The Australian National Research Agenda

to End Violence against Women and Children (ANRA) 2023–2028

ANROWS

AUSTRALIA'S NATIONAL RESEARCH ORGANISATION FOR WOMEN'S SAFETY

to Reduce Violence against Women & their Children

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Acknowledgement of Country
ANROWS acknowledges the Traditional Owners of the land across Australia on which we work and live. We pay our respects to Aboriginal and Torres Strait Islander Elders past and present, and we value Aboriginal and Torres Strait Islander histories, cultures and knowledge. We are committed to standing and working with Aboriginal and Torres Strait Islander peoples, honouring the truths set out in the Warawarni-gu Guma Statement.

Acknowledgement of lived experiences of violence
Much of the research and evidence base of what we know about domestic, family and sexual violence has come from the courageous efforts of victim-survivors to speak up, to share their experiences and insights. This is done in the face of denial, victim blaming, and backlash against recognising the reality of men's violence in women's lives. ANROWS acknowledges and values the lives and experiences of the women and children affected by domestic, family and sexual violence who are represented in this report. It is important to recognise these individual's strengths and the hope and resilience with which they continue and contribute to the knowledge that forms the basis of ANROWS research.

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to End Violence against Women and Children (ANRA) 2023–2028

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Executive summary

Our work

The Australian National Research Agenda (ANRA) is Australia's guide to promote and support the creation of research that is needed to end violence against women and children.

The development of the ANRA was led by ANROWS. An independent national research organisation, established in 2013, whose vision is to build the evidence base that supports ending violence against women and children in Australia.

This is the third ANRA that ANROWS has developed (with previous ANRAs released in 2014 and 2020).

The ANRA identifies *what* knowledge needs to be created if we are to end violence against women and children AND provides guidance on *how* knowledge ought to be created if we are to be inclusive, person centred and action oriented.

Through a targeted approach to generating evidence, the ANRA supports the *National Plan to End Violence against Women and Children 2022–2032* (the National Plan) and its ambition to reach this goal in one generation.[1] The ANRA is a national framework, produced by ANROWS, that can be used by the community of committed people and organisations who are working to grow the evidence base: researchers, funders, policymakers, services, survivor advocates and social impact organisations.

Implementation

The ANRA can be used by anyone developing, funding or working alongside research to end domestic, family and sexual violence (DFSV).

To develop a national approach to DFSV research, ANROWS is taking a phased approach for consistent investment and impact.

The first phase of implementation will be for ANROWS to embed the ANRA across the organisation. The ANRA will be used by ANROWS to select and fund research projects.

One ANRA priority will be selected as the theme for each of ANROWS's future grants rounds. Applicants will be strongly encouraged to:

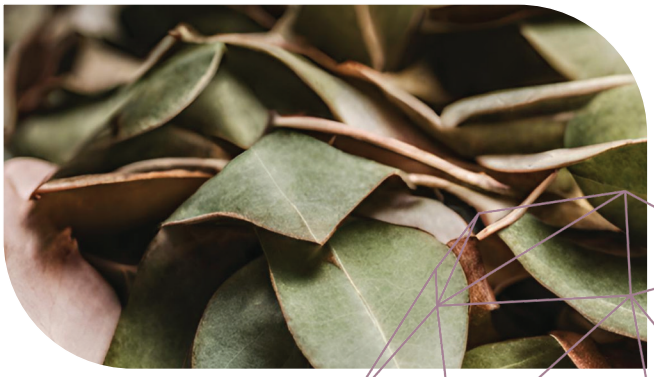
- involve people with lived experience of DFSV and affected communities throughout the research process, starting with research design
- make use of existing data where possible
- form partnerships with service organisations
- use community-led research and participatory approaches to research
- appropriately remunerate people with lived experience, community-based researchers and DFSV service organisations for their time in project budgets and offer in-kind support or capacity building.

ANROWS's commissioned grants are determined by an open competitive process assessed by panels of experts. Assessors must account for the above factors when scoring applications. A lived experience advocate and a DFSV practitioner will sit on each of the panels.

The ANRA will only be effective if we all use it.

Once ANROWS has embedded the ANRA across the organisation we will work on the next phase – working with stakeholders to encourage them to use the ANRA to guide research in ending DFSV. This will include targeted resources to assist researchers, funders (universities and philanthropic organisations), policymakers, survivor advocates, and frontline practitioners in using the ANRA and in applying ways of working and knowing.

1 The aim of ANROWS's establishment was to build the evidence base that supports ending violence against women and children in Australia. Because of this, and the need to align with the *National Plan to End Violence against Women and Children 2022–2032,* the ANRA predominantly focuses on violence against women and children. However, it is important to emphasise that trans and gender diverse people experience equal or greater rates of DFSV than the general population (Callander et al., 2019; Hill et al., 2020) and have received little attention in DFSV policy and service provision until recently.



How can you use the ANRA?

Researchers and research organisations

- Apply for an ANROWS grants rounds, the first being announced in late 2023.
- Align your ongoing projects with ANRA priorities.
- Register your project on the ANROWS Register of Active Research (RAR), a national database for research on gender-based violence research in Australia.
- Create new research projects in line with ANRA priorities.
- Ensure your research projects are implementing the recommended ways of working.
- Share the ANRA 2023–2028 within your networks.

Policymakers and governments

- Integrate the ANRA 2023–2028 into your funding and research work.
- Speak with colleagues about aligning their research needs to the ANRA.
- Connect with research partners, including ANROWS, to initiate collaborations.
- Inquire about creating a state and territory-specific research agenda with ANROWS's support.
- Prepare existing datasets for research access and analysis.
- As service deliverers and funders, encourage services and practitioners to contribute to ANRA-aligned research.

Research funders (including philanthropic organisations)

- Use the ANRA 2023–2028 to guide funding choices, including to inform priorities, grant development and approvals.
- Promote the ways of working with marginalised communities and people with lived experience through your funding criteria.

Community organisations and service providers

- Assess your capacity and readiness for research leadership and participation, including connecting with relevant research organisations and governments to boost capability.
- Identify your most pressing research needs that align with the ANRA 2023–2028 and partner with research organisations to shape projects.
- Employ the ANRA 2023–2028 to advocate for research focus and resource support.

DFSV survivor advocates

- Use the ANRA 2023–2028 to support your advocacy work, including the need to work with victim-survivors as co-researchers and participants.
- Contact ANROWS for understanding ways of participating in research if you have a research need that aligns with the ANRA.
- Use the guidance around ways of working to negotiate your role in research leadership.

Methodology

An understanding of power was fundamental to the ANRA process and the research priorities it developed. ANROWS wanted not only to share power, but also to cede it, and give greater voice and influence to people with lived experience and frontline practitioners (not that any of these categories are mutually exclusive).

The team who developed the ANRA included a co-investigator with lived experience. This expertise in the research team ensured the research questions matter for real-life consequences and that the language and framing recognises and respects lived experience.

In accordance with best practice, the ANRA strives to account for and minimise the power imbalances between funders and researchers, and between researchers and participants.

The ANRA's research priorities and ways of working were determined through a co-design process with victim-survivors, DFSV researchers and DFSV service providers and practitioners.

Co-design discussions were informed by:

- a review of the ANROWS funded research
- a scoping review of Australian impact evaluation to identify research gaps
- findings from five focus groups with people with lived experience.

ANROWS undertook two rounds of testing the priorities with different groups of co-design participants (researchers, practitioners and victim-survivors). An online forum with government policymakers and agencies to obtain their feedback on the research priorities and understand how they might use the ANRA was the final step before consultation on the draft.

ANROWS asked a larger group of 120 key stakeholders to rate the ANRA's accessibility, the usefulness of the content, and to make comments on their overall impressions of the ANRA.

The ANRA – research priorities

The ANRA identifies nine priority areas of research to reduce DFSV. We have arranged these research areas under three topics: Systems and Society; Populations in Focus; and Types and Patterns of Violence.

Systems and society

There is a need for more research to identify the structural inequalities that support and enable violence (primary prevention),[2] and to show how systems can reduce the onset and recurrence of violence (tertiary prevention – which can also be understood as early intervention and response). As the National Plan notes, "Effective prevention requires integrated and cohesive work that builds mutually reinforcing action at all levels" (Department of Social Services [DSS], 2022, p. 79).

Structural inequities

Australian society is not a level playing field. Disadvantage and discrimination are perpetuated through our social norms, values and institutions (McLachlan et al., 2013). It is critical to address these disparities systematically in our policies and structures.

Specifically, the ANRA calls for more research that:

- identifies specific government policies that can prevent people at risk of marginalisation from experiencing DFSV, by delivering improved health, social and economic benefits; and
- addresses structural inequities within mainstream services.

Mainstream services are rarely developed with diverse populations in mind (McLachlan et al., 2013), instead, changes and improvements are retrofitted, if made at all. The result is that certain populations continue to be marginalised from accessing core services. These populations – including culturally and racially marginalised (CARM)

2 Primary prevention is defined as "stopping violence against women from occurring in the first place by addressing its underlying drivers. This requires changing the social conditions that give rise to this violence; reforming the institutions and systems that excuse, justify or even promote such violence; and shifting the power imbalances and social norms, structures and practices that drive and normalise it" (Our Watch, 2021, p. 55).

groups (Aboriginal and Torres Strait Islander peoples and migrants and refugees), LGBTQI+ people, children and young people, people with disability and older people – commonly find that these services do not provide the support they need (KPMG, 2022). Future DFSV research needs to focus on identifying and addressing structural inequities within services and systems.

Employers and industry leaders are fundamental to creating work cultures free of structural inequities and harassment. Research is needed to evaluate the effectiveness of employment policies and processes that aim to prevent violence and harassment and create cultures of inclusion and safety.

Gender relations, gender norms and attitudes

Research has found gender inequality to be both a driver and a consequence of violence against women (Our Watch, 2021; Summers, 2022). Harmful gender norms legitimise men's use of violence, dominance and control, and mandate heteronormativity and emotional repression. This is of particular concern now as increasing numbers of boys and young men are drawn into online "manosphere" communities that popularise misogyny and promote harmful masculine norms (Horta Ribiero et al., 2021; The Men's Project & Flood, 2018).

More research is needed on what works: for example, how best to address and counteract the needs of some boys and men from a variety of demographic and socio-economic backgrounds to use controlling behaviours, and also on the best ways to increase understanding about healthy and respectful relationships. Research should evaluate existing programs, as well as establish new methods of engagement. More local research is also needed on the factors driving and sustaining backlash to gender equality in Australia and how to counteract it.

Trauma- and DFSV-informed, victim-centred systems

The services and systems that engage with victim-survivors and people who use DFSV need to become:

- trauma informed: victim-survivors need a safe, collaborative and empowering environment that reduces feelings of shame
- DFSV informed: victim-survivors need services to understand the dynamics and impacts of DFSV, especially coercive controlling behaviours, while holding people who use DFSV accountable
- victim centred: victim-survivors needs and choices are prioritised through respectful, holistic, tailored and sustained engagement.

Research should identify the specific changes to policies, processes and competencies required to reform DFSV services. These services include police, courts, child protection, housing, as well as frontline DFSV agencies. All too commonly, victim-survivors are being misidentified as the predominant aggressor of DFV (Nancarrow et al., 2020). There is a need for better data on the extent of misidentification, including the characteristics of those most affected. The data will help to identify potential biases and other factors that are influencing this practice.

Populations in focus

Addressing structural inequities under the topic of Systems and Society amplifies the focus on meeting the needs of people at risk of marginalisation. When it comes to research on specific population groups, this ANRA recognises the need to focus on Aboriginal and Torres Strait Islander peoples, children and young people and people who use DFSV.

Aboriginal and Torres Strait Islander peoples

Aboriginal and Torres Strait Islander peoples experience high rates of DFSV (Australian Institute of Health and Welfare [AIHW], 2022; Our Watch, 2018). ANROWS supports the development of a separate Aboriginal and Torres Strait Islander-led research agenda; the perspectives of Aboriginal and Torres Strait Islander peoples are also prioritised in the ANRA.

During the ANRA co-design process, Aboriginal and Torres Strait Islander participants said they wanted more research on:

- effective, respectful and culturally sensitive policing of DFSV and the problem of victim-survivors being misidentified as predominant aggressors
- more robust data and research on DFV as a key driver of child removal

- Indigenous healing and recovery models, for both victims and people who use DFSV, while including Aboriginal and Torres Strait Islander men as partners in the conversation.

They expressed frustration that while it is generally accepted that Aboriginal and Torres Strait Islander research should be community led, this is rarely achieved in practice.

Children and young people

The effects of violence on children are lifelong and profound. It is critical to trial and evaluate more therapeutic and psychosocial interventions for children who have experienced DFV to help them recover and heal from violence and prevent future cycles of victimisation and perpetration. Trial programs should be tailored to children from a variety of demographic and socio-economic backgrounds. Investing in longitudinal studies will provide the evidence base to determine how effective recovery interventions are in preventing further DFSV across the life course.

Nationwide education is key to prevention. It is critical to build evidence around the tools which most effectively encourage young people towards non-violent behaviour, respectful attitudes and to appropriately negotiate consent.

People who use DFSV

Pathways into, and out of, perpetration are critically under-researched. To reduce the level of DFSV, we need to address the determinants of perpetration. As advocated by victim-survivor and co-investigator, Lula Dembele, "Violence is a problem for victims, but it is not a victim's problem."

More research on the role of systems, institutions and norms in enabling DFSV is needed, as well as the influence of factors such as mental illness, childhood trauma, pornography, substance abuse and problem gambling.

Throughout a person's life, there are critical intervention points when the opportunity for prevention and behaviour change is greatest (Centre for Innovative Justice, 2015). It is important to establish what they are, when they occur, how they are experienced by diverse cohorts, and what is effective to divert people away from using abusive behaviours. Identifying these critical intervention points will alert families, communities, services and systems to mobilise support people when people need it most.

Research is also needed to better identify pathways out of perpetration. Specifically, there is a need to develop and evaluate behaviour-change programs that have a dual focus on accountability and healing: recognising, where applicable, the life trajectories of people who use DFSV to heal and address the effects of pre-existing trauma as part of the process to reduce abusive behaviours.

We need to update and better use the data about the extent of perpetration against Aboriginal and Torres Strait Islander women and children and the characteristics of people who use DFSV. Further national prevalence data for DFSV towards LGBTQI+ people is also needed. Research should investigate how and why DFSV is used against migrant and refugee women (including forced marriage and dowry abuse), women with disability and older women, to better identify methods for screening and opportunities for early intervention.

Types and patterns of violence

Sexual violence

The current adversarial system for prosecuting sexual violence (SV) is not victim centred or trauma informed and would require extensive changes to become so (AIHW, 2022). More research is required into police competency on sexual violence and the reasons why rates of charging and conviction are so low, as well as why sentences – even for serial and serious offending – are often not custodial (AIHW, 2022). Understanding the influence of community attitudes on jury trials is needed (Minter et al., 2021), as well as what education might be required for juries and the judiciary in sexual violence matters. More research is needed into the deterrent effects of sentencing outcomes.

The criminal justice system alone cannot be relied on to address the high levels of sexual violence in Australia. As such, ANROWS encourages researchers to trial and evaluate alternative justice mechanisms, co-designed with victim-survivors, that may better support victim-survivor safety, recovery and sense of justice.

Consent education for school-aged children has been mandated nationally, but it is important to evaluate practical education programs and resources that help people of all ages to negotiate sexual consent and power in their intimate encounters and relationships (Cahill et al., 2023).

The *Respect@Work: National Inquiry into Sexual Harassment in Australian Workplaces* produced important evidence about the prevalence and targets of sexual harassment; however, researchers should investigate the *motives* for sexual harassment, as they are still not well understood. More research is also needed on the factors and systems that enable people to sexually harass others.

Coercive control

Since the last ANRA, coercive control has emerged as a critical framework for understanding DFV, especially in our legal system responses (Attorney-General's Department, 2023a; McMahon & McGorrery, 2020). Coercive control has recently been criminalised in some jurisdictions. As these laws become operational in 2024 and 2025, we must evaluate impacts on victim misidentification, prevalence of DFV, and victim-survivor safety and recovery.

It is also critical to identify and test effective models for responding to people who use coercive controlling behaviours, including whether this behaviour is adequately dealt with in men's behaviour-change programs.

Economic abuse

Financial and economic abuse is complex. It can include victim-survivors having their spending controlled, their child support payments restricted, and their employment sabotaged by partners or family members (Gendered Violence Research Network, 2020).

Evidence is needed on how public and private systems can better identify and respond to economic abuse, how to support victim-survivors and develop safeguards to prevent economic abuse. Governments and the private sector should develop partnerships to build evidence for how to effectively prevent economic abuse.

A substantial minority of older women experience abuse from adult children (Australian Institute of Family Studies, 2022). Research needs to target how this occurs and how it overlaps with other forms of abuse, as well as the influence traditional gender roles have on risk of victimisation and the effects that this abuse can have on an older person's economic security.

While research is also needed on prevalence, characteristics and motivations for dowry abuse in Australia, it is important to first consult with migrant and refugee communities on how to collect data safely and appropriately.

Ways of working

It is not just the research that we do, but how we do it, that matters. The ANRA focus groups and co-design process highlighted the need for researchers to consider the ways in which they undertake DFSV research and who they engage with (ways of working), as well as the need for research to draw on diverse sources of knowledge (ways of knowing).

