

DIVERSITY AND INTERSECTIONALITY FRAMEWORK

VISION

The needs of all Victorians will be met by designing for diversity and intersectionality at the outset in Family Violence and Social Services reform. This will mean that prevention initiatives, services and justice responses are accessible, inclusive, non-discriminatory and responsive to diverse groups. Mainstream responsiveness will be complemented by targeted services specifically designed to meet the needs of diverse communities including: Aboriginal* communities; diverse cultural, linguistic and faith communities; people with a disability; people experiencing mental health issues; older people; lesbian, gay, bisexual, trans and gender diverse and intersex (LGBTI) people; women in or exiting prison or forensic institutions; people who work in the sex industry; people living in regional, remote and rural communities; male victims; and young people (12 - 25 years of age). This will reduce the risk, occurrence and impact of family violence for these groups.

DIVERSITY

The Victorian population is growing, and our diversity is increasing as people express multiple forms of identity and belonging. Diverse groups are not homogenous but are unique and diverse in their own right. Family violence is not part of any culture or unique to any specific community. Due to individual and structural power imbalances, that often manifest as discrimination and stigma, these groups are at increased risk of experiencing family violence and sexual assault, and being repeat victims; and face additional barriers to service access and disclosure. We also acknowledge that many individuals expressing diverse identities do not feel that they are part of a 'community' and this social isolation can exacerbate the risk and impact of experiencing family violence.

When working together, diverse communities represent a majority voice in the Victorian community. Policies, systems, services and workforces that are designed for diversity and inclusion will benefit all. We acknowledge that many existing systems and structures have been created in a way that privileges a few groups and marginalises many others. These systems need to be fundamentally redesigned from the ground-up, with marginalised groups at the heart of this transformation, so that equitable outcomes are achieved for everyone.

INTERSECTIONALITY

Dominant social and cultural norms around gender place women at primary risk of experiencing family violence and the majority of perpetrators are men. In addition, diverse communities often contend with intersectional and compounding risks when experiencing family violence. Intersectionality describes how diversity characteristics such as gender, ethnicity and cultural background, language; socio-economic status, disability, sexual orientation, religion, age, geographic location or visa status can interact on multiple levels to compound risks, create overlapping forms of discrimination and amplify service barriers. These factors can also exacerbate social and economic disadvantage and housing insecurity, and increase risk of social isolation.

Taking an intersectional approach means looking beyond a person's individual identities and focusing on the points of intersection that their multiple identities create. These points of intersection will alter the way family violence is experienced by individuals, and in many instances will increase risk and amplify barriers to disclosure and service access. Intersectional risk can be shaped by a range of factors. These include the impact of colonisation; structural and individual racism, discrimination, misunderstanding and ignorance (including trauma associated with migration or pre-migration experiences); institutional or interpersonal prejudice, including faith-based prejudice; homophobia, biphobia, transphobia and intersex phobia; distrust or fear of mainstream services, police and child protection; ineligibility for, or invisibility to, specialist or mainstream services; social isolation or exclusion; economic disadvantage; educational disengagement; prolonged experiences of discrimination and disempowerment; childhood trauma and trauma associated with past experiences of family violence or sexual assault.

A diverse and inclusive service system will embed the following principles:

ACCESSIBLE

Services are accessible and equitable. They are welcoming, physically accessible, age, gender and sexuality friendly, culturally sensitive and responsive, support communication and language needs, and are tailored to respond to individual, complex and intersectional needs.

RIGHTS & RESPECT

Services are driven by a human rights based and empathic approach. Everyone has the right to feel welcome, heard and supported. Aboriginal Victorians are respected as First Peoples. The right to self-determination is respected.

INCLUSIVE & NON-DISCRIMINATORY

Attitudes, behaviours, policies and systems enable full and equal participation. Workforces reflect the diversity of the community and are equipped with the tools and service capacity to respond to diversity. Inclusive and appropriate support is available through both specialist and mainstream services.

EMPOWERMENT

Services empower individuals as active participants in planning and decision making processes. This occurs at an individual level, and an organisational level through involvement and visibility in governance and the workforce.

RESPONSIVE

Programs, services and funding models are flexible and responsive to diversity, including strengths-based and family-inclusive approaches. Therapeutic, healing or dispute resolution methods, under-pinned by victim rights / safety and perpetrator accountability, are facilitated to allow victims to maintain relationships without recourse to court.

PARTNERSHIPS

Community and cross-sector partnerships are used to integrate specialist and mainstream services, harness strengths and expertise, promote multiple service entry points and respond to the intersecting needs of diverse communities.

PREVENTION

Prevention strategies reflect diversity, and are tailored to respond to diverse and intersectional experiences of family violence. Strategies should strengthen community capacity to build and maintain healthy and respectful relationships.

EVALUATION

Services are equitable, honest, transparent and accountable. Services are reflective and use ongoing monitoring, user feedback and evaluation to measure and improve responsiveness to diversity.

CONTEXT

The Royal Commission into Family Violence (RCFV) found that **people from diverse backgrounds or communities:**

are at greater risk of family violence or experience it at higher rates

face multiple and intersecting barriers to reporting, seeking and obtaining help

do not receive culturally appropriate and responsive service through mainstream and universal services

have limited access to targeted and specific services, and limited or inaccessible services in remote and regional areas

need police, courts, family violence services and perpetrator interventions to understand additional risk factors and barriers experienced

need accessible, inclusive and non-discriminatory victim centred services and justice systems, that are responsive to all

experience violence through different relationships including from intimate partners, adolescent or adult children, siblings, parents, extended family and kinship networks, carers and same-sex intimate partners and **experience distinct forms of family violence** including: economic or financial abuse; social, spiritual or cultural abuse; sexual assault towards both children and adults; technology-facilitated abuse; social exclusion; fear of ostracism from cultural, faith, peer or local communities; fears about who will care for them or threats to withdraw care or institutionalise; financial, physical or social reliance on perpetrators; threats to 'out' them; community pressure to stay in violent relationships; forced and early marriage; dowry-related abuse; and female genital mutilation; with research further highlighting human trafficking and threats related to immigration status, child custody or fear for the safety of families in home countries; and disability based violence such as controlling access to medication, mobility or communication.

