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Employment White Paper Submission

Summary

Wesnet, the national peak body for women's specialist domestic and family violence (DFV) services, draws attention to the unique characteristics of the specialist DFV workforce. These workers represent some of the most precariously employed and most under-recognised in Australia. Typically these services rely on fragmented funding from multiple sources. Skills and expertise are inconsistently recognised and are not necessarily reflected in remuneration levels, and employers - whose employees range in number from only a handful upwards - are limited in their ability to attract and retain workers due to insufficient funding. Wesnet requests that this sector be recognised in the White Paper.

Terms of reference

This submission refers predominantly to the terms of reference:

- future of work and the implications of structural change - care economy, and
- pay equity and equal opportunities for women.

Who we are

With almost 350 eligible members across Australia, Wesnet represents a range of specialist women's organisations and individuals including domestic and family violence services, women's refuges, shelters, safe houses and information/referral services. At Wesnet we hear daily the struggles our members face in undertaking their critical work.

Wesnet is a not-for-profit organisation that was established by women working in the domestic and family violence (DFV) sector as the peak body for women's specialist DFV services. We receive no government funding for this purpose, operating on the basis of modest membership fees and some philanthropic support.

As the national peak body we represent our members on a range of national advisory groups and committees, and we make submissions on important issues such as coercive control and

sector funding. We also provide direct relief to women and children, including through our Safe Connections program which provides safe phones to women and children escaping violence.

Purpose of submission

Wesnet submits to the Government that workforce issues in the domestic and family violence sector be considered and addressed in the Employment White Paper (the White Paper). The resolution of these issues is needed to enable the Government to meet its ambitious election promise of 500 new workers in the sector and to better support the sector with the current challenges undermining efforts to keep women and children safe. As an almost exclusively female workforce, the treatment of this sector is fundamental to ensuring women have equal opportunities and equal pay.

Characteristics of specialist DFV services

While a variety of different organisations in Australia provide services to victim-survivors of violence, women's specialist services are unique. Our services are designed by women, for women, built on feminist and social justice principles. Non-specialist crisis services might help keep women and children safe in the short term - and they have a role to play - but they are just a short-term band aid solution. Women's specialist services not only save women's lives by giving them a place to go, away from violent men, but they provide tools for living, and the skills and ongoing support to keep them safe over their lifetime.

In the domestic and family violence sector, women's specialist services are core to helping women and children who are experiencing and escaping violence, as well as stopping violence before it starts. Wesnet members include women's refuges, outreach services, legal and court advocacy services, face-to-face counselling services, primary prevention, research and policy, information and referral services, housing support, after-hours emergency response, and crisis response lines.

Most services provide multiple types of services, and many provide programs tailored to specific community groups such as First Nations, migrants and refugees, and LGBTQIA+. Women's specialist services are often both the first and last call for women escaping violence, and are central to effecting long-lasting change.

Over the last fifty years, specialist women's services have been established in response to the need for comprehensive and trauma-informed support. There is evidence of the superior efficacy of specialist services, and the provision of domestic and family violence services by specialist services is preferred internationally (AWAVA 2017, Bates et al 2018). The [Handbook for National Action Plans on Violence against Women](#) (UN Women 2012), for example, notes that 'specialist crisis services responding to victims/survivors of violence against women should be run by independent and experienced women's nongovernmental organizations providing gender-specific, empowering and comprehensive support to women survivors of violence, based on feminist principles'. The [final report of the expert group meeting](#) on good practices in combating and eliminating violence against women found that 'good practice in the provision of support, therefore, requires a well-resourced specialist sector and training and capacity-building'.

The workforce

Women working in specialist DFV services include support workers, managers, administration officers, case workers, receptionists, project officers, counsellors, psychologists, communications officers, advocates, child carers, researchers, lawyers, art therapists, accountants, property managers and tenancy support workers. Domestic and family violence workers are among the nation's most essential workers in terms of saving and rebuilding the lives of women and children, and yet they are also among the most precariously undervalued—and there are not enough of them.

Specialist staff are trained to understand trauma and address the multiple and complex needs of victim-survivors to assist clients navigate complex systems such as child protection, police, courts, immigration and income support. While many staff have tertiary and other qualifications, much of the specialist work they have to learn on-the-job as there is very little in the way of specialist education for this sector. While the work can be very rewarding, it can also carry unique risks, such as physical risk from perpetrators and the emotional risk of trauma or re-traumatisation (many women workers are themselves victim-survivors).

There is currently a significant gap in national data and research with respect to the specialist DFV services workforce. While Wesnet carries out an annual member survey, this is aimed largely at membership services, is answered by management, and has not had the capacity to yield longitudinal results regarding workforce characteristics in any detail. In contrast, the [Victorian specialist family violence workforce census](#) (Family Safety Victoria 2021) is aimed directly at informing state-wide workforce strategy. The results of the Victorian census indicate, for example, that:

- Roles held within the specialist family violence response workforce were highly varied in terms of working hours and contract conditions, and over half also worked additional unpaid hours at least 'sometimes'.
- While the specialist family violence response workforce had completed training across a range of topic areas, overall confidence in their level of training and experience was moderate.
- Many within this workforce had experienced stress due to high workload.
- Four-in-ten workers reported that they had plans to leave their current role in the next 12 months, relating mostly to career prospects and lack of advancement opportunities, and stress or other negative influences on their health and wellbeing.