The focus groups and co-design process highlighted the tendency of traditional western research methodologies to reinforce power imbalances. By understanding and drawing on non-western approaches to research – such as Indigenous methods – we can enrich data collection, encourage more connection, and mitigate power imbalances (Smith, 1999).

Approaches to research

The ANRA advocates for more community-led interventions, in which populations directly impacted by research *do* the research.

The ANRA also encourages researchers to access existing data collected by various agencies on victim-survivors and people who use DFSV. Researchers should develop research projects with these agencies to enable access to data, where it is permissible by law, while keeping in mind consideration of ethics, human rights and data sovereignty.

Ways of knowing

We need to acknowledge experts by experience and listen to children and young people, who bring unique perspectives and insights. We need to work more closely with DFSV practitioners' and their expertise without creating a burden for them. This expertise needs to sit alongside empirical evidence – not just form a part of empirical evidence.

Engaging practitioners who work with victim-survivors and people who use DFSV can improve the quality of research. However, resourcing constraints can prohibit or limit practitioners' involvement in research. Service providers should be appropriately remunerated for their participation in research, including through additional funding and/or in-kind support for interested practitioners to build their research and evaluation skills.

Introduction and background

The ANRA 2023–2028 is ANROWS's third research agenda; the first was developed in 2014, the second in 2020. All of the research projects funded under ANROWS's competitive grants rounds align with at least one of the priority areas of research of the active ANRA.

The purpose of the Australian National Research Agenda

The ANRA aims to support the ambition of the *National Plan to End Violence against Women and Children 2022–2032* (the National Plan) to end violence against women and children in one generation by facilitating a targeted approach to generating evidence. The ANRA identifies *what* knowledge needs to be created if we are to end violence against women and children AND provides guidance on *how* knowledge ought to be created if we are to be inclusive, person centred and action oriented.

The ANRA provides a national framework and guidance on priority areas of DFSV research for:

- researchers, research organisations and universities
- funding bodies (including philanthropic)
- policymakers and governments
- DFSV practitioners and services
- survivor advocates and social enterprise.

This document summarises the process of developing the ANRA and describes the research priorities and approaches to research and ways of knowing needed to generate the evidence required to end violence against women and children.

While child sexual abuse can co-occur in the context of domestic and family violence, the ANRA does not include child sexual abuse as the research priorities in this area are addressed in the *National Strategy to Prevent and Respond to Child Sexual Abuse 2021–2030*. The National Office for Child Safety is currently developing the Child Safety Research Agenda under First National Action Plan Measure 23.[3]

It is recommended that researchers and others using the ANRA consider other relevant Australian and state and territory research agendas and frameworks in conjunction with the ANRA. For example, *Safe and Supported: The National Framework for Protecting Australia's Children 2021–2031* identifies national priorities for reducing child abuse and neglect. The *Victorian Family Violence Research Agenda 2021–2024* and Western Australia's soon to be released *Sexual Violence Prevention and Response Strategy* identify government priorities for the states.

3 For more information on the National Office for Child Safety's research agenda visit: https://www.childsafety.gov.au/what-we-do/establishing-child-safety-research-agenda

Methodology

ANROWS followed Tan and colleagues' (2022) framework for evidence-informed priority setting. This framework extends beyond the development of priorities to focus on their implementation while monitoring their impact.

ANRA's research priorities and ways of working were determined through a co-design process with victim-survivors, DFSV researchers, and DFSV service providers and practitioners. Two workshops were held with victim-survivors of DFSV, DFSV researchers and service practitioners. The areas of critical research identified in the co-design workshops were synthesised by the research team and these formed the basis of the research priorities. The methods for co-design are detailed in Appendix A.

Co-design discussions were informed by:

- a review of the ANROWS-funded research and a systematic review of Australian impact evaluation to identify research gaps
- findings from focus groups with people with lived experience to understand victim-survivors' views about what evidence is needed to end DFSV.

Understanding the current Australian evidence base

Two types of literature review informed the focus group and co-design discussions.

- We reviewed 110 ANROWS reports, published from 2014 to December 2022, to identify which research areas have received the greatest investment from ANROWS and where research gaps persist.

  The review highlighted a focus on intimate partner violence (IPV; 70%) over SV (30%), as well as a dominant aim to *understand* DFSV in its multiple forms, community attitudes to violence against women and/or gender equality, systems that respond to DFSV and their impact on victim-survivors and/or people who use DFSV.

  System responses, particularly legal, DFSV and whole-of-system responses were more of a focus than multicultural settlements, technology, housing, disability, corrections, media, and systems that work with CALD communities, LGBTQI+ communities, rural and regional communities, and people incarcerated.

  The focus of 21 per cent of the reports was on children and young people, while 51 per cent focused on the general population. There were almost no research reports focusing on rural and regional communities, people with disability, LGBTQI+ people, pregnant women, single mothers, older women, people with mental illness, and sex workers.

- A preliminary scoping search of Australian impact evaluation studies between January 2010 to May 2021 identified 64 quantitative impact evaluations of interventions designed to address and respond to DFSV. Grey literature, such as publicly available service evaluations and student theses were included. The studies needed to measure the impact of an intervention on victims and survivors, children who experienced parental intimate partner violence, people who use DFSV or the broader community.

Focus groups with victim-survivors of DFSV

ANROWS conducted five focus groups with 18 victim-survivors across Australia. These sought victim-survivors' views about what evidence is needed to end DFSV. Among those participating were Aboriginal and Torres Strait Islander women, LGBTQI+ people, people with disability, migrant women, young people, older women and rural/regional women.

The methods used in the focus groups and the themes of these discussions will be published separately. Participants' voices are embedded throughout the research priorities and ways of working.

Testing and refining research priorities with co-design participants and key stakeholders

ANROWS undertook two rounds of testing the ANRA with different groups. In the first round of testing in July and August 2023, co-design participants and a small group of experts (researchers, practitioners and victim-survivors) were asked for open comment on the research priorities and approaches to research and ways of knowing.

In July 2023, ANROWS also held an online forum with government representatives and agencies to obtain their feedback of the research priorities and understand how they might use the ANRA.

After integrating feedback from this stage, ANROWS asked a larger group of 120 key stakeholders to rate the ANRA's accessibility, the usefulness of the content, and to make comments on their overall impressions of the ANRA.

The ANRA

The ANRA includes both the priority areas for research (Section 1) and approaches to research and ways of knowing (Section 2). The role of power emerged as a critical consideration underpinning all ANRA research priorities and approaches to research and ways of knowing.

Co-design participants discussed the role of power in family and sexual violence and rectifying power imbalances in the ways that research is undertaken. Power is therefore a cross-cutting theme in the ANRA, described in Box 1.

BOX 1: POWER

Violence and power are intrinsically linked.

Power operates at multiple levels of society and in different settings. It can include, for example:

- society – such as dominant social norms that reinforce men's position of power over women
- systems – such as practices and policies in DFSV services that can privilege or disadvantage particular communities (see "Structural Inequity" for further discussion)
- communities – such as social norms within communities that encourage or prevent victim-survivors from speaking out
- interpersonal relations – such as people who use DFSV, exercising power and coercive control over victim-survivors, and power dynamics between researchers and research participants.

Research should explore how our current understanding of DFSV privileges and protects certain individuals and communities while disadvantaging others. What is the relationship between those who are privileged and those who are not? Factors such as cultural background, age, disability, sex, gender identity and sexuality can influence levels of power, as can less explored factors such as:

- class
- religion
- criminal record or history of incarceration
- marital and parental status
- visa status
- sex worker status
- location in Australia.

Research should pay attention to the philosophies that have influenced our society and systems over the past 200 years and how these continue to impact on individuals and communities. The influence of patriarchy is often discussed in relation to DFSV, but colonialism, ableism, structural racism and neoliberal capitalism can all influence who holds more powerful positions and who believes they have the right to exercise power and control over others. These institutional powers can also influence the shaping of gender relations and patterns of violence (Brown et al., 2023). Primary prevention work is foundational in addressing the influence of these philosophies and institutional powers and their role in encouraging DFSV.

Power dynamics are also embedded in how we undertake research. Traditional western research methods can privilege the opinions of those undertaking research and restrict the voices of those who are being researched (Baum et al., 2006). Future research should address these power imbalances by working in ways that seek to recognise the contributions of victim-survivors, affected communities, and DFSV service practitioners (see "Approaches to Research" for further discussion).

To end DFSV, it is important to reflect on the influence of power in our work and relationships and whether we (consciously or unconsciously) perpetuate power imbalances. Addressing the inequitable distribution of power at all levels of society is the starting point for meaningful change.

Section 1: Priority areas of research

The nine research priorities in the ANRA are captured under three main topics:

Systems and Society

- Structural inequities
- Gender relations, gender norms and attitudes
- Trauma- and DFSV-informed, victim-centred systems

Priority Populations

- Aboriginal and Torres Strait Islander peoples
- Children and young people
- People who use DFSV

Types and Patterns of Violence

- Sexual violence
- Coercive control
- Economic abuse

The categories in each topic include a brief overview of the evidence and evidence gaps and where more targeted research is required. ANROWs recognises that while there are many research gaps, there is also a large body of research in DFSV. This research agenda is about continuing and focusing this research effort on areas of greatest need.

Systems and society

There is a need for more research that focuses on addressing violence at the societal and system levels. Research that encourages societal-level change can help to address the structural inequalities that can enable violence to flourish (primary prevention).[4] Research at the system level helps create systems that more effectively stop the recurrence of violence (tertiary prevention – which can also be understood as early intervention and response). As the National Plan notes, "Effective prevention requires integrated and cohesive work that builds mutually reinforcing action at all levels" (DSS, 2022, p. 79).

Structural inequity

> Systems and policies and procedures and legislation and things are purposely created in a way that abandons some cohorts over others. (Focus group participant 8)

> … who's going to buck the system when you're a women's health service or a women's legal service or whoever, and you're begging for funding? You're not going to buck the system or rock the boat because you're not going to bite the hands that feed you. And that, unfortunately, is the problem with the system. It's working exactly the way it needs to work. (Focus group participant 10)

Systems and structures in Australia are set up in ways that can inequitably distribute resources to certain groups and restrict them from others. Consequently, some people in Australia are more likely to experience greater rates of DFSV because of the cumulative marginalisation and its associated disadvantage (The National Council to Reduce Violence against Women and their Children, 2009; McLachlan et al., 2013). Rectifying these inequities will not be easy or quick but should be core to our focus.

4 Primary prevention is defined as "stopping violence against women from occurring in the first place by addressing its underlying drivers. This requires changing the social conditions that give rise to this violence; reforming the institutions and systems that excuse, justify or even promote such violence; and shifting the power imbalances and social norms, structures and practices that drive and normalise it" (Our Watch, 2021, p. 55).

To address structural inequities, services and systems need to respond to, and create space for, the voices of people most at risk of marginalisation, especially those at higher risk of experiencing DFSV.

Research should address the inequitable distribution of power within systems for Aboriginal and Torres Strait Islander peoples, migrants and refugees, LGBTQI+ people, children and young people, people with disability and older people. People who have been affected by violence, such as those with complex trauma, those who are in poverty and/or homeless, and sex workers, can be at higher risk of criminalisation and therefore increasingly vulnerable to social, economic and service exclusion (Salter et al., 2020; Russell et al., 2022).

The role of governments and DFSV services in prevention

Changing structural inequities relies on genuine partnerships with communities (Syme, 2004). In practice this might include organisations examining whether their workforce and governance properly reflects the people they serve. It could involve organisational development and capacity building in DFSV services to encourage diversity in leadership and create spaces for community voices to influence practice, policy and service delivery.

Identifying and building on government policies that effectively deliver improved health, social and economic benefits to those who are systematically marginalised can help to prevent them from experiencing DFSV. For example, policies that improve the economic wellbeing of mothers who have experienced violence can help to stop the recurrence of violence (Summers, 2022). Australian data shows that many mothers who are faced with the choice of continued violence or poverty "choose" to remain with their partner (Summers, 2022).

The role of employers and industry in prevention

Employers can create cultures that reject any form of discrimination and harassment in the workplace, while implementing polices that promote structural equity, such as equal pay for women. The *Respect@Work* national inquiry found that a complaints-based system of sexual harassment places heavy burdens on the targeted individuals and stood in place of more powerful workplaces taking a proactive, preventative approach (Australian Human Rights Commission [AHRC], 2020). We need more evaluations on what works to prevent workplace violence, discrimination and harassment and how to best foster cultures where all employees feel valued, safe and supported.

It is also important to engage commercial industries, including the alcohol, pornography and gambling industries in conversations about their role in perpetuating structural inequities that contribute to DFSV. Previous Australian research has indicated that alcohol and gambling are significant factors in DFSV (Foundation for Alcohol Research and Education [FARE], 2015; Hing et al., 2020). Problem gambling places stress on individuals and relationships, particularly those with limited economic resources, and can increase the risk of DFSV (particularly economic abuse). The policies and processes of the gambling industry in Australia have done little to address this issue (Hing et al., 2020). Similarly, prevention of alcohol-related DFSV has largely been undertaken by individuals, communities and governments rather than the alcohol industry (FARE, 2015). Research in this area can contribute to reducing structural inequities and preventing DFSV.

Gender relations, gender norms and attitudes

> I am extremely concerned at the growth of misogyny especially amongst young men. And I think that's an area that we really seriously need to investigate, the bullying that goes on between young men, the attitudes towards young girls of young men … (Focus group participant 1)
>
> But it is that bro code, the boys club. I see it in the schools in the private schools too, in the education sector, the principals are mostly male, the heads of department … every system I've touched, I see that same pattern of entitlement and bullying basically. (Focus group participant 5)

Gender norms and attitudes about respect, gender and violence play a crucial role in the primary prevention of

DFSV. Research has found gender inequality to be both a driver and consequence of violence against women (Centre for Innovative Justice, 2015; Our Watch, 2021; Summers, 2022). Yet the National Community Attitudes towards Violence against Women Survey (NCAS) shows that some harmful attitudes about gender equality and DFSV are slow to shift (Coumerelos et al., 2023) despite concerted efforts to educate the Australian community. Complicating these efforts our understanding about gender and how it is expressed is shifting, particularly among young people (Edwards et al., 2022; Politoff et al., 2019). This shift may influence how people understand the gendered dynamics of DFSV. For example, a recent study has indicated that young people in Australia view domestic violence through a gender-ignoring lens and see men as unfairly represented as the main perpetrators of domestic violence (Carlisle et al., 2022).

Understanding and changing harmful male gender norms

Challenging harmful forms of masculinity is the responsibility of institutions, communities, families and friends and individuals. Hegemonic masculinities legitimise men's dominant position in society, perpetuating, in men, a hierarchy of masculine norms and favouring stereotypical behaviours – physical strength, denial of emotions, heterosexuality, being in control and an acceptance of violence (The Men's Project & Flood, 2018; Robinson, 2005). It is important to better understand the social, cultural, emotional and physical dimensions to masculinity and their relationship to violent behaviour (Flood, 2020; Krivoshchekov et al., 2023). Men and boys are central to that conversation. They influence other boys' and men's views about violence and are therefore critical in primary and secondary prevention efforts (Flood, 2019).[5] Research should reflect the multifaceted and dynamic nature of masculinities and how to build on healthy and respectful ways of being a man (Connell, 2020). For example, research could consider whether teaching boys and men to be more comfortable with uncertainty reduces controlling behaviours.

The evidence for what works in preventing DFSV is still limited (Flood & Burrell, 2023). In Australia, there has been an increase in programs that address harmful gender stereotypes and engage with boys and men to take up non-violent versions of masculinity (The Men's Project & Flood, 2018), partly with the aim to socialise less violent men and help them build more healthy and respectful relationships with people of all genders. Research has indicated that such programs – rite-of-passage programs, sports programs and activist programs – have potential to create more gender-equitable relationships (Keddie et al., 2023). However, we need to evaluate whether such programs are actually changing violence-supporting attitudes and reducing men's use of control over, and violence against, women and children.

Masculinity can intersect with discrimination, oppression, power and privilege to either prevent or exacerbate violence (Jewkes et al., 2015). For example, violence by Aboriginal and Torres Strait Islander men has been partly attributed to loss of traditional male roles through colonisation and community displacement (Healing Foundation et al., 2017). Therefore, primary prevention programs should be adapted and piloted with boys and men from a variety of demographic and socio-economic backgrounds to maximise their effectiveness and reach. Ideally, such programs would consider and concurrently address other forms of discrimination, such as racism and homophobia, that promote disrespect and hierarchies of power. Evaluating prevention programs that target privileged groups of boys and men (i.e. white, heterosexual, able-bodied, from mid to high socio-economic backgrounds) may be particularly valuable, since they are often found in positions of power and hold the greatest influence in changing inequitable systems.

Attitudes to gender equality and backlash

The growth of the #MeToo movement has been accompanied by more visible misogynistic rhetoric and resistance to calls for gender equality (Hill, 2021; Lisnek et al., 2022). There is some evidence to suggest that online forums, social networking sites and websites that promote misogyny and hegemonic masculinities (also known as the "manosphere") are becoming more extreme (Basu, 2020; Botto & Gottzén, 2023; Horta Ribiero et al., 2021; Rothermel, 2023). However, research is lacking on the popularity of these sites in Australia, the local drivers and impacts of backlash, and how to address these issues.

5 Secondary prevention, or early intervention, aims to identify violence against women as early as possible and connect individuals to services.

Gender diversity

Gender identities and norms are evolving, especially among children and young people (Edwards et al., 2022). It would be beneficial to explore what is driving this change for young people, to help inform education programs and appropriate responses to abuse and violence in relationships between young people.

