

ANROWS

AUSTRALIA'S NATIONAL RESEARCH
ORGANISATION FOR WOMEN'S SAFETY
to Reduce Violence against Women & their Children

RE: Draft NSW Domestic and Family Violence Plan 2022-2027 and draft NSW Sexual Violence Plan 2022-2027

2 September 2022

Dear Secretary Tidball

ANROWS thanks the NSW Department of Communities and Justice for the opportunity to respond to the draft *Domestic and Family Violence Plan 2022-2027* and draft *Sexual Violence Plan 2022-2027*.

ANROWS is an independent, not-for-profit company established as an initiative under Australia's *National Plan to Reduce Violence against Women and their Children 2010-2022* (the National Plan). Our primary function is to provide an accessible evidence base for developments in policy and practice design for prevention and response to violence against women, nationally. Every aspect of our work is motivated by the right of women and their children to live free from violence and in safe communities. We recognise, respect and respond to diversity among women and children, and we are committed to reconciliation with Aboriginal and Torres Strait Islander Australians.

Primary funding for ANROWS is jointly provided by the Commonwealth and all state and territory governments of Australia. ANROWS is also, from time to time, directly commissioned to undertake work for an individual jurisdiction, and successfully tenders for research and evaluation work. ANROWS is registered as a harm prevention charity and deductible gift recipient, governed by the Australian Charities and Not-for-profit Commission (ACNC).

The information below is designed to be supportive and informative. It draws on evidence from rigorous peer-reviewed research, including relevant ANROWS research. We would be very pleased to assist the Department further, as required, and have referred in our submission to opportunities for further collaboration.

Yours sincerely



Padma Raman PSM

ANROWS CEO

02 September 2022

Overall comment on both plans

The plans are built on a strong organising framework

Both plans are connected to a “Framework for action” featuring a vision statement, guiding principles and outcomes. This structure serves as a robust guiding framework ensuring a coherent and clear plan of activity.

We note, however, that the outcomes for both plans are tied to “pillars”, four of which were featured in previous drafts of the *National Plan to End Violence against Women and Children 2022–2032*.

While prevention, early intervention, response and recovery remain integral to the draft National Plan, the most recent iteration features a change in language from “pillars” to “domains”. We do not suggest a change at this time, but rather strongly recommend the Department refrain from finalising their plans until the National Plan is officially released.

Within both plans, each pillar reflects on what is already occurring, focus areas for the next five years and the actions the NSW Government will take. This approach is effective and will likely support the development of robust evaluation and accountability mechanisms.

Within this submission, we have provided commentary on opportunities to better reflect work currently underway and to include evidence-informed actions designed to respond to domestic and family violence and sexual violence.

The government should act on previous recommendations on Aboriginal self-determination

Both plans feature “Aboriginal self-determination” as a guiding principle underpinning all aspects of action. This is a positive inclusion, and we are glad to see that the description of this principle includes the strong language of Aboriginal people and communities “leading” and “driving” responses.

However, in 2016, the NSW Government commissioned an independent review of children and young people in out-of-home care. The culmination of that review, the *Family is Culture* report (Davies, 2019), dedicated a chapter to self-determination, and made three recommendations including the need for the Department to engage Aboriginal stakeholders “to develop an agreed understanding on the right to ‘self-determination’ for Aboriginal peoples in the NSW statutory child protection system, including any legislative and policy change” and to “undertake a systemic review of all policies that refer to self-determination, to consider how they might be revised to be consistent with the right to self-determination” (Davies, 2019, p. xl).

It is unclear if this work is underway. We strongly recommend that the Department commit to these recommendations and review all legislation and policy materials that refer to Aboriginal self-determination, including these two plans, to ensure a single, consistent and strong definition to reduce any conflation of the right to self-determination with consultation or participation in decision-making.

There are opportunities for further collaboration between the government, ANROWS and the Healing Foundation

The plans provide an opportunity to strengthen collaboration across the NSW Government, ANROWS and the Healing Foundation, including in workforce capacity-building and research.

