity of people's lived experiences and ensuring services are culturally safe, inclusive and accessible.

The current landscape of programs aimed at achieving cultural safety, inclusivity and accessibility is fragmented and difficult for smaller service providers to navigate. Programs vary in scope, cost and duration. Without substantial government investment and clear coordination, participation remains optional and, therefore, patchy.

So often, the responsibility falls to already stretched services to fund and implement these initiatives on their own. This creates inconsistency, gaps and lost opportunities.

There is an urgent and undeniable need to build the cultural safety, inclusivity and accessibility of the South Australian domestic, family and sexual violence services sector. What is needed now is a statewide approach to ensure this becomes the standard, not the exception.

To lead this cultural shift, the Commission recommends that the South Australian government resource the Commissioner for Equal Opportunity to lead this work.

The Commissioner for Equal Opportunity already holds the statutory authority to address discrimination and promote equal opportunity for all. Through initiatives such as the WE'RE EQUAL campaign, the Commissioner has identified businesses and organisations that are committed to treating people with dignity, regardless of their age, gender identity, sexuality, relationship or reproductive status, race, religion, culture or ability.

These are the principles that must underpin all services that respond to domestic, family and sexual violence. Every space must be a safe space, with zero tolerance for discrimination, and a commitment to equity embedded in every interaction.

Building on the Commissioner's work with the WE'RE EQUAL campaign, and drawing on the Commissioner's experience in addressing discrimination, the Commissioner for Equal Opportunity should be resourced to develop a series of service accreditation frameworks for Aboriginal cultural safety, CALD cultural safety, LGBTQIA+ inclusivity, accessibility for people with disability and accessibility for older people, in relation to the provision of domestic, family and sexual violence services. The Commissioner for Equal Opportunity should be resourced and supported to co-design each framework with each community to ensure genuine partnership in identifying the issues to be addressed, the accreditation standards to be met, and the processes to be implemented. The work should be conducted in consultation with the domestic, family and sexual violence sector.

This work must be more than symbolic. To quote Mr Scott Wilson, co-chair of the Aboriginal Partnership Committee, 'adding a flag to an email signature is not enough'. Accreditation must go beyond internal policies, it must ensure real-world outcomes.

To create services that are culturally safe, inclusive and accessible, accreditations must embed ongoing learning and active practice improvement across the domestic, family and sexual violence sector.

This is not about creating another set of checkboxes. It's about establishing a standard of care that ensures victim-survivors are met with dignity, cultural understanding, and services equipped to meet their unique needs.

There is also an opportunity for the Commissioner for Equal Opportunity to be resourced to co-design a framework for services to be accredited as domestic, family and sexual violence aware and safe. This approach could allow for South Australia to develop a nation-leading approach to embedding awareness and safety throughout a broader range of services.

Accessibility, inclusivity and safety for children and young people could form the basis of a further framework, but this could potentially duplicate existing child-safe environment requirements under the *Children and Young People (Safety) Act 2017* (SA). The Government Steward should consult with the Commissioner for Children and Young People, the Commissioner for Aboriginal Children and Young People, the Guardian for Children and Young People and the Commissioner for Equal Opportunity to determine the best mechanisms to ensure accessibility, inclusivity and safety for children and young people within domestic, family and sexual violence services.

The recommendation to co-design and establish service accreditation frameworks will take some time. In recognition of the systemic gaps for LGBTQIA+ people and people with disability in particular, the Commission also recommends that:

- the South Australian government increase funding for LGBTQIA+ specialist domestic, family and sexual violence workers to ensure South Australian LGBTQIA+ victim-survivors can safely access support and services
- the South Australian government fund the establishment of Family Violence Disability Liaison Officers, aligned with the functions performed by the equivalent positions at Safe Steps in Victoria, to ensure all domestic, family and sexual violence services are accessible to people with disability.

This is South Australia's opportunity to lead. By resourcing the Commissioner for Equal Opportunity to co-design a robust, responsive accreditation system, and investing in specialist supports where they are most needed, we can build a system that is inclusive by default, not by exception.

Recommendation 111

The South Australian government resource the Commissioner for Equal Opportunity to co-design service accreditation frameworks for domestic, family and sexual violence service providers with priority population groups.

Recommendation 112

The South Australian government provide ongoing funding for LGBTQIA+ domestic, family and sexual violence workers to address the unmet need for specialist support and advocacy for South Australian LGBTQIA+ victim-survivors.

Recommendation 113

The South Australian government resource the establishment of Family Violence Disability Liaison Officers aligned with the functions performed by the equivalent positions at Safe Steps in Victoria to ensure all domestic, family and sexual violence services are accessible to people with disability.

The court experience for victim-survivors

Court infrastructure

This section focuses on the physical infrastructure of the court system and how it can be improved to provide victim-survivors with the safety and dignity they deserve.

The availability of safe and accessible court infrastructure in South Australia is largely dependent on location and the age of the court building. The CAA told the Commission that the design of newer purpose-built court buildings has aided in efforts to keeps victim-survivors and defendants separate when attending court.[257] For example, the 'Magistrates Court at Port Augusta, built in 2007 as the first Australian courthouse designed predominantly for Aboriginal and Torres Strait Islander users, has ample outside waiting areas and two waiting areas within the building itself'.[258]

Other courts, such as the Mount Barker courthouse, are located in older buildings with limited facilities. The ability of parties to remain separate can be non-existent, or dependent on the awareness of court staff and their availability to apply protective measures. The CAA noted that:

> **the Mount Barker courthouse is a State Heritage Place built in 1865 and has not received meaningful upgrades to better reflect the needs of the court and court users. The single waiting room for this court is compact and, in cases where parties are required to remain separate, it can result in one party needing to wait outside.**[259]

> **at the Magistrates Court at Whyalla, the Registry counter area is separate to where Sheriff's Officers are located when the court is sitting, meaning at times defendants/respondents may be in close proximity to the complainant and/or applicants without a significant oversight from security.**[260]



Current state

A courtroom is not a place of protection and empowerment for many victim-survivors – it is a place of fear and distress. Victim-survivors are expected to recount deeply personal experiences of domestic, family and sexual violence under conditions that can feel unsafe and intimidating and sometimes hostile. Without appropriate infrastructure, courtrooms and other facilities within the court building, such as vulnerable witness suites and waiting rooms, risk amplifying trauma and silencing the voices of victim-survivors.

> **The court system which requires victims (women) to sit physically in court with the offender, and with other victims and offenders is UTTERLY reprehensible. This is terrifying for most of these women and understandably places them at greater risk. The joy the offenders would get from this as a form of continued power over the victim is something we are effectively sanctioning in our court system.**[261]

> **Separate trials for victim and abuser … Court is a lengthy process and being seen and heard by my abuser, having to be in the same room or building as him has had a tremendous negative impact on my mental health … I believe it wouldn't be so bad if I had the correct support to take my abuser to court without having to interact with him.**[262]

> **[T]here should be a closed court for all matters relating to domestic, family and sexual violence with only the Magistrate and relevant others to provide a more relaxed session for the victim-survivor to tell their story.**[263]

The Commission heard about the facilities at almost every court building being inadequate to provide safety and accessibility for people experiencing domestic, family and sexual violence when they attend court. Written submissions and listening sessions identified a lack of investment in physical infrastructure to provide safe, secure and trauma-informed spaces for people experiencing violence and other vulnerable witnesses.

The South Australian government submission also identified a need for better 'access to supports and services for Autistic people providing evidence within court settings … to ensure they can engage fairly with the justice process and have confidence that can do so safely'.[264]

The Commission witnessed some of these issues firsthand during its attendance at Family Violence Court sessions and listening sessions at the Magistrates Court and the Youth Court, observing communal waiting rooms and court entrances, shared bathroom facilities, a lack of safe rooms and secure areas, unsuitable vulnerable witness suites and no physical barriers between victim-survivors and defendants in court rooms. The submission from the CAA acknowledged these limitations, stating that:

> **SA falls well behind States and Territories in providing safe and accessible infrastructure across all court jurisdictions. Despite the best efforts of court staff, complainants, protected people and witnesses are routinely exposed to defendants. This represents a major security risk and may cause additional stress, re-traumatisation and other severe impacts on their participation in proceedings. There have been occasions where this impact has been so severe that the victim withdrew from the court process, or a mistrial occurred.**

> **The safety and accessibility of waiting areas in existing courtrooms is of paramount concern, particularly in regional areas. There is inadequate separation, privacy and protection available in court buildings. Complainants, protected people and witnesses do not have access to separate entrances or amenities and, have limited ability to avoid potential exposure to the defendant/respondent in common areas.**[265]

Vulnerable witness suites have the capacity to offer a safer and more secure option for people experiencing violence to give evidence during court proceedings; however, the input received by the Commission is that the availability and design of these facilities can be inadequate. This was corroborated the CAA:

> **SA has insufficient Vulnerable Witness Suites (VWS) available to ensure that all alleged victims of DFSV have the choice to give their evidence through audio-visual link (AVL). The few VWS that are available are retrofitted meeting rooms that do not meet the standard of trauma-informed spaces or facilitate a witnesses' full support system being accessible.**[266]

These limitations are highly relevant because some people with lived experience of domestic, family and sexual violence told the Commission about wanting to attend court hearings relating to the person who has used violence against them, but not being able to attend in person because of work or family requirements. Others spoke of not feeling safe enough to attend in person but wanting to observe the hearing remotely.

The CAA submission acknowledged the need for victim-survivors involved in domestic, family and sexual violence matters to feel safe when participating in court processes, writing that:

> **[t]hey should have the choice to be physically separated from the defendant/respondent in the court building and have access to secure, trauma-informed spaces. SA's current court infrastructure does not facilitate this. This has a material and potentially devasting impact on the wellbeing of this cohort and justice outcomes.**[267]

The Chief Judge and the State Coroner provided further advice on their respective courts:

> **The age, structure and accessibility of facilities within the Sir Samuel Way Building limits the ability for the court to ensure appropriates services and protections are provided to vulnerable witnesses and their families, and the participants in the hearings of proceedings which involve domestic, family or sexual violence.**[268]

> **There is no funding allocated or presently expected to be allocated for expansion or relocation of the Coroners Court and Office accommodation, which has long been occupied beyond the capacity for which it was originally fitted out in 1998 … There is only one quite small open waiting area immediately outside the courtroom, through which all persons using the courtroom and attending the inquest must pass. It is not uncommon for witnesses or family members to experience distress during an inquest, in which event there is simply nowhere for them to go. On one occasion recently, when a witness was distressed, the only option available to the Coroner was to adjourn the inquest for a short time and order that the courtroom be entirely cleared so the witness could remain in the courtroom to compose themselves in private. All involved in the inquest and in the public gallery therefore had to move into the single small space outside the courtroom or move down the stairs into King William Street.**[269]

Both the Victorian Royal Commission into Family Violence and the Queensland Women's Safety and Justice Taskforce recommended court infrastructure upgrades, including safe waiting areas, vulnerable witness rooms, greater accessibility for people with disability and technology to enable remote attendance.[270]

In response to recommendation 49 of the Queensland Women's Safety and Justice Taskforce, the Queensland government completed an independent audit of victim safety, with the outcomes of the audit informing the development of a statewide Queensland Courts Domestic and Family Violence and Sexual Violence Safety Framework – Delivering Safer Courts 2024–2034.[271] Priority 3 of the framework is that:

> **[t]he design of Queensland Courts promotes safety, and positive health and wellbeing, for all staff and people attending courts with consideration of First Nations, LGBTIQA+, and culturally and linguistically diverse people, and people with disability.**[272]

The Commission notes the significant investments made in these jurisdictions to fund purpose-built facilities which provide safe, secure and trauma-informed spaces, but also notes the challenges associated with funding purpose-built spaces in only some locations, resulting in inequitable access.

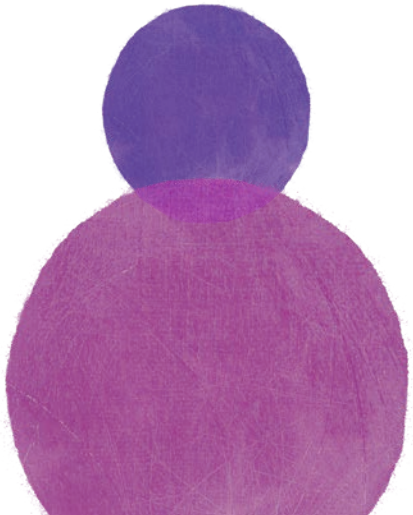
Future state

The physical environment in which victim-survivors must give evidence is just as important as the psychological environment. The National Plan states that:

> **[t]he adversarial criminal justice system can also be an unsafe place for victim-survivors. This can be through unsafe practices, such as shared waiting rooms, or through inappropriate lines of questioning for sexual assault survivors. If victim-survivors choose to seek justice through the legal system, the system must provide a safe environment and ensure victim-survivors are prepared, know what to expect and are able to make informed choices.**[273]

Victim-survivors must feel safe and supported to participate in the justice system, not retraumatised and intimidated. Some victim-survivors may feel safe to give evidence in the same courtroom as the defendant, but for others, safe participation may mean giving evidence from a different location entirely.

Culturally safe and trauma-informed spaces that include separate entrances, waiting rooms and bathrooms, private spaces and remote witness rooms should be the ultimate goal for any government, but the Commission acknowledges this can present significant challenges, including resourcing and equality of access. The following recommendations present a sustainable path forward for the South Australian government.



One of the ways to create safer and accessible access is through the development of vulnerable witness suites that are separate to the court building. Completely separate facilities in a non-court building would address the risks associated with the current approach, as highlighted by the CAA:

> **Where [existing Vulnerable Witness Suites] are used the witness giving evidence may still be exposed to the defendant. VWS are located on court premises, and witnesses must travel through public spaces to access the suite and to use toilet and kitchen facilities in common areas. Smaller courts, such as the Youth Court, have VWS proximate to the waiting areas with implications for the comfort and privacy of people providing evidence.**[274]

> **[D]efendants may wait outside a court building on the date a complainant is using a VWS to give evidence having the effect of further intimidating them.**[275]

The CAA should be resourced to establish and operate a safe and secure vulnerable witness suite in a non-court building in metropolitan Adelaide to allow vulnerable witnesses to give evidence remotely in courts across South Australia.

Attention should be given to ensuring the accessibility of these suites for children and young people.

In addition, to ensure equitable access to such facilities for victim-survivors who live in remote and regional locations, the South Australian government should undertake a rapid audit of existing government buildings to identify opportunities to establish vulnerable witness suites in locations with a court presence.

The Commission also urges the South Australian government to consider using strength-based language to describe these suites. For example, new terminology could include 'supportive witness space', 'specialist witness room' or 'dedicated witness suite'.

There is also a clear need to bring current court infrastructure up to a minimum domestic, family and sexual violence safety standard to strengthen the integrity of the justice system and ensure that victim-survivors of domestic, family and sexual violence feel safe and supported when attending court. The CAA should be resourced to develop domestic, family and sexual violence court safety standards, informed by the Commissioner for Victims' Rights and victim-survivors with lived experience of the justice system.

The minimum safety standards must include consideration of the needs of all victim-survivors, particularly children and young people and people with disability. Although the Youth Court in Adelaide is a separate building, suburban courts are not youth specific, meaning that children and young people are mixing with adult offenders. In its listening session with the Youth Court, the Commission heard about and observed that facilities were not ideal.

The development of minimum safety standards must be accompanied by a dedicated program of work, and a corresponding infrastructure fund, to upgrade court infrastructure across South Australia to better meet the needs of victim-survivors of domestic, family and sexual violence.

The CAA should develop a 10-year capital works plan to undertake this program of work, with appropriate resources to be provided by the South Australian government.

Recommendation 114

The South Australian government resource the Courts Administration Authority to establish vulnerable witness suites with appropriate technology, infrastructure and staffing in a non-court building in metropolitan Adelaide.

Recommendation 115

The South Australian government undertake an audit of existing government buildings to identify opportunities to establish vulnerable witness suites in regional locations with a court presence.

Recommendation 116

The South Australian government resource the Courts Administration Authority to develop domestic, family and sexual violence safety standards for court infrastructure, informed by the Commissioner for Victims' Rights and victim-survivors with lived experience of the justice system. The new minimum safety standards should be used to inform a 10-year capital works plan.

Recommendation 117

The South Australian government establish a capital infrastructure fund for the Courts Administration Authority to meet the minimum standards via a staged approach.

Court information

In the context of domestic, family and sexual violence, timely and accurate information is not just beneficial, it is essential to a victim-survivor's sense of agency, safety and trust in the justice system. Victim-survivors are often asked to engage with complex legal systems with little support while still trying to come to terms with and manage the impacts of abuse. Their ability to navigate the justice system and their safety is contingent on the quality of information they receive from external parties.

In South Australia, the *Victims of Crime Act 2001* (SA) sets out the principles which govern the treatment of victims of crime in the criminal justice system. Section 8 sets out the rights of victims to request information on a range of matters, including the progress of investigations, the reasons why a prosecutor has decided not to proceed with a charge or to proceed with a lesser charge, the outcome of bail applications, the outcomes of the proceedings and the details of any sentence imposed on the offender for the offence.[276] Once an offender has been sentenced, a victim is also entitled to receive details about when the offender is to be released or, where the offender was subject to community service or a bond, information about whether the community service was completed or the bond was complied with.[277]

In Chapter 5, the Commission recommends the establishment of a support worker service connected to the Family Violence Court to provide general advice and support to both victim-survivors and people who use violence. This section looks at why information is so important, and what information should be provided to victim-survivors as their matters progress through the justice system.

Current state

Despite growing recognition of the importance of victim-survivor agency, a consistent theme identified during the Commission's listening phase was the significant gaps in information received by victim-survivors during the course of criminal and intervention order proceedings. Some people spoke to the Commission about not knowing when an intervention order or criminal matter was next in court, and about needing to make numerous calls, often to numerous people, to find out court hearing outcomes. Bail is a particular concern, with the Commission being told that in some instances bail was granted and a person using violence released without the victim-survivor being advised of the application or the outcome. More commonly, variations to bail addresses or other conditions have been made without the victim-survivor being notified.

> **"Whenever there is a court process the SAPOL prosecutor should be contacting the victim ON THE DAY of court to inform them of the outcome of that day's proceedings and answer any questions.**[278]

> **"Even while he was in jail I had to take days off work to attend 15+ court dates which kept getting put off as his lawyer kept giving random dates he thought he would be released by but never did.**[279]

Others spoke about the fear of not knowing when the person using violence was going to be released from prison or remand.

> **"Partners and former partners and anybody else affected by the crimes for which they were convicted should be informed of a perpetrator's pending release before that release, and not be placed at any risk due to lack of their being informed and, as necessary, having other protections in place. This should be a matter of course, but has not always been done, with sometimes fatal consequences.**[280]

The Women's Legal Service SA raised similar issues in its submission, stating that:

> **updates are not just a matter of courtesy; they are a critical aspect of ensuring the safety and well-being of the victim. Knowledge of these developments allows the woman to make informed decisions about her safety, seek legal protection if necessary, and access any additional support services.**[281]

The Women's Legal Service also noted that women often feel marginalised and disempowered and that the provision of timely and accurate information encourages victim-survivors to engage fully with the legal process.[282]

The Commission is aware of the Victims' Register maintained by the Victim Services Unit in DCS. In order to register with the Victim Services Unit to receive updates about an offender, a person must demonstrate they are a victim of a criminal offence and the offender is either under the supervision of DCS (community service order or bond) or in prison or on remand.[283] The information that can be provided includes details of any sentence, details of any transfer of the offender from one prison to another, details of any escape from custody, and the date and circumstances in which the offender will, or is likely to, be released from custody (including bail, home detention, parole, bond, re-socialisation and work release).[284]

Where an offender is eligible for parole, the Victim Services Unit can also offer consultation about 'no contact conditions' and exclusion zones, discuss how to make a written submission to the Parole Board and provide advice on other protections available to victims.[285]

The DCS Victim Service Charter Principles set out what victims of crime can expect from DCS. This includes an expectation that they will be 'provided with timely accurate and relevant information' and that 'DCS will take reasonable steps to protect victims from unlawful or preventable contact with the prisoner or offender whilst under the custody or supervision of the Department's staff'.[286]

The Commission is also aware of the DHS Youth Justice Victims Register, an information service for victim-survivors of a crime where a child or young person has been sentenced to detention or imprisonment.[287] Information that can be provided includes updates about the child or young person's sentence and information such as where the child or young person is being held in detention, transfers to a different custodial facility, details of their release and if they have escaped from custody.[288]

While these services are a necessary part of the South Australian justice system, these services rely on a victim-survivor being registered and are limited in the information they can provide. They do not provide victim-survivors with information about outcomes of court matters (other than outcomes relating to bail or sentences) or changes to intervention orders. Victims remain reliant on police or CAA staff to receive this information.

Reliance on police is problematic, due to the large number of matters listed in Family Violence Court lists, and the lack of time and resources for police prosecutors to contact every victim-survivor with an update after each hearing. The provision of timely information about bail is also problematic given there are no restrictions on when a defendant may apply for bail, or any enforceable requirement that a defendant provide prior written notice of an intention to apply for bail. The absence of adequate guardrails around bail applications is particularly troubling for victim-survivor safety.

The rights of victim-survivors to timely and accurate information about the progress of their matters has been recognised in many inquiries, including ALRC Report 143, the Victorian Royal Commission into Family Violence and Hear Her Voice – Report Two by the Queensland Women's Safety and Justice Taskforce.

In ALRC Report 143, the ALRC was told that victim-survivors did not receive enough information about how their matter was progressing, leaving them feeling 'that they did not have agency, choice or voice'.[289] The ALRC was also told that 'police and prosecutors often did not explain the process or how the prosecution was progressing'.[290]

ALRC Report 143 also spoke about the role of victims charters across Australia, noting that:

> **[a]ll victims' charters state that victims have a right to receive information about the investigation, prosecution, and court processes associated with their report of sexual violence, including information about their role as a witness at trial. As discussed in Chapter 2 and Chapter 3, information is a key justice need for people who have experienced sexual violence.[291]**

Future state

A transformative shift is needed in our criminal justice system. If victim-survivors are to reclaim a sense of agency, they must be recognised as active participants in justice processes, not passive recipients of outdated, incomplete or delayed information. Too often, they are left uninformed about critical updates in their cases, including bail decisions, court outcomes or changes to intervention orders.

When victim-survivors are left in the dark, the consequences can be devastating. Their safety, both physical and psychological, can be compromised overnight. The absence of timely information not only creates fear – it escalates danger.

Safety planning relies on anticipating legal outcomes. However, when support services and victim-survivors themselves lack accurate or timely updates, it undermines every effort to stay safe. For example, a victim-survivor who is unaware that the person using violence has been released on bail may return to their workplace, home or community unaware of the looming risk. Without protective measures in place, these individuals are unknowingly placed in harm's way.

The damage doesn't stop at physical danger. A system that withholds or delays information chips away at a victim-survivor's trust. Over time, this erodes their confidence, not only in the prosecutor handling their case, but in the justice system as a whole.

The Women's Legal Service SA captured this impact:

> **Women who feel they are being actively supported and kept informed are more likely to engage with the justice system, cooperate with investigations, and follow through with legal protections. A failure to provide these updates can reinforce a sense of isolation, making the victim less likely to reach out for help in the future.**[292]

We must move toward a justice system where information is shared responsibly, consistently and proactively with those who need it most. Every decision that affects a victim-survivor's safety must be communicated in a timely manner.

Currently, mechanisms such as the victims registers operated by DCS and DHS Youth Justice are helpful, but they are not enough. These systems were never designed to comprehensively meet the information needs of victim-survivors. As a result, many are forced to chase updates from overburdened police prosecutors and court staff. The rights of victims under the Victims of Crime Act to receive information about their matter on request cannot be exercised in a meaningful and timely way.