This evolving approach to gender can present challenges for educators in getting the Australian community to recognise the higher risks of violence and disproportionate impacts on women while being inclusive of the experiences of gender diverse people. More research should investigate people's perceptions of gender identity and how this impacts their understanding of DFSV, gender norms and gender inequality. Research should explore how to convey information effectively and inclusively around the relationship between gender and violence, particularly to young people.

Trauma- and DFSV-informed, victim-centred systems

> … this whole trauma being caused by systems is a really huge one. We cannot have a system to bring an end to family violence that is actually perpetuating family violence. (Focus group participant 6)

> … the police liaison officer with DV … I said to her, "I've got complex PTSD", because I was trying to explain my reactions to what had happened and she said, "don't think that'll get you any special privileges". (Focus group participant 3)

> But I think the question that's really missing is "what does it mean for you and what do you really need?" (Focus group participant 13)

While victim-survivors can show incredible resilience and bravery in navigating complex systems and repeating their stories to multiple services, this should not be required of them. Victim-survivors need systems and policies that are responsive to their needs and do not cause them further harm. Their pathways to help seeking need to be effective in order to prevent the continuation of DFSV or increased levels of violence.

Unpacking trauma- and DFSV-informed, victim-centred systems

There is a growing body of evidence on the value of trauma-informed responses, particularly in health settings (Primary Health Network, 2023). This approach recognises people's trauma and creates a safe, empowering and collaborative environment, reducing feelings of shame associated with being a victim of violence (Salter et al., 2020). A victim-centred approach[6] elevates the voices of victim-survivors beyond standard "clients" of a service to people with unique circumstances who get help navigating systems. Systems need to be DFSV informed to understand the dynamics and impacts of DFSV and to focus on holding people who use DFSV accountable.

In addition to improving individual service responses, a victim-centred approach means taking a coordinated and integrated approach to responding to victim-survivors of DFSV across their care trajectory. Coordinated service approaches for people who use DFSV are also needed, as they can relieve some of the burden on victim-survivors to manage behaviour and help to ensure victim-survivor safety. Victim-survivors and people who use DFSV access multiple services across many sectors including banking, housing and health services (McLachlan et al., 2013). These sectors do not always have clear policies/processes on issues such as information sharing about victim-survivors or people who use DFSV. Therefore, more research should evaluate the effectiveness of intersectoral and victim-centred policies and practices across systems.

While efforts to embed these principles into DFSV services are increasing, these approaches should be adopted universally by *all* services (DSS, 2023b). Evidence suggests that a substantial number of victim-survivors who seek help from formal services in Australia did not find the response helpful (Hegarty et

6 The United Nations defines a victim-centred approach as putting "the rights and dignity of victims, including their well-being and safety, at the forefront of all efforts to prevent and respond … It requires the empathetic, individualized, holistic delivery of continuous and reliable services in a non-judgmental and non-discriminatory manner" (United Nations, n.d).

al., 2022). More evaluations are needed to understand how to improve service responses that effectively increase the wellbeing and safety of victim-survivors. We also need more research on victim-survivors from diverse ages, ethnicities, ability levels, sexualities and genders to better understand whether pathways to help seeking, obtaining justice and healing from violence are appropriate.

While reviewing and evaluating the practices of individual services is essential, research needs to consider more foundational changes to the way these systems operate. When systems are not designed for people with complex and intersecting needs, the service responses are not likely to be effective (Interim Economic Inclusion Advisory Committee, 2023). For systems where research recommendations have identified the need for deep structural change, future research should consider the development of new policies that redesign the way that systems work with people at risk of marginalisation.

The role of shame

Recent studies have suggested that shame creates an additional layer of harm for victim-survivors, and reducing it is critical in healing from violence (Salter & Hall, 2020). The concept of shame is contested but has been described as "strong negative emotions characterised by perceptions of the global devaluation of oneself" (Budiarto & Helmi, 2021, p. 132). Shame can also be a barrier to seeking help. A survey commissioned by ANROWS of 1,122 victim-survivors found that 63 per cent identified feeling shame as the reason that they did not seek help following violence (Hegarty et al., 2022). This shows that systems and DFSV services need to be shame sensitive (Dolezal & Gibson, 2022).

A DFSV- and trauma-informed workforce

A workforce that competently responds to DFSV is critical not only for the safety and wellbeing of victim-survivors and interventions for people who use DFSV, but for ending the perpetration of DFSV. There have been repeated calls for improved service-provider understanding of DFSV, particularly police and the courts system (Attorney-General's Department, 2023b; Law Enforcement Conduct Commission, 2023; Commission of Inquiry into Queensland Police Service responses to domestic and family violence, 2022; Special Taskforce on Domestic and Family Violence in Queensland, 2015; Women's Safety and Justice Taskforce, 2022a). More research is needed to evaluate the effectiveness and impact of workplace training and development for services responding to DFSV, including on victim-survivor outcomes and reducing people's use of DFSV.

The criminal justice system

Improving the justice system responses to DFSV is critical. When the justice system does not hold people who use DFSV accountable for their actions, we miss an opportunity to prevent the recurrence of DFSV. It may also reinforce or increase the power and control that people who use DFSV exert over victim-survivors (DSS, 2023b). Research on policing and court settings should focus on what works in reducing re-traumatisation of victim-survivors and increasing the accountability of people who use DFSV.

Being misidentified as the predominant aggressor of DV significantly and negatively impacts the lives of many victim-survivors (Nancarrow et al., 2020). The limited evidence on the frequency of misidentification indicates that it can particularly affect Aboriginal and Torres Strait Islander women, migrant women, and women with disability. Women's Legal Service Victoria reviewed their case files over a 5-month period in 2018 and determined that over half (n = 32) of the 55 women named as respondents to police violence order applications were misidentified as the predominant aggressor (Women's Legal Service Victoria, 2018). Seventeen (53%) of the misidentified women were born in non-English speaking countries. There is very limited evidence in Australia to understand if police misidentification may also be an issue for LGBTQI+ victim-survivors. Further research is needed to understand the extent of misidentification across Australia. This should address the impacts of misidentification on women, including effects on employment, visa eligibility, and involvement with child protection (Newton, 2023). Evidence suggests that police face a number of systemic challenges in determining the predominant aggressor (Nancarrow et al. 2020). There is a need to build evidence-based models to help police identify the predominant aggressor, rather than context-based policing to identify the primary aggressor.

Populations in focus

Addressing structural inequities in the topic of Systems and Society is intended to amplify the focus on meeting the needs of people at risk of marginalisation, including migrants and refugees, the LGBTQI+ community, people with a disability, young people and older people. While the ANRA encourages research with each of these populations, there is a need to focus in particular on Aboriginal and Torres Strait Islander peoples, children and young people, and people who use DFSV.

Aboriginal and Torres Strait Islander peoples

The preservation of strong and healthy Aboriginal and Torres Strait Islander communities is essential to Australia's future. Aboriginal and Torres Strait Islander communities have long recognised the challenges they face in addressing high levels of DFSV in their communities and have repeatedly called for resources to develop community-led solutions (Langton et al., 2020; SNAICC et al., 2017).

In response to the high rates of family and sexual violence the Commonwealth Department of Social Services (DSS) helped develop an Aboriginal and Torres Strait Islander Action Plan 2023–2025 in partnership with an Aboriginal and Torres Strait Islander Advisory Council on family, domestic and sexual violence (DSS, 2023a). The Action Plan describes the aspects of identity, structural forces and types of discrimination that overlap with, and contribute to, the over-representation of family and sexual violence experienced by Aboriginal and Torres Strait Islander women and children. Structural forces include: colonisation, patriarchy, marginalisation, media and stereotyping, institutions that harm rather than heal, and a lack of recognition and representation.

The role of colonisation in providing the underlying context for violence is also explained in *Changing the Picture* (Our Watch, 2018), which provides a framework for understanding the drivers of violence against Aboriginal and Torres Strait Islander women. *Changing the Picture* emphasises that colonisation impacts both Aboriginal and Torres Strait Islander and non-Indigenous Australians.

Aboriginal and Torres Strait Islander focus group participants emphasised a need for community-led research priorities and methods that would allow communities to have their say on what research they want and how they want it conducted. This kind of self-determination can help mitigate some negative impacts of colonisation. They were frustrated that, despite it being accepted that Aboriginal and Torres Strait Islander research ought to be community led, rarely is this achieved in practice:

> … "nothing about us without us" [has] been around for years… We still don't do it! It's everybody's favourite tagline and it's never done well. (Aboriginal and Torres Strait Islander focus group participant)

Aboriginal and Torres Strait Islander focus group participants also identified research priorities for *what* research is needed. These are organised into three areas: police and criminal justice responses, reimagining justice and healing, and working with Aboriginal and Torres Strait Islander men.

This section of the ANRA draws on quotes from Aboriginal and Torres Strait Islander participants in the focus groups to describe the research priorities. Direct quotes privilege Aboriginal and Torres Strait Islander voices and stay true to their voice.

Police and the criminal justice responses

Research is needed on:

- ways to increase the accountability of police and agencies who engage with victim-survivors and people who use DFSV to ensure they are effective
- methods to produce more robust data and research on DFV as a key driver of child removal – which is occurring at rates higher than ever before, with rates of children in out-of-home care continually increasing (Productivity Commission, 2023b)
- ways to implement more effective, respectful and culturally sensitive policing of DFSV in First Nations communities to improve criminal justice responses to people who use DFSV so they are appropriately identified and prosecuted, and to promptly implement any non-custodial interventions in line with the views of the victim-survivor

  > … We're sick of people asking, "How do we stop the violence?" And what we want to be asked is "What role do you need us to play in stopping the violence?" (Aboriginal and Torres Strait Islander focus group participant)

BOX 2:

Aboriginal and Torres Strait Islander Research Agenda

ANROWS recognises and supports the need for an Aboriginal and Torres Strait Islander research agenda. To date, no such research agenda has been developed. However, there are some examples of Aboriginal and Torres Strait Islander-led research programs.

In 2022, the Australian Research Council funded the Centre of Excellence for the Elimination of Violence against Women (CEVAW), which aims to centre Indigenous-led methodologies in DFSV research (Australian Research Council, 2022). Aboriginal and Torres Strait Islander researchers will lead research in areas that include:

- understanding how colonisation and other systems of power contribute to DFSV in Aboriginal and Torres Strait islander communities
- understanding how Aboriginal and Torres Strait Islander peoples respond to colonial systems and heal from the impacts of colonisation
- addressing and preventing violence against Aboriginal and Torres Strait Islander women
- identifying and building Aboriginal and Torres Strait Islander practitioners' skills into trauma-informed and culturally attuned responses to DFSV
- improving mechanisms to address institutional and systemic racism and models for anti-racist practice.

- ways to address police misidentification of Aboriginal and Torres Strait Islander women as perpetrators for using violent resistance or self defense

  > And so this all of a sudden becomes "Aboriginal women are perpetrators" … and when it's thrown out later on, she's still got that tag and her kids have seen her with that tag. (Aboriginal and Torres Strait Islander focus group participant)

- ways to address over and inappropriate policing in Aboriginal communities, particularly among young people and women

  > When we look at young, Aboriginal and Torres Strait Islander peoples, what I have found is that the responses to intimate partner violence in youth relationships is treated in a similar way to adult relationships. So there's not even assessment of capacity, working with communities up in, you know, Mt Isa, there's DVOs [Domestic Violence Orders] between 11-year-olds who ordinarily wouldn't even be given capacity, you think at what point is this 10- or 11-year-old able to fully understand and abide by a domestic and family violence order where it's three breaches and you're incarcerated? (Aboriginal and Torres Strait Islander focus group participant).

- ways to implement recommendations from inquiries, coronial inquiries, parliamentary investigations and research. There is a perception that the inquiries "lead to no outcomes whatsoever. And nothing is ever implemented …" (Aboriginal and Torres Strait Islander focus group participant).

Reimagining justice and healing

Research is needed to:

- explore victim-survivors' understandings of safety and justice and how services can support them to achieve this

  > … there's this idea around what does justice mean for you and reimagining justice. And I think that kind of comes out, in my experience, for, particularly for First Nations women who potentially, you know, don't get the charges that they deserved … because she's not a credible witness. But this idea of reimagining justice … So I think there's opportunity for processes to look at what justice means for people that will kind of help to counterbalance the failing that comes for women and children in the justice system because it's never gonna work the way it is, and they're never gonna tear it down and rebuild it. (Aboriginal and Torres Strait Islander focus group participant)

- understand the long-term impacts of DFSV disclosure that non-Indigenous communities would not experience, such as impacting an individual's eligibility to be a kinship carer

  > One of the things that I've been thinking about recently was the impact on kinship, if there's ever been any kind

> of disclosure around domestic and family violence and the difficulties with getting a blue card, which means that you're then ineligible to be a kin carer. So, I think there's so many systems here that interplay and none of them really look at the long-term consequences of these things, like the fact that people who can't get a blue card can't work or care for children. (Aboriginal and Torres Strait Islander focus group participant)

- develop the evidence for effective models for Indigenous healing and recovery from trauma for both victims and people who use DFSV.

Engaging with Aboriginal and Torres Strait Islander men as partners in the conversation, not as perpetrators

Research is needed to:

- address misunderstandings about what it means to be a strong First Nations man. There are ways to be culturally safe, while also holding people accountable for their use of violence
- understand DFSV perpetrated by non-Indigenous people on Aboriginal and Torres Strait Islander women and children. Violence in First Nations communities is too often constructed as perpetrated by First Nations men within the community, obscuring discussion or research of the violence perpetrated by non-Indigenous people.

Children and young people

> … we're just desperate for some research around the effects of this intergenerational trauma and trauma on children and young people who are both victims and silent victims of family violence and how they need their own specific responses. (Focus group participant 11)

> … there is no focus specifically or primarily on children's ability to rehabilitate … I think that there is a massive, massive, massive oversight … if we're to end the violence against children, we actually need to know how to not only remove the children out of that violent situation but protect them and rehabilitate them as their own people. (Focus group participant 14)

As victim-survivors in their own right

Children and young people are increasingly being recognised not just as witnesses to DFSV, but as victims in their own right.

There is increasing focus on how to enliven the rights of victim-survivor children through DFSV service responses, including in schools, police, courts, therapists and specialist DFSV services. There has also been an increasing interest in programs designed to assist children and young people in their recovery (DSS, 2023b). However, trials of such programs have been limited in Australia (Hooker et al., 2022). Further evaluations are needed on effective therapeutic interventions for children, especially those who are neurodiverse and from a diverse range of demographic and socio-economic backgrounds. Programs should include options for therapists to work only with children, as well as the whole family.

Children and young people from diverse demographic and socio-economic backgrounds should be consulted to better understand their experiences of DFV (including coercive control) and how DFV programs and services could be better designed to assist, protect and/or benefit them. To ensure this engagement is safe and respectful, there is the need for an evidence-based framework co-designed with young people.[7] This could build on the guidance by the Australian Institute of Family Studies (Goldsworthy, 2023), as well as DFSV practice frameworks for working with children from diverse backgrounds (see, for example, Foley et al., 2023; Morgan et al., 2023).

More evidence-based interventions for children traumatised by violence can help prevent some children from growing up to use violent and abusive behaviours in adulthood and/or experience re-victimisation.

Education

It is critical to improve children and young people's education about healthy relationships, consent, and coercive behaviour using real world scenarios to help prevent further violence. Ideally, programs that engage children across their education

7 Please refer to Section 2, "Ways of Working: Listen to Children when they are Children", for our recommendations on inclusive research with children and young people.

from early childhood should be developed and evaluated with longitudinal research (Cahill et al., 2023).

It is important to understand what tools most effectively encourage non-violent behaviour, respectful attitudes, and teach young people how to negotiate consent in their early romantic relationships. Education programs should be tested that include nuanced framing to encourage children and young people to think beyond binaries around gender, being violent or not violent or respectful or not respectful.

People who use DFSV

> We don't know anything about rehabilitating people. We don't know how to do it. And punishing people doesn't work … nobody knows how to do that, and it'd be really, really interesting if we could actually start doing that, stopping people from perpetrating again. (Focus group participant 4)

> We need to focus on perpetrators. But we also need to have a degree of compassion in focusing on the perpetrators … And I think we need to look at that nuance of it too … a lot of them are nasty, damaged people. And we need to, if we fix the damage or face into the damage, you can actually cut a bit of family violence as well. You're not going to eliminate it but you're certainly going to cut it. (Focus group participant 12)

Improved evidence is needed on the prevalence and characteristics of those that use DFSV, on what leads people to use DFSV and the interventions that work best with particular cohorts, including the factors that encourage them to do so. Research with people who use DFSV can be very difficult: in obtaining ethics approvals, ensuring safety and recruiting participants. However, interventions will more likely succeed when we understand the perspectives of people who use DFSV better.

Pathways into violence

People who use DFSV are not homogenous. We need to understand the specific pathways that lead people to use different forms of DFSV, including which systems, institutions, and social norms enable perpetration. Research into the role of factors such as mental illness, childhood trauma, alcohol and drugs, and gambling in influencing pathways into violence would provide a more nuanced picture of the most effective points in people's lives and relationships to prevent abusive behaviour and violence.