Workforce capacity-building

Both plans identify the importance of building the capacity of the workforce, including those working in specialist services, general healthcare providers and complementary services, like financial planners. This plan of action strongly mirrors work currently underway by ANROWS and the Healing Foundation via WorkUP Queensland.

WorkUP is a workforce capacity- and capability-building service, funded by the Queensland Government.¹ It combines the Healing Foundation's strong connection to Aboriginal and Torres Strait Islander cultures and healing with the evidence-based policy and practice of ANROWS to grow the knowledge and capabilities of the sexual violence, domestic and family violence and women's health and wellbeing sectors.

We recommend consulting with ANROWS and the Healing Foundation to learn more about how what WorkUP has achieved, and how those learnings could be applied across New South Wales.²

Data strategies, collection and evaluation

Both plans reflect the importance of data collection and evaluation. The Domestic and Family Violence Plan mentions the development of a 10-year NSW cross-agency Domestic and Family Violence Data Strategy “to guide the data collection, performance monitoring and reporting of NSW domestic and family violence programs; [and] set the direction for the collaborative and safe approach to using and sharing data and insights” (p. 33). While the Sexual Violence Plan does not include a comprehensive data strategy, it does refer to the evaluation of “new programs and initiatives to understand their impact and effectiveness” (p. 29).

We strongly encourage the NSW Government to include ANROWS as part of the consultation, planning and delivery of these key pieces of work.

ANROWS has recently expanded to include a new team with a monitoring and evaluation function. We would welcome the opportunity to meet with the Department to better understand how this new team could support the NSW Government's work in terms of both an overarching strategic planning approach to the development and delivery of specific evaluations.

Another opportunity for NSW is to continue to invest in analysis of NSW data emerging from the NCAS. Building on the baseline of the 2017 data analysis will the government to track attitudes about violence against women over time.

Opportunities to strengthen the plans overall

Choose an outcome-focused title for each plan

There is an opportunity for each plan to feature an outcome-focused title, much like the National Plan. This simple yet effective change would support the NSW Government to more clearly communicate the critical purpose of these intersecting plans to *end* domestic and family

¹ See <https://www.justice.qld.gov.au/about-us/services/women-violence-prevention/violence-prevention/service-providers/workup-queensland>

² See <https://workupqld.org.au/>

violence and sexual violence.

Use consistent language when referring to a public health approach

Both plans refer to using a public health approach, which is then broken down to three levels: “primary prevention”, “secondary prevention” and “tertiary prevention.” In both plans, subsequent reference to levels two and three replaces the word “prevention” with “intervention” (see pages 9 and 10 of the Domestic and Family Violence Plan for example).

We strongly recommend the language used in the plans is consistent and best reflects the approach and intention of each tier. We recommend the consistent use of the terms “secondary intervention” and “tertiary intervention”. This language further supports the mapping of the public health approach to the language of the pillars.

Support the wellbeing and recovery of children and young people who have experienced trauma to prevent future sexual violence offending

Recent research confirmed that adverse childhood experiences (ACEs) were highly prevalent among adolescent boys who encountered the youth justice system (Ogilvie et al., 2022). The study found that boys who had experienced domestic and family violence were on average younger and had more extensive histories of sexually harmful behaviours and sexual violence than their peers who had not experienced domestic and family violence. It also found that adolescent boys who had perpetrated sexual offences had the highest rate of ACEs compared to those with violent and non-violent offences, and that experiencing domestic and family violence was particularly prevalent among this group.

Additionally, ANROWS’s most recently released research shows that women in their twenties and forties who experienced childhood sexual violence are twice as likely to experience sexual violence, domestic violence and physical violence as an adult (Townsend et al., 2022).

