

Family Violence in CALD Communities:

Understanding and responding



About inTouch

A state-wide family violence organisation dedicated to the development and implementation of a number of culturally sensitive and holistic models of service provision to both victims and perpetrators of family violence.

For women and children from diverse cultural backgrounds to be safe and free from family violence

<http://www.intouch.org.au>



About inTouch

Languages

The **inTouch** client services and legal centre teams between them can offer services in 26 community languages (refer right) and in English, of course. **inTouch** was able to assist in 6 out of the 7 most requested languages other than English.

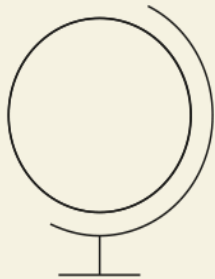
In 2016/17, our clients registered 73 preferred languages and 90 in the previous year.

1. English - 173
2. Vietnamese - 144
3. Arabic - 104
4. Mandarin - 74
5. Hindi - 73
6. Persian (excluding Dari) - 51
7. Punjabi - 50
8. Dari - 49

- | | | | |
|-----|-----------------|-----|-------------------|
| 1. | Arabic | 14. | Nuer |
| 2. | Juba Arabic | 15. | Punjabi |
| 3. | Bosnian | 16. | Russian |
| 4. | Cantonese | 17. | Serbian |
| 5. | Croatian | 18. | Sinhalese |
| 6. | Dari | 19. | Somali |
| 7. | Dinka | 20. | Spanish |
| 8. | Farsi | 21. | Tamil |
| 9. | Greek | 22. | Thai |
| 10. | Hindi | 23. | Turkish |
| 11. | Italian | 24. | Vietnamese |
| 12. | Macedonian | 25. | Urdu |
| 13. | Mandarin | | |

About inTouch

2016 Highlights



**WE SUPPORTED WOMEN
FROM 98 COUNTRIES**

**THESE WOMEN WERE
ACCOMPANIED BY 882
CHILDREN**



WE SUPPORTED 1000+ WOMEN

1000+

**38 WOMEN PARTICIPATED IN
THE THERAPEUTIC GROUP
SESSIONS**



**500 HEALTH
PROFESSIONALS
INCLUDING MATERNAL
CHILD HEALTH NURSES
WERE TRAINED
IN DANDENONG
AS PART OF THE
HEALTH JUSTICE
PARTNERSHIP
PROJECT**



**431 WOMEN RECEIVED
IMMIGRATION SUPPORT**



**312 WOMEN WERE
SUPPORTED AT
DANDENONG,
HEIDELBERG
AND SUNSHINE
MAGISTRATES
COURT**



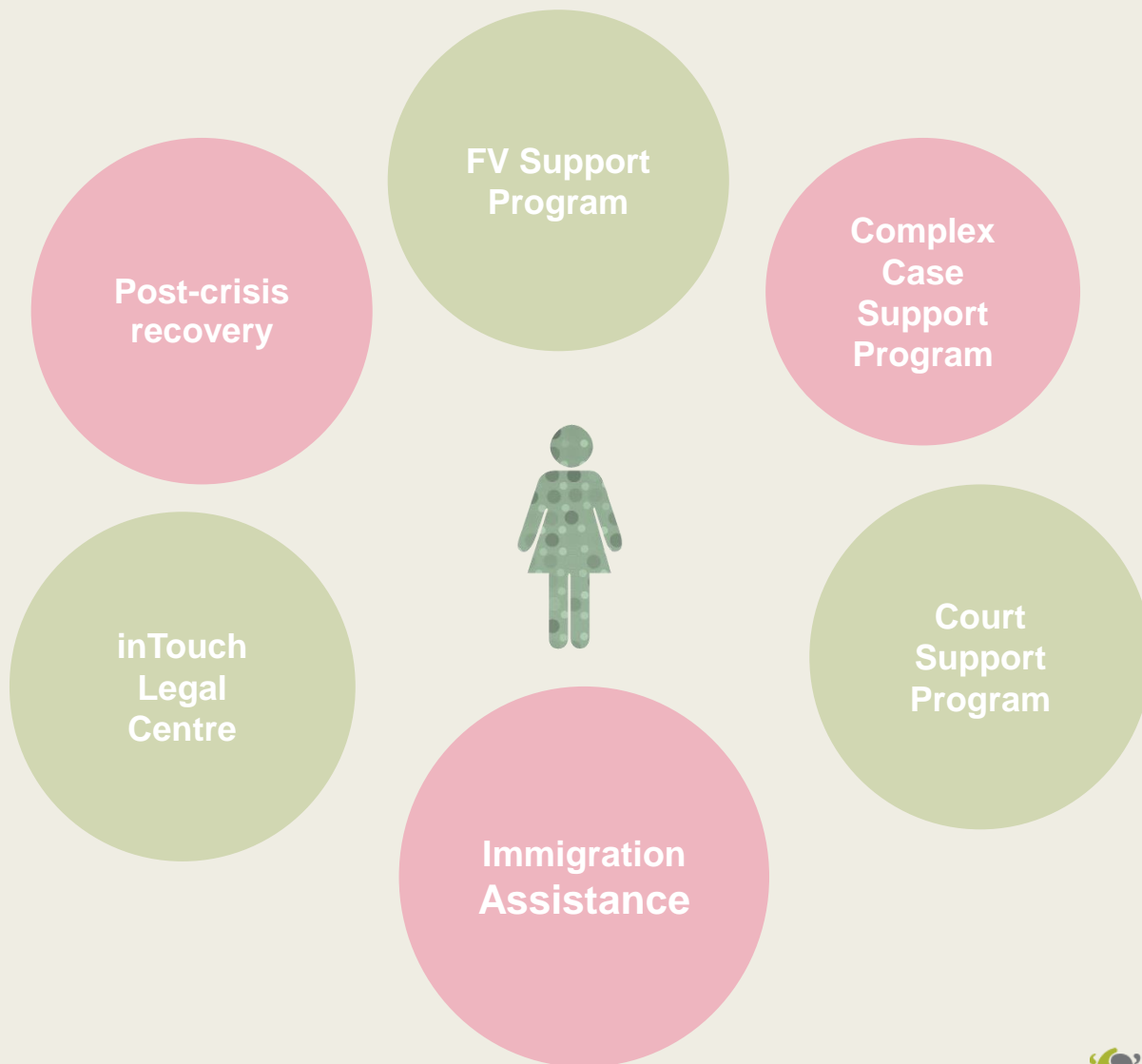
**12 CHILDREN BETWEEN
THE AGES OF SEVEN AND
13 YEARS PARTICIPATED
IN THE THERAPEUTIC
CHILDREN'S HOLIDAY
PROGRAM**