The current lack of coordination and integration across agencies has left a significant gap in communication.

The Commission explored whether access to justice-related information should be a right to know or a right to ask. The conclusion was clear: the right to ask, when properly implemented, empowers victim-survivors with control over when and how they receive critical updates.

A reliable, timely, well-resourced and victim-centred information mechanism is required and it must meet the differing needs of adults, children and young people, and prioritise safety at every turn. This could take the form of:

- an information unit within the CAA
- a secure digital court information portal accessible by victim-survivors
- a hybrid model involving human support and online systems.

Whichever path is taken, the outcome must be the same: prompt, accurate and trauma-informed communication that victim-survivors can trust.

The failure to provide advance notice of bail applications is another glaring oversight. Without adequate warning, victim-survivors are denied the chance to prepare, to be heard, or even to stay safe.

The South Australian Attorney-General must consult on reforms to require prior written notice of all bail applications.

This includes consulting on amendments to enforce compliance with section 10(4) of the *Bail Act 1985* (SA) and section 7 of the Victims of Crime Act. Victim-survivors must be informed and given the opportunity to provide their views, every time.

Recommendation 118

The South Australian government resource the Courts Administration Authority to develop and implement an accurate, timely, accessible and victim-centred information sharing mechanism that meets the differing needs of adults, children and young people.

Recommendation 119

The Attorney-General consult on reforms to require prior written notice of all bail applications. The consultation must include consideration of amendments to enforce compliance with section 10(4) of the *Bail Act 1985* (SA) and section 7 of the *Victims of Crime Act 2001* (SA).

Court supports

For victim-survivors of domestic, family and sexual violence, engagement with the criminal justice system can be a traumatising and isolating experience. Many victim-survivors who are required to give evidence at a criminal trial about the violence they have experienced will face limitations on what they can discuss with others, in an attempt to avoid any influence over the evidence they will give at the trial. External peer supports for victim-survivors involved in the criminal justice process is a necessary and appropriate response to this issue.

Peer support programs can offer victim-survivors a critical lifeline, reducing isolation and empowering individuals to engage with legal systems from a place of strength and agency.

> **[I]f we can provide victim-survivors with as much information about all of the things that other people have done in similar situations they can use that information to make informed decisions about their own healing and recovery process. And that's about taking back power and control and autonomy and agency in your own process. And it's about not having decisions made for you.**[293]

In addition, traditional legal processes often fail to account for the complex communication needs of individuals navigating trauma, such as disability, neurodivergence, acquired brain injury, mental health conditions or other factors that can affect speech, language and comprehension. Witness intermediary schemes and peer support initiatives are important mechanisms that can support access to justice and participation in the criminal justice system.

Research shows that people with disability experience higher rates of violence, abuse and neglect than people without disability. Additionally, people with disability face significant additional barriers to help seeking and accessing the criminal justice system.[294] The Public Advocate wrote that:

> **[i]t is well recognised that along with under reporting the prosecution rate for perpetrators of violence against women with disability is extremely low. This is an issue that has been noted by the Disability Royal Commission. The evidence showed that people with disability are least likely to have their cases heard in court and are twice as likely to have their stories seen by investigators as false reports. Case studies show that people with mental health issues may make disclosures of sexual assault that appear implausible but on proper and further investigation, are found to be genuine.**[295]

Witness intermediaries act as skilled facilitators who help bridge communication gaps between victim-survivors with complex communication needs and those working in the criminal justice system. Their presence not only enhances procedural fairness but also mitigates the risk of further harm during evidence gathering and courtroom proceedings. The Commissioner for Victims' Rights stated that:

> **[m]ost Australian jurisdictions have introduced Intermediary programs (or similar) to help witnesses to communicate their best evidence. Intermediaries are often drawn from allied health professions including speech pathology, social work, psychology, and occupational therapy and undertake rigorous training in order to become accredited. The role of the intermediary is to carefully assess the communication needs of the witness and inform police and the court of the best ways to communicate, so the witness can provide their best evidence. In South Australia there is a Communication Partner scheme. For a variety of reasons Communication Partners are underutilised.**[296]

Current state

Peer support models

Support for victim-survivors who are engaged in the criminal justice system is critically important.

While the ODPP has witness assistance officers and SAPOL has victim contact officers, the roles serve slightly different functions. The focus of a witness assistance officer is to 'provide trauma informed support for victims who may need assistance to participate in the prosecution process due to the impact of the offending, their age, or other personal circumstances'.[297] Victim contact officers are available at some police stations and can provide support and information to victims of crime.[298] The focus is understandably on the prosecution process, so while it provides a valuable service for victim-survivors, there are limitations on the personal support they are able to provide.

Many submissions and responses to Share With Us told the Commission about the power of peer support for people with lived experience of domestic, family or sexual violence. They spoke of the value of support from people who had similar experiences and understood what they had gone through, and of not feeling alone. Despite their apparent value, the Commission also heard that there is a lack of peer support services available.

> **There have been times I have wished for Peer Support/ lived experience and knowledge of those who have had similar experiences or navigated the same systems. I have been lucky again to find these and they have offered the most valuable knowledge and support. Peer Support/ lived experience and knowledge is the most valuable knowledge, it needs to be supported more.**[299]

> **I really wish there were any places I could support my friend with linking in that understand the dv experience and maybe have groups for women where they can feel less alone and feel heard and understood. We as her friends try and support her but there's only so much that she takes on board from us.**[300]

> **I think support groups or something I could attend with kids so they can play safe. I can chat to other mums going through this as it's affected my work, their normal ever day lives, school, friends and family. I feel extremely isolated and have considered returning is easier than coming doing it all alone.**[301]

The value of peer support was also raised in the Sexual Violence Study:

> **Participants over 50 years of age were also most likely to mention that they had found peer support very useful, which may be a result of perceiving a lack of service support and finding understanding among others of a similar age group. One survey respondent stated it was useful to talk to 'women friends, because they know what it is to be abused by men'.**[302]

> In the adult Health response to Sexual violence Yarrow Place support a victim/survivor with a peer support to sit at the hospital with them; to comfort them, to reassure them they are safe and not alone in the initial response of the health system. This peer support is not offered to paediatrics. It would be beneficial if there was a single staff member who is trauma informed and able to sit with the young person and/or their parents.[303]

During Day 8 of public hearings, Anna Coutts-Trotter gave evidence about the Survivor Hub, a charity operating peer-support programs across Australia. Ms Coutts-Trotter established Survivor Hub with her co-founders because of her own experience of sexual violence.

She explained the benefits of peer support and how it differs from professional support or support from family and friends:

> **[Y]ou come into a space, and you sit with people who just understand you on a fundamental basic level and know what it feels like to have been through the same or very similar to what you've experienced. You don't need to explain things. You know that people aren't judging you. You know that they understand all of the decisions and decisions that you made during or post the experience. And just being able to sit in a space with other people is incredibly healing … a lot of these experiences, domestic, family and sexual violence, they happen in isolation and that's what people who use violence do deliberately. And they happen privately, and they happen behind closed doors, and it's usually between two people. And the only way to sort of combat, for lack of a better word, that is to be healing out loud, openly, in public spaces, with community that you know, understand what it feels like to have gone through what you've gone through. And so I think it's in our connections with other survivors and other people that we can actually begin the healing and recovery process.**[304]

The Survivor Hub was established in November 2021. It runs peer support groups called 'MeetUps', which are open to all victim-survivors of sexual violence who are over 16 years of age. They have also recently opened a MeetUp for parents of sexual violence victim-survivors.

The MeetUps are facilitated by victim-survivors and are supported by a person with professional qualifications such as social work, counselling or psychology. Each session loosely follows a running sheet. They start with introductions and icebreaker discussions, and then discuss topics that have been requested by participants. Common topics include navigating intimacy post-assault, friendships, fallouts from friendships, disclosures to partners or parents or workplaces, the court and reporting process, types of therapy and new relationships. The sessions finish with a 'self care debrief or wrap up'. Importantly, there is no coaching of the participants in relation to what they should do or how to give evidence at court. Details of sexual violence are not shared. The group operates around the sharing of personal experiences, which helps to give people information that helps them to make their own informed decisions, particularly around healing and recovery.[305]

MeetUps are run in locations all over Australia, depending on where people who wish to set up and facilitate a group are based. Facilitators must go through an interview and training process, and then a group may be opened in their location. The Survivor Hub has also started running online MeetUps to enable access for those who do not have access to a MeetUp operating near them.[306] MeetUps are free to attend and rely heavily on facilitators volunteering their time. The Survivor Hub relies on grants and donations to pay the professional attendees.[307]

Ms Coutts-Trotter explained that while it was very rare for people in crisis to attend the MeetUps, it is important to have a professionally trained person present to ensure the safety of participants and provide any follow-up if necessary.[308]

Survivor Hub MeetUps were evaluated in June 2024 by researchers from RMIT University. The evaluation found that 'MeetUps positively impact on survivors' wellbeing, healing and recovery' and the work of the Survivor Hub 'offers a unique opportunity for survivors of sexual assault to begin or continue their journey of recovering from violation and exploitation'.[309]

The evaluation considered the role of professional therapeutic support services compared with the peer support offered by the Survivor Hub. MeetUp participants confirmed the importance and benefits of peer support and noted that peer and professional support are complementary. One does not substitute the other; instead, both have a role and a place in survivors' healing and recovery.[310]

Witness intermediary schemes

In South Australia, a 'communication partner' is defined in the *Evidence Act 1929* as 'a person, or a person of a class, approved by the Minister for the purposes of providing assistance in proceedings to a witness with complex communication needs'.[311] A communication partner may also be known as a 'communication assistant' or 'intermediary'.

The *Summary Offences Regulations 2016* (SA) add that a communication assistant, can be 'any other person approved for the purposes of the interview with the suspect or witness by the investigating officer or prescribed interviewer who is to conduct the interview.'

In 2016, the Evidence Act was amended to include section 14A, which formed the legislative basis for the first communication partner program in South Australia. The Evidence Act and the Summary Offences Regulations establish a scheme whereby a person with complex communication needs is entitled to receive communication assistance during certain interactions with the justice system.[312] This may be a suspect being interviewed by an investigating officer, a potential witness in relation to a serious offence against the person, or a witness in a legal proceeding giving evidence to the court.

Pursuant to regulation 18(2) of the Summary Offences Regulations, a suspect or witness being interviewed by an investigating officer is considered to have complex communication needs if they have significant difficulty in communicating effectively with the interviewer, whether the communication difficulty is temporary or permanent and whether caused by disability, illness or injury, but not by intoxication.

For witnesses who are to give evidence to the court, the court may make an order for the provision of communication assistance on an application by any party to the proceedings or on the court's own initiative. In certain criminal proceedings and in certain circumstances, orders allowing for a witness to receive communication assistance *must* be made by the court.[313]

Communication assistance may be provided through:

- an assisting device, such as a speak-and-spell communication device
- an approved person (approved by the interviewer or the court)
- a communication partner (a specialised communication expert).

Communication partners are communication specialists who are engaged to assess people with complex communication needs in order to identify ways in which people with complex communication needs may be supported to effectively communicate and participate in the judicial process.[314]

The communication partner is an impartial party, not an advocate or support person for the person with complex communication needs. The 'partnership' exists between the communication partner and the justice system, in that their role is to ensure that participants of the justice system are educated and advised about the most effective way to obtain the best evidence of the person with complex communication needs.[315] The role is not defined in legislation in South Australia, unlike in other jurisdictions.

When the communication partner scheme was first legislated in South Australia in 2016, the South Australian government contracted Uniting Communities to establish and run the scheme using trained volunteers to fulfil the role of communication partner.[316] The South Australian Law Reform Institute in its 2021 Review of the Use of Communication Partners in South Australia (the SALRI Report), found that despite support from the disability sector, and the recognised benefits for children, people with intellectual disability, and Aboriginal and multicultural communities, the scheme was rarely used in the courts (though it was used most often in the Youth Court).[317]

The SALRI Report also found that police rarely used the scheme when interviewing suspects with complex communication needs, though it was used by specialist police in interviewing vulnerable witnesses and victims.[318] South Australian government funding for the scheme was not renewed in 2020, and the volunteer scheme was replaced with a 'user pays' model, where the individual requiring communication assistance privately funds a communication partner.[319] Criteria for who may be a communication partner also changed, requiring speech pathologists, occupational therapists, psychologists, developmental educators, and social workers to have a minimum of 5 years' experience working with people with complex communication needs.[320]

In their submission, the Disability Rights Advocacy Service told the Commission they had observed:

> **[a] lack of access to police investigation or the forensic interview process, particularly for children with communication impairments, such as being non-verbal. For example, a lack of awareness or pushback from frontline police about vulnerable witness protections that are supposed to be implemented, including not making a communication assistant available.**
>
> **While there is an established Victim Support Service to assist people going through court processes, there is limited independent assistance for victims going through the police investigation stage i.e. reporting, making police statements. The Victim Management Team is a section inside SAPOL assisting victims, however this is not independent of SAPOL.**[321]

The Commission has also heard that:

> **[c]ounselling doesn't seem to be available for victims with intellectual disability … Easy Read resources need to be available and when listing support services, it needs to be clear what they can do … Police, courts and FDSV providers should participate in disability inclusive training. When reporting, the first person (who took the report) or someone who can communicate with a person with intellectual disability should respond within 24 hours not 3+ days.**[322]

New South Wales, Victoria, Tasmania, Queensland, Western Australia, the Australian Capital Territory, New Zealand and the United Kingdom all have communication partner, or witness intermediary, schemes.

The United Kingdom introduced its intermediary scheme in 2004, and rolled it out nationally in 2008. The scheme is established under the *Youth Justice and Criminal Evidence Act 1999* (UK) and allows communication assistance to a witness in criminal proceedings, other than the accused. Professor Penny Cooper devised the English model, and in 2016 gave expert evidence at the invitation of the Royal Commission into Institutional Responses to Child Sexual Abuse. In 2017, the Royal Commission's final report recommended the use of witness intermediaries throughout Australia.

The Commission heard evidence from Laura Cilesio on Day 7 of public hearings about the intermediary program in the Australian Capital Territory (the ACT program), established in 2020 by the ACT Human Rights Commission. The ACT program is broad, working with a range of victims and offence types, with most referrals coming from sexual assault and child abuse policing teams.

> **The program is a hybrid, so we have in-house intermediaries, so they're salaried employees, and we have panel of intermediaries. We're a 24-7 service, so we provide intermediaries within business hours but also outside of business hours on weekends and public holidays and that makes up about 30 per cent of the referrals we receive. That was one of the first things that police said to us when we started the program. It's not just nine-to-five, policing is all the time, and so we made that adjustment right from the outset, so we manage those referrals as well.**[323]

The ACT program allows the court to order an intermediary in criminal and civil proceedings and is available to child complainants in sexual offences and witnesses to homicide, adults with communication difficulties and vulnerable accused.

> **Communication difficulties is very broad in the legislation and that's intentional. It just gives an example. I think it's a physical or mental impairment that impacts speech and that's brought on purpose because it doesn't have to be a diagnosed condition to access the program and often people either don't want to disclose they have a disability or they don't acknowledge or identify as having a disability and communication difficulty generally is quite broad. It can include things like cultural considerations and other barriers to communication in those engagements.**[324]

People with communication difficulties who have accessed the program include young people, people with trauma and mental health issues, behavioural difficulties, learning disabilities, cognitive impairments, brain or head injuries, neurological conditions, and older people with dementia.

The program has a safeguarding process for suspect interviews with police to ensure that there is legal representation present if an intermediary is engaged.

When asked about the uptake of the program, Ms Cilesio told the Commission:

> **Last year we had almost 400 police referrals and over 100 court referrals, so that was our busiest year to date. Court is probably the most resource intensive element of program service provision. There's different parts, and they move all the time and sometimes court will sit and sometimes court won't sit and you sort of dedicate that time, and you just have to be in the court's hands. There was a 56 per cent increase in court referrals last year on 2023 and the first two months of 2025 there's already been a 108 per cent increase in referrals we've received.**[325]

Intermediaries may make recommendations about how best to engage someone using the program, which may include:

> **things like breaks or signposting, so telling someone when you're going from one topic to another topic, avoiding complex language, avoiding legal terms … lights in the remote suites in the ACT are quite bright, and the tables are white and so when the lights turn on, it's very overwhelming. So the intermediaries will often make recommendations around that. We have a remote suite that has a toilet within it and if there are toileting issues, whether it's a very young person or an older person that one of their stress and anxiety responses is to go to the toilet without a lot of notice, we can recommend that that room is booked for them. It could be weighted items that they use or stuff that they might have available to them in the family room, whether that's music or scents or an artwork or something that they can do to occupy themselves during that break.**[326]

The program is also involved in police training about interacting with witnesses with communication needs and strategies that an intermediary may recommend.

Future state

Victim-survivors often experience the criminal justice system as overwhelming, confusing and emotionally draining. Many feel sidelined, rather than empowered, through the process. While improving information sharing and training professionals in trauma-informed practice are important first steps, they are not enough to provide the understanding and support that victim-survivors need.

Peer-based support can empower victim-survivors to navigate this system with strength and agency. There is an unmet need in South Australia for professional, appropriately funded peer-support programs, especially for those navigating the criminal justice system.

Such programs offer a safe, understanding space for victim-survivors to share their experiences with others who have lived through similar trauma. This form of connection fosters trust and courage, enabling more meaningful engagement with legal processes.

A statewide peer-support pilot program should be funded, one that engages an experienced peer-support provider. It should target people aged 16 and over who have experienced sexual violence and are currently engaged with the criminal justice system. This program could operate both in person and online, ensuring accessibility.

Referrals should flow initially from SAPOL, the ODPP or the Commissioner for Victims' Rights. Once the anonymous reporting mechanism is established (Recommendation 51), it should also serve as a referral pathway and the program expanded to include all victim-survivors of sexual violence who are over 16 years old.

The program should be evaluated and, if proven effective, should be expanded to include all victim-survivors of domestic, family and sexual violence.

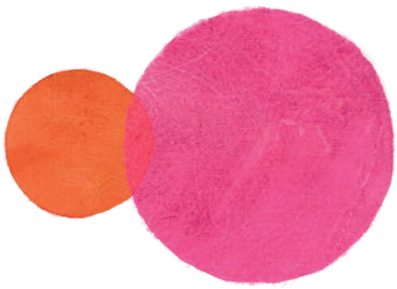
Peer-support programs are not 'witness coaching' sessions or tools for shaping evidence, they are vital therapeutic spaces.

To protect their integrity, the South Australian government should consider amendments to the Evidence Act to recognise peer support sessions as protected communications under the Act.[327]

The establishment of a government-funded peer-support program should not affect the operation of the ODPP's Witness Assistance Service and SAPOL's victim contact officers. Nor should it affect any counselling that might be available through the Victims of Crime fund or the Commissioner for Victims' Rights. Each plays a distinct, important role. Together, they form a more holistic support system for victim-survivors.

South Australia's communication partner scheme is currently failing those it was designed to help. It is rarely used, and when it is, the 'user pays' model creates barriers for the very people who need support most. This must change.

The South Australian government should fund a witness intermediary scheme for all people interacting with the justice system with complex communication needs, modelled on the ACT program. Implementation may need to be staged, with priority given to the establishment of a funded scheme for children and young people with complex communication needs and for witnesses who are an alleged victim of domestic, family or sexual violence.



Recommendation 120

The South Australian government establish and fund a pilot for a free statewide, professionally facilitated peer-support program for victim-survivors of sexual violence over the age of 16 years who are currently involved in the criminal justice system. The pilot should be:

a. run by an experienced and evaluated peer support service, independent from government
b. accessible, inclusive and culturally safe
c. evaluated, and consideration given to further expansion.

As part of the pilot, the Attorney-General consider progressing amendments to the definitions in section 67D of the *Evidence Act 1929* (SA) to include communications during peer-support sessions as 'protected communications' under the Act.

Recommendation 121

The South Australian government resource a witness intermediary scheme for people with complex communication needs that are engaged with the criminal justice system in South Australia.

Court delays

There are often delays in criminal charges being brought to trial, particularly for major indictable matters in the District or Supreme Court. It is widely acknowledged that delays have detrimental effects on victim-survivors. It is not unusual for delays to be sufficient to cause victim-survivors to disengage from the criminal justice system, resulting in a person who uses violence never having to face a trial.[328]

There are many ways in which delay may be addressed. This section of the report discusses 2 aspects of the listing of criminal trials in the District and Supreme Courts which have been brought to the Commission's attention as potential areas for reform: the Criminal Priority Programme and trials by judge alone.

Current state

The Commissioner for Victims' Rights told the Commission that '[v]ictim-survivors expect timely justice yet too often experience considerable delay'. Her submission refers to one victim-survivor who described the timeframes as 'a kick in the guts' and her sole reason for requesting a discontinuance. Another, after having a second trial date vacated and relisted a year later, expressed her frustration and said that she did everything required of her but the system in no way supported her. Another victim-survivor was distraught at having to wait 12 months for her matter to be adjudicated only to be told it was to be withdrawn. The Commissioner for Victim Rights explained that delay often features in reports as a major issue for victim-survivors that causes them to lose confidence in the criminal justice system and to 'suffer a secondary injury'. Delay often means that victim-survivors are unable to move forward with their lives, and may delay access to compensation and treatment.[329]

The CAA has acknowledged the delay in trial listings, and the 'negative impacts on alleged victims, particularly when matters involve physical or sexual assault'.[330]

Priority trials and the Criminal Priority Programme

In an effort to shorten delays, the District Court has run a pilot priority program for trials of certain offences involving domestic, family or sexual violence. Initially the pilot involved the listing of pre-trial special hearings for trials of sexual offences where the victim-survivor was a child or a person with a cognitive disability, within 2 to 3 months of arraignment.[331] After review, the pilot now aims to:

- list trials for all sexual offences where the victim-survivor is a child or a person with a cognitive disability[332] within 3 to 4 months of arraignment
- list pre-trial special hearings for all other eligible matters within 3 to 4 months of arraignment. Eligible matters include (among others) those which involve a 'serious offence against the person' (defined to include offences such as attempted murder, stalking, causing serious harm, threats to kill and sexual offences) where the witness is a young child or a person with a cognitive disability, an alleged victim of a child sexual offence or an alleged victim of domestic abuse (as defined in South Australia's *Intervention Orders (Prevention of Abuse) Act 2009*).[333]

This version of the Criminal Priority Programme has been operating since 20 November 2023. The programme was evaluated after having operated in its current form for over 12 months.[334] The evaluation report concludes that the 4-month listing window 'is not merely aspirational but realistic and achievable'.[335] The report acknowledges the benefit of listing the majority of priority matters for trial rather than pre-trial special hearing, given recent and emerging research which raises concerns about, and some 'unintended consequences' of the widespread use of, pre-recorded evidence.[336] It concludes that pre-trial special hearings can and should be used in conjunction with priority listing practices as part of the priority programme.[337]

Trials by judge alone

In Australia, a person charged with a serious criminal offence has a right to a trial by a jury. However, in South Australia, in a trial in the Supreme or District Court for a major indictable criminal offence, an accused person may elect to be tried by a judge sitting alone.[338] While the specific provisions vary, judge-alone trials are also permitted in New South Wales, Western Australia, Queensland and the Australian Capital Territory.[339] In some jurisdictions, certain offences are excluded from being eligible for trial by judge alone.[340] Victoria, Tasmania, the Northern Territory and the Commonwealth do not have legislation which permits any trials to proceed by a judge sitting alone.