While it is important when considering the findings of this research to not conflate correlation with causation, the evidence does reinforce the need for significant government investment in preventing domestic and family violence and responding swiftly and effectively when children are experiencing domestic and family violence. The impact of this investment is critical to the plans to end domestic and family violence and violence within New South Wales, and the research points to a significant opportunity to invest in cohesive, trauma-informed, wrap-around services for children experiencing trauma to ensure their future wellbeing and recovery, including reducing the likelihood of using sexual violence in the future (Campbell, et al., 2020; Ogilvie et al., 2022)

There is a unique opportunity to connect the two plans through inclusion of specific actions supporting the wellbeing and recovery of children and young people who experience childhood trauma, especially domestic and family violence. ANROWS recommends that the both the Domestic and Family Violence Plan and Sexual Violence Plan incorporate learnings and findings from the growing evidence base about the use of Adolescent Violence in the Home (AVITH) to develop effective, trauma-informed and age-appropriate responses to young people.

Consistently include references

While we appreciate that the plans are not academic texts, we do note that the citation of research, or other sources, is inconsistent.

Including consistent referencing, especially to research, will support the ongoing monitoring and evaluation of this plan. It will also provide greater transparency regarding the evidence informing the plans and opportunities to update the plans as the evidence base grows.

We have identified several claims or inclusions that would benefit from citation. However, we encourage both plans are reviewed for further opportunities.

Within the Domestic and Family Violence Plan

- Page 9 states that “Research identifies gender inequality as the root cause ... of gender-based violence, including domestic and family violence.” Yet, no reference is included.
- On p. 11, the first paragraph contains several claims about awareness of and understanding domestic and family violence that would benefit from referencing. We recommend looking to the ANROWS *National Community Attitudes Survey* or the Australian Bureau of Statistics’ *Personal Safety Survey*³ for relevant references.
- On page 19, in the deeper dive into Pillar 1: Primary prevention, the plan states “Continue to build on what we know works in primary prevention ...” before going on to list some examples. None of the examples listed is attached to a source to provide what is currently known about the effectiveness of the stated interventions.

Within the Sexual Violence Plan

- On p. 4 there is a list of behaviours that constitute sexual harassment. We note these have been extracted from the Australian Human Rights Commission, but not attributed.⁴
- On p. 5 there is a definition of technology-facilitated abuse, but this is not attributed to any sources. We suggest the Department review the definition and cite relevant sources. The Department may refer to the ANROWS publication *Technology-facilitated abuse: Interviews with victims and survivors and perpetrators* (Flynn et al., 2022) or the draft National Plan, among other sources.

Specific feedback on the Domestic and Family Violence Plan

Coercive control is misrepresented as a tactic, or behaviour, of domestic and family violence

The plan makes several references to coercive control. The first such instance appears under the heading, “What is domestic and family violence?” (p. 6). This section provides a definition of domestic and family violence and features a list of behaviours, such as inflicting fear and the use of technology-facilitated abuse. Coercive control is currently presented in this list as an example of behaviours associated with domestic and family violence.

We suggest that the inclusion of coercive control as a type of abuse, or as a category of behaviours that fall under the broader concept of domestic and family violence, be reviewed. The policy brief, *Defining and responding to coercive control*, developed and published by ANROWS, finds that there is a need for “system-wide harmonisation of definitions of DFV across

³ <https://www.abs.gov.au/statistics/people/crime-and-justice/personal-safety-australia/latest-release>

⁴ See <https://humanrights.gov.au/our-work/sexual-harassment-workplace-legal-definition-sexual-harassment>

Australia” and that any “revised definition of DFV must set the context for how to understand coercive control – that is, as a gendered, overarching context for DFV behaviours, rather than a tactic or an example of DFV behaviour” (2021, p. 2).

We strongly recommend that coercive control be removed from this list, and that the Department consult the ANROWS policy brief in acknowledging “coercive control as the overarching context for DFV” (2021, p. 3). Failure to do so may lead to ongoing misidentification of the person most in need of protection, due to incident-based approaches to understanding and responding to domestic and family violence.