Behaviour-change programs that address trauma

Evidence suggests that childhood experiences of violence or abuse are a risk factor for adult perpetration of DFSV (Campo, 2015; Clare et al., 2021; Costa et al., 2015; Fitz-Gibbon et al., 2022; Holt et al., 2008). To date, research in Australia has tended to be on perpetration programs that predominantly focus on recognising and changing problem behaviours. More evaluations are needed of programs that focus on accountability to recognise, where appropriate, the traumatic life trajectories of people who use DFSV as victim-survivors and to provide opportunities to address their trauma.

Pathways out of violence

More research is also needed on the factors that encourage people to stop using DFSV and the points in their lives that this occurs. The factors vary depending on a person's individual history and background, so research should engage with diverse cohorts.

Shame is a potential risk factor for violence that deserves further exploration. Shame can manifest as a chronic condition, especially in post-trauma states, and is included in the diagnostic criteria for post-traumatic stress disorder (PTSD; Dolezal & Gibson, 2022). Feelings of shame can result in negative behaviours such as withdrawal, avoidance or aggression (Dolezal & Gibson, 2022). However, shame also has social utility in inspiring adherence to communal values and cultural norms (Dolezal & Gibson, 2022). Therefore, shame is multidimensional with positive and negative possibilities. It has the potential to act as a motivation to stop using violent behaviour, or alternatively to contribute to the choice to use violence and/or prevent people from seeking help for violent behaviour.

A more nuanced understanding of the prevalence and dynamics of DFSV

While some data exists on prevalence, causes and characteristics of DFSV, our knowledge is limited about the use of DFSV towards Aboriginal and Torres Strait Islander women, migrant and refugee women, LGBTQI+ people, women with disability and older women. Increasing the evidence base about the use of DFSV towards victim-survivors from these groups will lead to more reliable guidance on who is at higher risk of being a victim or using DFSV in early intervention and screening. For example, more knowledge about the relationship between trauma and violence would assist in the development of tailored responses to perpetration. Research would also help us understand how overlapping forms of discrimination such as racism, homophobia, transphobia and ableism influence the use of violence.

Prevalence data on violence against Aboriginal and Torres Strait Islander women is collected through the Australian Bureau of Statistics's [ABS] 6-yearly National Aboriginal and Torres Strait Islander Health Survey, last released in 2019 (Australian Bureau of Statistics [ABS], 2019b). Given that improving the safety of Aboriginal women and children is a priority of Closing the Gap Target 13 (Productivity Commission, 2023a), there is a need for more current data about the prevalence of violence against Aboriginal women and children and the characteristics of those perpetrating against them – including non-Indigenous users of violence. Subject to appropriate data collection practices,[8] we need to make better use of existing data about the prevalence and characteristics of violence through agencies such as police and child protection.

Migrant and refugee women face unique forms of DFSV, such as forced marriage, which we have little evidence about in Australia (Federation of Ethnic Communities' Councils of Australia, 2019; Lyneham & Bricknell, 2018). Further research to understand the dynamics of forced marriage in different cultural contexts and the characteristics of those responsible would be useful. Current evidence suggests that criminalisation on its own is unlikely to effectively deter forced marriage and may discourage victim-survivors from seeking help (Lyneham & Bricknell, 2018). We need to evaluate other ways to effectively prevent or intervene in cases of forced marriage without putting victim-survivors at greater risk.

Women with disability may be subject to reproductive violence from family members and guardians, including forced abortions and sterilisation (Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, 2023; Vallury, 2022). There is very limited evidence in Australia on the characteristics and motivations of those who use reproductive violence against women with disability, how widespread these practices are in Australia, and how to effectively prevent coercive practices and support parents and carers to look after the reproductive health of women with disability.

Previous ANROWS studies have found that trans, lesbian and bisexual women are at higher risk of sexual violence than heterosexual women (Ussher et al, 2020; Townsend et al. 2022). However, national prevalence data for DFV among LGBTQI+ couples is still needed. We know little about the motivations and characteristics for DFSV perpetration against LGBTQI+ people in Australia (particularly for non-binary people). Further information could help tailor programs for people who use DFSV that go beyond traditional gendered assumptions about perpetration and victimhood.

Types and patterns of violence

There are significant research gaps in three types of violence: sexual violence, coercive control, and economic abuse.

The difficult task of identifying coercive control and effectively reducing controlling behaviours requires more sophisticated and evidence-based DFSV service responses. The growing criminalisation of coercive control in Australia has led to a need to better understand its effects on victim-survivors.

8 See the section "Make Better Use of Existing Data" for further discussion about data limitations.

Sexual violence

> … anything to kind of strengthen that research agenda can be used by campaigners to say it is completely inappropriate to have sexual violence prosecuted in front of a jury. (Focus group participant 7)

The available evidence indicates that sexual violence is a growing problem in Australia, and our established systems are not properly equipped to respond to victim-survivors or people who use sexual violence effectively (DSS, 2022). Younger women in Australia are more likely to report experiencing sexual violence in their lifetime: prevalence rates are 51 per cent of women born from 1989 to 1995, while they are 34 per cent for women born in 1973 to 1978 (Townsend et al., 2022). Research to improve criminal justice system responses are particularly urgent: in 2016, only 11.3 per cent of women said they had contacted police in relation to their most recent sexual assault (AIHW, 2022).

The criminal justice system

For victim-survivors who choose to report sexual violence to police, many have identified problems when reporting, such as dismissive police attitudes (Lawler & Boxall, 2023; Ting, Scott, & Palmer, 2020). Large numbers of sexual assault complaints do not proceed to court. Between 2008 and 2017, police closed around 25 per cent of sexual assault cases across Australia without making an arrest (Ting et al., 2020). This research also showed large variations between jurisdictions in the numbers of sexual assault complaints that are rejected or "unfounded", from 20 per cent in Queensland to 4 per cent in Tasmania.[9] More research is required on police officers' understanding of sexual violence and the reasons that reports of sexual violence are not proceeding to trial. Additionally, more evaluations are needed of police competency in responding to sexual violence complaints.

Despite the high rates of sexual violence, only 28.7 per 100,000 of people reported for committing sexual assault are proven guilty (AIHW, 2020). It is critical to undertake further research into why the charging rates and conviction rates for sexual assault are so low and why sentences are often not custodial despite involving multiple victims, significant violence, or repeated offending (AIHW, 2020). Some studies have examined judges and juries' misconceptions about sexual violence and its victims (Tidmarsh & Hamilton, 2020) and reasons for general community attitudes of mistrust towards women's reports of sexual violence (Minter et al., 2021). ANROWS's recent iteration of the NCAS indicated that there are still concerning levels of the Australian public that do not believe women's and girls' reports of sexual violence, with 34 per cent believing women report as a form of revenge and 24 per cent believing they report because they regretted consensual sex afterwards (Coumerelos et al., 2023). These attitudes may help explain why juries do not convict people accused of sexual violence. Research needs to explore the impact of community beliefs and attitudes on sentencing outcomes and the education that may be required with juries in sexual violence matters.

Conversely, further research is needed on how legal definitions of rape and consent impact on community attitudes towards sexual violence, including the need to demonstrate active resistance. Legal definitions of sexual violence vary between states and territories. Some states have introduced affirmative consent laws, meaning that all parties need to give and obtain consent before any sexual activity (Senate Legal and Constitutional Affairs References Committee, 2023). In 2023, the Senate Legal and Constitutional Affairs References Committee conducted an inquiry on sexual consent laws in Australia. This included inconsistencies in the state and territory definitions of consent, and how consent laws impact victim-survivors experiences of the justice system. Recommendation 4 of the report from this inquiry recommended the Australian Law Reform Commission "includes an affirmative consent standard in any proposal to harmonise Australia's sexual consent laws and taking into account the evidence of the operation of recently adopted affirmative consent laws" (Senate Legal and Constitutional Affairs References Committee, 2023). We need more research on the low conviction rates, how sentencing outcomes affect the attitudes and behaviours of people who use sexual violence, and whether sentencing outcomes enable or disrupt their use of sexual violence.

9 Police have inconsistently used the category "unfounded" to justify when a case is closed. "Unfounded" cases can include withdrawn complaints and cases that police have determined to be unsubstantiated or inaccurate reports (Ting et al., 2020).

The current adversarial system for prosecuting sexual violence is not victim centred or trauma informed and would require extensive changes to become so. ANROWS recommends trialling and evaluating alternative justice mechanisms for sexual violence that may more effectively support the safety and wellbeing of victim-survivors. *The Meeting of Attorneys-General Work Plan to Strengthen Criminal Justice Responses to Sexual Assault, 2022–2027* has committed to building a shared evidence base and suggested that exploring restorative justice practices and alternative reporting mechanisms for sexual offending would be valuable (Attorney-General's Department, 2022).

Sexual consent education

Obtaining sexual consent is an act of negotiating power. Various factors can influence who holds power in a sexual relationship, including gender, age, sexual histories, and the length of the relationship. Evidence indicates that the Australian community does not understand sexual consent well; they lack confidence in addressing it and many still try to avoid dealing with it (Kantar Public, 2022; Women's Safety and Justice Taskforce, 2022b). Improving community understanding and skills in negotiating consent can help to prevent acts of sexual violence (Minter et al., 2021). Evaluations are needed of practical education programs and resources that help people of different ages to navigate sexual consent. Education should address the practicalities of navigating consent in the moment, the role of power dynamics and how they can change, and what to do if you or your partner cross consent boundaries or use coercive behaviours to gain consent.

The media

The media has a significant influence on community attitudes. Previous ANROWS research that analysed media representations of violence found that the framing of sexual violence news stories minimised the harms of rape, and 16 per cent of news stories inferred women had put themselves at risk (Sutherland et al., 2016). Some forms of media, especially mainstream pornography, portray women as subordinate and depict men's sexual entitlement and lack of women's sexual pleasure as "normal" (Miller, 2019). More research is needed on how media (including pornography) portrayals of male sexual entitlement and sexual violence impact on societal attitudes and individual behaviours, particularly on young men. Police data from 2018 to 2019 shows that young men aged 15 to 19 are the age group that commits the most sexual violence offences (AIHW, 2020).

Sexual harassment

Sexual harassment exists on the sexual violence continuum. In Australia, 77 per cent of people have experienced sexual harassment at some point since they were 15; in the workplace, the rate is one in three (AHRC, 2022). Like sexual violence, there is low reporting of, and accountability for, workplace sexual harassment (AHRC, 2022). While we now know more about the prevalence and the targets of sexual harassment, effective workplace responses – and the motives for sexual harassment – are still not well understood. Research is needed on the factors and systems that enable people to sexually harass others.[10]

Coercive control

> … there is a lack of understanding of coercive control, there is a lack of understanding of the power imbalance … (Focus group participant 5)

> I think that they're missing the link between how significant coercive control in particular is … (Focus group participant 14)

Understanding and prevalence

Coercive control is a course of conduct aimed at dominating and controlling another (usually an intimate partner but can be other family members; ANROWS, 2021) and, in heterosexual relationships, is almost exclusively perpetrated by men against women (Johnson, 1995; Nancarrow, 2019; Pence & Dasgupta, 2006; all cited in ANROWS, 2021). There has been an emerging body of research about coercive control in Australia in the past few years. There have also

10 There are concerted efforts by government to undertake this research with the soon to be released National Strategy to Achieve Gender Equality, and organisations, such as the AHRC that undertake the national sexual harassment survey every 4 years, and Our Watch, who have developed prevention tools for workplaces. ANROWS currently has four projects exploring workplace sexual harassment across different settings for different groups as part of the Sexual Harassment Research Program 2021–2024.

been changes in policy, for example the development of the National Principles to Address Coercive Control in Family and Domestic Violence (Attorney-General's Department, 2023a), but there is still a lot that we do not know. Firstly, it would be valuable to have more evidence about the Australian community's understanding of coercive control and whether they know where to get help (for victim-survivors and people who use DFSV). More data is needed about the prevalence and drivers of coercive control (Beckwith et al., 2023), and more accurate community understanding of coercive control can help to improve the reliability of these figures.

Impacts and effectiveness of criminalisation

Research should explore the most effective response models for people using coercively controlling behaviours. Australian states and territories are increasingly criminalising coercive control, using varying definitions of the behaviours involved. However, to date there has been limited Australian evaluations on whether criminalising coercive control effectively reduces DFSV.

Evaluations of coercive control legislation need to assess any unintended consequences of criminalisation on the safety and wellbeing of victim-survivors, especially any potential negative impacts on Aboriginal and Torres Strait Islander women and migrant and refugee women (Newton, 2023). Aboriginal and Torres Strait Islander organisations have raised concerns that criminalising coercive control is likely to increase Aboriginal women's risk of misidentification and criminalisation (Buxton-Namisnyk et al., 2022). Research will need to assess the effects of coercive control laws on Aboriginal and Torres Strait Islander women and migrant and refugee women, including changes to rates of incarceration and criminal charges since the introduction of new laws. Examining the application of coercive control laws may help to prevent further systemic discrimination.

Economic abuse

> … [if] you're sharing a bank account with your abuser, it might go directly into their account as well. (Focus group participant 9)

The behaviours involved in economic abuse are not clearly defined in research, policy or legislation, which makes it difficult to understand the extent of the problem in Australia (Gendered Violence Research Network, 2020). Experiences of economic abuse are often "hidden" and can include exploitation (dowry abuse and appropriating partners income); control (withholding money or assets, threatening to disconnect essential services); and sabotage (preventing a partner from working or studying; Deloitte Access Economics, 2022).

Increased financial insecurity from economic abuse can make it more difficult for victim-survivors to leave their partner, to stay safe when leaving, and can increase the power that people who use DFSV have over them. Economic abuse from family members can also increase risks to women already at risk of marginalisation and poverty.

The ANROWS Evidence Portal is a living resource that uses systematic review methodology that draws on evidence from high income countries. It is a repository of interventions designed to end violence against women. In November 2023, 520 studies were included in the ANROWS Evidence Portal. Of these studies, 20 focused on financial disadvantage and abuse. These evaluations were situated within the DFV sector and focused on individual behaviour change, rather than broader community or societal change. Predominately interventions focus on financial literacy of victim-survivors. None of the 20 evaluated interventions focused on prevention. However, there are interventions in low- and middle-income countries that include cash transfer, microcredit programs and gender-transformative economic-empowerment interventions.

Most of the evaluated interventions in the ANROWS Evidence Portal focused on IPV, not other forms of family violence such as elder abuse or dowry abuse. While the evidence base in Australia is limited, it is clear that a substantial minority

of older women experience abuse from adult children (Australian Institute of Family Studies, 2022), and migrant and refugee women experience dowry abuse by extended family members (Senate Legal and Constitutional Affairs References Committee, 2019).

Further research is required to develop and evaluate trauma-informed and fit-for-purpose services within sectors such as the financial industry, telecommunications and government agencies such as Centrelink. These services need to include proactive mechanisms to identify people at risk and to intervene early and respond effectively. We also need evaluations to assess whether these services are designed inclusively with an intersectional lens.

Long-term impacts and system and service responses

The harms of economic abuse can have lasting consequences for victim-survivors well beyond the end of the relationship (Gendered Violence Research Network, 2020). Further research is needed on these long-term impacts (such as credit-rating impact, inability to access utilities or tenancies due to negative records). We need evidence on how public and private systems can better respond to victims and prevent economic abuse from occurring (Cortis & Bullen, 2015). Governments and the private sector need to develop innovative partnerships[11] to build the evidence base (Cortis & Bullen, 2015). Collaboration between government service providers and organisations such as migrant and refugee settlement services, real estate bodies, and telecommunications could provide a broader picture of the impacts of economic abuse and opportunities for prevention.

Effectiveness of policy responses

Economic security can help protect against the harms of economic abuse (Morgan & Boxall, 2022). Recent changes to government policy promote economic security when leaving a violent relationship, such as changes to paid domestic violence leave and the increase to Centrelink's single parent payment. Research into how and when victim-survivors access domestic violence support payments from Centrelink after leaving a violent relationship, and their adequacy, could ensure victim-survivors are appropriately financially supported. This research should examine the factors that intersect with economic abuse to better inform policy and access to services as well as strengthen economic security for those at risk of victimisation (Morgan & Boxall, 2022).

Older people[12]

For older people, economic abuse is predominantly perpetrated by their child/ren (Australian Institute of Family Studies, 2022). Research can expose the tactics used to perpetrate financial abuse against older people; this would show how this co-occurs with other forms of abuse, the influence of traditional gender roles on risk of victimisation, and how it impacts their economic security (Breckenridge et al., 2020). Understanding the barriers that service providers (both government and private) face when responding to financial abuse of older people would help develop prevention initiatives (Breckenridge et al., 2020).

Research on how to improve older women's economic security following economic abuse is vital. Older women can find it very difficult to recover from economic abuse. They may have limited savings and superannuation because they spent less time in the workforce than their partners or have few opportunities to seek new employment because of factors such as health and physical restrictions and age discrimination.

Dowry abuse[13]

Despite dowry abuse being a significant problem for migrant and refugee women in Australia, particularly those from South Asian and Middle Eastern countries (State of Victoria, 2016), legislative responses remain limited and inconsistent: outside Victoria the practice is not a crime in any Australian state or territory. The dynamics of dowry abuse are unique

11 This includes partnerships such as CommBank's Next Chapter initiative work with community services to help victim-survivors of financial abuse (and DFV) to achieve financial independence. The Commonwealth Bank's partnership with the UNSW Gendered Violence Research Network recommends several areas of future research in this area.

12 Note that older men are also victims of economic abuse; however, due to IPV being gendered in nature, economic and financial abuse of older people often gets categorised as elder abuse and not as a form of DFV (Gendered Violence Research Network, 2020).