In practice, a trial before a judge sitting alone will proceed in much the same way as a trial with a jury, except that a judge sitting alone does not have to deliver a summing-up directing the jury at the end of the trial. Perhaps most significantly, a jury will return a verdict immediately after the trial, with no reasons given. A judge sitting alone must publish a verdict with reasons for their decision, which can occur some time after the evidence has been heard.

There is often more flexibility in a judge-alone trial; for example, in sitting hours or the order of witnesses. However, the Commission has been told that the time taken for a judge to write their verdict commonly results in the trial taking longer to finalise than a jury trial, which leads to further delay. The Commission has also heard that judge-alone trials are common, particularly for those involving sexual offences, and that they have some impact on the capacity of the system due to judges requiring time out of court for verdict writing. The Commission understands that applications for judge-alone trials are often filed later than contemplated by the court rules, which has further implications for scheduling and resource planning.

Comparisons between judge-alone and jury trials were considered in a 2024 study by the New South Wales Bureau of Crime Statistics and Research, which aimed to estimate the association between judge-alone trials and the probability of an acquittal, trial length and sentence severity.[341] The study found that judge-alone trials involving offences that were more likely to have prejudicial and complex elements were, on average, associated with a decrease of 2 days in trial length. Results in the analysis of trial length for 'all offences' and for 'violent offences' were not statistically significant.[342] The study also noted that while 'in-court time' might be saved, judge-alone trials place 'significant burden on individual judges, particularly through the requirement to write verdicts and the pressures of a potential appeal'.[343]

Future state

Delays in legal proceedings can deepen a victim-survivor's experience of trauma. For victim-survivors of domestic, family and sexual violence, prolonged uncertainty and stalled justice can lead to retraumatisation, emotional distress, and disengagement from the justice process altogether.

Many of these delays are systemic. Under-resourced courts, outdated infrastructure, staffing shortages and procedural blockages all contribute to trial postponements.

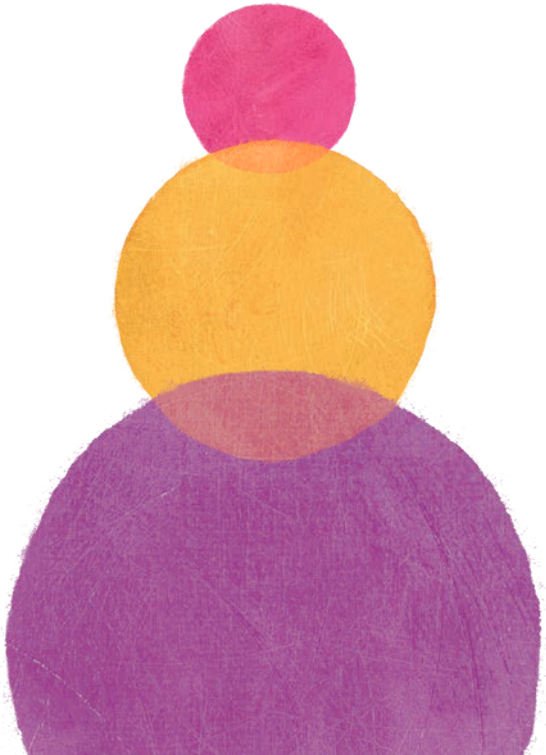
Timely trial listings are not only about court efficiency and respecting the victim-survivor's time, they are a measure of respect for the victim-survivor's wellbeing. Prompt hearings reduce the psychological toll of unresolved trauma, while also supporting witness reliability and long-term engagement.

The Criminal Priority Programme has already shown promising results in achieving faster trial dates. The Commission has heard that the CAA and District Court are open to continuing and expanding this program.

The Commission recommends that the CAA, SAPOL, ODPP, Forensic Science SA and the Legal Services Commission collaborate on a joint budget submission for the expansion of the Criminal Priority Programme to include all major indictable domestic, family and sexual violence trials, as well as the costs associated with the inclusion of coercive control offence trials.

Introducing restrictions to eligibility for judge-alone trials, or enforcing rules around the timeframe for electing to be tried by judge alone, may create a slight capacity in relation to court listings and potentially reduce delays. Consultation on such a change should be informed by research on the impact of judge-alone trials in South Australia on victim-survivor experiences; timeframes between arraignment and trial, verdict and sentence; and comparisons in outcomes for defendants between judge-alone and jury trials. Research should also take into account the way in which the election for a judge-alone trial operates in other jurisdictions. The approach taken by the New South Wales Bureau of Crime Statistics and Research in the 2024 report is an appropriate model.

A future-focused justice system must be responsive, respectful and trauma informed. Expanding successful programs like the Criminal Priority Programme and pursuing practical reform in trial procedures are essential steps toward faster justice.



Recommendation 122

The Courts Administration Authority collaborate with South Australia Police, the Office of the Director of Public Prosecutions, Forensic Science SA and the Legal Services Commission (and any other relevant agency) to:

a. develop a joint budget bid for the expansion of the Criminal Priority Programme to include all domestic, family and sexual violence major indictable trials, and

b. include identification of the costs associated with including trials for the proposed new coercive control offences within the pilot's expansion.

Recommendation 123

The South Australian government commission research similar to that conducted by the New South Wales Bureau of Crime Statistics and Research, and consider how eligibility for and limitations around judge-alone trials operate in other jurisdictions, with a view to assessing whether amendments to the current South Australian approach should be made.

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327 The definition of 'therapeutic context' could be extended to include these sessions. This would be appropriate given the recommendation that a professional counsellor, psychologist or therapist be present at peer support sessions. Such an amendment would prevent the communications from being disclosed in criminal proceedings unless the court gave permission or the evidence fit within certain limited exceptions (ss 67D-67F *Evidence Act 1929* (SA)).

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Chapter 7

Prevention

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Statewide domestic, family and sexual violence strategy

Introduction

Throughout its work, the Commission has consistently heard the same message: we must develop and implement bold, systemic solutions to prevent domestic, family and sexual violence. There is an urgent and compelling call for action.

The National Plan sets a clear ambition to end gender-based violence in a single generation.[1] The Commission supports this ambition. Achieving this goal demands more than good intentions. It requires prevention efforts that are well-funded, targeted and effective – harnessing the many levers already available within our systems. These levers, and how we use them, are the focus of this chapter.

Primary prevention is the engine of long-term change. Such efforts focus on stopping violence before it starts, by addressing the social, cultural and structural drivers that allow it to exist. As outlined in Our Watch's Change the Story, primary prevention must be a whole-of-society effort to

> **influence laws, policies, and the practices and behaviours of organisations, groups and individuals. It seeks to engage and reach people of all ages in all the places they live, work, learn, socialise and play.**[2]

Primary prevention is a critical part of the National Plan's vision, and its effectiveness depends on integrated, coordinated action across every level of society. The National Plan makes it clear: lasting prevention requires a united effort that builds momentum through mutually reinforcing actions across governments, organisations, communities, families and relationships:

> **Effective prevention requires integrated and cohesive work that builds mutually reinforcing action at all levels.**[3]

This whole-of-society approach must be broad and bold. It should include initiatives across multiple settings (workplaces, schools, sports, media and tertiary education), comprising actions to support workforce development, build the evidence base, and establish governance arrangements and coordination mechanisms. Every sector has a role to play in shifting the attitudes, norms and systems that allow violence to occur.

Prevention must also be community led and culturally safe. The Aboriginal and Torres Strait Islander Action Plan 2023–2025, which sits under the National Plan, underscores the voices of First Nations experts. Their message is clear:

> **the solutions to family violence lie in culturally appropriate strategies that support safety and healing and prevention, and accountability of offenders.**[4]

At the national level, the focus has rightly been on preventing gender-based violence. Both the National Plan and Change the Story place violence against women at the centre.

Women are significantly more likely to experience intimate partner and sexual violence than men. There is ample international and national evidence on what drives violence against women. Change the Story: A Shared Framework for the Prevention of Violence Against Women highlights that these drivers include rigid gender stereotyping and gender inequality; condoning violence against women; men's control of decision-making and limits to women's independence in public and private life; male peer relations; and cultures of masculinity that emphasise aggression, dominance and control. In addition, Change the Story points to the influence of numerous factors other than



the gendered drivers, including intersecting forms of discrimination, exposure to violence, neighbourhood-level poverty, natural disasters and crises, alcohol consumption, heavy gambling and pornography. It states that approaches to address all these factors can make an important contribution to overall prevention goals.

Effective prevention work requires a holistic, multi-layered, coordinated and long-term approach; sustained investment in prevention and prevention infrastructure; and governments playing a critical role in establishing the foundation for prevention.

In alignment with its Terms of Reference, this chapter sets out the Commission's proposals to embed a prevention focus throughout South Australia to address all forms of domestic, family and sexual violence.

Prevention is about shifting gender norms and tackling the antisocial behaviours, harmful attitudes and structural conditions that allow violence against women, and all forms of domestic, family and sexual violence, to take root and persist. Whether in workplaces, schools, communities or homes, these underlining conditions create environments where violence is tolerated, minimised or ignored.

This broader approach is reflected in the Rapid Review and the Domestic, Family and Sexual Violence Commission's first Yearly Report to Parliament, which both highlight the importance of coordinated, whole-of-community strategies to prevent violence in all its forms, by addressing the culture and conditions that sustain it.[5]

The Domestic, Family and Sexual Violence Commissioner, Micaela Cronin, in the Foreword to the Yearly Report said:

> **"We are witnessing the first generation to grow up exposed to violent pornography and misogyny online in a way that has never been seen before. Participants at the crisis talks convened by the Commission in May raised the importance of acknowledging the role of factors such as alcohol and other drugs, gambling, and pornography in promoting violence. While these factors do not in themselves cause violence, there is strong evidence that they contribute to reducing inhibition and result in more serious violence. There are now calls to have serious, evidence-based discussions about the role these factors have on violence and what levers the government can use to mitigate them. We must diligently reassess our approaches to prevention and response to ensure they are effective and adapting to the changing world around us.**[6]

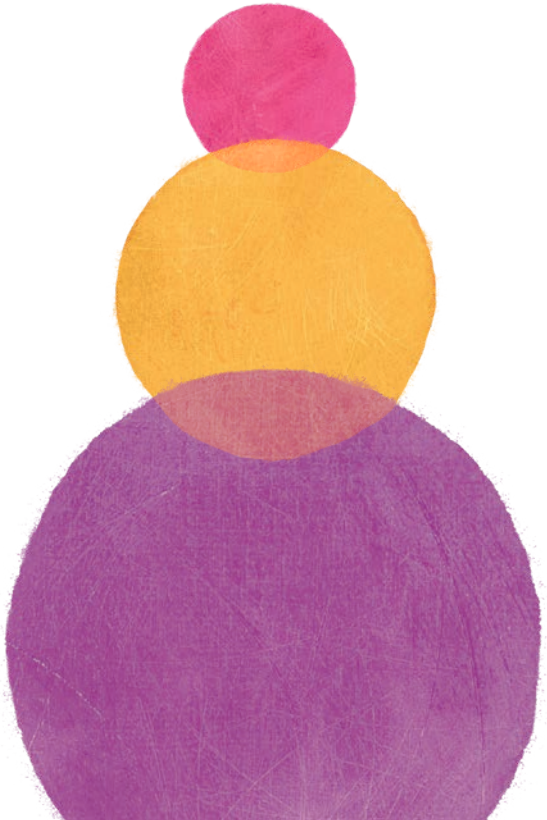
Commissioner Cronin gave evidence at Day 10 of public hearings and highlighted the importance of viewing prevention, early intervention, response, and recovery and healing as interconnected and complementary, rather than separate domains.

Drawing on her frontline experience, she noted that services on the ground often work across all 4 areas simultaneously. From this perspective, a more integrated approach to policy and funding – one that reflects the way these domains intersect in practice – could lead to better outcomes for individuals and communities.

The current approach in South Australia is similarly structured in an attempt to adhere to the 4 separate domains, but with the additional criticism of funding being predominantly applied to crisis only (and insufficiently at that). The Commission received many calls for the development of well-resourced evidence-based prevention and early intervention programs, including specific and targeted initiatives for particular communities. Submissions from domestic, family and sexual violence service providers also advocated for more structure, governance and coordination of prevention efforts in South Australia, together with a broadening of prevention approaches.

The Commission considers that primary prevention approaches are a necessary and critical part of the domestic, family and sexual violence systems. Primary prevention approaches also perform a dual role of creating opportunities for early intervention, response, and recovery and healing. While these aspects are distinct, they do complement and reinforce each other. Prevention is an 'upstream' approach, designed to prevent people from falling into the 'river' of violence, while the 'downstream' approach includes intervention and crisis response, which aim to pull people out of the water and keep people afloat.

This chapter focuses on 4 key prevention levers identified by the Commission throughout its inquiry: education in schools, community activism, stronger regulation of risk factors and strengthening South Australia's anti-discrimination and anti-vilification frameworks.



The call to action

Every South Australian has a role to play in preventing domestic, family and sexual violence. But individual responsibility alone is not enough. Governments, independent regulators, and both the non-government and private sectors carry a duty to lead systemic change. Ending violence will take collective responsibility and bold, coordinated action at every level of society.

A powerful foundation for change lies in how we educate our children and young people. Teaching respect, equality, consent, critical thinking and digital literacy can challenge harmful norms and equip future generations to reject violence in all its forms. Education is not just essential – it is transformative.

At the same time, we must strengthen public understanding of domestic, family and sexual violence, reinforcing that these behaviours are never acceptable, and that respect and equality must extend to all people. Domestic, family and sexual violence services play an important role in strengthening public understanding. The sector faces challenges in capability development, particularly in specialist prevention roles. Finding ways to build shared knowledge and foster a collective commitment to evidence-based, outcomes-focused prevention work is vital.

It is equally important that Members of Parliament lead by example, consistently role modelling respectful behaviours. Leadership sends a powerful message – that there is zero tolerance for violence in any form, and that respect and accountability must guide both public and private conduct.

Governments must use the powerful leavers they have to advance gender equality and fund prevention programs. Strong, proactive regulation is long overdue. South Australia must also address the risk factors that contribute to violence – including alcohol, gambling, pornography and harmful online content – with modern, evidence-based regulation.

Also urgently needed is a comprehensive review of South Australia's anti-discrimination and anti-vilification laws. These frameworks must be equipped to respond to – and prevent – the discrimination, hate and inequality that create the social conditions in which violence thrives.

Locally led prevention efforts, combined with national and international evidence, will form the backbone of South Australia's approach to ending violence before it starts. This must be informed by Australian and international prevention frameworks including the frameworks relating to gender-based violence developed by Our Watch.

Prevention through education systems

While children and young people, along with their educators, cannot be asked to carry most of the burden of preventing domestic, family and sexual violence in South Australia, there are clear opportunities within the education system to deliver primary prevention interventions.

> **The topic should be addressed from early on, as part of curriculum in schools. Education should be provided on what healthy relationships look like, what those that don't look like, and what to do if you think your loved one/you are in a dangerous situation and what can be done about it... I believe this will have a positive impact towards reducing family and domestic violence and assist generations of parents that teach their children (regardless of gender) that all people should be treated equally, that there should be no power imbalance in relationships, and that it's safe and ok to speak up and move on from a relationship that is unsafe.**[7]

> **Along with that I think we should be teaching children how to identify emotional and to understand what their feeling. Some children can't explain how they feel they're in danger or being harmed because they can't identify the emotions they're feeling, yet they may be showing symptoms of abuse without understanding the reasons behind it, so when questioned about their emotions, they can't put two and two together and neither can the person doing the questioning because they need to rely on what the child said even if the symptoms don't correlate.**[8]

The opportunity to embed primary prevention in schools was recognised by the Victorian Royal Commission into Family Violence, which recommended the mandated introduction of respectful relationships education into every government school in Victoria from prep to Year 12.[9]

Since that time, the Australian Curriculum has been updated to include the explicit teaching of consent, and the Australian and state and territory governments have signed a federal funding agreement to support delivery of consent and respectful relationships education across government and non-government primary and secondary schools until 2028. In addition, the South Australian Department for Education's Keeping Safe: Child Protection Curriculum (the KS:CPC) has included content regarding respectful relationships and domestic and family violence from its inception in 2008, and has been reviewed and strengthened in more recent times.

Despite these developments in relationships and sexuality education (RSE) content and delivery, the Commission has heard that young Australians are experiencing declining sexual health outcomes and increasing use of intimate partner violence (including sexual violence).[10]

At Day 3 of public hearings, Dr Tessa Opie told the Commission that:

> **despite our very best efforts to be providing young people with very targeted and evidence-based … relationships and sexuality education, we are seeing declining sexual health outcomes for our young Australians, so we are seeing increases in STIs, we are seeing decreases in consistent and effective condom use. We are seeing increases in negative sexual experiences, unwanted sex and sexual assault amongst our high school students. And we are also working with young people who are, I guess, experience new and ever-evolving forms of image-based sexual abuse, including AI-generated synthetic child exploitation material.**[11]

There is a clear authorising environment to deliver RSE within government and non-government schools.[12] However, critical gaps remain.

At the national level, there is still no standalone RSE curriculum that ensures consistent, age-appropriate learning – nor clear pathways for training and deploying specialist educators to deliver this content effectively.

At the state level, delivery remains uneven across the 3 schooling sectors. Key elements are missing, including a consistent implementation framework, clear guidance on parental consent, and robust, best-practice responses for when students disclose concerns or experiences of domestic, family or sexual violence.

Best practice holistic RSE should expand to other aspects of the schooling environment, including the 6 elements identified in Our Watch's publication Respectful relationships education: A blueprint for preventing gender-based violence through education systems.

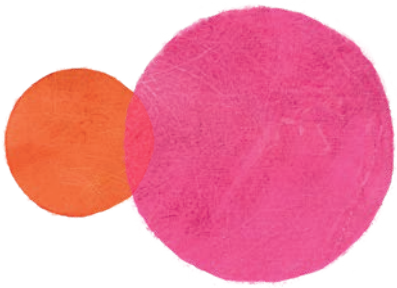
Without these foundational elements, schools are left without the tools, training or consistency needed to deliver RSE safely and effectively – and to play their vital role in prevention and early intervention.

Current state

The school system in South Australia (and in all other Australian jurisdictions) consists of 3 schooling sectors: public, Catholic and independent. Public and Catholic schools run under a 'system' basis whereby the Department for Education (for public schools) and Catholic Education South Australia (CESA) (for Catholic schools) govern, for the most part, the way in which the schools within those systems operate.

In contrast, independent schools operate as entirely independent organisations. While membership is optional, all South Australian independent schools are members of the Association of Independent Schools of South Australia (AISSA), which represents the interests of independent schools but does not govern or direct the way in which these schools operate.[13]

RSE is delivered within all 3 schooling sectors and includes the topics and approaches variously described as sex education, consent education, sexuality education and respectful relationships education.



Relationships and sexuality education curricula

The Australian Curriculum is taught in all South Australian schools regardless of sector. This is a requirement of registration under the *Education and Early Childhood Services (Registration and Standards) Act 2011* (SA) (Education Registration and Standards Act). Health and physical education curricula for students from kindergarten to Year 10 outline key principles about relationships, emotional wellbeing and sexuality.[14] The inclusion of the explicit teaching of consent was a recent addition, following a national campaign led by Teach Us Consent.[15]

Criticisms about the current approach to relationship and sexuality content under the Australian Curriculum include that it remains embedded within the health and physical education curriculum rather than being established as a standalone national curriculum. The Commission was told that a standalone national RSE curriculum would allow for the additional inclusion of relevant topics such as digital literacy (including the issues canvassed in Chapter 3), the teaching of relevant skills such as self-regulation and critical thinking, and delivery by specialist RSE teachers rather than health and physical education teachers or external providers.[16]

The ongoing distinction between 'sex education', 'consent education' and 'respectful relationships education' is unhelpful. Children and young people do not experience their relationships within these silos.

During Day 3 of public hearings, the Commission was told that some teachers delivering the Australian Curriculum may not 'have the confidence to be able to deliver [the relationship and sexuality content in the Australian Curriculum] in a meaningful, contextualised, most up-to-date way'.[17] The Commission heard that it was for this reason that some schools engaged external providers. These practices stand in contrast to the evidence the Commission received on best-practice approaches, namely that safe and trauma-informed delivery will best occur through the use of a specialist classroom teacher, with delivery 'complemented by collaboration with community-based services and … external sexual health specialists as well'.[18]

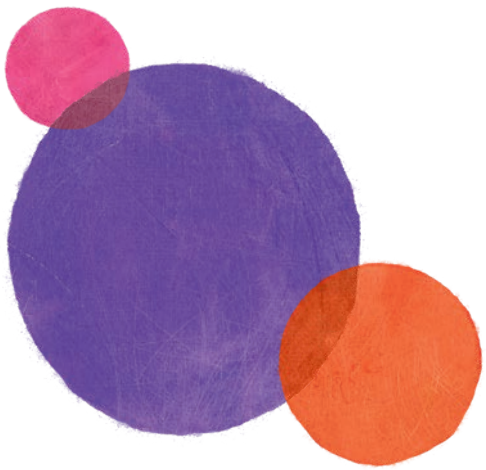
The Commission has been advised of a process underway within the South Australian Department for Education to develop the South Australian Curriculum for Public Education, which is an adaptation of the Australian Curriculum Version 9 for South Australian public schools. The information provided to the Commission about this adaptation indicates an alignment with many of the issues canvassed during Day 3 of public hearings, being the need to equip students with skills as well as knowledge. The intention to add qualities such as empathy, resilience, self-regulation and critical thinking to the adapted curriculum is a nation-leading model, and the Commission is of the view that it should continue to be pursued. It is these qualities that will allow students to develop and maintain respectful and safe relationships (both peer and intimate partner relationships), and to navigate an increasingly complex and potentially harmful online environment.

A second curriculum relevant to RSE in South Australia is the KS:CPC. The KS:CPC is described as a child safety and respectful relationships curriculum providing age and developmentally appropriate strategies for children and young people.[19] It includes specific references to domestic and family violence within its content, together with other forms of abuse, bullying, harassment and discrimination, online safety and consent.

The KS:CPC is mandated across all public schools (primary and secondary) and applies from early education to Year 12.[20] It is delivered by teachers who have completed training delivered by the South Australian Department for Education.[21] The Commission also heard about the program and its delivery having been adapted to local and community contexts such as the way in which the KS:CPC is delivered to Fregon Anangu School students by the Kungka Ninti team.[22]

Within the Catholic system, the KS:CPC is delivered as part of the Catholic system's 'Made in the Image of God' curriculum, which is delivered in all Catholic schools and similarly applied from early education to Year 12.[23] Across independent schools, the Commission has been advised that AISSA endorses the KS:CPC and provides its member schools a licence to access it. Access is dependent on staff first having to undertake the Department for Education training. Records indicate that over 1,400 member staff have accessed the curriculum portal, but AISSA has no way of determining how many schools deliver the program or how many current teachers at independent schools are trained in delivery.[24]

Finally, the Commission has heard from many of the different external providers of RSE content and programs who are engaged by schools across all 3 schooling sectors. Three of these external providers were invited to provide evidence at Day 3 of public hearings: In Your Skin, SHINE SA and Power Community.



Relationships and sexuality education exemptions

The ability for a parent or guardian to stop their child from undertaking RSE is an important consideration. The legal framework is set out in the *Education and Children's Services Act 2019* (SA) and the *Education and Children's Services Regulations 2020* (SA).

Section 141(2) of the Education and Children's Services Act states that the Education and Children's Services Regulations may provide for the exemption of a person or body, or a class of persons or bodies, from the operation of a specified provision or provisions of the Education and Children's Services Act. Regulation 33 of the Education and Children's Services Regulations provides that:

(1) Pursuant to section 141(2)(a) of the Act, if a person responsible for a student enrolled at a school gives written notice to the principal of the school that the student is to be exempted from participating in specified instruction relating to sex education, or from all such instruction, the student will be taken to be exempt from participating in such instruction.