In regard to any legislative changes, we reiterate advice provided by ANROWS to the NSW government previously. Namely:

- 1) ANROWS suggests a long lead-in time for the introduction of the legislation
 - a) This is to ensure that training and workforce capacity building can take place, across all sectors
 - b) This is also to ensure harmonisation with the National Coercive Control Principles (expected to be put forward for endorsement at the Meeting of Attorneys-General in early 2023)
- 2) ANROWS supports the call from the NSW Women’s Alliance for the establishment of an independent implementation taskforce. This taskforce would have oversight of drafting, consultation, implementation process, as well as monitoring and evaluation.

Clarify the definition of relevant relationships

The plan provides some guidance about the relationships included when referring to domestic and family violence. The parameters of these relationships in the plan deviate from those currently set out in s 5 of the *Crimes (Domestic and Personal Violence) Act 2007* (NSW). This is especially apparent in the use of a more limited definition when referring to people who share a residence. We suggest that unless there is a specific reason to deviate from the broader definition provided in the Act, the legislated definition be reproduced here.

Clarify or extend plan to include non-statutory child protection

The plan makes multiple references to the child protection system. ANROWS recommends the NSW Government consider the role of non-statutory agencies when delivering on this focus area and their potential to provide support to families experiencing domestic and family violence and minimise the numbers of children moving into the statutory system.

Include actions on adolescent violence in the home

Adolescent violence in the home (AVITH) describes a range of violent, abusive and intimidating behaviours used by young people against family members, most commonly parents and siblings. It is increasingly recognised as a critical issue of concern for many families in Australia (Sutherland et al., 2022). The current plan does not consider the experiences of young people and families where AVITH is concerned. Families experiencing AVITH often face critical service gaps and their needs are not adequately met by the child protection system, policing or courts. Families experiencing AVITH need more support to keep both young people using violence and

family members safe. We recommend the Department review recommendations from previous AVITH research⁵ and lookout for further ANROWS research on AVITH due in 2022 and 2023.

Consider recent evidence on the role of primary healthcare providers in responding to the least visible offenders

The plan's early intervention pillar includes a focus on building the capacity of mainstream services to identify and respond to risk. We suggest that the actions targeting this focus include reference to recent evidence on the critical role of primary healthcare providers.

Research from *The "Pathways to intimate partner homicide" project* (2022) found that one in 10 offenders of intimate partner homicide (IPH) are "deterioration/acute stressor" or DAS offenders. DAS offenders are the least "visible" offenders. They are unlikely to have experienced past trauma, have a history of offending or be reported for domestic and family violence. As such, they are unlikely to be flagged via typical risk assessments. However, a defining characteristic of DAS offenders was "the presence of acute mental, emotional and physical health problems" (Boxall et al., 2022, p. 107). The report recommended that health professionals be trained to identify the risk of IPH, including in the context of deteriorating physical health problems.

We recommend that training of health professionals be strengthened as an action in the primary prevention part of the plan, and that any training refer to *The "Pathways to intimate partner homicide" project* and its evidence on the three major trajectories to IPH.

Use ANROWS National Risk Assessment Principles (NRAP) when reviewing current assessment tools

A stated action under the Response pillar is to refine the DV-SAT risk assessment tools. We recommend the Department refer to recent research from the NSW Bureau of Crime Statistics and Research that found the NRAP is the most effective way to identify victims and survivors most at risk of future intimate partner violence (IPV). In an evaluation of four models, including the DV-SAT, two models based on the NRAP principles performed best (Leung & Trimboli, 2022). The study also found that the best performing model could be further simplified to just five factors without impacting accuracy.

Ensure the plan features the development of disability literacy among service providers, including in work with children

The Response pillar refers to the need to ensure that resources for victims and survivors with disability are accessible. Research commissioned by ANROWS and led by a research team from Flinders University in South Australia has identified that the needs of children, young people and families with disability who are experiencing domestic and family violence are often not well met by services and systems. They point out that mainstream services have limited understanding and opportunities to learn about disability, which leads to a lack of "disability literacy" (Maher et al., 2018; McDonald & Rosier, 2011 as cited in Robinson et al., in press).