13 Dowry abuse is "any act of coercion, violence or harassment associated with the giving or receiving of dowry at any time before, during or after marriage … Dowry-related abuse commonly involves claims that dowry was not paid and coercive demands for further money or gifts from a woman and her extended family" (DSS, 2019).

and can involve extended family and prospective extended family members. Demands for money can be accompanied by other forms of abuse, such as emotional and physical abuse. Powerful forces can prevent women from reporting dowry abuse such as: community ostracisation and having very limited independent resources, especially if their work and social security benefits are restricted by visa requirements (DSS, 2019). Further research should target the prevalence, characteristics and motivations for dowry abuse in Australia. This research should first consult with migrant and refugee communities to safely collect data. Some experts have argued that alternatives to criminalisation may be a more appropriate response (Senate Legal and Constitutional Affairs References Committee, 2019). Ideally programs aiming to prevent and respond to dowry abuse in different ethnic communities should be evaluated.

Section 2: Ways of working

> It is not just the research that we do, but how we do it, that matters.

The co-design sessions set out to develop the ANRA research priorities and to articulate the priorities for how that research should be developed, funded and conducted: our "ways of working".

Throughout the co-design process, it became clear that ANROWS needs to further develop its understanding of:

- what is meant by evidence and "ways of knowing"
- what different ways of knowing might look like
- who researchers should engage with or work with in different ways.

In this section we discuss the different research traditions and ways of knowing that can contribute to the evidence base to end DFSV. ANROWS will adopt these ways of working and ways of knowing, and we recommend them to anyone undertaking, participating in, or funding research on, DFSV in Australia.

Appreciating the landscape from multiple dimensions

ANROWS recognises that there are multiple research traditions that increase the knowledge base for ending DFSV. Both Indigenous research methodologies[14] and feminist-participatory action research can address power imbalances that may exist in other research paradigms. Meaningful and authentic co-creation and participatory research helps to disrupt norms around who holds the power to produce knowledge (Smith, 1999).

The co-design process and the focus groups clearly recognised those ways of knowing and doing that sit outside mainstream research traditions, especially working with the knowledge of experts by experience.

Indigenous research methodologies and methods

For many Aboriginal and Torres Strait Islander peoples it is hard to disassociate lived experience from other roles and responsibilities (Aboriginal participant). It is possible to be an academic, a person with lived experience and a community leader (Aboriginal participant). Compartmentalising different roles may sit more comfortably in mainstream worldviews. Martin Nakata, an Indigenous academic, defines a worldview as a system comprising knowing (ontology), believing (epistemology) and acting (methodology; Nakata, 2002). ANROWS recognises Aboriginal and Torres Strait Islander ways of knowing that address power imbalances through Indigenous research methodologies (Smith, 1999).

Indigenous methodologies have always existed and are based on connection; they remove power differentials between researcher and participant (National Indigenous Research and Knowledges Network, 2022; Ryder et al., 2020). This "living knowledge" has been passed down through generations and is always evolving (Ryder et al., 2020). Indigenous methodologies encourage the researcher to "take time" to immerse themselves in the community to more deeply understand context (National Indigenous Research and

14 The Anti-Colonial Research Library (published September 2023) contains open access journals and text on Indigenous research methodologies and decolonising approaches to research, see https://www.anticolonialresearchlibrary.org/.

Knowledges Network, 2022). Methods such as Dadirri,[15] which builds trust and connection and is rooted in deep and respectful listening, can enhance understanding of the data by allowing the researcher to "appreciate cultures and environments of Indigenous peoples and how and why they function within those" (Stronach & Adair, 2014).

Aboriginal and Torres Strait Islander researchers in the co-design and consultation of the ANRA reminded us that these methodologies can also apply to *any community,* such as those with lived experience of violence. Recognising the limits of traditional western methodologies (Smith, 1999) allows us to incorporate Indigenous methodologies into research, "research at the interface" as it is known, enriching the evidence base (Ryder et al, 2020). In this way, research itself can become decolonising.

It is also true that non-Indigenous people with lived experience hold multiple roles and choose when, and if, to share their lived experience. Individuals with lived experiences of DFSV sometimes need to compartmentalise themselves, or elements of who they are, to align with existing structures and social norms (Survivor and researcher co-design participant). While recognising that shame or fear of judgement often inhibits people disclosing lived experience in certain settings (Dolezal & Gibson, 2022), that person is always cognisant of their lived experience and managing their own trauma. The sharing of lived experience is an act of deep generosity and bravery, often fuelled by determination that other people do not experience abuse or harm (Elliot, 2023).

At ANROWS, we respect that there are ways of knowing that do not sit within mainstream research traditions and seek to find ways of working that respect, employ and value these different ways of knowing (see Box 3).

15 While it is not the purpose of the ANRA to discuss each Indigenous research methodology in detail, Dadirri has been provided as an example. The purpose of discussing Indigenous research methodologies overall is to encourage researchers exploring other "ways of knowing, being and doing" (Kennedy et al., 2022) , such that researchers are not restricted to mainstream western research methods. The research methodology should be the most appropriate for the research question and the community the research is focussed on.

BOX 3:

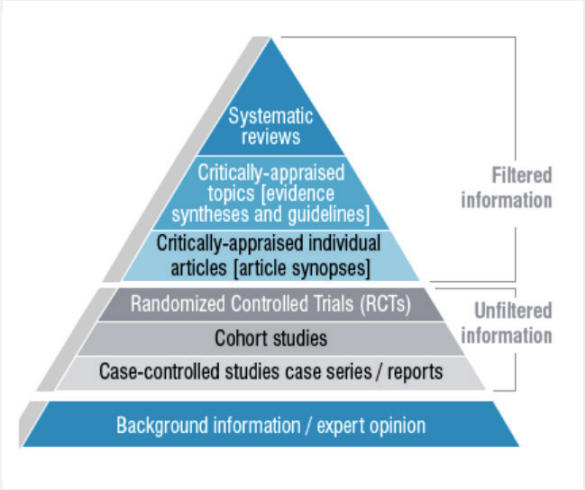
Overview of mainstream research traditions

Research is systematic and follows specific and rigorous processes that include the development of the research questions, as well as collecting, analysing and interpreting the data. Dominant research approaches include qualitative, quantitative and mixed methods. However, worldviews and personal and professional cultures underpin the approach to research and have influenced the development of many different research traditions. Three common epistemologies as part of the western scientific tradition include positivism, post-positivism and interpretivism.

Positivism claims to follow an objective approach, focusing on systematically gathering evidence and facts. Positivist researchers are inclined to quantitative knowledge and seek larger datasets to gain broader insights (McGlinchey, 2022, as cited in E-International Relations, 2021). Post-positivism, rejecting the idea that research can be objectively observed, holds that the identity and ideas of a researcher influence what they observe and, therefore, how they structure the research and its findings. Interpretivism argues that objectivity is impossible, instead focusing on generating subjective knowledge and favouring qualitative analysis.

The National Health and Medical Research Council (NHMRC) has developed a hierarchy of evidence based on the rigor of different study types (see Figure 1). Experts within the positivist tradition argue that the higher up the hierarchy the study design is located, the more likely it is that the risk of bias is minimised.

Figure 1: The Evidence Hierarchy[16]



Most feminist research uses a critical research approach that aims to identify and critique systems of power and inequity. Positivist, post-positivist and interpretivist approaches have been used extensively in DFSV research and have contributed substantially to what we know. However, there has been increasing interest in research designs that aim to address power imbalances between researchers and the researched. Participatory action research (PAR), for example, has been described as: an approach to research that prioritises the value of experiential knowledge for tackling problems caused by unequal and harmful social systems and for envisioning and implementing alternatives. PAR involves the participation and leadership of those experiencing issues, who take action to produce emancipatory social change, through conducting systematic research to generate new knowledge (Cornish et al., 2023, p. 1).

16 National Health and Medical Research Council (2009), as cited in University of Canberra (n.d.).

Approaches to research

In this section we discuss creating space for pilots and evaluations of community-led interventions and making better use of existing data. Each section discusses the benefits and challenges of these approaches and includes examples of research in practice to encourage reflection on ways to implement the principles.

Create space for pilots and evaluations of community-led interventions

> … it's about having the community say we want research on this, and this is how we want it done, and this is who we want it with, and having the community as the drivers of that research and then they're working out how it's going to be used and how it's going to be applied. (Focus group participant 7)

> … for me, the (research) gap is the gap between what we think research is telling us, but what is actually happening on the ground … we get this little picture and it's normally the same people that come to the table. (Focus group participant 10)

The co-design workshops recommended creating space for pilots and evaluations of community-led interventions. By this, we mean research selected and undertaken by people who identify as being part of the population that researchers seek to understand and who are impacted by the research topics. Community members are involved in the whole research process, from setting the research question(s) to data collection, analysis and monitoring.

Benefits and challenges

Community-led interventions can create innovative ways of preventing and addressing violence within communities. They also encourage participation in research and provide opportunities to upskill community researchers. Solutions are tailored and meaningful to individual contexts. This kind of research reduces power imbalances between researchers and communities (Goodman et al., 2017; Lamb et al., 2023).

Community-led research can have challenges. The research findings may not be widely applicable to other communities. Researchers can also find it difficult to determine the "right" people to work with in communities where there are people or groups that hold opposing views. There needs to be time to build trust and understanding between communities and researchers before the research commences, and researchers and institutions need to take the time to work alongside and with community researchers and co-researchers with lived expertise to upskill them in research practice "on the job".

While community-led research aims to give some power back to communities to determine their own priorities, power imbalances can still be present. Projects are generally reliant on more powerful funding bodies such as ANROWS that can influence the focus, scope and timeframe of evaluations.

Considerations for implementation

Researchers should recognise their position of privilege and reflect on how aspects of their identity – including their gender, sexuality, ethnicity, education level and age – may influence their relationships with community-based researchers.

A position of cultural humility engenders a deeper understanding of privilege. Cultural humility refers to a "lifelong commitment to self-reflection and self-critique", to "redressing power imbalances" and "developing mutually beneficial and non-paternalistic clinical and advocacy partnerships with communities" (Tervalon & Murray-Garcia, 1998). Cultural humility goes a step beyond cultural competence in recognising the need for continuous learning as an approach that does not position researchers as the only experts (Tervalon & Murray-Garcia, 1998). Methodologies that support cultural humility include community-based participatory research, participatory action research, and Indigenous research methodologies.

RESEARCH IN PRACTICE

Aboriginal-led Maranguka Justice Reinvestment project – Bourke, NSW

In 2012, the local Aboriginal community in Bourke, NSW, wanted to address rising crime rates in their community. The community partnered with Just Reinvest NSW, who aim to support Aboriginal communities in developing their own solutions for change (Just Reinvest NSW, n.d.). A coalition was formed (auspiced by the Aboriginal Legal Service NSW/ACT).

The Bourke Tribal Council developed a long-term strategy: "Growing our kids up safe, smart and strong." Three working groups were set up to work on three key areas: early childhood, 8- to 18-year-olds, and the role of men. Together the community developed initiatives to reduce recidivism and family violence as well as achieve positive social outcomes. The Maranguka model is to work with service providers, PCYC, police, youth services and DFV services in Bourke to share data, identify issues and together come up with solutions that work for community.

A 2017 impact assessment found there had been a 23 per cent reduction in police recorded DFV and a 42 per cent reduction in days spent in custody (KPMG, 2018). A reduction in criminal justice statistics also resulted in savings to the NSW economy. This model shows that sometimes more effective responses involve less police intervention and a more intersectoral and community-based approach.

Make better use of existing data

> I was wondering if there was something you could do with the SARO [NSW Sexual Assault Reporting Option] data because I mean, that they are collecting a lot of it, but I don't think the police are doing much with it … there is a lot of data in there that could be used. (Focus group participant 4)

There is a considerable amount of administrative data collected on DFSV victim-survivors and people who use DFSV that is not being used for research purposes. This includes data collected by agencies as well as services who engage with them for other purposes, such as banks, real estate/housing services, and social media platforms.

Improved use of administrative data can include data development, data linkage and enhanced data analysis. Data development relates to new data collections or the creation of new data items in existing collections. Data linkage involves connecting existing data across multiple datasets where there is a unique identifier for individuals. Enhanced data analysis refers to conducting further analysis of existing data.

Benefits and challenges

There are substantial resource benefits from leveraging existing administrative data for research. The approach builds on the principle of collecting data from people once and using it often (AIHW, 2007).

Administrative data can help fill significant research gaps in our understanding of the characteristics and dynamics of violence and how victim-survivors and people who use DFSV engage with services. Administrative records can triangulate and enrich data collected through other methods such as interviews and surveys. This data can be useful in evaluations of programs, particularly when looking at longer-term program outcomes.

Using administrative data requires careful adherence to privacy laws and ethical research standards. Data custodians hold a powerful position in their ability to access and analyse

people's personal information without explicit consent. While administrative data can be a rich source of insight, those whose data is being used often don't know their information will be used for research purposes. Administrative data is therefore often based on limited, pre-determined items to gain quantitative knowledge. This means that it is more limited in its ability to provide nuance about people's unique experiences.

Identifying the data of people who use DFSV is difficult since it often relies on those who have engaged with the criminal justice system. People who use DFSV may be identified through other means, such as health screening and workplaces, but privacy laws can restrict the sharing of this information. We need to keep looking for ways to improve mechanisms to identify and share information about people who use DFSV to assist researchers to collect and link data.

Researchers should carefully consider the methods used by agencies to collect data and how this may influence findings and potentially perpetuate inequities. For example, when collecting historical data, who is likely to have collected the data, what was its primary purpose, and how might this influence their judgments of victim-survivors or people who use DFSV? Are there people unlikely to be captured in the data because of issues such as reporting barriers or our evolving understanding of the dynamics of DFSV, gender and sexual identity?

We need to improve administrative data collection about Aboriginal and Torres Strait Islander peoples. The current lack of disaggregated data about gender and Indigeneity means that Aboriginal women can be made invisible when advocating for better service delivery. There are several risks in using administrative data collected about Aboriginal and Torres Strait Islander peoples to date, and so we need to carefully consider its limitations and opportunities for improvement. For example, identifiers for Aboriginal and Torres Strait Islander peoples are not collected consistently by DFSV services, or they are collected in situations where people may not be comfortable to disclose their Indigenous status (National Indigenous Australian Agency, 2023). Aboriginal community-controlled organisations report not having enough resourcing to collect data about their clients and/or document this information to inform service monitoring and evaluations (Productivity Commission, 2023a). Furthermore, although rights to data sovereignty have been recognised internationally in human rights instruments such as the United Nations Declaration on the Rights of Indigenous Peoples, Aboriginal and Torres Strait Islander peoples in Australia often have no control over how their data is collected and used. For organisations seeking to implement more appropriate and collaborative ways of collecting Aboriginal and Torres Strait Islander data, there are tools available (for example, the Kowa Collaboration resources).

Considerations for implementation

Data development

Where the need for a new data collection has been identified, we recommend establishing a national minimum dataset (NMDS) to improve consistency and comparability of data over time. The NMDSs should draw on existing national standards wherever possible. For example, the Australian Institute of Health and Welfare (AIHW) METEOR site is a registry for Australian metadata standards for statistics in the health and welfare sectors.

ANROWS recommends that any efforts to improve how data is done be in accordance with *Improving the Collection and Use of Administrative Data on Violence against Women: Global Technical Guidance* (United Nations Entity for Gender Equality and the Empowerment of Women & World Health Organization, 2022) and the ABS's Data Collection and Reporting Framework (ABS, 2014).

The principles above also apply when developing a new data item/s for an existing collection. Researchers developing new surveys, should collect information according to existing standard national population survey questions and or standards (e.g. ABS's Standard for Sex, Gender, Variations of Sex Characteristics and Sexual Orientation Variables).

New ways of collecting data about victim-survivors and perpetrators are being developed and refined by DFSV and other services, such as the NSW Police Force's Sexual Assault Reporting Option (SARO; n.d.) and the Commonwealth Bank's (2023) identification of financial and domestic abuse. These data sources may provide invaluable information on the characteristics of victim-survivors and people who use

DFSV and the violence itself. ANROWS recommends that partnerships be developed between researchers and DFSV services and other services to explore ways to use new data sources to build the evidence base.

Data sharing and linkage

Continued efforts are needed to improve information sharing between services for ease of data collection and to encourage the consistent collection of information. There is evidence that data sharing has improved in some states and territories (McCulloch et al., 2020). However, further work is needed at both a jurisdictional and national level. Improved data sharing between government and researchers can help strengthen research and policy analysis (see "Research in Practice" below).

ANROWS encourages researchers to build relationships and develop research projects with agencies other than those engaging directly with victim-survivors and people who use DFSV to access their data. ANROWS urges these agencies to be open to partnerships, while allowing researchers access to data where it is permissible by law, with consideration of ethical standards and human rights.

Ways of knowing

In this section we discuss working with the knowledge of experts by experience, listening to children when they are children, and valuing practitioners' expertise. As in the previous section, the considerations for implementation under each principle offer preliminary ideas when using these approaches. ANROWS recognises that understanding and using these ways of knowing is complex. While there is no simple solution or single guide, we recommend reading the referenced frameworks that more deeply explore the considerations for implementation.