**100 COMMUNITY
FRONTLINE WORKERS
HAVE PARTICIPATED IN
THE MULTICULTURAL
DV ALERT WORKSHOPS**



Crisis Intervention



Risk and Protective Factors

DVRCV FACTS ON FAMILY VIOLENCE 2017

Red flags

RISK FACTORS: Victims who are experiencing any of the following are at increased risk of being killed or almost killed.



High Risk Factors

- Pregnancy & 12 months after birth
- Time of separation
- Recent denies of custody or access to children
- Threats to kill, incl. children & others
- Stalking
- Breached restraint orders
- Heavy substance abuse
- Severe mental health issues
- Possession and/or use of weapon
- Strangling/choking

For information and training visit TheLookout.org.au

LOOKOUT
Your voice for safety, respect and justice

Domestic Violence Resource Centre Victoria
Preventing violence, promoting respect
www.dvrcv.org.au

VICTORIA
State Government

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Recognising Family Violence

Indicators of Family Violence

- Appears nervous, ashamed , and evasive
- Partner does most of the talking
- Unconvincing explanation of injuries
- Have recently separated or divorced
- Experiences of tiredness, body aches
- Experiences anxiety, panic attacks, stress , depression
- Have chronic headaches, asthma or vague aches and pains
- Have gynaecological problems, chronic pelvic pain, or suffered miscarriages
- Visible signs of bruises
- Frequent attendance at surgery or emergency departments
- Self harm

Recognising Family Violence

The Importance of Language & Approach

- Risk is a subjective concept
- Explain reason for questioning
- Ask about behaviors in simple language. Naming types of abuse can assist clients to respond better (for eg: instead of saying is there violence at home?)
- Be aware that CALD women may not understand terms such as control, threat, severity, intimidation
- Such terms may not be clearly translated or interpreted

Recognising Family Violence

- Asking questions
- Looking for facts /observations

Recognising Family Violence

Practical Questions When Assessing

- *I am a little concerned about you because.....*
- *I would like to ask you some questions about how things are at home. Is that okay with you?*

Once the client has indicated a willingness to talk, you can ask the prompting questions. These are quite direct, because research indicates that victims are more likely to accurately answer direct questions.

Linking clinical observation to further assessment might result in more disclosures, some examples :

- *You seem more anxious and nervous today. Is everything all right at home?*
- *You look a bit tired today, did you sleep well last night ? Is there something that is worrying you ?*
- *Your baby looks a bit unsettled, did anything happen recently?*

Terminology

- Migrant
- Refugee
- Asylum seeker
- Culturally and linguistically diverse (CALD)

Summary - Barriers

- Understanding of family violence
- Limited Awareness of System
- Language
- Social Isolation
- Visa Dependence Issues
- pre migration, and resettlement experience
- Fear of Authority
- Complex Family Dynamics

Barrier – Knowing Violence

- Some cultures may normalise gender inequality and reinforce male supremacy through various traditions and customs
- Some cultures may not differentiate between “abuse” and “discipline” making it okay to use violence for disciplinary actions
- People from CALD backgrounds may not recognise other forms of abuse . Verbal, emotional, social, financial , sexual, isolation, threat and intimidation may not be recognised as violence and might have been accepted in the country of origin
- Witnessing various forms of violence, including sexual and gender-based violence, in their home country or transition country could make CALD women (especially refugees and asylum seekers) more tolerant and resilient.