Challenges

In a recent survey of Wesnet members, the overwhelming majority identified 'managing workloads' and 'attracting staff' as their biggest workforce challenges. It is no accident that these sat alongside 'insufficient funding' and 'uncertain funding' as the dominant financial challenges. Not a single member nominated 'staff underperformance' as a concern. Domestic and family violence service workers are skilled and dedicated, but chronically undervalued by the community they support.

We understand that the sector is not unique in some of its workforce challenges and that it shares characteristics with other female dominated professions dedicated to caring and upholding human dignity. We stand with aged care workers, disability workers, early childhood and health care workers in seeking improved recognition and better working conditions.

We are, however, also different in many respects. The specialist women's DFV sector is, without exception, not-for-profit. While some of our members operate as a specialist unit within a generalist organisation, most of our member organisations are dedicated to assisting victim-survivors of gender-based violence. Regardless, they are all reliant on government funding, with limited supplementation by fundraising and philanthropic efforts. While 100 per cent of our members receive state/territory government funding, it is important to note that over half also reported receiving federal government funding.

One of the big barriers to addressing workforce issues in the sector is the prevailing view that these services are solely a matter for state/territory governments. Most services rely on a mixture of funding streams which are often short-term and uncertain. Unlike within some of the other caring sectors, there is no national workforce strategy and no funded peak body to ensure cohesive and co-ordinated approaches to build workforce capacity or capability. There are no recognised national standards, accreditation or quality assurance mechanisms, creating incorrect perceptions about a lack of professionalism within the sector. Some states do some of these functions well including data collection, standards development and activity-based costings but some do nothing and, nationally, efforts are not formally coordinated beyond state borders and information sharing relies significantly on informal networks and sector goodwill.

Wesnet, as the national peak body and with its bird's-eye view across jurisdictions, would be ideally placed to advise Government on evidence-based approaches that have been proven to work well, along with inherent risks in others. Wesnet, along with the sister national peak body for sexual violence, the National Association of Services Against Sexual Violence (NASASV), were funded as peak bodies in the 1990s but have not received peak-body funding since the Howard government defunded them in 1996-97.

Wesnet is appreciative that the new National Plan to End Violence Against Women and Children recognises the central role of specialist workers. This is welcome but, to be successful, must be supported by a standalone national workforce strategy and national infrastructure. The Plan raises, again and again, the need for standards, quality assurance and best practice guidelines, but does not offer solutions in terms of how these can be managed nationally. Wesnet is ideally placed, with its national reach, existing networks and standing within the sector, to provide advice to government on these issues and - with support - to fulfil these functions.

Recommendations

Funding

1. The funding of DFV services needs to be reviewed as a matter of urgency, and specialist DFV services must be preferenced over generalist services. Long-term

interventions by women's specialist services support people to heal, restore, rebuild and experience well-being. Funding must be adequate and predictable, to enable services to be safely and fairly staffed. Nationwide mechanisms need to be put in place to enable government recognition of the true cost of service delivery to ensure services can provide salaries that recognise the value of staff and the complexity of working in specialist domestic violence services.

Industrial relations and the DFV sector

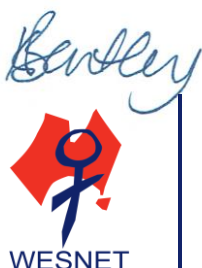
2. The situation of workers in the DFV sector shares some characteristics with other sectors in the care economy, but is also different. The federal workplace relations system should not abandon these workers as purely the responsibility of state-based arrangements. The Care and Community Sector Expert Panel should have a member with national expertise in the DFV sector, and particularly with respect to specialist DFV services (such as Wesnet). The dedicated research unit should also aim to provide support with respect to the DFV sector, as part of addressing low wages and challenging workplace conditions faced by the broader care sector, and the Fair Work Commission should recognise 'specialist women's domestic and family violence' as a listed industry.

Information and data

3. More nationwide information is needed about the workforce in specialist DFV services. A national census - similar to the Victorian specialist family violence workforce census - should be undertaken at regular intervals. This could be the responsibility of the new DFV Commissioner - or Wesnet as the national peak body - but must be funded to ensure a sufficiently high level of rigour and adequate resourcing for its implementation.

National infrastructure

4. There needs to be a national workforce strategy and a funded peak body to ensure cohesive and co-ordinated approaches to building workforce capacity and capability. Recognised national standards, accreditation and quality assurance mechanisms need to be developed to properly articulate - and modulate - the level of professionalism within the sector and to assist in fair and adequate wage-setting processes. Wesnet is ideally placed to advise Government on evidence-based approaches that have been proven to work well.



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References

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