RESEARCH IN PRACTICE

AIHW making better use of Medicare and PBS data[17]

The AIHW's National Integrated Health Service Information Analysis Asset (NIHSI AA) brings together Australian Government data both on Medicare services covered by the Medicare Benefits Schedule (MBS; such as general practitioner, specialist, pathology and diagnostic imaging services) and prescriptions supplied under the Pharmaceutical Benefits Scheme (PBS) with state and territory hospital and mortality data. This asset has led to new insights on people's interaction with the health system, otherwise not achievable with existing data on individual services; for example, recent analysis of NIHSI enhanced understanding of the hospital interaction profile for those who experience DFV (AIHW, 2021), those, those who are at risk of further hospital stays, and the identification of potential undisclosed cases of DFV in hospitals.

A new NIHSI project has been established to examine health service use among young people hospitalised for DFV (aged under 18 at first hospitalisation). It will examine hospitalisations, emergency department presentations, GP and medical imaging use, and deaths.

The NIHSI operates under strict governance principles which adhere to legislated confidentiality and privacy protections and AIHW's existing governance and secure data linkage arrangements. The enduring linked data asset is one example of how the Australian government and states and territories work together on an ongoing basis to share and link data for research and analysis.

17 Information for this case study was obtained through communication with AIHW staff.

Work with the knowledge of experts by experience

> … you come, and we give you – we take your story and then off you go there. Thanks. Pat on the shoulder. We use that to develop our – build our career pathway, but we'll leave you where you are. No. It doesn't work that way. It shouldn't work that way. (Focus group participant 15)

> … we're getting more and more knowledge like empirical knowledge and it's incredibly valuable but what we are lacking in that narrative is that lived experience knowledge and I see them as equitable … they both bring something entirely different to the narrative, and if we don't include them as equitable we are missing out on part of the story of how we address family and domestic violence and sexual violence. (Focus group participant 2)

People with lived experience of DFSV have valuable expertise to contribute to research. Victim-survivors' expertise needs to sit alongside empirical evidence to ensure a fairer distribution of power. Co-designed research "engages people with lived experience (victim-survivor co-researchers and lived experience researchers) in research or evaluation after the research questions have been determined or the funding received. People with lived experience are then involved in all stages of the research project from development to dissemination" (Lamb et al., 2023).

Co-designing research *with* victim-survivors aligns with the *Experts by Experience Framework* (Lamb et al., 2020) and *An Australian Framework for the Ethical Co-Production of Research and Evaluation with Victim Survivors of Domestic, Family and Sexual Violence* (Lamb et al., 2023). There are several victim-survivor advocate groups in Australia who work with researchers, government agencies and service providers to improve research, policy and practice. These include the Independent Collective of Survivors, the WEAVERs, Safe Steps Survivor Advocate Program and NOOR Survivor-Advocates. Some agencies have also established their own survivor advocate groups to advise them, such as Full Stop Australia and GenWest.

Benefits

Much of the knowledge we have about DFSV today has been sourced from victim-survivor testimony and contributions to research. People with lived experience of DFSV are usually highly motivated to participate in research as they want to realise the social change needed to end DFSV (Goodman et al., 2017). The specificity of individual experiences, the similarities in DFSV patterns and shared determination to end DFSV often makes working with lived experience an empowering, revelatory and enriching process for academic and lived experience co-researchers alike (Lamb et al., 2023; Wark, 2022).

Co-design can have multiple benefits. The benefits for research include having a more nuanced understanding of the issues, opportunities for important insights from people in communities affected by the research implications, and the implementation of research recommendations as these are grounded in real life experience. Benefits for victim-survivors include:

- a renewed sense of confidence and trust in their own capability
- receiving appropriate remuneration and value for their expertise
- upskilling
- increased power over the research process
- improved career pathways.

Considerations for implementation

ANROWS recognises that there is no single voice or experience for victim-survivors. Researchers must create co-design opportunities with victim-survivors with the most relevant lived experience and from different backgrounds. Research that recognises and responds to the unique characteristics of a particular form of violence or qualities of a community is ultimately more likely to reduce that form of violence, with positive outcomes for the specific community. Trauma-informed approaches as outlined in the *Experts by Experience Framework* (Lamb et al., 2020) should be followed to mitigate the risk of causing harm (Nonomura et al., 2020).

There are DFSV practitioners, policymakers and researchers who bring lived expertise to their roles; researchers need to

be mindful that some will choose not to disclose. Research needs to have comprehensive safeguards and social and emotional support, without being paternalistic, to ensure that everyone can feel safe and respected through the research process. Safety and wellbeing measures can include organisational and practitioner readiness, reflective practice, and comprehensive access to employee assistance programs (EAP), regular opportunities for debriefing and flexibility in working on DFSV projects.

RESEARCH IN PRACTICE

Illawarra Women's Health Centre: Women's Trauma Recovery Centre – model of care[18]

The Illawarra Women's Health Centre established the Women's Trauma Recovery Centre to overcome service system fragmentation and address the long-term impacts of trauma (Illawarra Women's Health Centre, n.d.). The Centre aims to provide integrated, comprehensive and long-term support to women that have experienced DFSV. The Centre is community led and was co-designed with women with lived expertise, as well as professional experts and service providers and is the first of its kind in Australia.

The process of experience-based co-design aimed to generate new knowledge for a model of care that could be applied to multiple settings. Women with diverse lived expertise helped to design the service in three ways:

- as members of the Centre's Consultative Working Group
- with 19 women with lived expertise who participated in in-depth interviews to identify what they needed from a recovery service
- with 24 women with lived expertise who participated in a survey to identify the Centre's principles and goals, and to identify the kinds of interventions the Centre should prioritise.

The model of care for the Centre that resulted from the co-design process is underpinned by eight guiding principles: Respect, Self-determination, Compassion, Integrity, Safety, Equity, Healing, and Community.

18 Information for this case study was taken from Cullen et al., 2021.

RESEARCH IN PRACTICE

AIHW engagement with WEAVERs (Women and their children who have Experienced Abuse and VIolEnce: Researchers and advisors) co-design team[19]

In 2022, DSS contracted the AIHW to deliver enhanced reporting of data on DFSV through a new web-based platform. To develop this, the AIHW drew on the expertise of people with lived experience of DFSV through the University of Melbourne's Safer Families WEAVERs co-design team. The WEAVERs group, established in 2016, comprises a diverse group of women who play a role in "weaving" lived experience into research and training at the University of Melbourne. The WEAVERS also act as co-researchers on a range of co-design projects.

The WEAVERs contribute to the AIHW's work by:

- providing expert advice into the AIHW's DFSV reporting, with suggestions on how to frame and organise a list of DFSV topics and identify topics that were missing, and then review the development of the AIHW's subsite (some WEAVERs participated in the user-testing phase of the subsite development and gave feedback on design, usability, and appropriateness of language and visual material)
- developing written contributions (or vignettes) for publication, advising on how best to use written contributions in AIHW reporting – such as suggesting topic areas that would be most relevant, the structure and format that would be most suitable, as well as providing high-level commentary to accompany the data
- reviewing and providing feedback on edited website content prior to publication.

The AIHW approach to working with the WEAVERs co-design team has aligned with the principles of their *Family Violence Experts by Experience Framework*, ensuring the process has been empowering, meaningful and respectful of the team's diverse skills and knowledge.

19 Information for this case study was obtained through communication with AIHW staff.

Listen to children when they are children

> I think it's really important to get the experiences of kids while they're still kids. Because one thing I've noticed, I mean obviously I, you could say I'm a child survivor because I grew up with it, but you reinterpret your own experience in a lot of your adult experiences. (Focus group participant 12)

> I think there's something to be said for some research that shows that children participating in research is actually not an inherently harmful thing … I think we actually need some research to show that it's possible and that it may even have healing outcomes or, you know, recovery outcomes for children. (Focus group participant 18)

It is critical to recognise children and young people as victims of DFV in their own right.

Benefits and challenges

Including the voices and opinions of children and young people in research *when* they are still children demonstrates respect and validation of their experiences and may help to improve their sense of power and agency (Ethical Research Involving Children [ERIC], 2019). It also helps to better design system responses and services to accommodate and appropriately respond to their needs.

Researchers may avoid engaging with children and young people for various reasons. They may believe it carries too high a risk of harm and/or retraumatisation. These concerns are shared by some service providers, who can be reluctant to assist in recruiting child participants and act as "gatekeepers" to recruitment (Robinson et al., 2023). If service providers don't help with recruitment, this can mean the research has only very small sample sizes. Children's voices are sometimes represented through engagement with their family members instead, which can reduce children's power and risk their views being misinterpreted.

Working with children and young people can take extra time and thought in gaining ethics approvals, which project timelines do not always allow for. Research with children and young people also requires specific knowledge and skills to engage appropriately, especially those who have experienced trauma.

Considerations for implementation

When including children's voices, stay true to the language they use and try not to interpret it through an adult lens. One way to do this is to adopt a critical youth studies approach when researching topics that engage with or directly affect children and young people (Best, 2007; Luguetti et al., 2023). This approach prioritises children and young people in the study design and data analysis. It creates opportunities for young people to identify issues of importance to them that can guide research questions (Best, 2007; Luguetti et al., 2023). It recognises that children hold a less powerful social position than adults, and that adult ways of knowing are held in higher esteem than young peoples'. Researchers must try to correct this imbalance through challenging their adult-centric worldview and critically self-reflecting throughout the research process (Best, 2007; Luguetti et al., 2023).

While guidance on doing DFSV research with children and young people has been developed by Ethical Research Involving Children (ERIC; 2019), the research sector would benefit from further guidance materials and training on good practice principles. This could help researchers to demonstrate to service providers that they have adequately considered and mitigated the risks. Where possible, funding agencies should offer flexibility in research project timeframes to complete ethics processes and recruit participants.

RESEARCH IN PRACTICE

Connecting the dots: Understanding the DFV experiences of children and young people with disability within and across sectors[20]

There is limited knowledge that captures the views of children with disability's views about DFV and what matters to them in service provision. To address this gap, researchers at Flinders University, the University of New South Wales and the University of South Australia designed a project to listen to children's voices.

The research project's aims included:

- improving understanding of the support and service needs, priorities and perspectives of children and young people with disability experiencing DFV
- determining steps to bring policy and practice into better alignment with children and young people's priorities.

The experiences and priorities of 36 children and young people with disability are included in the research. Twelve children and young people aged 8 to 24 were interviewed, as well as 14 family members or carers of children with disability. The researchers used accessible methods to engage with children such as games and sensory activities, and pictoral mapping. Interviews were short, to minimise impact and keep children focused, and did not explicitly ask about the violence the children had experienced. All children were asked if they would like a support person present and signed an easy-English consent form in addition to their parent's consent.

The researchers faced several challenges in recruiting children and in including the perspectives of children with high support needs and trauma experiences. Some support services expressed reluctance to recruit families due to staff shortages and concerns with the risks involved in retraumatising children. For those families who were invited to participate, some parents expressed hesitations and concerns about this sensitive subject. Some parents supported their children's participation after being involved in the research themselves. Some parents felt their children's disability support needs would make participation difficult, or their children were too traumatised by their DFV experiences to participate safely, but shared information about their context carefully and ethically. Others refused participation because of these concerns. The researchers originally hoped to also recruit children from remote communities; however, this proved impossible due to COVID-19 travel restrictions and shortages in service-provider staff available to support children during and following interviews.

This case study demonstrates the importance of:

- generous timeframes to recruit and to build trust with families and service providers
- engagement with providers in multiple service contexts (DFSV, disability, youth) in all stages of the research
- tailored trauma-informed interview methods and materials for children and families.

20 Information from this case study is sourced from Robinson et al., 2022 and Robinson et al., 2023.

Value practitioners' expertise

Engaging practitioners who work in primary prevention, early intervention, response, and healing is vital when undertaking high-quality research. However, there are often resourcing constraints that prohibit or limit practitioners' involvement.

Benefits

Practitioners' knowledge about prevention, response and healing is important to include in the design phase of research, as well as when collecting data. They can offer important insights into measurable education, client and service outcomes, and potential challenges in recruitment and data collection.

Practitioners with experience in trauma- and DFSV-informed care can help to create a safe and empowering space for participants. Practitioners who work with people who use DFSV are skilled at handling their attempts to manipulate, hide or minimise their responsibility. Practitioners can help frame research questions for perpetrators in a way that avoids potential collusion and can assist with interviewing and/or data collection. This can be critical to achieving the best possible research outcomes. Practitioners engaged as research participants bring a critical lens to how services operate and opportunities for improvement.

Engaging in research can have benefits for frontline services too, by helping to develop research skills, as well as data collection and monitoring processes within services.

Considerations for implementation

ANROWS encourages researchers who partner with service organisations to provide training on conducting research and evaluations to practitioners interested in building their knowledge.

Government departments should consider including more money in frontline services' funding agreements to participate in research projects. This can help to foster an environment that prioritises continuous evidence building across sectors. Alternatively, remuneration should be built into research project budgets for research partners or advisors:

a) as a reflection of their value in the process

b) to prevent additional workload pressures and stress.

When frontline services are resourced to be involved in research, managers and practice leaders should encourage opportunities that involve practitioners.

RESEARCH IN PRACTICE

Service system responses and culturally designed practice frameworks to address the needs of Aboriginal and Torres Strait Islander children exposed to DFV[21]

The Queensland Aboriginal and Torres Strait Islander Child Protection Peak (QATSICPP) identified a need for more research that listened to Aboriginal and Torres Strait Islander community voices in determining effective child wellbeing service responses to DFV.

This action research project was led by Aboriginal and Torres Strait Islander staff at QATSICPP with the support of non-Indigenous academics. Aboriginal and Torres Strait Islander community-based practitioners from eight locations in Queensland were funded to undertake 2 hours of research per week for the year-long project as part of their roles. In some locations, one community-based researcher was employed, and, in others, both a male and female community-based researcher was employed.

The community-based researchers' role in the project included recruiting participants, facilitating yarning circles, analysing data and contributing to writing the research report. Community-based researchers decided on the best methods of engaging with their communities depending on the context (e.g. phone or face-to-face, and individual or group format). These researchers reported that their involvement in the project helped to build their research skills and that the methods used by the project allowed a safe and healing space for communities.

The findings of the research informed the development of a practice framework for working with Aboriginal and Torres Strait Islander children affected by DFV.

21 The content from this case study is drawn from Morgan et al., 2023.

Implementation and monitoring of the ANRA

ANROWS will undertake a phased approach to implementing the ANRA across its own work as well as across Australia. The implementation phases include:

- funding ANRA priority research
- nationwide awareness and adoption
- building key partnerships
- expanding the ANRA beyond the DFSV sector.

Phase 1: Funding ANRA priority research

Launch

It starts right here at ANROWS.

An important first step in implementing the ANRA is for ANROWS to embed the ANRA across the organisation. We do this by using the ANRA research priorities to determine which research we conduct and fund. ANROWS will use the ways of working to guide how we conduct our commissioned and in-house research.

Our commitment

- Use our role as national leaders in research on violence against women to steward the implementation of the ANRA.

One of the ANRA research priorities will be the theme for each of ANROWS's future grants rounds. Grant applicants will be expected to identify a research aim and questions that speak to the identified priority.

In the guidance provided about applying for an ANROWS grant, we strongly encourage applicants to:

- involve people with lived experience throughout the research process, starting from the research design phase
- form partnerships with people from the communities that they are researching and/or DFSV service organisations to undertake research
- appropriately remunerate people with lived experience, community-based researchers and DFSV service organisations for their time in project budgets, and/or provide opportunities for in-kind support
- make use of existing service data where possible.

ANROWS's commissioned grants are determined by an open competitive process assessed by panels of experts. Assessors will be asked to take the factors above into account when scoring applications. A person with lived experience of DFSV and a DFSV practitioner will sit on each of the panels.

Our actions

- Fund research aligned with ANRA priorities through our grants program.
- Support applicants in applying ANRA approaches.
- Develop a grant-approval process that champions lived experience, community partnerships, fair compensation and smart data use.

Phase 2: Nationwide awareness and adoption

Once ANROWS has embedded the ANRA across the organisation, we will work on the next phase – working with stakeholders to encourage them to use the ANRA to guide research on ending DFSV. This will include targeted resources to assist researchers, funding bodies (universities and philanthropic organisations), policymakers, service providers and practitioners, and survivor advocates in using the ANRA and applying the ways of knowing and ways of working. Recognising that ANROWS's 2021 Stakeholder survey revealed the previous ANRA was not easily applied by all stakeholders, we will ensure a targeted and tailored approach of this ANRA for our stakeholders.

Shared success

For the ANRA 2023–2028 to be successful, the whole research community needs to be on board and researchers and research participants need to have as positive an experience as possible.

Our commitment

- Use our resources to support the DFSV research community to embed the ANRA in their practice.

Our actions

- Understand and meet the support needs of research producers, funders and users.
- Provide tailored resources and learning opportunities.
- Advocate for the ANRA through influential channels, from media to policymakers.
- Promote the Register of Active Research (RAR) for a one-stop database of national research.

Phase 3: Building key partnerships

The third phase involves creating partnerships to conduct research in the priority areas.

Strength in numbers

Research partnerships allow the sharing of resources, knowledge and skills. Working together facilitates the sharing of specialisations, niches and focus areas to generate new evidence around the key priorities.

Our commitment

- Collaborate with research organisations, service providers, governments, business and peak bodies.

Our actions

- Engage in-house research partnerships.
- Facilitate the creation of research alliances.
- Collaborate with like-minded organisations to translate findings into action.

Phase 4: Expanding the ANRA beyond the DFSV sector

The fourth phase involves extending ANROWS's reach to encourage other organisations to use the ANRA to influence their research. Strategies may include: presenting the ANRA to Centres for Excellence addressing violence against women, working with Human Research Ethics Committees and journal editorial boards, working with ARC and NHRMC and their research priority processes.

