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## National Strategy for the Care and Support Economy

### Summary

WESNET, the national peak body for women's specialist domestic and family violence (DFV) services, draws attention to the absence of the DFV sector in the Strategy, along with 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.

The absence of the DFV sector in the Strategy compromises the Government's ability to achieve its vision for a 'sustainable and productive care and support economy that delivers quality care and support with decent jobs'. DFV services are a significant component of the care and support economy and, while the National Plan to End Violence Against Women and Children acknowledges some relevant issues, it has a limited focus on the role of the Commonwealth in workforce or capacity development. It is difficult to envisage nationally consistent and entrenched quality and productivity gains without well articulated and executed Commonwealth leadership.

### 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.

## Goal 1: Quality care and support

Domestic and family violence specialist services are an essential component of the care and support economy, providing care and support to substantial numbers of women, children, families and the community.

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'.

## Goal 2: Decent jobs

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 under-valued—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.

### Goal 3: Productive and sustainable

In last year's 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 biggest 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 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.

*Bentley*



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*WESNET acknowledges and pays respects to the Traditional Owners and Custodians of all the lands on which we live and work.*

## References

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