Barrier – Visa Dependency Issues

- Women on dependent spouse visa are especially at risk, supports are limited
- Student visas, working visas or tourist visas are especially at risk if they are dependent on their spouse for their visa status, as these are not covered under the Family Violence Provisions
- Distrustful of authorities because of deportation concerns
- Fear that reporting family violence will compromise their future residency in Australia or their entitlements

***‘My husband always told me he is going to send me back.
I was living in fear that the immigration officer would come
to my house and send me back.’***

Barrier – Migration Experience

- Pre-migration history and prior issues of torture and trauma might impact on their taking action
- Loss and grief issues and the migration journey and experience
- Changed gender roles might create further escalation of violence
- Women hold themselves accountable to maintain the family structure and often blame themselves if failing to do so

“In the refuge, I was told that I was safe and there was no reason to worry. But they didn’t understand that I was grieving again because this was yet another loss for me. My family was the only thing I brought with me from my home country that I could call my own – and I couldn’t keep my family together.”

Barrier – Fear of Authority

- Clients might have fear of authorities such as the Police and courts because of home country experiences
- Fears can be further fuelled by abusive partner
- Accessing protection through legal recourse/support through agencies could be the last option
- Mediation through family members, faith and community leaders might often be the first and preferred step

‘I was new in this country. I was very scared of the police...’



Responding to Disclosures

- I understand that this is a difficult time for you.
- It must be difficult to talk about family violence . Many women report feeling ashamed and embarrassed about what is happening
- I am aware that you may be feeling anxious, scared or concerned . I'd like to be able to support you
- It sounds like you are having a really rough time. It must be hard for you. Is there anyone who is supporting you?
- Sometimes women/people feel that it is your fault. The violence is the other person's responsibility not yours
- My role is to ensure that you receive information and support that will help you keep safe.

Considerations When Working with Interpreters

- The interpreter may have attitudes and perceptions of violence, including sexual violence which may directly or indirectly impact the communication
- Interpreter may know client
- Interpreter may feel shock or experience severe distress from content
- Interpreter may experience vicarious trauma, or have a reaction to the subject matter
- Interpreter may need support and debriefing following the session

Remember When Engaging

- Understand:
 - A person's cultural identity as a basis for understanding how they see self, kinship and relations with the broader community
 - Internalisation of stereotypes; how spirituality, community, kinship and family influence gender roles, identity and violence
 - Experiences of torture, trauma, displacement, loss, racism and discrimination
- Accommodate both collective and individual experiences of identity and respect specific spiritual, emotional, psychological and religious traditions
- Be aware of the impact of your own language, cultural beliefs and values
- Understand the individuals' barriers to seeking support
- Provide physical and emotional environments in which people with differing cultural and social backgrounds feel safe and supported.

1800 RESPECT: Window of opportunity: Cultural understanding

Responding: Strength Based Approach

The woman subjected to family violence is recognised as:

- The expert on their own life
- Capable of making their own decisions
- Having their own resources

The worker does not have responsibility to solve the problem:

- Empower rather than over power

Assisting Victims with Safety Planning

- Plan where to go for trusted support (e.g. friend/neighbour)
- Awareness of unsafe places at home
- Keep a diary in a safe place recording incidences / breaches
- Pack and hide a bag with money, key cards, house keys, clothes, essential documents, phone number)
- Make a safe evacuation plan known by family
- *Advise neighbors* to call police if they hear violence

Making Referrals

- Respect her decisions about when/what supports she wants
- Identify referral needs
- Explain your limitations
- Explain the role and services of referral point
- Maintain knowledge of available resources

Making Referrals

- inTouch
- Safe Steps: Family Violence Response Centre
- Family Violence Outreach services (Berry Street, EDVOS, Women's Health West, WAYSS)
- Police
- 1800 RESPECT
- Men's Referral Service
- Referral options : <http://www.dvrcv.org.au>

Importance of Self Care

- Normal amount of stress is normal
- Too much can impact on your body, your thoughts and feelings and your behaviour
- Consider ways to incorporate activities that manage your stress levels

About inTouch Referrals

- The initial referral gets assessed by intake to establish eligibility as well as to conduct CRAF (common risk assessment framework)
- Crisis intervention, emotional Support and safety planning is provided at intake level
- If eligible, case comes to allocation (every Tuesday)
- Case gets assigned to worker from the closest background from within a team of 14 migrant bi-cultural case workers
- Assigned case worker makes contact with the client and provides support
- Intervention usually up to 12 weeks
- Great emphasis on accessing safety and protection, emotional and cultural support, referral and resources