(2) However, an exemption under subregulation (1) does not apply in relation to any instruction provided as part of the Keeping Safe: Child Protection Curriculum, or a corresponding program that replaces that curriculum.

Regulation 33 only applies to the public system. In practice, this means that:

- in the public system, a parent or guardian may exempt their child from participating in sex education within the Australian Curriculum or any external sex education programs at the school, but cannot exempt their child from participating in the KS:CPC
- in the Catholic and independent sectors, parental consent is not a legal requirement for the delivery of sex education (or any curricula) to any student. The issue of whether a parent or guardian can request that their child not participate in sex education is therefore a matter of policy for each individual school.

The Commission sought further information from the South Australian Department for Education about how public schools managed requests for exemptions under regulation 33. The Department for Education advised that the process is largely driven by policies set at individual school level and that there is no collection of system-wide data about the number of exemptions from specific instruction relating to sex education being requested.

In the Catholic system, the Commission was advised that:

> one of the basic tenants of Catholic education is that parents are the first educators of their children, and so parents have the right and they are supported in that if they wish to remove their children from particular classes or [a] particular program.[25]

It is the Commission's understanding that this approach allows a parent or guardian to request that their child not participate in all aspects of the Made in the Image of God program, including those aspects aligned with the KS:CPC.

In the independent sector there is no system-wide approach to the way in which independent schools operate. The Commission has therefore assumed that individual schools develop their own policies to address the issue of RSE exemptions.

The Commission has heard that the majority of parents and carers support the delivery of RSE education in schools.[26] A recent study of 2,427 parents (surveyed in 2021) from across Australia, within different school sectors, with diverse religious affiliations and voting preferences, showed that 89.9% of parents supported schools to deliver RSE.[27]

Relevant to this issue are the laws regarding the age of capacity and consent. The laws regarding parental consent in the context of medical treatment were set out in Chapter 6. This codification of the laws relating to parental consent and child capacity does not have any application to education settings, meaning it is highly likely policies about parental consent and the ability for students to make choices in their own right are set at school or system level.

Also relevant is the age of consent to sexual intercourse in South Australia. Under the Criminal Law Consolidation Act, the age of consent is 17 years old. However, it is not a criminal offence for people who are 16 years old to engage in sexual intercourse with each other.[28]

The regulatory environment

The Education Registration and Standards Act regulates the delivery of schooling in South Australia. The objects and principles of the Education Registration and Standards Act include recognising that all children should have access to high-quality education facilities and services that support, promote and contribute to their health, safety and wellbeing.[29] The Commission considers that access to comprehensive RSE is a key part of supporting, promoting and contributing to the wellbeing of South Australian children and young people.

All schools in South Australia are required to be registered on the 'schools register' maintained by the Education Standards Board.[30] Pursuant to section 43 of the Education Registration and Standards Act, the Board determines the standards a school must satisfy to be eligible for registration.[31] These standards, named the Standards for Registration and Review of Registration of Schools in South Australia (Standards) are supplemented by the Evidence Guide to using the Standards for Registration and Review of Registration of Schools in South Australia for Registration of New or Changed Schools (Evidence Guide). The Evidence Guide is intended to assist schools with providing evidence to demonstrate that they have met the Standards.[32]

As noted above, the delivery of the Australian Curriculum is mandated across all schooling sectors.[33] The delivery of the KS:CPC is not mandated or mentioned in the Standards or Evidence Guide. There is also no reference to the role of parental or guardian consent in the context of a student's access to the Australian Curriculum or any other curricula in the Standards or the Evidence Guide.

The views of children and young people

The Commission received input from children and young people on the current state of RSE during the Commission's student summit and through the Silence and Inaction Report. The Commission also received written submissions which spoke to the importance of RSE, and in one instance, the way in which a parent's decision to opt their child out of RSE meant that the child did not have the information they later needed to recognise domestic, family and sexual violence.[34]

The Student Summit Report identified the following needs:

> **Strategies towards teaching kids about social media and its dangers, better education and more regulation.**

> **The education around sexual violence needs to be in place from year seven... Need to make sure teachers are educating in contemporary and relevant ways.** [35]

The Silence and Inaction Report provided the following insights into children and young people's views of the current state of RSE delivery:

> **During the interviews, young people were asked whether they had received education/ information at school about domestic, family, and sexual violence – most could not recall learning anything in this space, nor having any content presented to them on this topic.**[36]

Some of the quotes from the children and young people interviewed for the Silence and Inaction Report show a significant difference between their experience of RSE and the education system's beliefs about the comprehensive way RSE is currently provided.

> **We had one class about respectful relationships, but no one really paid attention. It felt like just another lesson, not something real.**

> **They didn't talk enough about the deeper stuff.**

> **I wish they had taught us more about emotional abuse in school, not just physical violence.**



This is consistent with the Commissioner for Children and Young People's 2021 report titled *Sex Education in South Australia,* which found that:

- RSE that is inadequate, non-inclusive and inconsistent leaves young people exposed to risk in their intimate relationships
- RSE needs to be delivered across all year levels and regularly evaluated and updated
- RSE should be co-designed with young people and involve them in advising on relevance of content and improving delivery at a system and classroom level
- RSE should be embedded as a fundamental child right in line with international best practice, and the ability for parents/carers to exempt a student from RSE should be removed.[38]

In the words of one of the young people who contributed to the Commissioner for Children and Young People's report:

> **"Standardised, comprehensive and 100 percent honest sex education in South Australia is needed yesterday.**

Given that statement was made in 2021, it is highly likely this call to action is even more urgent today.

Future state

As has been the case in other systems considered by the Commission, the delivery of RSE is fragmented. Schools and teachers are delivering both the Australian Curriculum and the KS:CPC, while also considering whether to engage external providers to deliver particular aspects of RSE to their students.

There is a clear opportunity for Education Ministers to task the Australian Curriculum, Assessment and Reporting Authority (ACARA) with developing a standalone national RSE curriculum. This should be through a comprehensive co-design process with children and young people across all schooling sectors and must include Aboriginal children and young people, children and young people from CALD communities, LGBTQIA+ children and young people, and children and young people with disability. Co-design is needed because an RSE curriculum must be capable of speaking to the ways in which children and young people experience their world, which can be fundamentally different to the ways in which adults experience it. The Commission understands that co-design may not currently be a feature of ACARA's approach to curriculum development, and notes that Education Ministers will need to turn their minds to the resourcing and support ACARA will require to successfully implement a safe and authentic co-design approach.

The Commission consistently heard that teachers are best placed to deliver RSE with help from external specialists because they know their students best. However, the Commission also heard that teacher motivation, comfort and skill level is one of the factors affecting the impact of RSE.[39] The implementation of a national standalone RSE curriculum should include the identification of pathways to allow for specialist RSE teachers to work within school systems.

In the meantime, there is an opportunity to use the South Australian school's regulator as a mechanism to develop and implement nation-leading and best-practice models for the delivery of RSE in all South Australian schools.

The Education Standards Board, as the regulator for all education services across South Australia,[40] has the levers that are required to drive change in the short to medium term. The use of these levers to develop and promote best-practice models for the delivery of RSE is consistent with the objects and principles of the Education Registration and Standards Act, namely:

- recognising that all children should have access to education services that support, promote and contribute to their health, safety and wellbeing[41]
- recognising that all children should have access to appropriate curriculum to maximise their learning and development potential[42]
- that the welfare and best interests of children is the primary consideration in the performance of the Board's functions.[43]

The Commission considers that the work program for the Education Standards Board should include the following elements:

- amending the Standards and/or Evidence Guide to mandate delivery in all South Australian schools of RSE content included in the KS:CPC but not covered in the Australian Curriculum[44]
- undertaking a co-design process with children and young people from all 3 schooling sectors to develop a RSE parental consent framework to be promoted across all 3 schooling sectors.

The Commission also received input which highlighted the importance of ensuring that schools have a trauma-informed framework for responding to disclosures of domestic, family and sexual violence (including disclosures about intimate partner and sexual violence perpetrated by students).



> **"I cannot emphasise enough the damage that the initial response of the school caused her, damaging her ability to heal and recover in a profound way. My daughter saw her school as her village, making a statement when she eventually accepted it wasn't working for her to stay at the school. The school were unwilling to investigate or address her sexual violence to reassure her that she could feel safe at school, she felt the risk was high despite the perpetrator having left, and there was no framework for us to support her to feel safe.**[45]

The work program for the Education Standards Board should also include the development of a best-practice framework for schools when responding to disclosures by students of domestic, family and sexual violence.

The Commission notes that the program of work set out above well exceeds the Education Standard Board's current resourcing capacity. The South Australian government should resource the Education Standards Board to undertake this work.

Finally, the Commission urges the South Australian Minister for Education to further consider the issue of RSE exemptions by appointing a Ministerial Advisory Committee under section 11 of the Education and Children's Services Act to advise the Minister on potential reforms to the legal framework operating under section 141(2) of the Education and Children's Services Act and regulation 33(1) of the Education and Children's Services Regulations, together with addressing the lack of any legal framework operating in relation to RSE exemptions in Catholic and independent schools.

Membership of the Ministerial Advisory Committee should include a majority of young people and representation from the South Australian Department for Education and the peak bodies prescribed under regulation 8 of the *Education and Early Childhood Services (Registration and Standards) Regulations 2011* (SA). Membership should also include RSE educators or consultants with demonstrable experience in delivering RSE to children and young people across all 3 schooling sectors.

Recommendation 124

The Minister for Education, Training and Skills advocate for the national Education Ministers Meeting to task the Australian Curriculum, Assessment and Reporting Authority with developing a standalone national relationships and sexuality education curriculum via a co-design process with children and young people.

Recommendation 125

The South Australian government resource the Education Standards Board to undertake the following work program:

a. amending the Standards and/or Evidence Guide to mandate delivery in all South Australian schools of relationships and sexuality education content included in the Keeping Safe: Child Protection Curriculum but not covered in the Australian Curriculum

b. undertaking a co-design process with children and young people from all 3 schooling sectors to develop a relationships and sexuality education exemption model to be promoted across all 3 schooling sectors, with specific attention to:

    i. the types of information to be provided to parents/guardians and students about relationships and sexuality education

    ii. the age at which an exemption process should no longer apply (and in this regard, taking particular account of the age of consent to sexual activity)

    iii. the inclusion of a requirement for schools and/or systems to provide the Education Standards Board with data on the number of students who are opted out of receiving relationships and sexuality education

c. developing a best-practice response to disclosures of domestic, family and sexual violence framework for schools, taking into account existing laws and reporting obligations and:

    i. interaction and alignment with the South Australian Risk Assessment and Management Framework and the central entry-point service (see Recommendations 14 and 46)

    ii. information sharing between schools/systems, and information sharing with other jurisdictions.

Recommendation 126

The Minister for Education, Training and Skills appoint a Ministerial Advisory Committee to advise the Minister on potential reforms to the legal framework operating under section 141(2) of the *Education and Children's Services Act 2019* (SA) and regulation 33(1) of the *Education and Children's Services Regulations 2020* (SA), together with addressing the lack of any legal framework operating in relation to relationships and sexuality education exemptions in Catholic and independent schools.

Prevention through a whole-of-community approach



As already discussed, prevention efforts should not be solely the domain of state government or specialist domestic family and sexual violence services. Everyone has a role to play, including local government, community and volunteer organisations, and individuals.

Statewide and local education and awareness campaigns, as explored in Chapter 3, are important. They create recognition of the problem and the types of behaviours or red flags that people should be aware of. What they do not address, however, is the cultural change that is needed within communities. This is because, by necessity, such campaigns are generally broad in nature, content and time. Such campaigns do not allow for focused and ongoing prevention efforts that meet the needs of particular communities and reinforce messaging about domestic, family and sexual violence in a cohesive and sustained way.

The Commission has received submissions from many different community organisations and volunteer groups established throughout South Australia which highlight the excellent work these largely volunteer-run organisations are engaging in, such as programs in schools, walks for respect, bystander training and community education. For example:

> **“ In 2011 we developed a project call Expect Respect in consultation with Mt Barker Police Crime Prevention Unit. We have presented the Expect Respect program for 13 years working with primary schools in our local area to promote skills and understanding around what healthy relationships are and how to develop them.[47]**

> **A Coercive Control workshop for 40 service providers was held in June 2024 and we also participated in community markets at Mawson Lakes, Ingle Farm and Tea Tree Gully where we had many conversations with people who directly experienced domestic violence or supported those who did.**[48]

> **ARA has been implementing a peer-led awareness and education project with refugee communities to prevent family, domestic, and sexual violence called "Community for Changes" for five years now. Under this project, community educators are recruited, trained, and provided mentoring by ARA to organize and co-deliver workshops with their communities through a co-design approach.**[49]

> **The Uti Kulintjaku Watiku Project is an Anangu led, strengths-based initiative that brings together a team of 15 respected senior and younger Anangu men to learn from each other and identify ways to strengthen Anangu identity, increase Anangu wellbeing and promote healing to prevent family violence. The project's activities include workshops for the group members, small camps and bush trips, and large intergenerational camps. The Project has developed several culturally specific, language-based resources including the award-winning book, Tjanimaku Tjukurpa. A key outcome of the Project over the last three years is the Watiku team's articulation of an Anangu approach to family violence primary prevention.**[50]

These submissions advocated for recognition of the role that community organisations and volunteer groups could play in the prevention and early intervention of domestic, family and sexual violence, including unlocking a volunteer workforce in local communities, and working alongside local governments.

> **Clubs have substantial volunteer hours to apply to an issue. Using volunteers to organise and deliver certain programs can be both economic and safe and it also models the community caring for itself.**[51]

The importance of a whole-of-community approach to the prevention of domestic, family and sexual violence was also highlighted by many local councils in listening sessions and written submissions.

> **As the level of government closest to our communities, we recognise the damaging impact domestic and family violence has on individuals and our communities. Recognising local government's role to create and maintain healthy, vibrant, inclusive and safe communities, councils in South Australia will seek opportunities to work in partnership with each other and collaborate with specialist non-government organisations and agencies from other levels of government to raise awareness, facilitate, advocate and provide information to support victims of domestic violence.**[52]

The Local Government Association of South Australia made several recommendations about community-based local responses, including the need for the development of methods to monitor and evaluate their effectiveness, the need for sustained and formalised partnership models and initiatives to bring about change, and the need for funding for grassroots organisations to work with their local councils to deliver primary prevention work within their communities.[53]

The importance of community activism is one of the 8 connected levers for change underpinning Thriving Families SA 2025–2045 (Thriving Families SA), a system change initiative that recognises there is no single agency or sector solely responsible for child and family wellbeing.[54] The lever recognises the need to:

> **[c]hange our collective narrative and ways of working to empower communities in active participation, mobilisation and social capital. This means leading and supporting public discourse with communities about child and family wellbeing and shifting narratives from a focus on risk and harm to celebration of positive change and outcomes. Additionally, we need investment in the development and growth of social capital in communities across the state, with place based and trust-based connections, to equip local community leaders and members to take an active role.**[55]

Our Watch's Change the Story similarly recognises the importance of community activation, identifying several promising techniques for delivering effective domestic, family and sexual violence prevention, including organisational development, community mobilisation and strengthening, and civil society advocacy and social movement activism.[56] In particular, Change the Story observes that 'prevention activities should aim to use a multitude of techniques to achieve significant and sustained change'.[57]

This is reflected in the Aboriginal and Torres Strait Islander Action Plan 2023–2025, which acknowledges the importance of place-based approaches to service delivery and enabling community empowerment through shared decision-making and strengths-based approaches that support communities to develop solutions to local issues and deliver positive outcomes using local experience and knowledge.[58]

International evidence tells a similar story – that interventions using community activism can be effective in reducing domestic, family and sexual violence through multi-year intensive community mobilisation, provided the interventions are strongly designed and implemented.[59]

There is clear support and interest at the local government and community level to establish locally led prevention initiatives that take advantage of local knowledge, partnerships, community organisations and services, and private businesses. The Commission considers that the South Australian government should capitalise on this demonstrated goodwill and enthusiasm and work in partnership with local government and the local community to develop a long-term primary prevention saturation model in South Australia.

The Commission has considered 2 saturation models that seek to work across communities to embed changes in attitudes and behaviours: the Ballarat community saturation model and Our Town in South Australia.

Current state

The Ballarat community saturation model

The Ballarat community saturation model (the Ballarat Model) is a 4-year Victorian government initiative designed to prevent gendered violence by embedding prevention strategies across all aspects of community life. It was announced in May 2024 in response to a devastating period of violence against women in Ballarat.[60]

The objective of the Ballarat Model is to ensure that prevention messages and actions are reinforced in schools, workplaces, sports clubs and other community spaces, creating a cohesive and sustained approach to cultural change. Rather than starting from scratch, the model builds on existing prevention and early intervention initiatives in Ballarat, seeking to reinforce and amplify their overall impact, as well delivering new initiatives. The model is also informed by other risk factors such as the impact of alcohol and other drugs (AOD), mental health and trauma.[61] By saturating the community with consistent messaging and interventions, the model aims to shift the attitudes and behaviours that contribute to violence.

In order to guide the design, implementation and evaluation of a saturation model for Victoria, Respect Victoria commissioned a review of Australian and international evidence. The Evidence Review: Reducing And Preventing Violence Against Women: Factors Affecting Impact, With a Focus on Multi-Component, Place-Based Approaches (the Victorian Evidence Review) concluded that:

- multi-component prevention work is more impactful than single-component interventions when certain criteria and conditions are met, including adherence to quality design principles, adequate implementation intensity, and attention to addressing multiple drivers through an international phased approach

- there is good reason to expect that impact on perpetration and victimisation of violence against women could be achieved at population level through a Victorian multi-component, place-based model
- further research and consultation are needed to determine foundational design and implementation parameters for a place-based saturation model, along with the conceptual approach and key elements that should be included in its design.[62]

Since May 2024, Respect Victoria has implemented the Ballarat Model in consultation and partnership with the Ballarat community. The Commission understands that $9.8 million in funding has been allocated for the design, implementation, monitoring and evaluation of the project over 4 years.[63]

Consultation with community members occurred during the second half of 2024, and in January 2025 expressions of interest were sought from Ballarat locals and organisations to join the co-design working group.[64] The working group, comprising people representing organisations and sectors, as well as individual community members and advocates, began its work in March 2025 in collaboration with Respect Victoria and the Australian Centre for Social Innovation. The working group is supported by community connectors who have been engaged from within the Ballarat community to support conversations with individuals and communities around Ballarat.[65] An online survey was also created for people in Ballarat to have their say on what is needed to prevent gendered violence. The survey was open until 27 July 2025.[66]

An important part of the Ballarat Model will be ensuring that the impact of all prevention actions undertaken is closely measured to determine what works and to gain a better understanding of how to prevent and respond to domestic, family and sexual violence.[67]

Our Town

An existing initiative in South Australia that supports a community-led approach to prevention is Our Town. Although this initiative is about responses to mental health challenges, it represents an example of a prevention model that combines community mobilisation and social activism to prompt longer-term sustainable shifts in regional mental health.

The Our Town concept was established by the Fay Fuller Foundation, in partnership with the Australian Centre for Social Innovation and Clear Horizon Consulting, in response to the findings of the Health Needs and Priorities in South Australia Report (the Health Needs Report).[68] The Health Needs Report found that there was:

> **“ a significant gap between the perceived provision of services from the top, and the actual accessibility of services for individuals. This gap was even more apparent in rural and regional areas. Further insights found that people living in non-metropolitan areas experienced higher rates of mental health challenges and were less likely to seek help.[69]**

The initial process to establish Our Town commenced in late 2019 with the shortlisting of 9 towns (out of 29 expressions of interest). In December 2019, 6 towns were selected to participate in the capability building phase and provided with $45,000 in unrestricted funding to undertake a year of work. At the end of 2020, 4 communities, Ceduna/Far West, Cummins, Kangaroo Island and Kimba, were fully funded ($300,000 annually per town) for 10 years. The communities of Berri and Mid Murray received seed funding ($50,000) to progress their plan and were offered support to secure additional funding. All 6 communities receive funded capability development and participate in network learning opportunities.[70]

The purpose of Our Town is to support regional communities to take control of, and design and implement, preventative mental health approaches in their community. According to the most recent periodic evaluation, key conditions supporting Our Town teams in doing their work and progressing towards their desired outcomes include:

- community embeddedness: local people whose influence extends across the community while in their roles and continues even if they step away from the team
- long-term horizon: the long-term nature of Our Town allows for meaningful community-led work, capability building, and a mindset of learning through trial and error. This is especially important in remote and regional areas where communities are often used to seeing short-term responses that are not extended
- untied funding: this provides flexibility to support community-led projects in ways that traditional funding models often don't allow, with accountability focused on shared learnings rather than meeting strict deliverables
- trust and legitimacy: Our Town teams are earning deep trust and legitimacy by consistently showing up and offering flexible, non-clinical support, making them a go-to resource for community mental wellbeing
- a mosaic of mindsets and capabilities: the development of a wide range of capabilities, such as youth engagement, advocacy and governance, supported by a set of mindsets, including Our Town principles, inclusivity, evaluative thinking, and a strengths-based, social innovation mindset.[71]

Future state

It is clear to the Commission that many organisations are conducting community-level prevention work in South Australia, for which they should be commended. What is also clear, however, is that this work is often occurring in isolation, in the absence of any backing or funding from the South Australian government, and without any framework or guidance in place to support data collection and evaluation to ascertain the effectiveness of the work at preventing domestic, family and sexual violence.

There is some acknowledgement of these limitations in the South Australian government submission:

> **South Australia does not currently have a statewide prevention strategy with underlying funding that could be used to lead a consistent approach to primary prevention. Currently primary prevention efforts are limited with no coordination of efforts. Individual programs…are finding success but cannot provide the coverage of the community needed to make a real long-term cultural shift away from the use of violence.**[72]



Although the Ballarat Model is in its infancy, it looks promising and is based on the comprehensive Victorian Evidence Review. That review concluded that the development of a saturation model, with multiple prevention interventions implemented in a coordinated way, 'would not only lead to a reduction in both drivers and incidents of violence, but that it will do so to a greater extent than stand-alone activities, and that the impact will potentially extend to the whole population within a geographically defined community or place'.[73]

The Our Town model, although aimed at empowering communities to define their own mental health solutions, is another example of a multi-year community mobilisation initiative that could be adapted to domestic, family and sexual violence prevention in South Australia. For example, Our Town integrates mental health support into schools, workplaces and community hubs. Similarly, domestic, family and sexual violence prevention could be woven into local institutions, ensuring that education support and intervention strategies are accessible in everyday settings. The inclusive approach adopted by Our Town in making sure that its prevention strategies are informed by real-world experience and tailored to diverse community needs would also be key to any domestic, family and sexual violence prevention approach, making sure that the voices of victim-survivors and those with lived experience are centred.

Our Town also fosters collaborative partnerships between local organisations, government agencies and service providers. A domestic, family and sexual violence prevention model would benefit from similar cross-sector collaboration, ensuring a response that addresses risk factors like alcohol, gambling and social isolation.

The Commission considers that a primary prevention saturation model, informed by Our Town and the Ballarat Model, offers the South Australian government an opportunity to not only embed community engagement and awareness of what is domestic, family and sexual violence and how to prevent it, but also to build an evidence base around what works at the community level in terms of preventing domestic, family and sexual violence.

A primary prevention saturation model should be piloted in 2 communities in South Australia over a 4-year period, chosen based on de-identified data input and community readiness. It should be designed in partnership with local government and the local community, including community organisations representing Aboriginal people, CALD people, children and young people, older people, LGBTQIA+ people and people with disability, with prevention initiatives to be community led.