The two assumptions we are testing during our fourth phase are that: 1) people want priorities for research; and 2) people will adopt the ways of working.

Reaching beyond

- Extend the use of the ANRA 2023–2028 within the nation's research institutions as they work on projects related to DFSV.

Our commitment

- **Collaborate with major actors and custodians in the national research community.**

Our actions

- Collaborate with:
  - journal editorial boards
  - Human Research Ethics Committees (HRECs)
  - Australian Research Council (ARC)
  - National Health and Medical Research Council (NHMRC).

Measuring the impact of the ANRA 2023–2028

The principles guiding the approach to measuring impact are as follows:

- Staged – start small, be selective as to measures and build up over time.
- Serve the team first – ensure measuring impact is feasible and meaningful for the team, and that it helps the team to understand and reflect on impact of the ANRA over time.
- Capacity building – build the capacity of the team to measure and understand impact.
- Clarity – ensure the approach provides clear direction for improving the ANRA.

- Honesty and integrity – commit to continuous improvement of the ANRA through reflecting on impact with honesty and integrity.

To measure impact, in the early stage of ANRA implementation (year 2024 to year 2025) ANROWS will collect data in line with three monitoring questions, which correspond to the intended short-term outcomes set out in the ANRA's theory of change. They are:

a) To what extent is ANROWS embedding the ANRA research priorities and ways of working in their grants rounds?

b) To what extent is ANROWS following a comprehensive approach to using the ANRA across the organisation?

c) To what extent is ANROWS using the ANRA to form strategic partnerships to conduct research?

To measure impact in the longer term, ANROWS will also include the following monitoring question:

a) Who else is using the ANRA and how are they using it?

Strategic reflection will be conducted in 6-monthly cycles and underpinned by the monitoring questions.

Register of Active Research (RAR)

ANROWS manages a Register of Active Research (RAR) for all DFSV research currently underway in Australia. The RAR assists in minimising the unnecessary duplication of research by allowing researchers and funding bodies to search for research underway on particular topics, populations or categories.

The RAR supports the purpose of research agendas by helping to ensure efficient and effective use of limited resources and was previously used to monitor the impact of the ANRA 2020–2022. The RAR also enables collaboration between researchers with similar areas of focus.

The current RAR will be updated to ensure the research priorities and the ways of working and ways of knowing are being monitored for all DFSV Australian research.

Author contributions

The Director of Research and Evaluation at ANROWS, Jane Lloyd, led all aspects of the priority setting process, in partnership with survivor advocate and lived experience expert, Lula Dembele.

Jane led the research design and provided strategic oversight. She co-facilitated the ANRA focus groups and co-design workings and led the analysis of the focus group findings and the writing of the research priorities and ways of working.

Lula contributed to the ethics approval processes, advised and supported the recruitment of participants to the focus groups and co-design workshops for the ANRA. She co-facilitated the ANRA focus groups and co-design workshops, contributed to the analysis of the focus group findings and the writing of the research priorities and ways of working.

ANROWS Senior Research Officer, Cassandra Dawes, oversaw the ethical processes in the development of the ANRA, developed the coding framework and coded reports for the review of ANROWS funded research, managed the invitations to focus group participants, identified potential candidates with relevant expertise to be part of the ANRA co-design workshop, led components of the thematic analysis for the focus groups and contributed to writing the ANRA.

ANROWS Research Officer, Sarah Jane, coordinated the organisation of the focus groups and co-design workshops, including the development of run sheets and presentations, contributed to the coding and thematic analysis of the focus groups, identified potential candidates with relevant expertise to be part of the co-design workshop, identified stakeholders to review the draft, coded the reports for the review of ANROWS funded research and undertook the analysis, and contributed to writing the ANRA.

Evaluation and Impact Specialist, Lucy Macmillan, provided specialist advice on the co-design and evaluation processes, contributed to the facilitation and provided input into multiple drafts of the ANRA.

Definitions

Domestic, family and sexual violence (DFSV)

The ANRA uses the National Plan's definition of DFSV:

> Domestic violence refers to any behaviour within a past or current intimate relationship (including dates) that causes physical, sexual or psychological harm.
>
> Family violence is a broader term that captures violence perpetrated by parents (and guardians) against children, between other family members and in family-like settings.
>
> Sexual violence refers to sexual activity that happens where consent is not freely given or obtained, is withdrawn, or the person is unable to consent due to their age or other factors. It also occurs any time a person is forced, coerced or manipulated into any sexual/sexualised activity. Sexual violence can be non-physical and include unwanted sexualised comments, intrusive sexualised questions or sexual harassment (DSS, 2022, p. 37).

Domestic, family and sexual violence services

Any agencies who work directly with victim-survivors and people who use DFSV in preventing and/or responding to, and/or recovering from, gender-based violence. These could include specialist services for victim-survivors and people who use DFSV, as well as the police, courts, health and mental health services.

LGBTQI+ people

Includes lesbian, gay, bisexual, trans and gender diverse, non-binary, queer/questioning, intersex, asexual and sexuality diverse people (ACON, 2019; ABS, 2021).

Men and women

The terms "men" and "women" includes those who self-identify as a man or a woman respectively.

Migrants

Refers to people who have moved to Australia temporarily or permanently, as well as second and third-generation migrants.

While the ANRA has used the term "migrant" to cover all kinds of migration experiences, researchers should not treat migrant peoples as a homogenous group.

Older women

For the purposes of the ANRA we have defined older women as women aged 65 years and over.

People who use DFSV

ANROWS encourages the use of the term "people who use DFSV" rather than "perpetrator". Adopting language that recognises people who use DFSV as people first, models appropriate and respectful labelling while seeking to ensure accountability for those using DFSV.

The ANRA refers to "people who use DFSV" rather than "men who use violence against women and children" to be inclusive of LGBTQI+ people, including non-binary people. While the ANRA mostly uses non-gendered terminology, it is critical to recognise that women are much more likely than men to be victims of domestic and sexual violence (ABS, 2023).

People with disability	Includes people whose everyday activities are restricted by any limitation or impairment likely to last for at least 6 months (ABS, 2019a). This includes mental illness and neurodiversity only where they interfere with everyday functioning and result in a psychosocial disability.
People at risk of marginalisation	In the ANRA, this serves as an umbrella term for a variety of groups, including Aboriginal and Torres Strait Islander peoples, migrants and refugees, LGBTQI+ people, children and young people, people with disability and older people.
Young people	States and territories use various age ranges to define "young people", but the ANRA sets it at 16 to 24 years in line with the definition that is used in the National Community Attitudes towards Violence against Women Survey (NCAS; Coumarelos et al., 2023). However, ANROWS recognises that definitions of young people vary across state and territory legislation.

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APPENDIX A:

Co-design methods

Co-design is a framework that brings together interested parties/stakeholders in the design, decision-making and dissemination of the research (Goodman et al., 2017). Co-design with DFSV victims and survivors allows for collaboration with the people that have been most impacted by DFSV and respects lived expertise as equal to empirical research (Lamb et al., 2023; Wark, 2022).

ANROWS's co-design process followed the Hasso Plattner method developed by the Institute of Design at Stanford (Institute of Design at Stanford, 2010).

Inclusion criteria

Inclusion criteria for participants taking part in the co-design workshop were:

- a person with lived experience of DFSV
- a DFSV service provider
- a DFSV researcher.

Heterosexual males with lived experience of DFSV and male perpetrators of DFSV were excluded from participating.

Recruitment

The lived experience participants for the co-design workshops were purposively sampled from the network of the co-lead investigator, Lula Dembele. Some people with lived experience who participated in the focus groups were invited to contribute to the co-design workshop. ANROWS drew on our established networks to purposively recruit researchers and service providers/practitioners.

We aimed to recruit a maximum of 16 people, with equal representation across the three inclusion groups. When determining who to invite to participate, we considered a number of factors:

- diverse community representation
- diverse expertise, including different disciplines, settings, types of violence and National Plan domains
- representation from different states and territories.

An email was sent to each potential participant in co-design inviting them to participate in two online workshops. The email included a participant information sheet and consent form.

Participants

Five participants attended the first co-design workshop, and nine participants attended the second workshop. Two people participated in both workshops.

Four participants identified as having lived expertise of DFSV. Five participants were academics with expertise in DFSV primary prevention, early intervention and/or responses for women and children. Three participants worked in DFSV services for victim-survivors and/or people who use DFSV. Some participants belonged to Aboriginal and Torres Strait Islander communities and LGBTQI+ communities; there was also participation from people with disability and older women. Participants were based in five Australian states and territories: New South Wales, South Australia, Tasmania, Victoria, and Western Australia.

Data collection

ANROWS held the workshops over Microsoft Teams in March and June 2023. Each workshop lasted 90 minutes to 2.5 hours and was co-facilitated by the research team. The research team presented the co-design participants in each session with the findings from the review of evidence and the preliminary themes that emerged from the focus groups. The question that guided the first workshop discussion was, "What research do we need to do now to end violence against women?"

The research team developed a list of research priorities based on the discussion in the first workshop and mind maps that were created during the discussion. The draft priorities were presented to participants in the second workshop and the participants were asked to build on these priorities through discussion and consensus.

In the second workshop, ANROWS also presented participants with a list of preferred ways of undertaking research, identified by focus group participants. Co-design participants were asked about how they thought these ways of working could be embedded in research.

Lived experience and self-employed co-design participants who participated in both workshops were offered $250 in recognition of their time. Those who participated in one workshop were offered $125.

Data analysis

The transcripts of the workshop discussions were analysed by the research team to identify emerging research priorities and areas of consensus. After the second workshop, one of the lead researchers (JL) analysed the second workshop transcript and identified key themes from the discussion. Members of the research team then drafted the research priorities and ways of working for inclusion in the ANRA. These priorities and ways of working were discussed among the members of the research team and amendments were made based on consensus during these discussions.

The draft research priorities and ways of working were sent to the co-design participants for feedback. ANROWS also offered those who were invited but unable to attend the co-design workshops the opportunity to review the research priorities and ways of working. These suggestions were discussed among the research team and the content of some of the priorities and ways of working were modified based on team consensus. The priorities were also amended following advice from government representatives who participated in the online forum in July 2023 (see "Methodology" section).

ANROWS reviewed the research priorities following the release of the Aboriginal and Torres Strait Islander Action Plan (DSS, 2023), released in August 2023, to ensure they were aligned.

Ethics

This project received ethics approval in February 2023 from the University of New South Wales Human Research Ethics Committee (HC220719).

Limitations

The demographics of participants in the co-design workshops have not been further disaggregated because the research team did not seek ethics approval to collect this information from them or to publish this information.

APPENDIX B:

Suggested research topics

The suggested topics listed under each research priority were raised through the ANRA's design (focus groups and co-design workshops) and consultation process. They are provided as a starting point to prompt researchers' thinking. This list is designed to be comprehensive but not prescriptive.

The topics have been structured under the nine research priority areas. Where appropriate, the table includes outcomes from the National Plan (NP) and the Aboriginal and Torres Strait Islander Action Plan (ATSIAP) that align to the topics.

Theme: Systems and society

Priority area: Structural inequity

Area	Research goal/purpose	Example research topics
Service and system improvements NP outcome 1 NP outcome 2 ATSIAP reform area 3	To identify ways to increase easy access to, and benefits from, services for people who are at risk of marginalisation.	• Developing or improving policies that prevent people at risk of marginalisation from experiencing DFSV by delivering improved health, social and economic benefits. • Structural inequities within services that impact people at risk of marginalisation.
	To identify ways to reduce inequalities in how people who use DFSV are held accountable depending on their demographic or socio-economic background.	• Ways to reduce structural inequities that prevent people from being held accountable for violent behaviour (keeping in line with principle 9 of the MARAM Framework[1]).
	To identify and evaluate ways that create space for diverse community voices to be more powerful in influencing service practice and policy in relation to DFSV.	• Evaluations of capacity building initiatives for people at risk of marginalisation.
	To identify ways to create more gender equitable and safer workplaces for people at risk of marginalisation.	• Evaluations of the effectiveness of workplace policies and processes that aim to prevent violence and harassment against groups at risk of marginalisation.

1 See Family Safety Victoria, 2018.

Priority area: Gender relations, gender norms and attitudes

Area	Research goal/purpose	Example research topics
Attitudes and understandings NP outcome 3 NP outcome 4 NP outcome 6	To understand how to disrupt beliefs that disrespect women and promote male supremacy.	• The factors, conditions and relations that move men and boys towards and away from gender equality. • The motivations for, and participation in, backlash and other forms of resistance to gender equality from the perspective of boys and men. • The influence and popularity of the "manosphere" on Australian boys and men. This includes what drives boys and men to seek out these spaces online. • How new forms of media (such as social media platforms and influencers) affect people's views on DFSV. • The ways that men's disaffection with corporatism, neoliberalism and capitalism can be used to turn them against gender equality, and how men's disaffection with capitalism can be used to encourage their support for gender equality. • The ways in which different communities of men engage with masculinity and the impacts of socially dominant forms of masculinity on men who experience discrimination and oppression (such as racism, homophobia, transphobia, ableism).
	To celebrate and strengthen positive, respectful forms of masculinity in Australian society.	• How non-violent forms of masculinity are expressed and valued in Australian society. • How boys and men define and identify with their masculinity. • The factors that motivate men and boys to become supporters of gender equality and/or efforts towards prevention of violence against women.
Drivers and risk factors NP outcome 3 NP outcome 5		• The use of large language models (e.g. ChatGPT) to generate web content, and whether this is perpetuating gendered stereotypes that contribute to DFSV.

Area	Research goal/purpose	Example research topics
Piloting new interventions **NP outcome 2** **NP outcome 3** **NP outcome 4** **NP outcome 5**	To define, establish and promote programs that strengthen positive and respectful forms of masculinity.	• Interventions that: - effectively engage boys and men in non-violent forms of masculinity - use boys' and men's online engagement as a tool for positive change (e.g. online education).
	To define, establish and promote programs that reduce the risk of boys and men engaging in violent or abusive behaviour.	• Interventions that: - prevent boys and men from participating in the "manosphere" - effectively respond to online misogyny and harmful forms of masculinity - teach boys and men to manage feelings of shame in constructive ways.
Service and system improvements **NP outcome 2**	To understand how to engage people from a range of backgrounds more effectively in primary prevention interventions.	• Primary prevention interventions that effectively engage: - Aboriginal and Torres Strait Islander peoples - children and young people - migrants and refugees - LGBTQI+ people - people with disability - older people - people living in remote and regional areas. • How primary prevention programs interact with and support early intervention, response and healing interventions and services.

Area	Research goal/purpose	Example research topics
Power: prompt questions NP outcome 3 NP outcome 6		• How do boys and men who oppose gender equality understand individual power and control? • What power do peer and social groups have in influencing respectful, non-violent behaviour towards women and children? • What power do peer and social groups have in improving shared power between people in intimate partnerships (especially men and women)? • How do people make protective choices while in abusive relationships due to their position of relative power? • What works, and for whom, to reduce men and boys' sense of entitlement to positions of power and domination over women, including through the use of abuse and violence?

Priority area: Trauma- and DFSV-informed, victim-centred systems

Area	Research goal/purpose	Example research topics
Attitudes and understandings NP outcome 2 ATSIAP reform area 2	To better understand how victim-centred DFSV services should operate.	• Victim-survivors' understandings of justice. • Victim-survivors' understandings of safety.
Prevalence, characteristics and impacts of violence NP outcome 1 NP outcome 5	To increase knowledge about the characteristics and impacts of DFSV on victim-survivors to inform how this can influence their service engagement.	• The long-term mental health impacts of DFSV on an adult and children victim-survivors. • The short- and long-term impacts of DFSV and abuse against LGBTQI+ people.

Area	Research goal/purpose	Example research topics
	To understand how DFSV service decisions can influence prevalence and characteristics of violence.	• Misidentification of the predominant aggressor, including: - rates of misidentification - impacts of misidentification on women from different backgrounds. • Short- and long-term impacts for children who have been court ordered to spend time with a parent that has perpetrated DFV.

Area	Research goal/purpose	Example research topics
Piloting new interventions NP outcome 1 NP outcome 2 NP outcome 4 NP outcome 6 ATSIAP reform area 2	To develop victim-centered pathways to seek justice and prevent re-traumatisation and shaming. To identify ways to limit the ability of people who use DFSV to exploit services and systems to perpetrate further abuse.	• DFSV service responses that are co-designed with victim-survivors and flexible to their diverse needs. • DFSV service responses (including law enforcement) that are shame sensitive. • Interventions to identify and decrease the use of services and products as tools of DFSV perpetration. **Justice system** • Trials of alternative justice programs that are developed and co-designed by people with lived expertise. This could include the value of juries in sexual violence criminal cases, restorative justice models, non-custodial interventions, and other alternatives to the criminal justice system. **Child protection system** • Interventions for people who threaten to abuse, or abuse, children in the home. **Commercial industries** • Interventions to improve DFSV identification and response by the gambling industry. • Interventions to improve the alcohol industry's role in DFSV prevention and response. **Housing system** • Trialling new forms of housing and alternative accommodation options for women and children leaving violence, as well as alternative housing for people using violence to ensure women and children can remain in their home when they prefer. • The use of technology in and around the home for deterrence of perpetration.