The report recommends that disability-informed practice be built across mainstream services. The researchers also point out that children and young people with disability may miss out on

⁵ See The PIPA project: Positive interventions for perpetrators of adolescent violence in the home (AVITH

access to services they are entitled to because organisation of these services is dependent on caregivers who are themselves victims and survivors of violence. They call for intensive support and/or case coordination for children and young people experiencing domestic and family violence.

Include actions focused on effective identification of the person most in need of protection

There are opportunities within the Response pillar to include actions that increase the capacity of responders – including police and magistrates – to accurately identify the person most in need of protection.

ANROWS research has found that women, especially Aboriginal and Torres Strait Islander women, are being misidentified as perpetrators on protection orders and that the effects are far-reaching (Nancarrow et al., 2020). This research recommends that guidance be created for police on identifying coercive control and for magistrates on how and when they can dismiss inappropriate applications and/or orders.

The plan identifies actions to support Aboriginal women in custody who have experienced domestic and family violence, but without a clear plan of action about how to build responders' accuracy in identifying the person most in need of protection, women – especially Aboriginal women – will continue to be unjustly incarcerated as perpetrators of abuse.

Ensure the plan includes children and young people as victims and survivors, in their own right, in more than principle alone

The Response pillar identifies the need to ensure children and young people are responded to as victims in their own right. The actions targeting this area focus on homelessness services and “improv[ing] integration between the DFV and child protection systems” (p.26). There are opportunities in the plan to identify further actions to meet this goal. Further actions could include:

- Develop practice principles, standards and guidance for domestic and family violence services – similar to those implemented in Queensland⁶ – which include specific standards for how the sector responds to children and young people as victims and survivors in their own right, for example the development of individual safety plans that address children's needs.
- Invest in ending the current gap in mental health services for children and young people experiencing domestic and family violence, including very young children (Humphreys et al., 2020, p.14). Research using a large Western Australia linked dataset found that children who experience domestic and family violence are more likely to be diagnosed with a range of mental health issues than children with no known experience of domestic and family violence. The study found children who had experienced domestic and family violence were twice as likely to be diagnosed with a substance disorder. The study also identified a six-year delay between police or health intervention and children receiving a mental health service (Orr et al., 2022). Responsive care for very young children could include investment in further trials and evaluations of child–parent psychotherapy models. The results for a feasibility study for such a model were

⁶ <https://www.publications.qld.gov.au/dataset/domestic-and-family-violence-resources/resource/e75875e0-50a9-4fa2-acde-121dc4a3a804>

published by ANROWS as part of *RECOVER – Reconnecting mothers and children after violence: The child–parent psychotherapy pilot* (Hooker et al., 2022).

- Support the development of the mental health, alcohol and other drugs and domestic and family violence sectors to develop policies for staff that facilitate conversations about the role of their clients as caregivers, mothers and fathers, and increase the visibility of children as victims and survivors in their own right (Humphreys et al., 2020). This helps to counter the likelihood of a child’s experience being conflated with that of the non-offending parent (typically the mother).

Include, expand and evaluate work on Safe & Together, “Invisible practices” and collaborative interagency practice

New South Wales has been an active participant and collaborator across three key ANROWS projects designed to increase child safety and better service system responses when families are experiencing domestic and family violence. These projects are:

- *The PATRICIA Project: PATHways And Research In Collaborative Inter-Agency working* (Humphreys & Healey, 2017)
- *Safe & Together Addressing ComplexitY for Children* (Humphreys et al., 2020)
- *Invisible practices: Interventions with fathers who use violence* (Healey et al., 2018).

Within the Domestic and Family Violence Plan, there is an opportunity to identify the work the NSW Government has undertaken in response to these projects so far, and to commit to further expansion and evaluation of this work.