> **"It is particularly important to recognise that prevention efforts must be led and co-designed with relevant communities to ensure relevance and effectiveness. This not only empowers those communities, but ensures that programs are culturally informed and meet the specific needs of participants. Effective primary prevention is comprehensive and inclusive. Communities who experience intersectional barriers to justice are statistically over-represented in incidents of DFSV - including Aboriginal and Torres Strait Islander peoples, people with disabilities, migrants, CALD communities, and LGBTIQ+ individuals. These communities must be provided with culturally safe, accessible, sustainably funded programs and support services that focus on primary prevention initiatives.**[74]

The model should also design a framework for the collection of data that will inform ongoing evaluation of the model. The importance of expanding and improving both qualitative and quantitative data collection to address gaps in understanding was a key theme in the Rapid Review of Prevention Responses and formed one of the principles underpinning the Rapid Review Expert Panel's recommendations.[75] It was also a recommendation of the Local Government Association of South Australia in its submission to the Commission:

> **"The South Australian government develop methods for monitoring and evaluating the effectiveness of community-based programs that councils and other organisations can use to build a robust evidence-base.**[76]

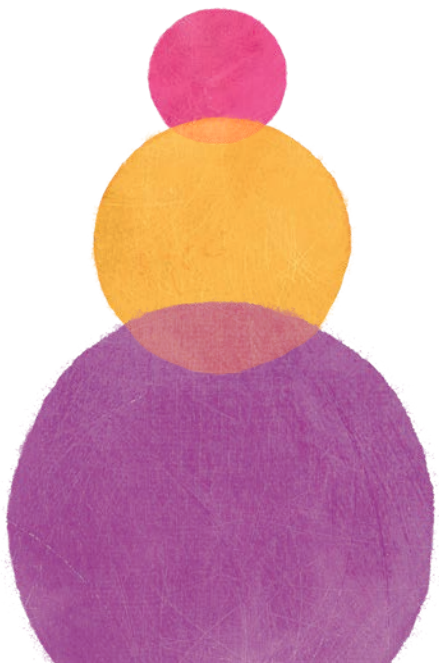
The Commission is mindful of concerns raised in Victoria that saturation models, like the Ballarat Model, can lead to increased referrals to support services without a corresponding investment in capacity.[77] These concerns are legitimate and must be addressed. Planning for increased demand on services must be a core part of the model's design. This means ensuring funding, staffing and coordination mechanisms are built in from the outset, so that service systems are equipped to meet the needs of communities as prevention efforts gain traction.

The domestic, family and sexual violence sector plays a vital role in supporting and sustaining community-led prevention and activism. However, the sector continues to face significant workforce challenges, particularly in recruiting, retaining and developing skilled practitioners for specialist prevention roles. Specialist prevention work requires a distinct skill set: expertise in primary prevention theory and practice; an understanding of the drivers of domestic, family and sexual violence; strong community engagement capabilities; and the ability to design and evaluate evidence-based interventions. These roles are often under-resourced, under-recognised, and emotionally demanding.

Community prevention efforts risk losing momentum without deliberate investment in workforce development, including training pathways, ongoing professional support and sustainable career structures. Building a strong, skilled and supported workforce is essential to embed prevention as core practice, strengthen the sector's capacity, and ensure community activism leads to lasting cultural and systemic change.

The broader workforce must also be equipped with the skills, knowledge and confidence to contribute to prevention. This includes:

- building prevention literacy across all sectors and roles – from universal services to specialist roles – and guiding workforce development, training and quality assurance, drawing on examples from other jurisdictions.
- establishing a community of practice led by the sector to strengthen primary prevention efforts in South Australia. A community of practice is essential to building shared knowledge, improving coordination across sectors, avoiding duplication, and fostering a collective commitment to evidence-based, outcomes-focused prevention work.



Engagement with boys and men

A 2020 international study of the effectiveness of different types of interventions to prevent violence against women and girls, referred to in the Victorian Evidence Review, concluded that there is conflicting evidence on the effectiveness of interventions working exclusively with men and boys.[78] The same study concludes that there is good evidence that brief bystander interventions are ineffective in preventing the perpetration of violence, with a similar finding in relation to the ineffectiveness of social marketing campaigns.[79] The study found that what does work is interventions working with all genders and which target men at particular life stages such as via parenting programs or couples interventions.[80]

The importance of identifying effective prevention strategies was recently highlighted in the Ten to Men Insights #3 Report, an Australian longitudinal study on male health.[81] The study started tracking nearly 16,000 boys and men in 2013–14, and in 2023–24 added another 10,000 men to the study. In June 2025, the researchers released a report titled The Use of Intimate Partner Violence among Adult Men. The report found that, of the nationwide sample:

- around 1 in 3 men (35%) reported that they had used a form of intimate partner violence as an adult by 2022
- emotional-type abuse was the most common form of intimate partner violence used (32%), followed by physical violence (9%) and sexual abuse (2%)
- 25% of men reported using and experiencing intimate partner violence by 2022, more than twice the proportion of men who had reported using intimate partner violence but not experiencing it.[82]

The study identified that mental health support, social supports and paternal affection are protective factors against the use of intimate partner violence. The proposed primary prevention saturation model provides the ideal opportunity to put these findings into practice.

> **“ Men with depressive symptoms and those who had reported suicide related experiences by 2013-14 were more likely to have started using intimate partner violence by 2022**
>
> **Men with higher levels of social support in 2013-14 were 26% less likely to start using intimate partner violence by 2022 compared to men with lower levels of social support**
>
> **The more strongly men agreed that they had received affection from a father or father figure, the less likely they were to report using intimate partner violence [48% less likely compared to men who strongly disagreed].**[83]

Together with the other elements of a comprehensive primary prevention approach set out earlier in this chapter, the primary prevention saturation model should include engagement with boys and men.

In addition to leveraging protective factors, engagement with boys and men should challenge binary views of sex and gender and address all forms of discrimination. Working with boys and men is a critical opportunity to address the key drivers of violence, including cultures of masculinity that emphasise aggression, dominance and control. These outdated gender norms are explored in the Man Box study conducted by Jesuit Social Services.[84]

Often, work on the use of violence by men starts from a gap, problem, or ‘deficit discourse’. Taking a strengths-based approach means flipping this to start with recognising the existing connections and expertise all individuals and communities have. In practice, this can include promoting positive and respectful relations based on empathy and compassion for others. This should also include recognising existing prevention efforts within communities that may intersect with wider forms of social justice, such as among Aboriginal people, and amplifying and consolidating those community-led approaches.

Recommendation 127

The South Australian government, in partnership with local government, community members and community organisations, design and establish a primary prevention saturation model for South Australia. The model should:

a. be informed by the Ballarat Model and the Our Town model
b. be piloted in 2 communities in South Australia, selected based on de-identified data input together with community readiness
c. be supported by adequate resourcing over a 4-year period, which includes consideration of the impact on local service providers
d. be designed in consultation with the community
e. build on existing prevention strategies, including those run by community and volunteer organisations
f. include programs focused on the development of social supports for men, parenting programs and mental health support.

Prevention through regulation

The Commission received input about the harms associated with commercial products, such as alcohol; gambling; and pornography and other digital tools and online environments. These 3 key areas, sometimes referred to as 'commercial determinants of violence' represent 3 currently underdeveloped areas of opportunity for governments to expand their efforts to prevent violence and reduce harm.[85] Speaking to this, Ms Alford from Our Watch gave evidence that:



Governments have been slow to recognise and act on these commercial determinants of violence in meaningful ways.[87] The South Australian government appears to recognise the need for a greater emphasis on broader prevention efforts, writing in its submission:

> **Gender inequality is an important underlying causal factor in domestic, family and sexual violence that must be addressed. However, primary prevention programs need to address all causal factors if we are to achieve a societal change that brings an end to ongoing cycles of violence. Addressing all forms of discrimination (including racism, transphobia, homophobia, ableism, classism, ageism and xenophobia) and other contributing factors (such as the effects of alcohol and other drug (AOD) misuse, and harmful gambling) is critical.**[88]

The power of a strong regulator to drive change and prevent domestic, family and sexual violence is most evident in the work of the national eSafety Commissioner and her staff, who have been proactively working to prevent domestic, family and sexual violence facilitated by online environments and other technologies. The eSafety Commissioner's approach to preventing domestic, family and sexual violence has included proactive and systemic change.

A key element of the *Online Safety Act 2021* (Cth) is the Basic Online Safety Expectations, which require social media, messaging and gaming service providers, as well as other apps and websites, to take reasonable steps to keep Australians safe.[89] These expectations, which are civilly enforceable, represent a step towards reversing the onus of safety from individual people to the industries that profit from sometimes harmful products and services.

The eSafety Commissioner also champions 'safety by design' principles, which focus on the ways that industries can minimise harm before it occurs.[90] A key principle of safety by design is that 'the burden of safety should never fall solely upon the user'.[91] It is the Commission's view that the eSafety Commissioner's approach of safety by design can and should be applied to other industries that profit from commercial determinants of violence, such as the alcohol and gambling industries. Reversing the onus of safety from individuals to industries presents an underutilised opportunity to prevent domestic, family and sexual violence.

The Commission's call to action for governments to expand prevention approaches to address the commercial determinants of violence stems from inputs from many South Australians, including those with lived experience, frontline workers, non-profit organisations, government agencies, advocacy groups and peak bodies. In its submission, SACOSS, South Australia's peak body for non-government health and community services, wrote:

> **"History has shown us that primarily focusing on changing individuals' attitudes and behaviours is unlikely to make widespread and lasting change to rates of violence when the community, society, the material and socio-economic conditions of people's lives, and commercial and media interests continue to reinforce patterns of violence. It would be foolhardy to expect that people – and men in particular, given their over-representation as users of violence – will somehow change their attitudes and behaviours in the face of unaccountable and unregulated commercial determinants, vested interests and industries associated with domestic violence, such as pornography, gambling, alcohol, media reportage and social media.**[92]

This call to action is reinforced by the work of the Rapid Review, which recommended that state and federal governments 'regulate industries that can do harm'.[93] Commissioner Cronin, in the federal Domestic, Family and Sexual Violence Commission's first Yearly Report to Parliament, put it well, writing:

> **"We will learn a great deal across the life of this ten-year National Plan. We must be prepared to listen and adapt. As members of the Independent Collective of Survivors wrote at the beginning of the National Plan. 'We must be willing to sit in discomfort. It is time to be brave'.**[94]

Alcohol and other drugs

Current state

The Commission received many inputs regarding alcohol and drug use, and their relationships with domestic, family and sexual violence. Many people with lived experience courageously shared their stories about how substance misuse impacted their lives, and sometimes contributed to intergenerational harm.

> **[He] had, unbeknownst to me, not worked, but drunk that day. He picked up the kids up from school intoxicated and came home only to drink more. An incredibly tense dinner was followed by an assault of our eldest daughter in the kitchen as they cleaned up. I, who was still feeding our youngest in the lounge, went into the kitchen and stepped in front of our daughter to protect her. I was also assaulted.**[95]

> **I turned to alcohol as a means of coping with the trauma I was enduring. This led to obesity, alcoholism and the onset of health issues.**[96]

> **To prevent family and domestic violence SA should… stop parents from fighting because they're drunk.**[97]

These lived experiences of harm involving substance misuse have led to calls to better regulate alcohol in South Australia.

> **The impact of alcohol consumption on family violence has been neglected and underplayed. Seemly profits and tax received from these substances is a higher priority than the safety of women and children. We know that 50% of alcohol is sold to 10% of people. Those 10% make up the alcoholic abusers of women and children… Repeat incidents where alcoholism is a factor is almost guaranteed.**[98]

> **[Recognise] how Alcohol/ drugs and gambling contributes to family and domestic violence and the failure of governments to implement meaningful programs to bring about change.**[99]

Along with the voices of people with lived experience, the Commission has heard from experts in the AOD services field. These include the Foundation for Alcohol Research and Education (FARE), the Alcohol and Drug Foundation, the South Australian Network of Drug and Alcohol Services (SANDAS), the La Trobe Centre for Alcohol Policy Research, Drug and Alcohol Services South Australia (DASSA) and the Port Augusta Substance Misuse Service. These organisations called for the Commission to recognise and respond to the links between substance misuse and domestic, family and sexual violence:

> **Alcohol has to date been neglected in conversations on contributors to FDSV. While we acknowledge that consumption of alcohol is never an excuse for perpetration of violence, evidence demonstrates there is a relationship. The relationship between alcohol and FDSV can no longer be ignored and should be addressed as a key issue considered by the Royal Commission.**[100]

The relationship between alcohol and domestic, family and sexual violence was explored in the Northern Territory Coroner's Inquest into the deaths of Miss Yunupiŋu, Ngeygo Ragurrk, Kumarn Rubuntja and Kumanjayi Haywood. At paragraph 361 of her findings, Coroner Elisabeth Armitage accepted that 'while alcohol doesn't cause domestic and family violence, it is a major enabler of it and increases the probability, frequency and severity of violence'.[101]

Submissions from AOD experts draw attention to research that demonstrates the relationships between substance misuse and domestic, family and sexual violence. Most commonly, they referred to the Alcohol/Drug-Involved Family Violence in Australia (ADIVA) study, which explored the relationships between substance use and domestic and family violence in Australia.

At a national level, the ADIVA study found that alcohol use was involved in around one-third of all domestic violence (34%) and family violence (29%) incidents. Drug use, while much less common in the population overall, was involved in one-quarter of all domestic violence incidents (26%) and one-third of family violence incidents (33%).[102] The study found that for domestic violence, alcohol use was associated with more severe violence and a greater likelihood of injury, and that alcohol-related incidents were more likely to be reported to police.[103] Drug-related incidents were found to be significantly more likely to involve physical violence and to increase the likelihood of injuries. Drug involvement was also found to increase the likelihood of sexual violence occurring.[104] The study also found that, in South Australia, repeat domestic and family violence incidents were more likely to involve alcohol and drugs than not, and that areas of greater disadvantage were significantly more likely to involve recidivist domestic and family violence.[105]

The relationship between alcohol use and domestic, family and sexual violence is also explored in research examining the effectiveness of alcohol regulation on reducing violence. In 2017 and 2018, the Northern Territory introduced a range of alcohol regulations spanning from individual-level alcohol bans, a statewide minimum unit price for alcohol, the introduction of liquor inspectors and restrictions on daily purchases and opening hours in specific towns. The combination of minimum alcohol prices and introduction of liquor inspectors in Alice Springs was found to decrease alcohol-related domestic and family violence assaults by one-third (33%), and alcohol-related breaches by two-fifths (42%), and the introduction of restrictions on daily purchases and opening hours in Tennant Creek had a dramatic effect, decreasing all domestic and family violence assaults by four-fifths (78%). The individual-level bans were found not to be effective.[106]

While these findings show promising reductions in alcohol-related violence, they also highlight the need for a more nuanced approach. Effective alcohol regulation must be implemented alongside strategies that are community led, culturally safe, and responsive to local contexts. Importantly, alcohol is a contributing factor – not the root cause – of violence. Lasting change requires addressing the deeper drivers of domestic, family and sexual violence, including gender inequality, and intergenerational trauma. There is a need for attention to address 'the relationship between harmful alcohol use and social norms relating to both violence and gender, with a particular focus on groups and settings characterised by harmful masculine drinking cultures'.[107]

Another study, this time examining the impact of restrictions on trading hours in late-night entertainment precincts in New South Wales, found that the introduction of such policies in Newcastle was associated with a sustained overall reduction of almost one-third (29%) of domestic and family violence assaults and a reduction of almost half (44%) of domestic and family violence incidents.[108]

The relationship between alcohol and drug use and domestic, family and sexual violence in South Australia has been a throughline observed by the Commission during its engagement with people with lived experience, people using violence, frontline workers and organisations. When conducting listening sessions with people in the Adelaide Women's Prison, the Adelaide Remand Centre, Mobilong Prison and participants on the Abuse Prevention Program in community, many of the participants spoke about their lived experience with substance misuse and addiction. Many participants told the Commission that their substance misuse was tied to their experiences of trauma in childhood, and had profoundly impacted their relationships and lives for the worse.

Of the men that the Commission spoke with at the Adelaide Remand Centre, every participant had experienced family violence as a child, and every participant believed their methamphetamine use contributed to the circumstances leading to their incarceration.

It is important to note that not everyone who experiences childhood trauma or uses alcohol or other drugs will go on to use violence. However, trauma and substance use can intersect with other risk factors to increase the likelihood of violence, particularly in the absence of support, accountability and early intervention.

The high rate of substance use in people using violence in South Australia is supported by data from the Abuse Prevention Program, which reveals that two-thirds (66%) of participants disclosed using at least one type of substance, most commonly alcohol, cannabis and methamphetamine, on a casual, monthly, weekly or daily basis.[109] Data provided by SAPOL on high-risk domestic and family violence incidents that had been reviewed by MAPS in financial year 2023–24 revealed almost half (49%) involved alcohol as a risk factor, and almost three-fifths (58%) involved drug use, trends that were reasonably consistent over 5 years.[110]

Participants in listening sessions in regional and remote locations regularly named alcohol and drug misuse as being of particular concern in regard to domestic, family and sexual violence. Service providers and frontline workers in Port Augusta, Ceduna, Coober Pedy, Alice Springs and the APY Lands spoke about the direct links between substance misuse and the frequency and severity of violence. Workers in the larger regional towns also spoke about the harm caused by alcohol misuse, and noted that the increasing availability of methamphetamine in regional towns was of particular concern.

Service providers, council members and frontline workers in the APY Lands spoke about their continual efforts to minimise the harm caused by alcohol and drugs being smuggled into dry communities. They identified that, while police were often successful in interception efforts, alcohol and drugs do inevitably get into dry communities. Service providers and workers spoke about the direct relationship between alcohol and drug availability and the occurrence of domestic, family and sexual violence in remote communities, identifying that the successful disruption of the availability of alcohol in dry communities directly reduces the occurrence and severity of violence. To these frontline workers, the provision of resources and tools to better disrupt the availability of alcohol and drugs in dry communities was seen as a key opportunity for preventing domestic, family and sexual violence. Calling for these efforts to continue, NPY Women's Council wrote:

> **"NPYWC has been at the forefront of efforts to reduce the availability of alcohol in remote communities. Listening to community share stories about the severe impact of alcohol on Anangu families and communities, NPYWC has engaged in decades of advocacy to address these issues in specific geographical areas.**[111]



Future state

The Rapid Review called for stronger regulation as part of a broadened approach to preventing domestic, family and sexual violence. In calling on governments to regulate industries that do harm, the Rapid Review recommended that governments review and strengthen alcohol regulatory environments to prioritise the prevention of gender-based violence, by way of:

- adopting clear primary objectives in state and territory liquor regulatory regimes to prevent gender-based violence, alongside existing objectives around alcohol harm reduction (to be actioned by states and territories)
- restrictions on alcohol sales, delivery timeframes (to be actioned by states and territories) and advertising (to be actioned by the Commonwealth and states and territories).[112]

Following the release of the Rapid Review Report, the National Cabinet convened in September 2024 to discuss 'how we can accelerate change under the National Plan'.[113] First Ministers discussed regulating alcohol to prevent domestic, family and sexual violence, and committed to 'examine their laws and review them as appropriate to see what further action can be taken'.[114]

Following this commitment, the South Australian government published the Liquor Licensing (Miscellaneous) Amendment Bill 2025 (SA) for public consultation. Key elements of the draft Bill included restrictions on alcohol sale and delivery timelines, a 2-hour delay on the home delivery of alcohol, and the inclusion of harm minimisation as the paramount object of the *Liquor Licensing Act 1997* (SA).[115]

The draft Bill received public comment from a range of key stakeholders, including Embolden, SANDAS, FARE, SACOSS and the Aboriginal Drug and Alcohol Council SA. FARE commended the draft Bill as 'the first of its kind in the country', stating that it 'affirms the SA government's commitment to reduce gendered violence through alcohol law reform.'[116] Mr Scott Wilson, CEO of the Aboriginal Drug and Alcohol Council SA (and Co-Chair of the Commission's Aboriginal Partnership Committee) also expressed his support:

> **Many women in our community have shared how alcohol is a major factor in their experience of violence. We know that this violence gets more severe late at night, when alcohol is being delivered into their home. This draft Bill includes meaningful measures that would make a real difference in preventing and reducing violence.**[117]

Embolden has commended the draft Bill, supporting the addition of minimisation of harm as the paramount object of the Act and the introduction of the 2-hour safety pause. Embolden also advocated for the language in the draft Bill to be broadened from 'gender-based violence' to include all forms of domestic, family and sexual violence, writing that:

> **This ensures that the Act adequately encompasses the diversity and complexity of violence experienced in intimate partnerships and families, and explicitly encompasses sexual violence, which occurs both within and outside the context of domestic and family violence.**[118]

The draft Bill is a good first step in leveraging alcohol regulation to prevent domestic, family and sexual violence. Minimisation of harm and potential harm caused by excessive or inappropriate alcohol use must become the paramount object of the Act, and the restrictions on alcohol sale and delivery timelines, along with at least a 2-hour delay, must be adopted. The Commission further supports Embolden's advocacy to broaden the language in the draft Bill to include all forms of domestic, family and sexual violence.

The Commission supports the steps already taken by South Australia's Liquor and Gambling Commissioner to restrict the amount of takeaway alcohol that can be purchased in Ceduna, Coober Pedy, Port Augusta and Whyalla, in order to 'reduce alcohol-related harm to individuals, families and the wider community.'[119] On extending the liquor restrictions in Coober Pedy, Consumer and Business Services wrote:

> **the evidence in favour of the restrictions continuing is hard to ignore. Frontline health and support services that provide domestic, family violence and mental health support in Coober Pedy reported the later start to takeaway liquor sales was making a significant difference, with a number of clients able to more effectively engage in DV counselling services.**[120]

Similarly, media reporting about alcohol restrictions in Port Augusta indicated that the restrictions resulted in fewer hospitalisations for serious head injuries and trauma, and fewer calls to police for antisocial behaviour,[121] with indications that restrictions in Whyalla and Ceduna were also being supported by locals as a measure to reduce antisocial behaviours and alcohol-related harms.[122]

With the minimisation of harm becoming the paramount object of the *Liquor Licensing Act 1997* (SA), the Liquor and Gambling Commissioner will be well placed to monitor and evaluate the effectiveness and sustainability of alcohol reforms in South Australia and make any policy adjustments or recommendations for further reform that may be required to ensure the paramount objective is realised in practice. In doing so, the Liquor and Gambling Commissioner would be adopting a safety-by-design approach that shifts the onus of safety from individuals to industries.

The Commission acknowledges the service providers working on the APY Lands, who spoke in support of SAPOL's ongoing efforts to minimise harm by disrupting the availability of alcohol and drugs in dry Aboriginal communities. This work may benefit from greater coordination, and by a practical investment in infrastructure such as additional Safe-T-Cams. The Commission notes that this ongoing work must occur in consultation and partnership with the communities that it impacts.

Recommendation 128

The Minister for Consumer and Business Services progress the following provisions contained in the Liquor Licensing (Miscellaneous) Amendment Bill 2025 (SA):

a. the paramount object of the *Liquor Licensing Act 1997* (SA) is to ensure that the sale and supply of liquor occurs in a manner that minimises the harm and potential for harm caused by the excessive or inappropriate consumption of alcohol
b. the minimum 2-hour 'safety-pause' delay to prevent the rapid delivery of alcohol
c. the restrictions on alcohol sale and delivery timelines.

Recommendation 129

The Minister for Consumer and Business Services amend the Liquor Licensing (Miscellaneous) Amendment Bill 2025 (SA) so that the term 'domestic violence' in the *Liquor Licensing Act 1997* (SA) is replaced with 'domestic, family and sexual violence'.