Area	Research goal/purpose	Example research topics
	To create space for communities at risk of marginalisation to be central in designing their own DFSV interventions and evaluating their effectiveness.	• Piloting and evaluating tailored DFSV early intervention, response and healing interventions that are community led[2] with: - Aboriginal and Torres Strait Islander peoples - children and young people - migrants and refugees - LGBTQI+ people - people with disability - older people - people living in remote and regional areas - people who are homeless or at risk of homelessness - people with complex trauma - people in ethically non-monogamous relationships - sex workers - women who have been incarcerated - AIDS and HIV-positive people - people with drug and alcohol use issues.

2 "Community-led" research refers to research selected and undertaken by people who identify as being part of the population that researchers seek to understand and who are impacted by the research topics.

Area	Research goal/purpose	Example research topics
Service and system improvements NP outcome 2 NP outcome 6 ATSIAP reform area 2 ATSIAP reform area 3	To demonstrate service efficacy in improving the safety and wellbeing of victim-survivors and reducing the use of DFSV.	• Improving wider service system responses to victims-survivors and people who use DFSV. Settings include health, housing, banking and finance, utilities and insurance, gambling, regulators (e.g. Australian Securities and Investments Commission [ASIC]), social security and drug and alcohol services. • Embedded trauma and DFSV-informed approaches. **Justice system** • Improvements in police processes for identifying the predominant aggressor in DFV. • Duties of care towards victim-survivors and the effectiveness of support services available in court and police settings. **Child protection system** • Whole-of-family interventions following DFSV. • The different requirements on protective parents in state-based child protection agencies compared to the family court, and how these differences impact victim-survivors and children. **Housing system** • Improving current housing and alternative accommodation service delivery and availability for women and children leaving violence. **Commercial industries** • How the processes, practices and products of the private (commercial) industries can be improved to prevent and respond to DFSV, including the gambling, alcohol, and commercialised sport industries.

Area	Research goal/purpose	Example research topics
	To ensure consistent and competent trauma and DFSV-informed workplaces (workforce, policies and procedures, and work culture).	• Effective training for staff in trauma and DFSV informed practice. • Measuring the competency of the workforce to respond to victims of domestic, family and sexual violence, particularly in the justice system. • Improving workplace cultures to reduce all forms of discrimination and provide better support people who are victim-survivors.
	To demonstrate cost effectiveness in DFSV service delivery.	• Economic and social cost-benefit analyses of DFSV service responses and policies.
Power: prompt questions NP outcome 1 ATSIAP reform area 3		• Are DFSV interventions aiming to overcome structural power imbalances in how they are delivered, and if so, are they effective? • How does structural power manifest in legal processes, especially family court matters, to mirror or replicate dynamics of DV for victim-survivors? • How effective is holistic DFSV service provision across services in increasing the power that victim-survivors have to make safe choices for themselves and their families? • What are the policies and processes in DFSV services (including the justice system) that give people who use DFSV the ability to reinforce their power and control over victim-survivors? What changes can be made to policies and processes to mitigate these effects? • How can DFSV service providers address power imbalances between workers and victim-survivors?

Theme: Populations in focus

Priority area: Aboriginal and Torres Strait Islander peoples

Area	Research goal/purpose	Example research topics
Attitudes and understandings NP outcome 3 ATSIAP reform area 2	To understand how to disrupt misunderstandings about Aboriginal and Torres Strait Islander peoples and DFSV.	• Ways to address misunderstandings about what it means to be a strong First Nations man.
Prevalence, characteristics and impacts of violence NP outcome 4 NP outcome 6 CTG 13 ATSIAP reform area 1 ATSIAP reform area 4 ATSIAP reform area 5	To increase knowledge about the long-term impacts of DFSV on Aboriginal and Torres Strait Islander peoples.	• The long-term impacts of service disclosure of DFSV on Aboriginal and Torres Strait Islander peoples.
	To increase knowledge about the prevalence of DFSV against Aboriginal and Torres Strait Islander women and children and the characteristics of people who use violence against them.	• Better national data on DFSV against Aboriginal and Torres Strait Islander women, particularly for measuring progress in Closing the Gap (CTG) Target 13. • Prevalence rates of DFSV against Aboriginal and Torres Strait Islander women and children perpetrated by non-Indigenous men.
Piloting new interventions ATSIAP reform area 2	To identify culturally appropriate and relevant interventions that help Aboriginal and Torres Strait Islander peoples to heal and recover from DFSV.	• Effective models for Indigenous healing and recovery from trauma for both victim-survivors and people who use DFSV.
Service and system improvements NP outcome 1 NP outcome 2 ATSIAP reform area 2 ATSIAP reform area 3	To identify culturally appropriate and sensitive police responses that understands the dynamics of "response violence".	• More effective, respectful and culturally sensitive policing of DFSV in First Nations communities, including interactions with young people. • How to prevent misidentification of Aboriginal and Torres Strait Islander women as police-assessed perpetrators. • The implementation of outcomes from inquiries, coronial inquiries and parliamentary investigations related to DFSV in Aboriginal and Torres Strait Islander communities.

Area	Research goal/purpose	Example research topics
Power: prompt questions		• How do current DFSV policies and practices limit the power and control of Aboriginal and Torres Strait Islander peoples? • How does colonisation continue to influence the power of Aboriginal and Torres Strait Islander peoples to make choices for themselves and their children following DFSV?

Priority area: Children and young people

Area	Research goal/purpose	Example research topics
Attitudes and understandings NP outcome 2 NP outcome 5 ATSIAP reform area 1	To identify what influences children and young people's adoption of gender equal attitudes, their ability to identify DFSV and ability to practice healthy relationships.	• The short- and long-term effects of respectful relationships education on young people, including the effects of explicitly discussing coercive behaviours and issues of consent in relationships. • Children and young people's perceptions about gender identity and its relationship to the dynamics of DFSV. • Children and young people's perceptions about the language used to describe DFSV.
	To understand how attitudes about gender equality and DFSV change over time and, when abusive behaviours develop, to help to identify where intervention points may be most effective.	• Longitudinal research on the development and evolution of children and young people's attitudes about gender equality and DFSV and the development of abusive behaviours.
Prevalence, characteristics and impacts of violence NP outcome 5	To increase knowledge about the impacts of DFSV on children and young people.	• The impacts of coercive control in family relationships on children and young people.

Area	Research goal/purpose	Example research topics
Piloting new interventions **NP outcome 2** **NP outcome 5**	To define, establish and promote programs that centre children's needs in breaking intergenerational patterns of DFSV.	• Healing and trauma-recovery programs for children and young people experiencing DFSV and understanding how and what works to decrease the likelihood of use of DFSV in adulthood and repeat victimisation. • Child-centred trauma and violence informed approaches to early intervention for children and young people, including options that involve whole families.
	To define, establish and promote programs that increase the safety and wellbeing of children and young people at risk of experiencing DFSV.	• Parenting programs for all new parents (especially first-time fathers in heterosexual relationships) around shared care, attachment and development; parental obligations to provide a safe, secure and consistent family environment; how to seek help when you are struggling with parenting or behaviours in the home.
	To define, establish and promote programs that improve children and young people's understandings of healthy relationships and DFSV.	• School-based programs that aim to improve young people's understanding of what a healthy relationship looks like, emotional literacy and how to communicate respectfully and effectively about feelings and emotions in close/intimate relationships and improve understanding and confidence in checking consent.
Service improvements **NP outcome 1** **NP outcome 2** **NP outcome 5**	To identify what is needed to have a national education system that consistent and effectively teaches and models healthy and respectful relationships.	• Cross-jurisdictional comparisons of how consent is taught in schools and barriers and enablers to program implementation.
	To understand how schools can improve the safety and wellbeing of children and young people experiencing DFSV.	• Improving how schools and services for children identify DSFV and supportively intervene in ways that respects children's views while ensuring their safety and wellbeing.
Power: prompt questions **NP outcome 5**		• How does children's lack of power, agency and authority in relationships with adults impact their experiences of DFSV?

Priority area: People who use DFSV

Area	Research goal/purpose	Example research topics
Prevalence, characteristics and impacts of violence NP outcome 4 ATSIAP reform area 4	To identify who uses DFSV, how, why and against whom, to target interventions that end their perpetration.	• Improved national data and research on the prevalence of perpetration including who is perpetrating DFSV against women and children, how and why, and the characteristics of perpetration. • Understanding how boys' and men's online lives can be used as a tool to perpetrate DFSV (e.g. technology-facilitated abuse, stalking and harassment, image-based abuse, doxxing, threatening violence). • How legislation, court policies and processes are used by people who use DFSV to inflict additional harm on victim-survivors. • The factors that have enabled people to stop using violence against women and children and their experiences.
Drivers and risk factors NP outcome 2 NP outcome 4	To understand how and when to intervene at the individual, community and societal levels to reduce the likelihood of people using DFSV.	• The individual, community and societal-level risk factors that lead people to use violence against women and children and effective means to mitigate these. • The drivers of DFSV against women and children by people from diverse population groups. • The role of colonisation in contributing to perpetration of DFSV in non-Indigenous communities.

Area	Research goal/purpose	Example research topics
Piloting new interventions NP outcome 2 NP outcome 4	To define, establish and promote effective early intervention programs for people at risk of using DFSV.	• Effective early intervention programs for people who use DFSV. These programs should include identifying and responding to risk factors and problematic behaviour for people who use DFSV before their behaviour is violent, including offering healing and support pathways for childhood trauma and opportunities for deterrence across general services. • Developing alternatives to intervention orders as an accountability mechanism for young people who use family violence or dating violence.
	To define, establish and promote trauma-informed programs for people who use DFSV that increase their sense of personal responsibility for violent behaviours.	• Strengths-based and trauma-informed models of working with people who use DFSV. • Interventions that are effective in harnessing shame as a motivating force for personal growth and change.
Service and system improvements NP outcome 2 NP outcome 4 ATSIAP reform area 3	To identify ways for the justice system to more effectively hold people who use DFSV accountable.	• How to improve the criminal justice response to people who use DFSV so they are appropriately identified and prosecuted and any non-custodial interventions are promptly implemented in accordance with the views of the victim-survivor. • How inequitable socio-political structures influence who is held accountable for violent behaviour and the extent to which they are held accountable.

Area	Research goal/purpose	Example research topics
Power: prompt questions NP outcome 3 NP outcome 4		• What do people who use DFSV think about power and its role in their violent behaviour? • What is the relationship between individuals who use DFSV and systems of power that can either enable or disrupt perpetration? • How do we create a sense of safety/security in relationships without the need for power over the other person? • How do we deconstruct the relationship between violence as a means to achieving and maintaining power over another person? • How do inequitable socio-political structures influence who is held accountable for violent behaviour and the extent to which they are held accountable?

Theme: Types and patterns of violence

Priority area: Sexual violence

Area	Research goal/purpose	Example research topics
Attitudes and understandings NP outcome 1 NP outcome 3	To better understand the influence of laws on Australian society's attitudes towards SV.	• How definitions of sexual violence used across states and territories vary and correlate with community understanding of the crime/s, as well as arrest, charging, and conviction rates and sentencing.
	To better understand the role of media on attitudes towards women and SV.	• The impact of pornography on people's attitudes towards sexual violence, with a particular focus on young people. • How pornography and media portrayals of sexual violence contribute to harmful sexual behaviours. • Whether there have been improvements over time in the number of news media reports that use language that blame victim-survivors and/or excuse the behaviour of people who use sexual violence.
Prevalence, characteristics and impacts of violence	To obtain accurate data on prevalence of sexual violence including: • settings in which sexual violence occurs • characteristics/types of sexual violence • the characteristics of people who are victims of sexual violence.	• More detail on the different settings where sexual violence occurs and the characteristics of violence in different settings, such as workplaces, public spaces, community organisations, in the home, mental health institutions, disability group homes, government settings (such as hospitals, nursing homes, universities, technology-facilitated and online spaces etc.). • Sexual violence towards people with disability, including reproductive violence (including forced/coerced abortion, contraception and sterilisation) enforced by institutions.
Piloting new interventions NP outcome 2	To define, establish and promote education interventions about sexual violence that are tailored to diverse audiences.	• Effective education programs about obtaining sexual consent that are tailored to diverse audiences.

Area	Research goal/purpose	Example research topics
Service and system improvements **NP outcome 1** **NP outcome 4** **NP outcome 6**	To identify ways to reduce re-traumatisation and improve support for victim-survivors of sexual violence in the criminal justice system.	• Victim-survivors' views on the benefits and disadvantages of legal representation and levels of satisfaction with their representation, and what satisfactory and supportive legal representation looks like and how it functions. • How to improve the conduct of legal professionals and court officers towards victim-survivors during trials. • Effective models of support for victim-survivors during trials. • How to improve police attitudes towards sexual violence as a crime and treatment of complainants.
	To better understand how cases of sexual violence are reported, investigated and prosecuted in the criminal justice system.	• Comparison of trial outcomes for victim-survivors with legal representation and those who are unrepresented. • The rates of reporting, investigation and sentencing outcomes of other serious (assault and aggravated) crimes compared to sexually violent crimes and, if they are lower for sexual violence, understanding why there are differences and how to mitigate these. • The characteristics of victim-survivors who report sexual violence and enablers to reporting.
	To identify ways to improve media portrayals of sexual violence.	• Comparing how sexual violence victims from diverse demographic and socio-economic backgrounds are portrayed in the media.
Power: prompt questions **NP outcome 1** **NP outcome 3**		• How do media representations of women as sexual objects reinforce attitudes about male power and dominance (individual and structural)? • How do we effectively teach people to negotiate power and control in sexual relationships? • How do people use sexual coercion and sexual violence to maintain power in their relationships?

Priority area: Coercive control

Area	Research goal/purpose	Example research topics
Attitudes and understandings NP outcome 3	To better understand the Australian community's knowledge about coercive control.	• The Australian public's understanding of what coercive control is (including the spectrum of non-physical violent behaviours that it consists of).
Prevalence, characteristics and impacts of violence ATSIAP reform area 3	To identify accurate prevalence rates of coercive control.	• National prevalence rates of coercive control, including in the context of family violence. • The demographics of those being charged with coercive control.
Drivers and risk factors	To understand the risk factors and motivations for using coercive control.	• The drivers of coercive control in domestic and family violence, and whether the drivers differ based on: - the demographics and backgrounds of victim-survivors and people who use DFSV - the relationship between the victim-survivor and the person using coercive control.
Piloting new interventions NP outcome 4	To define, establish and promote interventions that are effective in reducing coercive and controlling behaviours.	• What works to challenge and reduce patterns of coercive and controlling behaviours.
	To define, establish and promote interventions that provide effective support to people who have been victims of coercive control.	• Effective models for responding to victims of coercively controlling behaviour.
Service and system improvements	To identify the short- and long-term impacts that DFSV service responses to coercive control have on victim-survivors.	• The effects of criminalising coercive control on Aboriginal and Torres Strait Islander women, as well as migrant and refugee women and how to address these.

Area	Research goal/purpose	Example research topics
Power: prompt questions NP outcome 1 NP outcome 4 ATSIAP reform area 3		• What sense of individual power do people experience when they use violence, coercive and controlling behaviours or abuse positions of power? • What beliefs do people hold about who holds power in relationships and how this influences abuse, coercive control and violent behaviours? • What are the impacts of how police are using their position of structural and individual power in enforcing new legislation that criminalises coercive control?

Priority area: Economic abuse

Area	Research goal/purpose	Example research topics
Prevalence, characteristics and impacts of violence	To identify the range of behaviours involved in economic abuse and the characteristics of people who use economic abuse.	• The characteristics of people who use economic abuse against their partners, former partners and/or family members. • The prevalence and characteristics of dowry abuse in different cultural communities. • The tactics used to perpetrate economic abuse against older women and whether economic abuse co-occurs with other forms of DFV.
	To understand the impacts of economic abuse on victim-survivors and their families.	• The long-term impacts of economic abuse on women's wellbeing, particularly their economic wellbeing. • The impacts of dowry abuse in different cultural communities.
Drivers and risk factors	To better understand the relationship between financial insecurity and economic abuse.	• The role of financial insecurity in contributing to the use of economic abuse.

Area	Research goal/purpose	Example research topics
Piloting new interventions	To define, establish and promote interventions that detect and prevent economic abuse.	• Technology interventions that help to detect and prevent economic abuse.
	To define, establish and promote interventions that engage people who use economic abuse and that increase their sense of personal responsibility for abusive behaviours.	• Alternatives to criminalisation for people who use economic abuse in cases where the victim-survivor does not want criminal charges laid. • Interventions for people who use DFSV that specifically address behaviours involved in economic abuse.
Service and system improvements	To identify ways to improve how governments and systems prevent and respond to economic abuse, particularly those at high risk of economic marginalisation.	• Improving the role of the private sector (e.g. banks and financial services, utility companies, gambling and real estate agencies) in detecting and preventing economic abuse. • How and when victim-survivors access domestic violence support payments from Centrelink after leaving violence and their adequacy. • Evaluations of existing mechanisms by governments and services to prevent and respond to economic abuse. • Improving older women's economic security following economic abuse.
Power: prompt questions		• What are the ways that people use economic abuse to maintain power in their relationships and how do we mitigate these? • How do the gender norms of men as the breadwinners and controllers of household finances reinforce attitudes about male power and dominance? • What power do families and communities have in identifying and responding to economic abuse against older women, and how can we harness this? • What power do families and communities have in identifying and responding to dowry abuse, and how can we harness this?

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AUSTRALIA'S NATIONAL RESEARCH ORGANISATION FOR WOMEN'S SAFETY

to Reduce Violence against Women & their Children