A number of significant recommendations for policy and practice emerged from these projects. Some of these recommendations have been paraphrased below. They include, but are not limited to:

- The child protection sector and NGO sector continue to explore and implement training and coaching with (or based on) the principles and resources of the Safe & Together model.
- Collaborative process is informed by improved assessment of the risks and impacts of domestic and family violence on the mother, child and mother–child relationship.
- Appropriate policy and legislative changes are created to allow the sharing of information about the perpetrator of domestic and family violence within appropriate collaborative forums and which are based on an informed consent process that is victim-centred.
- Policy is developed and implemented for a differential response for children living with domestic and family violence. This will require investment in diversionary pathways to ensure that, where appropriate, children and their mothers receive services outside child protection.
- The child protection database in each jurisdiction is further developed to allow more detail on the context in which domestic and family violence emerges and is managed by child protection workers.
- Adult-focused alcohol and other drugs, mental health and domestic and family violence services facilitate the training of a group of practitioners in their organisation to be children’s specialists, or employ a specialist worker who can provide appropriate secondary consultation about children’s needs.

- Further research *with* children into their experiences when there are complex and co-occurring issues be funded.
- An Aboriginal and Torres Strait Islander-led project is undertaken which explores holistic approaches to children, women and men where there is domestic and family violence and intersecting issues of mental health and alcohol and other drugs. This could include the development of practice tools that are co-designed by and customised for Aboriginal and Torres Strait Islander families and their communities, and potentially informed by the Safe & Together Model and its resources.

Specific feedback on the Sexual Violence Plan

Update references relating to rates of sexual violence

There is an opportunity to update statistics on sexual violence based on a recent report published by ANROWS. The report, *A life course approach to determining the prevalence and impact of sexual violence in Australia: Findings from the Australian Longitudinal Study on Women's Health* (Townsend et al., 2022), has found that the prevalence of sexual violence across a woman's lifetime is higher than previously identified.

The study also found that the prevalence of sexual violence experienced among women remains relatively consistent across major cities, inner regional and outer regional areas, and remote or very remote communities. This finding helps to address the data gap identified on p. 7 of the plan.

Include sexual violence as a health risk in policies and support greater accessibility to health services for victims and survivors

There are opportunities in the plan to crystallise the role of primary health providers in the response to and recovery from sexual violence.

Recent research drawing on a national longitudinal data set has found that the prevalence of sexual violence over a woman's lifetime is higher than previous estimates and that it contributes to significant financial and health stress. The report recommends that sexual violence be considered a health risk when governments are developing policies and that health and support services for women who have experienced sexual violence should be subsidised or free. The researchers note that among the survey of over 57,000 women:

There was a consistent association between sexual violence and financial stress. The strong association between sexual violence and poor health outcomes across all generations indicates a need for more health service support but the impact of financial stress might deter service access. It is noteworthy that in the context of sexual violence, better mental health was related to mental health service access. (Townsend et al., 2022, p. 75)

They also note the key role health services can play due to the high need for and use of health services by women who have experienced sexual violence. They recommend strengthening the role of healthcare providers as a "gateway" to an intersectoral approach, including supporting referrals of women from general healthcare into specialist services.

We strongly recommend that this research be reviewed, and the recommendations included as part of the Department's plan.

Recognition of achievements outside of government

ANROWS recognises that this plan is a NSW government document, focused on the activities and achievements of the government in its efforts to end violence against women. However, we do note that there are many important non-government stakeholders who have been involved in this work and contributed to its success.

ANROWS recommends considering expanding the section titled "Achievements under the *NSW Sexual Assault Strategy 2018-2021*" to recognise and acknowledge the efforts and achievements of the broader sector and the voices of people with lived expertise.

Ensure outcomes are clear

To ensure progress and success can be measured, it is important that outcome statements are clear and precise, even at a high level. Across the plan there are opportunities to refine the language used. For example, the outcome for the Early Intervention level is: "Sexual violence risks are reduced in key populations and settings" (p. 14). It is unclear what this means, or how we will know if this has been achieved. ANROWS recommends that each outcome statement is reviewed for clarity, considering what success would look like.

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