Recommendation 130

Following the passage and implementation of the Liquor Licensing (Miscellaneous) Amendment Bill 2025 (SA), the South Australian Liquor and Gambling Commissioner:

a. monitor and evaluate how the amendments to the *Liquor Licensing Act 1997* (SA) are operating in practice, recommending further reform if required
b. conduct a review of all available regulatory levers to ensure that alcohol regulation is occurring in a way that achieves the paramount consideration of harm minimisation.

Recommendation 131

The Commissioner of Police develop and implement a strategy to further disrupt the supply of alcohol into dry Aboriginal communities. The strategy must:

a. be developed in partnership with community leaders and relevant stakeholders
b. identify practical solutions such as the installation of additional Safe-T-Cams to cover common approaches to dry communities
c. adopt harm minimisation as the strategy's primary objective.

Gambling

Current state

Gambling is considered another commercial determinant of violence, and as such represents another currently underdeveloped opportunity for governments to prevent and reduce harm through regulation. The Commission has heard that the relationship between problem gambling and domestic, family and sexual violence is a complex one. Similar to alcohol and drug misuse, both people using violence and people experiencing violence can also experience problem gambling and gambling addiction. The South Australian government's submission draws attention to this relationship, citing research that reveals:

> **In Australia, more than one-third of individuals negatively affected by gambling report being victim-survivors (38.1%) or perpetrators (36.5%) of physical intimate partner violence. Among perpetrators, 11.3% have a gambling disorder.**[123]

The submission from SACOSS also provides evidence regarding the relationship between domestic, family and sexual violence and gambling:

> **Research estimates that around 10,000 South Australians engage in high-risk gambling and have experienced significant adverse consequences from it. For every person involved in high-risk gambling, at least six other people may also be affected. South Australians lost $12.1 billion to gambling over the ten-year period from 2012-13 to 2021-22, and gambling losses peaked at $1.52 billion in 2021-22, equivalent to $1,052 for every South Australian adult.**

> **Gambling harm can affect more than just gamblers, impacting families, friends and the wider community as well. It can also occur alongside other issues such as mental illness, alcohol and drug use, and family violence. Gambling-related stressors, such as financial losses and relationship conflicts or neglect, can impact the family and lead to escalating violence. The evidence is clear that problem gambling is an accelerant to family violence and constitutes a form of financial abuse, and increases pressure on household budgets and financial stress.**[124]

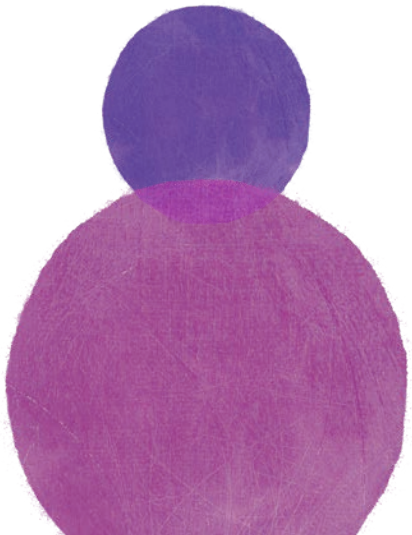
The Commission has heard directly from people whose lived experience of domestic and family violence predominantly consisted of serious financial abuse that was carried out by partners with gambling addictions. The impacts of this sustained financial abuse, sometimes occurring over decades, has resulted in victim-survivors continuing to experience housing and economic instability, and unfairly bearing the burden of significant debts.[125]

> **He was deeply in debt when we met, and despite earning good money, he wasted it all on gambling. He had maxed-out credit cards and unpaid fines… Soon after we got together, he insisted on joint bank accounts. Without much thought, I agreed… He took my entire pay and gambled it. Sometimes he won, but mostly he lost. The feeling of sitting next to him as he lost all my money and left me with nothing was unforgettable.**[126]

People who have used violence also spoke to the Commission about gambling. Some men participating in the Abuse Prevention Program spoke about how they had turned to gambling as a coping mechanism, and how their gambling was a relationship stressor. The submission from Jesuit Social Services, who have developed the 'Man Box' study, speaks about the relationships between people who adhere to strict and outdated gender norms, the use of violence, and problem gambling. The 2024 Man Box study found that men who most strongly agreed with Man Box rules (being harmful patriarchal norms) were 'six times more likely to exhibit signs of problem gambling' and that 'more than half of the men who most strongly agreed with Man Box rules met the criteria for problem gambling'.[127]

The Commission has heard that, similar to alcohol and drug use, some people experiencing violence turn to gambling as an escape, with the government submission citing research that finds:

> **Victim-survivors also report that use of electronic gaming machines offers physical escape, psychological escape, hope of regaining control over their lives, as well as a mechanism for coping with the legacy of abuse.**[128]



Problem gambling, and its relationship with domestic, family and sexual violence, was raised throughout the Commission's listening phase by several specialist service providers, advocacy groups and other frontline workers. In these listening sessions it was apparent that problem gambling by people using violence often resulted in financial abuse, and that problem gambling by people experiencing violence in some instances led to an escalation in the frequency or severity of violence they experienced. The Commission heard that when either or both persons in a relationship were engaged in problem gambling, the impacts could include stigma and shame, economic and housing insecurity, poverty, hunger, child neglect and relationship stressors. The impacts of problem gambling were identified as particularly worrisome for workers in regional and remote South Australia, and for some ACCOs. These workers revealed that online gambling was becoming endemic in some remote communities, and that in many regional towns, gaming rooms were more readily open than supermarkets.

Concern about the growing impacts of online gambling harms is not limited to frontline workers in South Australia. In 2022, the federal House of Representatives Standing Committee on Social Policy and Legal Affairs was tasked to inquire into online gambling and its impacts on those experiencing gambling harm (the Online Gambling Inquiry). The Online Gambling Inquiry's report, titled You Win Some, You Lose More, found that Australians spend more on online gambling per capita than anywhere else in the world.[129] On the harms associated with online gambling, the report writes that:

> **Online gambling is unlike other forms of entertainment because of its potential to cause psychological, health, relationship, legal and financial harm to individuals and those around them, and tragically, gambling is a key risk factor for suicide.**[130]

The report notes that in 2022, two-thirds of all participants who gambled on sports, racing and electronic gaming machines were classified as being at risk of harm, and that much higher rates of harmful gambling were occurring in Aboriginal communities.[131] The report found that there was an urgent need to regulate online gambling, writing that 'Australians lose the most to online gambling because we have a weak and fragmented regulatory framework, which places all the onus for reducing harm onto the person who gambles'.[132] The committee went on to make 31 recommendations to the federal government, many of which were concerned with improving the regulatory environment in which online gambling occurs.

As is the case with alcohol misuse, the Commission has heard a chorus of voices calling for governments to better regulate gambling to assist in prevention efforts. This is well articulated in an individual's submission, in which they write:

> **We need to get serious about the impact of certain industries – particularly gambling and alcohol – on the severity and impact of perpetration. Even if we don't consider problem gambling or alcohol to be the cause of family violence or coercive control and simply see them as exacerbating factors, isn't it incumbent on us to tackle exacerbating factors, especially those that lead to more severe physical injuries? Our leaders say they want men to step up. Let's see them take on these vested interests and show the country what "stepping up" really looks like.**[133]

Future state

In Change the Story, Our Watch writes that heavy gambling is among factors that weaken prosocial behaviour, and that 'in tandem with social norms relating to gender, the social stress caused by loss of income from gambling can intensify the frequency and severity of intimate partner violence against women'.[134] Action 11 of Change the Story is to 'strengthen prosocial behaviour'.[135]

The Online Gambling Inquiry report was published in June 2023, making a series of recommendations to the Australian government and states and territories. The recommendations included a phased ban of online gambling advertisements and the establishment of a stronger national regulatory environment for online gambling.[136] The Australian government has not yet provided a formal response to the report.[137] SACOSS commended the Online Gambling Inquiry report to this Commission, writing that:

> **The … enquiry into online gambling harms recognised that gambling disorders are linked to other health and social issues such as an increased risk of substance abuse and disorders, depressive symptoms and disorders, family breakdown, domestic violence, criminal activity, disruption to or loss of employment, social isolation and homelessness (p. 48). It recommends that the Australian government, with the co-operation of the states and territories, implements a comprehensive ban on all forms of advertising for online gambling, to be introduced in four phases, over three years, commencing immediately (Recommendation 26).**[138]

The Rapid Review also advocated for the Online Gambling Inquiry report recommendations to be implemented by governments and recommended that Australian and state and territory governments review and strengthen their prospective gambling regulatory environments to prioritise the prevention of gender-based violence, by way of the following actions to be undertaken by all Australian governments:

- stronger restrictions leading to a total ban on advertising of gambling
- examining the density of electronic gaming machines, and use of online gambling, in relation to the prevalence of domestic, family and sexual violence across different populations and communities.[139]

The Commission supports the recommendations made in the Online Gambling Inquiry. The Commission adds its voice to the call to action that has already been made in the Online Gambling Inquiry's report, in which the late Ms Peta Murphy MP wrote, 'I am proud to say this Committee has delivered a unanimous report that says, "enough is enough"'.[140] The Commission further supports the recommendations subsequently made by the Rapid Review, which again call for regulation to prevent harm.

It is the Commission's view that while the Australian government must display leadership by better regulating online gambling in Australia, there is also more that the South Australian government can, and should, do. The Commission supports that, as with other commercial determinants of violence, a safety-by-design approach should be adopted, shifting the onus of safety from individuals to the industries that profit from harmful products and services.

At present, the *Gambling Administration Act 2019* (SA) includes four objects under section 3(2), including 'to reduce the prevalence and severity of harm associated with the misuse and abuse of gambling activities'.[141] The proposed introduction of a paramount object into the *Liquor Licensing Act 1997* (SA), which ensures that the sale and supply of liquor occurs in a manner that minimises harm and the potential for harm, has been celebrated as a nation-leading reform. It is the Commission's view that the introduction of a paramount objective that ensures the minimisation of harm and the potential for harm into the Gambling Administration Act presents a similar opportunity to prevent and reduce domestic, family and sexual violence. A paramount object of minimising harm will provide an enabling environment in which the Liquor and Gambling Commissioner can more effectively make adjustments that prevent violence and minimise harm.



Recommendation 132

The South Australian government advocate for the Australian government to accept and progress the recommendations made by the House of Representatives Standing Committee on Social Policy and Legal Affairs in the You Win Some, You Lose More report, including, but not limited to, the phased approach to a comprehensive ban on all forms of advertising for online gambling.

Recommendation 133

The Minister for Consumer and Business Services:

a. progress amendments to section 3 of the *Gambling Administration Act 2019* (SA) so that the paramount object of the Act is the minimisation of harm and potential harm associated with the misuse and abuse of gambling activities, consistent with the changes to the *Liquor Licensing Act 1997* (SA)

b. undertake a review of the available regulatory levers under the *Gambling Administration Act 2019* (SA) to ensure that gambling regulation is occurring in a way that achieves the paramount consideration of harm minimisation and progress further reform as appropriate.

Pornography and online harm

Current state

Regulation of pornography and the potential harms posed by online environments represent another opportunity for governments to prevent domestic, family and sexual violence. The Commission has received consistent input about the harms caused by pornography and other online environments such as social media and the manosphere.

While online harms can and do impact adults, the Commission recognises that children and young people are particularly vulnerable to harmful online environments and technology-facilitated harms. An experienced child and adolescent psychiatrist wrote about the impact of pornography on young South Australians in their submission:

> **The sexual objectification of girls and women has occurred in parallel with the proliferation of pornography. The widespread availability of pornography has had many insidious and damaging effects on the vulnerable and growing minds of boys and girls. Pornography is polluting the minds of young people...They watch degrading sexual acts, perpetrated on women's bodies, as though it is a normal part of sexual expression and development. They watch it at school, in the bus, in the classroom, in their bedrooms, at the park and with their friends. It is now considered "normal". The pornography industry has been allowed by our society to proliferate without adequate regulations and guardrails.**[142]

In another example, an educator with lived experience wrote about the lack of regulation of social media and pornography:

> **This is a monumental failing of our regulators and government. The next generation of abusers are modelling themselves on unlimited exposure to violence, sexual assaults, objectification of women, misogyny etc. because unlike tv or movies there is zero regulation controlling what is published. The lack of internet and social media regulation means there is no control over pornography and violence online. Parents are simply not equipped to be IT experts and manage such a vast issue.**[143]

The Commission heard more about the proliferation of harmful online environments and their detrimental impacts on children and young people during the course of its public hearings. When talking about emerging national trends, Commissioner Cronin noted that:

> **we are seeing greater violence, inter-partner violence, [in] younger people... What we're seeing is a generation growing up, who have, increasingly and very worryingly, access to pornography, violent pornography, misogyny online.**[144]

Dr Opie, on Day 3 of public hearings, spoke about the impacts of online harms such as the manosphere on children and young people:

> **[T]here are additional concerns there in terms of...the manosphere, men's rights activism, and ... I think that there is this online community that are exploiting many adolescent males' insecurities ... and trying to sort of drag them towards a men's rights ideology. So, whilst misogyny is nothing new, whilst sexual violence is nothing new, I think the avenues and the ways in which this can manifest these days are very, very different.**[145]

On Day 10 of public hearings, Associate Professor Zac Seidler spoke about how boys experience what the eSafety Commissioner refers to as 'the algorithm effect', referring to how social media platforms can lead young people from innocuous content to harmful content:

> **We've done enough research now into millions of TikTok videos to know that this is not all radicalising, horrible, misogynistic content. It starts out extremely innocuous. It starts out with gym talk. It starts out with how to get ripped, how to - you know, some pretty, you know, tame stuff around going on dates, but the more of that you watch, within minutes you will end up in a pretty dark space. And these young guys do not have the critical insight, understandably, to know what their own values are.**[146]

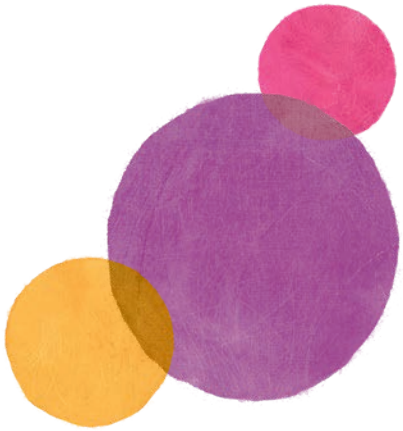
These inputs to the Commission on the impacts of harmful online environments, pornography and technology-facilitated harms are consistent with national research that is emerging in what is an extremely fast-paced environment.

In 2024, Our Watch released a paper exploring the impact of pornography on young people, drawing from an online survey involving 832 young Australians. The paper reinforces that pornography 'can be highly influential in shaping how young people understand sex, relationships, gender roles and identities', and that the proliferation of porn online and on devices 'can mean some children may see pornography before they have been given the tools to understand what they are seeing'.[147] The survey results revealed that the average age of Australian young people being exposed to pornography was 13.6 years old, which for girls was 2 years earlier than in 2018.[148] The survey revealed that for young men, more than half (53%) watched pornography at least once a week, and more than 1 in 10 (12%) watched pornography almost daily.[149] Young people's attitudes were also measured, in which 84% of respondents agreed that pornography pushes stereotypes of what is expected in sex, 73% agreed that pornography is degrading to women, and 72% agreed that pornography often shows aggression and violence.[150]

A 2024 paper for the *Australian and New Zealand Journal of Public Health* also explored the exposure and access of young Australians to pornography. The paper found that pornography is 'easily, anonymously, and freely accessible online' and that given the proliferation of devices, 'exposure is widespread among young people aged 12–20 years'.[151] The paper reveals that children and young people most often access pornography online, and that 'some research suggests unintentional exposure may be the most common method of first exposure'.[152] On the impacts of pornography on children and young people, the paper writes:

> **Pornography consumption is associated with a range of harmful attitudes, behaviours, and experiences, including risky sexual behaviours, more sexually objectifying and stereotypic gender views of women, rape myth acceptance, sexual coercion and aggression, and sexual and dating violence victimisation.**[153]

The authors recommend that given children and young people are often exposed to pornography accidentally, 'regulatory and technological measures should be considered to limit minors' online exposure'.[154] The paper also recommends that given 'pornography use is associated with both perpetration and victimisation' of sexual violence, 'violence prevention efforts should include increased attention to reducing pornography's potential harm'.[155]



In 2023, Australia's eSafety Commissioner collaborated with Deakin University and the Queensland University of Technology to study the online experiences of young men. The 2024 report 'Being a young man online', found that online pornography is 'a pervasive presence in the lives of young men, and they often encounter it without actively seeking it out' and that they 'often experience negative impacts because of their encounters with online pornography'.[156] The report also found that while young men are 'critically aware of the ways that recommender systems and algorithms can shape the content they are influenced by online', Andrew Tate remains a 'key influencer figure in many young men's worlds', and 'engaging with Tate and his ideas is a central way in which some young men are shaping their identity as men online.'[157]

The study also explored young men's experience of the 'ways that recommender systems and algorithms shape who and what influences them online',[158] with the report finding that:

> **[w]hile some study participants described the tailoring of content as positive, many young men described the potentially negative impacts of online algorithms, including encouraging and reinforcing harmful beliefs. These negative consequences were often discussed in relation to driving harmful ideas related to gender – a further reflection on the young men's critical awareness... Some young men in the study expressed concern for boys and younger men online and how their perspectives might be limited by the work of algorithms.**[159]

Future state

There has been a strong call to action, both at a state and national level, to better regulate pornography and other harmful online environments in order to prevent domestic, family and sexual violence. Professor Bromfield articulated the need for governments and industries to do more during Day 6 of public hearings:

> **At the moment, my concern is that we're just regulating kids. And to me, that's analogous to when we told women not to walk alone at night. We can't just regulate children. We're just accepting that the virtual world is not safe, and it's up to kids to be regulated or to keep themselves safe. So we need to go further to regulate big tech to actually create more safety within the virtual world. There is so much technology that our big tech companies already have that would enable them to implement age verification, that would enable them to identify child sexual exploitation material, that would enable them to identify violent pornography... we can't leave protecting our children solely up to that children protect themselves.**[160]

This call to regulate pornography and harmful online environments also features in the National Plan. Action 3 of the National Plan's prevention pillar, being 'strengthen positive, equal and respectful relationships between all people in public and private spheres' includes a call to 'address the role of pornography and social media in contributing to harmful sexual behaviours and reinforcing stereotyped attitudes among adults, children and young people.'[161]

The Rapid Review also made findings and recommendations concerning the need to better regulate pornography, writing that:

> **Children's unfettered access to free online pornography has normalised painful and dangerous sexual practices, including non-fatal strangulation—an act that, when used in the context of intimate partner violence, increases the likelihood of future homicide by 700 per cent. It also shapes expectations of what is sexually 'normal', including the normalisation of requests for sexual images among children, and commonly features harmful messaging around male dominance; control, coercion and aggression; and female submission.**[162]

The Rapid Review recommended that governments review and strengthen the regulatory environment for pornography to prioritise the prevention of gender-based violence, including by:

> **ensuring the age-verification pilot for online pornography tests both the technology, and how age verification assurance systems will be implemented, including the participation of the major technology platforms used by Australian children.**[163]

In 2024, the South Australian government commissioned a legal examination into banning children under the age of 14 from social media.[164] This report paved the way for South Australia to advocate for a social media ban at a national level, which ultimately resulted in the Australian government passing the *Online Safety Amendment (Social Media Minimum Age) Act 2024* (Cth), which places the onus on social media platforms to take reasonable steps to prevent Australians under 16 from having an account.[165] The South Australian government, in collaboration with the Honourable Connie Bonaros MLC, has also taken action to update the *Summary Offences Act 1953* (SA) to ensure that image-based abuse using deepfakes and AI-generated explicit content is criminalised.[166]

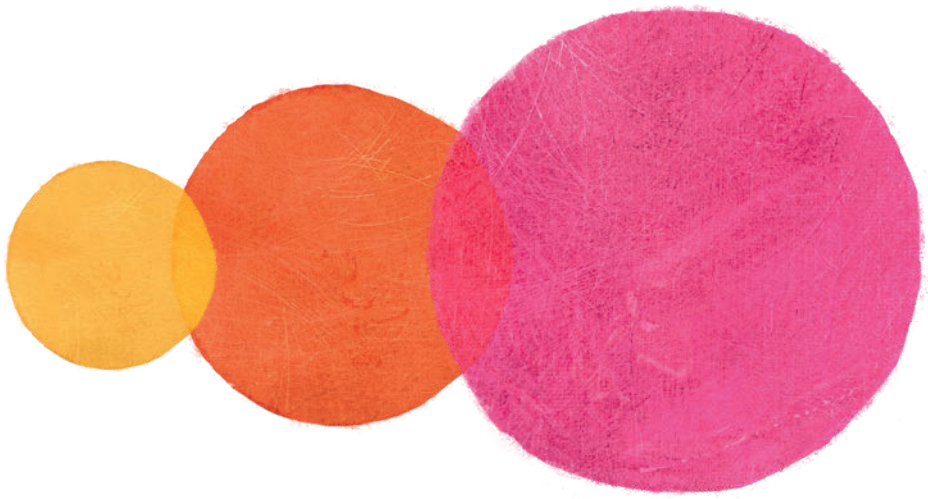
Protecting Australians from harmful online environments will require diligent and ongoing work. Much of this work must occur at a national level. Throughout the course of its inquiry, the Commission engaged with the eSafety Commissioner and has learned about the eSafety Commissioner's ongoing work to regulate harmful online content and respond to technology-facilitated abuse. The eSafety Commissioner is currently in the second phase of developing Industry Codes and Standards, which aim to protect Australian children and young people from class 1C and class 2 material. Class 1C material refers to films, video games or publications that have been refused classification (RC) due to depictions of specific fetish practices or fantasies. Class 2 material refers to films, video games or publications which are classified as X 18+, R 18+, or restricted, which includes content containing pornography and other high-impact themes. The eSafety Commissioner has also developed Basic Online Safety Expectations for service providers, and continues to champion their safety-by-design approach, shifting the onus of safety from users to service providers.

Recently, on 27 June 2025, the eSafety Commissioner registered 3 new industry codes designed to protect children and young people from class 1C and class 2 content, including pornography and other age-inappropriate content. These included a code relating to search engine services, as well as codes covering enterprise hosting services and internet carriage services. The codes require search engine services, enterprise hosting services and internet carriage services to take reasonable steps to meet the following objectives:

- Protect and prevent children in Australia from accessing or being exposed to class 1C and class 2 material.
- Provide Australian end users with effective information, tools and options to limit access and exposure to class 1C and class 2 material.

The Internet Search Engine Services Online Safety Code[167] requires search engine services (such as Google) to adhere to several compliance measures to meet these objectives. The compliance measures include age assurance, parental controls, measures to reduce unintentional exposure to pornography and high-impact material, and user choice about algorithms.[168] The Codes will come into force on 27 December 2025 and will be civilly enforceable, with penalties of up to $59.5 million per breach.[169]

It is the Commission's view that the eSafety Commissioner's continuing work to develop and implement Industry Codes and Standards should provide Australia with a suitable regulatory environment to minimise the harms caused by the proliferation of pornography and other high-impact material. While the introduction of Industry Codes and Standards, along with online age-verification, may attract some controversy and criticism, it is evident that early exposure to pornography and other online environments can cause significant harm. The eSafety Commissioner has been working diligently in a rapidly evolving environment, and must be afforded ongoing support to continue critical work as a regulator, educator and responder at the national level.



Recommendation 134

The Australian government ensure that the eSafety Commissioner is appropriately resourced and supported to continue in its role as Australia's independent online safety regulator, so that it may best meet its mandate to minimise online harm and improve online safety for Australians into the future.

Recommendation 135

The South Australian government work with the eSafety Commissioner on the ongoing monitoring and evaluation of online and technology-facilitated harms experienced by children and young people, and to take reasonable steps to minimise that harm. These harms include but are not limited to:

a. access to pornography, particularly pornography depicting acts of domestic, family and sexual violence and criminal acts
b. recommender systems and algorithms that expose children and young people to harmful content
c. influencer content openly encouraging acts of domestic, family and sexual violence, and violence against women and children, such as some manosphere and incel content.

Strengthening South Australia's anti-discrimination and anti-vilification frameworks

While family violence can affect anyone, there are multiple social factors that create barriers for people to access services, support and safety. There are structural and systemic barriers caused by historic and ongoing discrimination sanctioned against certain groups, which have excluded them from services, government programs and equitable justice responses. Ageism, ableism, colonisation, criminalisation, homophobia, transphobia, poverty, racism, sexism, and other forms of discrimination can all increase the severity and lasting impacts of family violence.[170]

Current state

The Commission has been told that while domestic, family and sexual violence can occur in all cultures and communities and across all demographics, certain groups are disproportionately affected by violence due to intersecting forms of discrimination and structural inequality, such as racism, colonialism, ableism, ageism, homophobia and religious discrimination.

> **Rigid gender norms produce the attitudes that only cisgender and heterosexual expressions of sex, sexuality and gender are 'normal' and acceptable. Discrimination like homophobia, biphobia, transphobia, and intersexphobia targets those outside these norms, leading to stigma and violence. LGBTIQ individuals often face abuse within families due to beliefs that they are 'less than' or need correction, reinforced by broader gender inequalities and cultures of violence.**[171]

> **For migrant and refugee communities, racism, sexism and other forms of oppression and discrimination intersect to drive increased levels of gendered and racialised violence towards women from these groups.**[172]

> **Systemic discrimination interacts and compounds: women with disability experiencing DFSV can also be facing ableism and intersectional disadvantage (could be racism, sexism or more) in access to housing, in health services, in justice settings, in all aspects of life.**[173]

The National Plan states that violence against women and girls 'is a manifestation of inequality and discrimination based on gender, race and other power imbalances.'[174] It also states that the Australian government and state and territory governments have a role to play in ending violence, including through state and territory human rights and anti-discrimination bodies.[175]

The Commission's analysis of South Australia's anti-discrimination framework stemmed from a suggestion by its Advisory Group to consider whether South Australia had adequate anti-vilification laws to address gender-based hate speech. The Commission found that South Australia's laws are not only inadequate, but that South Australia's entire anti-discrimination and anti-vilification framework is outdated, fragmented and not remotely equipped to proactively address the intersecting forms of discrimination and vilification that contribute to domestic, family and sexual violence.

Australia has international obligations under various human rights instruments, of which non-discrimination and equality rights are central features.[176] Australia is a party to the 7 key international human rights treaties, each of which specifies the right to non-discrimination and Australia's obligations to prevent or provide protection against discrimination. Some of these treaties list grounds of discrimination, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.

The Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) specifically commits States Parties to condemn discrimination against women in all its forms,[177] and to take positive steps to eliminate all forms of violence against women.[178]

Australia's key legal mechanism to implement the rights enshrined within the CEDAW is the *Sex Discrimination Act 1984* (Cth), which makes it unlawful to discriminate against a person because of their sex, gender identity, intersex status, sexual orientation, marital or relationship status, family responsibilities, because they are pregnant (or might become pregnant), or because they are breastfeeding.[179] The Sex Discrimination Act also imposes a positive duty on employers to take measures to eliminate discrimination and sexual harassment.[180]

Australia has also endorsed the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP), which includes the 4 key principles of self-determination, participation in decision-making, respect for and protection of culture, and equality and non-discrimination.[181] The UNDRIP also specifically requires the taking of measures to guarantee that Aboriginal women and children are protected against all forms of violence and discrimination (Article 22.2). These principles are also reflected in the National Agreement on Closing the Gap.[182]

In South Australia, the legal mechanisms to guard against discrimination and vilification are set out in the *Racial Vilification Act 1996* (SA), the *Civil Liability Act 1936* (SA) and the *Equal Opportunity Act 1984* (SA).

Anti-vilification laws in South Australia relate to race only. The Racial Vilification Act creates a criminal offence to incite hatred or severe ridicule or contempt of a person or group of persons on the basis of their race. For prosecution to be commenced, the written consent of the South Australian Director of Public Prosecutions is required. A civil wrong of racial victimisation is also created under section 73 of the Civil Liability Act, whereby an act of racial victimisation – being a public act that incites hatred, severe ridicule or serious contempt of a person or group on the ground of their race – is actionable as a tort by the person who suffers a detriment resulting from the act of racial victimisation.

In 2018, researchers from La Trobe University found that gender is largely missing from anti-vilification laws across Australia, and in those jurisdictions that do criminalise hate speech on the basis of gender or gender identity, '[it] seems unlikely these laws would apply to hate speech against women on the basis of their gender alone'.[183] In relation to anti-discrimination laws, while all do specifically deal with gender, laws that apply to discrimination by employers, qualifying bodies, education authorities, providers of goods or services or accommodation providers do not cover acts of vilification by individuals outside such contexts.[184]

The article highlights research that draws a connection between 'spreading and reinforcing views of women as legitimate objects of hostility' and 'other forms of gender-based harm', noting that particular groups of women are more likely to be targeted with hate speech, including Indigenous women and lesbians, and that online forms of sexist speech and harassment are increasingly being recognised as a serious problem.[185]

In 2022, the Adelaide Law Review published a paper titled No Cases, No Worries? South Australia's Racial Vilification Laws and the Need For Reform. The paper noted that, at the time of publication, the anti-vilification laws under the Racial Vilification Act and the Civil Liability Act had 'not been engaged in the nearly 25 years since their enactment, which, unfortunately, is not reflective of an absence of racism in South Australia'. The paper commented that the 'kind of harm inflicted by racial hate speech' can be caused by speech directed at other attributes, such as 'gender, sexuality, disability, religion or ethnicity'.[186] The paper concluded by calling for reform to the current laws.

The laws protecting against discrimination are set out in the Equal Opportunity Act. The Equal Opportunity Act prohibits discrimination on the grounds of a number of protected attributes, including sex, sexual orientation, gender identity or intersex status, race, disability, age, pregnancy, caring responsibilities, and being, or having been, subjected to domestic abuse. Unlawful acts connected with domestic, family and sexual violence such as sexual harassment and conversion practices are also set out in the Equal Opportunity Act.

Since it was enacted in 1984, the Equal Opportunity Act has been reviewed only once. There have been amendments to the legislation throughout that time, either made in isolation or in response to particular issues or events, but no review of the legislative scheme as a whole. Similarly, South Australia's anti-vilification laws have not been subjected to any government-led review process since enactment in 1996. This is in contrast to the approach taken in other jurisdictions, with comprehensive reviews undertaken in Victoria in 2007, Queensland and Western Australia in 2022 and the commencement of a review in New South Wales in 2023.

Related to this issue is the South Australian Parliament's Social Development Committee's Inquiry into the Potential for a Human Rights Act for South Australia. The executive summary of the report included the following observations:

> **The Social Development Committee (the Committee) heard South Australia has a proud history of progressive social reform and has at times been a leader in Australia in realising rights for minority, marginalised and vulnerable groups within its borders.**
>
> **Over the past few decades South Australia's rights-based agenda has diminished and, as pointed out to the Committee, it is now an 'outlier' where human rights are concerned.**
>
> **The Committee received evidence that, there have been human rights breaches in this State and with few or no legislated protections to remedy breaches, there will continue to be inadequate justice for complainants. The Committee also heard, South Australia has not kept up with several of the other states and territories, namely Victoria, the Australian Capital Territory and Queensland, nor with the majority of other OECD countries and advanced democracies, in the progression of human rights and the modernisation of discrimination law.**
>
> **Some submissions claim, human rights in South Australia are only partially protected through various laws, which have numerous "gaps" and have been found to be "limited in scope and enforceability."**
>
> **These various laws are also 'lacking any consistent framework' or discourse to tie them together or to promote a broader community or public service understanding of their content and relevance to the lives of South Australians.**[187]

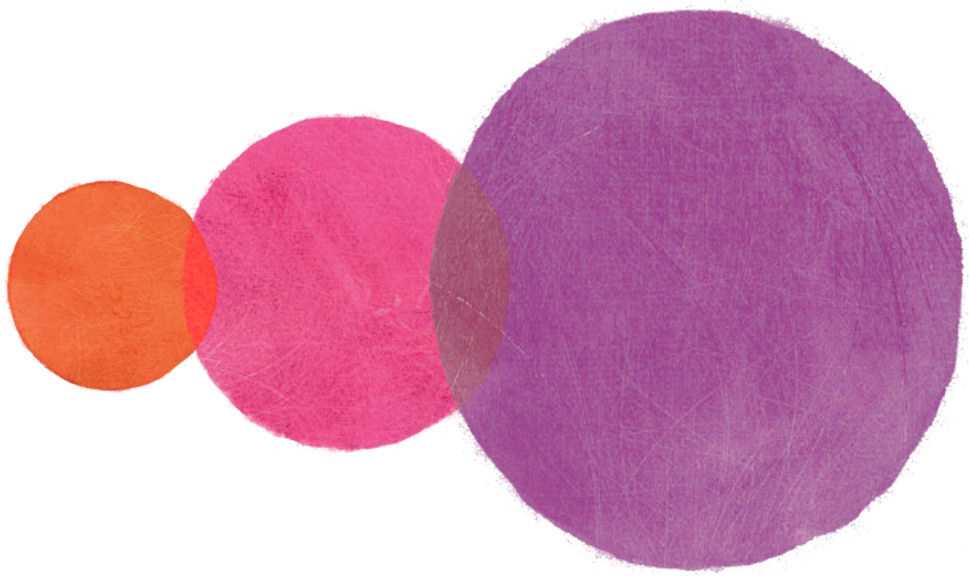
The Social Development Committee recommended that:

- The South Australian government consolidate the various rights and protections afforded to citizens in the many legislative instruments listed in the Committee's report into one comprehensive Human Rights Act.
- The government transition the Equal Opportunities Commission to a Human Rights Commission.
- The government conduct a comprehensive consultation with the South Australian Community on the model of Human Rights Act to be adopted.[188]

Future state

The South Australian government's submission acknowledges that addressing all forms of discrimination (including racism, transphobia, homophobia, ableism, classism, ageism and xenophobia) is critical.[189] Addressing the ongoing discrimination and structural inequalities faced by many South Australians requires strong anti-vilification and anti-discrimination frameworks, and a modern well-resourced regulator. It is arguable that South Australia has neither.

The South Australian government must resource and undertake a comprehensive review of South Australia's anti-discrimination and anti-vilification frameworks, with a focus on strengthening protections against all forms of discrimination and vilification. In the meantime, Equal Opportunity SA must be empowered and resourced to take a proactive approach to preventing and responding to discrimination and vilification across South Australia.



Recommendation 136

The Attorney-General resource and undertake a comprehensive review of South Australia's anti-discrimination and anti-vilification frameworks, with a view to modernising the frameworks to ensure that they provide robust and future-focused protections against all forms of discrimination and vilification.

Endnotes

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Chapter 8

Further reform

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Issues for further consideration

The Commission was unable to fully explore or do justice to all the valuable ideas and input received during its extensive engagement throughout South Australia and interstate. This chapter highlights key issues that, while not examined in sufficient depth to support formal recommendations, are nonetheless considered important. The Commission strongly encourages the Australian and South Australian governments to give these matters further consideration.

Death review function

The reestablishment of a dedicated death review function where there is a context of domestic and family violence is important. The contribution of a death review function to improvements in service responses to domestic, family and sexual violence was raised with the Commission. WSSSA noted that the lack of a:

> **“ dedicated formal mechanism … has left South Australia on the outer and unable to participate in and contribute to the Australian Domestic and Family Violence Death Review Network to the extent of other jurisdictions.**[1]



This gap was acknowledged by the South Australian government in its submission, which advised that while ‘South Australia remains a contributing member of the Australian Family and Domestic Violence Death Review Network’, a working group has been convened by DHS to ‘develop options for a renewed or new model for the systemic review of homicides due to domestic, family and sexual violence in South Australia’.[2]

The strengthening of death review processes was a recommendation of the Rapid Review, which found that ‘Australia has yet to include suicide related to DFSV-victimisation in homicide data’. It recommended that the Australian and state and territory governments initiate ‘an urgent inquiry into the relationship between DFSV victimisation and suicide, with a view to developing a methodology for accurate counting of the DFSV death toll’.[3]

Death review in the context of domestic, family and sexual violence is an essential government function, and the Government Steward should have responsibility for developing a new death review function. Consideration should also be given to the inclusion of suicides within its scope. There is a need to consider the many different models that could be implemented, both across Australia and internationally. Example models to be explored could include South Australia’s current approach to reviews of child deaths and serious injuries under the *Children and Young People (Oversight and Advocacy Bodies) Act 2016* (SA), interstate Coroners Court co-location models, and the recent work undertaken in Scotland to develop a Domestic Homicide and Suicide Review Model.

Intervention orders

As comprehensively discussed in Chapter 5, intervention orders can play a critical role in keeping victim-survivors safe and holding people who use violence accountable. The inputs that the Commission received about the intervention order system and how it can be made more effective were considerable. This section outlines 3 further areas of reform that should be considered by the South Australian government.

Service of intervention orders

In developing the victim-centred information mechanism recommended in Chapter 6, the South Australian government, CAA and SAPOL should also consider how best to ensure that victim-survivors are notified whenever an intervention order is served on the person using violence.

In its submission to the Commission, Uniting Communities SA identified an issue with the service of intervention orders:

> **"It is also vital that the protected person/s are notified when a defendant is being served with an IO (or shortly after the defendant has been served) so the protected person/s can take steps to ensure their safety. This often does not occur, putting at risk the safety of the protected person/s.**[4]

This issue was discussed in the Powerful Interventions Report, which recommended that police officers should 'notify a victim survivor in advance of service of Intervention Orders on a defendant'.[5]

The Commission understands that victim-survivors are generally informed when an intervention order is served on the person using violence; however, there are instances where notification can be overlooked. As highlighted in Chapter 6, a lack of timely and up-to-date information about the progress of matters can leave victim-survivors exposed to further danger.

Submission from the Public Advocate

The use of the law to protect people who may have a particular vulnerability to exploitation or abuse is crucial. The Public Advocate raised the potential need for reform regarding the position of a person under guardianship who may benefit from the protection of an intervention order, but who may be unwilling or unable to report domestic, family and sexual violence to SAPOL.[6] The submission referred to a test case with SAPOL and WSSSA.

The Government Steward should work with the Public Advocate to understand the outcome of the test case when it is known, and identify any potential reforms that may be needed to the intervention order system.

Legal representation for private intervention order applications

The issue of legal representation for respondents to private applications for intervention orders was brought to the Commission's attention in listening sessions and raised by Ms Coleiro of the Women's Domestic Violence Court Assistance Service during Day 6 of public hearings. In its submission to the Commission, the Law Society also stressed the importance of both parties being able to obtain legal advice for family violence hearings more generally.[7]

Ms Colerio explained that people charged with criminal offences who are subject to an associated intervention order may, subject to eligibility criteria, be able to obtain legal representation through the Legal Service Commission, but there is no similar scheme for respondents to private intervention orders. The result is that while an applicant is usually able to obtain assistance and representation from the Women's Domestic Violence Court Assistance Scheme (WDVCAS), the respondent must pay for private legal representation or proceed unrepresented.[8]

Ms Coleiro described this as a "really big gap". In her experience, unrepresented respondents frequently did not appear to understand the process and seemed aggrieved by it.[9] It was her view that these matters could be resolved more quickly if respondents were legally represented at an early stage.[10]

It seems that representation could not only provide efficiencies, but also reduce trauma caused to victim-survivors in making these applications and attempting to agree final conditions. A service for legal advice for respondents to private intervention order applications should be costed, but it is not anticipated that it would be substantial. The provision of such a service warrants further consideration by the South Australian government.

Contact from custody

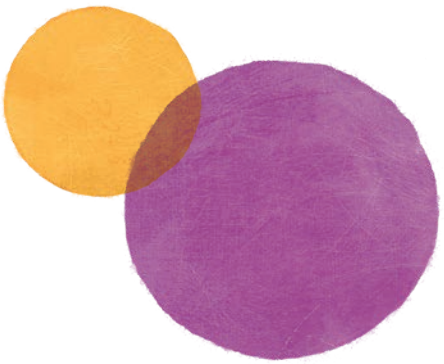
The issue of people who use violence contacting victim-survivors from custody, usually in contravention of intervention orders or bail agreements, was raised in several listening sessions. Significantly, this contact often involves continued emotional or psychological abuse and coercive control, with pressure being exerted on victim-survivors to withdraw criminal charges and intervention orders.

This was an important topic under consideration by the South Australian Coroner in the Inquest into the death of Henry Shepherdson and Kobi Shepherdson.[11] In that matter, Mr Shepherdson called his partner 149 times from custody, exerting pressure on her to withdraw the criminal charges against him. These calls were in contravention of an intervention order in place against him. He also attempted to send letters to her, which were intercepted. SAPOL was not aware of either the phone calls or the letters.

Findings from the inquest have not yet been delivered, but this contact from custody was a central issue. For these reasons, the Commission has not made any specific recommendations about it. However, once the Coroner's findings have been delivered, the Government Steward must be tasked with collaboration with the Department for Correctional Services to ensure that adequate safeguards are in place to restrict people within custody from contacting victim-survivors in contravention of intervention orders or bail agreements.

Domestic violence evidence-in-chief

The underutilisation of DVEC in South Australia is a missed opportunity to provide victim-survivors with a reporting mechanism that has been found to be more trauma informed, accessible, efficient, impactful and successful than written statements. It is unfortunate these provisions remain underutilised in South Australia. The Commission urges the Government Steward to lead a multi-agency working group including SAPOL and courts to identify the barriers to the use of DVEC and ways to overcome those barriers. It may be that investment in technological solutions, such as voice-to-text transcription technology for police body-worn video, could reinvigorate the use of these important safeguards for victim-survivors.



DVEC provides police and victim-survivors with an alternative to preparing written statements for domestic and family violence–related offences or intervention order applications. DVEC was introduced in South Australia in 2018, drawing from the successful model already in operation in New South Wales since 2015. Some of the aims of DVEC are to:

- reduce the number of times victim-survivors will be required to give evidence in court
- capture admissible and contemporaneous evidence of the victim-survivor's experiences
- reduce the capacity of defendants to intimidate victim-survivors into changing or withdrawing their evidence, and to increase the rate of guilty pleas and convictions for domestic and family violence offences.[12]

In New South Wales, DVEC is used in 40% of domestic and family violence incidents that result in legal action.[13] Successive evaluations of the use of DVEC in New South Wales demonstrate that DVEC has had positive impacts on the rates of both guilty pleas and convictions in contested cases, and has also served to reduce withdrawal rates.[14] Police and victim-survivors in New South Wales found DVEC to be safer and more expedient, especially in regional and remote settings,[15] as well as more compelling in court,[16] with one study finding 'wholesale satisfaction of officers and many complainants with DVEC, principally due to its efficiency but also crime scene transparency'.[17]

Despite the success of DVEC in New South Wales, its uptake has stalled in South Australia. The Commission heard that this was due to a combination of inadequate facilities for the playing of DVEC footage in courts, time pressure on Family Violence Lists, and some judicial officers declining to accept a DVEC without also being provided with a transcript by police (despite this not being a requirement under the legislation).

Ground rules hearings

Generally speaking, at a 'ground rules' hearing the court will make orders about the way in which proceedings, and more specifically the questioning of a witness, are to be conducted. The Commission heard evidence about how these hearings are effectively used in the Australian Capital Territory when witness intermediaries are involved.[18]

In South Australia, the *Evidence Act 1929* allows for directions to be given in criminal trials about the manner, duration and type of questions that may be asked of a witness in a pre-trial special hearing (section 12AB)[19] and of vulnerable witnesses giving evidence in a trial for child sexual offences (section 13A). There are no provisions for such directions to be given in trials for sexual offences against adults. There is no explicit procedural step requiring a ground rules hearing to be conducted. Instead, the Evidence Act permits the court to give these directions at any time, including at the pre-trial special hearing itself.

The SA Consent Review looked at whether directions like those in sections 12AB and 13A of the Evidence Act should be available in matters involving sexual offences against adults.[20] As outlined in Chapter 5, the South Australian government is considering the feedback received from consultation. The South Australian government should consider the results of this review, along with the potential use of ground rules hearings more broadly, once it has responded to the Commission's recommendations relating to communication partners (Chapter 6). Ground rules hearings could also serve as a tool to ensure that the recommended training and education around myths and misconceptions is carried into the court room and acted upon in practice (Chapter 3).

Vulnerable witness interviewing

The implementation of a new integrated response model may present an opportunity to improve the availability, consistency and quality of South Australia's statewide vulnerable witness interviewing capabilities. Specialist police and child-focused practitioners working in integrated response teams will be well positioned to add place-based expertise in interviewing vulnerable adults as well as children and young people. The Commission understands there is a gap in the availability of forensic interviewing of younger children in regional and remote South Australia by CPS. While the proposed statewide CPS Model of Care may eventually overcome this issue, building the capacity of child-focused practitioners within the integrated response model, along with specialist police, may well be more expedient. Child-focused practitioners may be well placed to absorb some of the forensic interviewing demand, avoiding the need for children to travel to metropolitan CPS locations.

The Government Steward should coordinate a review of South Australia's vulnerable witness interviewing provisions and statewide capacity. This should leverage integrated response teams to ensure statewide access to consistent, expert vulnerable witness interviewers. This will likely necessitate an exploration of:

- how integrated response teams will intersect with the Interagency Code of Practice
- the availability of evidence-based training to support consistent and quality vulnerable witness interviewing
- the effectiveness of the current legislative and regulatory environment for vulnerable witness interviewing.

Pets and animals

Animal abuse can feature in domestic and family violence. Animal abuse also has a well-established relationship with the use of violence against people.[21] Violence against pets and animals as a form of domestic and family violence featured in several inputs to the Commission, indicating that the issue requires further consideration beyond its relationship with housing, homelessness and as a barrier to escaping violence. While animal abuse is criminalised in South Australia under both the *Animal Welfare Act 1985* (SA) and the incoming *Animal Welfare Act 2025* (SA), both Acts are silent on animal abuse in the context of domestic and family violence. Given the Royal Society for the Prevention of Cruelty to Animals (RSPCA) is responsible for the majority of animal welfare enforcement activity in South Australia, most animal-focused and person-focused investigations appear to occur in silos.

While South Australia's current DVRA has a risk factor regarding animal abuse, the Commission is unaware of any deliberate coordination between SAPOL and the RSPCA for domestic and family violence–related animal abuse. There appears to be an opportunity to improve coordination and information sharing between SAPOL and the RSPCA so that the RSPCA is equipped to identify and refer domestic and family violence, and SAPOL is equipped to identify and refer animal abuse. Improved coordination in the context of domestic and family violence may help to close the loop on people using animal abuse as a means of intimidation and control, and provide another avenue to hold them accountable for their behaviour. To that end, SAPOL should consider the development of a memorandum of understanding between SAPOL and the RSPCA regarding the roles and responsibilities of each in identifying, referring and responding to domestic and family violence–related animal abuse.

Interpreters

An overall lack of interpreters within the context of the justice system for all languages other than English, including Aboriginal languages, was identified as a significant system gap. Access to interpreters is not a new issue – this gap has been identified in previous reports on the justice system such as ALRC Report 133, Inquiry into the Incarceration Rate of Aboriginal and Torres Strait Islander Peoples, which recommended that state and territory governments work with relevant Aboriginal and Torres Strait Islander organisations to establish interpreter services within the criminal justice system where needed, and monitor and evaluate their use.[22] More recently, ALRC Report 143 noted the persistent nature of this issue, and that 'the shortage of interpreters is especially acute for First Nations people (including in regional and remote areas), and for languages that are new and emerging in the Australian context'.[23]

The Commission supports recommendation 33 of ALRC Report 143 (reproduced here) with an expansion to include domestic and family violence matters as well as sexual violence matters. The South Australian Attorney-General should consider advocating for action on an expanded recommendation at the Standing Council of Attorneys-General.

ALRC Report 143, recommendation 33:

a. develop a strategy to address the national shortage of interpreters to assist complainants of sexual violence in the criminal justice system; and
b. coordinate the Australian, state and territory governments to:
    i. ensure interpreters are consistently, efficiently, and appropriately engaged by justice agencies for complainants of sexual violence, from the point of police reporting to finalisation of the criminal process (including considering the mechanisms for engagement of interpreters by courts and tribunals as identified by the Judicial Council on Cultural Diversity in the 'Recommended National Standards for Working with Interpreters in Courts and Tribunals');
    ii. develop national standards for working with interpreters on sexual violence matters at the police and prosecution stage (in consultation with relevant stakeholders, including police agencies, interpreting agencies and services, people who have experienced sexual violence, and Aboriginal Community Controlled Organisations); and
    iii. provide for vicarious trauma support and training in trauma-informed principles for interpreters who work with complainants of sexual violence.[24]

Sex workers

The Commission heard from the Sex Industry Network Incorporated (SIN) that people who work in the sex industry, and who are experiencing domestic, family and sexual violence, often feel dehumanised and judged when seeking support. This is particularly problematic in jurisdictions such as South Australia where sex work is still criminalised.

The push to decriminalise sex work has a long history in South Australia, failing to achieve majority support in the South Australian Parliament despite the introduction of multiple Bills over the years to do so. The most recent Bill, the Statutes Amendment (Decriminalisation of Sex Work) Bill 2025, was introduced in the South Australian Parliament on 2 April 2025 by the Hon Tammy Franks MLC and then later withdrawn on 30 April 2025 with the Hon Ms Franks explaining that:

> **"I have brought this bill before this place to ensure that it remains beyond my time here as a suggestion towards a compromise. It is a compromise that has been negotiated with those in the Labor Party and in the labour movement that affords workers rights and sees us take these steps forward for workers, with a review process and a gradual, incremental change rather than full decriminalisation in one swoop, as I would have preferred.**

> **With that, however, I will move that the bill be withdrawn. I simply wanted to leave it here. I do not want it in my name for the future, but I do want the good work of the compromise and negotiations that have gone on now for years to develop this bill to be available for future members of this parliament."**[25]

The Commission recognises that sex work has been decriminalised in other jurisdictions and that criminalisation, and the resulting stigma that is attached to sex work, creates barriers to reporting violence in the sex industry. The Commission encourages the South Australian government and South Australian Parliament to continue to work on this issue.

In the meantime, the myths and misconceptions regarding sex work and domestic, family and sexual violence should be included in the work called for in Chapters 4 and 6. In undertaking this work, peak bodies such as SIN should be consulted to ensure that the stigma and misconceptions currently associated with sex work are appropriately addressed.

Universities

Higher education institutions have a duty of care and an important role to play in creating safe environments for students and staff. Chapters 1 and 4 highlighted the significant rate of under-reporting of sexual violence in South Australia revealed by the PSS and the National Student Safety Survey, with Chapter 4 recommending an ongoing alternative reporting pathway for people who have experienced sexual violence in South Australia, developed in consultation with Yarrow Place and SAPOL.

The Commission met with representatives from the university sector who spoke about the need for a skilled workforce and proper resourcing in universities to support students who have experienced sexual violence.[26] The previous Australian government introduced legislation to establish a mandatory National Higher Education Code to Prevent and Respond to Gender-based Violence to set best-practice standards and requirements that higher education providers must meet to effectively prevent and respond to gender-based violence on university campuses. At the time of writing, that legislation is before the new Parliament.

Under the National Higher Education Code, universities will be required to demonstrate a whole-of-university approach to responding to and preventing gender-based violence, for both staff and students. This approach must address a number of standards and requirements including that 'study, work, social and living environments are safe, respectful and inclusive for staff and students' and that 'providers address the factors that drive and contribute to gender-based violence'.[27]

Further work is needed within the university sector to ensure that universities are proactive in addressing domestic, family and sexual violence and ensure that there are seamless connections and referrals for university students experiencing violence to Yarrow Place and the new central entry-point recommended in Chapter 4.

Military and veterans' families

The Commission received submissions addressing domestic, family and sexual violence within military and veterans' families. Submissions outlined research indicating that rates of this violence tend to be higher in military than in civilian families, along with the crucial need to understand the complexities of domestic, family and sexual violence in military families, and the links with mental health issues and alcohol use.[28]

The Royal Commission into Defence and Veteran Suicide specifically considered family and domestic violence in Volume 6 of its Final Report.[29] The report outlined the work of 'Defence' (collectively the Department of Defence and the Australian Defence Force) in developing the Defence Strategy for Preventing and Responding to Family and Domestic Violence 2023–2028. Recommendation 102 of the Royal Commission is to 'implement and improve upon' this Defence Strategy. The Royal Commission included specific components that should be addressed in addition to, and as part of, implementation.

The Australian Government Response indicated that the government agreed with Recommendation 102.[30] Defence has since released an Action Plan for the Defence Strategy, which incorporates elements of the Royal Commission's recommendation.[31]

Significant work in this area has been, and continues to be, undertaken by the Australian government. The Commission encourages the South Australian government to consider the recommendations outlined above and their implementation in the context of the operation of the South Australian domestic, family and sexual violence systems for military families.

The South Australian government should also work with stakeholders to identify particular issues relevant to the military community and identify opportunities to partner with this community and their representatives. For example, there may be an opportunity to co-design an awareness campaign with veterans (see Chapter 3), available supports for military families could feature in the statewide referral network (Chapter 6) and those working in military and veterans' services should receive domestic, family and sexual violence education and training to enable them to respond to disclosures appropriately.

Foundational supports

The Commission is aware of the work underway between the Australian and state and territory governments to design and implement Foundational Supports for people with disability, along with their families and carers. Foundational Supports are described by the Australian government as 'specific supports outside the National Disability Insurance Scheme [that are] in addition to services offered by mainstream systems, like education and health'.[32] The implementation of Foundational Supports through new and reformed programs and services represents an opportunity for governments to embed domestic, family and sexual violence awareness and expertise across the Foundational Supports workforce. It also represents an opportunity to strengthen disability inclusion in main stream settings through general, specific and targeted disability supports. The South Australian government should consider how the implementation of Foundational Supports could be harnessed in this way.

Early childhood education and care

In response to the Royal Commission into Early Childhood Education and Care, the South Australian government is establishing 20 integrated hubs across South Australia by 2032.[33] As with Foundational Supports, investment in new models of service delivery provides an opportunity to increase domestic, family and sexual violence awareness across a broader workforce. There is a particular opportunity available to the South Australian government to ensure that each integrated hub includes a safety practice lead within the staffing structure who is skilled in identifying safety risks and managing responses to those risks, including connecting families or individuals to safety services.

The South Australian government should consider how other investments across the early childhood education and care system can be leveraged to increase domestic, family and sexual violence awareness and to connect families at risk of, or experiencing domestic, family and sexual violence with appropriate services.

This issue is linked with the Australian government's replacement of the Child Care Subsidy Activity Test from January 2026 to 'guarantee at least 3 days of subsidised early childhood education and care each week for children who need it'.[34] This is an important reform that will allow for more families to access early education and care. Access will connect more families to services, potentially increasing early intervention opportunities, and will also provide much-needed access for victim-survivor single-parent families who were previously unable to access early education and care due to the activity test barrier.

Child protection legislation

Professor Bromfield urged the Commission to consider the legislated threshold for child protection reports in other jurisdictions, noting that South Australia's threshold does not include an element that could potentially change the way in which domestic, family and sexual violence–related reports are made.

The *Children, Youth and Families Act 2005* (Vic) states that a child is in need of protection if the child has suffered, or is likely to suffer, significant harm as a result of physical injury 'and the child's parents have not protected, or are unlikely to protect, the child from harm of that type'.[35] This second factor – determining whether a child's parents have protected or are likely to protect the child from that type of harm – could allow for a more nuanced consideration of whether a child is likely to suffer harm in circumstances where a protective parent is disclosing domestic, family or sexual violence and seeking support for themselves and their children.

A similar threshold is set out in the Queensland legislation, whereby a reportable suspicion is 'a reasonable suspicion that a child has suffered, is suffering, or is at an unacceptable risk of suffering, significant harm caused by physical or sexual abuse and may not have a parent able and willing to protect the child from the harm'.[36]

The thresholds set out in the South Australian legislation do not include any similar qualification to those in the Victorian or Queensland Acts. In practice this can mean that, in South Australia, even when a protective parent is disclosing domestic, family and sexual violence in order to achieve safety for themselves and their children, the person receiving that disclosure will need to turn their mind to making a child protection report despite the protective parent's evident willingness to protect their children from risk or significant harm.

The South Australian Minister for Child Protection should consider whether an amendment to include this qualification should be pursued in South Australia.

Media

In forming its recommendations for the development of a national standard for responsible media reporting on domestic, family and sexual violence, the Commission was made aware of the 2012 Report of the Independent Inquiry into the Media and Media Regulation (the Media Regulation Report) by the Hon Raymond Finkelstein QC. The Media Regulation Report found that existing mechanisms were insufficient to hold the media accountable for their reporting and recommended the establishment of a News Media Council to set journalistic standards in consultation with the industry, and handle complaints made by the public when those standards are breached.[37]

The Commission understands that this recommendation has not been implemented. This proposed reform may warrant renewed consideration by the Australian government.



Change through procurement practices

The Australian Services Union's and SA Unions' written submissions referred to the capacity for South Australian government procurement processes to include gender equity requirements within standard terms, and requirements about domestic, family and sexual violence awareness training and awareness.[38] The Government Steward should be tasked with exploring this opportunity with Procurement SA within the Department of Treasury and Finance.

Workforce – reverse mentoring

In its submission to the Commission, Embolden recommended that specialist domestic, family and sexual violence services be resourced to develop and implement training and professional development programs for survivor advocates, as well as leverage the existing strengths and skills of the sector through collaboration.[39]

The Commission is aware of programs currently underway in Victoria that are based on the Wisdom in Practice mentoring model.[40] The Commission met with Wisdom in Practice founder, Geraldine Bilston, and considered the model an innovative approach to developing victim-centred approaches within specialist domestic, family and sexual violence services. The importance of a skilled, trauma-informed workforce was discussed in Chapter 2. Workforce training and development options like reverse mentoring could be considered when developing appropriate education and training opportunities for domestic, family and sexual violence service providers.

Rental bonds

The Commission often heard about the barriers to entry to the private rental market for victim-survivors. The South Australian government, through the SA Housing Trust, offers the Private Rental Assistance Program, which provides financial assistance to eligible customers who either have difficulty meeting the upfront costs associated with renting privately, or need help to maintain accommodation.[41] Eligibility to access the program may be granted in special circumstances (including domestic abuse, or a housing crisis in which the person must leave due to a relationship breakdown), or if someone is experiencing temporary financial hardship due to domestic abuse. The types of assistance may include bond guarantees or grants to cover the costs of rent in advance or in arrears.

Desktop research conducted by the Commission identified other supports offered by interstate jurisdictions to people experiencing domestic, family and sexual violence, including:

- bond loan applications being automatically approved
- assistance being provided to find a private rental property
- flexible funding to community organisations to provide rental assistance, addressing past rental debts that could affect future rental applications, addressing repair costs for rental properties damaged due to domestic or family violence, covering rental arrears to prevent homelessness, or acquiring essential household appliances.[42]

Births, deaths and marriages

The Commission heard that domestic, family and sexual violence can have specific impacts in relation to interactions with the *Births, Deaths and Marriages Registration Act 1996* (SA) (BDMR Act). Section 15 of the BDMR Act provides that parents of a child are jointly responsible for the registration of a child's birth; however, the registrar may accept a birth registration statement from one parent if satisfied that it is impossible, impracticable or inappropriate for the other parent to join in the application whether because of their death, disappearance, ill health or unavailability, or the need to avoid unwarranted distress or for some other reason.

Births, Deaths and Marriages has developed a policy for acceptance of a birth registration statement by one parent in situations involving domestic, family or sexual violence on the basis that to require the other parent to join the application may cause 'unwarranted distress'. Evidence of the circumstances of domestic, family or sexual violence is required and can include police reports, court documents or orders, or a letter of support from a qualified support worker, health practitioner, abuse support service or legal representative.[43]

The Commission heard that there can be circumstances where the parent experiencing domestic, family and sexual violence does not have the evidence required by the Births, Deaths and Marriages policy and that this can cause further distress or hardship for victim-survivors.

A similar issue was raised in relation to change-of-name applications. At present, section 25 of the BDMR Act provides that an application to change a child's name can be made by one parent only if they are the sole parent named on the birth registration, there is no other surviving parent, or SACAT approves the proposed change of name. A parent who is trying to escape domestic, family or sexual violence and wishes to change the child's name must either seek the consent of the other parent or apply to SACAT, which will generally result in the other parent being notified.

These issues should be considered as part of the audit of state systems and services recommended in Chapter 5.

Health care

Mental health treatment plans

In Chapter 6, both the importance and accessibility of therapeutic supports, such as mental health care, were discussed. While this report was mostly concerned with levers available to the South Australian government through SA Health, it is important to address the considerable role of the Australian government in providing affordable access to mental health care. Many South Australians experiencing or using violence rely heavily on mental health treatment plans to access subsidised sessions with non-government and private providers. The Commission heard that, even with access to Medicare subsidies, many victim-survivors found the cost of ongoing therapeutic care extremely burdensome, if not entirely prohibitive.

There has been ongoing debate around the number of subsidised sessions that should be available through mental health treatment plans each calendar year. This debate emerged after the cap was briefly raised to 20 sessions during the COVID-19 pandemic, before reverting to 10 sessions in late 2022. This was criticised by mental health professionals as putting vulnerable people at risk and having the potential to lead to preventable deaths. The Australian government stated that raising the cap from 10 sessions to 20 was leading to inequitable access to finite mental health providers.[44] The Australian Psychological Society has continued to call for reinstating the increased cap, at least for people who are at risk of or experiencing complex mental health issues.[45]

The Commission acknowledges the complexity of the issue of post-pandemic demand outpacing supply of trained psychologists in both public and private practice.[46] Governments must further explore how best to meet the unmet therapeutic needs of people experiencing and people using domestic, family and sexual violence, including children and young people in their own right. It may be that this work could be led by the national Domestic, Family and Sexual Violence Commission in collaboration with the Australian and state and territory governments.

Longer Medicare consults

The Commission has heard that short consults with GPs can be insufficient to identify and manage adequately the healthcare needs of people experiencing or using domestic, family and sexual violence.

As of May 2025, there was no dedicated Medicare Benefits Schedule (MBS) item number specifically for the identification, management or treatment of domestic or family violence in general medical practice. The Commission acknowledges the complexities associated with the introduction of a MBS item for longer consults for people experiencing or using domestic, family and sexual violence, including the need to maintain privacy for victim-survivors, but considers this issue important enough for further work to be conducted. This may be a second area of work that could be led by the national Domestic, Family and Sexual Violence Commission.

South Australian alcohol and other drug services

The intersections between alcohol and drug use and domestic, family and sexual violence are explored briefly in Chapter 7, with the emphasis being on the use of existing regulatory levers. While alcohol regulation should be pursued as a matter of urgency, there is also a need to address the availability of alcohol and other drug (AOD) recovery services for people using and experiencing violence in South Australia. This need is affirmed in the submission from the South Australian Network of Drug and Alcohol Services (SANDAS), who wrote:

> **“ The AOD sector is keenly aware of the co-occurrence of domestic, family and sexual violence and the shared clients between the two sectors. SANDAS members support the development of a more comprehensive approach to understanding and addressing family and domestic violence (FDV) across the broader welfare system.**[47]

As noted in Chapter 5, this corresponds with an opportunity to better integrate the Abuse Prevention Program, along with the proposed domestic and family violence diversionary scheme, with co-occurring programs to address other criminogenic needs such as substance misuse.

The availability of AOD services featured in the 2023 Review of Rural Mental Health Services in South Australia (discussed in Chapter 6), which noted the importance of integrating mental health supports with alcohol and drug recovery.[48] The Review found that provision of existing AOD services such as the Drug and Alcohol Service South Australia (DASSA) 'is inadequate to meet the needs of rural South Australians'.[49]

When engaging with AOD services and advocacy bodies, the Commission was advised that South Australia's existing Drug Diversion Initiative was once considered nation leading, however had since been curtailed through legislative reform. This issue is explored in the research paper Turning gold into lead: The troubling fate of the police drug diversion initiative.[50] The paper found that South Australia's Drug Diversion Initiative resulted in a 98% completion rate before the legislative reforms, with a 'dramatic collapse' of the initiative after the 2018 reforms leading to a reduction in overall diversion rates by over 75%.[51]

The South Australian government should examine the Drug Diversion Initiative with a view to restoring it to a nation leading scheme. At the same time, consideration should be given to the initiatives' suitability as a partner program for the Abuse Prevention Program and/or the domestic and family violence diversionary scheme (Recommendations 75 and 83). In relation to the lack of availability of AOD services in regional and remote South Australia, the Commission once again draws the South Australian government's attention to the Review of Rural Mental Health Services in South Australia. It may be that both DASSA and ACCO-led AOD services require a resourcing uplift in South Australia to allow for better integration with both domestic, family and sexual violence services and with mental health services.

Adelaide and Country South Australia Primary Health Network pilots

The Commission engaged with project officers from the Adelaide PHN in relation to a domestic, family and sexual violence primary care responses pilot program currently being expanded to South Australia. The expansion of the pilot was funded by the Australian government in the 2022–23 budget and is intended to run until June 2026. The pilot aims to introduce training and resources on domestic, family and sexual violence to healthcare providers, as well as supporting coordination and referral pathways with existing specialist domestic and family violence services.[52]

There is an opportunity for the Government Steward to engage with the project officers responsible for the PHN domestic, family and sexual violence primary care responses pilot to ascertain its progress and any results, and to learn from any evaluations of the pilot regarding coordination and referral pathways between healthcare providers and domestic and family violence services.



Aboriginal Social and Emotional Wellbeing Centre

In early 2025, the Commission became aware of a joint Australian and South Australian government commitment to jointly fund an Aboriginal Social and Emotional Wellbeing Centre in Adelaide. The purpose of the centre is to provide culturally safe mental health and wellbeing support, guidance and resources for all ages, with access to traditional, spiritual, holistic, healing, medicines and wellbeing practices.[53]

In May 2025, the Commission sought further information from SA Health about the scope of the Aboriginal Social and Emotional Wellbeing Centre. At the time of the request, the procurement process to identify the preferred provider(s) for the centre was underway. The Commission received information about the public engagement process and the intended scope of the centre, with further information being understandably restricted due to the procurement.

The information received by the Commission in May 2025 suggested an approach that could, if implemented in consultation with Aboriginal communities and with and by ACCOs, provide a much-needed service focused on, among other matters, the healing and recovery of Aboriginal people. The Commission's Aboriginal Partnership Committee agreed with the concept as outlined to the Commission by SA Health in May 2025, as well as the need for more centres of this nature in more places throughout South Australia, particularly in regional and remote areas. The Commission urges SA Health to engage with the Women's and Family Safety Partnership Committee (discussed in Chapter 2) to discuss the establishment of further centres.

Restorative justice

The Commission heard some support for restorative justice approaches and thus explored adult restorative justice schemes for domestic, family and sexual violence, such as those operating in the Australian Capital Territory and Queensland. As noted in Chapter 3, the Commission prioritised the identification of mechanisms to make the existing justice system work better, but is mindful of the need to consider formalised restorative justice alternatives.

Following implementation of the Commission's recommendations concerning the justice system set out in Chapters 3, 5 and 6, it would be open to the South Australian government to consider piloting a restorative justice scheme for domestic, family and sexual violence, or sexual violence only. Potential options for a restorative justice pilot could be linked with the alternative reporting pathway for sexual violence identified in Recommendation 51, or with the expanded Abuse Prevention Program and pilot diversionary scheme. Any restorative justice pilot would need to give due regard to the needs and safety of victim-survivors, and should take into account evaluations of restorative justice programs in the Australian Capital Territory and other jurisdictions.

Non-disclosure agreements

The inappropriate use of non-disclosure agreements (NDA) in workplace settings is an ongoing issue which featured in some input to the Commission. The Working Women's Centre wrote that 'NDAs are used systematically in [domestic, family and sexual violence] cases and can have the effect of silencing and further traumatising victim-survivors and protecting perpetrators'.[54] NDAs can in some instances also be used to protect problem workplaces from scrutiny. This runs counter to the need to afford agency to victim survivors, as well as the need to keep people using violence accountable and in view.

The use of NDAs in the context of workplace sexual violence featured in the recent Australian Human Rights Commission report Speaking from Experience: What needs to change to address workplace sexual harassment.[55] The report found that 'there was a strong sense that [NDAs] protect harassers and organisations, rather than support victim-survivors', and that NDAs 'frequently create isolation, prevent closure, and undermine the transparency essential for genuine accountability'.[56] As a result of its findings, the Australian Human Rights Commission recommended that the Australian government amend the *Sex Discrimination Act 1984* (Cth), along with relevant industrial laws to restrict the use of confidentiality and NDAs in workplace sexual harassment cases.[57] The Commission supports the Australian Human Rights Commission's ongoing work to address workplace sexual violence, and views the recommendation to restrict the use of NDAs in workplace sexual harassment cases as sensible.

Faith leaders

In the course of its inquiry, the Commission attended a gathering of multicultural faith leaders, organised through the Multicultural Communities Council of South Australia, who recommended faith leader engagement in their submission to the Commission.[58] The Commission was advised this was the first time a meeting of multifaith leaders had been convened on the topic of domestic, family and sexual violence. This was an important meeting, because '[l]eaders in faith communities have a powerful influence and role in building and promoting respectful relationships, influencing gender equality and providing support to those who are experiencing DFSV'.[59] The pivotal role of faith leaders has been explored by the Victorian Royal Commission into Family Violence, the National Plan, and Our Watch's Change the Story.

During the meeting, the Commission heard that faith leaders have influence and trust in their communities in South Australia. It was suggested that this could be utilised by the South Australian government through the establishment of a faith leaders' body and the co-design of training programs for faith leaders to contribute to the prevention of domestic, family and sexual violence within their communities. The Commission supports the convening of further meetings of this type, and notes the potential role of the South Australian government in supporting this to occur.

Endnotes

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6 Submission #355: Office of the Public Advocate South Australia, p 12.
7 Submission #141: Law Society of South Australia, pp 5 and 48.
8 Public Hearing transcript: Coleiro, C, 26 February 2025, p 17.
9 Public Hearing transcript: Coleiro, C, 26 February 2025, pp 12 & 16-17.
10 Public Hearing transcript: Coleiro, C, 26 February 2025, p 16.
11 Coroners Court of South Australia, Inquest into the death of Henry Shepherdson and Kobi Shepherdson commencing 11 November 2024.
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16 Ibid, pp 12-13.
17 Ibid, p 12.
18 Public Hearing transcript: Cilesio, L, 4 March 2025.
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ROYAL COMMISSION
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